1040		rtment of the Treasury—Internal Revenue S	□ //// \\ <b>■</b> ■	6 (99)	IRS Use Only-	—Do not v	write or	staple in this space.	
	For	the year Jan. 1-Dec. 31, 2006, or other tax year beg	inning , 20	06, ending	, 20		С	MB No. 1545-0074	
Label L	You	ur first name and initial	Last name			1	our s	ocial security numb	ber
nstructions on page 16.)  B E Jse the IRS	If a	joint return, spouse's first name and initial	Last name		56		Spous	e's social security n	umber
abel. Otherwise,	Но	Home address (number and street). If you have a P.O. box, see page 16. Apt. no.						ou <b>must</b> enter	
olease print R or type.	City	y, town or post office, state, and ZIP code. If	you have a foreign ad	dress, see pag	ge 16.	C	heckir	ng a box below will	not
Presidential C								your tax or refund.	
Election Campaign	<b>▶</b> C	heck here if you, or your spouse if filing	jointly, want \$3 to	go to this fu	nd (see page	16) ▶		You 🗌 Spous	se
	1 [	Single		4 Head	of household	(with qu	alifying	g person). (See page	e 17.) I
Filing Status	2	Married filing jointly (even if only one had income) the qualifying person is a child but not your dependen							t, enter
Check only	3	Married filing separately. Enter spous	se's SSN above		hild's name he				\
one box.		and full name here. ▶		Annual Contraction of the Contra	, ,	r) with o	depen ໂ	dent child (see pag Boxes checked	je 17)
Exemptions	6a b	Yourself. If someone can claim your Spouse	u as a dependent,	do not chec	k box 6a		. }	on 6a and 6b	
	C	Dependents:	(2) Dependent's	(3) De	pendent's (4)	if qualify	ring	No. of children on 6c who:	
	Ŭ	(1) First name Last name	social security num	ber   relation		d for child it (see page		<ul><li>lived with you _</li><li>did not live with</li></ul>	
		(1) The hame	1 1		you creu	IL (See paye	13)	you due to divorce	
f more than four								or separation (see page 20)	
dependents, see page 19.								Dependents on 6c not entered above	
								Add numbers on	$\neg$
	d	Total number of exemptions claimed						lines above	
noomo	7	Wages, salaries, tips, etc. Attach Form	, ,				7		
ncome	8a	Taxable interest. Attach Schedule B if				; ·	8a		
Attach Form(s) W-2 here. Also attach Forms W-2G and 099-R if tax vas withheld.	b	Tax-exempt interest. Do not include of		8b			9a		
	9a	Ordinary dividends. Attach Schedule B		   9b		i	9a		
	b 10	Qualified dividends (see page 23) .  Taxable refunds, credits, or offsets of s			no nogo (22)		10		
	11			,		• • •	11		
	12	Business income or (loss). Attach Sche					12		
	13	Capital gain or (loss). Attach Schedule	ACCORDANCE DATE OF STREET STREET STREET				13		
f you did not	14	Other gains or (losses). Attach Form 47					14		
get a W-2, see page 22.	15a	IRA distributions 15a	1	<b>b</b> Taxable am	ount (see page	25)	15b		
	16a	Pensions and annuities 16a		<b>b</b> Taxable am	ount (see page	25)	16b		
Enclose, but do not attach, any payment. Also, please use	17	Rental real estate, royalties, partnership					17		
	18	Farm income or (loss). Attach Schedule					18 19		
	19						20b		
	20a 21	Other income. List type and amount (s					21		
	22	Add the amounts in the far right column					22		
	23	Archer MSA deduction. Attach Form 8	353	23					
Adjusted	24	Certain business expenses of reservists, pe		'					
Gross		fee-basis government officials. Attach For	m 2106 or 2106-EZ	24					
ncome	25	Health savings account deduction. Atta	ch Form 8889	25					
	26	Moving expenses. Attach Form 3903		26					
	27	One-half of self-employment tax. Attach		27		+-			
	28	Self-employed SEP, SIMPLE, and qual		28		$\vdash$			
	29 30	Self-employed health insurance deduc Penalty on early withdrawal of savings		30		$\vdash$			
	31a	Alimony paid <b>b</b> Recipient's SSN ►		31a					
	32	IRA deduction (see page 31)		32					
	33	Student loan interest deduction (see page 4)		33					
	34	Jury duty pay you gave to your employ		34					
	35	Domestic production activities deduction.		35					
	36	Add lines 23 through 31a and 32 through					36		
	37	Subtract line 36 from line 22. This is yo	our adjusted gross	income .		. •	37		