Department
Of the
Treasury
Internal
Revenue
Service

# 2007 Estimated Data Line Counts Individual Income Tax Returns

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# Douglas H. Shulman

Commissioner

# Patricia H. McGuire

Acting Director, Research, Analysis and Statistics

### **David P. Paris**

Acting Director, Statistics of Income Division

## **David P. Paris**

Chief, Individual Statistics Branch This 2007 Statistics of Income (SOI) estimated data line counts indicates the estimates of frequencies of the entries on the lines of the forms and schedules filed with individual tax returns as shown on the 2007 Individual SOI Complete Report weighted file. It is based on returns filed in Processing Year 2008 that were sampled statistically and then weighted to estimate the entire 2007 Tax Year.

NOTE: The Economic Stimulus Act of 2008 contained a special provision that allowed certain low-income individuals to file a federal income tax return in order to be eligible to receive an economic stimulus payment. These individuals who would not ordinarily have a legal requirement to file a federal income tax return had to show on their returns at least \$3,000 of qualifying income (defined as wages, self-employment income, Social Security income, Railroad Retirement benefits, certain Veterans Affairs benefits, and nontaxable combat pay). In addition, they could not be claimed as a dependent on someone else's federal tax return. These returns that were filed for the sole purpose of receiving an economic stimulus payment are not included in any of the statistics of this publication.

Changes for the Tax Year 2007 edition include: The addition of form 8846: Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips, Form 8917: Tuition and Fees Deduction, and form 8910: Alternative Motor Vehicle Credit.

Variations of the three basic forms: 1040, 1040A, and 1040EZ, include electronically filed returns. The form variations were categorized into the basic forms according to the data reported on the return. For example, if a return was filed electronically and its characteristics indicate that it would other wise have been filed on paper as a 1040 or 1040A, and then it would be classified as such statistically.

## 2007 Complete Report estimates:

142,978,806	Total, all individual returns filed
86,300,563	1040 returns
33,507,223	1040A returns
23,171,020	1040EZ returns

### For further information contact:

Jeff Hartzok, Chief Individual Returns Analysis Section Statistics of Income Division PO Box 2608 Washington, DC 20013-2608 Estimates of returns filed electronically:

87,851,490	Total, all individual returns filed
47,982,634	1040 returns
25,420,635	1040A returns
14,448,221	1040EZ returns

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\* New Form for Tax Year 2007 Edition

This publication was prepared by Kyle Mudry and reviewed by Adrian Dungan, economists with the Individual Returns Analysis Section.

# **Totals for Forms and Schedules from Estimated Data Line Counts for Tax Year 2007**

	Total	Electronically Filed	
All returns filed	142,978,806	87,851,490	
Form 1040	86,300,563	47,982,634	
Form 1040A	33,507,223	25,420,635	
Form 1040EZ	23,171,020	14,448,221	
Form 1040A-schedule 1, interest/dividends	2,451,196	1,419,499	tabulated within Schedule B total
Form 1040A-schedule 2, child care credit	1,913,438	1,810,778	(similar to Form 2441)
Form 1040A-schedule 3, elderly credit	72,359	36,179	(similar to Schedule R)
Schedule A, itemized deductions	51,090,456	31,471,349	
Schedule B, interest & dividends	27,330,503	12,572,391	includes schedule 1, Form 1040A
Schedule C, sole-prop business	25,828,431	12,996,396	
Schedule C-EZ	4,401,351	2,547,594	tabulated within Schedule C total
Schedule D, capital gain/loss	22,939,950	11,992,461	
Schedule E, supplemental income	17,976,462	9,164,728	
Schedule EIC, earned income credit	18,956,901	16,040,412	
Schedule F, profit or loss from farming	2,045,056	1,073,588	
Schedule R, elderly or disabled	240,104	54,182	includes schedule 3, Form 1040A
Schedule SE, self employed tax	18,964,962	9,980,849	
Form 2106, employee business expense	8,966,892	5,954,535	
Form 2106-EZ	4,494,485	3,033,225	
Form 2439, undistributed long term capital gains	27,174	11,052	
Form 2441, child care expenses	7,296,478	5,693,207	includes schedule 2, Form 1040A
Form 3468, investment credit	30,469	11,665	
Form 3800, general business credit	437,644	201,657	
Form 3903, moving expenses	1,118,610	829,132	
Form 4136, fuels tax credit	305,765	130,159	
Form 4562, depreciation expense	12,231,434	6,936,904	
Form 4684, casualties and thefts	268,350	176,152	
Form 4997, sales of business property	3,071,277	1,531,824	
Form 4835, farm rental	583,607	273,651	
Form 4952, investment interest	1,895,166	863,239	
Form 4972, lump-sum distributions	14,214	3,511	
Form 5329, retirement plans tax Form 5695, residential energy credits	1,479,094 4,366,023	987,145	
Form 5884, work opportunity credit	45,253	2,949,033 19,099	
Form 6251, alternative minimum tax	9,528,998	4,982,709	
Form 6252, installment sale income	833,114	414,909	
Form 6781, gains/losses from contracts, etc	361,536	146,314	
Form 8283, noncash charitable contributions	6,904,786	4,308,469	
Form 8396, mortgage interest credit	35,010	26,822	
Form 8582, passive activity loss limit	3,965,093	2,094,260	
Form 8586, low income housing	59,523	35,017	
Form 8606, nondeductible IRA's	2,138,006	978,145	
Form 8615, under age 14 tax	458,397	195,302	
Form 8801, prior year minimum tax credit	1,435,383	700,180	
Form 8812, additional child tax credit	16,018,377	12,396,910	
Form 8814, parent's report for child	325,287	183,250	
Form 8824, like-kind exchanges	197,019	112,011	
Form 8829, expense for business use of home	not available	not available	
Form 8839, qualified adoption expenses	111,480	71,581	
Form 8844, empowerment zone credit	36,166	10,867	
Form 8846, credit for employer SS and medicare tax	69,655	29,919	
Form 8853, medical savings account	80,227	36,932	
Form 8863, education, hope & lifetime learning credits	7,499,740	5,343,032	
Form 8864, biodiesel and renewable diesel fuels	4,306	2,609	
Form 8880, credit for qualified retirement savings contrib.	6,429,354	5,039,047	
Form 8889, health savings accounts	1,243,268	784,370	
Form 8903, domestic production activities	532,517	241,811	
Form 8910, alternative motor vehicle credit	176,161	113,611	
Form 8917, tuition and fees deduction	4,471,217	3,003,563	

# **Limitations and Guidelines for The 2007 Data Line Counts**

Since the line counts used in this package are obtained from the Tax Year 2007 Individual SOI Complete Report File, they are subject to the same limitations as the data that are included in the Complete Report File. These limitations are derived from the fact that these data are statistically sampled, meaning that the line counts included in this package are **estimates** based on samples, and should not be mistaken for actual counts of the entire population. While most forms and items are present often enough to provide accurate estimates, some less popular items **should be used with a high degree of caution.** 

The sample used in this study is one of a large number of samples that could have been selected using the same sample design. The estimates calculated from these different samples would vary. The sample estimate and an estimate of its standard error permit the construction of interval estimates with prescribed confidence that the interval includes the population value. Shown below are 95 percent confidence intervals for selected Form 1040 items: (For example, the population value of number of returns for salaries and wages, with 95 percent confidence, is between 120,584,261 and 121,105,343.) These confidence intervals correspond to the estimates for all Individual Income Tax Returns filed for Tax Year 2007.

Item	Line number on 1040	95% confidence interval
Salaries and wages	7	( 120,584,261 , 121,105,343 )
Taxable interest	8a	( 64,201,699 , 64,808,563 )
Tax-exempt interest	8b	( 6,210,083 , 6,433,109 )
Ordinary dividends	9a	( 31,767,770 , 32,244,534 )
State income tax refunds	10	( 23,361,788 , 23,824,210 )
Alimony received	11	( 423,517 , 491,099 )
Capital gain distributions	13 (margin write in	n) (4,889,624 , 5,135,234)
Total taxable IRA distributions	15b	( 10,515,712 , 10,850,738 )
Total pension and annuities	16a	( 27,428,602 , 27,927,694 )
Taxable pension and annuities	16b	( 24,943,738 , 25,417,536 )
Unemployment compensation	19	(7,466,907 , 7,777,653)
Social security benefits	20a	( 22,361,994 , 22,813,568 )
Taxable social security benefits	20b	( 14,829,536 , 15,194,386 )
Net operating loss	21 (margin write in	n) (884,004 , 961,786)
Educator expenses	23	( 3,538,185 , 3,770,243 )
IRA deduction	32	( 3,202,113 , 3,397,433 )

# 95 Percent Confidence Intervals for Selected Items on all Form 1040's--Continued

Item	Line number on 1040		95% confidence interval		
Student loan interest deduction	33		( 8,918,241	,	9,263,921 )
Tuition and fees deduction	34		( 4,421,383	,	4,665,381 )
Moving expenses	26		( 1,058,289	,	1,179,799 )
One-half of self-employment tax	27		( 17,707,507	,	17,973,257 )
Self-employed health insurance deduction	29		( 3,755,958	,	3,921,484 )
Keogh and self-employed SEP and SIMPLE plan	n 28		( 1,150,046	,	1,232,224 )
Penalty on early withdrawal of savings	30		( 1,104,649	,	1,224,243 )
Alimony paid	31a		( 559,748	,	639,426 )
Total adjustments	36		( 35,803,128	,	36,297,740 )
Adjusted gross income	37		( 142,956,387	,	143,001,225 )
Total standard deduction	39	(margin write in)	( 90,209,322	,	90,812,486 )
Additional standard deduction	39	(margin write in)	( 11,521,889	,	11,884,311 )
Total itemized deductions	40		( 50,286,895	,	50,802,045 )
Taxable income	43		( 110,251,570	,	110,814,848 )
Tax	44		( 110,241,058	,	110,804,282 )

Forms whose line entries have weak estimates (implying a returns sampled count less than 50) are listed below. When there is a line entry reporting less than 10 in the sample, the frequency is removed and the line is identified with a single asterisk (\*).

Form 4972 Form 8396

# Description of the Sample For the Estimated Data Line Counts

This section describes the sample design and selection, the method of estimation, the sampling variability of the estimates, and the methodology of computing confidence intervals.

# **Domain of Study**

The statistics in this report are estimates from a probability sample of unaudited Individual Income Tax Returns, Forms 1040, 1040A, and 1040EZ (including electronic returns) filed by U.S. citizens and residents during Calendar Year 2008.

All returns processed during 2008 were subjected to sampling except tentative and amended returns. Tentative returns were not subjected to sampling because the revised returns may have been sampled later, while amended returns were excluded because the original returns had already been subjected to sampling. A small percentage of returns were not identified as tentative or amended until after sampling. These returns, along with those that contained no income information, were excluded in calculating estimates. For 2007, returns were also excluded in calculating estimates if the return was filed for the sole purpose of receiving an economic stimulus payment (See Footnote 1 for details). This resulted in a difference between the population total (153,832,380 returns) reported in Table C and the estimated total of all returns (142,978,806) reported in other tables.

The estimates in this report are intended to represent all returns filed for Tax Year 2007. While most of the returns processed during Calendar Year 2008 were for Tax Year 2007, the remaining returns were mostly for prior years, and a few for non-calendar years ending during 2008 and 2009. Returns for prior years were used in place of 2007 returns received and processed after December 31, 2008. This was done based on the assumption that the characteristics of returns due, but not yet processed, can best be represented by the returns for previous income years that were processed in 2008.

# Sample Design and Selection

The sample design is a stratified probability sample, in which the population of tax returns is classified into subpopulations, called strata, and a sample is randomly selected independently from each stratum. Strata are defined by:

- 1. Nontaxable (including no alternative minimum tax) with adjusted gross income or expanded income of \$200,000 or more.
- 2. High business receipts of \$50,000,000 or more.

# **Description of the Sample**

- 3. Presence or absence of special Forms or Schedules (Form 2555, Form 1116, Form 1040 Schedule C, and Form 1040 Schedule F).
- 4. Indexed positive or negative income. Sixty variables are used to derive positive and negative incomes. These positive and negative income classes are deflated using the Chain-Type Price Index for the Gross Domestic Product to represent a base year of 1991. (See footnote 2 for details.)
- 5. Potential usefulness of the return for tax policy modeling. Thirty-two variables are used to determine how useful the return is for tax modeling purposes.

Table C shows the population and sample count for each stratum after collapsing some strata with the same sampling rates. (See references 1 and 2 for details.) The sampling rates range from 0.10 percent to 100 percent.

Tax data processed to the IRS Individual Master File at the Enterprise Computing Center at Martinsburg during Calendar Year 2008 were used to assign each taxpayer's record to the appropriate stratum and to determine whether or not the record should be included in the sample. Records are selected for the sample either if they possess certain combinations of the four ending digits of the social security number, or if their ending five digits of an eleven-digit number generated by a mathematical transformation of the SSN is less than or equal to the stratum sampling rate times 100,000. (See reference 3 for details.)

# **Data Capture and Cleaning**

Data capture for the SOI sample begins with the designation of a sample of administrative records. While the sample was being selected, the process was continually monitored for sample selection and data collection errors. In addition, a small subsample of returns was selected and independently reviewed, analyzed, and processed for a quality evaluation.

The administrative data and controlling information for each record designated for this

sample was loaded onto an online database at the Cincinnati Submission Processing Center. Computer data for the selected administrative records were then used to identify inconsistencies, questionable values, and missing values as well as any additional variables that an editor needed to extract for each record. The editors use a hardcopy of the taxpayer's return to enter the required information onto the online system.

After the completion of service center review, data were further validated, tested, and balanced. Adjustments and imputations for selected fields based on prior year data and other available information were used to make each record internally consistent. Finally, prior to publication, all statistics and tables were reviewed for accuracy and reasonableness in light of provisions of the tax law, taxpayer reporting variations and limitations, economic conditions, and comparability with other statistical series.

Some returns designated for the sample were not available for SOI processing because other areas of IRS needed the return at the same time. For Tax Year 2007, 0.10 percent of the sample returns were unavailable.

## **Method of Estimation**

Weights were obtained by dividing the population count of returns in a stratum by the number of sample returns for that stratum. The weights were adjusted to correct for misclassified returns. These weights were applied to the sample data to produce all of the estimates in this report.

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) NUMBER OF RETURNS FILED FOR SELECTED LINES
Department of the Treasury—Internal Revenue Service 1040 **U.S. Individual Income Tax Return** IRS Use Only-Do not write or staple in this space For the year Jan. 1-Dec. 31, 2007, or other tax year beginning 2007, ending OMB No. 1545-0074 Label Your first name and initial Last name Your social security number (See Total of all returns filed = 142,978,806 142,978,806 instructions A B E Spouse's social security number If a joint return, spouse's first name and initial Last name on page 12.) 1040 = 86,300,563 Electronically Filed Returns = 87,851,490 56,795,965 Use the IRS label. Home address (number and street). If you have a P.O. box, see page 12. You must enter н Otherwise, 1040A = 33,507,223your SSN(s) above. E R please print City, town or post office, state, and ZIP code. If you have a foreign address, see page 12. or type. Checking a box below will not 1040EZ = ^23.171.020 ^Includes 78,013 1040EZ-T returns Y= \*6,185,542 Y= \*\*9,201,046 **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 64,926,879 **1** Head of household (with qualifying person). (See page 13.) If Sinale 21,169,039 4 Filing Status the qualifying person is a child but not your dependent, enter Married filing jointly (even if only one had income) 54,065,030 Check only this child's name here. Married filing separately. Enter spouse's SSN above 86,923 **5** 2.730.935 and full name here. Qualifying widow(er) with dependent child (see page 14) Boxes cher on 6a and Exem.= 186,752,397 132,660,908 6a Yourself. If someone can claim you as a dependent, do not check box 6a **Spouse** 54,097,486 **Exemptions** No. of chil Returns = 47,587,739 (4) if qualifying on 6c who

lived wit. Exem. = 83,747,617 (3) Dependent's Dependents: (2) Dependent's relationship to child for child tax social security number (1) First name Last name credit (see page 15) • did not live with you you due t Returns = 594,369 47,587,739 CHILDREN AT HOME 83,747,617 36,371,648 or separat (see page Exem. = 747,606 If more than four CHILDREN AWAY FROM HOME 594,369 23,494,900 747,606 dependents, see Dependents on 6c 2,753,707 3,278,209 7,856,320 **PARENTS** page 15. not entered above 5,537,694 OTHER DEPENDENTS 8,087,542 2,213,277 Add numbers on Returns = 132,660,908 Exem. = 282,613,371Total number of exemptions claimed lines above ▶ depend. other earned inc. = 58,143 7 120,844,802 Wages, salaries, tips, etc. Attach Form(s) W-2 Income 64,505,131 8a Taxable interest. Attach Schedule B if required Tax-exempt interest. Do not include on line 8a Attach Form(s) 32,006,152 9a W-2 here. Also Ordinary dividends. Attach Schedule B if required attach Forms Qualified dividends (see page 19) W-2G and 23,592,999 10 10 Taxable refunds, credits, or offsets of state and local income taxes (see page 20) 1099-R if tax 11 457,308 was withheld. 11 Business income or (loss). Attach Schedule C or C-EZ 13\* Cap gain distrib = 5,012,429 12 22,629,468 12 13 22,143,812 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 1,751,135 If you did not Other gains or (losses). Attach Form 4797 14 14 get a W-2, 11,395,793 10,683,225 15a 15b IRA distributions 15a **b** Taxable amount (see page 21) see page 19. 25,180,637 16a 27,678,148 16b 16a Pensions and annuities **b** Taxable amount (see page 22) 16,184,703 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Enclose, but do **47** not attach, any 18 1,977,943 Farm income or (loss). Attach Schedule F 18 payment. Also. 7,622,280 19 19 Unemployment compensation please use 22,587,781 Social security benefits . 20a 20b 15,011,961 Form 1040-V. 20a 6,607,358 21 Other income. List type and amount (see page 24) 22 Add the amounts in the far right column for lines 7 through 21. This is your total income ▶ 142,586,333 3,654,214 21 Net Operat. Loss = 922,895 23 Educator expenses (see page 26) **Adjusted** 21 Stock optionss = 9,125 24 Certain business expenses of reservists, performing artists, and Gross 135,102 21 Cancell of debt. = 271,290 24 fee-basis government officials. Attach Form 2106 or 2106-EZ Income 592,526 21 For, earn inc. excl. = 343.077 25 25 Health savings account deduction. Attach Form 8889. . . 21 Gambling inc = 2.008.658 1,119,044 26 26 Moving expenses. Attach Form 3903 17,840,382 27 27 One-half of self-employment tax. Attach Schedule SE . . . 1,191,135 28 28 Self-employed SEP, SIMPLE, and qualified plans . . . 3,838,721 29 Self-employed health insurance deduction (see page 26) 29 30 1,164,446 Penalty on early withdrawal of savings . 30 31a 599,587 31a Alimony paid **b** Recipient's SSN ▶ \_

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 83.

32

33

34

35

36

IRA deduction (see page 27) . . . .

Student loan interest deduction (see page 30)

Tuition and fees deduction. Attach Form 8917.

Domestic production activities deduction. Attach Form 8903 Add lines 23 through 31a and 32 through 35 . . . .

Subtract line 36 from line 22. This is your adjusted gross income

3,299,773

9,091,081

4,543,382

478.999

32

33

Form 1040 (2007)

36 Archer MSA = 10,972

36 Housing ded. = 5,238

36 Other adj. = 139,569

36,050,434

\*\*\*142,978,806

<sup>\*</sup> Number of returns with one election box checked \*\* Number of returns with both boxes checked \*\*\*Returns that reported an exact \$0.00 adjusted gross income were not included in this item.

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) NUMBER OF RETURNS FILED FOR SELECTED LINES

Form 1040 (2007)	3	9a A = 18,963,884 B = 7,441,819 C = 289,197 D= 83,375			Page <b>2</b>
Tax	38	Amount from line 37 (adjusted gross income)	38		
and					
	39a	Check A You were born before January 2, 1943, Blind. Total boxes		Basic Stand. Ded. =	90,510,904
Credits		if: (B) Spouse was born before January 2, 1943, (D) Blind. ∫ checked ▶ 39a	4	Add. Stand. Ded. =	11 703 100
Standard	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here ▶39b L	-		11,703,100
Deduction for—	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin).	40	50,544,470	
	41	Subtract line 40 from line 38	41	125,121,755	
<ul> <li>People who checked any</li> </ul>	42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line			
box on line		6d. If line 38 is over \$117,300, see the worksheet on page 33	42	132,652,011	
39a or 39b <b>or</b> who can be	43	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	110,533,209	
claimed as a		Tax (see page 33). Check if any tax is from: a  Form(s) 8814 b Form 4972 c Form(s) 8889	44	110,522,670	
dependent,	44		45	4,108,964	
see page 31.	45	Alternative minimum tax (see page 36). Attach Form 6251		110,547,299	
<ul><li>All others:</li></ul>	46	Add lines 44 and 45	46	8396 = 33,185	
Single or	47	Credit for child and dependent care expenses. Attach Form 2441 47 6,491,844	- 344 1	0370 - 33,103	
Married filing separately,	48	Credit for the elderly or the disabled. Attach Schedule R . 48 89,767	54c F	I 8839 = 94,128	I
\$5,350	49	Education credits. Attach Form 8863	_	3800 = 230,821	•
Married filing	50	Residential energy credits. Attach Form 5695		8801 = 395,359	•
jointly or	51	Foreign tax credit. Attach Form 1116 if required 51 7,642,644	55c F	8844 = 29,219	
Qualifying widow(er),	52	Child tax credit (see page 39). Attach Form 8901 if required 52 25,889,333		8835 = 2,121	
\$10,700		of the tax credit (see page 65). Attach form 6501 in required		8846 = 53,276	
Head of	53	Total officer savings contributions dream, retain 1 offi		5884 = 38,096 ther = 41,235	
household,	54	oreans norm a 1 tonn occor b 1 tonn occor	_	tt. motor veh. = 157,81	, 4
\$7,850	55	Other credits: a Form 3800 b Form 8801 c Form 55	_	1	<u>,</u>
	56	Add lines 47 through 55. These are your <b>total credits</b>	56	46,084,671	
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0 ▶	57	98,369,138	
Other	58	Self-employment tax. Attach Schedule SE	58	17,840,382	
	59	Unreported social security and Medicare tax from: <b>a</b> $\square$ Form 4137 <b>b</b> $\square$ Form 8919	59	a= 194,630	b= 67,811
Taxes	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	5,550,175	
	61	Advance earned income credit payments from Form(s) W-2, box 9	61	138,647	
	62	Household employment taxes. Attach Schedule H	62	222,146	
	63	Add lines 57 through 62. This is your <b>total tax</b> Recapture Tax = 17,924. Other Taxes = 771,443	63	106,650,214	
		105 500 000	00	100,030,214	_
Payments <b>Payments</b>	64	rederal income tax withheld from roms w-2 and 1099	-		
	65	2007 estimated tax payments and amount applied from 2006 return  65 11,523,634	-		
If you have a	_66a	Earned income credit (EIC)	-		
qualifying child, attach	b	Nontaxable combat pay election ▶ 66b 6,642			
Schedule EIC.	67	Excess social security and tier 1 RRTA tax withheld (see page 59) 67 1,544,389			
	68	Additional child tax credit, Attach Form 8812 68 15,884,285		70a F2439 = 39,5	21
	69	Amount paid with request for extension to file (see page 59) 69 1,773,576		70b F4136 = 305,	765
	70	Payments from: a Form 2439 b Form 4136 c Form 8885 . 70		70c F8885 = 22,5	
	71	Refundable credit for prior year minimum tax from Form 8801, line 27 71 39,343		700 10005 = 22,5	1
	72	Add lines 64, 65, 66a, and 67 through 71. These are your <b>total payments .</b>	72	135,128,289	
			73	110,611,578	
Refund	73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you <b>overpaid</b>		107,687,030	<del>                                     </del>
Direct deposit?	74a	Amount of line 73 you want <b>refunded to you.</b> If Form 8888 is attached, check here ▶	74a	107,007,030	<del>                                     </del>
See page 59 and fill in 74b,	▶ b	Routing number			
74c, and 74d,	► d	Account number 55,652,848			
or Form 8888.	75	Amount of line 73 you want applied to your 2008 estimated tax ▶   75   4,061,974			
Amount	76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60 ▶	76	28,599,646	
You Owe	77	Estimated tax penalty (see page 61)			
Third Darty	Do	you want to allow another person to discuss this return with the IRS (see page 61)?   Yes.	Compl	ete the following.	☐ No
Third Party		, , , , _	·		
Designee	nar	signee's Phone Personal identificence ► no. ► ( ) number (PIN)	aιίOΠ		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and	d to the	best of my knowledg	je and
		ef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of w			
Here	You	ur signature   Date   Your occupation	Day	time phone number	
Joint return? See page 13.		-	1.		
Keep a copy	_		(	)	
for your	Spo	ouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation			
records.					
Paid		parer's Date Check if	Prep	parer's SSN or PTIN	
		83,827,439 Check if self-employed	1		
Duence	3				
Preparer's Use Only	Firr	m's name (or EIN ris if self-employed),	<u> </u>		

1040			NUMBER OF NUMBER OF Number of the Treasury—Internal Revenue	- //// II	FOR					
1070	_		Individual Income Tax Re year Jan. 1-Dec. 31, 2007, or other tax year beg		7, endin		Only—Do no		staple in this space.	
_abel (			rst name and initial	Last name	r, criairi	y ,	-		MB No. 1545-0074	ber
	니			Total 1040 ONLY retu	ırns fil	ed = 86.300.5 <i>6</i>	53			00,563
nstructions	A  -	If a ioir	nt return, spouse's first name and initial	Last name	<b>11113 111</b>	<u>ca – 00,000,00</u>		Spous	e's social security i	
ii page 12.)	Ē	,.	, , ,				į			99,105
abel.	н [		address (number and street). If you have a		2.	Apt. no	).		ou must enter	_
lease print	R ├		nically filed forms 1040 Only = 47,982 own or post office, state, and ZIP code. If		'ess se	e page 12	÷		our SSN(s) above	
residential	E	0.1,, 10	, or poor omes, state, and zin occor in	you have a loreigh add.	000, 00	o pago 12.			ng a box below wi ,804,599 Y = **8,24	
	an 🕨	Chec	ck here if you, or your spouse if filing	i jointly, want \$3 to g	o to th	nis fund (see p	age 12) ▶		You Spou	
31,181			Single	9,360,995 4					g person). (See pag	
iling Status		· =	Married filing jointly (even if only one				,		t not your depender	,
43,782 heck only	2.168 °	_	Married filing separately. Enter spous	,		this child's nam		Jillia ba	t not your dependen	it, critor
ne box. 1,916			and full name here. ►	58,585 <b>(</b>				depen	dent child (see pag	ge 14)
83,552	,734 <b>6</b>		Yourself. If someone can claim yo	ou as a dependent, <b>d</b> e	o not	check box 6a		1	Boxes Exem. = 12	7,353,3
xemptions		b 🗀	<b>Spouse</b> . 43,803,624				, .	}	No of obildren	
		c D	ependents:	(2) Dependent's		(3) Dependent's	(4)√ if qua child for chi		on 6c who Returns  • lived with Exem.	= 56,459
		(1)	) First name Last name	social security number	er	relationship to you	credit (see pa		• did not live with	
		С	HILDREN AT HOME	31,316,494		56,459,060	21,901,	578	you due to div Retu or separation	
more than four pendents, see		С	CHILDREN AWAY FROM HOME	431,070		526,064	15,249	,361	(see page 16)	em. = 526
age 15.		Р	ARENTS	1,693,976		1,988,674	5,314	,971	Dependents on 6c not entered above	
		0	THER DEPENDENTS	2,252,044		3,164,868	1,445	,450	Add numbers on	
		d To	otal number of exemptions claimed	Returns = 83,552,734	E	xem. = 189,492	027		lines above ▶	
	-	7 W	ages, salaries, tips, etc. Attach Form	n(s) W-2				7	67,929,569	
come		8a Ta	axable interest. Attach Schedule B if	required				8a	52,560,740	
tach Form(s)		b Ta	ax-exempt interest. Do not include of	on line 8a	8b	6,174,921				
2 here. Also	9	<b>9a</b> O	rdinary dividends. Attach Schedule B	B if required				9a	29,177,157	
ach Forms ·2G and		<b>b</b> Q	ualified dividends (see page 19) .		9b	25,054,503	3			
99-R if tax	10	0 Ta	exable refunds, credits, or offsets of	state and local incom	ne taxe	es (see page 2	0)	10	23,592,999	
s withheld.	11	<b>1</b> Al	limony received					11	457,308	
	12		usiness income or (loss). Attach Sche	. 11		ap Gain Distrib =		12	22,629,468	
	13	3 C	apital gain or (loss). Attach Schedule	D if required. If not r	equire	d, check here	<b>▶</b> □	13	22,143,812	
you did not	14	<b>4</b> O	ther gains or (losses). Attach Form 4	1 1				14	1,751,135	
t a W-2, e page 19.	15	<b>5a</b> IR	ir t distributions , .			le amount (see p		15b	9,182,452	
o pago 10.	16	<b>6a</b> Pe	ensions and annuities 16a 22.	698,264 <b>b</b>	Taxabl	e amount (see p	age 22)	16b	20,534,161	
close, but do	17		ental real estate, royalties, partnership				edule E	17	16,184,703	
t attach, any yment. Also,	18	_	arm income or (loss). Attach Schedul	eF				18	1,977,943	
ease use	19			100 551				19	4,412,873	
rm 1040-V.						e amount (see p	• ,	20b	12,592,204	
	2.		ther income. List type and amount (s					21	5,936,004	
	22		dd the amounts in the far right column	for lines 7 through 21.	23	3,071,104		22	86,138,179	022.00
djusted	23		,		23	3,071,104		_	Net Operat. Loss = Stock options = 9,	
ross	24		ertain business expenses of reservists, pe	9 ,	24	135,102			Cancell. of debt = 2	
come			e-basis government officials. Attach For		24 25	592,526		-	or. earn. inc. excl. =	
Come	25		ealth savings account deduction. Atta		26	1,119,044		-	Sambling inc. = 2,	
	26		loving expenses. Attach Form 3903		27	17,840,382				
	27		ne-half of self-employment tax. Attach		28	1,191,135				
	28		elf-employed SEP, SIMPLE, and qual		29	3,838,721				
	29		elf-employed health insurance deduc		30	1,164,446				
	30		enalty on early withdrawal of savings		31a	599,587				
			imony paid <b>b</b> Recipient's SSN ►		32	2,815,035				
	32		RA deduction (see page 27)		33	6,207,594		36.4	ı Archer MSA = 10,9	1 972
	33		tudent loan interest deduction (see partition and food deduction. Attach For	-	34	3,540,545			Housing ded. = 5,	
	34		uition and fees deduction. Attach For		35	478,999			Other adj. = 139,5	
	35		omestic production activities deduction					36	31,575,090	
	36		dd lines 23 through 31a and 32 throu ubtract line 36 from line 22. This is w	•				37	86 300 563	1

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) NUMBER OF RETURNS FILED FOR SELECTED LINES

Form 1040 (2007)	1 3	9a A = 14,486,078 B = 5,946,215 C = 198,202 D = 57,743			Page 2
Tax	38	Amount from line 37 (adjusted gross income)	38		
and		Check ( A You were born before January 2, 1943,  Blind. ) Total boxes			
Credits	osa	if: B Spouse was born before January 2, 1943, D Blind.   Checked ▶ 39a		Basic Stand. Ded. =	34,084,401
	) .	· · · · · · · · · · · · · · · · · · ·	‡	Add. Stand. Ded. =	7,111,533
Standard Deduction	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here ►39b L	40	50,544,470	
for—	_40	Itemized deductions (from Schedule A) or your standard deduction (see left margin, 504,227	40	-	<del>                                     </del>
<ul> <li>People who</li> </ul>	41	Subtract line 40 from line 38	41	78,211,925	
checked any	42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line			
box on line 39a or 39b <b>or</b>		6d. If line 38 is over \$117,300, see the worksheet on page 33	42	83,543,837	
who can be	43	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	71,489,933	
claimed as a	44	Tax (see page 33). Check if any tax is from: a Form(s) 8814 b Form 4972 c Form(s) 8889	44	71,490,391	
dependent, see page 31.	45	Alternative minimum tax (see page 36). Attach Form 6251	45	4,107,693	
All others:	46	Add lines 44 and 45	46	71,515,020	
		4=   4.775.742		8396 = 33,185	
Single or Married filing	47	oredit for critical and dependent care expenses. Attach 1 of 172441			
separately,	48	Credit for the elderry of the disabled. Attach Schedule h	54c F	8839 = 94,128	
\$5,350	49	Education credits. Attach Form 8863		3800 = 230,821	-
Married filing	50	Residential energy credits. Attach Form 5695	_	F8801 = 395,359	·
jointly or Qualifying	51	Foreign tax credit. Attach Form 1116 if required 51 7,642,644		8844 = 29,219	
widow(er),	52	Child tax credit (see page 39). Attach Form 8901 if required 52 16,748,517		8835 = 2,121 8846 = 53,276	
\$10,700 ´	53	Retirement savings contributions credit. Attach Form 8880. 53 2,718,662		55884 = 38,096	-
Head of	54	Credits from: a Form 8396 b Form 8859 c Form 8839		other = 41,235	-
household,	55	Other credits: a Form 3800 b Form 8801 c Form 555	55c A	" lt. Motor Veh. = 157,81	4
\$7,850	56	Other decides. a 1 tolin 3000 b 1 tolin 3001 c 1 tolin	56	32,371,536	
	57	Add lines 47 through 55. These are your <b>total credits</b> Subtract line 56 from line 46. If line 56 is more than line 46, enter -0	57	66,055,849	
				17,840,382	
Other	58	Self-employment tax. Attach Schedule SE	58	-	b /7.01/
Taxes	59	Unreported social security and Medicare tax from: a $\square$ Form 4137 <b>b</b> $\square$ Form 8919	59	a= 194,630	b= 67,81°
Idxoo	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	3,952,377	
	61	Advance earned income credit payments from Form(s) W-2, box 9	61	112,399	
	62	Household employment taxes. Attach Schedule H	62	222,146	
	63	Add lines 57 through 62. This is your total tax Recapture tax = 17,924 Other taxes= 771,443	63	74,263,769	
<b>Payments</b>	64	Federal income tax withheld from Forms W-2 and 1099 64 72,127,212			
rayinents	65	2007 estimated tax payments and amount applied from 2006 return 65 11,060,404			
If you have a	ີ66a	Earned income credit (EIC)			
qualifying	Γ	Earlied Moothle Great (E19)			
child, attach	b	152/400			
Schedule EIC.	J	Excess social security and tier 1 first lax withheld (see page 55)			
	68	Additional of the tax croats. Attach 1 cm 10012	-	70a F2439 = 39,52	21
	69	Amount paid with request for extension to file (see page 59) 69 1,746,650	_	70b F4136 = 305,7	65
	70	Payments from: a Form 2439 b Form 4136 c Form 8885 . 70		70c F8885 = 22,55	50
	71	Refundable credit for prior year minimum tax from Form 8801, line 27 71 151,643			
	72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	80,152,889	
Refund	73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you <b>overpaid</b>	73	59,878,076	
Direct deposit?	74a	Amount of line 73 you want <b>refunded to you.</b> If Form 8888 is attached, check here ▶	74a	57,033,235	
See page 59	► b	Routing number			
and fill in 74b,					
74c, and 74d,	► d	Account number			
or Form 8888.	75	Amount of line 73 you want applied to your 2008 estimated tax   75 3,953,129	70	22 4 42 100	
Amount	76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60 ►	76	23,642,188	
You Owe	77	Estimated tax penalty (see page 61)			
<b>Third Party</b>	Do	you want to allow another person to discuss this return with the IRS (see page 61)?   Yes.	Comp	lete the following.	∐ No
Designee		signee's Phone Personal identifi	cation		
		me ▶ no. ▶ ( ) number (PIN)		<u> </u>	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, are			
Here		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of v			uge.
Joint return?	Yo	ur signature Date Your occupation	Day	time phone number	
See page 13.			(	)	
Кеер а сору	$\frac{1}{Sn}$	ouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation	\	,	
for your	7	opouco o occupation			
records.		5-4-	D	pororio CCN su DTIN	
Paid		eparer's 56,081,039 Date Check if	Prep	parer's SSN or PTIN	
Preparer's		seir-employed	<u> </u>		
Use Only		m's name (or EIN	<u>i</u>		
USE UIIIY	y Ol	urs if self-employed), dress, and ZIP code Phone no.	(	)	

• 1U4U	U		NUMBER OF Internal Revenue S Individual Income Tax Revenue S					t write or	staple in this space.	
			the year Jan. 1-Dec. 31, 2007, or other tax year begin		7, endin		20		MB No. 1545-0074	
Label (		You	r first name and initial	Last name					ocial security numl	ber
See	Ļ		E	Electronically Filed R	eturns	= 87,851,490			87,851	.490
nstructions in page 12.)	A B	If a	joint return, spouse's first name and initial	Last name				Spous	e's social security n	
Jse the IRS	E L		1	1040's E-filed = 47,9	82,634	1			33,866	.206
abel. Otherwise,	н	Hor	ne address (number and street). If you have a	P.O. box, see page 12 1040A's E-filed = 25		Apt. no	).		ou <b>must</b> enter	_
lease print or type.	E R E	City	, town or post office, state, and ZIP code. If y				Ť		ng a box below will	
residential				1040EZ's Efiled = 14	1,448,2	21	<i>)</i>		47,176  Y = **4,986	
lection Camp	aign	Cl	neck here if you, or your spouse if filing j	jointly, want \$3 to g	o to th	nis fund (see p	age 12) ▶	-	You 🗌 Spous	se
	364,64	2 <b>1</b> [	Single	16,563,676	4 🔲	Head of househ	old (with o	qualifyin	g person). (See page	= 13.) If
Filina Statu	IS (E	. 2	Married filing jointly (even if only one	had income)			,		t not your dependen	,
32,6 Check only	19,659	์ 3 [	Married filing separately. Enter spouse	,		this child's name	e here. ►			
ne box. 1,2	46,45	7	and full name here. ▶	57,057	5	Qualifying wide	w(er) with	depen	dent child (see pag	
= 82,86		6a	Yourself. If someone can claim you	ı as a dependent, <b>d</b>	o not	check box 6a		]	Boxes check 115 on 6a and 6b	,484,86
Exemption	S	b	<b>Spouse</b> = 32,625,661				, .	<u></u> Ĵ	No. of chi Returns	= 34,000
		С	Dependents:	(2) Dependent's		(3) Dependent's relationship to	(4)√ if qua child for chi	, ,	<ul><li>lived wil Exem.=</li></ul>	59,795
			(1) First name Last name	social security numb	er	you	credit (see pa		<ul> <li>did not live with</li> </ul>	
			CHILDREN AT HOME	34,009,494		59,795,889	27,326,	859	you due to c Return	is = 372
f more than fo lependents, se			CHILDREN AWAY FROM HOME	372,050		463,875	17,362,	994	or separation (see page 16, Exem	. = 463,8
age 15.	00		PARENTS	1,689,942		1,977,463	5,464,2	235	Dependents on 6c not entered above	
			OTHER DEPENDENTS	4,243,494		5,814,066	1,480,	167	Add numbers on	
		d	Total number of exemptions claimed	Returns = 82,860,209	9. <u>E</u> x	em. = 183,536,1	<u> 5</u> 2		lines above ▶	
		7	Wages, salaries, tips, etc. Attach Form(s	s) W-2				7	78,000,131	
ncome		8a	Taxable interest. Attach Schedule B if r	equired				8a	35,696,567	
ttach Form(s	s)	b	Tax-exempt interest. Do not include or	n line 8a	8b	2,985,350				
/-2 here. Also	-	9a	Ordinary dividends. Attach Schedule B	if required				9a	16,757,874	
ttach Forms /-2G and		b	Qualified dividends (see page 19) .		9b	14,556,543	3			
099-R if tax		10	Taxable refunds, credits, or offsets of st	tate and local incon	ne taxe	es (see page 2	0)	10	15,555,516	
as withheld.		11	Alimony received					11	248,320	
		12	Business income or (loss). Attach Sched	dule C or C-EZ .13	3* Cap	Ģain Dist.= 2,	713,433	12	12,708,259	
		13	Capital gain or (loss). Attach Schedule I	D if required. If not i	require	ed, check here	<b>▶</b> □	13	11,520,711	
you did not		14	Other gains or (losses). Attach Form 479					14	905,618	
et a W-2, ee page 19.		15a	IIII GISTIDUTIONS	73,424 <b>b</b>	Taxab	le amount (see p	age 21)	15b	5,503,489	
ee page 13.		16a	Pensions and annuities 16a 15.3	54,328 <b>b</b>	Taxab	le amount (see p	age 22)	16b	13,827,975	
nclose, but d		17	Rental real estate, royalties, partnerships	s, S corporations, tru	usts, e	tc. Attach Sche	edule E	17	8,324,477	
ot attach, any ayment. Also,		18	Farm income or (loss). Attach Schedule	F				18	1,063,997	
lease use	,	19	· · · · · · · · · · · · · · · · · · ·					19	5,251,476	
orm 1040-V.		20a	Social security benefits . 20a 11,5	34,438 <b>b</b>	Taxab	le amount (see p	age 24)	20b	7,546,914	
		21	Other income. List type and amount (se					21	3,694,019	
		22	Add the amounts in the far right column for	or lines 7 through 21				22	87,820,049	
\ diuotod		23	Educator expenses (see page 26) .		23	2,426,283		_	let Operat. Loss =	
Adjusted Gross		24	Certain business expenses of reservists, per	•		07.0/0			Stock options = 4,3	
			fee-basis government officials. Attach Form		24	87,062			Cancell. of debt = 1	
ncome		25	Health savings account deduction. Attac		25	341,419	-	_	or. earn. inc. excl. Sambling inc. = 1,1	
		26	Moving expenses. Attach Form 3903		26	800,497		21 (		
		27	One-half of self-employment tax. Attach		27	9,452,729				
		28	Self-employed SEP, SIMPLE, and qualif		28	562,498				
		29	Self-employed health insurance deducti	· · · · · ·	29	1,847,758				
					30	655,304				
		30	Penalty on early withdrawal of savings		0.4	240 224	- 1			
		30 31a	Alimony paid <b>b</b> Recipient's SSN ▶	1 1	31a	349,224				
		30 31a 32	Alimony paid <b>b</b> Recipient's SSN ▶		32	1,820,844		24 1	ACA Dod 2 E20	
		30 31a 32 33	Alimony paid <b>b</b> Recipient's SSN ►	ge 30)	32 33	1,820,844 6,593,638			/ISA Ded. = 2,539	204
		30 31a 32 33 34	Alimony paid <b>b</b> Recipient's SSN ►IRA deduction (see page 27) Student loan interest deduction (see page 27) Tuition and fees deduction. Attach Form	ge 30)	32 33 34	1,820,844 6,593,638 3,002,562		36 I	Housing Ded. = 1,6	
		30 31a 32 33	Alimony paid <b>b</b> Recipient's SSN ►	ge 30)	32 33 34 35	1,820,844 6,593,638		36 I		

# 

Form 1040 (2007)	35	78 A = 8,995,603 B = 3,477,381 C = 156,809 D = 51.708		F	Page 2
Tax	38	Amount from line 37 (adjusted gross income)	38		
and		Check ( A You were born before January 2, 1943, B Blind. ) Total boxes			
Credits	55a	if: C Spouse was born before January 2, 1943, D Blind.   Checked ▶ 39a		Basic Stand. Ded.	= 55,892,54
	) .			Add. Stand. Ded.	= 5,589,486
Standard Deduction	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here ▶39b ☐ 182 251	40	31,220,225	
for—	_40	Itemized deductions (from Schedule A) or your standard deduction (see left marg) 182,251			
People who	41	Subtract line 40 from line 38	41	78,557,437	
checked any	42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line			
box on line 39a or 39b <b>or</b>		6d. If line 38 is over \$117,300, see the worksheet on page 33	42	82,860,209	
who can be	43	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	68,616,821	
claimed as a	44	Tax (see page 33). Check if any tax is from: a $\square$ Form(s) 8814 b $\square$ Form 4972 c $\square$ Form(s) 8889	44	68,614,546	
dependent, see page 31.	45	Alternative minimum tax (see page 36). Attach Form 6251	45	2,109,173	
All others:	46	Add lines 44 and 45	46	68,624,795	
		c=   5.077.057	54a F	8396 = 26,498	-
Single or Married filing	47	oredit for child and dependent care expenses. Attach of 172441			
separately,	48	Credit for the elderly of the disabled. Attach Schedule N	li.	8839 = 61,703	
\$5,350	49	Eddodalor ordalo. Altaori om odo		3800 = 115,098	
Married filing	50	Residential energy credits. Attach Form 5695	4	8801 = 201,880	
jointly or Qualifying	51	Foreign tax credit. Attach Form 1116 if required 51 3,781,793		8844 = 7,904	
widow(er),	52	Child tax credit (see page 39). Attach Form 8901 if required 52 19,408,179		8835 = 1,006 8846 = 21,489	
\$10,700	53	Retirement savings contributions credit. Attach Form 8880. 53 4,647,350		5884 = 15,985	
Head of	54	Credits from: a Form 8396 b Form 8859 c Form 8839		ther = 23,423	•
household,	55	Other credits: a Form 3800 b Form 8801 c Form 555	55c A	MV = 103,126	•
\$7,850	56	Other decides. 2 1 of 1	56	32,105,290	
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0		59,143,936	
	31		57	9,452,729	
Other	58	Self-employment tax. Attach Schedule SE	58		
Taxes	59	Unreported social security and Medicare tax from: a $\square$ Form 4137 b $\square$ Form 8919	59	a = 129,371	b= 35,881
Idaco	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	3,952,377	
	61	Advance earned income credit payments from Form(s) W-2, box 9	61	112,399	
	62	Household employment taxes. Attach Schedule H	62	78,046	
	63	Add lines 57 through 62. This is your total tax Recapture Tax = 9,073. Other Taxes = 500,724 ▶	63	64,028,563	
Dovmente	64	Federal income tax withheld from Forms W-2 and 1099 64 80,220,339			
Payments <b>Payments</b>	65	2007 estimated tax payments and amount applied from 2006 return  65 5,293,465			
16	∟	2007 Collinated tax payments and amount applied from 2000 Total 1			
If you have a qualifying	_66a Γ .	Earlied modifie diduct (Ero)			
child, attach	b	02/ 204			
Schedule EIC.	67	Excess social security and the Frittin tax withheld (see page 55)			
	68	Additional child tax credit. Attach Form 8812		70a F2439 = 11,03	32
	69	Amount paid with request for extension to file (see page 59) 69 640,364		70b F4136 = 130,	159
	70	Payments from: a Form 2439 b Form 4136 c Form 8885 . 70		70c F8885 = 8,801	
	71	Refundable credit for prior year minimum tax from Form 8801, line 27 71 91,175			
	72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	84,872,086	
Dofund	73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you <b>overpaid</b>	73	74,070,509	
Refund Direct deposit?	74a	Amount of line 73 you want <b>refunded to you.</b> If Form 8888 is attached, check here ▶	74a	72,841,006	
See page 59				, , , , , , , , , , , , , , , , , , , ,	
and fill in 74b,	▶ b				
74c, and 74d,	► d	Account number			
or Form 8888.	75	Amount of line 73 you want applied to your 2008 estimated tax   75   1,775,993		12 25 4 500	
Amount	76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60 ▶	76	12,354,508	
You Owe	77	Estimated tax penalty (see page 61)			
Third Party	Do	you want to allow another person to discuss this return with the IRS (see page 61)?   Yes. (	Compl	ete the following.	No
Designee		signee's Phone Personal identific	ation		
Designee	naı	ne ▶ no. ▶ ( ) number (PIN)		<u> </u>	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and			
Here		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of wi			uge.
Joint return?	Yo	ur signature Date Your occupation	Day	ime phone number	
See page 13.			(	)	
Кеер а сору	Sn	ouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation	,	,	
for your	7	opodoo o oodpation			
records.			Г.	onenia COM - DTIN	
Paid		parer's 58,183,732 Date Check if	Prep	parer's SSN or PTIN	
Preparer's		seir-employed	<u> </u>		
Use Only		n's name (or EIN	<u> </u>		
OSE OILLY	ade	urs if self-employed), dress, and ZIP code  Phone no.	(	)	

Form

1040A 2007 U.S. Individual Income Tax Return IRS Use Only-Do not write or staple in this space. Your first name and initial OMB No. 1545-0074 Label Your social security number (See page 15.) Total Forms Filed = 33,507,223 A B E 33.507.223 Spouse's social security number If a joint return, spouse's first name and initial Use the L 9,796,551 Total Forms Filed Electronically = 25,420,635 IRS label. Н Home address (number and street). If you have a P.O. box, see page 15. You must enter Otherwise, your SSN(s) above. please print City, town or post office, state, and ZIP code. If you have a foreign address, see page 15. or type. Checking a box below will not Joint = 8,982,553Single = 11.874.291Y = \*1,196,917 Y = \*\*817,385 **Presidential** Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 15) You Spouse Filing 11,874,291 1 11.808.044 **4** Single Head of household (with qualifying person). (See page 16.) status 8,982,553 2 If the qualifying person is a child but not your dependent. Married filing jointly (even if only one had income) enter this child's name here. ▶ 813,998 **3** ... Married filing separately. Enter spouse's SSN above and Check only one box. Qualifying widow(er) with dependent child (see page 17) full name here. 28,338 **5** 6a ∟ Yourself. If someone can claim you as a dependent, do not check **Exemptions** checked on 41,642,102 = 33,507,223 box 6a. 6a and 6b **b** Spouse = 8,993,552 No. of children on 6c who:
Returns =16,271,245
Iived with
you Exem. = 27,288,557 (4) √if qualifying c Dependents: (3) Dependent's (2) Dependent's social child for child relationship to tax credit (see security number (1) First name Last name you page 18) If more than six did not live 16,271,245 dependents, CHILDREN AT HOME 27,288,557 14,470,070 with you due to divorce or see page 18. CHILDREN AWAY FROM HOME 163,299 8,245,540 221,542 separationReturns = 163,299 (see page 19) 2.541.349 **PARENTS** 1,059,731 1,289,535 Exem. = 221.542OTHER DEPENDENTS 3,285,651 4,922,674 767,827 Dependents on 6c not entered above TOTAL DEPENDENTS 18,946,300 33,722,308 Total Returns = 33,507,223 Exem. = 75,364,410 Add numbers on lines above ▶ **d** Total number of exemptions claimed. Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2. 7 29,963,261 Attach Form(s) W-2 8a Taxable interest. Attach Schedule 1 if required. 8,526,171 8a here. Also b Tax-exempt interest. Do not include on line 8a. 8b attach 145,675 2,828,995 Form(s) Ordinary dividends. Attach Schedule 1 if required. 9a 1099-R if tax **b** Qualified dividends (see page 22). 9b 2,090,772 was withheld. 958.317 10 Capital gain distributions (see page 22). 10 If you did not **11a** IRA **11b** Taxable amount get a W-2, see 1,582,675 1,500,773 distributions. (see page 22). 11a 11b page 21. 12a Pensions and 12b Taxable amount Enclose, but do 4,979,884 annuities. 4,646,477 12a (see page 23). 12b not attach, any Other Income = 438.633 payment. 2,064,405 13 Unemployment compensation and Alaska Permanent Fund dividends. 13 14a Social security 14b Taxable amount 5,467,230 2,419,757 benefits. 14a (see page 25). 14b 33,358,147 15 Add lines 7 through 14b (far right column). This is your total income. 15 **Adjusted** 16 Educator expenses (see page 25). 16 583,111 gross 17 IRA deduction (see page 27). 17 484,737 income 18 Student loan interest deduction (see page 29). 18 2.883.486 19 Tuition and fees deduction. Attach Form 8917. 1,002,837 4.475.344 20 Add lines 16 through 19. These are your total adjustments. 20 33,507,223 21 Subtract line 20 from line 15. This is your adjusted gross income.

-orm 1040A	(2007)	NUMBER OF RETU	JKN3 FILE	D FOR SEL	ECIED	LINES		Р	age 2
Тах,	22	Enter the amount from line 21 (adjusted	gross ind	come).			22		
credits,	A=	4,477,805 B= 1,495,604 C= 90,996	D= 25,6	32			-		
and	<b>23</b> a	Check \[ A \] You were born before January 2, 19		Blind   Tota			Addi	tonal Stand. Ded.=	= 4,591,50
		if: B <b>Spouse</b> was born before January 2,				23a 🖳	_ Tota	al Stand. Ded. = 3	3.336.49
payments	b	If you are married filing separately ar	,	•		_			-,,
Standard Deduction		deductions, see page 30 and check here		hecked = 1,	000 🕨	23b L	<u> </u>		
or—	24	Enter your standard deduction (see left	margin).				24	33,336,497	
People who	25	Subtract line 24 from line 22. If line 24 is	s more th	an line 22	, enter -	·0	25	29,813,083	
hecked any	26	If line 22 is \$117,300 or less, multiply \$3,4	100 by the	total num	ber of ex	xemptions			
ox on line 3a or 23b <b>or</b>		claimed on line 6d. If line 22 is over \$117,	,300, see	the worksh	eet on p	age 32.	26	32,649,549	
ho can be	27	Subtract line 26 from line 25. If line 26 is							
laimed as a lependent,		This is your <b>taxable income</b> .			•	•	27	23,775,808	
ee page 30.	28	Tax, including any alternative minimum	tax (see r	page 30).			28	23,768,813	
All others:	29	Credit for child and dependent care expe							
ingle or		Attach Schedule 2.		29	1,716,1	01			
1arried filing	30	Credit for the elderly or the disabled. A	Attach				_		
eparately, 5,350	00	Schedule 3.	tttaori	30	57,15	7			
Narried filing	31	Education credits. Attach Form 8863.		31	2,613,6		_		
ointly or	32	Child tax credit (see page 35). Attach		- 01	2,010,0		_		
ualifying	32	Form 8901 if required.		32	9.140.8	216			
vidow(er), 10,700	33	·		02	3, 140,0	710	_		
lead of	აა	Retirement savings contributions credit. <i>F</i> Form 8880.	Allach	00	2 4 4 2 5	-40			
ousehold,	04		r total ar	33 _	3,143,5	043		12 712 125	1
7,850	34	Add lines 29 through 33. These are your Subtract line 34 from line 28. If line 34 is r			2+0× 0		34	13,713,135	+
	35						35	17,049,822	+
	36	Advance earned income credit payment		orm(s) vv-2	, box 9.		36	102,791	+
	37	Add lines 35 and 36. This is your total t		0 00		<b>•</b>	37	17,122,978	
	38	Federal income tax withheld from Forms W-2		9. 38	31,015,	915	_		
	39	2007 estimated tax payments and amo	ount						
f you have a qualifying		applied from 2006 return.		39	463,23		_		
child, attach	40a	Earned income credit (EIC).		40a	12,769,	073	_		
Schedule	b	Nontaxable combat pay election. 40b 4,6						ss FICA withheld	-
EIC.	41	Additional child tax credit. Attach Form 88		41	8,704,8	358	_	tension request	= 19.28
	42	Add lines 38, 39, 40a, and 41. These are				<u> </u>	42	32,229,662	
Refund	43	If line 42 is more than line 37, subtract I	line 37 fro	om line 42.					
		This is the amount you <b>overpaid.</b>					43	29,529,879	
irect		Amount of line 43 you want refunded to you. I	If Form 888	38 is attache	d, check	here 🕨 🗌	44a	29,450,172	
eposit? ee page 52	<b>▶</b> b	Routing		0					
nd fill in		number C	Type: $\square$	Checking	☐ Sav	ings			
4b, 44c,	<b>▶</b> d	Account	$\overline{}$						
nd 44d or orm 8888.		number							
OIIII 0000.	45	Amount of line 43 you want applied to	your						
		2008 estimated tax.		45	108,8	45			
mount	46	Amount you owe. Subtract line 42 from	1 line 37.	For details	s on hov	v	_		
ou owe		to pay, see page 53.					46	3,287,612	
ou owe	47	Estimated tax penalty (see page 53).		47	562,3	28		-	
Taiting the second		o you want to allow another person to discuss this	return with	the IRS (see			Comple	ete the following.	No
hird party		·		(***	1 - 3	, <u> </u>		· ·	
lesignee		esignee's Ph ame ▶ no	none	)		Personal ide number (PIN		on nc	
Sign	U	nder penalties of perjury, I declare that I have examined th	nis return and	accompanying	schedules	and statemer	its, and	to the best of my	
•	k	nowledge and belief, they are true, correct, and accurately list preparer (other than the taxpayer) is based on all informa	ist all amounts	s and sources c	of income I r	received during	g the tax	year. Declaration	
ere pint return?			Date	Your occupa		on ougo.	D	aytime phone numb	er
ee page 15.							1,	)	
еер а сору	- 9	pouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occ	cupation			,	
or your		Land of Signature. It a joint roturn, worth must sign.		Spouse 5 000	очранон				
ecords.	,			Date			Dron	parer's SSN or PTIN	
Paid		reparer's 19,179,093		Date	Chec		l reb	a. o. o oon of Filly	
reparer's	_	rm's name (or			seif-6	employed L	1:		
se only	У	ours if self-employed),				EIN	<u>;</u>		
,	a	ddress, and ZIP code				Phone no.	(	)	

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

Department of the Treasury—Internal Revenue Service NUMBER OF RETURNS FILED FOR SELECTED LINES Form **Income Tax Return for Single and** 2007 **1040EZ Joint Filers With No Dependents** OMB No. 1545-0074 Your first name and initial Your social security number Label 23,171,020 Total Forms Filed = 23.171.020 (See page 8.) A B Last name Spouse's social security number If a joint return, spouse's first name and initial Use the IRS 1,300,310 Total Forms Filed includes 17,003 Form 1040EZ-T's label. Home address (number and street). If you have a P.O. box, see page 9. You must enter Otherwise. Н your SSN(s) above. please print Е or type. City, town or post office, state, and ZIP code. If you have a foreign address, see page 9. Checking a box below will not Single = 21,870,710Joint = 1.300.310Presidential change your tax or refund. Election Y = \*1,184,026 Y = \*\*136,109 Campaign You Spouse Check here if you, or your spouse if a joint return, want \$3 to go to this fund. (page 9) Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. 22.951.972 Income Attach your Form(s) W-2. tax exempt interest = 1,000 **Attach** 3.418.220 Form(s) W-2 Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ. here. Other Net Income or Loss = 232,721 1,145,002 Enclose, but Unemployment compensation and Alaska Permanent Fund dividends (see page 10). do not attach, any payment. Total Income = 23,090,006  $_{4}$ 23.171.020 4 Add lines 1, 2, and 3. This is your adjusted gross income. If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. Spouse You Boxes Checked = 6,714,395 If no one can claim you (or your spouse if a joint return), enter \$8,750 if single; 16,458,625 \$17,500 if married filing jointly. See back for explanation. Total Exemptions = 17,756,935  $^{5}$ Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your taxable income. 15,267,467 6 22,440,763 Federal income tax withheld from box 2 of your Form(s) W-2. 7 **Payments** 8a Earned income credit (EIC) 2.466.454 8a and tax b Nontaxable combat pay election. 8b Excess FICA / RRTA = 1,006 22,745,738 Add lines 7 and 8a. These are your total payments. F4868 payment = 7,645 Tax. Use the amount on line 6 above to find your tax in the tax table on pages 15,263,467 18–26 of the booklet. Then, enter the tax from the table on this line. 10 Refund 11a If line 9 is larger than line 10, subtract line 10 from line 9. This is your refund. If Form 8888 is attached, check here ▶ 11a 21,203,623 Have it directly deposited! See page 15 and fill **b** Routing number in 11b, 11c, and 11d or ▶ d Account number Form 8888. Amount If line 10 is larger than line 9, subtract line 9 from line 10. This is 1,669,846 the amount you owe. For details on how to pay, see page 16. you owe Do you want to allow another person to discuss this return with the IRS (see page 16)? 

Yes. Complete the following. 
No Third party designee Designee's Phone Personal identification number (PIN) name no. Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and Sign accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge. here Date Your occupation Daytime phone number Joint return? See page 6. Keep a copy Spouse's signature. If a joint return, both must sign. Spouse's occupation for your records. Preparer's SSN or PTIN Preparer's Paid 8.567.308 Check if sianature self-employed \_\_\_ preparer's

Firm's name (or

use only

yours if self-employed), address, and ZIP code

FIN

Phone no.

Schedule 1 (Form 1040A)

**Interest and Ordinary Dividends** 2007 for Form 1040A Filers OMB No. 1545-0074

Name(s) shown on Form 1	1040A	4	Your	r social security nu	mber
		Total Schedules Filed = 2,451,196			
Part I		Note. If you received a Form 1099-INT, Form 1099-OID, or substitute st brokerage firm, enter the firm's name and the total interest shown			
Interest See back of schedule and the	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see back of schedule and list this interest first. Also, show that buyer's social			
nstructions or Form		security number and address.		Amount	
1040A, - ine 8a.) _			1		
-					
-					
-					
-					
-					
-					
_					
-	2	Add the amounts on line 1.	2	2,336,625	
-	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815.	3	2,000,020	
-	4	Subtract line 3 from line 2. Enter the result here and on Form 1040A, line 8a.	4		
Part II		Note. If you received a Form 1099-DIV or substitute statement from a beenter the firm's name and the ordinary dividends shown on that for		age firm,	
Ordinary - dividends -	5	List name of payer.		Amount	
_			5		
(See back of schedule					
and the instructions					
for Form _ 1040A, _ line 00 \					
line 9a.)					
- -					
-					
-					
-					
-					
_					
-					
-	6	Add the amounts on line 5. Enter the total here and on Form 1040A, line 9a.	6	950,372	
	.4!	Act Nation and Farm 1010A instructions O. I. N. 100777		. 4 (5 40404)	0007

Schedule 2 (Form 1040A)

Department of the Treasury—Internal Revenue Service

Child and Dependent Care

NUMBER OF RETURNS FILED FOR SELECTED LINES

	<u>EX</u>	penses for Form	1040A Filei	rs (99) <b>Z</b>	007			OMB No.	1545-0074
Name(s) shown on Form	1040	A Total Schedules F	iled = 1,913,438				Your social	security numb	er
Before you beg  Dependent c		You need to understa		g terms. See D		on page 1 d		arate instruc	
Part I	_1	(a) Care provider's name		s (number, stree state, and ZIP c		(c) Ident number (SS		t paid ctions)	
Persons or organizations who provided the care								1,913,438	3
You <b>must</b> complete this part.		Did you recedependent care I  Caution. If the care must use Form 104	eive benefits?	No Yes —	e, you may	Complete on Complete Pa	rt III on the	e back next.	do, you
Part II	2	Information about y the instructions.	our <b>qualifying</b>	person(s). If	you have	more than t	wo qualif		
Credit for child and dependent care expenses		<b>(a)</b> Qualify First	ing person's name	Last		alifying person security numb		you incurred in 2007 for the listed in colu	and paid e person
								1,881,802 520,632	2
		Add the amounts in \$3,000 for one qualif you completed Page 1	lifying person o art III, enter the	or \$6,000 for to amount from	wo or mon line 27.		3	1,870,796	
	4	Enter your earned	<b>income.</b> See th	ne instructions	S.		4	1,910,793	3
	5	If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions); <b>all others,</b> enter the amount from line 4.						470,339	
	6	Enter the smallest	of line 3, 4, or	5.			6	1,870,796	3
	7	Enter the amount fr	om Form 1040	A, line 22.	7				
	8	Enter on line 8 the amount on line 7.  If line 7 is:	decimal amour	nt shown belo		plies to the			
		But not Over over	Decimal amount is	Over	But not over	Decimal amount	is		
		\$0—15,000 15,000—17,000 17,000—19,000 19,000—21,000 21,000—23,000 23,000—25,000 25,000—27,000 27,000—29,000	.35 .34 .33 .32 .31 .30 .29	31,000- 33,000- 35,000- 37,000- 39,000- 41,000-	—31,000 —33,000 —35,000 —37,000 —39,000 —41,000 —43,000 —No limit	.27 .26 .25 .24 .23 .22 .21	8		×.
	9	Multiply <b>line 6</b> by the expenses in 2007, s		ount on line 8		id 2006			1,870,79
	10	Enter the amount fr	om Form 1040	A. line 28.			10		

11 Credit for child and dependent care expenses. Enter the smaller

of line 9 or line 10 here and on Form 1040A, line 29.

11 total credit- 1,716,101

Page 2

Schedule 2 (Form 1040A) 2007

# Dependent care benefits

Part III

12	Enter the total amount of <b>dependent care benefits</b> you received for 2007. This amount should be shown in box 10 of your Form(s) W-2. <b>Do not</b> include amounts that were reported to you as wages in box 1 of Form(s) W-2.	40	07 224	
13	Enter the amount, if any, you carried over from 2006 and used in 200		87,331	
14	during the grace period. See the instructions.  Enter the amount, if any, you forfeited or carried forward to 2008. See	13		<u> </u>
	the instructions.	14(		)
15	Combine lines 12 through 14. See the instructions.	15		
16	Enter the total amount of <b>qualified expenses</b> incurred in 2007 for the care of the qualifying person(s). 16 107,233			
17	Enter the <b>smaller</b> of line 15 or 16.			
18	Enter your <b>earned income.</b> See the instructions. 18 1,910,793			
19	Enter the amount shown below that applies to you.			
	<ul> <li>If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions for line 5).</li> </ul>			
	<ul> <li>If married filing separately, see the instructions for the amount to enter.</li> </ul>			
	• All others, enter the amount from line 18. 19 470,339			
20	Enter the <b>smallest</b> of line 17, 18, or 19.			
21	Excluded benefits. Enter here the smaller of the following:  ● The amount from line 20, or			
	• \$5,000 (\$2,500 if married filing separately <b>and</b> you were required to enter your spouse's earned income on line 19).	21	64,683	
22	<b>Taxable benefits.</b> Subtract line 21 from line 15. Also, include this amount on Form 1040A, line 7. In the space to the left of line 7, enter "DCB."	22	17,644	
	To claim the child and dependent care credit, complete lines 23-27 below.		,	
23	Enter \$3,000 (\$6,000 if two or more qualifying persons).	23		
24	Enter the amount from line 21.	24	64,683	
25	Subtract line 24 from line 23. If zero or less, <b>stop.</b> You cannot take the credit. <b>Exception.</b> If you paid 2006 expenses in 2007, see the instructions for line 9.	25		
26	Complete line 2 on the front of this schedule. <b>Do not</b> include in column (c) any benefits shown on line 21 above. Then, add the amounts in column (c) and enter the total here.	26		
27	Enter the <b>smaller</b> of line 25 or 26. Also, enter this amount on line 3 on the front of this schedule and complete lines 4–11.	27	1.870.796	
	and the second s		2 (Form 1040A)	2007

Schedule 3 (Form 1040A) Department of the Treasury—Internal Revenue Service NUMBER OF RETURNS FILED FOR SELECTED LINES

Credit for the Elderly or the Disabled for Form 1040A Filers

**2007** OMB No. 1545-0074

	Your social security number
Total Schedules Filed = 72,359	

You may be able to take this credit and reduce your tax if by the end of 2007:

- You were age 65 or older
- or
- You were under age 65, you retired on permanent and total disability, and you received taxable disability income.

But you must also meet other tests. See the separate instructions for Schedule 3.

In most cases, the IRS can figure the credit for you. See the instructions.

## Part I If your filing status is: And by the end of 2007: Check only one box: Check the Single, box for your Head of household, or filing status Qualifying widow(er) 2 You were under 65 and you retired on permanent and age **3** Both spouses were 65 or older 4 Both spouses were under 65, but only one spouse retired on permanent and total disability . . . . . . 4 5 Both spouses were under 65, and both retired on Married filing jointly 6 One spouse was 65 or older, and the other spouse was under 65 and retired on permanent and total 7 One spouse was 65 or older, and the other spouse was under 65 and **not** retired on permanent and 8 You were 65 or older and you lived apart from your spouse for all of 2007 . . . . . . . . . . . . . . 8 Married filing 9 You were under 65, you retired on permanent and separately total disability, and you lived apart from your spouse for all of 2007 . . . . . . . . . . . . . . . . . 9 Skip Part II and complete Part III on the back. Did you check box 1, 3, 7, or 8? No -Complete Parts II and III.

# Part II Statement of permanent and total disability

Complete this part **only** if you checked box 2, 4, 5, 6, or 9 above.

- 1 You filed a physician's statement for this disability for 1983 or an earlier year, or you filed or got a statement for tax years after 1983 and your physician signed line B on the statement, **and** 
  - 2 Due to your continued disabled condition, you were unable to engage in any substantial gainful activity in 2007, check this box . . . . . . . . . . . . . ▶
    - If you checked this box, you do not have to get another statement for 2007.
    - If you **did not** check this box, have your physician complete the statement on page 4 of the instructions. You **must** keep the statement for your records.

Schedule 3 (Form 1040A) 2007 NUMBER OF RETURNS FILED FOR SELECTED LINES Page 2

# Part III Figure your credit

10	If you checked (in Part I):	Enter:
	Box 1, 2, 4, or 7	\$5,000
	Box 3, 5, or 6	\$7,500
	Box 8 or 9	\$3.750 10

Did you check box 2, 4, 5, 6, or 9 in Part I? 

Yes → You must complete line 11.

Enter the amount from line 10 on line 12 and go to line 13.

- 11 If you checked (in Part I):
  - Box 6, add \$5,000 to the taxable disability income of the spouse who was under age 65. Enter the total.
  - Box 2, 4, or 9, enter your taxable disability income.
  - Box 5, add your taxable disability income to your spouse's taxable disability income. Enter the total.

	For more details on what to include on line 11, see the instructions.	11	6,689	
12	If you completed line 11, enter the <b>smaller</b> of line 10 or line 11; <b>all others</b> , enter the amount from line 10.	12	72.359	
	others, enter the amount nom line to.	12	12,339	

- Enter the following pensions, annuities, or disability income that you (and your spouse if filing a joint return) received in 2007.
  - a Nontaxable part of social security benefits

Nontaxable part of railroad retirement benefits treated as social security (see the instructions). 13a 18,200

**b** Nontaxable veterans' pensions and

Any other pension, annuity, or disability benefit that is excluded from income under any other provision of law (see the instructions).

13b 2,172

18,200

c Add lines 13a and 13b. (Even though these income items are not taxable, they must be included here to figure your credit.) If you did not receive any of the types of nontaxable income listed on line 13a or 13b, enter -0- on line 13c. 13c

14 Enter the amount from Form 1040A, line 22. 14

15 If you checked (in Part I): Enter: \$7,500 Box 1 or 2 Box 3, 4, 5, 6, or 7 \$10,000 Box 8 or 9 . . . \$5,000 15 16 Subtract line 15 from line 14. If zero or less, enter -0-. 16 67,365 17 Enter one-half of line 16. 17 67,365

18 Add lines 13c and 17. 18 72,359 19 Subtract line 18 from line 12. If zero or less, stop; you cannot take the credit. Otherwise, go to line 20. 62,150 19 20 Multiply line 19 by 15% (.15). 20 21 Enter the amount from Form 1040A, line 28, minus any amount on Form 1040A, line 29. 21 22 Credit for the elderly or the disabled. Enter the smaller of line 20 or line 21 here and on Form 1040A, line 30. 22 57,156 SCHEDULES A&B (Form 1040)

Department of the Treasury Internal Revenue Service NUMBER OF RETURNS FILED FOR SELECTED LINES **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 or	n Form				You	ır social security number
		Total Schedules Filed = 51,090,456				
Medical and Dental Expenses	1 2 3 4	Caution. Do not include expenses reimbursed or paid by others.  Medical and dental expenses (see page A-1)  Enter amount from Form 1040, line 38 2	<b>1</b> 3 nter -0	10,520,269	4	10,520,269
Taxes You Paid	5	State and local (check only one box):  a  Income taxes, or )	5	48,619,346		Income Tax = 36,683,269
(See page A-2.)	6 7 8	b ☐ General sales taxes	6 7	43,604,421 22,063,125		General Sales Tax = 11,936,
	9	Add lines 5 through 8	8	2,874,143	9	50,118,657
Interest You Paid (See page A-5.)	10 11	Home mortgage interest and points reported to you on Form 1098  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	10	40,368,551		30,110,007
Note.			11	1,153,837		
Personal interest is not	12	Points not reported to you on Form 1098. See page A-6 for special rules	12	2,801,145		
deductible.	13 14	Qualified mortgage insurance premiums (See page A-7) . Investment interest. Attach Form 4952 if required. (See page A-7.)	13	1,685,664		
	15	Add lines 10 through 14	·		15	41,282,875
Gifts to Charity	16	Gifts by cash or check. If you made any gift of \$250 or more, see page A-8	16	38,056,579		
If you made a gift and got a benefit for it,	17 18	Other than by cash or check. If any gift of \$250 or more, see page A-8. You <b>must</b> attach Form 8283 if over \$500 Carryover from prior year	17 18	23,854,106 538,922		
see page A-8.	19	Add lines 16 through 18 . Capital Gains Deduction L	mitatio	n = 31,714	19	41,119,033
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See page	A-9.) .		20	107,474
Job Expenses and Certain Miscellaneous Deductions (See page A-9.)		Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-9.) ►  Tax preparation fees	21 22 23	16,479,370 23,493,036 10,035,981		
	24 25 26	Add lines 21 through 23	24	30,594,297 30,592,689		
	27	Subtract line 26 from line 24. If line 26 is more than line				12,734,403
Other Miscellaneous Deductions	28	Other—from list on page A-10. List type and amount ► Gambling Loss Deduction = 1,101,240 Other Than Gambling Property Income, Casualty & Theft Deduction = 7,844			28	1,691,527
Total Itemized Deductions 7,13	29 1,365 <b>30</b>	Is Form 1040, line 38, over \$156,400 (over \$78,200 if ma No. Your deduction is not limited. Add the amounts in for lines 4 through 28. Also, enter this amount on Yes. Your deduction may be limited. See page A-10 for the your elect to itemize deductions even though they are less than your standard.	the far Form 1 he amo	right column 040, line 40. bunt to enter.	29	50,544,470

Schedules A&B (Form 1040) 2007 NUMBER OF RETURNS

NUMBER OF RETURNS FILED FOR SELECTED LINES

OMB No. 1545-0074

Page 2

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side.

Total Schedules Filed = 27,330,503

	Schedule B—Interest and Ordinary Dividend	S	Attacl Sequ	hment ence N	o. <b>08</b>
Part I Interest	1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶		Amo	ount	
(See page B-1 and the instructions for Form 1040, line 8a.)	Of the total schedules filed the component parts are as follows: F1040 = 24,879,307 F1040A = 2,451,196	1			
Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the state interest.	The component parts of line 2 are as follows: F1040 = 23,777,210 F1040A = 2,336,625				
the total interest shown on that	2 Add the amounts on line 1	2	26,113,8	35	
form.	<ul> <li>3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815</li></ul>	3	37,301		
	Note. If line 4 is over \$1,500, you must complete Part III.		Amo	ount	
Part II Ordinary Dividends (See page B-1 and the instructions for Form 1040, line 9a.)	5 List name of payer ▶				
Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.		5			
	6 Add the amounts on line 5. Enter the total here and on Form 1040, line 9a .	6	18,866,5	89	
	Note. If line 6 is over \$1,500, you must complete Part III.  You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary divides	dends: d	or <b>(b)</b> had	Vos	NI-
Part III Foreign Accounts and Trusts (See page B-2.)	<ul> <li>a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to the foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to the foreign account; and foreign account, such as a bank account, securities account, or other account; or ot</li></ul>	o, a fore ity over financia Yes	a financial al account?	Yes	No

NUMBER OF RETURNS FILED FOR SELECTED LINES

### **SCHEDULE C Profit or Loss From Business** (Form 1040)

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

Department of the Treasury Internal Revenue Service

(99) ► Attach to Form 1040, 1040NR, or 1041. ► See Instructions for Schedule C (Form 1040). Sequence No. 09

mber (SSN)
1
-
n pages C-8, 9, & 1 128,351
ımber (EIN), if any
186,720
Mat. Part. = 18,4
☐ Yes ☐ N
000,591 ▶ □
69,928
5,430
68,169
01,104
09,742
88,784
41,084
,
30,671
4,673
38,408
65,706
18,754
66,180
29,280
32,910
75.896
58,373
15,551
32,003
70,910
91,648
00,779
29,468
20,100
71
71 17,719
71

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

		- (		_	_	_	_	_	- /	
Schedule C (Form 1040) 2007	NUMBER (	OF RETURN	IS FILED F	OR SELEC	TED LI	NES				Page <b>2</b>

Pa	rt III Cost of Goods Sold (see page C-7)			
33	Method(s) used to value closing inventory: a $\square$ Cost b $\square$ Lower of cost or market c	□ o	ther (attach explanation	on)
34	Was there any change in determining quantities, costs, or valuations between opening and closing investigation of the cost of	-	? □ Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	1,547,953	 <del> </del>
36	Purchases less cost of items withdrawn for personal use	36	2,721,302	
37	Cost of labor. Do not include any amounts paid to yourself	37	666,412	 
38	Materials and supplies	38	1,968,719	
39	Other costs	39	995,740	<u> </u>
40	Add lines 35 through 39	40		
41	Inventory at end of year	41	1,600,679	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42		
Pa	Information on Your Vehicle. Complete this part only if you are claiming line 9 and are not required to file Form 4562 for this business. See the ins C-4 to find out if you must file Form 4562.			
43	When did you place your vehicle in service for business purposes? (month, day, year) ▶	/		
44	Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used you	our vel	nicle for:	
а	Business b Commuting (see instructions) c Oth	ier		
45	Do you (or your spouse) have another vehicle available for personal use?		🗌 Yes	☐ No
46	Was your vehicle available for personal use during off-duty hours?		🗌 Yes	☐ No
47a	Do you have evidence to support your deduction?			☐ No
	rt V Other Expenses. List below business expenses not included on lines 8–26	or lin	<b>Yes</b> e 30.	□ No
48	Total other expenses. Enter here and on page 1 line 27	10		

### SCHEDULE C-EZ (Form 1040)

# NUMBER OF RETURNS FILED FOR SELECTED LINES

# **Net Profit From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

Attachment

Department of the Treasury Internal Revenue Service

▶ Attach to Form 1040, 1040NR, or 1041. ▶ See instructions on back.

Sequence No. 09A

Name of proprietor Social security number (SSN) Total Forms Filed = 4,401,351 Data is tabulated with the Schedule C's Part I **General Information**  Had business expenses of \$5,000 or Had no employees during the year. • Are not required to file Form 4562. You May Use Depreciation and Amortization, for Use the cash method of accounting. Schedule C-EZ this business. See the instructions Instead of • Did not have an inventory at any for Schedule C, line 13, on page time during the year. Schedule C C-4 to find out if you must file. And You: • Do not deduct expenses for Only If You: • Did not have a net loss from your business use of your home. business. Do not have prior vear unallowed • Had only one business as either a passive activity losses from this sole proprietor or statutory business. employee. Principal business or profession, including product or service B Enter code from pages C-8, 9, & 10 C D Employer ID number (EIN), if any Business name. If no separate business name, leave blank. Business address (including suite or room no.). Address not required if same as on page 1 of your tax return. City, town or post office, state, and ZIP code Part II **Figure Your Net Profit** Gross receipts. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see Statutory Employees in the instructions for 1 2 Total expenses (see instructions). If more than \$5,000, you must use Schedule C . . . . . . Net profit. Subtract line 2 from line 1. If less than zero, you must use Schedule C. Enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13. (Statutory employees do not report this amount on Schedule SE, line 2. Estates and trusts, enter on Form Part III **Information on Your Vehicle.** Complete this part **only** if you are claiming car or truck expenses on line 2. Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other Do you (or your spouse) have another vehicle available for personal use? . . . . . . . .

Cat. No. 14374D

7

☐ Yes

No

No

# SCHEDULE D (Form 1040)

Capital Gains and Losses

Attach to Form 1040 or Form 1040NR. See Instructions for S

OMB No. 1545-0074

2007

Attachment
Sequence No. 12

Department of the Treasury Internal Revenue Service Name(s) shown on return

► Use Schedule D-1 to list additional transactions for lines 1 and 8.

Your social security number

	Total Schedules Filed = 22,939,9		•		h Form 1099		· · · ·			
Pa	t I Short-Term Capital Gains	T	-Assets	Helo	1					
	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date (Mo., da		(d) Sales pr (see page D- the instruction	7 of	(e) Cost or other (see page Detection the instruction	-7 of	(f) Gain or (los Subtract (e) from	s <b>s)</b> n (d)
1		(IVIO., day, yr.)			the manacia	113)	the motivati	1		1
								<u> </u>		<u> </u>
										-
								<u>i</u>		1
								!		!
								!		1
										<u> </u>
2	Enter your short-term totals, if any, line 2			2					9,189,031	
3	Total short-term sales price amount				9,805,020					
4	column (d)			from F			and 8824	4	392,887	
5	Net short-term gain or (loss) from	Ü	, ,				•		-	
	Schedule(s) K-1							5	1,106,575	1
6	Short-term capital loss carryover. Enter Carryover Worksheet on page D-7 or						-	6	( 1,723,928	)
7	Net short-term capital gain or (loss)	. Combine line	s 1 throu	igh 6	in column (f)			7	10,693,357	
Pai	t II Long-Term Capital Gains a						Ch	ort Te	rm Non-Ded. Lo	oss = 2
	<u> </u>	(b) Date	(c) Date		(d) Sales pr		(e) Cost or other	er basis	(f) Coin or (los	
	(a) Description of property (Example: 100 sh. XYZ Co.)	acquired (Mo., day, yr.)	(Mo., da		(see page D- the instruction	7 of	(see page D the instructi	-7 of	(f) Gain or (los Subtract (e) from	
8										
								1		1
										<u> </u>
				<u> </u>						-
9	Enter your long-term totals, if any, line 9			9					14,392,709	
10	Total long-term sales price amounts column (d)	s. Add lines 8 a	and 9 in	10	15,088,843					
11	Gain from Form 4797, Part I; long-term (loss) from Forms 4684, 6781, and 882	n gain from Fo	rms 2439	and				11	2,478,714	
12	Net long-term gain or (loss) from p								4 000 000	
	Schedule(s) K-1							12	1,989,660	1
13	Capital gain distributions. See page D	-2 of the inetru	ıctione					13	10,701,459	
13 14	Long-term capital loss carryover. Enter			 rom li	 ne 15 of you	 ır <b>C</b> a	pital Loss			
_	Carryover Worksheet on page D-7 or	f the instruction	ns					14	( 4,586,812	)
15	Net long-term capital gain or (loss)	. Combine line			4 in column erm Non-Ded			15	20,135,036	

Part III	Summary
rart III	Sullillarv

16	Combine lines 7 and 15 and enter the result	16	22,143,812	
	<ul> <li>If line 16 is:</li> <li>A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>Zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.</li> </ul>			
17	Are lines 15 and 16 <b>both</b> gains?  Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.			
18	Enter the amount, if any, from line 7 of the <b>28% Rate Gain Worksheet</b> on page D-8 of the instructions	18	229,501	
19	Enter the amount, if any, from line 18 of the <b>Unrecaptured Section 1250 Gain Worksheet</b> on page D-9 of the instructions	19	1,483,092	
20	<ul> <li>Are lines 18 and 19 both zero or blank?</li> <li>Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below.</li> <li>No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.</li> </ul>			
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the <b>smaller</b> of:			
	<ul> <li>The loss on line 16 or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21	(	)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?  ☐ Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR).  ☐ No. Complete the rest of Form 1040 or Form 1040NR.			

# **SCHEDULE E** (Form 1040)

NUMBER OF RETURNS FILED FOR SELECTED LINES **Supplemental Income and Loss** 

Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting personal property, use

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attachment Sequence No. 

Department of the Treasury Internal Revenue Service Name(s) shown on return

Total Forms Filed = 17,976,462

Your social security number

OMB No. 1545-0074

	Schedule C or C-EZ (see page	E-3). I	f you are an ind	ividual, report fa	rm renta	al inc	ome or loss froi	m <b>For</b> i	n 483	<b>5</b> on pag	je 2, lir	e 40.
1	1 List the type and location of each rental real estate property:											No
Α	Number of RENTALS = 8,404,116 Total # Rental Properties = 14,646,969  listed on line 1, did you or you use it during the tax year for purposes for more than the g						perso	onal 👢	Yes	= 247,266		
В	Number of ROYALTIES = 1,355,742 Total	al # Ro	oyalties = 2,092,7	781	•	14 d	es for more that ays <b>or</b> of the total da		e greater or.			
С						fair r	ental value? age E-3)	iyo 101	nou c			
Inc	come:		A			perties C			Totals (Add columns A, B,			and C.)
3	Rents received	3	RENT						3	9,119	522	<del></del>
4	Royalties received	4	112111	ROYAL	TY				4	1,601		
		_		TKO 17KL						1,001	,000	
-	penses:	5										
5	Advertising	6										
6	Auto and travel (see page E-4) .	7										
7	Cleaning and maintenance	8										
8	Commissions	9										
9	Insurance	10										
10	Legal and other professional fees	11										
11	Management fees.											
12	Mortgage interest paid to banks, etc. (see page E-4)	12							12	5,270	,892	
13	Other interest	13					671,725					
14	Repairs	14	5,109,735	1,590,7	797		720,988					
15	Supplies	15										
16	Taxes	16										
17	Utilities	17										
18	Other (list) ▶											
		18										
19	Add lines 5 through 18	19	8,872,953	862,5	96				19			
20	Depreciation expense or depletion (see page E-5)	20	7,434,864	540.0	75				20			
21	Total expenses. Add lines 19 and 20	21										
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file <b>Form 6198</b>	22	9.549.559	1.595.4	197							
23	Deductible rental real estate loss. <b>Caution.</b> Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must			  uctible rental lo     ded loss carryo			1,361,856 542,642					
	file <b>Form 8582.</b> Real estate professionals must complete line	23	( 4,872,269			)	(	١				
24	43 on page 2			ot include es:	loccoc	. /	\	,	24	5,973	.800	
24	·			-			otal lacasa harr	$\cdot \mid$	25	(5,629	•	)
25 26										, 5,520	,0	<del></del>
26	Total rental real estate and royalty in If Parts II, III, IV, and line 40 on page line 17, or Form 1040NR, line 18. Other	2 do	not apply to ye	ou, also enter t	his amo	ount	on Form 1040		06	9,997	634	
	into 17, or Form 1040INIT, little 10. Other	N WISE	, moidue tille al	HOURT III LITE LO	ui Uii II	110 4	i on page 2.		26	0,001	,507	

Sche	edule E (Form 1040) 2007	NOIV	IDER OF RE	TURNS FIL	LED FOR SEL	Attachi	nent Sequence I	No. <b>13</b>	<b>3</b> F	age 2
Nam	ne(s) shown on return. Do not er	iter name and s	ocial security nu	ımber if showr	on other side.			You	r social security nu	mber
Cau	ution. The IRS compares	amounts re	ported on yo	ur tax retu	rn with amour	nts shown on	Schedule(s)	K-1.	1 1	
Pa									om an at-risk activ	vity for
	which <b>any</b> amou									
27	27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses?   Yes = 10,984									
	ii you answered Tes,		o belole col	inpletting till	(b) Enter P for	(c) Check if	(d) Emp	loyer	(e) Chec	k if
28		(a) Name			partnership; <b>S</b> for S corporation	foreign partnership	identific numb		any amou not at ri	
Α		Number	of PARTNER	RSHIPS	5,789,606				9,042,3	307
В		Numb	er of S-COR	IDC .	4 715 007	04.070			200.2	
D		Num	ei di S-COR	.25	4,715,007	21,879			309,3	08
<u> </u>	Passive Incom	ne and Loss	i		N <sub>0</sub>	onpassive li	ncome and L	_oss		
	(f) Passive loss allowed (attach Form 8582 if required)		sive income chedule K-1		npassive loss Schedule K-1		ion 179 expense n from <b>Form 456</b>		(j) Nonpassive inc	
Α	PARTNERSHIPS	PARTNI	ERSHIPS	PARTNE	RSHIPS	PARTN	ERSHIPS		PARTNERSHIP	S
В	1,137,990	1,750			9,084		7,943		1,808,394	
<u>c</u>	S-CORPS 202,851	S-CO 578,0			RPS		ORPS		S-CORPS	
D D		2,204		1,576	6,789	1,12	22,661		2,615,490 4,199,348	
	Totals 1,268,214	2,201	, 100	2,900	0,051	1,52	22,811		1,100,010	
	Add columns (g) and (j)	of line 29a						30	5,744,905	
31	Add columns (f), (h), and	d (i) of line 2						31	4,928,330	)
	Total partnership and result here and include	in the total	on line 41 l	below	Combine lines		Enter the	32	7,944,991	
Pa	rt III Income or Lo	oss From E	states and	d Trusts						
33			(a) Na	me					(b) Employer identification number	r
Α										
В										
	Pass	ive Income	and Loss			Non	passive Inc	ome	and Loss	
	(c) Passive deduction or loss (attach Form 8582 if requ			Passive incom		(e) Deductio from Sched			(f) Other income from Schedule K-1	n 
<u>A</u>										-
B	<b>-</b>		31	10,256					303,703	_
	Totals 47,806			10,200		32,042			000,700	
35	Add columns (d) and (f)	of line 34a						35	552,214	
36	Add columns (c) and (e)							36	76,660	)
37			` '	bine lines 3	35 and 36. En	ter the result	here and	07	500 711	
Pa	include in the total on lart IV Income or Lo			Mortgag	e Investme	nt Conduits	(RFMICs)	37 -Res	590,711 sidual Holder	
38	(a) Name	<b>(b)</b> En	nployer on number	(c) Exces	s inclusion from ules Q, line 2c page E-7)	(d) Taxable in	ncome (net loss) ules Q, line 1b		(e) Income from Schedules Q, line 38	<b>D</b>
				,	k	5,89	0			
39	Combine columns (d) ar	nd (e) only. E	nter the resu	ult here and	include in the	e total on line	41 below	39	10,471	
	rt V Summary								E44 400	
40 41	Net farm rental income Total income or (loss). Combine	, ,			•		 NR, line 18 ►	40 41	544,468 16,184,703	
42	Reconciliation of farmin and fishing income repo 1065), box 14, code B; S Schedule K-1 (Form 104)	rted on Form chedule K-1	4835, line 7 (Form 1120S)	; Schedule ), box 17, c	K-1 (Form	2 719,6	00			
43	Reconciliation for real opposition professional (see page Eanywhere on Form 1040 oin which you materially particularly par	-2), enter the or Form 1040N	net income IR from all rer	or (loss) yo ntal real esta	te activities	3 443,9	57			

SCHEDULE EIC (Form 1040A or 1040) NUMBER OF RETURNS FILED FOR SELECTED LEARNING TO THE SELECTED LEARNING TO THE SELECTED LEARNING TO THE SELECTED LEARNING THE SELECTE

Qualifying Child Information

1040A 1040 or 1040 or child.

OMB No. 1545-0074

2007

Attachment Sequence No. 43

Department of the Treasury Internal Revenue Service Name(s) shown on return Complete and attach to Form 1040A or 1040 only if you have a qualifying child.

Total Schedules Filed = 18,956,901 Your social security number

Before you begin:

See the instructions for Form 1040A, lines 40a and 40b, or Form 1040, lines 66a and 66b, to make sure that (a) you can take the EIC, and (b) you have a qualifying child.



- 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 back of schedule 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.
- 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.

Q	ualifying Child Information	Chi	ild 1	Child 2			
1	Child's name If you have more than two qualifying children, you only have to list two to get the maximum credit.	First name	Last name	First name	Last name		
2	Child's SSN The child must have an SSN as defined on page 41 of the Form 1040A instructions or page 47 of the Form 1040 instructions unless the child was born and died in 2007. If your child was born and died in 2007 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate.		18,956,901		9,764,780		
3	Child's year of birth	Year <u>18,</u> 95 <u>6,</u> If born after 196 and 4b; go to li	88, skip lines 4a	Year <u>9.76</u> 4 If born after and 4b; go to	1988, skip lines 4a		
	If the child was born before 1989— Was the child under age 24 at the end of 2007 and a student?	= 968,598  Yes.  Go to line 5.	No. Continue.	= 406,110 Yes. Go to line 5.	No. Continue.		
b	Was the child permanently and totally disabled during any part of 2007?	= 394,670 Yes. Continue.	No. The child is not a qualifying child.	= 174,18 Yes. Continue.	No.  The child is not a qualifying child.		
5	Child's relationship to you (for example, son, daughter, grandchild, niece, nephew, foster child, etc.)	18,956,901		9,768,088			
6	Number of months child lived with you in the United States during 2007						
	• If the child lived with you for more than half of 2007 but less than 7 months, enter "7."	18,941,924		9,760,927			
	• If the child was born or died in 2007 and your home was the child's home for the entire time he or she was alive during 2007, enter "12."	Do not enter mor	months e than 12 months.				



You may also be able to take the additional child tax credit if your child (a) was under age 17 at the end of 2007, and (b) is a U.S. citizen or resident alien. For more details, see the instructions for line 41 of Form 1040A or line 68 of Form 1040.

OMB No. 1545-0074

## SCHEDULE F (Form 1040)

NUMBER OF RETURNS FILED FOR SELECTED LINES

# **Profit or Loss From Farming**

▶ Attach to Form 1040, Form 1040NR, Form 1041, Form 1065, or Form 1065-B.

Department of the Treasury Internal Revenue Service

C Accounting method:

1

2

3

9

the amount from Part III, line 51

Car and truck expenses (see page

F-4). Also attach Form 4562 . . .

Chemicals . . . . . . .

page F-4) . . . . . . .

Custom hire (machine work) .

Depreciation and section 179

expense deduction not claimed

elsewhere (see page F-5). .

Employee benefit programs other

than on line 25

Feed . . . .

Fertilizers and lime .

Freight and trucking. .

Conservation expenses (see

10

13

15

16

18

19

20

Name of proprietor

Attachment ▶ See Instructions for Schedule F (Form 1040). Seguence No. 14 Social security number (SSN) Total Forms Filed = 2,045,056 A Principal product. Describe in one or two words your principal crop or activity for the current tax year. B Enter code from Part IV 1,910,414 D Employer ID number (EIN), if any (1)  $\Box$  Cash = 2,001,622 (2)  $\Box$  Accrual = 39.468132.650 Material Participation 'Yes' = 1,971,903 E Did you "materially participate" in the operation of this business during 2007? If "No," see page F-2 for limit on passive losses.  $\square$  Yes  $\square$  No Farm Income—Cash Method. Complete Parts I and II (Accrual method. Complete Parts II and III, and Part I, line 11.) Do not include sales of livestock held for draft, breeding, sport, or dairy purposes. Report these sales on Form 4797. 349.921 Sales of livestock and other items you bought for resale . . . . 285,330 Cost or other basis of livestock and other items reported on line 1. 365,722 3 Subtract line 2 from line 1 . . . . . . . . . . . . \*\*1,283,647 4 Sales of livestock, produce, grains, and other products you raised. \*\*468,984 \*\*474,314 **5a** Cooperative distributions (Form(s) 1099-PATR) . 5b Taxable amount \*\*715.050 \*\*706.789 6b 6a Agricultural program payments (see page F-3) . 6b Taxable amount Commodity Credit Corporation (CCC) loans (see page F-3): \*\*16.068 7a a CCC loans reported under election . \*\*2,669 \*\*2,562 7c **b** CCC loans forfeited . . . . . . . . . 7c Taxable amount Crop insurance proceeds and federal crop disaster payments (see page F-3): \*\*115,650 123,530 8h 8d c If election to defer to 2008 is attached, check here ▶ □ 8d Amount deferred from 2006 \*\*206,514 9 \*\*644,469 10 Other income, including federal and state gasoline or fuel tax credit or refund (see page F-3) . . . . . Gross income. Add amounts in the right column for lines 3 through 10. If you use the accrual method, enter 1,748,687 Part II Farm Expenses—Cash and Accrual Method. Do not include personal or living expenses such as taxes, insurance, or repairs on your home. Pension and profit-sharing 600,364 12 25 2,768 plans . . . . . . . 527,921 13 Rent or lease (see page F-6): a Vehicles, machinery, and 39,489 14 26a equipment . . . . . 552.795 15 26b **b** Other (land, animals, etc.) . 1,417,731 27 27 Repairs and maintenance . 673,577 28 28 Seeds and plants . . 1,565,332 16 29 29 Storage and warehousing . 1,224,586 30 30 Supplies . . . . . 40.716 1,191,270 17 31 31 Taxes . . . 1,143,064 32 18 32 Utilities 854,135 33 19 33 Veterinary, breeding, and medicine 20 Other expenses (specify): 1.272.961 21 34a

21	Gasoline, fuel, and oil	21	1,272,961		а		34a	
22	Insurance (other than health)	22	1,099,509		b		34b	
23	Interest:				С		34c	
a	Mortgage (paid to banks, etc.)	23a	450,521		d		34d	
	Other	23b	547,505		е		34e	
24	Labor hired (less employment credits)	24	406,240		f		34f	
35	Total expenses. Add lines 12 thre	ough (	To 34f. If line 34f is neg	tal of ative,	all unmarked expe	nses = 1,730,795	35	1,961,254
36								
	Net farm profit or (loss). Subtract line 35 from line 11. Nondeductible Loss (+) / Suspended Carryover (-)  If a profit, enter the profit on Form 1040, line 18, and also on Schedule SE, line 1. = 10,365							
	If you file Form 1040NR, enter the							

 If a loss, you must go to line 37. Estates, trusts, and partnerships, see page F-6. If you have a loss, you must check the box that describes your investment in this activity (see page F-7).

• If you checked 37a, enter the loss on Form 1040, line 18, and also on Schedule SE, line 1. If you file Form 1040NR, enter the loss on Form 1040NR, line 19.

At risk = 1,419,457• If you checked 37b, you must attach Form 6198. Your loss may be limited.

37a All investment is at risk. **37b** Some investment is not at risk. Schedule F (Form 1040) 2007

#### NUMBER OF RETURNS FILED FOR SELECTED LINES

#### Part III Farm Income—Accrual Method (see page F-7).

Do not include sales of livestock held for draft, breeding, sport, or dairy purposes. Report these sales on Form 4797 and do not include this livestock on line 46 below.

38	Sales of livestock, produce, grains, and other products	38	**1,283,647
39a	Cooperative distributions (Form(s) 1099-PATR) .   39a   **474,314   39b Taxable amount	39b	**468,984
40a	Agricultural program payments	40b	**706,789
4.4	0		
41	Commodity Credit Corporation (CCC) loans:	44 -	**16.068
а	CCC loans reported under election	41a	10,000
b	CCC loans forfeited	41c	**2,562
42	Crop insurance proceeds	42	**115,650
43	Custom hire (machine work) income	43	**206,514
44	Other income, including federal and state gasoline or fuel tax credit or refund	44	**644,469
45	Add amounts in the right column for lines 38 through 44	45	11,283
46	Inventory of livestock, produce, grains, and other products at beginning of the year		
47	Cost of livestock, produce, grains, and other products purchased during		
	the year	-	
48	Add lines 46 and 47	-	
49	Inventory of livestock, produce, grains, and other products at end of year		
50	Cost of livestock, produce, grains, and other products sold. Subtract line 49 from line 48*	50	
51	Gross income. Subtract line 50 from line 45. Enter the result here and on Part I, line 11	51	11,446

\*If you use the unit-livestock-price method or the farm-price method of valuing inventory and the amount on line 49 is larger than the amount on line 48, subtract line 48 from line 49. Enter the result on line 50. Add lines 45 and 50. Enter the total on line 51 and on Part I, line 11.

#### Part IV Principal Agricultural Activity Codes



File Schedule C (Form 1040) or Schedule C-EZ (Form 1040) instead of Schedule F if (a) your principal source of income is from providing

agricultural services such as soil preparation, veterinary, farm labor, horticultural, or management for a fee or on a contract basis, or **(b)** you are engaged in the business of breeding, raising, and caring for dogs, cats, or other pet animals.

These codes for the Principal Agricultural Activity classify farms by their primary activity to facilitate the administration of the Internal Revenue Code. These six-digit codes are based on the North American Industry Classification System (NAICS).

Select the code that best identifies your primary farming activity and enter the six digit number on page 1, line B.

#### **Crop Production**

111100 Oilseed and grain farming111210 Vegetable and melon farming

111300 Fruit and tree nut farming

111400 Greenhouse, nursery, and floriculture production

111900 Other crop farming

#### **Animal Production**

112111 Beef cattle ranching and farming

112112 Cattle feedlots

112120 Dairy cattle and milk production

112210 Hog and pig farming

112300 Poultry and egg production

112400 Sheep and goat farming

112510 Aquaculture

112900 Other animal production

#### Forestry and Logging

113000 Forestry and logging (including forest nurseries and timber tracts)

Page 2

## Schedule R (Form 1040)

Department of the Treasury Internal Revenue Service

NUMBER OF RETURNS FILED FOR SELECTED LINES

# Credit for the Elderly or the Disabled

▶ Attach to Form 1040.

You may be able to take this credit and reduce your tax if by the end of 2007:

► See Instructions for Schedule R (Form 1040).

OMB No. 1545-0074 Attachment Sequence No.

Name(s) shown on Form 1040

Total Schedules Filed = 240,104

Your social security number

<ul> <li>You were age 65 or older</li> </ul>	or	<ul> <li>You were under age 65, you retired on permanent and total disably you received taxable disability income.</li> </ul>	lity,	and
But you must also meet oth	ner test	s. See page R-1.		
In most cases, the IRS	can fi	gure the credit for you. See page R-1.		
Before you begin: Figure to	he amo	ount of any foreign tax credit you are claiming on Form 1040, line 51, it	it a	pplies.
Part I Check the Box	for Yo	ur Filing Status and Age Total Filing Status Age Indicator Boxes Checked	= 24	0,104
If your filing status is:	Ar	d by the end of 2007: Check on	ly o	ne box:
Single, Head of household, or	1	You were 65 or older	1	
Qualifying widow(er)	2	You were under 65 and you retired on permanent and total disability	2	
	3	Both spouses were 65 or older	3	
	4	Both spouses were under 65, but only one spouse retired on permanent and total disability	4	
Married filing jointly	5	Both spouses were under 65, and both retired on permanent and total disability	5	
		One spouse was 65 or older, and the other spouse was under 65 and retired on permanent and total disability	6	
	7	One spouse was 65 or older, and the other spouse was under 65 and <b>not</b> retired on permanent and total disability	7	
Married filing	8	You were 65 or older and you lived apart from your spouse for all of 2007	8	
separately	9	You were under 65, you retired on permanent and total disability, and you lived apart from your spouse for all of 2007	9	
Did you check You 1, 3, 7,	es —	Skip Part II and complete Part III on the back.		
	lo —	Complete Parts II and III.		
Part II Statement of Pe	ermane	ent and Total Disability (Complete only if you checked box 2, 4, 5, 6,	or 9	above.)
		ement for this disability for 1983 or an earlier year, or you filed or go 1983 and your physician signed line B on the statement, <b>and</b>	nt a	
2 Due to your continued in 2007, check this bo		ed condition, you were unable to engage in any substantial gainful acti	•	
<ul> <li>If you checked this I</li> </ul>	oox, yo	ou do not have to get another statement for 2007.		
<ul> <li>If you did not check keep the statement</li> </ul>		ox, have your physician complete the statement on page R-4. You <b>mu</b> r records.	ıst	

Schedule R (Form 1040) 2007

Pai	t III Figure Your Credit			
10	If you checked (in Part I):     Enter:       Box 1, 2, 4, or 7	10		_
	Did you check box 2, 4, 5, 6, or 9 in Part I?  Yes You must complete line 11.  Enter the amount from line 10 on line 12 and go to line 13.			
11	<ul> <li>If you checked (in Part I):</li> <li>Box 6, add \$5,000 to the taxable disability income of the spouse who was under age 65. Enter the total.</li> <li>Box 2, 4, or 9, enter your taxable disability income.</li> <li>Box 5, add your taxable disability income to your spouse's taxable disability income. Enter the total.</li> </ul>	11	6,689	
TIP	For more details on what to include on line 11, see page R-3.			
12	If you completed line 11, enter the <b>smaller</b> of line 10 or line 11; <b>all others,</b> enter the amount from line 10	12	134,231	
13	Enter the following pensions, annuities, or disability income that you (and your spouse if filing a joint return) received in 2007.			
а	Nontaxable part of social security benefits and nontaxable part of railroad retirement benefits treated as social security (see page R-3).			
b	Nontaxable veterans' pensions and any other pension, annuity, or disability benefit that is excluded from income under any other provision of law (see page R-3).			
С	Add lines 13a and 13b. (Even though these income items are not taxable, they <b>must</b> be included here to figure your credit.) If you did not receive any of the types of nontaxable income listed on line 13a or 13b, enter -0- on line 13c			
14	Enter the amount from Form 1040, line 38			
15	If you checked (in Part I): Enter:  Box 1 or 2 \$7,500  Box 3, 4, 5, 6, or 7 \$10,000  Box 8 or 9 \$5,000			
16 17	Subtract line 15 from line 14. If zero or less, enter -0			
18		18	124,533	
19	Add lines 13c and 17	19	117,376	
20	Multiply line 19 by 15% (.15)	20		_
21	Enter the amount from Form 1040, line 46			
22 23	Enter the total of any amounts from Form 1040, lines 47 and 51	23		
23	Credit for the elderly or the disabled. Enter the smaller of line 20 or line 23 here and			_
<b>4</b>	on Form 1040 line 48	04	80 767	

SCHEDULE SE (Form 1040)

Department of the Treasury Internal Revenue Service NUMBER OF RETURNS FILED FOR SELECTED LINES

# **Self-Employment Tax**

► Attach to Form 1040. ► See Instructions for Schedule SE (Form 1040).

2007
Attachment
Sequence No. 17

Name of person with **self-employment** income (as shown on Form 1040)

Total Scheduled Filed = 17,881,314 with self-e

Social security number of person with self-employment income ▶

#### Who Must File Schedule SE

You must file Schedule SE if:

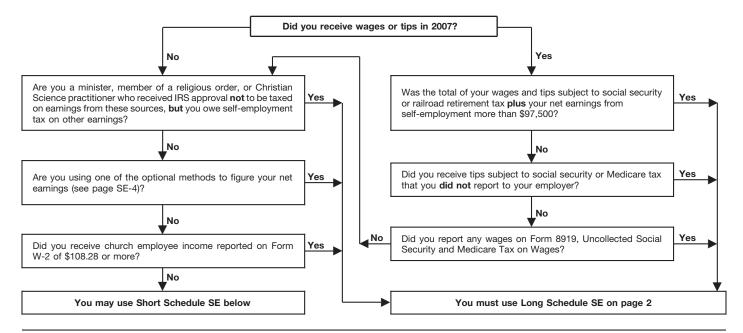
- You had net earnings from self-employment from **other than** church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, **or**
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order **is not** church employee income (see page SE-1).

**Note.** Even if you had a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either "optional method" in Part II of Long Schedule SE (see page SE-4).

**Exception.** If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner **and** you filed Form 4361 and received IRS approval not to be taxed on those earnings, **do not** file Schedule SE. Instead, write "Exempt–Form 4361" on Form 1040, line 58.

## May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE, above.



#### Section A-Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1	670,930
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see page SE-1 for amounts to report on this line. See page SE-3 for other income to report	2	17,455,272
3	Combine lines 1 and 2	3	
4	Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If less than \$400, do not file this schedule; you do not owe self-employment tax	4	17,833,963
5	Self-employment tax. If the amount on line 4 is:  ● \$97,500 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 58.		
	<ul> <li>More than \$97,500, multiply line 4 by 2.9% (.029). Then, add \$12,090 to the result.</li> </ul>		
	Enter the total here and on Form 1040, line 58	5	17,840,382
6	<b>Deduction for one-half of self-employment tax.</b> Multiply line 5 by 50% (.5). Enter the result here and on <b>Form 1040, line 27 6</b>		

NUMBER OF RETURNS FILED FOR SI Schedule SE (Form 1040) 2007	ELECTED LINES  Attachment Sequence No. 17	Page <b>2</b>
Name of person with <b>self-employment</b> income (as shown on Form 1040)	Social security number of person with self-employment income ▶	
Section B—Long Schedule SE		
Part I Self-Employment Tax		

Sec	tion B—Long Schedule SE			
Par	t I Self-Employment Tax			
4c a	e. If your only income subject to self-employment tax is <b>church employee income</b> , skip lines 1 that go to line 5a. Income from services you performed as a minister or a member of a religious order. See page SE-1.			
A	If you are a minister, member of a religious order, or Christian Science practitioner <b>and</b> you filed had \$400 or more of <b>other</b> net earnings from self-employment, check here and continue with Pa			
1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. <b>Note.</b> Skip this line if you use the farm optional method (see page SE-4)	1	670.930	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see page SE-1 for amounts to report on this line. See page SE-3 for other income to report. <b>Note.</b> Skip this line if you use the nonfarm optional method (see page SE-4)	2	17,455,272	
3	Combine lines 1 and 2	3		
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3	4a	17,833,963	
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b		
С	Combine lines 4a and 4b. If less than \$400, <b>stop</b> ; you do not owe self-employment tax. <b>Exception.</b> If less than \$400 and you had <b>church employee income</b> , enter -0- and continue	4c	17,817,417	
5a	Enter your <b>church employee income</b> from Form W-2. See page SE-1 for definition of church employee income			
b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0	5b		
6	Net earnings from self-employment. Add lines 4c and 5b	6	17,840,382	
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2007	7	97,500	00
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$97,500 or more, skip lines 8b through 10, and go to line 11			
b	Unreported tips subject to social security tax (from Form 4137, line 10) 8b 12,876			
С	Wages subject to social security tax (from Form 8919, line 10) 8c 4,514			
d	Add lines 8a, 8b, and 8c	8d	1,886,211	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 . ▶	9		
10	Multiply the <b>smaller</b> of line 6 or line 9 by 12.4% (.124)	10	17,138,825	
11	Multiply line 6 by 2.9% (.029)	11	17,840,382	
12	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 58	12	17,840,382	
13	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.5). Enter the result here and on Form 1040, line 27			
Par	t II Optional Methods To Figure Net Earnings (see page SE-4)			
	<b>Optional Method.</b> You may use this method <b>only</b> if <b>(a)</b> your gross farm income¹ was not more \$2,400, <b>or (b)</b> your net farm profits² were less than \$1,733.			
14	Maximum income for optional methods	14	1,600	00
15	Enter the <b>smaller</b> of: two-thirds (%) of gross farm income¹ (not less than zero) <b>or</b> \$1,600. Also			
	include this amount on line 4b above	15	20,955	
than	farm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less \$1,733 and also less than 72.189% of your gross nonfarm income,⁴ and (b) you had net earnings self-employment of at least \$400 in 2 of the prior 3 years.			
	tion. You may use this method no more than five times.			
16	Subtract line 15 from line 14	16		
17	Enter the <b>smaller</b> of: two-thirds (%) of gross nonfarm income <sup>4</sup> (not less than zero) <b>or</b> the amount on line 16. Also include this amount on line 4b above	17	8,293	

<sup>1</sup> From	Sch.	F.	line	11.	and	Sch.	K-1	(Form	1065),	
hox 1				,					//	

 $<sup>^2\,\</sup>mbox{From Sch.}$  F, line 36, and Sch. K-1 (Form 1065), box 14, code A.

<sup>&</sup>lt;sup>3</sup> From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.

 $<sup>^4</sup>$  From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.

Form **2106** 

# **Employee Business Expenses**

NUMBER OF RETURNS FILED FOR SELECTED LINES

See separate instructions.

Occupation in which you incurred expenses

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Your name

► Attach to Form 1040 or Form 1040NR.

Attachment Sequence No. **54** 

Social security number

Total Forms Filed = 8,966,892 Includes 4,494,485 Form 2106EZ's Part I **Employee Business Expenses and Reimbursements** Column B Column A Step 1 Enter Your Expenses Other Than Meals Meals and and Entertainment Entertainment Vehicle expense from line 22 or line 29. (Rural mail carriers: See 5,144,599 1 2 Parking fees, tolls, and transportation, including train, bus, etc., that 2 2,072,192 did not involve overnight travel or commuting to and from work . . . Travel expense while away from home overnight, including lodging, 1,888,053 3 airplane, car rental, etc. Do not include meals and entertainment Business expenses not included on lines 1 through 3. Do not 5,553,523 include meals and entertainment. 3,112,200 5 Meals and entertainment expenses (see instructions) . . . . Total expenses. In Column A, add lines 1 through 4 and enter the 7,895,879 6 result. In Column B, enter the amount from line 5 Note: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8. Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1 Enter reimbursements received from your employer that were not reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see 460.703 180,700 instructions) 7 Step 3 Figure Expenses To Deduct on Schedule A (Form 1040 or Form 1040NR) Subtract line 7 from line 6. If zero or less, enter -0-. However, if line 7 is greater than line 6 in Column A, report the excess as 7,876,559 3.098.782 8 income on Form 1040, line 7 (or on Form 1040NR, line 8) . . . Note: If both columns of line 8 are zero, you cannot deduct employee business expenses. Stop here and attach Form 2106 to your return. In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 75% (.75) 3,101,296 instead of 50%. For details, see instructions.) . . . . . . .

Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 9). (Reservists, qualified performing artists, fee-basis state or local government officials, and individuals with

disabilities: See the instructions for special rules on where to enter the total.)

8,148,944

10

Form 2106 (2007) NUMBER OF RETURNS FILED FOR SELECTED LINES Page 2

	t II Vehicle Expenses								
	tion A—General Information	(You	must complete this	section if you		(a) Vehicle	1	(b) Vehicle	e 2
are	claiming vehicle expenses.)							(5) 10	
11	Enter the date the vehicle was pl				11	/ /		/ /	
12	Total miles the vehicle was drive		•		12		miles		miles
13	Business miles included on line				13		miles		miles
14	Percent of business use. Divide I		-		15		% miles		% miles
15	Average daily roundtrip commuting	_			16		miles miles		miles
16	Commuting miles included on lin Other miles. Add lines 13 and 16				17		miles		miles
17								☐ Yes [	☐ No
18 19	Do you (or your spouse) have an Was your vehicle available for pe							. =	No
20	Do you have evidence to suppor							. =	□ No
21	If "Yes," is the evidence written?	-						· ☐ Yes	∃ No
Sect	ion B—Standard Mileage Rate (							ction or Section	
22	Multiply line 13 by 48.5¢ (.485)						22	3,889,772	
Sec	tion C—Actual Expenses		<b>(a)</b> Ve	hicle 1			<b>(b)</b> Ve	hicle 2	
23	Gasoline, oil, repairs, vehicle								
	insurance, etc	23							
24a	Vehicle rentals	24a							
b	Inclusion amount (see instructions) .	24b							<u> </u>
С	Subtract line 24b from line 24a .	24c							
25	Value of employer-provided								
	vehicle (applies only if 100% of								
	annual lease value was included	25							
	on Form W-2—see instructions)	25 26							+
26	Add lines 23, 24c, and 25	20							+
27	Multiply line 26 by the	27							
28	percentage on line 14	28							
29	Add lines 27 and 28. Enter total								
20	here and on line 1	29		495,821					
Sec	tion D—Depreciation of Vehicles	Use t	nis section only if you	owned the vehic	le and	are completing	Section	on C for the vel	hicle.)
			<b>(a)</b> Ve	hicle 1			<b>(b)</b> Ve	hicle 2	
30	Enter cost or other basis (see								
	instructions)	30							
31	Enter section 179 deduction								
	(see instructions)	31							
32	Multiply line 30 by line 14 (see								
	instructions if you claimed the								
	section 179 deduction or								
	special allowance)	32							
33	Enter depreciation method and	33							
	percentage (see instructions) .	33							T
34	Multiply line 32 by the percentage	34							
35	on line 33 (see instructions) Add lines 31 and 34	35							
36	Enter the applicable limit explained in the line 36 instructions	36							
37	Multiply line 36 by the								
	percentage on line 14	37							
38	Enter the <b>smaller</b> of line 35								
	or line 37. If you skipped lines								
	36 and 37, enter the amount								
	from line 35. Also enter this amount on line 28 above .	20							
	amount on the Zo above .	38		I	1				- 1

Form **2106-EZ** 

Department of the Treasury

Internal Revenue Service

# NUMBER OF RETURNS FILED FOR SELECTED LINES

Unreimbursed Employee Business Expenses

▶ Attach to Form 1040 or Form 1040NR.

2007
Attachment
Sequence No. 54A

OMB No. 1545-0074

Your name

Total Forms Filed = 4,494,485

Occupation in which you incurred expenses

Social security number

# You May Use This Form Only if All of the Following Apply.

- You are an employee deducting ordinary and necessary expenses attributable to your job. An ordinary expense is one that is common and accepted in your field of trade, business, or profession. A necessary expense is one that is helpful and appropriate for your business. An expense does not have to be required to be considered necessary.
- You do not get reimbursed by your employer for any expenses (amounts your employer included in box 1 of your Form W-2 are not considered reimbursements for this purpose).
- If you are claiming vehicle expense, you are using the standard mileage rate for 2007.

Caution: You can use the standard mileage rate for 2007 only if: (a) you owned the vehicle and used the standard mileage rate for the first year you placed the vehicle in service, or (b) you leased the vehicle and used the standard mileage rate for the portion of the lease period after 1997.

you p	blaced the vehicle in service, <b>or (b)</b> you leased the vehicle and used the standard inheage rate for the portion	i oi liie	e lease periou alter 13	<del></del>
Pai	rt I Figure Your Expenses			
1	Vehicle expense using the standard mileage rate. Complete Part II and multiply line 8a by 48.5¢ (.485)	1		
2	Parking fees, tolls, and transportation, including train, bus, etc., that <b>did not</b> involve overnight travel or commuting to and from work	2		
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment	3		
4	Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment	4		
5	Meals and entertainment expenses: $\  \  \  \  \  \  \  \  \  \  \  \  \ $	5		
6	Total expenses. Add lines 1 through 5. Enter here and on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR, line 9)). (Armed Forces reservists, fee-basis state or local government officials, qualified performing artists, and individuals with disabilities: See the instructions for special rules on where to enter this amount.)	6		
Pai	Information on Your Vehicle. Complete this part only if you are claiming vehicle.	cle exp	pense on line 1.	
7	When did you place your vehicle in service for business use? (month, day, year) ▶	/	/	
8	Of the total number of miles you drove your vehicle during 2007, enter the number of miles you	u usec	d your vehicle for:	
	a Business b Commuting (see instructions) c C	ther		
9	Do you (or your spouse) have another vehicle available for personal use?		. 🗆 Yes 🗆	No
10	Was your vehicle available for personal use during off-duty hours?		. 🗆 Yes 🗆	No
11a	Do you have evidence to support your deduction?		. 🗆 Yes 🗆	No
h	If "Ves" is the evidence written?		□ Ves □	No

	RRECTED	(99)			
Name, address, and ZIP code of RIC or REIT	OMB No. 1545-0145	Notice to Shareholder of Long-Term Capi			
	2007	For calendar year 2007, or ot regulated investment comp real estate investment	any (RIĆ) or the		
	Form <b>2439</b>	beginning,	•		
Total Forms Filed = 27,174	Form <b>243</b> 9	ending,	20		
Identification number of RIC or REIT	1a Total undistributed 26,858	1a Total undistributed long-term capital gains 26,858			
Shareholder's identifying number	1b Unrecaptured section 7,989	ion 1250 gain	Attach to Form 1120-RIC or Form 1120-REIT		
Shareholder's name, address, and ZIP code	1c Section 1202 gain	1d Collectibles (28%) gain			
	0	1,437	For Instructions		
	2 Tax paid by the RI	C or REIT on the box 1a gains	and Paperwork Reduction Act Notice, see back of Copies A and D.		
Form <b>2439</b>	Cat. No. 11858E	Department of the Treasury	- Internal Revenue Service		

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

NUMBER OF RETURNS FILED FOR SELECTED LINES

Form **2441** 

# **Child and Dependent Care Expenses**

NUMBER OF RETURNS FILED FOR SELECTED LINES

Attach to Form 1040 or Form 1040NR.

► See separate instructions.

OMB No. 1545-0074

2007

Attachment
Sequence No. 21

Department of the Treasury
Internal Revenue Service (99)

Part I

Name(s) shown on return

Total Forms Filed = 7,296,478

Your social security number

Persons or Organizations Who Provided the Care—You must complete this part.

**Before you begin:** Figure the amount of any foreign tax credit you are claiming on Form 1040, line 51, or Form 1040NR, line 46.

	(If you have m	nore than two care pr	oviders, see the inst	ructions.)				
1	(a) Care provider's name	(number, street,	<b>(b)</b> Address apt. no., city, state, and ZIP	code)	(c) Identifying (SSN or I		(d) Amount pa (see instruction	
					†		7,237,209	
		'	¬—— No —	Cor	mplete only P	art II ha	low	
		Did you receive						
	дере	endent care benefits?	Yes	→ Cor	mplete Part II	I on the	back next.	
Cau	tion. If the care was pr	rovided in your home, you	u may owe employmer	it taxes. See t	he instruction	s for For	m 1040, line 62,	or Form
	ONR, line 57.							
		ild and Dependent C						
2		our qualifying person(s)	. If you have more that			1-		
	(i First	a) Qualifying person's name	Last		ng person's socia rity number	' incu	<ul> <li>Qualified expenses rred and paid in 2007 person listed in colum</li> </ul>	for the
					7,148,780	0	7,074,571	
					2,342,34	0	2,307,096	
3		column (c) of line 2. <b>Do I</b> two or more persons. If		•	ount from	3	6,805,533	
4		ncome. See instructions				4	7,095,602	
5	If married filing jointly	y, enter your spouse's enter the instructions); all ot	earned income (if your			5	4,320,893	
6	Enter the <b>smallest</b> o	· · · · · · · · · · · · · · · · · · ·				6	6,772,762	
7		om Form 1040, line 38,	or Form					
8	Enter on line 8 the d	ecimal amount shown b	elow that applies to the	ne amount or	line 7			
	If line 7 is:		If line 7 is:					
	Over over	ot Decimal amount is	Over ove		imal ount is			
	\$0—15,000	.35	\$29,000—31,0	. 00	27			
	15,000—17,000		31,000—33,0		26	_	7 404 045	,
	17,000—19,000		33,000—35,0		_	8	7,121,015 ×	•
	19,000—21,000		35,000—37,0		24			
	21,000—23,000 23,000—25,000		37,000—39,0 39,000—41,0		23 22			
	25,000—25,000 25,000—27,000		41.000—43.0		21			
	27.000—29.000		43,000—No li		20			
9	, ,	e decimal amount on lin	,	expenses in	2007, see	9	6,772,759	
0	Enter the amount	from Form 1040, line	e 46, or					
		3	1					
1		from Form 1040, line						
		16						
2		n line 10. If zero or less,		e the credit		12		
3		d dependent care expe			or line 12			
	here and on Form 10	040, line 47, or Form 10	40NR, line 44		<u> </u>	13	6,491,844	

Page 2

Form 2441 (2007)

Pa	rt III Dependent Care Benefits			
14	Enter the total amount of <b>dependent care benefits</b> you received in 2007. Amounts you received as an employee should be shown in box 10 of your Form(s) W-2. <b>Do not</b> include amounts reported as wages in box 1 of Form(s) W-2. If you were self-employed or a partner, include amounts you received under a dependent care assistance program from your sole proprietorship or partnership	14	1,160,240	
15	Enter the amount, if any, you carried over from 2006 and used in 2007 during the grace		0.500	
	period. See instructions	15	3,520	<del>                                     </del>
16	Enter the amount, if any, you forfeited or carried forward to 2008. See instructions	16 17	( 50,206	<del>                                       </del>
17	Combine lines 14 through 16. See instructions	- 17		
18	Enter the total amount of <b>qualified expenses</b> incurred in 2007 for the care of the <b>qualifying person(s)</b>			
19	Enter the <b>smaller</b> of line 17 or 18			
20	Enter your <b>earned income.</b> See instructions <b>20</b> 7,095,602			
21	Enter the amount shown below that applies to you.			
	<ul> <li>If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions for line 5).</li> <li>4,320,893</li> </ul>			
	If married filing separately, see the instructions for the amount to enter.			
	All others, enter the amount from line 20.			
22	Enter the <b>smallest</b> of line 19, 20, or 21			
23	Enter the amount from line 14 that you received from your sole proprietorship or partnership. If you did not receive any such amounts, enter -0-	23	3,413	
24	Subtract line 23 from line 17			
25	Enter \$5,000 (\$2,500 if married filing separately <b>and</b> you were required to enter your spouse's earned income on line 21)	25		
26	<b>Deductible benefits.</b> Enter the <b>smallest</b> of line 22, 23, or 25. Also, include this amount on the appropriate line(s) of your return. See instructions	26	2,090	
27	Enter the <b>smaller</b> of line 22 or 25			
28	Enter the amount from line 26		200 700	
29	<b>Excluded benefits.</b> Subtract line 28 from line 27. If zero or less, enter -0	29	896,720	
30	<b>Taxable benefits.</b> Subtract line 29 from line 24. If zero or less, enter -0 Also, include this amount on Form 1040, line 7, or Form 1040NR, line 8. On the dotted line next to Form 1040, line 7, or Form 1040NR, line 8, enter "DCB"	30	309,209	
	To claim the child and dependent care credit, complete lines 31–35 below.			
31	Enter \$3,000 (\$6,000 if two or more qualifying persons)	31		
32	Add lines 26 and 29	32	898,810	
33	Subtract line 32 from line 31. If zero or less, <b>stop.</b> You cannot take the credit. <b>Exception.</b> If you paid 2006 expenses in 2007, see the instructions for line 9	33		
34	Complete line 2 on the front of this form. <b>Do not</b> include in column (c) any benefits shown on line 32 above. Then, add the amounts in column (c) and enter the total here	34		
35	Enter the <b>smaller</b> of line 33 or 34. Also, enter this amount on line 3 on the front of this form and complete lines 4–13	35	6,805,533	

Form 3468
(Rev. December 2006)
Department of the Treasury

Internal Revenue Service (99)

#### **Investment Credit**

#### NUMBER OF RETURNS FILED FOR SELECTED LINES

► Attach to your tax return. See instructions.

OMB No. 1545-0155

Attachment Sequence No. **52** 

Name(s) shown on return Identifying number Total Forms Filed = 30,469 Rehabilitation credit (see instructions for requirements that must be met): a Check this box if you are electing under section 47(d)(5) to take your qualified rehabilitation expenditures into account for the tax year in which paid (or, for self-rehabilitated property, when capitalized). See instructions. Note: This election applies to the current tax year and to all later tax years. You may not revoke this election without IRS consent . . . . . . . . . . . . . **b** Enter the date on which the 24- or 60-month measuring period begins \_\_\_\_/\_\_\_ and ends \_\_\_\_/\_\_\_/ c Enter the adjusted basis of the building as of the beginning date above **d** Enter the amount of the qualified rehabilitation expenditures incurred, or treated as incurred, during the period on line 1b above . . . . \$ ...... Enter the amount of qualified rehabilitation expenditures and multiply by the percentage shown: 1e 2.352 1f g Certified historic structures located in the Gulf Opportunity Zone . \$ \_\_\_\_\_ × 26% (.26) \* 1g 1h 2.941 For properties identified on lines 1g or 1h, complete lines 1i and 1j i Enter the assigned NPS project number or the pass-through entity's j Enter the date that the NPS approved the Request for Certification of 1,016 1k k Rehabilitation credit from an electing large partnership (Schedule K-1 (Form 1065-B), box 9) 2 Energy credit: a Basis of property using geothermal energy placed in service during 1.215 2a the tax year (see instructions) \$ \_\_\_\_\_ × 10% (.10) **b** Basis of property using solar illumination or solar energy placed in service 2,752 2b Qualified fuel cell property (see instructions): c Basis of property installed during the tax year \$ ..... × 30% (.30) **d** Kilowatt capacity of property in **c** 2d above . . . ▶ .....×\$1,000 e Enter the lesser of line 2c or 2d . . . . . Qualified microturbine property (see instructions): f Basis of property installed during the tax year \$ ..... × 10% (.10) g Kilowatt capacity of property in f 2g above . . . ▶ .....×\$200 3,958 2i i Total. Add lines 2a, 2b, 2e, and 2h **3** Qualifying advanced coal project credit (see instructions): a Basis of qualified investment in integrated gasification combined cycle property 3a **b** Basis of qualified investment in property other than in **a** above placed in service during the tax year ▶ \$\_\_\_\_\_ × 15% (.15) 20.589 3c Qualifying qasification project credit (see instructions). Basis of qualified investment in property 4 221 48 5 Credit from cooperatives. Enter the unused investment credit from cooperatives . . . Add lines 1e through 1h, 1k, 2i, 3c, 4, and 5. Report this amount on the applicable line of Nondeductibe investment credit = 47 Form 3800 (e.g., line 1a of the 2006 Form 3800) 30,462

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

# **General Business Credit**

NUMBER OF RETURNS FILED FOR SELECTED LINES

► See separate instructions.

OMB No. 1545-0895

Attachment Sequence No. **22** 

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Attach to your tax return.

Total Forms Filed = 437,644

Identifying number

#### Part I **Current Year Credit**

Important: You may not be required to complete and file a separate credit form (shown in parentheses below) to claim the credit. For details, see the instructions.

1a	Investment credit (attach Form 3468)	1a	30,465	
	Welfare-to-work credit (Form 8861)	1b	6,490	
	Credit for increasing research activities (Form 6765)	1c	56,780	
d	Low-income housing credit (Form 8586) (enter EIN if claiming this credit from a pass-through			
	entity:)	1d	71,456	
е	Disabled access credit (Form 8826) (do not enter more than \$5,000)	1e	9,151	
f	Renewable electricity production credit (Form 8835, Section A only)	1f	1,980	
g	Indian employment credit (Form 8845)	1g	4,889	
h	Orphan drug credit (Form 8820)	1h	536	
i	New markets credit (Form 8874) (enter EIN if claiming this credit from a pass-through entity:			
		1i	379	
j	Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	1j	6,214	
k	Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming			
	this credit from a pass-through entity:)	1k	10,600	
- 1	Qualified railroad track maintenance credit (Form 8900)	11	453	
m	Biodiesel and renewable diesel fuels credit (attach Form 8864)	1m	4,306	
n	Low sulfur diesel fuel production credit (Form 8896)	1n	3,594	
0	Distilled spirits credit (Form 8906)	10	1,217	
р	Nonconventional source fuel credit (Form 8907)	1p	9,735	
q	Energy efficient home credit (Form 8908)	1q	3,831	
r	Energy efficient appliance credit (Form 8909)	1r	723	
S	Alternative motor vehicle credit (Form 8910)	1s	24,901	
t	Alternative fuel vehicle refueling property credit (Form 8911)	1t	467	
u	Hurricane Katrina housing credit (only from S corporations, partnerships, estates, and			
	cooperatives)	1u	1,547	
V	Mine rescue team training credit (Form 8923)	1v	2,077	
W	Credit for contributions to selected community development corporations (Form 8847)	1w	310	
X	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1x	5,747	
_		2	250,674	
2	Add lines 1a through 1x		230,074	
2	Descrive estivity exadite included on line 2 (one instructions)	3	107,586	
3	Passive activity credits included on line 2 (see instructions)		107,000	
4	Subtract line 2 from line 2	4	150,188	
4	Subtract line 3 from line 2		100,100	
5	Passive activity credits allowed for 2007 (see instructions)	5	103,231	
3	rassive activity credits allowed for 2007 (see instructions)		,	
6	Carryforward of general business credit to 2007. See instructions for the schedule to attach	6	234.388	
0	Carrylorward of general business credit to 2007. See instructions for the schedule to attach			
7	Carryback of general business credit from 2008 (see instructions)	7		
•	carryback of general business credit from 2000 (see instructions)			
8	Current year credit. Add lines 4 through 7	8	415,336	
For I	Panarwork Reduction Act Notice see senarate instructions Cat No. 123025		Form 3800	(2007)

Page 2

Form 3800 (2007)

Part II Allowable Credit

<ul> <li>Regular tax before credits: <ul> <li>Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line 41</li> <li>Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the applicable line of your return</li> <li>Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return</li> </ul> </li> <li>Alternative minimum tax: <ul> <li>Individuals. Enter the amount from Form 6251, line 35</li> <li>Corporations. Enter the amount from Form 4626, line 14</li> <li>Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56</li> </ul> </li> <li>Add lines 9 and 10</li> <li>Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)</li> <li>Foreign tax credit</li> <li>Credits from Forms 5735 and 8834</li> <li>Coredits from Forms 5735 and 8834</li> <li>Coredits from Forms 5735 and 8834</li> <li>Ron-business alternative motor vehicle credit (Form 8910, line 18)</li> <li>Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)</li> </ul>	9 11	148,925	
<ul> <li>Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the applicable line of your return</li> <li>Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return</li> <li>Alternative minimum tax: <ul> <li>Individuals. Enter the amount from Form 6251, line 35</li> <li>Corporations. Enter the amount from Form 4626, line 14</li> <li>Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56</li> </ul> </li> <li>Add lines 9 and 10</li> <li>Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)</li> <li>Foreign tax credit</li> <li>Credits from Forms 5735 and 8834</li> <li>Non-business alternative motor vehicle credit (Form 8910, line 18)</li> <li>Non-business alternative fuel vehicle refueling property credit</li> </ul>	10	148,925	_
applicable line of your return  Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return  10 Alternative minimum tax:  Individuals. Enter the amount from Form 6251, line 35  Corporations. Enter the amount from Form 4626, line 14  Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56  11 Add lines 9 and 10  Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)  Table 12a  b Foreign tax credit  Credits from Forms 5735 and 8834  d Non-business alternative motor vehicle credit (Form 8910, line 18)  e Non-business alternative fuel vehicle refueling property credit		148,925	_
lines 1a and 1b, or the amount from the applicable line of your return  10 Alternative minimum tax:  Individuals. Enter the amount from Form 6251, line 35 Corporations. Enter the amount from Form 4626, line 14 Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56  11 Add lines 9 and 10  12a Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)  12a  12b  12b  12c  12d  Non-business alternative motor vehicle credit (Form 8910, line 18) Non-business alternative fuel vehicle refueling property credit		148,925	_
<ul> <li>Individuals. Enter the amount from Form 6251, line 35</li> <li>Corporations. Enter the amount from Form 4626, line 14</li> <li>Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56</li> <li>Add lines 9 and 10</li> <li>Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)</li> <li>Foreign tax credit</li> <li>Credits from Forms 5735 and 8834</li> <li>Non-business alternative motor vehicle credit (Form 8910, line 18)</li> <li>Non-business alternative fuel vehicle refueling property credit</li> </ul>		148,925	
Corporations. Enter the amount from Form 4626, line 14  Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56  11 Add lines 9 and 10  Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)  Foreign tax credit  Credits from Forms 5735 and 8834  Credits from Forms 5735 and 8834  Non-business alternative motor vehicle credit (Form 8910, line 18)  Non-business alternative fuel vehicle refueling property credit		148,925	
Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56.  11 Add lines 9 and 10		110,020	
11 Add lines 9 and 10	11		
12a Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)	11		
(or Form 1040NR, lines 44, 45, and 47 through 49)  b Foreign tax credit  c Credits from Forms 5735 and 8834  d Non-business alternative motor vehicle credit (Form 8910, line 18)  e Non-business alternative fuel vehicle refueling property credit			
b Foreign tax credit			
c Credits from Forms 5735 and 8834			
d Non-business alternative motor vehicle credit (Form 8910, line 18)			
line 18)			
line 18)			
(Form 8911, line 19)			
f Add lines 12a through 12e	12f		
	_		
<b>Net income tax.</b> Subtract line 12f from line 11. If zero, skip lines 14 through 17 and enter line 18	er -0- on     <b>13</b>	393,953	
14 Net regular tax. Subtract line 12f from line 9. If zero or less, enter -0-	3		
15 Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see	,		
instructions)	P		
16 Tentative minimum tax:			
<ul> <li>Individuals. Enter the amount from Form 6251, line 33</li> <li>Corporations. Enter the amount from Form 4626, line 12</li> <li>16 335,117</li> </ul>	,		
• Estates and trusts. Enter the amount from Form 1041,			
Schedule I, line 54			
17 Enter the greater of line 15 or line 16	17		—
Subtract line 17 from line 13. If zero or less, enter -0	18		
19 Credit allowed for the current year. Enter the smaller of line 8 or line 18. Individuals, es	states		
and trusts: See the instructions for line 19 if claiming the research credit. C corporation the line 19 instructions if there has been an ownership change, acquisition, or reorganize	s: See		
	w or on		
Report the amount from line 19 (if smaller than line 8, see instructions) as indicated below the applicable line of your return:		1	
	19	230,821	

Form **3903** 

# Moving Expenses

OMB No. 1545-0074

2007

Attachment Sequence No. **62** 

Department of the Treasury Internal Revenue Service ► Attach to Form 1040 or Form 1040NR.

NUMBER OF RETURNS FILED FOR SELECTED LINES

Name(s) shown on return

Your social security number

Total Forms Filed = 1.118.610 / See the Distance Test and Time Test in the instructions to find out if you can deduct your moving Before you begin: expenses. See Members of the Armed Forces on the back, if applicable. 991,225 1 Transportation and storage of household goods and personal effects (see instructions) . . . Travel (including lodging) from your old home to your new home (see instructions). **Do not** include 887,588 2 the cost of meals 1,114,405 3 Add lines 1 and 2 Enter the total amount your employer paid you for the expenses listed on lines 1 and 2 that is not included in box 1 of your Form W-2 (wages). This amount should be shown in 131,104 box 12 of your Form W-2 with code P 4 Is line 3 more than line 4? ✓ No. You cannot deduct your moving expenses. If line 3 is less than line 4, subtract line 3 from line 4 and include the result on Form 1040, line 7, or Form 1040NR, line 8. Yes. Subtract line 4 from line 3. Enter the result here and on Form 1040, line 26, or

# General Instructions What's New

For 2007, the standard mileage rate for using your vehicle to move to a new home is 20 cents a mile.

#### **Purpose of Form**

Use Form 3903 to figure your moving expense deduction for a move related to the start of work at a new principal place of work (workplace). If the new workplace is outside the United States or its possessions, you must be a U.S. citizen or resident alien to deduct your expenses.

If you qualify to deduct expenses for more than one move, use a separate Form 3903 for each move.

For more details, see Pub. 521, Moving Expenses.

# Moving Expenses You Can Deduct

Form 1040NR, line 26. This is your moving expense deduction

You can deduct the reasonable expenses of moving your household goods and personal effects and of traveling from your old home to your new home. Reasonable expenses can include the cost of lodging (but not meals) while traveling to your new home. You cannot deduct the cost of sightseeing trips.

## Who Can Deduct Moving Expenses

If you move to a new home because of a new principal workplace, you may be able to deduct your moving expenses whether you are self-employed or an employee. But you must meet both the distance test and time test that follow.



Members of the Armed Forces may not have to meet the distance test and time test. See instructions on the back.

5

1,083,733

#### **Distance Test**

Your new principal workplace must be at least 50 miles farther from your old home than your old workplace was. For example, if your old workplace was 3 miles from your old home, your new workplace must be at least 53 miles from that home. If you did not have an old workplace, your new workplace must be at least 50 miles from your old home. The distance between the two points is the shortest of the more commonly traveled routes between them.



To see if you meet the distance test, you can use the worksheet below.

#### **Distance Test Worksheet**

Keep a Copy for Your Records



1.	Number of miles from your <b>old home</b> to your <b>new workplace</b>	miles
2.	Number of miles from your <b>old home</b> to your <b>old workplace</b>	miles
3.	Subtract line 2 from line 1. If zero or less, enter -0	miles
	Is line 3 at least 50 miles?  Yes. You meet this test.  No. You do not meet this test. You cannot deduct your moving expenses. Do not complete Form 3903.	

Form **4136** 

Department of the Treasury

#### **Credit for Federal Tax Paid on Fuels**

NUMBER OF RETURNS FILED FOR SELECTED LINES

See the separate instructions.

► Attach this form to your income tax return.

2007
Attachment
Sequence No. 23

OMB No. 1545-0162

Internal Revenue Service

Name (as shown on your income tax return)

Data on this form reflects only form 1040 filers, not business or fiduciary filers

Taxpayer identification number Total Forms Filed = 305,765

Caution. Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 and 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 and 14), claimant certifies that a certificate has not been provided to the credit card issuer.

#### 1 Nontaxable Use of Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Off-highway business use		\$ .183	)	\$		
b	Use on a farm for farming purposes		.183	}			362
С	Other nontaxable use (see Caution above line 1)		.183	J	264,560		
d	Exported		.184		6,013		411

#### 2 Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ .15/.000*		\$		354
	<b>Caution.</b> This credit is not available for aviation gasoline taxed at \$.044 (purchased after February 29, 2008).				97		
b	Other nontaxable use (see Caution above line 1)		.193/.043*		2,456		324
С	Exported		.194/.044*		41		412
	*This rate applies after February 29, 2008.						

#### 3 Nontaxable Use of Undyed Diesel Fuel

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

	Exception. If any of the diesel fuel included in this claim dic	contain visible	evidence of dy	ye, attach an exp	planation and chec	anation and check here			
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN		
а	Nontaxable use		\$ .243	l	\$ 53,191		000		
b	Use on a farm for farming purposes		.243				360		
С	Use in trains		.243		35		353		
d	Use in certain intercity and local buses (see <b>Caution</b> above line 1)		.17		1,110		350		
е	Exported		.244		32		413		

#### 4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Claimant certifies that the kerosene did not contain visible evidence of dye.

	<b>Exception.</b> If any of the kerosene included in this claim did	contain visible	eviaence ot ay	e, attach an exp	pianation and chec	k nere	
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cr	edit	(e) CRN
а	Nontaxable use taxed at \$.244		\$ .243	<b></b> }	\$ 11,162		346
b	Use on a farm for farming purposes		.243				340
С	Use in certain intercity and local buses (see <b>Caution</b> above line 1)		.17		*		347
d	Exported		.244		0		414
е	Nontaxable use taxed at \$.044		.043		638		377
f	Nontaxable use taxed at \$.219		.218		638		369

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 12625R

Form **4136** (2007)

Form 4136 (2007)

Page 2

#### 5 Kerosene Used in Aviation (see Caution above line 1)

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cred	it (e) CRN
а	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		\$ .200		\$ 23	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219/.044*  Caution. This credit is not available for kerosene		.175/.000*			355
	taxed at \$.044 (purchased after February 29, 2008).				26	
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		11,162	346
d	Nontaxable use (other than use by state or local government) taxed at \$.219/.044*		.218/.043*		638	369
	*This rate applies after February 29, 2008.					•

#### 6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. ▶

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here . . .

		(b) Rate	(c) Gallons	(d)	Amount of c	redit	(e) CRN
а	Use by a state or local government	\$ .243		\$	53,191		360
b	Use in certain intercity and local buses	.17			1,110		350

#### 7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

Registration No. ▶

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

**Exception.** If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here . . .

		(b) Rate	(c) Gallons	(d) Amount of cr	edit	(e) CRN
а	Use by a state or local government	\$ .243		11,162		346
b	Sales from a blocked pump	.243		\$		340
С	Use in certain intercity and local buses	.17		*		347

#### 8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation

Registration No. ▶

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of c	redit	(e) CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$.219/.044*		\$.175/.000*		\$		055
	<b>Caution.</b> This credit is not available for kerosene taxed at \$.044 (purchased after February 29, 2008).				26		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		23		417
С	Nonexempt use in noncommercial aviation		.025/.200*		*		418
d	Other nontaxable uses taxed at \$.244		.243		11,162		346
е	Other nontaxable uses taxed at \$.219/.044*		.218/.043*		638		369
	*This rate applies after February 29, 2008						

#### 9 Alcohol Fuel Mixture Credit

#### Registration No. ▶

Claimant produced an alcohol fuel mixture by mixing taxable fuel with alcohol. The alcohol fuel mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant.

		(b) Rate	(c) Gallons of alcohol	(d) Amount of c	redit	(e) CRN
а	Alcohol fuel mixtures containing ethanol	\$ .51		\$ *		393
b	Alcohol fuel mixtures containing alcohol (other than ethanol)	.60		0		394

#### 10 Biodiesel or Renewable Diesel Mixture Credit

#### Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. Renewable diesel mixtures. Claimant produced a mixture by mixing renewable diesel with diesel fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass (as defined in section 45K(c)(3)) using a thermal depolymerization process, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975 or D396. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller, both of which have been edited as discussed in the Instructions for Form 4136. See the instructions for line 10 for details.

		(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of cre	edit	(e) CRN
а	Biodiesel (other than agri-biodiesel) mixtures	\$ .50		\$ *		388
b	Agri-biodiesel mixtures	1.00		747		390
С	Renewable diesel mixtures	1.00		0		307

#### 11 Nontaxable Use of Alternative Fuel

Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See page 5 in the Instructions for Form 4136 for the credit rate. (c) Gallons (b) Rate (d) Amount of credit (e) CRN (a) Type of use or gasoline gallon equivalents (GGE) a Liquefied petroleum gas (LPG) 745 \$.183 419 "P Series" fuels .183 0 420 \* Compressed natural gas (CNG) (GGE = 126.67 cu. ft.) .183 421 Liquefied hydrogen .183 0 422 Any liquid fuel derived from coal (including peat) through the Fischer-Tropsch process .243 0 423 .243 Liquid fuel derived from biomass 13 424 .243 425 g Liquefied natural gas (LNG)

# 12 Alternative Fuel Credit and Alternative Fuel Mixture Credit

#### Registration No. ▶

		(b) Rate	(c) Gallons or gasoline gallon equivalents (GGE)	(d) Amount of c	redit	(e) CRN
а	Liquefied petroleum gas (LPG)	\$ .50		\$ 815		426
b	"P Series" fuels	.50		14		427
С	Compressed natural gas (CNG) (GGE = 121 cu. ft.)	.50		14		428
d	Liquefied hydrogen	.50		0		429
е	Any liquid fuel derived from coal (including peat) through the Fischer-Tropsch process	.50		0		430
f	Liquid fuel derived from biomass	.50		0		431
g	Liquefied natural gas (LNG)	.50		*		432

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

NUMBER OF RETURNS FILED FOR SELECTED LINES Form 4136 (2007)

#### **Registered Credit Card Issuers** 13

#### Registration No. ▶

	(b) Rate	(c) Gallons	(d) Amount of c	redit	(e) CRN
a Diesel fuel sold for the exclusive use of a state or local government	\$ .243		\$ 53,191		360
<b>b</b> Kerosene sold for the exclusive use of a state or local government	.243		11,162		346
<b>c</b> Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219/.044*	.218/.043*		638		369
*This rate applies after February 29, 2008					

#### Nontaxable Use of a Diesel-Water Fuel Emulsion

	Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See page 6 in the Instructions for Form 4136 for the credit rate.											
		(d) Amount of c	redit	(e) CRN								
а	Nontaxable use		\$ .197		\$ *		309					
b	Exported		.198		0		306					

#### 15 Diesel-Water Fuel Emulsion Blending

#### Registration No. ▶

	(b) Rate	(c) Gallons	(d) A	mount of c	f credit (e) CR		
Blender credit	\$ .046		\$	0		310	

#### 16 Exported Dyed Fuels

	(b) Rate	(c) Gallons	(d) Amount of c	redit	(e) CRN
a Exported dyed diesel fuel	\$ .001		\$ *		415
<b>b</b> Exported dyed kerosene	.001		0		416

#### 17 Leaking Underground Storage Tank (LUST) Tax

	(b) Rate (c) Gallon						
a LUST tax on aviation fuels used in foreign trade	\$	0		433			
<b>b</b> LUST tax on fuels used in trains or inland waterways	.001			0		434	
	Form 1040, line 70 (also check box b on line 70); Form 1120, line 32f(2); Form 1120S, line						

\* Entry for this line is greater than zero, but too small to report

Form **4136** (2007)

Page 4



Department of the Treasury Internal Revenue Service

**Depreciation and Amortization** 

(Including Information on Listed Property)

NUMBER OF RETURNS FILED FOR SELECTED LINES

► See separate instructions. ► Attach to your tax return.

Attachment Sequence No. 67

OMB No. 1545-0172

Name	e(s) shown on return	tal Forms Filed =	12 221 424	Busine	ess or activity to w	hich this for	rm relates		Identifying number
D						450			
Pai		<b>o Expense C</b> u have any lis					ou complete Pa	rt I.	EPZONE
1	Maximum amount.	See the instruc	tions for a high	er limit	for certain bus	sinesses .		1	\$125,000
2	Total cost of section		•					2	3,169,661
3	Threshold cost of s		-	-		-		3	\$500,000
4	Reduction in limitat							4	
5	Dollar limitation for	tax year. Subt	ract line 4 from	line 1.	. If zero or less	s, enter -0	0 If married filing	1	
	separately, see inst							5	5,073,079
	(a)	Description of pro	perty		(b) Cost (busines	s use only)	(c) Elected co	st	
6									
7	Listed property. En						419,752		4.770.074
8	Total elected cost of					c), lines 6	and 7	8	4,772,061
9	Tentative deduction							9	4,771,840
10	Carryover of disallo			-				10	182,799
11	Business income limital Section 179 expens							11	4,865,245 4,725,877
12 13	Carryover of disallow							12	4,723,077
	e: Do not use Part II								
Par							t include listed r	roner	ty.) (See instructions.)
								T	Occ manachoris.j
14	Special allowance fo property) and cellulo	or qualified New	York Liberty or	Gulf C	Opportunity Zon	e property	y (other than listed		
	instructions)	osic biornass e		pperty p	placed in Servic	be during	the tax year (see	14	17,866
15	Property subject to							15	1,657
16	Other depreciation	٠,,	` '					16	919,649
Par		epreciation							
					Section A		,		
17	MACRS deductions	s for assets pla	aced in service	in tax	vears beginnir	na before	2007	17	6,083,962
18	If you are electing	to group any a	assets placed		ice during the	tax vear	into one or more		
	general asset accor						ked = 9,721 ►		
	Section B—				2007 Tax Yea	r Using t	the General Dep	reciat	ion System
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investmonly—see instru	nent use	(d) Recovery period	(e) Conve	ention (f) Meth	od	(g) Depreciation deduction
19a	3-year property		187,193						187,191
b	5-year property		1,787,97	6					1,787,315
С	7-year property	_	1,452,26						1,452,266
	10-year property	-	178,474						178,474
	15-year property	_	314,625						314,622
f	20-year property	-	91,377		0.5				91,377
	25-year property		7,350		25 yrs.		5/L		7,350
h	Residential rental		1,311,56	<i>l</i>	27.5 yrs.	MM			1,309,461
	property	undetermined type	1,501		27.5 yrs.	MM			1,501 undetermined type
i	Nonresidential real	Total GDS cost	632,839		39 yrs.	MM			630,153
	property Section C—4		4,571,63		007 Tay Yaar	MM Using th	S/L e Alternative De	nracia	4,566,316 Total GDS cos
200	Class life	SSELS FIACEU	28,583	iiiiy 20	lax tear			hieri	
	12-year		1,354		12 yrs.	-	5/L 5/L		28,583 1,354
	40-year		4,544		12 yrs. 40 yrs.	MM			4,544
		L (see instruction		S Cost -		I IVIIVI		otal Ar	OS Deduction = 33,532
		`		J 0031 -	- 55,552		<u>_</u>	21	2,732,603
21 22	Listed property. En: Total. Add amounts Enter here and on the	from line 12,	lines 14 througl						12,057,495
23	For assets shown a enter the portion of	f the basis attr	ibutable to sec	ction 26	63A costs .	. 23	186		4
For I	Paperwork Reduction	Act Notice see	a canarata inetr	uctions	•	Cat. No. 12	DOUGNI		Form <b>4562</b> (2007)

Form 4562 (2007)

Part V

## NUMBER OF RETURNS FILED FOR SELECTED LINES

Listed Property (Include automobiles,	, certain other vehicles,	cellular telephones,	certain computers, and
property used for entertainment, recrea	ation, or amusement.)		

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Sec	tion A—Depre	ciation and O	ther Inforr	nation	(Caution	: See	the ins	struction	ns for lir	nits for	passer	naer au	tomobil	es.)	
	Do you have evid								1		-		written?		s⊡No
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage		(d) t or other basis			oreciation vestment nly)	(f) Recover period	у Ме	(g) ethod/ vention	Depr	(h) eciation duction	Ele secti	(i) ected on 179 ost
25	Special allowa														
26	Property used						30 (300	iiistiuo	110113).		.   25				
			%												
			%												
			%												
27	Property used	50% or less i	<del> </del>		ness use:				1						
			% %			to	tal 26e	± 27o		5/L ·				-	
			%			10	2,788,			5/L ·				+	
28	Add amounts	in column (h)			7 Enter	here			l page		28	2,73	32,603		
29	Add amounts													419	9,752
	nplete this secti		s used by a	a sole p		part	ner, or	Ise of \other"r	ehicles	an 5%	owner,	or rela	ated per		
it you	u provided vehicles	to your employee	es, tirst answe	r the que	stions in Se			If you me	eet an ex	ception t	o comple	eting this	section to		
30	Total business/ during the year (miles)	do not include co	ommuting	Vehi			b) icle 2		c) cle 3		d) cle 4		e) icle 5	(f Vehic	
31	Total commuting														
32	Total other pe	mmuting)													
33	Total miles driv		ear. Add												
34	Was the vehicl use during off-		personal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehice more than 5% of	owner or related	person?												
36			·												
^		Section C—Qu													
	wer these quest more than 5%						comp	eting S	ection i	3 for ve	enicles	used b	y emplo	yees w	no <b>are</b>
			· ·					-l	اء امام یا کام	!	ا به مناله د د		4.i.e. e.	Yes	No
37	Do you mainta	ain a written po yees?													
38	Do you maintain														
	See the instruct														
39	Do you treat a														
40	Do you provid														
41	the use of the Do you meet th														
•	Note: If your a											nicles.			
Pa	rt VI Amori	tization													
	(a) Description	of costs	Date am	<b>b)</b> ortization gins		Amor	<b>c)</b> tizable ount		Co sec	de	Amort	ization od or entage		<b>(f)</b> rtization f nis year	or
42	Amortization of	f costs that beg	gins during	your 20	07 tax ye	ar (se	e instru	ctions):			1 20100				
							,997								
43	Amortization of		-	-		-						43		36,882	
44	Total. Add am	iounts in colur	ıın (ĭ). See	rue ins	uctions	ior w	mere to	report				44	8	47,886	

Page 2

Form **4684** 

Department of the Treasury Internal Revenue Service

# NUMBER OF RETURNS FILED FOR SELECTED LINES Casualties and Thefts

► See separate instructions.

► Attach to your tax return.

▶ Use a separate Form 4684 for each casualty or theft.

Attachment Sequence No. **26** 

Name(s) shown on tax return

Total Forms Filed = 268,350

Identifying number

SE	OTION A—Personal Use Property (Use this or business or for income-produc			cas	ualties and	thefts	of proper	ty <b>no</b> t	t used in a tr	rade
1	Description of properties (show type, location, and d from the same casualty or theft.  Property A	ate ac	equired for each		.,					
	Property B									
	Property C									
	Property <b>D</b>									
						Proper	ties			
			Α		В		С		D	
2	Cost or other basis of each property	2								
3	Insurance or other reimbursement (whether or not you filed a claim) (see instructions)	3								
	Note: If line 2 is more than line 3, skip line 4.									
4	Gain from casualty or theft. If line 3 is <b>more</b> than line 2, enter the difference here and skip lines 5 through 9 for that column. See instructions if line 3 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year.	4								
		_								
5	Fair market value <b>before</b> casualty or theft	5								
6	Fair market value after casualty or theft	6								
7	Subtract line 6 from line 5	7								
8	Enter the <b>smaller</b> of line 2 or line 7	8								
10	Casualty or theft loss. Add the amounts on line 9 in o	columi	ns A through D					10		
11	Enter the <b>smaller</b> of line 10 or \$100							11		
12	Subtract line 11 from line 10							12		
	Caution: Use only one Form 4684 for lines 13 throug							4.0		
13	Add the amounts on line 12 of all Forms 4684							13		
14 15	<ul> <li>Add the amounts on line 4 of all Forms 4684</li> <li>If line 14 is more than line 13, enter the difference complete the rest of this section (see instructions).</li> </ul>		 and on Schedule	D.	Do not			15	2,011	
	• If line 14 is less than line 13, enter -0- here and go	to lir			}			15	2,011	
	• If line 14 is <b>equal</b> to line 13, enter -0- here. <b>Do no</b>	t com	plete the rest of	this	section. J					
16	If line 14 is <b>less</b> than line 13, enter the difference .							16	215,005	
17	Enter 10% of your adjusted gross income from Form trusts, see instructions		•			. Estates	and	17	214,811	
18	Subtract line 17 from line 16. If zero or less, enter -0- or Schedule A (Form 1040NR), line 8. Estates and trustax return	sts, er	nter the result on	the	"Other deduc	tions" lir	e of your	18	94,084	

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) NUMBER OF RETURNS FILED FOR SELECTED LINES Attachment Sequence No. 26

Page 2 Form 4684 (2007)

Name(s) shown on tax return. Do not enter name and identifying number if shown on other side.

Identifying number

	TION B—Business and Income-Producin									
Pa	-									
19	Description of properties (show type, location, and daged from the same casualty or theft.	ate aco	quired for each	orop	erty). Use a se	eparate	e line for each	n prope	erty lost or da	m-
	Property A									
	Property <b>B</b>									
	Property C									
	Property <b>D</b>									
						Prop	erties			
			Α		В		С		D	
20	Cost or adjusted basis of each property	20								
21	Insurance or other reimbursement (whether or not you filed a claim). See the instructions for line 3.	21								
22	Note: If line 20 is more than line 21, skip line 22.  Gain from casualty or theft. If line 21 is more than line									
	20, enter the difference here and on line 29 or line 34, column (c), except as provided in the instructions for line 33. Also, skip lines 23 through 27 for that column. See the instructions for line 4 if line 21 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year.	22								
00		23								
23 04	Fair market value <b>before</b> casualty or theft	24								
24	Fair market value <b>after</b> casualty or theft	25								
25	Subtract line 24 from line 23	26								
26	Enter the <b>smaller</b> of line 20 or line 25 <b>Note:</b> If the property was totally destroyed by casualty or lost from theft, enter on line 26 the amount from line 20.	20								
27	Subtract line 21 from line 26. If zero or less, enter -0-	27								
28	Casualty or theft loss. Add the amounts on line 27. Ent				29 <b>or</b> line 34	(see in	structions).	28		
Pai	t II Summary of Gains and Losses (from	n sep	arate Parts I)		. ,		asualties or the		(c) Gains fro	om
	(a) Identify casualty or theft				(i) Trade, busi rental or roy property		(ii) Incom- producing employee pro	and	casualties or t includible in in	
	Casualty or The	ft of	Property He	ld (	One Year o	r Les	SS			
29					(	)	(	)		
					(	)	(	)		
30	Totals. Add the amounts on line 29			30	(	)	(	)		
31	Combine line 30, columns (b)(i) and (c). Enter the net of	-		on F	orm 4797 line	14 If	Form 4797			
•	is not otherwise required, see instructions							31	21,420	
32	Enter the amount from line 30, column (b)(ii) here. Indi on Schedule A (Form 1040), line 28, or Schedule A (Form 1040), line as an employee on Schedule A (Form 1040), line trusts, partnerships, and S corporations, see instructions.	viduals orm 10 ie 23,	s, enter the amou	unt fr and e orm	rom income-po enter the amo n 1040NR), line	roducii unt fro 11. E	ng property m property states and	32		
	Casualty or Theft							,	1	1
33	Casualty or theft gains from Form 4797, line 32							33	1,937	
აა 34	Casualty or their gains from Form 4797, line 32 .					. )	 (	)	,	
<b>0 T</b>					(	)	(	)		
35	Total losses. Add amounts on line 34, columns (b)(i) a	and (h)	(ii)	35	( 21.750	)	(	)		
36	Total gains. Add lines 33 and 34, column (c)	and (b)	· · · · · ·		, ,			36	6,916	
37	Add amounts on line 35, columns (b)(i) and (b)(ii)							37	29,552	
38	If the loss on line 37 is <b>more</b> than the gain on line 36					•			-,	
а	Combine line 35, column (b)(i) and line 36, and enter the net g and S corporations, see the note below. All others, enter the	ain or (I	ount on Form 479	7, line	e 14. If Form 47	'97 is n	oartnerships) ot otherwise	38a	21,049	
b						m property Estates and artnerships)	201-	10 202		
39	and S corporations, see the note below. Electing larger lift the loss on line 37 is <b>less</b> than or <b>equal</b> to the gain on	line 36	, combine lines 3	6 and	d 37 and enter	here. F	artnerships	38b	10,382	
	(except electing large partnerships), see the note below.  Note: Partnerships, enter the amount from line 38a, 3	All oth 88b, or	ers, enter this an · line 39 on Forn	nount 100	on Form 4797 65, Schedule	', line 3 K <i>, line</i>	3	39	6,245	
	S corporations, enter the amount from line 38a or 38b on Form 1120S, Schedule K, line 10.									

**4797** 

Department of the Treasury

# NUMBER OF RETURNS FILED FOR SELECTED LINES

# Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return. ► See separate instructions.

OMB No. 1545-0184

Attachment Sequence No. 27

Internal Revenue Service Name(s) shown on return Identifying number Total Forms Filed = 3,071,277 Enter the gross proceeds from sales or exchanges reported to you for 2007 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions). 217,946 Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (a) Gain or (loss) (a) Description (b) Date acquired (c) Date sold (d) Gross allowed or basis, plus Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) sales price allowable since improvements and sum of (d) and (e) acquisition expense of sale 2 1,977,220 3 6,406 Gain, if any, from Form 4684, line 39 3 4 288,034 Section 1231 gain from installment sales from Form 6252, line 26 or 37 . . . . 4 5 15,575 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 . . . . . . . 5 6 549,843 Gain, if any, from line 32, from other than casualty or theft . . . . . . . . . . . . . . . . 6 2,614,375 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: . . Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. Nonrecaptured net section 1231 losses from prior years (see instructions) 204,416 8 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a 133.971 a long-term capital gain on the Schedule D filed with your return (see instructions). Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 368,715 11 767,617 11 12 204,416 12 Gain, if any, from line 7 or amount from line 8, if applicable . . . . . 13 558,594 Gain, if any, from line 31 . . . . . . . . 13 14 12,801 14 Net gain or (loss) from Form 4684, lines 31 and 38a . . . 15 2,300 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 16 4,453 16 Ordinary gain or (loss) from like-kind exchanges from Form 8824 . . . 1,712,240 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the

loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line

Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, 0

18a

18b

Form 4797 (2007)

Pa	Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)									
19	(a) Description of section 1245, 1250, 1252, 1254, or 1255 pr	operty:				(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)			
Α										
В										
D				1						
	These columns relate to the properties on lines 19A through 19D	D. ▶	Property A	Property	/ B	Property C	Property D			
20	Gross sales price (Note: See line 1 before completing.)	20								
21	Cost or other basis plus expense of sale	21								
22	Depreciation (or depletion) allowed or allowable									
23	Adjusted basis. Subtract line 22 from line 21	23								
24	Total gain. Subtract line 23 from line 20	24								
25	If section 1245 property:									
а	Depreciation allowed or allowable from line 22	25a								
b	Enter the <b>smaller</b> of line 24 or 25a	25b	541,795							
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.									
а	Additional depreciation after 1975 (see instructions)	26a								
b	Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a (see instructions)	26b								
С	Subtract line 26a from line 24. If residential rental property or									
	line 24 is not more than line 26a, skip lines 26d and 26e	26c								
d	Additional depreciation after 1969 and before 1976	26d								
е	Enter the <b>smaller</b> of line 26c or 26d	26e								
f	Section 291 amount (corporations only)	26f								
<u>g</u>	Add lines 26b, 26e, and 26f	26g	15,328							
27 a	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).  Soil, water, and land clearing expenses	27a								
b	Line 27a multiplied by applicable percentage (see instructions)	27b								
	Enter the <b>smaller</b> of line 24 or 27b	27c	*							
28	If section 1254 property:									
а	Intangible drilling and development costs, expenditures for									
	development of mines and other natural deposits, and									
	mining exploration costs (see instructions)	28a								
b	Enter the <b>smaller</b> of line 24 or 28a	28b	2,852							
29	If section 1255 property:									
а	Applicable percentage of payments excluded from income	00-								
h	under section 126 (see instructions)	29a 29b	155							
	nmary of Part III Gains. Complete property columns			h line 29b	befo	re aoina to lin	e 30.			
-	milary of that in Gamer complete property columns	7 ( 2111	ough B amoug		00101					
30	Total gains for all properties. Add property columns A through	h D line	e 24			30	907,106			
31	Add property columns A through D, lines 25b, 26g, 27c, 28b,									
32	Subtract line 31 from line 30. Enter the portion from casualty of other than casualty or theft on Form 4797, line 6	or theft	on Form 4684, lir	ne 33. Enter	the po	ortion from	551,076			
Pa	Recapture Amounts Under Sections 179 (see instructions)									
	,					(a) Section 179	(b) Section 280F(b)(2)			
22	Section 170 expense deduction or degree internal currents in	orior	are		33		1			
33 34	Section 179 expense deduction or depreciation allowable in precipitation (see instructions).	-			34					
35	Recapture amount. Subtract line 34 from line 33. See the inst			oort	35					

NUMBER OF RETURNS FILED FOR SELECTED LINES

**Farm Rental Income and Expenses** 

(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor)) (Income not subject to self-employment tax)

Attachment

Depar Interna	tment of the Treasury al Revenue Service ► At	tach t	o Form 10		•			Gee instructions on	back.			Attachmer Sequence	nt No. <b>37</b>
Name	(s) shown on tax return								Your	socia	l securit	ty number	r
									Emplo	oyer I	: D numb	er (EIN), i	f any
		Total F	orms Filed	l = 583	,607					-			
Α	Did you actively participate in the	oper	ation of tl	his far	m durin	g 2007	' (see in	structions)? .	Y	_= 47	9,218	☐ Yes	s □ No
Pai	t I Gross Farm Rental Inc	ome-	-Based	on Pi	roducti	on. Ind	clude a	mounts converte	d to ca	ash	or the	equiva	lent.
1	Income from production of lives	stock,	produce,	, grain	s, and o	other c	rops.			1	30	1,154	
2a	Cooperative distributions (Form(s	s) 1099	9-PATR)	2a		,522		<b>2b</b> Taxable amount		2b			
3a	Agricultural program payments (se	ee inst	ructions) l	3a	308	3,346		J 3b Taxable amount	3	3b	29	9,015	
4	Commodity Credit Corporation										2	254	
	CCC loans reported under elec		1	 4b		 70			. –	la	3	3,354	
	CCC loans forfeited						<u> </u>	4c Taxable amount		1c			
5	Crop insurance proceeds and f			aster <b>5a</b>		its (see .967	instruc			5b	2,	4,617	
	Amount received in 2007 If election to defer to 2008 is at						ount do	<b>5b</b> Taxable amount		5d		1,017	
с 6	Other income, including federal		*						. –	6	23	7,421	
7	Gross farm rental income. Add												
•	total here and on Schedule E (F									7	54	7,774	
Par	t II Expenses—Farm Rent												
8	Car and truck expenses (see					21 [	Pension	and profit-sharing		$\neg$			
Ü	Schedule F instructions). Also									21		*	
	attach Form 4562	8	75,2	297			Rent or I						
9	Chemicals	9	94,9	961		a∖							
10	Conservation expenses (see					and equipment (see							
	instructions)	10	11,4			j	nstruction	ons)		2a			
11	Custom hire (machine work) .	11	63,9	952		1	•	and, animals, etc.)		2b			
12	Depreciation and section 179	•			. —	23		9,617					
	expense deduction not	40	101	014		1		nd plants	· 📙	24 25	82	2,521	
	claimed elsewhere	12	181,	910		1	_	and warehousing	. –	26 26	01	5,397	
13	Employee benefit programs					1		8	. –	26 27		14,218	
	other than on line 21 (see Schedule F instructions)	13	14	14		1				28	40	4,210	
14	Feed	14	26,9	928		1		ry, breeding, and	·				
15	Fertilizers and lime	15	135,			1	nedicine	3.	. 2	29			
16	Freight and trucking	16				30 (	Other ex	penses					
17	Gasoline, fuel, and oil	17	104,	784			specify)						
18	Insurance (other than health)	18	272,	892		<b>a</b> .			3	0a			
19	Interest:					b.				0b			
	Mortgage (paid to banks, etc.) .	19a	50,1							0c			
	Other	19b	33,2	26/					-	0d			
20	Labor hired (less employment									0e			
	credits) (see Schedule F instructions)	20	26,6	48 <u>0</u>		f g				0g			
	mandenoria)	20	20,0			9				J			
31	Total expenses. Add lines 8 th	rough	30a (see	inetri	ictions)				.   3	31	48	35,685	
32	Net farm rental income or (los	_	• .					▶ ılt is income ente		$\overline{}$		·	
٠ <u>٢</u>	it here and on Schedule E, line									32	55	4,645	
33						3a 🗆	All inv	estment i	is at risk.				
-	(see instructions)							ox Checked) = 126,4	( -	<b>3</b> b [	_		s not at risk.
С	You may have to complete For												
	which box you checked (see in												
	Form 6198 before going to For on Schedule E, line 40	ווו אטנ						i <b>le loss</b> here and is carryover (-) = 28,	564	2.5	11	7,230	
			NOTICE	auclible	- 1∪33 (± <i>)</i>	, Juspt	11000 105	∍	∪∪ <del>+</del>   <b>3</b>	JU	1.1	1,230	1

Internal Revenue Service

## NUMBER OF RETURNS FILED FOR SELECTED LINES

# **Investment Interest Expense Deduction**

Department of the Treasury ► Attach to your tax return.

Total Investment Interest Expense

Attachment

Identifying number

Sequence No. 51

OMB No. 1545-0191

Name(s) shown on return

Total Forms Filed = 1,895,166

Га	Total investment interest Expense			
1	Investment interest expense paid or accrued in 2007 (see instructions)	1	1,492,611	
2	Disallowed investment interest expense from 2006 Form 4952, line 7	2	784,089	
^	Total investment interest supplies Add lines 1 and 0	$\overline{}$	1 007 045	

1	Investment interest expense paid or accrued in 2007 (see instructions)		1	1,492,611				
2	Disallowed investment interest expense from 2006 Form 4952, line 7			2	784,089			
3	Total investment interest expense. Add lines 1 and 2			3	1,867,945			
Par								
4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	1,818,318					
b	Qualified dividends included on line 4a	4b	1,408,098					
С	Subtract line 4b from line 4a			4c	1,783,380			
d	Net gain from the disposition of property held for investment	4d	996,710					
е	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e	926,989					
f	Subtract line 4e from line 4d			4f	450,570			
g	Enter the amount from lines 4b and 4e that you elect to include in instructions)		,	4g	262,376			
h	Investment income. Add lines 4c, 4f, and 4g			4h	1,809,704			
5	Investment expenses (see instructions)			5	616,751			
6	Net investment income. Subtract line 5 from line 4h. If zero or less, e	enter -	0	6	1,717,606			
Par	Part III Investment Interest Expense Deduction							
7	Disallowed investment interest expense to be carried forward to 200 line 3. If zero or less, enter -0-			7	775,145			

Section references are to the Internal Revenue Code unless otherwise noted.

# General Instructions Purpose of Form

Use Form 4952 to figure the amount of investment interest expense vou can deduct for 2007 and the amount you can carry forward to future years. Your investment interest expense deduction is limited to your net investment income.

For more information, see Pub. 550, Investment Income and Expenses.

#### Who Must File

If you are an individual, estate, or a trust, you must file Form 4952 to claim a deduction for your investment interest expense.

Exception. You do not have to file Form 4952 if all of the following apply.

- Your investment income from interest and ordinary dividends minus any qualified dividends is more than your investment interest expense.
- You do not have any other deductible investment expenses.
- You do not have any carryover of disallowed investment interest expense from 2006.

# Allocation of Interest **Expense**

If you paid or accrued interest on a loan and used the loan proceeds for more than one purpose, you may have to allocate the interest. This is necessary because different

rules apply to investment interest, personal interest, trade or business interest, home mortgage interest, and passive activity interest. See Pub. 535. Business Expenses.

# Specific Instructions Part I—Total Investment **Interest Expense**

#### Line 1

Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions.

Enter the investment interest expense paid or accrued during the tax year, regardless of when you incurred the indebtedness. Investment interest expense is interest paid or accrued on a loan or part of a loan that is allocable to property held for investment (as defined on this page).

Include investment interest expense reported to you on Schedule K-1 from a partnership or an S corporation. Include amortization of bond premium on taxable bonds purchased after October 22, 1986, but before January 1, 1988, unless you elected to offset amortizable bond premium against the interest payments on the bond. A taxable bond is a bond on which the interest is includible in gross income.

Investment interest expense does not include any of the following:

- Home mortgage interest.
- Interest expense that is properly allocable to a passive activity. Generally, a passive activity is any trade or business activity in which you do not materially participate and any rental activity. See the Instructions for Form 8582, Passive Activity Loss Limitations, for details.

 Any interest expense that is capitalized, such as construction interest subject to section 263A.

1,690,394

- Interest expense related to tax-exempt interest income under section 265.
- Interest expense, disallowed under section 264, on indebtedness with respect to life insurance, endowment, or annuity contracts issued after June 8, 1997, even if the proceeds were used to purchase any property held for investment.

Property held for investment. Property held for investment includes property that produces income, not derived in the ordinary course of a trade or business, from interest, dividends, annuities, or royalties. It also includes property that produces gain or loss, not derived in the ordinary course of a trade or business, from the disposition of property that produces these types of income or is held for investment. However, it does not include an interest in a passive activity.

Exception. A working interest in an oil or gas property that you held directly or through an entity that did not limit your liability is property held for investment, but only if you did not materially participate in the activity.

# Part II—Net Investment Income

#### Line 4a

Gross income from property held for investment includes income, unless derived in the ordinary course of a trade or business, from interest, ordinary dividends (except Alaska Permanent Fund dividends), annuities, and royalties. Include investment income

Form **4972** 

Department of the Treasury Internal Revenue Service

# NUMBER OF RETURNS FILED FOR SELECTED LINES

# **Tax on Lump-Sum Distributions**

(From Qualified Plans of Participants Born Before January 2, 1936)

► Attach to Form 1040, Form 1040NR, or Form 1041.

OMB No. 1545-0193

2007

Attachment
Sequence No. 28

Name of recipient of distribution

Total Forms Filed = 14,214

Identifying number

Par	Complete this part to see if you can use Form 4972			
1	Was this a distribution of a plan participant's entire balance (excluding deductible voluntary employee		Yes	No
	contributions and certain forfeited amounts) from all of an employer's qualified plans of one kind (pension,		.,	
	profit-sharing, or stock bonus)? If "No," do not use this form	1	_	14,20
2	Did you roll over any part of the distribution? If "Yes," do not use this form	2	Yes =	14,20
3	Was this distribution paid to you as a beneficiary of a plan participant who was born before January 2, 1936?	3	Yes =	14,20
4	Were you (a) a plan participant who received this distribution, (b) born before January 2, 1936, and (c) a			
	participant in the plan for at least 5 years before the year of the distribution?	4	Yes =	14,20
	If you answered "No" to both questions 3 and 4, do not use this form.			
5a	Did you use Form 4972 after 1986 for a previous distribution from your own plan? If "Yes," do not use this	_	V	: 14,20
	form for a 2007 distribution from your own plan	5a	165 -	14,20
b	If you are receiving this distribution as a beneficiary of a plan participant who died, did you use Form 4972			
	for a previous distribution received for that participant after 1986? If "Yes," <b>do not</b> use the form for this distribution	5b	Yes =	12,11
Par		0.0		
6	Capital gain part from Form 1099-R, box 3	312		
7	Multiply line 6 by 20% (.20)			
,	If you also choose to use Part III, go to line 8. Otherwise, include the amount from line 7 in the total			
	on Form 1040, line 44, Form 1040NR, line 41, or Form 1041, Schedule G, line 1b, whichever applies.			
Par	t III Complete this part to choose the 10-year tax option (see instructions)			
8	Ordinary income from Form 1099-R, box 2a minus box 3. If you did not complete Part II, enter			
	the taxable amount from Form 1099-R, box 2a	14,20		
9	Death benefit exclusion for a beneficiary of a plan participant who died before August 21, 1996	1,004		
10	Total taxable amount. Subtract line 9 from line 8	14,20	5	
11	Current actuarial value of annuity from Form 1099-R, box 8. If none, enter -0	0		
12	Adjusted total taxable amount. Add lines 10 and 11. If this amount is \$70,000 or more, <b>skip</b> lines	14,20	5	
40	13 through 16, enter this amount on line 17, and go to line 18	14,20	5	
13	Widthply line 12 by 66% (166), but do not only in 1676 than \$10,000.			
14	Subtract \$20,000 from line 12. If line 12 is \$20,000 or less, enter -0			
15	Multiply line 14 by 20% (.20)			
16	Minimum distribution allowance. Subtract line 15 from line 13	13,90	3	
17	Subtract line 16 from line 12			
18	Federal estate tax attributable to lump-sum distribution	644		
19	Subtract line 18 from line 17. If line 11 is zero, <b>skip</b> lines 20 through 22 and go to line 23			
20	Divide line 11 by line 12 and enter the result as a decimal (rounded			
	to at least three places)			
21	Multiply line 16 by the decimal on line 20			
22	Subtract line 21 from line 11			
23	Widtiply line 13 by 1070 (.10)	13,24	6	
24	Tax on amount on line 25. God the Tax Hate Golledale in the instructions	10,21		
25	Multiply line 24 by ten (10). If line 11 is zero, <b>skip</b> lines 26 through 28, enter this amount on line 29, and go to line 30			
26	Multiply line 22 by 10% (.10)			
27	Tax on amount on line 26. Use the Tax Rate Schedule in the			
	instructions			
28	Multiply line 27 by ten (10)			
29	Subtract line 28 from line 25. Multiple recipients, see instructions	13,24	6	
30	Tax on lump-sum distribution. Add lines 7 and 29. Also include this amount in the total on Form		_	
	1040, line 44, Form 1040NR, line 41, or Form 1041, Schedule G, line 1b, whichever applies <b>30</b>	13,24	9	

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) NUMBER OF RETURNS FILED FOR SELECTED LINES Additional Taxes on Qualified Plans OMB (Including IRAs) and Other Tax-Favored Accounts

► Attach to Form 1040 or Form 1040NR.

Sequence No. 29

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

► See separate instructions.

ivame	of individual subject to additional	tax. If married filing jointly, see instructions.	Your	social security nu	ımber
		Total Forms Filed = 1,479,094			
Fill	n Your Address Only	Home address (number and street), or P.O. box if mail is not delivered to your home	Apt. r	10.	
	ou Are Filing This				
	n by Itself and Not	City, town or post office, state, and ZIP code	If this	s is an amended	l
With	Your Tax Return			n, check here ►	
If yo	u <b>only</b> owe the additional 1	0% tax on early distributions, you may be able to report this tax directl	v on F	orm 1040, line	60, or
	-	filing Form 5329. See the instructions for Form 1040, line 60, or for Form	-		,
		n Early Distributions		•	
	Complete this part if an IRA) or modified e You may also have to	you took a taxable distribution, before you reached age 59½, from a qualifundowment contract (unless you are reporting this tax directly on Form 1040 complete this part to indicate that you qualify for an exception to the addit AA distributions (see instructions).	or Form	1040NR—see	above).
1	Early distributions included	in income. For Roth IRA distributions, see instructions	1		
2	Early distributions included	d on line 1 that are not subject to the additional tax (see instructions).			
	Enter the appropriate exce	eption number from the instructions:	2		
3	Amount subject to addition	nal tax. Subtract line 2 from line 1	3	1,193,950	
4	Additional tax. Enter 10%	6 (.10) of line 3. Include this amount on Form 1040, line 60, or Form			
			4	1,185,681	$\perp$
		amount on line 3 was a distribution from a SIMPLE IRA, you may have bunt on line 4 instead of 10% (see instructions).			
Pai		n Certain Distributions From Education Accounts			
ı a		if you included an amount in income, on Form 1040 or Form 1040NR,	line 21	from a Cove	rdell
	• • •	account (ESA) or a qualified tuition program (QTP).	0 2 !	,	1 4011
5	Distributions included in in	come from Coverdell ESAs and QTPs	5		
6		ine 5 that are not subject to the additional tax (see instructions)	6		
7		nal tax. Subtract line 6 from line 5	7	70,179	
8	-	of line 7. Include this amount on Form 1040, line 60, or Form 1040NR, line 55	8	70,183	
	on line 17 of your 2		able o	r you had an a	amoun
9	Enter your excess contribution to line 15	utions from line 16 of your 2006 Form 5329 (see instructions). If zero,	9		
10	If your traditional IRA co	ontributions for 2007 are less than your			
	maximum allowable contrib	oution, see instructions. Otherwise, enter -0-	-		
11		utions included in income (see instructions)	-		
12	•	year excess contributions (see instructions)			
13			13		
14	Prior year excess contribu	tions. Subtract line 13 from line 9. If zero or less, enter -0	14		
15	Excess contributions for 2	·	15	20.400	-
16	Total excess contributions		16	32,198	+
17		of the <b>smaller</b> of line 16 <b>or</b> the value of your traditional IRAs on December 31, 2007 ade in 2008). Include this amount on Form 1040, line 60, or Form 1040NR, line 55	17	31,209	
Pa		n Excess Contributions to Roth IRAs	1 1	·	
		if you contributed more to your Roth IRAs for 2007 than is allowable or	you ha	ad an amount	on line
18	Enter your excess contribution	s from line 24 of your 2006 Form 5329 (see instructions). If zero, go to line 23	18		
19	•	ons for 2007 are less than your maximum			
	•	instructions. Otherwise, enter -0 19			
20	· · · · · · · · · · · · · · · · · · ·	ur Roth IRAs (see instructions)			
21	Add lines 19 and 20 .		21		
22		tions. Subtract line 21 from line 18. If zero or less, enter -0	22		
23	Excess contributions for 2		23		
24	Total excess contributions		24	54,730	
25		of the <b>smaller</b> of line 24 <b>or</b> the value of your Roth IRAs on December 31, 2007 ade in 2008). Include this amount on Form 1040, line 60, or Form 1040NR, line 55	25	53,724	

Par	rt V	Additional Tax on Excess Contributions to Coverd Complete this part if the contributions to your Coverd amount on line 33 of your 2006 Form 5329.		were more than i	s allow	able or you h	ad an
26	Enter t	the excess contributions from line 32 of your 2006 Form	m 5329 (see instruc	ctions). If zero,			
	go to I	ine 31			26		
27		ontributions to your Coverdell ESAs for 2007 were less the um allowable contribution, see instructions. Otherwise, et					
28	2007 c	distributions from your Coverdell ESAs (see instructions)	28				
29	Add lin	nes 27 and 28			29		
30	-	ear excess contributions. Subtract line 29 from line 26.			30		
31		s contributions for 2007 (see instructions)			31	*	
32		excess contributions. Add lines 30 and 31			32		
33	Decem	onal tax. Enter 6% (.06) of the smaller of line 32 or the other 31, 2007 (including 2007 contributions made in 20 line 60, or Form 1040NR, line 55	08). Include this am	nount on Form	33	*	
Par	t VI	Additional Tax on Excess Contributions to Arc	her MSAs				
		Complete this part if you or your employer contributed had an amount on line 41 of your 2006 Form 5329.	d more to your Arch	ner MSAs for 200	7 than	is allowable o	r you
34		the excess contributions from line 40 of your 2006 Formine 39			34		
35	If the	contributions to your Archer MSAs for 2007 are less thum allowable contribution, see instructions. Otherwise, en	nan the nter -0-				
36	2007 c	listributions from your Archer MSAs from Form 8853, li	ne 10 . <b>36</b>				
37		nes 35 and 36			37		
38	-	ear excess contributions. Subtract line 37 from line 34.			38		
39		s contributions for 2007 (see instructions)			39 40	6,852	
40					40	0,032	
41	Decem	onal tax. Enter 6% (.06) of the smaller of line 40 or the smaller of line 40 or the state of the	08). Include this am	nount on Form	41	4,793	
Par	t VII	Additional Tax on Excess Contributions to Hea			71	4,793	
		Complete this part if you, someone on your behalf, or allowable or you had an amount on line 49 of your 200	your employer cont		your HS	SAs for 2007 to	han is
42	Enter t	he excess contributions from line 48 of your 2006 Form	n 5329. If zero, go t	to line 47	42		
43		contributions to your HSAs for 2007 are less than the mable contribution, see instructions. Otherwise, enter -0-					
44	2007 di	stributions from your HSAs from Form 8889, line 16	44				
45		nes 43 and 44			45		
46	-	ear excess contributions. Subtract line 45 from line 42.	If zero or less, ente	er -0	46		
47		s contributions for 2007 (see instructions)			47	F7 400	
48		excess contributions. Add lines 46 and 47			48	57,426	
49		nal tax. Enter 6% (.06) of the smaller of line 48 or the value of your ontributions made in 2008). Include this amount on Form 1040, lin			49	52,242	
Par		Additional Tax on Excess Accumulation in Qua Complete this part if you did not receive the minimum	alified Retiremen	nt Plans (Includ	ling IR	As)	
50	Minimi	um required distribution for 2007 (see instructions) .	· ·		50	· ·	
51					51		
52	Subtra	ct line 51 from line 50. If zero or less, enter -0			52	10,959	
53		nal tax. Enter 50% (.50) of line 52. Include this amount on Form			53	11,277	
Sigi	nature.	Complete <b>only</b> if you are filing this form by itself Under penalties of perjury, I declare that I have examined this form, inclu			and += +1	ha hast of mirlim	wlode =
Plea Sig	n	and belief, it is true, correct, and complete. Declaration of preparer (othe					
Her	е	Your signature		Date			
Paid		Preparer's signature	Date	Check if self- employed	Prepare	er's SSN or PTIN	
rrep Hea	arer's Only	Firm's name (or yours	·	EIN			
USE	Jilly	if self-employed), address, and ZIP code		Phone no.	(	)	

Department of the Treasury

Internal Revenue Service

Residential Energy Credits
NUMBER OF RETURNS FILED FOR SELECTED LINES

► See instructions.

Total Forms Filed = 4,366,023

► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074 Attachment Sequence No.

Name(s) shown on return

Your social security number

Before you begin Part I: Figure the amount of any foreign tax credit or retirement savings contributions credit you are claiming.

Pa	art I	Nonbusiness Energy Property Credit (See instructions be	efore	completing this	part	.)		
1	Were	e the qualified energy efficiency improvements or residential energ	y pro	perty costs for yo	ur		Yes Boxes Checked = 4	4,363,021
		n home located in the United States? (see instructions)				1	☐ Yes ☐	No
	Cau	tion: If you checked the "No" box, you cannot claim the nonbusine	ss en	ergy property cred	dit.			
	Do r	not complete Part I.						
2	Qua	lified energy efficiency improvements (see instructions).						
	<b>a</b> Insu	lation material or system specifically and primarily designed to re	duce	heat loss or gain	in			
	your	home			.	2a	1,353,994	
	<b>b</b> Exte	rior doors			.	2b	1,404,330	
		al roof with appropriate pigmented coatings that meet the Energy S						
	and	is specifically and primarily designed to reduce heat gain in your h		r 2121 (127 h		2c	98,777	
	<b>d</b> Exte	rior windows (including skylights)	2d	1,690,107				
		imum amount of cost on which the credit can be figured	2e	\$2,000				
		er the amount, if any, from your 2006 Form 5695, line 2b. Otherwise,						
		r-0	2f	305,065				
		tract line 2f from line 2e		4,189,372			4 005 004	
		er the smaller of line 2d or line 2g				<u>2h</u>	1,665,831	
3		lines 2a, 2b, 2c, and 2h			.  -	3	3,273,733	
4		iply line 3 by 10% (.10)			.	4	3,273,732	
5		dential energy property costs (see instructions).	l _	989,831				
		gy-efficient building property. Do not enter more than \$300	5a	969,631				
		lified natural gas, propane, or oil furnace or hot water boiler. Do		074 100				
		enter more than \$150	5b	874,188				
		anced main air circulating fan used in a natural gas, propane, or	_	216.929				
_			5c	-,		_	1,722,322	
6		lines 5a through 5c				7	4,318,735	
7		lines 4 and 6				8	\$500	
8		imum credit amount. (If you jointly occupied the home, see instruc	,			9	709,757	
9		er the amount, if any, from your 2006 Form 5695, line 8. Otherwise				<del>9</del> 10	4,320,884	
10		tract line 9 from line 8			. –	11	4,313,629	
11		er the smaller of line 7 or line 10	12			-	1,010,020	
12		er the amount from Form 1040, line 46, or Form 1040NR, line 43	12					
13		er the total, if any, of your credits from Form 1040, lines 47 through and lines 51 and 53, or Form 1040NR, lines 44, 46, and 48	13					
14		tract line 13 from line 12. If zero or less, stop. You cannot take	the	nonbusiness ene	٠,			
		perty credit			· —	14		
15	Non	business energy property credit. Enter the smaller of line 11 or I	ıne 14	4	.	15	4,292,496	

Before you begin Part II: Figure the amount of any of the following credits you are claiming.

- Foreign tax credit
- Child tax credit
- Retirement savings contributions credit
- Mortgage interest credit
- Adoption credit
- District of Columbia first-time homebuyer credit

6 Qualified solar electric property costs	22	
Multiply line 16 by 30% (.30)		
Wildiply into 10 by 6070 (30)	000	
Maximum credit amount	19	33,822
Qualified solar water heating property costs		
Multiply line 20 by 30% (.30)	11	
Widisply into 20 by 0070 (100)	000	
Enter the smaller of line 21 or line 22	23	26,211
Qualified fuel cell property costs	14 1 1	
Multiply line 24 by 30% (.30)	14	
Kilowatt capacity of property on line 24 above ►	03	
Enter the smaller of line 25 or line 26	27	1,344
Credit carryforward from 2006. Enter the amount, if any, from your 2006 Form 5695,		10,077
Add lines 19, 23, 27, and 28	29	67,281
Enter the amount from Form 1040, line 46, or Form 1040NR, line 43		
1040 filers: Enter the total, if any, of your credits from Form		
1040, lines 47 through 49, and lines 51, 53, and 54; line 15 of	220	
this form; and line 12 of the Line 11 Worksheet in Pub. 972 (see	536	
instructions).		
<b>1040NR filers:</b> Enter the total, if any, of your credits from Form		
1040NR, lines 44, 46, 48, and 49; line 15 of this form; and line 12		
of the Line 11 Worksheet in Pub. 972 (see instructions).	20	4,334,735
Subtract line 31 from line 30. If zero or less, enter -0- here and on line 33	32	
Residential energy efficient property credit. Enter the smaller of line 29 or line 32	33	01,302
Credit carryforward to 2008. If line 33 is less than line 29, subtract line 33 from line 29	30	
art III Current Year Residential Energy Credits		
Add lines 15 and 33. Enter here and on Form 1040, line 50, or Form 1040NR, line 45	35	4,325,767

Form **5695** (2007)

# **Work Opportunity Credit**

NUMBER OF RETURNS FILED FOR SELECTED LINES

► Attach to your tax return.

OMB No. 1545-0219 Sequence No. 77

Department of the Treasury Internal Revenue Service Name(s) shown on return

Identifying number

	Total Forms Filed = 45	,,	,	
Pa	t   Current Year Credit			
1 a	Enter on the applicable line below the total qualified first- or second-ye during the tax year, and multiply by the percentage shown, for service certified (if required) as members of a targeted group.  Qualified first-year wages of employees who worked for you at least			
	120 hours but fewer than 400 hours	× 25% (.25)	1a	695
b	Qualified first-year wages of employees who worked for you at least 400 hours			2,587
С	Qualified second-year wages of employees certified as long-term family assistance recipients	× 50% (.50)	1c	13
2	Add lines 1a, 1b, and 1c. See instructions for the adjustment you mu			
	wages		2	2,634
3	Work opportunity credit from partnerships, S corporations, cooperative		3	42,713
4	Add lines 2 and 3. Partnerships and S corporations, report this amount go to line $5$		4	44,890
5	Work opportunity credit included on line 4 from passive activities (see	•		13,221
6	Subtract line 5 from line 4			32,728
7 8	Work opportunity credit allowed for 2007 from a passive activity (see in Carryforward from 2006 of the New York Liberty Zone business employerm 2008 of the work opportunity credit (see instructions)		8,855	
9	Add lines 6 through 8. Cooperatives, estates, and trusts. continue on this amount to complete Part II Nondeductions		41,070	
10	Amount allocated to patrons of the cooperative or beneficiaries of	10		
11	instructions)	11		
Pai	t II Allowable Credit			
12	Regular tax before credits (see instructions)		12	
13	Alternative minimum tax (see instructions)		13	
14	Add lines 12 and 13		14	
15a	Credits from Form 1040, lines 47 through 50 and 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)	15a		
b	Foreign tax credit	15b		
С	Credits from Forms 5735 and 8834	15c		
d	Non-business alternative motor vehicle credit (Form 8910, line 18)	15d		
е	Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)	15e		
f	Add lines 15a through 15e		15f	11.000
16	Net income tax. Subtract line 15f from line 14. If zero, skip lines 17 through		16	41,868
17	Net regular tax. Subtract line 15f from line 12. If zero or less, enter -0-		17	41,641 23,540
18	Enter 25% (.25) of the excess, if any, of line 17 over \$25,000 (see instri		18	23,340
19	Subtract line 18 from line 16. If zero or less, enter -0	20a	19	
20a	General business credit (Form 3800, line 19)	200		
	Empowerment zone and renewal community employment credit (Form 8844, line 26)	20b		
	Add lines 20a and 20b		20c	
21	,			
22	Credit allowed for the current year. Cooperatives, estates, and trust 11 or 21. Report this amount on Form 1120-C, Schedule J, line 5c; or line 2c. If line 21 is smaller than line 11, see instructions. <b>All others.</b> En 21. Report this amount on Form 1040, line 55; Form 1040NR, line 50; or the applicable line of your return. If line 21 is smaller than line 9,	Form 1041, Schedule G ter the smaller of line 9 or orm 1120, Schedule J, line		38 006
	55, 5 approado milo di your rotarri, ii milo 21 lo diffuniti triatti iii e d,		22	38,096

6251

# Alternative Minimum Tax—Individuals

NUMBER OF RETURNS FILED FOR SELECTED LINES See separate instructions.

OMB No. 1545-0074

Attachment

Department of the Treasury ▶ Attach to Form 1040 or Form 1040NR. Sequence No. Internal Revenue Service Name(s) shown on Form 1040 or Form 1040NR Your social security number Total Forms Filed = 9.528.998 Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.) If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, 9,527,194 1 enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.) Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 2 2 913,231 3 7,533,737 3 218,349 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions 2.021.192 5 If Form 1040, line 38, is over \$156,400 (over \$78,200 if married filing separately), enter the amount from line 11 of the Itemized Deductions Worksheet on page A-10 of the instructions for Schedule A (Form 1040) ( 4.291.116 7 ( 3,019,140 7 8 148,786 9 27,668 9 Depletion (difference between regular tax and AMT) . . . . . . . . . 10 129,605 10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount . . . . 11 1,392,211 11 12 6,161 12 Qualified small business stock (7% of gain excluded under section 1202) . . . . . . . . 13 23,821 13 Exercise of incentive stock options (excess of AMT income over regular tax income) 14 210,903 14 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) . . . . . . . . 15 2.814 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 15 16 589.773 Disposition of property (difference between AMT and regular tax gain or loss) . . . . 16 17 1,907,090 17 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 18 1,357,783 Passive activities (difference between AMT and regular tax income or loss) 18 19 309,574 19 Loss limitations (difference between AMT and regular tax income or loss) . . . . . . . 20 4.134 20 Circulation costs (difference between regular tax and AMT) . . . . . . 21 4,977 21 Long-term contracts (difference between AMT and regular tax income) . . . . . . . . . 22 8,836 22 Research and experimental costs (difference between regular tax and AMT) . . . . 23 5,641 23 24 54 24 Income from certain installment sales before January 1, 1987 25 7.141 25 26 125,162 26 27 71,866 27 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$207,500, see page 7 of the instructions.) . . . . . . 9,526,358 Part II **Alternative Minimum Tax** Child Under 18 = 82,280 Exemption. (If this form is for a child under age 18, see page 7 of the instructions.) IF your filing status is . . . AND line 28 is not over... THEN enter on line 29... Single or head of household . . . . . . \$112,500 \$44.350 Married filing jointly or qualifying widow(er) . 150,000 66.250 8,508,634 29 Married filing separately . . . . . . 75.000 33.125 If line 28 is over the amount shown above for your filing status, see page 7 of the instructions. Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 33 and 35 7.195.672 • If you are filing Form 2555 or 2555-EZ, see page 8 of the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured 7,195,657 31 for the AMT, if necessary), complete Part III on the back and enter the amount from line 55 here. • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result. 32 2,359,047 32 Alternative minimum tax foreign tax credit (see page 8 of the instructions) . . . . . . 7,171,268 33 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 51). If you used Schedule J to figure your tax, the amount from line 44 of Form 1040 must be refigured 34 8,820,499 

4,107,693

35

Form 1040, line 45

Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0-, Enter here and on

Form 6251 (2007)

Page 2

#### Part III **Tax Computation Using Maximum Capital Gains Rates**

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet on page 8 of the instructions	36	
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see page 9 of the instructions). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter  4,991,202		
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see page 9 of the instructions). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter		
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter		
40	Enter the <b>smaller</b> of line 36 or line 39	40	
41	Subtract line 40 from line 36	41	
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	42	4,510,293
43	Enter:  • \$63,700 if married filing jointly or qualifying widow(er),  • \$31,850 if single or married filing separately, or  • \$42,650 if head of household.		
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0		
45	Subtract line 44 from line 43. If zero or less, enter -0	-	
46	Enter the <b>smaller</b> of line 36 or line 37		
47	Enter the <b>smaller</b> of line 45 or line 46		
48	Multiply line 47 by 5% (.05)	48	836,422
49	Subtract line 47 from line 46		
50	Multiply line 49 by 15% (.15)	50	4,457,816
	If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go to line 51.		
51	Subtract line 46 from line 40		
52	Multiply line 51 by 25% (.25)	52	459,591
53	Add lines 42, 48, 50, and 52	53	
54	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	54	4,906,673
55	Enter the <b>smaller</b> of line 53 or line 54 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not		, , ,
	enter this amount on line 31. Instead, enter it on line 4 of the worksheet on page 8 of the instructions .	55	

NUMBER OF RETURNS FILED FOR SELECTED LINES

### **Installment Sale Income**

► Attach to your tax return.

OMB No. 1545-0228 Attachment

73

▶ Use a separate form for each sale or other disposition of Department of the Treasury property on the installment method. Sequence No. 79 Internal Revenue Service Identifying number Name(s) shown on return Total Forms Filed = 833.114 Description of property ▶ ..... 2a Date acquired (month, day, year) ► \_\_\_\_\_ b Date sold (month, day, year) ► \_\_\_\_ Was the property sold to a related party (see instructions) after May 14, 1980? If "No," skip line 4. . . . . . . . . . Yes □No Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No," ☐ No Gross Profit and Contract Price. Complete this part for the year of sale only. Part I 131,593 5 5 Selling price including mortgages and other debts. Do not include interest whether stated or unstated Mortgages, debts, and other liabilities the buyer assumed or took 6 the property subject to (see instructions) . . . . . . . . . . . . 7 7 8 8 9 10 10 Adjusted basis. Subtract line 9 from line 8 . . . . . . 11 11 Commissions and other expenses of sale 12 Income recapture from Form 4797, Part III (see instructions) . . . 12 118.434 13 13 130,198 14 14 Subtract line 13 from line 5. If zero or less, **do not** complete the rest of this form (see instructions) If the property described on line 1 above was your main home, enter the amount of your excluded 15 3,242 15 16 128,363 16 1,293 17 17 Contract price. Add line 7 and line 17 . . . 18 131,514 18 Installment Sale Income. Complete this part for the year of sale and any year you receive a payment or Part II have certain debts you must treat as a payment on installment obligations. 19 Gross profit percentage. Divide line 16 by line 18. For years after the year of sale, see instructions 19 20 20 If this is the year of sale, enter the amount from line 17. Otherwise, enter -0-774.090 21 Payments received during year (see instructions). Do not include interest, whether stated or unstated 21 22 774,381 22 Payments received in prior years (see instructions). **Do not** include 23 714.211 24 769,690 24 25 3,171 Enter the part of line 24 that is ordinary income under the recapture rules (see instructions). Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797 (see instructions) 26 769.306 Part III Related Party Installment Sale Income. Do not complete if you received the final payment this tax year. Name, address, and taxpayer identifying number of related party If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. Check the box that applies. a 

The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition (month, day, year) **b** The first disposition was a sale or exchange of stock to the issuing corporation. c The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition. **d** The second disposition occurred after the death of the original seller or buyer. e 🔲 It can be established to the satisfaction of the Internal Revenue Service that tax avoidance was not a principal purpose for either of the dispositions. If this box is checked, attach an explanation (see instructions). 30 Selling price of property sold by related party (see instructions) . . . . . . . . . 30 31 31 32 32 33 33 Total payments received by the end of your 2007 tax year (see instructions) . . . . . . 34 35 99 Multiply line 34 by the gross profit percentage on line 19 for year of first sale . . . . . . 35 36 \*

36

6252

99

37

Enter the part of line 35 that is ordinary income under the recapture rules (see instructions). Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797 (see instructions)

NUMBER OF RETURNS FILED FOR SELECTED LINES

### Form **6781**

Department of the Treasury

# Gains and Losses From Section 1256 Contracts and Straddles

► Attach to your tax return.

OMB No. 1545-0644

Attachment Sequence No. 82

Internal Revenue Service Identifying number Name(s) shown on tax return Total Forms Filed = 361,536 Check all applicable boxes (see instructions). A Mixed straddle election Mixed straddle account election Straddle-by-straddle identification election **D** Net section 1256 contracts loss election Part I Section 1256 Contracts Marked to Market (a) Identification of account (b) (Loss) (c) Gain 1 Add the amounts on line 1 in columns (b) and (c) 3 357,519 3 Net gain or (loss). Combine line 2, columns (b) and (c) 2,285 4 4 Form 1099-B adjustments. See instructions and attach schedule 357,481 5 Combine lines 3 and 4 . . . . . . . . . . . . . . . . Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions. If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be 21 6 carried back. Enter the loss as a positive number . . . 357.476 7 7 Combine lines 5 and 6 . . . . . . . . . . . . . Short-term capital gain or (loss). Multiply line 7 by 40% (.40). Enter here and include on the appropriate 355.083 8 line of Schedule D (see instructions) Long-term capital gain or (loss). Multiply line 7 by 60% (.60). Enter here and include on the appropriate 357,285 line of Schedule D (see instructions) 9 Gains and Losses From Straddles. Attach a separate schedule listing each straddle and its components. Part II Section A—Losses From Straddles (h) Recognized loss. (f) Loss. (e) Cost or (g) If column (e) (b) Date If column (f) is more Unrecognized (c) Date other basis is more than entered (d) Gross than (g), enter gain on closed out sulg (a) Description of property (d), enter difference. difference. into or sales price offsetting or sold expense of Otherwise, enter -0acquired Otherwise, sale positions enter -0-10 11a Enter the short-term portion of losses from line 10, column (h), here and include on the appropriate line of 1.546 11a b Enter the long-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions) . . . 473 11h Section B—Gains From Straddles (b) Date (f) Gain. If column (c) Date (e) Cost or other (d) Gross (d) is more than (e), entered (a) Description of property basis plus closed out into or enter difference. sales price or sold expense of sale Otherwise, enter -0acquired 12 13a Enter the short-term portion of gains from line 12, column (f), here and include on the appropriate line of 1,671 13a Enter the long-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D (see instructions) . \_\_. . . . 430 Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions) (e) Unrecognized gain. (c) Fair market value on last (d) Cost or other basis (b) Date If column (c) is more (a) Description of property than (d), enter difference. business day of tax year as adjusted acquired Otherwise, enter -0-14

Form **8283** 

(Rev. December 2006)

Department of the Treasury Internal Revenue Service **Noncash Charitable Contributions** 

► Attach to your tax return if you claimed a total deduction of over \$500 for all contributed property.

▶ See separate instructions.

OMB No. 1545-0908

Attachment Sequence No. **155** 

Name(s) shown on your income tax return

Total Forms Filed = 6,904,786

Identifying number

Note	. Figure the amou	ınt of your contribi	ution deduction b	efore con	nple	ting t	his form. Se	e you	r tax return instructions.		
Sec	items (o		ar items) for wh	nich you	clai	imed	a deduction	n of	<b>curities—</b> List in this se \$5,000 or less. Also, e instructions).		
Par	t I Informat	ion on Donated	Property—If yo	ou need	moi	re sp	ace, attach	a st	atement.		
1		(a) Name and addre donee organiza			(b) Description of donated property (For a donated vehicle, enter the year, make, model, condition, and attach Form 1098-C if required.)					, and mil	leage,
Α											
В											
С											
D											
Е											
Note	I If the amount you	u claimed as a ded	uction for an item	is \$500 c	or les	ss vo	ou do not hav	e to	complete columns (d), (e)	and (f	f)
	(c) Date of the contribution	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Dono	or's c	ost	(g) Fair market	value	(h) Method used to det the fair market val	termine	· <u>/·</u>
Α											
В				4,744,1	48		6,861,099				
C											
D E											
Par	entire into contributi	erest in a proper on listed in Part	ty listed in Part I; also attach th	I. Comp ne require	olete ed s	e line state	es 3a throu ment (see i	gh 30 nstru	· · · · · · · · · · · · · · · · · · ·	laced	on a
2a		om Part I that ider to more than one p						an er	ntire interest >		— .
b		med as a deduction				rt I: (	(1) For this	-			
С		ss of each organiz		y such co	ontri		(2) For any n was made		tax years   prior year (complete only	y if diff	 ferent
	Name of charitable or		<i>,</i>								
	Address (number, street, and room or suite no.)										
	City or town, state, ar	nd ZIP code									
d	For tangible prop	erty, enter the place	ce where the prop	perty is lo	cate	ed or	kept ▶				
е	Name of any per	son, other than the	e donee organizat	ion, havir	ng a	ctual	possession	of the	e property ►		
3a									ispose of the donated	Yes	No
	Did you give to a organization in cothe property, included to designate the property.	nyone (other than opperative fundrais uding the right to v	the donee organizing) the right to the rote donated secunicome, possess	zation or e income urities, to sion, or rig	anot from acqu ght t	ther on the uire the	organization donated property by the property by the property by	partic perty by pu	sipating with the donee or to the possession of rchase or otherwise, or		

### 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

Form	8283 (Rev. 12-200	06)	NUMBI	ER OF RI	ETURNS	FILED FOR	R SEL	ECTED LINES		I	Page <b>2</b>
Name(s) shown on your income tax return											
Sec	items	) for which you claim	ed a deduction	on of more	e than \$5,0	000 per item	or gro	List in this section or oup (except contribution perty listed in Section I	ons of	certain publicly t	
Pa	rt I Infor	mation on Dona	ated Prope	erty—To	be com	pleted by	the t	axpayer and/or the	e app	oraiser.	
4	Art* (contril Art* (contril Collectibles		more) 20,000)		Qualified Other Rea Intellectua	l Property				Equipment Securities Other	
other	similar objects. lectibles include co	iculptures, watercolors, poins, stamps, books, ger is, you must attach a	ns, jewelry, spo	rts memora	abilia, dolls,	etc., but not a	ırt as d		scripts,	, historical memorabi	ilia, and
5	(a) Description	of donated property (if	you need	(b) If tang	gible proper	ty was donate	d, give	a brief summary of the ov at the time of the gift	verall	(c) Appraised fa market value	air
B C										76,520	
D		T						e,	a inc	tructions	
	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's adjusted			bargain sales, nount received		(h) Amount claimed as a deduction		(i) Average trading p of securities	rice
A B			59,770	)	2	2,655		56,160		7,091	
C D											
Pal I decl marri	are that I am not the	aration of Appra	rty to the transa					Date y, employed by, or related ee, or party to the transacti	to any		
Also, appravalue the presult me to Sign	I declare that I holaisal, I am qualified Furthermore, I undenalty under secticing from the appraid the penalty under	d myself out to the pub to make appraisals of th derstand that a false or fi on 6701(a) (aiding and a sal of the value of the pr	e type of proper raudulent overst betting the und operty that I kno	ty being val tatement of erstatement ow, or reaso	ued. I certify the property t of tax liabi nably should	that the appra value as desc lity). In addition know, would	aisal fee cribed in on, I un be use	s; and that because of my es were not based on a per n the qualified appraisal or derstand that a substant d in connection with a retu mony by the Office of Prof	centag this Fo Il or gr rn or c	ge of the appraised porm 8283 may subjectors valuation misstalaim for refund, may	roperty at me to atement
Here Signature ►  Business address (including room or suite no.)					Title ▶ Date ▶					dentifying number	
City or town, state, and ZIP code											
Pa	rt IV Don	ee Acknowledgr	<b>nent—</b> To b	oe comp	leted by	the chari	table	organization.			
This	charitable organi		that it is a qua					and that it received the c	lonate	ed property as des	cribed
Furth porti	nermore, this org on thereof) withir	anization affirms that	in the event it e of receipt, it	will file Fo	rm <b>8282,</b> 🗅	onee Inform	ation F	s of the property describ Return, with the IRS and			
	s the organization of charitable organization	n intend to use the p unization (donee)	roperty for an	unrelated	luse? .			cation number		▶ ☐ Yes ☐	No_
Addre	ess (number, street	, and room or suite no.)	1			City or tow	n, state	e, and ZIP code			
Autho	orized signature					Title Date					

Department of the Treasury

Internal Revenue Service

NUMBER OF RETURNS FILED FOR SELECTED LINES

### **Mortgage Interest Credit**

(For Holders of Qualified Mortgage Credit Certificates Issued by State or Local Governmental Units or Agencies)

▶ See instructions on back. ► Attach to Form 1040 or 1040NR.

OMB No. 1545-0074 Attachment Sequence No.

Name(s) shown on your tax return

Total Forms Filed = 35.010

Your social security number

Enter the address of your main home to which the qualified mortgage certificate relates if it is different from the address shown on your tax return. Name of Issuer of Mortgage Credit Certificate Mortgage Credit Certificate Number Issue Date Part I **Current Year Mortgage Interest Credit** Interest paid on the certified indebtedness amount. If someone else (other than your spouse if 1 filing jointly) also held an interest in the home, enter only your share of the interest paid Enter the certificate credit rate shown on your mortgage credit certificate. Do not enter the % 2 3 If line 2 is 20% or less, multiply line 1 by line 2. If line 2 is more than 20%, or you refinanced 32,869 3 your mortgage and received a reissued certificate, see the instructions for the amount to enter. You must reduce your deduction for home mortgage interest on Schedule A (Form 1040) by the amount on line 3. 4,482 4 Enter any 2004 credit carryforward from line 18 of your 2006 Form 8396 . . . . . . . . 4 3,924 5 5 Enter any 2005 credit carryforward from line 16 of your 2006 Form 8396 . . . . 4,258 6 Enter any 2006 credit carryforward from line 19 of your 2006 Form 8396 . . . 6 35,010 7 7 8 8 Enter the amount from Form 1040, line 46, or Form 1040NR, line 43 Enter the total of the amounts from Form 1040, lines 47 through 49 and 1040 filers: lines 51 and 53; line 12 of the line 11 Worksheet in Pub. 972 (see instructions); and Form 5695, line 15 9 1040NR filers: Enter the total of the amounts from Form 1040NR, lines 44, 46 and 48; line 12 of the line 11 Worksheet in Pub. 972 (see instructions); and Form 5695, line 15 10 Subtract line 9 from line 8. If zero or less, enter -0- here and on line 11 and go to Part II 10 Current year mortgage interest credit. Enter the smaller of line 7 or line 10. Also include this amount in the total on Form 1040, line 54, or Form 1040NR, line 49, and check box a on 33.185 that line Part II Mortgage Interest Credit Carryforward to 2008. (Complete only if line 11 is less than line 7.) 12 12 Add lines 3 and 4 13 13 Enter the amount from line 7 14 14 Enter the **larger** of line 11 or line 12 15 Subtract line 14 from line 13 15 16 16 2006 credit carryforward to 2008. Enter the smaller of line 6 or line 15 . 17 17 18 2005 credit carryforward to 2008. Enter the smaller of line 5 or line 17 18 2007 credit carryforward to 2008. Subtract line 11 from line 3. If zero or less, enter -0-19

### **Passive Activity Loss Limitations**

NUMBER OF RETURNS FILED FOR SELECTED LINES See separate instructions.

► Attach to Form 1040 or Form 1041.

OMB No. 1545-1008 Attachment Sequence No. 88

Department of the Treasury Internal Revenue Service Name(s) shown on return

Identifying number Total Forms = 3.965.093

#### 2007 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities on page 3 of the instructions.) 1a Activities with net income (enter the amount from Worksheet 1, 614,400 1a b Activities with net loss (enter the amount from Worksheet 1, 2,414,675 1b c Prior years unallowed losses (enter the amount from Worksheet 1c 988,937 d Combine lines 1a, 1b, and 1c. 1d 2,659,858 Commercial Revitalization Deductions From Rental Real Estate Activities 554 2a Commercial revitalization deductions from Worksheet 2, column (a) **b** Prior year unallowed commercial revitalization deductions from 2b 1,081 c Add lines 2a and 2b. 2c 1.633 All Other Passive Activities 3a Activities with net income (enter the amount from Worksheet 3, 645.336 3a **b** Activities with net loss (enter the amount from Worksheet 3, 1,268,077 3b c Prior years unallowed losses (enter the amount from Worksheet 3, 1,020,348 1,760,313 d Combine lines 3a, 3b, and 3c, 3d Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. 3,965,084 Report the losses on the forms and schedules normally used If line 4 is a loss and: • Line 1d is a loss, go to Part II. Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15. Part II Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example. 2,448,638 5 Enter the smaller of the loss on line 1d or the loss on line 4 2,440,585 6 Enter \$150,000. If married filing separately, see page 8 . . . 2.381.480 Enter modified adjusted gross income, but not less than zero (see page 8) Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8. 1.673.858 1,673,858 9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see page 8 1.672.039 Enter the **smaller** of line 5 or line 9. . . . . . . . . 10 If line 2c is a loss, go to Part III. Otherwise, go to line 15. Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

	Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 1	age 8	of the instruction	s.
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	1,322	
12	Enter the loss from line 4	12		
13	Reduce line 12 by the amount on line 10	13	1,621	
14	Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13	14	1,322	
Pa	rt IV Total Losses Allowed			
15	Add the income, if any, on lines 1a and 3a and enter the total	15	913,859	

Total losses allowed from all passive activities for 2007. Add lines 10, 14, and 15. See page 10 of the instructions to find out how to report the losses on your tax return. . . . . . 16 2.375.975 (Rev. December 2006) Department of the Treasury Internal Revenue Service (99)

### **Low-Income Housing Credit**

► Attach to your tax return.

OMB No.	1545-0984
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Attachment Sequence No. 36a

Identifying number

Name(s) shown on return

	Total Forms Filed = 59,523		,,	
1 2	Number of Forms 8609-A attached			
	(i) (ii) (iii) (iv)			
3	Current year credit from attached Form(s) 8609-A (see instructions)	3	1,074	
4	Low-income housing credit from partnerships, S corporations, estates, and trusts	4	58,781	
5	Add lines 3 and 4. Estates and trusts, go to line 6; partnerships and S corporations, report this amount on Schedule K; all others, report this amount on the applicable line of Form 3800 (e.g.,			
	line 1e of the 2006 Form 3800) Non -deductible Housing Credit = *	5	59,521	
6	Amount allocated to beneficiaries of the estate or trust (see instructions)	6		
7	Estates and trusts. Subtract line 6 from line 5. Report this amount on the applicable line of Form 3800 (e.g., line 1e of the 2006 Form 3800)	7		

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

#### What's New

- The tax liability limit is no longer figured on this form; instead, it must be figured on Form 3800, General Business Credit.
- Taxpayers that are not partnerships, S corporations, estates, or trusts, and whose only source of this credit is from those pass-through entities, are not required to complete or file this form. Instead, they can report this credit directly on line 1e of Form 3800.
- The IRS will revise this December 2006 version of the form only when necessary. Continue to use this version for tax years beginning after 2005 until a new revision is issued.

### **Purpose of Form**

Use Form 8586 to claim the low-income housing credit. This general business credit is allowed for each new qualified low-income building placed in service after 1986. Generally, it is taken over a 10-year credit period.

### **Qualified Low-Income Housing Project**

The credit cannot exceed the amount allocated to the building. See section 42(h)(1) for details.

The low-income housing credit can only be claimed for residential rental buildings in low-income housing projects that meet one of the minimum set-aside tests. For details, see the instructions for Form 8609, Part II, line 10c.

Except for buildings financed with certain tax-exempt bonds, you may not take a low-income housing credit on a building if it has not received an allocation from the housing credit agency. No allocation is needed when 50% or more of the aggregate basis of the building and the land on which the building is located is financed with certain tax-exempt bonds issued after 1989 for buildings placed in service after 1989. The owner still must get a Form 8609 from the appropriate housing credit agency (with the applicable items completed, including an assigned BIN). "Land on which the building is located" includes only land that is functionally related and subordinate to the qualified low-income building (see Regulations sections 1.103-8(a)(3) and 1.103-8(b)(4)(iii)).

### **Recapture of Credit**

There is a 15-year compliance period during which the residential rental building must continue to meet certain requirements. If, as of the close of any tax year in this period, there is a reduction in the qualified basis of the building from the previous year, you may have to recapture a part of the credit you have taken. Similarly, you may have to recapture part of the credits taken in previous years upon certain dispositions of the building or interests therein. If you must recapture credits, use Form 8611, Recapture of Low-Income Housing Credit. See section 42(i) for details.

#### Recordkeeping

Keep a copy of this Form 8586 together with all Forms 8609. Schedules A (Form 8609) (and successor Forms 8609-A), and Forms 8611 for 3 years after the 15-year compliance period ends.

Department of the Treasury

Internal Revenue Service

Part I

### NUMBER OF RETURNS FILED FOR SELECTED LINES Nondeductible IRAs

► See separate instructions.

► Attach to Form 1040, Form 1040A, or Form 1040NR.

Attachment

Sequence No.

Apt. no.

OMB No. 1545-0074

Fill in Your Address Only If You Are Filing This Form by Itself and Not With Your Tax Return

Total Forms Filed = 2,138,006 Home address (number and street, or P.O. box if mail is not delivered to your home) Your social security number

City, town or post office, state, and ZIP code

Name. If married, file a separate form for each spouse required to file Form 8606. See page 5 of the instructions.

Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2007.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2007 and you made nondeductible contributions to a traditional IRA in 2007 or an earlier year. For this purpose, a distribution does not include a rollover, qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007 (excluding any portion  $v_{OU}$  recharacterized) and  $v_{OU}$  made nondeductible contributions to a traditional IRA in 2007 or an earlier year

	you recharacterized) and you made nondeductible contributions to a traditional main z	001 01	an earner year.	
1	Enter your nondeductible contributions to traditional IRAs for 2007, including those made for 2007 from January 1, 2008, through April 15, 2008 (see page 5 of the instructions)	1	716,563	
2	Enter your total basis in traditional IRAs (see page 5 of the instructions)	2	939,993	
3	Add lines 1 and 2	3	1,294,212	
	In 2007, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion?  No Enter the amount from line 3 on line 14. Do not complete the rest of Part I.  Go to line 4.			
4	Enter those contributions included on line 1 that were made from January 1, 2008, through		0.502	
	April 15, 2008	4	6,593	
5	Subtract line 4 from line 3	5	1,292,172	
6	Enter the value of <b>all</b> your traditional, SEP, and SIMPLE IRAs as of December 31, 2007, plus any outstanding rollovers (see page 6 of the instructions)	_		
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2007. <b>Do not</b> include rollovers, qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see page 6 of the instructions)			
9	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007. <b>Do not</b> include amounts converted that you later recharacterized (see page 6 of the instructions). Also enter this amount on line 16	-		
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"			
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also enter this amount on line 17			
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA			
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	306,080	
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2007 and earlier years	14	1,259,218	
15	Taxable amount. Subtract line 12 from line 7. Also include this amount on Form 1040, line 15b;			
	Form 1040A, line 11b; or Form 1040NR, line 16b	15	316,468	
	<b>Note:</b> You may be subject to an additional 10% tax on the amount on line 15 if you were under age 59½ at the time of the distribution (see page 6 of the instructions).			

Page 2

Form 8606 (2007)

	Part II	2007 Conversions	From Traditional.	SEP. or SIMPLE	IRAs to Roth IRAs
--	---------	------------------	-------------------	----------------	-------------------

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2007 (excluding any portion you recharacterized).

**Caution:** If your modified adjusted gross income is over \$100,000 **or** you are married filing separately and you lived with your spouse at any time in 2007, you **cannot** convert any amount from traditional, SEP, or SIMPLE IRAs to Roth IRAs for 2007. If you erroneously made a conversion, you must recharacterize (correct) it (see page 6 of the instructions).

16	convert you late	ted from trad	litional, SEP, and S erized back to tradi	nount from line 8. Oth IMPLE IRAs to Roth IRA tional, SEP, or SIMPLE	s in 2007. <b>Do not</b> i	nclude amounts	16	53,301	
17			art I, enter the amore 6 of the instruction	unt from line 11. Otherwons)	rise, enter your bas		17	10,626	
18				m line 16. Also include m m 1040NR, line 16b .			18	50,639	
Par	<b>t III</b> (	<b>Distributior</b> Complete thin Include a roll	ns From Roth IR s part only if you to over, qualified char		a Roth IRA in 200	07. For this purpo			
19				ns from Roth IRAs in 20 the instructions)			19	355,029	
20	Qualifie \$10,000		homebuyer expense	es (see page 7 of the ins	structions). <b>Do not</b>	enter more than	20	9,820	
21	Subtrac	ct line 20 fro	m line 19. If zero o	r less, enter -0- and sk	ip lines 22 through	25	21	347,859	
22	Enter y	our basis in	Roth IRA contribut	ions (see page 7 of the	instructions) .		22	219,099	
23				less, enter -0- and skip ax (see page 7 of the in		more than zero,	23	192,906	
24	Enter y	our basis in	Roth IRA conversion	ons (see page 7 of the i	nstructions) .		24	18,285	
25				n line 23. If zero or less, line 11b; or Form 1040			25	182,074	
Are I	Filing Tl	only If You his Form I Not With eturn		rjury, I declare that I have ex it is true, correct, and comple		ding accompanying at	tachmer	nts, and to the best	t of my
Paid		Preparer's signature			Date	Check if self- employed	Prepa	rer's SSN or PTIN	
	arer's Only	Firm's name ( if self-employ- address, and	ed), ———		1	EIN Phone no.	(	)	

Form **8606** (2007)

### Tax for Children Under Age 18

With Investment Income of More Than \$1.700

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

▶ Attach only to the child's Form 1040, Form 1040A, or Form 1040NR. Attachment ► See separate instructions. Sequence No. 33 Child's social security number Child's name shown on return Total Forms Filed = 458,397 Before you begin: If the child, the parent, or any of the parent's other children under age 18 must use the Schedule D Tax Worksheet or has income from farming or fishing, see Pub. 929, Tax Rules for Children and Dependents. It explains how to figure the child's tax using the Schedule D Tax Worksheet or Schedule J (Form 1040). Parent's name (first, initial, and last). Caution: See instructions before completing. B Parent's social security number Parent's filing status (check one): Single Married filing jointly Married filing separately Head of household Qualifying widow(er) Child's Net Investment Income 1 456,796 Enter the child's investment income (see instructions) . . . . . . If the child did not itemize deductions on Schedule A (Form 1040 or Form 1040NR), enter 458,397 2 Subtract line 2 from line 1. If zero or less, stop; do not complete the rest of this form but do 3 443.565 Enter the child's taxable income from Form 1040, line 43; Form 1040A, line 27; or Form 1040NR, 4 line 40. If the child files Form 2555 or 2555-EZ, see the instructions . . . . . . . . . . 439,497 Enter the smaller of line 3 or line 4. If zero, stop; do not complete the rest of this form but do 439.497 5 Part II **Tentative Tax Based on the Tax Rate of the Parent** Enter the parent's taxable income from Form 1040, line 43; Form 1040A, line 27; Form 1040EZ, line 6; Form 1040NR, line 40; or Form 1040NR-EZ, line 14. If zero or less, enter -0-. If the parent 6 393,883 Enter the total, if any, from Forms 8615, line 5, of all other children of the parent named 7 177,029 8 441,301 Enter the tax on the amount on line 8 based on the parent's filing status above (see instructions). If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or 441.301 9 Schedule J (Form 1040) is used to figure the tax, check here Boxes Checked =408.990 ▶ Enter the parent's tax from Form 1040, line 44; Form 1040A, line 28, minus any alternative minimum tax; Form 1040EZ, line 10; Form 1040NR, line 41; or Form 1040NR-EZ, line 15. Do not include any tax from Form 4972, 8814, or 8889 or any tax from recapture of an education credit. If the parent files Form 2555 or 2555-EZ, see the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to 393.883 10 figure the tax, check here . . . . . . . . . . . . . . . Boxes Checked = 221,413 ▶ Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line 440.016 11 **12a** Add lines 5 and 7 443.047 12b Divide line 5 by line 12a. Enter the result as a decimal (rounded to at least three places) 438,497 13 Child's Tax-If lines 4 and 5 above are the same, enter -0- on line 15 and go to line 16. Part III 415,485 Enter the tax on the amount on line 14 based on the child's filing status (see instructions). If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or 415,485 15 439,497 16 Add lines 13 and 15 Enter the tax on the amount on line 4 based on the child's filing status (see instructions). If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or 439.497 17 Schedule J (Form 1040) is used to figure the tax, check here . Checked = 374,446 Enter the larger of line 16 or line 17 here and on the child's Form 1040, line 44; Form 1040A,

439.497

18

line 28; or Form 1040NR, line 41. If the child files Form 2555 or 2555-EZ, see the instructions

OMB No. 1545-1073

Identifying number

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) NUMBER OF RETURNS FILED FOR SELECTED LINES

### Credit for Prior Year Minimum Tax— Individuals, Estates, and Trusts

► See separate instructions. Attachment Sequence No. 74

Department of the Treasury Internal Revenue Service Name(s) shown on return

► Attach to Form 1040, 1040NR, or 1041.

Total Forms Filed = 1,435,383 Part I **Net Minimum Tax on Exclusion Items** 1,408,872 1 Combine lines 1, 6, and 10 of your 2006 Form 6251. Estates and trusts, see instructions 1,323,535 2 Enter adjustments and preferences treated as exclusion items (see instructions) . . . . . . 3 14.601 Minimum tax credit net operating loss deduction (see instructions) . . . . . . . . . . . . . . . . . Combine lines 1, 2, and 3. If more than zero or you filed Form 2555 or 2555-EZ for 2006, go to line 5. If zero or less and you did not file Form 2555 or 2555-EZ for 2006, enter -0- here and on line 15 and go to Part II. If more than \$200,100 and you were married filing separately for 2006, 1,371,027 4 Enter: \$62,550 if married filing jointly or qualifying widow(er) for 2006; \$42,500 if single or head of 5 1,435,383 household for 2006; or \$31,275 if married filing separately for 2006. Estates and trusts, enter \$22,500 Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2006; \$112,500 if single or head of 1,435,383 6 household for 2006; or \$75,000 if married filing separately for 2006. Estates and trusts, enter \$75,000 7 1,049,734 7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9 . . . 1,049,734 8 9 1,162,752 Subtract line 8 from line 5. If zero or less, enter -0-. If this form is for a child under age 18, see instructions Subtract line 9 from line 4. If more than zero or you filed Form 2555 or 2555-EZ for 2006, go to line 11. If zero or less and you did not file Form 2555 or 2555-EZ for 2006, enter -0- here and 1,298,645 10 on line 15 and go to Part II. Form 1040NR filers, see instructions • If for 2006 you filed Form 2555 or 2555-EZ, see page 2 of the instructions for the amount to Using Part III = enter. 975,277 • If for 2006 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 14a and 15, column (2), of Schedule D (Form 1041)), 1,296,974 11 complete Part III of Form 8801 and enter the amount from line 48 here. • All others: If line 10 is \$175,000 or less (\$87,500 or less if married filing separately for 2006), multiply line 10 by 26% (.26). Otherwise, multiply line 10 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2006) from the result. 304,908 12 Minimum tax foreign tax credit on exclusion items (see instructions). . . . . . 13 1,293,228 Tentative minimum tax on exclusion items. Subtract line 12 from line 11 14 1,306,699 Enter the amount from your 2006 Form 6251, line 34, or 2006 Form 1041, Schedule I, line 55 Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-1,031,796 15 Part II Current Year Nonrefundable and Refundable Credits and Carryforward to 2008 1.160.014 16 Enter the amount from your 2006 Form 6251, line 35, or 2006 Form 1041, Schedule I, line 56 17 17 910.183 18 18 Subtract line 17 from line 16. If less than zero, enter as a negative amount . . . . 959,722 19 19 2006 minimum tax credit carryforward. Enter the amount from your 2006 Form 8801, line 26 20 1,254 Enter your 2006 unallowed qualified electric vehicle credit (see instructions) . . . . . . 20 1,379,496 21 Combine lines 18, 19, and 20. If zero or less, stop here and see instructions . . . . . 21 22 1,275,663 Enter your 2007 regular income tax liability minus allowable credits (see instructions) . . . 22 23 1,239,134 23 Enter the amount from your 2007 Form 6251, line 33, or 2007 Form 1041, Schedule I, line 54. 24 394,791 24 Subtract line 23 from line 22. If zero or less, enter -0-Current year nonrefundable credit. Enter the smaller of line 21 or line 24. Also enter this amount 394,791 on your 2007 Form 1040, line 55; Form 1040NR, line 50; or Form 1041, Schedule G, line 2d 25 • Estates and trusts: Leave lines 26 and 27 blank and go to line 28. • Individuals: Did you have a minimum tax credit carryforward to 2005 (on your 2004 Form 8801, No. Leave lines 26 and 27 blank and go to line 28. 177,268 Yes. Complete Part IV of Form 8801 to figure the amount to enter . . . . 26 27 Is line 26 more than line 25? No. Leave line 27 blank and go to line 28. Yes. Subtract line 25 from line 26. This is your current year refundable credit. Enter the 151.643 result here and on your 2007 Form 1040, line 71, or Form 1040NR, line 69 . . . . 27 Credit carryforward to 2008. Subtract the larger of line 25 or line 26 from line 21. Keep a record 28 1,092,914

Page 2

Form 8801 (2007)

Pa	rt III Tax Computation Using Maximum Capital Gains Rates		
	<b>Caution.</b> If you did not complete the 2006 Qualified Dividends and Capital Gain Tax Worksheet, the 2006 Schedule D Tax Worksheet, or Part V of the 2006 Schedule D (Form 1041), see the instructions before completing this part.		
29 30	Enter the amount from Form 8801, line 10	29	
	If you figured your 2006 tax using the 2006 Qualified Dividends and Capital Gain Tax Worksheet, skip line 31 and enter the amount from line 30 on line 32. Otherwise, go to line 31.		
31	Enter the amount from line 19 of your 2006 Schedule D (Form 1040), or line 14b, column (2), of the 2006 Schedule D (Form 1041)	_	
32	Add lines 30 and 31, and enter the <b>smaller</b> of that result or the amount from line 10 of your 2006 Schedule D Tax Worksheet	33	
34	Subtract line 33 from line 29	34	
35	If line 34 is \$175,000 or less (\$87,500 or less if married filing separately for 2006), multiply line 34 by 26% (.26). Otherwise, multiply line 34 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2006) from the result	35	
36	Enter:  • \$61,300 if married filing jointly or qualifying widow(er) for 2006,  • \$30,650 if single or married filing separately for 2006,  • \$41,050 if head of household for 2006, or  • \$2,050 for an estate or trust		
37	Enter the amount from line 7 of your 2006 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2006 Schedule D Tax Worksheet, or the amount from line 23 of the 2006 Schedule D (Form 1041), whichever applies. If you did not complete either worksheet or Part V of the 2006 Schedule D (Form 1041), enter -0-		
38	Subtract line 37 from line 36. If zero or less, enter -0	_	
39 40	Enter the <b>smaller</b> of line 29 or line 30		
41 42	Multiply line 40 by 5% (.05)	41	
43	Multiply line 42 by 15% (.15)	43	
	If line 31 is zero or blank, skip lines 44 and 45 and go to line 46. Otherwise, go to line 44.		
44	Subtract line 39 from line 33		
45 46	Multiply line 44 by 25% (.25)	45 46	_
47	If line 29 is \$175,000 or less (\$87,500 or less if married filing separately for 2006), multiply line 29 by 26% (.26). Otherwise, multiply line 29 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2006) from the result	47	
48	Enter the <b>smaller</b> of line 46 or line 47 here and on line 11. (If you filed Form 2555 or 2555-EZ for 2006, see page 4 of the instructions)	48	

for 2006, see page 4 of the instructions) . .

<sup>\*</sup> The 2006 Qualified Dividends and Capital Gain Tax Worksheet is on page 38 of the 2006 Instructions for Form 1040. The 2006 Schedule D Tax Worksheet is on page D-10 of the 2006 Instructions for Schedule D (Form 1040) (page 38 of the 2006 Instructions for Form 1041).

### Additional Child Tax Credit

NUMBER OF RETURNS FILED FOR SELECTED LINES



OMB No. 1545-0074 Sequence No. 47

Department of the Treasury Internal Revenue Service

Name(s) shown on return Your social security number Total Forms Filed = 16,018,377 Part I **All Filers** Enter the amount from line 1 of your Child Tax Credit Worksheet on page 40 of the Form 1040 instructions, page 36 of the Form 1040A instructions, or page 21 of the Form 1040NR instructions. If you used Pub. 1 16,018,364 972, enter the amount from line 8 of the worksheet on page 4 of the publication 2 8,780,210 Enter the amount from Form 1040, line 52, Form 1040A, line 32, or Form 1040NR, line 47 15,978,003 3 Subtract line 2 from line 1. If zero, stop; you cannot take this credit **4a** Enter your total earned income (see instructions on back) . . . **b** Nontaxable combat pay (see instructions on 182,619 back) . . . . . . . . . . . . . Is the amount on line 4a more than \$11,750? No. Leave line 5 blank and enter -0- on line 6. 15,775,471 Yes. Subtract \$11,750 from the amount on line 4a. Enter the result 15,774,472 6 Multiply the amount on line 5 by 15% (.15) and enter the result **Next.** Do you have three or more qualifying children? 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. ☐ 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. Certain Filers Who Have Three or More Qualifying Children Part II 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 7 1,612,242 worked for a railroad, see instructions on back . . . . . . . . . . . . **1040 filers:** Enter the total of the amounts from Form 1040, lines 27 and 59, plus any taxes that you identified using code 8 359,551 "UT" and entered on the dotted line next to line 63. 1040A filers: Enter -0-. **1040NR filers:** Enter the total of the amounts from Form 1040NR, line 54, plus any taxes that you identified using code "UT" and entered on the dotted line next to line 58. 9 1,793,582 Add lines 7 and 8 . 10 1040 filers: Enter the total of the amounts from Form 1040, lines 66a and 67. 1040A filers: Enter the total of the amount from Form 1040A, line 1.064.688 10 40a, plus any excess social security and tier 1 RRTA taxes withheld that you entered to the left of line 42 (see instructions on back). **1040NR filers:** Enter the amount from Form 1040NR, line 61. 11 953,494 Subtract line 10 from line 9. If zero or less, enter -0-1,839,960 Enter the **larger** of line 6 or line 11 . . . . . . . . . Next, enter the smaller of line 3 or line 12 on line 13. Part III **Additional Child Tax Credit** 15,884,285 This is your additional child tax credit Enter this amount on Form 1040 line 68 Form 1040A, line 41, or Form 1040NR, line 62.

NUMBER OF RETURNS FILED FOR SELECTED LINES
Parents' Election To Report
Child's Interest and Dividends

► See instructions.

OMB No. 1545-0074

Attachment Sequence No. 40

Department of the Treasury Internal Revenue Service

Name(s) shown on your return

► Attach to parents' Form 1040 or Form 1040NR.

Total Forms Filed = 206,336

Your social security number

if yo	tion. The federal income tax on your child's income, including qual u file a separate tax return for the child instead of making this elec your child could take on his or her own return. For details, see Tax	tion. 7	This is because you ca	nnot ta	ke certain tax be	
Α	Child's name (first, initial, and last)  Combined Totals for Form	8814			ild's social security n Child's SSN = 20	
С	2nd Child's SSN = 95,5 If more than one Form 8814 is attached, check here	44 	3rd Child's SSI			
Pai	child's Interest and Dividends To Report on Your F	Retur	n			
1a	Enter your child's <b>taxable</b> interest. If this amount is different from child's Forms 1099-INT and 1099-OID, see the instructions		nounts shown on the	1a	100,244	
b	Enter your child's <b>tax-exempt</b> interest. <b>Do not</b> include this amount on line 1a	1b	5,073			
2a	Enter your child's ordinary dividends, including any Alaska Perman child received any ordinary dividends as a nominee, see the instru		-	2a	164,334	
b	Enter your child's qualified dividends included on line 2a. See the instructions	2b	111,391			
3	Enter your child's capital gain distributions. If your child received ar as a nominee, see the instructions			3	93,249	
4	Add lines 1a, 2a, and 3. If the total is \$1,700 or less, skip lines 5 the lift the total is \$8,500 or more, <b>do not</b> file this form. Your child <b>mus</b> to report the income.	t file l	nis or her own return	4	206,254	
5	Base amount			5 6	92,823	00
6	Subtract line 5 from line 4					
7	Divide line 2b by line 4. Enter the result as a decimal (rounded to at least three places)	7				
8	Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places)	8				
9	Multiply line 6 by line 7. Enter the result here. See the instructions for where to report this amount on your return	9	67,132			
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return	10	56,649			
11	Add lines 9 and 10			11	71,273	
12	Subtract line 11 from line 6. Include this amount in the total on For 1040NR, line 21. In the space next to line 21, enter "Form 8814" are	nd sho	w the amount. If you		05.040	
	checked the box on line C above, see the instructions. Go to line			12	85,940	
Par	Tax on the First \$1,700 of Child's Interest and Divi	dend	S			
13	Amount not taxed			13	850	00
14	Subtract line 13 from line 4. If the result is zero or less, enter -0			14	196,022	
15	Tax. Is the amount on line 14 less than \$850?		)	15	196,016	
	<ul> <li>No. Enter \$85 here and see the Note below.</li> <li>✓ Yes. Multiply line 14 by 10% (.10). Enter the result here and see the Note below.</li> </ul>	he <b>N</b> o	te below		,	
	e. If you checked the box on line C above, see the instructions. Othe form 1040, line 44, or Form 1040NR, line 41. Be sure to check box	rwise,	include the amount fro			enter

NUMBER OF RETURNS FILED FOR SELECTED LINES

### **Like-Kind Exchanges**

(and section 1043 conflict-of-interest sales)

► Attach to your tax return.

Name(s) shown on tax return

Department of the Treasury Internal Revenue Service

Total Forms Filed = 197,019

Attachment Sequence No. **109** Identifying number

Pa	rt I Information on the Like-Kind Exchange					
1	Note: If the property described on line 1 or line 2 is real or personal prop Description of like-kind property given up ▶					
2	Description of like-kind property received ▶					
3	Date like-kind property given up was originally acquired (month, day, year)					
4	Date you actually transferred your property to other party (month, day, year)					
5	Date like-kind property you received was identified by written notice to another party (month, day, year). See instructions for 45-day written notice requirement					
6	Date you actually received the like-kind property from other party (month,	day, year). See instructions	6	/	/	
7	Was the exchange of the property given up or received made with a (such as through an intermediary)? See instructions. If "Yes," comple				Yes	□No
Pa 8	rt II Related Party Exchange Information  Name of related party	Relationship to you	Rola	ted party's ide	ntifying	number
	Address (no., street, and apt., room, or suite no., city or town, state, and ZIP code)			,		
9	During this tax year (and before the date that is 2 years after the last exchange), did the related party directly or indirectly (such as throug part of the like-kind property received from you in the exchange?.  During this tax year (and before the date that is 2 years after the last	h an intermediary) sell or d	ispose	of any	Yes	□No
	exchange), did you sell or dispose of any part of the like-kind proper		-	_	Yes	□No
	If both lines 9 and 10 are "No" and this is the year of the exchange, go to year of the exchange, stop here. If either line 9 or line 10 is "Yes," comp gain or (loss) from line 24 <b>unless</b> one of the exceptions on line 11 applies	lete Part III and report on this				
11	If one of the exceptions below applies to the disposition, check the	applicable box:				
а	☐ The disposition was after the death of either of the related partie	<del>9</del> S.				
b	$\hfill\Box$ The disposition was an involuntary conversion, and the threat of	conversion occurred after	the ex	change.		
С	You can establish to the satisfaction of the IRS that neither the principal purpose. If this box is checked, attach an explanation		tion ha	ad tax avoi	dance	as its

Form 8824 (2007)	NUMBER OF RETURNS FILED FOR S
Name(s) shown on tax return. Do not enter name a	and social security number if shown on other side.

Your social security number

Page 2

В-	. III. Dealined Cain on (Leas) Decomined Cain and Basic of Library	. D		
Pa	Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Caution: If you transferred and received (a) more than one group of like-kind properties or (b) cash of see Reporting of multi-asset exchanges in the instructions.			ty,
	Note: Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherw	vise, go	o to line 15.	
12	Fair market value (FMV) of other property given up 12 3,934			
13	Adjusted basis of other property given up			
14	Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or (loss) in the same manner as if the exchange had been a sale	14	4,030	
	Caution: If the property given up was used previously or partly as a home, see Property used as home in the instructions.			
15	Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced (but not below zero) by any exchange expenses you incurred (see instructions)	15	25,777	
16	FMV of like-kind property you received	16	171,387	
17	Add lines 15 and 16	17	173,260	
18	Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses <b>not</b> used on line 15 (see instructions)	18	194,723	
19	Realized gain or (loss). Subtract line 18 from line 17	19	187,806	
20	Enter the smaller of line 15 or line 19, but not less than zero	20	21,780	
21	Ordinary income under recapture rules. Enter here and on Form 4797, line 16 (see instructions)	21	3,970	
22	Subtract line 21 from line 20. If zero or less, enter -0 If more than zero, enter here and on Schedule D or Form 4797, unless the installment method applies (see instructions)	22	22,166	
23	Recognized gain. Add lines 21 and 22	23	23,241	
24	Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions	24	183,972	
25	Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23  rt IV Deferral of Gain From Section 1043 Conflict-of-Interest Sales	25	193,400	_
26 27	Enter the number from the upper right corner of your certificate of divestiture. ( <b>Do not</b> attach a copy of your certificate. Keep the certificate with your records.) ▶  Description of divested property ▶			
	Decemption of alreading property P			
28	Description of replacement property ►			
29	Date divested property was sold (month, day, year)	29	/ /	
30	Sales price of divested property (see instructions)	-		
31	Basis of divested property			
32	Realized gain. Subtract line 31 from line 30	32		_
33	Cost of replacement property purchased within 60 days after date of sale			
34	Subtract line 33 from line 30. If zero or less, enter -0	34		_
35	Ordinary income under recapture rules. Enter here and on Form 4797, line 10 (see instructions)	35		_
36	Subtract line 35 from line 34. If zero or less, enter -0 If more than zero, enter here and on Schedule D or Form 4797 (see instructions)	36		_
37	Deferred gain. Subtract the sum of lines 35 and 36 from line 32	37		_
20	Pagin of replacement property Subtract line 27 from line 22	20		

NUMBER OF RETURNS FILED FOR SELECTED LINES

### **Expenses for Business Use of Your Home**

8829

► File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.

2007 Attachment

OMB No. 1545-0074

Department of the Treasury Sequence No. 66 See separate instructions. Internal Revenue Service Name(s) of proprietor(s) Your social security number Total Forms Filed = Not available Part I Part of Your Home Used for Business Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory 1 2 2 3 % For daycare facilities not used exclusively for business, go to line 4. All others go to line 7. Multiply days used for daycare during year by hours used per day 4 5 8,760 hr. 5 Total hours available for use during the year (365 days  $\times$  24 hours) (see instructions) 6 Divide line 4 by line 5. Enter the result as a decimal amount . . . L Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3. . . . . 7 % **Figure Your Allowable Deduction** Enter the amount from Schedule C, line 29, plus any net gain or (loss) derived from the business use of your home and shown on Schedule D or Form 4797. If more than one place of business, see instructions 8 See instructions for columns (a) and (b) before (a) Direct expenses (b) Indirect expenses completing lines 9-21. 9 Casualty losses (see instructions) . . . . 9 10 10 Deductible mortgage interest (see instructions) 11 11 Real estate taxes (see instructions) . . . . 12 12 Add lines 9, 10, and 11 . . . . . . . . . . 13 13 Multiply line 12, column (b) by line 7 . . . . 14 Add line 12, column (a) and line 13. . . . . 14 15 Subtract line 14 from line 8. If zero or less, enter -0-15 16 16 Excess mortgage interest (see instructions) . . 17 17 18 18 19 19 20 20 21 Other expenses (see instructions) . . . . 21 22 22 Add lines 16 through 21 . . . . . . . . . . Multiply line 22, column (b) by line 7 . . . . . . . . . . . . . . 23 23 24 Carryover of operating expenses from 2006 Form 8829, line 42 . . . 25 25 Add line 22 in column (a), line 23, and line 24 . . . . . . . . . . . 26 26 Allowable operating expenses. Enter the **smaller** of line 15 or line 25 . . . Limit on excess casualty losses and depreciation. Subtract line 26 from line 15 . . . 27 27 28 1,783,408 29 Depreciation of your home from Part III below . . . . . . . . . . . Carryover of excess casualty losses and depreciation from 2006 Form 8829, line 43 31 31 32 32 Allowable excess casualty losses and depreciation. Enter the smaller of line 27 or line 31 . . . 33 33 48.049 34 Casualty loss portion, if any, from lines 14 and 32. Carry amount to Form 4684, Section B . . . Allowable expenses for business use of your home. Subtract line 34 from line 33. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions ▶ 35 **Depreciation of Your Home** Part III 36 Enter the smaller of your home's adjusted basis or its fair market value (see instructions) . 37 37 38 38 39 Business basis of building. Multiply line 38 by line 7 . . . . . . . . . . . . . . . . 39 40 % 40 Depreciation percentage (see instructions) . . . Depreciation allowable (see instructions). Multiply line 39 by line 40. Enter here and on line 29 above 41 41 Carryover of Unallowed Expenses to 2008 Part IV

Operating expenses. Subtract line 26 from line 25. If less than zero, enter -0- . . . .

For Paperwork Reduction Act Notice, see page 4 of separate instructions.

Excess casualty losses and depreciation. Subtract line 32 from line 31. If less than zero, enter -0-

659,687

42

43

Cat. No. 13232M

NUMBER OF RETURNS FILED FOR SELECTED LINES

### **Qualified Adoption Expenses**

► Attach to Form 1040 or 1040NR.

OMB No. 1545-0074 Attachment Sequence No. 38

Department of the Treasury Internal Revenue Service

► See separate instructions.

lame(s) shown on return	Your social security number
Total Forms Filed = 111,480	

Before you begin: See Definitions on page 1 of the instructions. Information About Your Fligible Child or Children—You must complete this part. See page

1						heck	if child was—				
	(a Child's First			(b) Child's year of birth	(c) born ber 1990 a disable	nd	(d) a child with special needs	(e) a foreign child		<b>(f)</b> Child's identifying number	
hild 1				108,606	634		32,797	30,437	1	108,	,598
hild 2				25,189	0		8,361	10,357	1	23,0	098
aut	ion. If the child was a f	oreign child, see <b>Spe</b>	cial rı	ules in the ins	truction	for	r line 1, colu	umn (e),	that b	egin on page 2, l	befo
	complete Part II or Part		nploye	er-provided a	doption	bei	nefits, com	plete Par	t III or	n the back next.	
ar	t II Adoption Credi	t				1					1
				Child	1		Child 2	2			
2	Maximum adoption cre	edit per child	2	\$11,39	00 00		\$11,39	00 00	-		
	Did you file Form 883	-					,				
	for the same child?										
	No. Enter -0	)									
	Yes. See page 4 of	I	3						-		
	the amount to ente	•	4								
;	Subtract line 3 from line Qualified adoption exp		-						-		
	6 .1		5	60,370			9,411				
	Caution. Your qualified	adoption expenses									
	may not be equal to the	adoption expenses									
	you paid in 2007.	4 11 5	6								
) 7	Enter the <b>smaller</b> of lin Add the amounts on lir			rough 11 and	ontor O		line 10		7	55,137	
	Modified adjusted gross	•		-		- OH	1 111110 12 .			·	
)	Is line 8 more than \$17	, , ,	1 1110 11	istructions, .							
		nd 10, and enter -0-	on line	e 11.							
	☐ Yes. Subtract \$170				. 9				-		
)	Divide line 9 by \$40,00		a dec	cimal (rounded	l to at le	ast	three place	s).	10	~	
	Do not enter more than								10	× .	T
)	Multiply line 7 by line 1 Subtract line 11 from li					•			12	54,304	
	Credit carryforward fro				arrvforw	ard	Workshee	 et on	- <u>-</u>	C .,00 i	
•	page 5 of the <b>2006</b> Fo								13	63,829	
	Add lines 12 and 13								14	108,524	
•	Enter the amount from F	Form 1040, line 46, or F	orm 1	040NR, line 43	3 .   15						
6	Form 10 53; line	e total of any amounts f 040, lines 47 through 49 12 of the Line 11 Works ge 4 of the instructions);	, line 5 heet ir	Pub. 972	16						

\_\_\_\_16 11; and Form 5695, line 15. 1040NR filers: Enter the total of any amounts from Form 1040NR, lines 44, 46, and 48; line 12 of the Line 11 Worksheet in Pub. 972 (see page 4 of the instructions); Form 8396, line 11; and Form 5695, line 15. 17 Subtract line 16 from line 15 .

18

94,128

NUMBER OF RETURNS FILED FOR SELECTED LINES Page 2

Part III Employer-Provided Adoption	<b>Benefits</b>
-------------------------------------	-----------------

Form 8839 (2007)

			Child 1		Child 2				
					<b>.</b>				
19	Maximum exclusion per child	19	\$11,390	00	\$11,390	00			
20	Did you receive employer-provided adoption benefits for a prior year for the same child?  No. Enter -0								
	Yes. See page 5 of the instructions for the amount to enter.	20							
21	Subtract line 20 from line 19	21							
22	Employer-provided adoption benefits you received in 2007. This amount should be shown in box 12 of your 2007 Form(s) W-2 with code T	22							
23	Add the amounts on line 22						23	7,699	
24	Enter the <b>smaller</b> of line 21 or line 22. But if the child was a child with special needs and the adoption became final in 2007, enter the amount from line 21	24							
25	Add the amounts on line 24. If zero, skip line enter -0- on line 30, and go to line 31	nes 20	6 through 29,	25					
26	Modified adjusted gross income (from the worksheet on page 6 of the instructions)			-					
27	Is line 26 more than \$170,820?								
	<ul> <li>No. Skip lines 27 and 28, and enter -0- on line 29.</li> <li>Yes. Subtract \$170,820 from line 26</li></ul>								
28	Divide line 27 by \$40,000. Enter the result a			00	~				
	to at least three places). Do not enter mor	e thai	า 1.000	28	× .				
29	Multiply line 25 by line 28			29					
30	Excluded benefits. Subtract line 29 from	line 2	5				30	4,935	
31	Taxable benefits. Is line 30 more than line	e 23?							
	No. Subtract line 30 from line 23. Also line 7 of Form 1040 or line 8 of Form 7 of Form 1040 or line 8 of Form	orm 10	040NR. On the do		I				
	☐ <b>Yes.</b> Subtract line 23 from line 30. Ente		,	ive nu	mber. Reduce		31	3,382	
	the total you would enter on line by the amount on Form 8839, line or line 8 of Form 1040NR. Enter line.	7 of 31. E	Form 1040 or line Inter the result on	8 of line 7	Form 1040NR of Form 1040				

You may be able to claim the adoption credit in Part II on the front of this form if any of the following apply.



- You paid adoption expenses in 2006, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2006.
- The total adoption expenses you paid in 2007 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2007 or earlier.
- You adopted a child with special needs and the adoption became final in 2007.

# **Community Employment Credit**

Department of the Treasury Internal Revenue Service ► Attach to your tax return. OMB No. 1545-1444

Attachment Sequence No. **99** 

Name(s) shown on return Identifying number Total Forms Filed = 36,166

Pai	t I Current Year Credit			
1	Enter the total qualified wages paid or incurred during calendar year 2007 only (see instructions)			
а	Qualified empowerment zone wages	1a	361	
b	Qualified renewal community wages	1b	1,181	
2	Add lines 1a and 1b. You must subtract this amount from your deduction for salaries and wages	2		
3	Employment zone and renewable community employment credit from partnerships, S corporations,			
	cooperatives, estates, and trusts	3		
4	Add lines 2 and 3. Partnerships and S corporations, report this amount on Schedule K; all others, go			
	to line 5	4		
5	Empowerment zone and renewal community employment credit included on line 4 from passive			
	activities (see instructions)	5		
6	Subtract line 5 from line 4	6		
7	Passive activity credit allowed for 2007 (see instructions)	7	3,908	
8	Carryforward of empowerment zone and renewal community employment credit to 2007	8	7,865	
9	Carryback of empowerment zone and renewal community employment credit from 2008 (see instructions)	9		
10	Add lines 6 through 9. Cooperatives, estates, and trusts, go to line 11. All others, use this amount to	10	24 422	
	complete Part II	10	34,423	
11	Amount allocated to the patrons of the cooperative or the beneficiaries of the estate or trust (see	11		
12	instructions)	12		
	t II Allowable Credit	12		
13	Regular tax before credits:			
•	Individuals. Enter the amount from Form 1040, line 44; Form 1040NR, line 41			
•	your return	13		
	Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and			
•	1b, or the amount from the applicable line of your return			
14	Alternative minimum tax:			
	Individuals. Enter the amount from Form 6251, line 35			
•	Corporations. Enter the amount from Form 4626, line 14	14	9,629	
•	Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56			
15	Add lines 13 and 14	15		
16a	Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or			
	Form 1040NR, lines 44, 45, and 47 through 49)			
b	Foreign tax credit			
С	Credits from Forms 5735 and 8834			
d	Non-business alternative motor vehicle credit (Form 8910, line 18) 16d	_		
е	Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)			
f	Add lines 16a through 16e	16f	04.000	
17	Net income tax. Subtract line 16f from line 15. If zero, skip lines 18 through 24 and enter -0- on line 25	17	31,308	
18	Net regular tax. Subtract line 16f from line 13. If zero or less, enter -0-  Tentative minimum tax (see instructions)  18 31,247  19 29,041	_		
19	Territative transferr tax (eee metradicine)	-		
20	Enter 25% (.25) of the excess, if any, of line 18 over \$25,000 (see instructions) 23,055			
04	instructions)			
21	Wildingsy into 10 by 7070 (170)	22		
22 23	Enter the greater of line 20 or line 21	23		1
23	General business credit (Form 3800, line 19)	24		1
24 25	Subtract line 24 from line 23	25		
26	Credit allowed for the current year. Cooperatives, estates, and trusts. Enter the smaller of line 12 or			
_0	line 25. Report this amount on Form 1041, Schedule G, line 2c; or Form 1120-C, Schedule J, line 5c. If			
	line 25 is smaller than line 12, see instructions. <b>All others.</b> Enter the <b>smaller</b> of line 10 or line 25. Report			
	this amount on Form 1040, line 55; Form 1040NR, line 50; Form 1120, Schedule J, line 5c; or the			
	applicable line of your return. If line 25 is smaller than line 12, see instructions	26	29,219	

# Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips

Department of the Treasury Internal Revenue Service

► Attach to your tax return.

OMB No. 1545-1414

Attachment Sequence No. 98

Identifying number

Name(s) shown on return

Total Forms Filed = 69,655

Note. Claim this credit only for social security and Medicare taxes paid by a food or beverage establishment where tipping is customary for providing food or beverages. See the instructions for line 1.

	ornary for providing food or beverages. See the instructions for line 1.		
Pai	Current Year Credit		
1	Tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year (see instructions)	1	3,847
2	Tips not subject to the credit provisions (see instructions)	2	668
3	Creditable tips. Subtract line 2 from line 1	3	3,847
4	Multiply line 3 by 7.65% (.0765). If you had any tipped employees whose wages (including tips) exceeded \$97,500, see instructions and check here Boxes Checked = * . ▶ □	4	3,847
5	Credit for employer social security and Medicare taxes paid on certain employee tips from partnerships and S corporations	5	66,058
6	Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K; all others, go to line 7	6	69,558
7	Credit for employer social security and Medicare taxes paid on certain employee tips included on line 6 from passive activities (see instructions)	7	25,754
8	Subtract line 7 from line 6	8	45,410
9	Credit for employer social security and Medicare taxes paid on certain employee tips allowed for 2007 from passive activities (see instructions)	9	15,863
10	Carryback of the credit for employer social security and Medicare taxes paid on certain employee		-
-	tips from 2008 (see instructions)	10	
11	Add lines 8 through 10. Use this amount to complete Part II	11	60,148
Pai	t II Allowable Credit		
12	Regular tax before credits (see instructions)	12	
13	Alternative minimum tax (see instructions)	13	
14	Add lines 12 and 13	14	
	Credits from Form 1040, lines 47 through 50 and 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)		
b	Foreign tax credit		
	Credits from Forms 5735 and 8834		
	Non-business alternative motor vehicle credit (Form 8910, line 18) . 15d		
	Non-business alternative fuel vehicle refueling property credit (Form		
	8911, line 19)		
f	Add lines 15a through 15e	15f	
	Net income tax. Subtract line 15f from line 14. If zero, skip lines 17 through 20 and enter -0-		
	on line 21	16	62,344
17	Net regular tax. Subtract line 15f from line 12. If zero or less, enter -0-	17	62,096
18		18	32,994
19	Subtract line 18 from line 16. If zero or less, enter -0-	19	,
	General business credit (Form 3800, line 19)		
	Empowerment zone and renewal community employment credit		
	(Form 8844, line 26)	_	
	Work opportunity credit (Form 5884, line 22)		
	Alcohol fuels credit (Form 6478, line 24)		
е	Renewable electricity, refined coal, and Indian coal production credit (Form 8835, line 36)		
f	Add lines 20a through 20e	20f	
21	Subtract line 20f from line 19. If zero or less, enter -0	21	
22	<b>Credit allowed for the current year.</b> Enter the smaller of line 11 or 21. Report this amount on Form 1040, line 55; Form 1040NR, line 50; Form 1120, Schedule J, line 5c; or the	00	50.070
	applicable line of your return. If line 21 is smaller than line 11, see instructions	22	53,276

### NUMBER OF RETURNS FILED FOR SELECTED LINES Archer MSAs and **Long-Term Care Insurance Contracts**

	ment of the Treasury  Revenue Service	► Attach to Form 1040 or Form 1040NR	. ► See separate instructions.	Sequence No. <b>39</b>			
Name	e(s) shown on return	Total Forms Filed = 80,227	Social security number of MSA account holder. If both spouses have MSAs, see page 1 of the instructions				
		MSAs. If you have only a Medicare A	Advantage MSA, skip Section A and	com	plete Section	B.	
Pai	rt I Genera	I Information. See page 2 of the instr	ructions.		-		
b c 2a b c	If "Yes," were you follow the series of the	employer make contributions to your Archer ou uninsured when the MSA was established," indicate coverage under high deductible he our spouse or spouse's employer make contrur spouse uninsured when the MSA was esta," indicate coverage under high deductible he MSA Contributions and Deductions.	(see page 2 of the instructions)? ealth plan: ☐ Self-Only or ☐ Faributions to your spouse's Archer MSA for ablished (see page 2 of the instructions)? ealth plan: ☐ Self-Only or ☐ Fari	 amily 2007'  amily	1a Yes 1b Yes 2a Yes 2b Yes	s   No s = 40,63 s = 24,34 s = 21,217 s = 3,492 s part.	
	If you a	are filing jointly and both you and you ge, complete a separate Part II for eacl	ur spouse have high deductible he	alth p	olans with se	•	
2		,		10110)	/•	$\overline{}$	
3 4		contributions to your Archer MSA(s) for 20 tributions you made for 2007, including thos	, , , , , , , , , , , , , , , , , , , ,	-			
4		nat were for 2007. Do not include rollovers (s		4	14,259		
5	•	the worksheet on page 3 of the instruction	,	5	14,417		
6	Compensation (shealth plan. (If s	see page 3 of the instructions) from the empleter from the empleyed, enter your earned income from	ployer maintaining the high deductible		14,039		
_	_	tible health plan was established.)		6	14,039	+	
7	the total on Form	eduction. Enter the smallest of line 4, 5, om 1040, line 36, or Form 1040NR, line 34. in 1040NR, line 34, enter "MSA" and the an	On the dotted line next to Form 1040, mount	7	10,972		
		is more than line 7, you may have to pay an	n additional tax (see page 3 of the instruct	ions).			
Pai	rt III Archer	MSA Distributions					
8a	Total distribution the instructions)	ns you and your spouse received in 2007	from all Archer MSAs (see page 4 of	8a	22,614		
	Also include any line 8a that were	uded on line 8a that you rolled over to another a excess contributions (and the earnings on the withdrawn by the due date of your return (s	hose excess contributions) included on	8b	82		
	Subtract line 8b			8c 9	22,539 17,588		
9		qualified medical expenses (see page 4 of	·	9	17,500	+	
10	include this amo	r <b>MSA distributions.</b> Subtract line 9 from lount in the total on Form 1040, line 21, or 21, enter "MSA" and the amount	Form 1040NR, line 21. On the dotted	10	5,948		
11a	If any of the dis	tributions included on line 10 meet any of page 4 of the instructions), check here	the Exceptions to the Additional				
b	on line 10 that Form 1040, line	tax (see page 4 of the instructions). Enter are subject to the additional 15% tax. Als 63, or Form 1040NR, line 58. On the dotte line 58, enter "MSA" and the amount.	so include this amount in the total on ed line next to Form 1040, line 63, or	11b	5,944		
Sec		care Advantage MSA Distributions. If			ur spouse re	ceived	
	distrib	outions in 2007 from a Medicare Advar page 4 of the instructions).					
12	Total distribution instructions) .	ns you received in 2007 from all Medicare		12	1,259		
13	Unreimbursed of	qualified medical expenses (see page 5 of	the instructions)	13	1,258		
14	enter -0 Also i	are Advantage MSA distributions. Subtrainclude this amount in the total on Form 10 ine next to line 21, enter "Med MSA" and	040, line 21, or Form 1040NR, line 21.	14	*		
	If any of the dist	stributions included on line 14 meet any of page 5 of the instructions), check here tax (see page 5 of the instructions). Also	the Exceptions to the Additional Boxes Checked = 0 ▶ □				
		63. or Form 1040NR. line 58. On the dotte					

15b

Form 1040NR, line 58, enter "Med MSA" and the amount .

Form 8853 (2007) NUMBER OF RETURNS FILED FOR SELECTED LINES

Attachment Sequence No. 39

Page 2

Name of policyholder (as shown on Form 1040)

Social security	number
of policyholder	<b>•</b>

Sec	tion C. Long-Term Care (LTC) Insurance Contracts. See Fi the instructions before completing this section.	ling Requirements	for Secti	on C on pag	e 6 of
	If more than one Section C is attached, check here				.▶ □
16a	Name of insured ▶ b Soc	ial security number of i	nsured >		
17	In 2007, did anyone other than you receive payments on a per diem or o LTC insurance contract covering the insured or receive accelerated depolicy covering the insured?	eath benefits under a li	fe insuran	ce	□ No
18	Was the insured a terminally ill individual?	. Yes Boxes Che	cked = 2,2	231 <b> Yes</b> [	□ No
	<b>Note:</b> If "Yes" and the <b>only</b> payments you received in 2007 were acceled to you because the insured was terminally ill, skip lines 19 through 27			aid	
19	Gross LTC payments received on a per diem or other periodic basis. Enter from box 1 of all Forms 1099-LTC you received with respect to the indiem" box in box 3 is checked			28,492	
	Caution: Do not use lines 20 through 28 to figure the taxable amount LTC insurance contract that is not a qualified LTC insurance contract are not excludable from your income (for example, if the benefits are not or sickness through accident or health insurance), report the amount on Form 1040, line 21.	t. Instead, if the benefit paid for personal injuri	its es		
20	Enter the part of the amount on line 19 that is from qualified LTC insu	urance contracts	. 20	26,826	-
21	Accelerated death benefits received on a per diem or other periodic beamounts you received because the insured was terminally ill (see page			1,653	
00	Add lines 00 and 01		22	26,835	
22	Add lines 20 and 21				
	<b>Note:</b> If you checked "Yes" on line 17 above, see <b>Multiple Payees</b> on page 7 of the instructions before completing lines 23 through 27.				
23	Multiply \$260 by the number of days in the LTC period	23 29,800			
24	Costs incurred for qualified LTC services provided for the insured during the LTC period (see page 7 of the instructions)	<b>24</b> 28,139			
25	Enter the <b>larger</b> of line 23 or line 24	<b>25</b> 35,047			
26	Reimbursements for qualified LTC services provided for the insured during the LTC period	<b>26</b> 14,158			
	<b>Caution:</b> If you received any reimbursements from LTC contracts issued before August 1, 1996, see page 7 of the instructions.				
27	Per diem limitation. Subtract line 26 from line 25		. 27	35,037	
28	Taxable payments. Subtract line 27 from line 22. If zero or less, en amount in the total on Form 1040, line 21. On the dotted line next to				
	the amount		. 28	1,150	

### 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

NUMBER OF RETURNS FILED FOR SELECTED LINES

# Education Credits (Hope and Lifetime Learning Credits)

Department of the Treasury Internal Revenue Service (99) OMB No. 1545-0074

2007

Attachment
Sequence No. 50

Name(s) shown on return

Total Forms Filed = 7,499,740

Your social security number

Cau	tion: ● You cannot take	e the Hope credit and a	the lifetime learning	g credit fo	r the	same s	tudent	in the	san	ne year.	
	in the same yea					,		n 891	7) foi	the <b>same st</b>	udent
	ore you begin: Figure the										
Pa		aution: You cannot to	ake the Hope cre	dit for mo	re tha	an <b>2</b> ta	x years	for th	e <b>sa</b>	me student.	
1	(a) Student's name (as shown on page 1 of your tax return) First name Last name	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Qualified expenses (see instructions). Do not enter more than \$2,200 for each student.	small amo colum	ount ir	the n	column	Add n (c) ai mn (d)		(f) Enter one of the amou column (	nt in
	Student # 1	2,944,042	2,944,686							2,939,675	
	Student # 2 Student # 3	114,680 2,366	114,680 2,366							113,680 2,366	
	Student # 4	1,,007	1,007							1,007	
2	Tentative Hope credit. credit for another stude	nt, go to Part II; otherv	ne 1, column (f). If y vise, go to Part III	ou are tak	ing th	e lifetim	ne learni 	ng •	2	2,944,686	
	rt II Lifetime Learn										
3	(a) Student's	name (as shown on pa	,	eturn)		numbe	dent's soo r (as show of your tax	vn on pa	age	(c) Qualifice expenses (c) instruction	see
				udent # 1			0.668	,		4,750,666	<u> </u>
				ident # 2			,498			214,495	Student #4=
				ident # 3			,439			8,438	986
4	Add the amounts on lin	e 3 column (c) and er							4	4,750,668	
5	Enter the <b>smaller</b> of line							Г	5	4,750,668	
6	Tentative lifetime learn								6	4,750,668	
Pa	rt III Allowable Edu		, , ,							,,	
7	Tentative education cre	dits. Add lines 2 and 6							7	7,491,700	
8	Enter: \$114,000 if marrie				 I						<u>'                                    </u>
	or qualifying widow(er)				8	7,499	9,738				
9	Enter the amount from				9	7,499	9,738				
10	Subtract line 9 from lineducation credits	ne 8. If zero or less, s		take any	10	7,47	1,202				
11	Enter: \$20,000 if married or qualifying widow(er)				11	7,471	1,202				
12	If line 10 is equal to or line 14. If line 10 is les (rounded to at least through	s than line 11, divide	line 10 by line 11	I. Enter th	ne res	sult as	a decin	nal	12	7,471,202 × .	
13	Multiply line 7 by line 1:	2						<b>-</b>	13	7,463,515	
14	Enter the amount from	Form 1040, line 46, or	Form 1040A, line	28	14	7,441	1,548				
15	Enter the total, if any, of 51; or Form 1040A, line	-	orm 1040, lines 47		15	677	,240				
16	Subtract line 15 from lin	ne 14. If zero or less, s	top. You cannot ta	ake any ed	ducati	on crec	lits . I	•	16	7,441,548	
17	Education credits. Ent Form 1040A, line 31 * If you are filing Form 2555, 25						1	▶	17	7,435,045	

### 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

Form **8864** 

### **Biodiesel and Renewable Diesel Fuels Credit**

NUMBER OF RETURNS FILED FOR SELECTED LINES

2007

Attachment Sequence No. **141** 

Department of the Treasury Internal Revenue Service Attach to your tax return.

Name(s) shown on return

Total Forms Filed = 4,306

Identifying number

Caution: You cannot claim any amounts on Form 8864 that you claimed (or will claim) on Schedule C (Form 720), Form 8849, or Form 4136

Claimant has a certificate from the producer or importer of biodiesel or renewable diesel reported on lines 1 through 6 below and, if applicable, claimant also has a statement from the reseller. Claimant has no reason to believe that the information in the certificate or statement is false. Claimant may need to attach a copy of the certificate and statement. See *Certification* below.

	Type of Fuel		(a) Number of Gallons Sold or Used	<b>(b)</b> Rate		(c) Column (a) x Colu	mn (b)
1	Biodiesel (other than agri-biodiesel)				0	67	
2	Agri-biodiesel	2		\$1.0	0	142	
3	Renewable diesel	3		\$1.0	0	*	
4	Biodiesel (other than agri-biodiesel) included in a biodiesel mixture	4		\$ .5	0	0	
5	Agri-biodiesel included in a biodiesel mixture	5		\$1.0	0	0	
6	Renewable diesel included in a renewable diesel mixture	6		\$1.0	0	0	
7	Qualified agri-biodiesel production (gallons sold)	7		\$ .10	0	*	
8	Add lines 1 through 7. Include this amount in your income for	2007 (	see instructions)		8	214	
9	Biodiesel and renewable diesel fuels credit from partnership estates, and trusts			,	9	4,092	
10						4,306	
11	Amount allocated to patrons of the cooperative or beneficiaries	s of the	estate or trust .		11		
12	Cooperatives, estates, and trusts. Subtract line 11 from line 10. line 1m			n 3800,	12		

### **General Instructions**

Section references are to the Internal Revenue Code.

#### Purpose of Form

Use Form 8864 to figure your biodiesel and renewable diesel fuels credit. Claim the credit for the tax year in which the sale or use occurs. This credit consists of the:

- Biodiesel credit,
- Renewable diesel credit.
- Biodiesel mixture credit,
- Renewable diesel mixture credit, and
- Small agri-biodiesel producer credit.

### **Definitions and Special Rules**

#### Certification

To claim a credit on lines 1 through 6, you generally must attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, to Form 8864. To claim a credit on lines 3 or 6, the certificate must indicate at all appropriate locations that the fuel to which it relates is renewable diesel and state that the fuel meets the requirements discussed under *Renewable Diesel* on page 2. However, if the certificate or statement was attached to a previously filed claim, attach a separate sheet with the following information.

- Certificate identification number.
- Total gallons of agri-biodiesel, biodiesel other than agri-biodiesel, or renewable diesel on the certificate.
- Total gallons claimed on Schedule 3 (Form 8849).
- Total gallons claimed on Schedule C (Form 720).
- Total gallons claimed on Form 4136.

See Notice 2005-62 on page 443 of Internal Revenue Bulletin 2005-35 or Pub. 510, Excise Taxes, for the model certificate and statement.

### **Biodiesel**

Biodiesel means the monoalkyl esters of long chain fatty acids derived from plant or animal matter which meet the registration requirements for fuels and fuel additives established by the Environmental Protection Agency (EPA) under section 211 of the Clean Air Act, and the requirements of the American Society of Testing and Materials (ASTM) D6751.

Biodiesel includes both agri-biodiesel and biodiesel other than agri-biodiesel.

#### **Agri-Biodiesel**

Agri-biodiesel means biodiesel derived solely from virgin oils, including esters derived from virgin vegetable oils from corn, soybeans, sunflower seeds, cottonseeds, canola, crambe, rapeseeds, safflowers, flaxseeds, rice bran, and mustard seeds, and from animal fats.

## NUMBER OF RETURNS FILED FOR SELECTED LINES Credit for Qualified Retirement Savings Contributions

► Attach to Form 1040, Form 1040A, or Form 1040NR.

► See instructions on back.

OMB No. 1545-0074

2007

Attachment
Sequence No. 55

Department of the Treasury Internal Revenue Service Name(s) shown on return

See instructions on back

Total Forms Filed = 6,429,354

Your social security number



You **cannot** take this credit if **either** of the following applies.

- The amount on Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 36 is more than \$26,000 (\$39,000 if head of household; \$52,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 1990, (b) is claimed as a dependent on someone else's 2007 tax return, or (c) was a **student** (see instructions).

Traditional and Roth IRA contributions for 2007. Do not include rollover contributions   1   Traditional and Roth IRA contributions for 2007 to contributions   1   Traditional and Roth IRA contributions for 2007 to contributions   1   Traditional and Roth IRA contributions for 2007 (see instructions)   3   Traditional and Roth IRA contributions for 2007 (see instructions)   3   Add lines 1 and 2   3   5,261,317   1,166,384   4   Certain distributions received after 2004 and before the due date (including extensions) of your 2007 tax return (see instructions). If married filing jointly, include both spouses' amounts in both columns. See instructions for an exception   5   5,245,556   1,154,479   1,154,479   1,166,384   4   216,291   112,070   5   5,245,556   1,154,479   7   Add the amounts on line 6. If zero, stop; you cannot take this credit   7   5,995,549   1,154,479   7   5,995,549   1,154,479   7   5,995,54			<u>'</u>							
2 Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2007 (see instructions).  3 Add lines 1 and 2			(a) You							
employee contributions, and 501(c)(18)(D) plan contributions for 2007 (see instructions)   2	1		Roth IRA co	ontributions for 2007. <b>D</b>	o not include rollover		762,587		272,205	
(including extensions) of your 2007 tax return (see instructions), if married filing jointly, include both spouses' amounts in both columns. See instructions for an exception		employee cont (see instruction	ributions, ar is)	nd 501(c)(18)(D) plan c	2					
(including extensions) of your 2007 tax return (see instructions), if married filing jointly, include both spouses' amounts in both columns. See instructions for an exception	4	Cortain distribu	itions rocci	yod <b>after</b> 2004 and l	actors the due date					
8 Enter the amount from Form 1040, line 38°; Form 1040A, line 22; or Form 1040NR, line 36 .  9 Enter the applicable decimal amount shown below:    If line 8 is—	5	(including extermarried filing journal see instruction Subtract line 4 In each column	nsions) of y intly, includ s for an exc from line 3. n, enter the	5,245,556		1,154,479 1,154,479				
Form 1040NR, line 36  Penter the applicable decimal amount shown below:    Filine 8 is	7								5,995,549	
Section   Sect	8						E 00E E40			
If line 8 is—						8	5,995,549			
Note: If line 9 is zero, stop; you cannot take this credit.   10   10   10   10   10   10   10   1	9	Enter the appli	cable decim	nal amount shown bel	ow:					
Note: If line 9 is zero, stop; you cannot take this credit.   10   10   10   10   10   10   10   1		If line 8	ie	Δr	nd vour filing status	ie		1		
Over		II lille 0	13—				lo Marriad filing	-		
Subtract line 12 from line 11. If zero, stop; you cannot take this credit   12   903,581   13   5,873,120   14   5,862,206   13   5,873,120   14   5,862,206   13   5,873,120   14   5,862,206   14   5,862,206   14   5,862,206   14   5,862,206   14   5,862,206   14   5,862,206   14   5,862,206   15   15   1040NR, line 12 from 1040N, line 53; Form 1040A, line 33; or Form 1040NR, line 48   14   5,862,206   14   5,862,206   15   15   15   15   1040NR, line 12 from line 13 here and on Form 1040, line 53; Form 1040A, line 33; or Form 1040NR, line 48   14   5,862,206   14   5,862,206   14   5,862,206   15   5,862,206   14   5,862,206   15   5,862,206   14   5,862,206   14   5,862,206   14   5,862,206   15   5,862,206   14   5,862,206   15   5,862,206   15   5,862,206   15   5,862,206   15   5,862,206   15   5,862,206   15   5,862,206   14   5,862,206		Over	But not			_	_			
\$15,500 \$17,000 \$23,250 \$5 .5 .5 .2 \$9 5,984,635 X.\$  \$17,000 \$23,250 \$5 .5 .5 .1 \$9 5,984,635 X.\$  \$23,250 \$25,500 .5 .2 .1 .1 .1 .0 .0 .2 .10		Ovei—	over—		I					
\$15,500 \$17,000 \$23,250 55 .5 .5 .1 \$ \$23,250 \$25,500 55 .2 .1 .1 \$ \$25,500 \$26,000 .5 .1 .1 .1 \$ \$26,000 \$31,000 .5 .1 .0 .0 \$ \$31,000 \$34,000 .2 .1 .0 .0 \$ \$34,000 \$39,000 .1 .0 .0 .0 .0 .0				Enter o	on line 9—	Qua	illyllig widow(ci)	-		
\$17,000 \$23,250										
\$23,250 \$25,500		1 ' '							E 004 635 V	
\$25,500 \$26,000								9	5,964,035 A.	
\$26,000 \$31,000										
\$31,000 \$34,000		1		I .						
\$34,000 \$39,000										
\$39,000 \$52,000										
\$52,000		1		1						
Note: If line 9 is zero, stop; you cannot take this credit.  10 Multiply line 7 by line 9										
Multiply line 7 by line 9  In the amount from Form 1040, line 46; Form 1040A, line 28; or Form 1040NR, line 43  In the amount from Form 1040, line 46; Form 1040A, line 28; or Form 1040NR, line 43  In through 49, and 51.  In the total of your credits from lines 47 through 49, and 51.  In the total of your credits from lines 29 through 31.  In the total of your credits from lines 44 and 46.  In the total of your credits from lines 44 and 46.  In the total of your credits from lines 44 and 46.  In the total of your credits from lines 47 through 31.  In the total of your credits from lines 44 and 46.  In the total of your credits from lines 47 through 31.  In the total of your credits from lines 44 and 46.  In the total of your credits from lines 47 through 31.  In the total of your credits from lines 48 through 31.  In the total of your credits from lines 48 th		\$52,000		.0	.0		.0			
Enter the amount from Form 1040, line 46; Form 1040A, line 28; or Form 1040NR, line 43  1040 filers: Enter the total of your credits from lines 47 through 49, and 51.  1040NR filers: Enter the total of your credits from lines 29 through 31.  1040NR filers: Enter the total of your credits from lines 44 and 46.  Subtract line 12 from line 11. If zero, stop; you cannot take this credit  Credit for qualified retirement savings contributions. Enter the smaller of line 10 or line 13 here and on Form 1040, line 53; Form 1040A, line 33; or Form 1040NR, line 48				f line 9 is zero, <b>stop</b> ; y	you cannot take this c	redit.			5.001.005	
Form 1040NR, line 43	10		-					10	5,984,635	
12 1040 filers: Enter the total of your credits from lines 47 through 49, and 51.  1040A filers: Enter the total of your credits from lines 29 through 31.  1040NR filers: Enter the total of your credits from lines 44 and 46.  13 Subtract line 12 from line 11. If zero, stop; you cannot take this credit  14 Credit for qualified retirement savings contributions. Enter the smaller of line 10 or line 13 here and on Form 1040, line 53; Form 1040A, line 33; or Form 1040NR, line 48	11						5 904 859			
through 49, and 51.  1040A filers: Enter the total of your credits from lines 29 through 31.  1040NR filers: Enter the total of your credits from lines 44 and 46.  13 Subtract line 12 from line 11. If zero, stop; you cannot take this credit						' '	0,00-,000			
1040A filers: Enter the total of your credits from lines 29 through 31.  1040NR filers: Enter the total of your credits from lines 44 and 46.  13 Subtract line 12 from line 11. If zero, stop; you cannot take this credit	12	1040 filers:			om lines 47					
1040NR filers: Enter the total of your credits from lines 44 and 46.  13 Subtract line 12 from line 11. If zero, stop; you cannot take this credit		1040A filers:	_							
14 Credit for qualified retirement savings contributions. Enter the smaller of line 10 or line 13 here and on Form 1040, line 53; Form 1040A, line 33; or Form 1040NR, line 48		1040NR filers:	1040NR filers: Enter the total of your credits from lines 44							
13 here and on Form 1040, line 53; Form 1040A, line 33; or Form 1040NR, line 48	13	Subtract line 1	2 from line	11. If zero, <b>stop</b> ; you	cannot take this credi	it .		13	5,873,120	
*See Pub. 590 for the amount to enter if you are filing Form 2555, 2555-EZ, or 4563 or you are excluding income from Puerto Rico.	14	•		-				14	5,862,206	
		*See Pub. 590 fo	r the amount	to enter if you are filing	Form 2555, 2555-EZ, or	4563 o	r you are excluding	income fi	rom Puerto Rico.	

### NUMBER OF RETURNS FILED FOR SELECTED LINES **Health Savings Accounts (HSAs)**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

▶ Attach to Form 1040 or Form 1040NR.

► See separate instructions.

Attachment Sequence No. **53** 

Name(s) shown on Form 1040 or Form 1040NR

Total Forms Filed = 1,243,268

Social security number of HSA beneficiary. If both spouses have HSAs, see page 2 of the instructions ▶

HSA Contributions and Deduction. See page 3 of the instructions before completing this part. If you

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

	are filing jointly and both you and your spouse each have separate HSAs, compleach spouse.	lete a	separate Part	I for
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2007 (see page 4 of the instructions) Self-Only Boxes = 488,463 Family Boxes = 626,845 ▶	☐ Se	elf-only 🗌 Far	nily
2	HSA contributions you made for 2007 (or those made on your behalf), including those made from January 1, 2008, through April 15, 2008, that were for 2007. <b>Do not</b> include employer contributions, contributions through a cafeteria plan, or rollovers (see page 4 of the instructions)	2	639,011	
3	If you were under age 55 at the end of 2007, and on the first day of <b>every</b> month during 2007, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$2,850 (\$5,650 for family coverage) (see page 4 of the instructions)	3	978,561	
4	Enter the amount you and your employer contributed to your Archer MSAs for 2007 from Form 8853, lines 3 and 4. If you or your spouse had family coverage under an HDHP at any time during 2007, also include any amount contributed to your spouse's Archer MSAs	4	13,666	
5	Subtract line 4 from line 3. If zero or less, enter -0	5	978,517	
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2007, see the instructions on page 4 for the amount to enter	6	973,850	
7	If you were age 55 or older at the end of 2007, married, and you or your spouse had family coverage under an HDHP at any time during 2007, enter your additional contribution amount (see page 4 of the instructions)	7	99,932	
8	Add lines 6 and 7	8	976,712	
9 10	Employer contributions made to your HSAs for 2007	_		
11	Add lines 9 and 10	11	609,089	
12	Subtract line 11 from line 8. If zero or less, enter -0-	12	936,175	
13	<b>HSA deduction.</b> Enter the <b>smaller</b> of line 2 or line 12 here and on Form 1040, line 25, or Form 1040NR, line 25	13	592,526	
	<b>Caution:</b> If line 2 is more than line 13, you may have to pay an additional tax (see page 5 of the instructions).			
Par	<b>HSA Distributions.</b> If you are filing jointly and both you and your spouse each homeomplete a separate Part II for each spouse.	ave se	eparate HSAs,	
14a	Total distributions you received in 2007 from all HSAs (see page 6 of the instructions)	14a	827,561	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were			
	withdrawn by the due date of your return (see page 6 of the instructions)	14b	15,739	
С	Subtract line 14b from line 14a	14c	822,528	
15	Unreimbursed qualified medical expenses (see page 6 of the instructions)	15	752,747	
16	<b>Taxable HSA distributions.</b> Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Form 1040, line 21, or Form 1040NR, line 21. On the dotted line next to line 21, enter "HSA" and the amount	16	90,475	
	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional</b> 10% Tax (see page 6 of the instructions), check here Total Boxes Checked = 24,371 ▶ □  Additional 10% tax (see page 6 of the instructions). Enter 10% (.10) of the distributions included			
	on line 16 that are subject to the additional 10% tax. Also include this amount in the total on Form 1040, line 63, or Form 1040NR, line 58. On the dotted line next to Form 1040, line 63, or Form 1040NR, line 58, enter "HSA" and the amount	17h	78 332	

### NUMBER OF RETURNS FILED FOR SELECTED LINES

### **Domestic Production Activities Deduction**

Department of the Treasury
Internal Revenue Service

► Attach to your tax return. ► See separate instructions.

2007
Attachment
Sequence No. 143

OMB No. 1545-1984

Identifying number Name(s) as shown on return Total Forms Filed = 532.517 284,496 1 Domestic production gross receipts (DPGR) Allocable cost of goods sold. If you are using the small business 173.010 simplified overall method, skip lines 2 and 3 If you are using the section 861 method, enter deductions and 190,797 3 losses allocable to DPGR. All others, see instructions If you are using the small business simplified overall method, enter the amount of cost of goods sold and other deductions or losses 73,829 you ratably apportion to DPGR. All others, skip line 4 . . . . 271.620 5 Add lines 2 through 4 . 281.866 Subtract line 5 from line 1 Qualified production activities income from estates, trusts, and certain partnerships and 7 275,805 S corporations (see instructions) 8 8 Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to line 10 9 Amount allocated to beneficiaries of the estate or trust (see instructions) . . . . . . . . Qualified production activities income. Estates and trusts, subtract line 9 from line 8, all others, enter amount from line 8. If zero or less, enter -0- here, skip lines 11 through 19, 494,181 10 Income limitation (see instructions): • Individuals, estates, and trusts. Enter your adjusted gross income figured without the 11 492.684 • All others. Enter your taxable income figured without the domestic production activities deduction (tax-exempt organizations, see instructions) . . . . . Enter the smaller of line 10 or line 11. If zero or less, enter -0- here, skip lines 13 through 488.252 12 19, and enter -0- on line 20 . . . . . . . . . . . 487.391 Enter 6% of line 12 . . . 13 232,348 14 Form W-2 wages (see instructions) Form W-2 wages from estates, trusts, and certain partnerships and S corporations 15 262,502 Add lines 14 and 15. Estates and trusts, go to line 17, all others, skip line 17 and go to line 16 17 Amount allocated to beneficiaries of the estate or trust (see instructions) . . . 18 467,879 Estates and trusts, subtract line 17 from line 16, all others, enter amount from line 16 467,882 19 Form W-2 wage limitation. Enter 50% of line 18 20 467.347 Enter the smaller of line 13 or line 19 . . . 20 21 Domestic production activities deduction from cooperatives. Enter deduction from 16,147 Form 1099-PATR, box 6 . . . . . . . . . . . 21 22 185 Expanded affiliated group allocation (see instructions) . . . . . . Domestic production activities deduction. Combine lines 20 through 22 and enter the result here and on Form 1040, line 35; Form 1120, line 25; or the applicable line of your return 23 478.215 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

8910

### Alternative Motor Vehicle Credit

Identifying number

► Attach to your tax return.

Department of the Treasury Internal Revenue Service Name(s) shown on return

NUMBER OF RETURNS FILED FOR SELECTED LINES

Attachment Sequence No. 152

OMB No. 1545-1998

Total Forms Filed = 176,161 Part I **Tentative Credit** Use a separate column for each vehicle. If you need more columns, use (a) (b) (c) additional Forms 8910 and include the totals on lines 8 and 12. 1 1 Year, make, and model of vehicle 2 2 Enter date vehicle was placed in service (MM/DD/YYYY) . . 3 3 Maximum credit allowable (see instructions) . . . . . 4 % % % 4 Phaseout percentage (see instructions) . . . . 5 **5 Tentative credit.** Multiply line 3 by line 4 Credit for Business/Investment Use Part of Vehicle Part II % % % 6 Business/investment use percentage (see instructions) . . . 7 18.994 8 Add columns (a) through (c) on line 7 . . . . . . . . . . . . . . . 8 65 9 10 Business/investment use part of credit. Add lines 8 and 9. Partnerships and S corporations, report this amount on Schedule K; all others, report this amount on Form 3800, line 1s 19.060 Part III Credit for Personal Use Part of Vehicle 11 12 172,461 12 Add columns (a) through (c) on line 11 . . . 13 Regular tax before credits: • Individuals. Enter the amount from Form 1040, line 44 (or Form 1040NR, 13 • Other filers. Enter the regular tax before credits from your return 14 Credits that reduce regular tax before the alternative motor vehicle credit: a Credits from Form 1040, lines 47 through 50 and 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49) . . . . . . . . . . . . 14a 14b . . . . . . . . . . . . . . . . . . **b** Foreign tax credit 0 14c c Qualified electric vehicle credit (Form 8834, line 11) . . . . 14d 75,195 d Add lines 14a through 14c . . . . . . . . . . . . . . . . . 15 Net regular tax. Subtract line 14d from line 13. If zero or less, stop here; do not file this form unless 168.065 15 **16** Tentative minimum tax (see instructions): 128.682 • Individuals. Enter the amount from Form 6251, line 33 . . . . . . . . . 16 Other filers. Enter the tentative minimum tax from your alternative minimum tax form or schedule 17 Subtract line 16 from line 15. If zero or less, stop here; do not file this form unless you are claiming 17 158,673 

18 Personal use part of credit. Enter the smaller of line 12 or 17 here and on Form 1040, line 55; Form 1040NR, line 50; or the appropriate line of your return. If line 17 is smaller than line 12, see instructions

18

156,495

Form **8910** (2007)

NUMBER OF RETURNS FILED FOR SELECTED LINES

### **Tuition and Fees Deduction**

See Instructions.

► Attach to Form 1040 or Form 1040A.

OMB No. 1545-0074 Attachmen Sequence No. 63

Department of the Treasury Internal Revenue Service Name(s) shown on return

Total Forms Filed = 4,471,217

Your social security number

You cannot take both an education credit from Form 8863 and the tuition and fees deduction from this form for the same student in the same year.

✓ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below. Before you begin: ✓ If you file Form 1040, use the instructions for line 36 to figure any write-in adjustments to be entered on the dotted line next to Form 1040, line 36. (a) Student's name (as shown on page 1 of your tax return) (b) Student's social security (c) Qualified number (as shown on page expenses (see First name Last name 1 of your tax return) instructions) Student 1 SSN = 4.462.211 4.462.211 Student 2 SSN = 333,362 333.362 Student 3 SSN = 14.942 14,942 Student 4 SSN = 137 137 4,462,220 2 Add the amounts on line 1, column (c), and enter the total Enter the amount from Form 1040, line 22, or Form 1040A, line 15 Enter the total from either: • Form 1040, lines 23 through 33, plus any write-in adjustments entered on the dotted line next to Form 1040, line 36, or 4 • Form 1040A, lines 16 through 18 Subtract line 4 from line 3.\* If the result is more than \$80,000 (\$160,000 if married filing jointly) 5 4,419,940 You cannot take the deduction for tuition and fees

Tuition and fees deduction. Is the amount on line 5 more than \$65,000 (\$130,000 if married filing jointly)?

Yes. Enter the smaller of line 2, or \$2,000. Also enter this amount on Form 1040, line 34, or Form 1040A, line 19.

No. Enter the smaller of line 2, or \$4,000. Also enter this amount on Form 1040, line 34, or Form 1040A, line 19.

\*If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, use Worksheet 6-1 in Pub. 970 to figure the amount to enter.

Section references are to the Internal Revenue Code unless otherwise noted.

### General Instructions

### Purpose of Form

Use Form 8917 to figure and take the deduction for tuition and fees expenses paid in 2007.

This deduction is based on qualified education expenses paid to an eligible postsecondary educational institution. See What Expenses Qualify, on page 2, for more information.



You may be able to take the Hope credit or lifetime learning credit for your education expenses instead of the tuition and fees deduction. Figure your tax both

ways and choose the one that gives you the lower tax. See Form 8863, Education Credits, and Pub. 970, Tax Benefits for Education, for more information about the Hope and lifetime learning credits.

### Who Can Take the Deduction

You may be able to take the deduction if you, your spouse, or a dependent you claim on your tax return was a student enrolled at or attending an eligible educational institution. The deduction is based on the amount of qualified education expenses you paid for the student in 2007 for academic periods beginning in 2007 and the first 3 months of 2008.



Qualified education expenses must be reduced by any expenses paid directly or indirectly using tax-free educational assistance. See Tax-free educational

6

4.457.152

assistance and refunds of qualified education expenses on page 2.

Generally, in order to claim the deduction for qualified education expenses for a dependent, you must have paid the expenses in 2007 and must claim an exemption for the student as a dependent on your 2007 tax return (line 6c of Form 1040 or 1040A). For additional information, see chapter 6 of Pub. 970.

You cannot claim the tuition and fees deduction if any of the following apply.

- Your filing status is married filing separately.
- Another person can claim an exemption for you as a dependent on his or her tax return. You cannot take the deduction even if the other person does not actually claim that exemption.
- Your modified adjusted gross income (MAGI), as figured on line 5, is more than \$80,000 (\$160,000 if filing a joint return).
- You were a nonresident alien for any part of the year and did not elect to be treated as a resident alien for tax purposes. More information on nonresident aliens can be found in Pub. 519, U.S. Tax Guide for Aliens.

# THE FOLLOWING PAGES OF THE TEXT ARE THE CORRESPONDING DOLLAR AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS).

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** IRS Use Only-Do not write or staple in this space. For the year Jan. 1-Dec. 31, 2007, or other tax year beginning 2007, ending . 20 OMB No. 1545-0074 Label Your first name and initial Last name Your social security number (See Total of all returns filed = 142.978.806 instructions A B E If a joint return, spouse's first name and initial Last name Spouse's social security number on page 12.) Electronically Filed Returns = 87,851,490 1040 = 86,300,563 Use the IRS label. Home address (number and street). If you have a P.O. box, see page 12. You must enter н Otherwise, your SSN(s) above. 1040A = 33,507,223E R please print City, town or post office, state, and ZIP code. If you have a foreign address, see page 12. or type. Checking a box below will not  $1040EZ = ^23,171,020$ ^Includes 78,013 1040EZ-T returns 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 Sinale Head of household (with qualifying person). (See page 13.) If **Filing Status** the qualifying person is a child but not your dependent, enter Married filing jointly (even if only one had income) this child's name here. ▶ Married filing separately. Enter spouse's SSN above Check only one box. and full name here. Qualifying widow(er) with dependent child (see page 14) Boxes checked Yourself. If someone can claim you as a dependent, do not check box 6a on 6a and 6b **Exemptions** b Spouse . No. of children (4) if qualifying on 6c who: (3) Dependent's **Dependents:** (2) Dependent's lived with you relationship to child for child tax social security number (1) First name Last name credit (see page 15) • did not live with you you due to divorce or separation If more than four (see page 16) dependents, see Dependents on 6c page 15. not entered above Add numbers on d Total number of exemptions claimed lines above ▶ depend. other earnd inc. = 145,635 5,842,269,820 Wages, salaries, tips, etc. Attach Form(s) W-2 Income 268,058,182 8a Taxable interest. Attach Schedule B if required 79,351,341 8b Tax-exempt interest. Do not include on line 8a Attach Form(s) 237,052,127 9a W-2 here. Also Ordinary dividends. Attach Schedule B if required attach Forms 155,872,285 9b W-2G and 27,046,648 10 Taxable refunds, credits, or offsets of state and local income taxes (see page 20) . 1099-R if tax 10 8,759,334 was withheld. 11 11 Business income or (loss). Attach Schedule C or C-EZ13\* Cap gain distrib = 11,981,884 279,736,261 12 12 13 895,673,985 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 4,356,741 If you did not Other gains or (losses). Attach Form 4797 . 14 14 . . . . . . . . . . get a W-2, 189,848,217 147,959,327 IRA distributions . . . 15a 15b 15a **b** Taxable amount (see page 21) see page 19. 490,581,465 851,528,103 Pensions and annuities 16a 16b **b** Taxable amount (see page 22) 453,450,912 17 Enclose, but do Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 not attach, any 18 -14,693,259 Farm income or (loss). Attach Schedule F . . . . . . . 18 payment. Also. 29,415,079 19 19 Unemployment compensation please use 382,324,621 Social security benefits 20a 20h 167,186,633 Form 1040-V. 20a **b** Taxable amount (see page 24) 36,140,255 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 8,810,738,960 925,997 21 Net Operat. loss = 86,369,141 Educator expenses (see page 26) . . . . . . . 23 **Adjusted** 21 Stock options = 551,250 24 Certain business expenses of reservists, performing artists, and Gross 420,756 21 Cancell of debt = 1.881.848 24 fee-basis government officials. Attach Form 2106 or 2106-EZ 21 For. earn. inc. excl. 19.888,233 Income 1,500,881 25 25 Health savings account deduction. Attach Form 8889. . . 21 Gambling inc. = 30,139,091 26 2,903,022 26 Moving expenses. Attach Form 3903 24,759,998 27 27 One-half of self-employment tax. Attach Schedule SE . . . 22,262,415 Self-employed SEP, SIMPLE, and qualified plans . . . 28 28 21,283,306 29 29 Self-employed health insurance deduction (see page 26) 30 352,592 Penalty on early withdrawal of savings 30 31a 9,496,674 Alimony paid **b** Recipient's SSN ▶ 31a 12,876,504 32 IRA deduction (see page 27) . . . . . . 32 36 Archer MSA = 21,74833 7,463,755 33 Student loan interest deduction (see page 30). 36 Housing ded. = 98,011 10,578,961 Tuition and fees deduction. Attach Form 8917 . . . . 34 36 Other adj. = 1,295,091 6,780,483 35 Domestic production activities deduction. Attach Form 8903 123,020,191 Add lines 23 through 31a and 32 through 35 . . . .

Subtract line 36 from line 22. This is your adjusted gross income

36

8,687,718,769

Form 1040 (2007) Page <b>2</b>										
Tax	38	Amount from line 37 (adjusted gross income)	38							
and		Check \[ \bigcup \text{You} \text{ were born before January 2, 1943,}  \text{Blind.} \] \text{Total boxes}								
Credits	39a	\ _		Basic Stand. Ded. =	635,82	4,934				
		if: Spouse was born before January 2, 1943, ☐ Blind. ∫ checked ▶ 39a ☐		Add. Stand Ded. =	18.35 <i>6</i>	5.722				
Standard Deduction	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here ▶39b ∟	40	1,333,036,542	·					
for—	_40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40							
<ul> <li>People who</li> </ul>	41	Subtract line 40 from line 38	41	6,871,049,690						
checked any	42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line								
box on line 39a or 39b <b>or</b>		6d. If line 38 is over \$117,300, see the worksheet on page 33	42	943,171,372						
who can be	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	6,063,263,892						
claimed as a dependent,	44	Tax (see page 33). Check if any tax is from: a Form(s) 8814 b Form 4972 c Form(s) 8889	44	1,155,415,243						
see page 31.	45	Alternative minimum tax (see page 36). Attach Form 6251	45	24,109,512						
<ul><li>All others:</li></ul>	46	Add lines 44 and 45	46	1,179,538,578						
Single or	47	Credit for child and dependent care expenses. Attach Form 2441 47 3,483,152	54a F	8396 = 37,432						
Married filing	48	Credit for the elderly or the disabled. Attach Schedule R . 48 12,469								
separately, \$5,350	49	40 6 010 412		8839 = 396,039						
	50	1007 577		3800 = 845,539 8801 = 1,034,675	:					
Married filing jointly or		15 /25 10/		8844 = 116,603	-					
Qualifying	51	Totalist tax credit. Attach Form Title in required	55c F	8835 = 11,238	•					
widow(er), \$10,700	52	offind tax credit (see page 65). Attach Form 6501 in required		8846 = 291,552						
	53	Treatment savings contributions create. Attach 1 of the coop.		5884 = 224,666						
Head of household,	54	Credits from: a Form 8396 b Form 8859 c Form 8839		ther = 106,428	ı					
\$7,850	55	Other credits: a Form 3800 b Form 8801 c Form 55		t. motor veh. = 184,661	İ					
	56	Add lines 47 through 55. These are your <b>total credits</b>	56	62,630,766						
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0	57	1,116,907,812						
Other	58	Self-employment tax. Attach Schedule SE	58	49,511,062						
	59	Unreported social security and Medicare tax from: <b>a</b> Form 4137 <b>b</b> Form 8919	59	a= 30,331	b= 32	,241				
Taxes	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	5,004,547						
	61	Advance earned income credit payments from Form(s) W-2, box 9	61	69,336						
	62	Household employment taxes. Attach Schedule H	62	914,059						
	63	Add lines 57 through 62. This is your total tax Recapture Tax = 413,740 Other taxes = 381.256	63	1,173,264,964						
Payments	64	Federal income tax withheld from Forms W-2 and 1099 64 912,563,316								
rayillellis	65	2007 estimated tax payments and amount applied from 2006 return  65 284,119,655								
If you have a	66a	66a 48 539 994								
qualifying	b	Nontaxable combat pay election 66b 109,650								
child, attach		Excess social security and tier 1 RRTA tax withheld (see page 59) 67 2,519,084								
Schedule EIC.	67	14 400 210		70- 50400 440.0						
	68	Additional child tax credit. Attach Form 3012		70a F2439 = 119,9						
	69	Amount paid with reducest for extension to line (see page 35)		70b F4136 = 88,95						
	70 🥓			70c F8885 = 39,34	13					
	71	in the state of th	70	1,361,454,082						
	72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72							
Refund	73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you <b>overpaid</b>	73	316,924,652						
Direct deposit?	74a	Amount of line 73 you want <b>refunded to you.</b> If Form 8888 is attached, check here ▶	74a	267,872,391						
See page 59 and fill in 74b.	<b>b</b>	Routing number C Type: Checking Savings								
74c, and 74d,	► d	Account number								
or Form 8888.	75	Amount of line 73 you want applied to your 2008 estimated tax ▶   75   49,052,261		400 /07						
Amount	76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60 ▶	76	130,607,837						
You Owe	77	Estimated tax penalty (see page 61)								
<b>Third Party</b>	Do	you want to allow another person to discuss this return with the IRS (see page 61)?	Compl	ete the following.	No					
Designee Designee's Phone Personal identification										
————	nar	ne ▶ ( ) number (PIN)								
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and								
Here		ef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whether the correct is the correct of			ige.					
Joint return?	You	ur signature Date Your occupation	Dayt	ime phone number						
See page 13.			(	)						
Keep a copy for your	Spo	ouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation								
records.										
	Pro	parer's Date Check if	Prep	arer's SSN or PTIN						
Paid		nature Check if self-employed								
Preparer's		n's name (or EIN	1							
Use Only	you add	urs if self-employed), Phone no.	( )							

			AMOUNTS C			.ED (IN	THO	USANDS O	F DOLLA	ARS)		
<u>1040</u>	U.	S.	nent of the Treasury—Int Individual Incor	ne Tax R	eturn 📶	007		IRS Use	e Only—Do n	ot write o	staple in this space.	
(	F	or the	e year Jan. 1-Dec. 31, 2007, o	r other tax year be	ginning	, 200	7, endin	g	, 20	C	MB No. 1545-0074	
Label		our '	first name and initial		Last name					Your	social security numl	ber
(See Linstructions A					Total 1040 OI	NLY retu	ırns fil	led = 86,300,5	63			
on page 12.) Use the IRS	}   I	f a jo	int return, spouse's first na	ame and initial	Last name					Spouse's social security number		
label.		Home	address (number and stre	eet). If you have	a P.O. box, see	page 12		Apt. ı	10.	A Y	ou <b>must</b> enter	
oli lei wise,	: <b> </b> EI	lectro	onically filed forms 1040	0  Only = 47,98	32,634					<b>A</b> y	our SSN(s) above	
or type.		City, 1	town or post office, state,	and ZIP code. I	f you have a fore	eign addr	ess, se	ee page 12.		Checki	ng a box below will	Inot
Presidential											your tax or refund	
	n 🕨	Che	eck here if you, or your	spouse if filing	g jointly, want	\$3 to g	o to th	nis fund (see	page 12) I	<b>—</b>	You Spous	se
	1	П	Single				4 🔲	Head of house	ehold (with	qualifyin	g person). (See page	- 13 ) If
Filing Status	2	$\equiv$	Married filing jointly (e	ven if only on	e had income)						t not your dependen	
Check only	3	$\overline{}$	Married filing separate					this child's nar			t not your dopondon	ι, σ.πο.
one box.	3	_	and full name here.		136 3 3314 abo					h depen	dent child (see pag	je 14)
	6	а	Yourself. If someon		ou as a deper	ndent. <b>d</b>	o not	check box 6a	1	1	Boxes checked	
Exemptions		b	Spouse	,		· · · · · · ·				}	on 6a and 6b No. of children	
		c [	Dependents:			endent's		(3) Dependent's	(4)√ if qu		on 6c who:	
		(	1) First name Last	t name	social secu	rity numb	er	relationship to	child for cl credit (see p		<ul><li>lived with you</li><li>did not live with</li></ul>	
					1	1					you due to divorce or separation	
If more than four					i	i					(see page 16)	
dependents, see page 15.					1	i					Dependents on 6c not entered above	
F9					1	i					The second secon	
		d T	Total number of exempt	tions claimed							Add numbers on lines above ▶	
	7	V	Vages, salaries, tips, et	c. Attach Forr	m(s) W-2 .					7	4,654,803,923	
Income	8		Taxable interest. Attach		I ' ' '					8a	253,418,458	
Attach Form(s)		b 1	Tax-exempt interest. De	o not include	on line 8a .		8b	78,943,16	52			
W-2 here. Also	9	a (	Ordinary dividends. Atta	ch Schedule	B if required					9a	234,459,299	
attach Forms W-2G and		b (	Qualified dividends (see	page 19) .			9b	154,569,6	55			
1099-R if tax	10	Т	Taxable refunds, credits	, or offsets of	state and loca	al incom	ne taxe	es (see page	20)	10	27,046,648	
was withheld.	- 11		Alimony received		<b>\</b>					11	8,759,334	
	12	E	Business income or (los	s). Attach Sch	nedule C or C-	EZ . 1	13* Çap	o Gain Distrib =	10,553,67	5 <b>12</b>	279,736,261	
	13	(	Capital gain or (loss). At	tach Schedule	e D if required	. If not r	equire	ed, check her	e ▶ 🔲	13	895,673,985	
If you did not	14		Other gains or (losses).							14	4,356,741	
get a W-2, see page 19.	15		RA distributions		6,639,218	b	Taxabl	le amount (see	page 21)	15b	136,906,901	
oco pago 10.	16	a F	Pensions and annuities	<b>16a</b> /6	1,620,536	b	Taxabl	le amount (see	page 22)	16b	420,225,163	
Enclose, but do	17	F	Rental real estate, royalt	ies, partnershi	ips, S corporat	ions, tru	ists, et	tc. Attach Scl	nedule E	17	453,450,912	
not attach, any payment. Also,	18		Farm income or (loss). A		ıle F					18	-14,693,259	
please use	19		Jnemployment compen		2 401 166	- 7.				19	18,632,104	
Form 1040-V.	20		Social security benefits .		3,491,166	b	Taxabl	le amount (see	page 24)	20b	150,240,453 34,229,171	
	21 22		Other income. List type Add the amounts in the f			ough 21	This i	is vour <b>total ir</b>	ncome >	21	7,493,563,335	
							23	786,825			let Operat. Loss = 86	369 141
Adjusted	23		Educator expenses (see					7 00/020			tock options = 551	
Gross	24		Certain business expenses ee-basis government offic		•		24	420,756	,		ancell of debt = 1,8	
Income	25		Health savings account				25	1,500,88			or. earn. inc. excl = 1	
	26		Moving expenses. Attac				26	2,903,02		21 G	ambling inc. = 30	,139,091
	27		One-half of self-employn				27	24,759,99				
	28		Self-employed SEP, SIM				28	22,262,4				
	29		Self-employed health in				29	21,283,30				
	30		Penalty on early withdra		`		30	352,592				
	31:		Alimony paid <b>b</b> Recipient				31a	9,496,67	4			
	32		RA deduction (see page				32	11,631,42	29			
	33		Student loan interest de				33	5,177,06			rcher MSA = 21,7	
	34		uition and fees deduct				34	8,223,87	6	_	Housing ded. = 98	
	35		Domestic production activ				35	6,780,48	3	36	Other adj. = 1,295,	091
	36		Add lines 23 through 31							36	116,994,173	
	37	5	Subtract line 36 from lin	e 22. This is	your <b>adjusted</b>	gross i	ncom	е	•	37	7,376,569,161	

Form 1040 (2007)								F	Page 2	2
Tax	38	Amount from line 37 (adjusted gross income)				;	38			
and	39a	` ` ,	 □ Blind.							-
Credits	Sea	· · · · · · · · · · · · · · · · · · ·	_	}				Basic Stand Ded. =	260,72	4,92
$\overline{}$		(		,		ьГ		Add. Stand. Ded. =	11,397	481
Standard Deduction	b	If your spouse itemizes on a separate return or you were a dual-status alie					40	1,333,036,542		
for—	40	Itemized deductions (from Schedule A) or your standard			~ /	· -	41	5,924,801,906		-
<ul> <li>People who</li> </ul>	41	Subtract line 40 from line 38				. –	41	3,724,001,700		-
checked any	42	If line 38 is \$117,300 or less, multiply \$3,400 by the total num		10	/2/ 025 7//					
box on line 39a or 39b <b>or</b>		6d. If line 38 is over \$117,300, see the worksheet on page 3	33			. –	42	626,935,766		-
who can be	43	Taxable income. Subtract line 42 from line 41. If line 42 is			<u> </u>	·	43	5,371,192,461		-
claimed as a dependent,	44	Tax (see page 33). Check if any tax is from: a Form(s) 8814 b	☐ For	m 4972	c Form(s)	0003 <u> </u>	44	1,062,209,822		-
see page 31.	45	Alternative minimum tax (see page 36). Attach Form 625	· -	45	24,107,229		-			
<ul><li>All others:</li></ul>	46	Add lines 44 and 45				_	46	1,086,330,875		-
Single or	47	Credit for child and dependent care expenses. Attach Form 24	141 <b>4</b>	7	2,530,284	5	4a ا د	3396 = 37,432	I	
Married filing separately,	48	Credit for the elderly or the disabled. Attach Schedule ${\sf R}$ .	4	8	4,222	5	1 54c F8	1839 = 396,039	l	
\$5,350	49	Education credits. Attach Form 8863	4	9	4,778,117	The second		3800 = 845,539		
Married filing	50	Residential energy credits. Attach Form 5695	5	0	1,007,577	5	55b F8	3801 = 1,034,675		
jointly or	51	Foreign tax credit. Attach Form 1116 if required		1	15,435,196			3844 = 116,603		
Qualifying widow(er),	52	Child tax credit (see page 39). Attach Form 8901 if requir		2	22,701,465			8835 = 11,238		
\$10,700	53	Retirement savings contributions credit. Attach Form 8880.		3	510,409			8846 = 291,552 8884 = 224,666		
Head of	54	Credits from: <b>a</b> Form 8396 <b>b</b> Form 8859 <b>c</b> Form 88		4				her = 106,428		
household,			,oo	5				. Motor Veh. = 184,661	i I	
\$7,850	55 56	Other credits: a Form 3800 b Form 8801 c Form Add lines 47 through 55. These are your total credits					56	50,216,102		
	57	Subtract line 56 from line 46. If line 56 is more than line 4				. –	57	1,036,114,773		-
								49,511,062		
Other	58	Self-employment tax. Attach Schedule SE				· -	58	a= 30,331	b= 32	
Taxes	59	Unreported social security and Medicare tax from: a  Form			Form 8919 .	·	59		D= 32	2,24
	60	Additional tax on IRAs, other qualified retirement plans, etc.	Attach F	orm 53	329 if required.	· -	60	3,076,536		-
	61	Advance earned income credit payments from Form(s) W-	-2, box 9			· -	61	50,297		-
	62	Household employment taxes. Attach Schedule H					62	914,059		
	63	Household employment taxes. Attach Schedule H Add lines 57 through 62. This is your <b>total tax</b> Recapture tax	X = 413,7	40 Othe	r taxes = 381,256		63	1,092,417,136		
<b>Payments</b>	64	Federal income tax withheld from Forms W-2 and 1099 .	. 6	4	787,253,230	_				
	65	2007 estimated tax payments and amount applied from 2006 reti	urn 6	5 2	282,973,273					
If you have a	66a	Earned income credit (EIC)		Sa	18,195,200					
qualifying	b	Nontaxable combat pay election ▶ 66b 46,020								
child, attach Schedule EIC.	67	Excess social security and tier 1 RRTA tax withheld (see page	59) 6	7	2,515,780					
	68	Additional child tax credit. Attach Form 8812		8	8,107,456			70a F2439 = 119.9	ا 59	
	69	Amount paid with request for extension to file (see page		9	96,141,853			70b F4136 = 88,95		
	70	Payments from: a Form 2439 b Form 4136 c Form 888	· /	0				700 F4130 = 66,93 70c F8885 = 39,34		
	71	Refundable credit for prior year minimum tax from Form 8801, line	~·		508,074			70C F8885 = 39,34	ა 	
	72	Add lines 64, 65, 66a, and 67 through 71. These are your				<u> </u>	72	1,196,018,642		
D ( )							73	228,519,265		
Refund	73	If line 72 is more than line 63, subtract line 63 from line 72.			· · · · · · · · ·		74a	179,542,304		
Direct deposit? See page 59	74a	Amount of line 73 you want <b>refunded to you.</b> If Form 888	_				+d	177,042,304		
and fill in 74b,	► b		c Type: L	Chec	cking Saving	S				
74c, and 74d,	► d	Account number								
or Form 8888.	75	Amount of line 73 you want <b>applied to your 2008 estimated tax</b>	-		48,976,961		-6	10/ 740 /11		
Amount	76	Amount you owe. Subtract line 72 from line 63. For details	1			<b></b>	76	126,749,611		
You Owe	77	Estimated tax penalty (see page 61)		7	1,831,852				<u></u>	
<b>Third Party</b>	Do	you want to allow another person to discuss this return with	the IRS	(see p	page 61)? 🔲 Y	es. Co	mple	ete the following.	∐ No	)
Designee		signee's Phone			Personal id	entificati	ion			1
	nar	ne  no.	)		number (PII	N)				
Sign		ler penalties of perjury, I declare that I have examined this return and accept they are true, correct, and complete. Declaration of property (other the								
Here		ef, they are true, correct, and complete. Declaration of preparer (other tha						•	uge.	
Joint return?	You	ır signature Date	Your oc	cupatio	n		Dayti	me phone number		
See page 13.							(	)		
Keep a copy	Spo	ouse's signature. If a joint return, <b>both</b> must sign. Date	Spouse	s occu	pation					
for your records.	4									
	Des	novovio N	Date				Prepa	arer's SSN or PTIN		
Paid		parer's hature			Check if self-employed	_	-15,			
Preparer's		n's name (or			EIN	<u></u>	;			
Use Only		yours if self-employed),								

109 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** IRS Use Only-Do not write or staple in this space For the year Jan. 1-Dec. 31, 2007, or other tax year beginning 2007, ending . 20 OMB No. 1545-0074 Label Your first name and initial Your social security number Electronically Filed Returns = 87,851,490 (See instructions A B E If a joint return, spouse's first name and initial Last name Spouse's social security number on page 12.) 1040's E-filed = 47,982,634 Use the IRS label. Home address (number and street). If you have a P.O. box, see page 12. Apt. no. You must enter н Otherwise, 1040A's E-filed = 25,420,635your SSN(s) above. E R please print City, town or post office, state, and ZIP code. If you have a foreign address, see page 12. or type. Checking a box below will not 1040EZ's Efiled = 14,448,221 change your tax or refund. **Presidential** You Spouse Election Campaign ▶ Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 12) ▶ Sinale Head of household (with qualifying person). (See page 13.) If **Filing Status** the qualifying person is a child but not your dependent, enter Married filing jointly (even if only one had income) this child's name here. ▶ Married filing separately. Enter spouse's SSN above Check only one box. and full name here. Qualifying widow(er) with dependent child (see page 14) Boxes checked Yourself. If someone can claim you as a dependent, do not check box 6a on 6a and 6b **Exemptions** b Spouse No. of children (4) if qualifying on 6c who: (3) Dependent's **Dependents:** (2) Dependent's lived with you relationship to child for child tax social security number (1) First name Last name • did not live with you credit (see page 15) you due to divorce or separation If more than four (see page 16) dependents, see Dependents on 6c page 15. not entered above Add numbers on d Total number of exemptions claimed lines above ▶ 7 3,609,639,144 Wages, salaries, tips, etc. Attach Form(s) W-2 Income 95,123,390 8a Taxable interest. Attach Schedule B if required 26,755,277 8b Tax-exempt interest. Do not include on line 8a Attach Form(s) 80,108,656 W-2 here. Also Ordinary dividends. Attach Schedule B if required 9a attach Forms 50,739,699 9b W-2G and 15,450,139 10 Taxable refunds, credits, or offsets of state and local income taxes (see page 20) 1099-R if tax 10 4,617,245 was withheld. 11 11 Business income or (loss). Attach Schedule C or C-EZ 13\* Cap Gain Dist = 5,311,764 121,682,665 12 12 13 251,839,641 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 180,231 If you did not Other gains or (losses). Attach Form 4797 . 14 14 get a W-2, 87,709,495 71,186,308 IRA distributions . . 15a 15b 15a **b** Taxable amount (see page 21) see page 19. 250,569,397 448,965,804 16a 16b Pensions and annuities **b** Taxable amount (see page 22) 157,482,109 17 Enclose, but do Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 not attach, any 18 -8,069,336 Farm income or (loss). Attach Schedule F . . . . . 18 payment. Also. 19,849,435 19 19 Unemployment compensation please use 192,253,886 80,602,028 20b Social security benefits 20a Form 1040-V. 20a 15,442,385 21 21 Other income. List type and amount (see page 24) 22 Add the amounts in the far right column for lines 7 through 21. This is your total income 22 4,752,923,300 oss = 26,502,7372 s = 167,866

#### **Adjusted** Gross Income

3

36

23	Educator expenses (see page 26)	23	615,558	21 Net Operat. Loss = 26,502,73
24	Certain business expenses of reservists, performing artists, and			21 Stock options = 167,866
	fee-basis government officials. Attach Form 2106 or 2106-EZ	24	252,314	21 Cancell. of debt = 851,911
25	Health savings account deduction. Attach Form 8889.	25	793,873	21 For. earn. inc. excl. = 4,802,7
26	Moving expenses. Attach Form 3903	26	2,016,560	21 Gambling inc. = 12,361,707
27	One-half of self-employment tax. Attach Schedule SE	27	11,155,823	
28	Self-employed SEP, SIMPLE, and qualified plans	28	9,649,156	
29	Self-employed health insurance deduction (see page 26)	29	9,857,539	
30	Penalty on early withdrawal of savings	30	165,591	
	. Charly on carry minarana. St davingo	-	F 0F0 01F	

5,050,015 31a 31a Alimony paid **b** Recipient's SSN ▶ \_ 6,527,884 IRA deduction (see page 27) . . . . . 32 36 MSA Ded. = 5,853 4,257,519 33 33 Student loan interest deduction (see page 30) . 6,930,501 36 Housing Ded. = 36,507 Tuition and fees deduction. Attach Form 8917 . . . . 34 36 Other adi. = 574.538 2,438,355 35 Domestic production activities deduction. Attach Form 8903

37 Subtract line 36 from line 22. This is your adjusted gross income For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 83. Cat. No. 11320B

Add lines 23 through 31a and 32 through 35 . . . .

61,473,316

4.691.449.983

excl. = 4.802.783

Form 1040 (2007)	1			F	Page 2	
Tax	38	Amount from line 37 (adjusted gross income)	38			
and	39a	Check ∫ ☐ You were born before January 2, 1943, ☐ Blind. ☐ Total boxes				
Credits	oou	if: Spouse was born before January 2, 1943, ☐ Blind.   Checked ▶ 39a		Basic Stand. Ded. :	400,88	1,022
	) h	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here >39b		Add. Stand. Ded.	= 8,650 <u>,</u> ;	226
Standard Deduction	b		40	745,402,399		
for—	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	41	3,604,073,465		
<ul> <li>People who</li> </ul>	41	Subtract line 40 from line 38	41	3,004,073,403		
checked any	42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line	40	414 444 040		
box on line 39a or 39b <b>or</b>		6d. If line 38 is over \$117,300, see the worksheet on page 33	42	616,644,960		
who can be	43	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0	43	3,073,387,454		
claimed as a dependent,	44	Tax (see page 33). Check if any tax is from: a Form(s) 8814 b Form 4972 c Form(s) 8889	44	552,521,824		
see page 31.	45	Alternative minimum tax (see page 36). Attach Form 6251	45	10,033,643		
<ul><li>All others:</li></ul>	46	Add lines 44 and 45	46	562,561,681		
Single or	47	Credit for child and dependent care expenses. Attach Form 2441 47 2,754,697	54a F	8396 = 32,737 	I	
Married filing separately,	48	Credit for the elderly or the disabled. Attach Schedule R . 48 5,705	54c F	l 8839 = 225,994		
\$5,350	49	Education credits. Attach Form 8863 49 4,916,840	li.	3800 = 296,090		
Married filing	50	Residential energy credits. Attach Form 5695	55b F	8801 = 423,611		
jointly or	51	Foreign tax credit. Attach Form 1116 if required		8844 = 31,198		
Qualifying widow(er),	52	Child tax credit (see page 39). Attach Form 8901 if required 52 23,673,102		8835 = 186 8846 = 111.716		
\$10,700	53	Retirement savings contributions credit. Attach Form 8880. 53 742,033		8846 = 111,716 5884 = 58,054		
Head of	54	Credits from: a Form 8396 b Form 8859 c Form 8839		ther = 66,373		
household, \$7,850	55	Other credits: a Form 3800 b Form 8801 c Form 555	55c Al	MV = 126,019	. –	
Ψ1,030	56	Add lines 47 through 55. These are your <b>total credits</b>	56	36,609,909		
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0	57	525,951,772		
	58	Self-employment tax. Attach Schedule SE	58	22,306,889		
Other		and the contract of the contra	59	a = 17,403	b= 15,5	51
Taxes	59	Unreported social security and Medicare tax from: a Form 4137 b Form 8919	60	3,076,536	D= 13,3	31
	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	61	50,297		
	61	Advance earned income credit payments from Form(s) W-2, box 9	62	276,455		
	62	Household employment taxes. Attach Schedule H			_	
	63	E22 E04 200	63	551,939,172		
Payments	64	Federal income tax withheld from Forms W-2 and 1099 64 532,586,398				
	65	2007 estimated tax payments and amount applied from 2006 return  65 95,800,679				
If you have a gualifying	66a	Earned income credit (EIC)				
child, attach	b	Nontaxable combat pay election ► 66b 96,930				
Schedule EIC.	67	Excess social security and tier 1 RRTA tax withheld (see page 59) 67 1,476,038				
	68	Additional child tax credit. Attach Form 8812 68 12,753,664		70a F2439 = 3,862	2	
	69	Amount paid with request for extension to file (see page 59) 69 22,149,072		70b F4136 = 34,48	35	
	70 🬗	Payments from: a Form 2439 b Form 4136 c Form 8885 . 70		70c F8885 = 18,94	4	
	71	Refundable credit for prior year minimum tax from Form 8801, line 27 255,605				
	72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	706,148,358		
Refund	73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you <b>overpaid</b>	73	206,149,758		
Direct deposit?	74a	Amount of line 73 you want <b>refunded to you.</b> If Form 8888 is attached, check here ▶	74a	192,768,792		
See page 59	<b>b</b>	Routing number				
and fill in 74b, 74c, and 74d,	▶ d	Account number				
or Form 8888.	75	Amount of line 73 you want applied to your 2008 estimated tax   75 13,380,966				
Amount	76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60 ▶	76	52,629,975		
You Owe	77	Estimated tax penalty (see page 61)				
Third Party	Do	you want to allow another person to discuss this return with the IRS (see page 61)?   Yes. (	Compl	ete the following.	☐ No	
		Signee's Phone Personal identific	ation			
Designee	nai		ation			
Sign	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and				
Here	bel	ef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whether they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whether they are true, correct, and complete.	nich pre	parer has any knowled	dge.	
Joint return?	Yo	ur signature Date Your occupation	Dayt	ime phone number		
See page 13.			(	)		
Keep a copy	Sn	puse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation	(	,		
for your records.		opodoo o occupation				
		Date	Dron	arer's SSN or PTIN		
Paid		Check if	riep	aidi 3 OON UI FIIN		
Preparer's		, contemporary	!			
Use Only	you	n's name (or EIN sif self-employed),	1			
200 31113	ade	dress, and ZIP code Phone no.	(	)		

111

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

Department of the Treasury—Internal AND UNITS (OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Form

1040A 2007 U.S. Individual Income Tax Return IRS Use Only-Do not write or staple in this space. OMB No. 1545-0074 Your first name and initial Label Your social security number (See page 15.) Total Forms Filed = 33,507,223 A B E If a joint return, spouse's first name and initial Spouse's social security number Use the L Total Forms Filed Electronically = 25,420,635 IRS label. н Home address (number and street). If you have a P.O. box, see page 15. You must enter Otherwise, your SSN(s) above. please print City, town or post office, state, and ZIP code. If you have a foreign address, see page 15. or type. Checking a box below will not Single = 11,874,291 Joint = 8.982.553change 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 15) You 1 Sinale Head of household (with qualifying person). (See page 16.) **Filing** If the qualifying person is a child but not your dependent. 2 Married filing jointly (even if only one had income) status enter this child's name here. Married filing separately. Enter spouse's SSN above and Check only one box. **5** Qualifying widow(er) with dependent child (see page 17) full name here. Boxes checked on 6a and 6b **6a** Yourself. If someone can claim you as a dependent, **do not** check **Exemptions** box 6a. b Spouse No. of children (4) √if qualifying on 6c who: c Dependents: (3) Dependent's (2) Dependent's social child for child lived with relationship to security number tax credit (see vou (1) First name Last name you page 18) If more than six did not live dependents, with you due to divorce or see page 18. separation (see page 19) **Dependents** on 6c not entered above Add numbers on lines **d** Total number of exemptions claimed. above > Income Wages, salaries, tips, etc. Attach Form(s) W-2. 786,384,938 Attach Form(s) W-2 14,029,845 8a Taxable interest. Attach Schedule 1 if required. 8a here. Also b Tax-exempt interest. Do not include on line 8a. 8b 408,161 attach Ordinary dividends. Attach Schedule 1 if required. 2,592,828 Form(s) 9a 1099-R if tax **b** Qualified dividends (see page 22). 9b 1,302,630 was withheld. 1.428.210 10 Capital gain distributions (see page 22) 10 If you did not **11a** IRA 11b Taxable amount get a W-2, see 13,208,999 11,052,426 distributions. (see page 22). 11a 11b page 21. 12a Pensions and Taxable amount Enclose, but do 89.907.567 70,356,302 annuities. 12a (see page 23). 12b not attach, any Other Income = 1.232.997 payment. 7,172,951 13 Unemployment compensation and Alaska Permanent Fund dividends 13 14a Social security 14b Taxable amount 78,833,455 16,946,180 benefits. 14a (see page 25) 14b 911,196,677 15 Add lines 7 through 14b (far right column). This is your total income. 15 **Adjusted** 16 16 Educator expenses (see page 25). 139,172 gross 17 IRA deduction (see page 27). 1,245,075 17 income 18 Student loan interest deduction (see page 29). 2.286.687 18 19 Tuition and fees deduction. Attach Form 8917. 2,355,085 6.026.018 20 Add lines 16 through 19. These are your total adjustments. 20 905,170,659 21 21 Subtract line 20 from line 15. This is your adjusted gross income.

Form 1040A	(2007	AMOUNTS OF SELECTED LINES FILED (IN THOU	DOMINDO OF DO	LLAINO	')	Pi	age 2
Tax,	22	Enter the amount from line 21 (adjusted gross income).			22		
credits,					l <b></b>		0.050.044
and	23a		tal boxes			Stand. Ded.=	
payments		if:			Total Sta	nd. Ded.= 260	),926,470
Standard	b	If you are married filing separately and your spouse if					
Deduction	04	deductions, see page 30 and check here	▶ 23b		04 25	3,967,229	
for—	24	Enter your <b>standard deduction</b> (see left margin).	10 ontor 0				
<ul> <li>People who checked any</li> </ul>	25	Subtract line 24 from line 22. If line 24 is more than line 2 If line 22 is \$117,300 or less, multiply \$3,400 by the total nur	<u> </u>		25 65	4,890,421	
box on line	26	claimed on line 6d. If line 22 is over \$117,300, see the works			26 25	5,940,437	
23a or 23b or who can be	27	Subtract line 26 from line 25. If line 26 is more than line 2		<u>.</u>	20 20	5,940,437	
claimed as a	21	This is your <b>taxable income.</b>	o, enter -u		27 44	9,641,880	
dependent, see page 30.	28	<b>Tax,</b> including any alternative minimum tax (see page 30).				,771,127	
<ul><li>All others:</li></ul>	29	Credit for child and dependent care expenses.			20 00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Single or		Attach Schedule 2.	952,868				
Married filing	30	Credit for the elderly or the disabled. Attach	552,555				
separately, \$5,350		Schedule 3. 30	8,247				
Married filing	31	Education credits. Attach Form 8863. 31	2,132,295				
jointly or	32	Child tax credit (see page 35). Attach					
Qualifying widow(er),		Form 8901 if required.	8,854,818				
\$10,700	33	Retirement savings contributions credit. Attach					
Head of household,		Form 8880. 33	466,436				
\$7,850	34	Add lines 29 through 33. These are your total credits.			34 12	2,414,664	
	35	Subtract line 34 from line 28. If line 34 is more than line 28,	enter -0		35 47	,358,745	
	36	Advance earned income credit payments from Form(s) W-	-2, box 9.		36	54,789	
	37	Add lines 35 and 36. This is your total tax.		<b>•</b>	37 47	,413,535	
	38	Federal income tax withheld from Forms W-2 and 1099. 38	79,473,831				
	39	2007 estimated tax payments and amount					
If you have a qualifying		applied from 2006 return. 39	1,146,381				
child, attach	40a	Earned income credit (EIC). 40a	29,721,268				
Schedule EIC.	<u>b</u>	Nontaxable combat pay election. 40b 63,629	0.500.500	E		CA withheld	
LIO.	41	Additional child tax credit. Attach Form 8812. 41	8,582,763			on request =	= 21,807
	42	Add lines 38, 39, 40a, and 41. These are your total paym			42 118	3,962,382	_
Refund	43	If line 42 is more than line 37, subtract line 37 from line 4. This is the amount you <b>overpaid.</b>	۷.		43 7	4,694,333	
Direct	44a	•	had chack hara			4,619,033	
deposit?		Routing Routing	lea, check here		44a /	4,010,000	
See page 52 and fill in	D	number	Savings				
44b, 44c,	<b>▶</b> d	Account					
and 44d or	u	number					
Form 8888.	45	Amount of line 43 you want applied to your					
		2008 estimated tax. 45	75,300				
Amount	46	Amount you owe. Subtract line 42 from line 37. For deta	ils on how				
you owe		to pay, see page 53.		<b>►</b> 4	46 3,	185,936	
you owe	47	Estimated tax penalty (see page 53). 47	40,451				
Third party	, [	Do you want to allow another person to discuss this return with the IRS (s	ee page 54)?	Yes. C	omplete th	e following.	No
designee		Designee's Phone	Perso	onal ident	tification r		
uesignee		name ▶ no. ▶ ( )		er (PIN)	<b>&gt;</b> _		
Sign	l L	Under penalties of perjury, I declare that I have examined this return and accompanyi knowledge and belief, they are true, correct, and accurately list all amounts and source:	ng schedules and st	atements	s, and to the	best of my	
here	(	of preparer (other than the taxpayer) is based on all information of which the prepare	r has any knowledg	e.			
Joint return?		our signature Date Your occu	ipation		Daytim	e phone numbe	er
See page 15. Keep a copy	В				(	)	
for your		Spouse's signature. If a joint return, <b>both</b> must sign.  Date  Spouse's c	occupation				
records.	7			-	Duc :- :	CON DTIN	
Paid		Preparer's Date signature	Check if		Preparer's	SSN or PTIN	
preparer's	_	· ·	self-employ	ed 🔲	:		
use only	)	Firm's name (or ours if self-employed), address and ZIP code	EIN		( )		
use only							

Department of the Treasury

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Form **Income Tax Return for Single and 1040EZ** 2007 Joint Filers With No Dependents OMB No. 1545-0074 Your first name and initial Your social security number Label Total Forms Filed = 23,171,020 - 1 (See page 8.) A B Last name Spouse's social security number If a joint return, spouse's first name and initial Use the IRS Total Forms Filed includes 17,003 Form 1040EZ-T's label. Home address (number and street). If you have a P.O. box, see page 9. Apt. no. You must enter Otherwise. Н your SSN(s) above. please print Е R or type. City, town or post office, state, and ZIP code. If you have a foreign address, see page 9. Checking a box below will not Presidential change your tax or refund. Single = 21,870,710Joint = 1,300,310Election Campaign Spouse Check here if you, or your spouse if a joint return, want \$3 to go to this fund . . . . . (page 9) Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. 401.080.959 Income Attach your Form(s) W-2 tax exempt interest = 18 **Attach** 609.879 Form(s) W-2 Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ here. Other Net Income or Loss = 678,087 3,610,024 Enclose, but Unemployment compensation and Alaska Permanent Fund dividends (see page 10). do not attach, any payment. Total Income = 405,978,949 / 405.978.949 Add lines 1, 2, and 3. This is your **adjusted gross income**. If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. Spouse If no one can claim you (or your spouse if a joint return), enter \$8,750 if single; 60,295,169 \$17,500 if **married filing jointly.** See back for explanation. Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your taxable income. 242,429,551 6 Federal income tax withheld from box 2 of your Form(s) W-2 45,836,256 **Payments** 8a Earned income credit (EIC). 623.525 8a and tax O **b** Nontaxable combat pay election. 8h Excess FICA / RRTA = 3 46,473,058 Add lines 7 and 8a. These are your total payments. F4868 payment = 4,310 Tax. Use the amount on line 6 above to find your tax in the tax table on pages 33,434,294 18-26 of the booklet. Then, enter the tax from the table on this line. 10 11a If line 9 is larger than line 10, subtract line 10 from line 9. This is your refund. Refund If Form 8888 is attached, check here 11a 13,711,054 Have it directly deposited! See page 15 and fill **b** Routing number in 11b, 11c, and 11d or ▶ d Account number Form 8888. **Amount** If line 10 is larger than line 9, subtract line 9 from line 10. This is 672,290 12 the amount you owe. For details on how to pay, see page 16. you owe Do you want to allow another person to discuss this return with the IRS (see page 16)? 

Yes. Complete the following. 
No Third party Designee's Phone Personal identification designee **)** ( ) number (PIN) name Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and Sign accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge. here Date Your occupation Daytime phone number Your signature Joint return? See page 6. Keep a copy Spouse's signature. If a joint return, both must sign. Date Spouse's occupation for your records. Date Preparer's SSN or PTIN Preparer's Paid Check if sianature self-employed \_\_\_ preparer's Firm's name (or EIN yours if self-employed), address, and ZIP code use only Phone no.

Schedule 1 (Form 1040A)

Department of the Treasury—Internal ANOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# Interest and Ordinary Dividends for Form 1040A Filers

2	<b>00</b>	7 OMB No.	1545-0074
_		E CIVID INC.	1040 007

Name(s) shown on Form	m 1040		You	r social security nu	mber
		Total Schedules Filed = 2,451,196			
Part I		Note. If you received a Form 1099-INT, Form 1099-OID, or substitute st brokerage firm, enter the firm's name and the total interest shown			
(See back of schedule and the instructions	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see back of schedule and list this interest first. Also, show that buyer's social security number and address.		Amount	
for Form		•	1	7	
1040A, line 8a.)					$\vdash$
	_				-
					-
		Add the executate on line 4	0	10 110 017	_
	3	Add the amounts on line 1.  Excludable interest on series EE and I U.S. savings bonds issued	2	12,119,917	
		after 1989. Attach Form 8815.	3		_
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040A, line 8a.	4		
Part II		Note. If you received a Form 1099-DIV or substitute statement from a been enter the firm's name and the ordinary dividends shown on that for		age firm,	
Ordinary	5	List name of payer.		Amount	
dividends		. ,	5		
(See back of schedule					
and the	_				+
instructions					+
for Form 1040A,					
line 9a.)					
					-
	_				-
	_				_
					+
					+
					_
					-
	6	Add the amounts on line 5. Enter the total here and on Form 1040A,			+

line 9a.

2,119,505

Schedule 2 (Form 1040A) Department of the Treasury—Internal Revenue Service AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

**Child and Dependent Care Expenses for Form 1040A Filers** 

(99) 2007

OMB No. 1545-0074

Name(s) shown on Form 1040A Your social security number Total Schedules Filed = 1,913,438 Before you begin: You need to understand the following terms. See Definitions on page 1 of the separate instructions. Dependent care benefits Qualifying person(s) Qualified expenses (a) Care provider's (b) Address (number, street, apt. no., (c) Identifying (d) Amount paid Part I city, state, and ZIP code) number (SSN or EIN) (see instructions) name Persons or organizations who provided the care 6,193,034 (If you have more than two care providers, see the instructions.) You must complete this No ———— Complete only Part II below. Did you receive part. dependent care benefits? Yes — Complete Part III on the back next. Caution. If the care was provided in your home, you may owe employment taxes. If you do, you must use Form 1040. See Schedule H and its instructions for details. Information about your qualifying person(s). If you have more than two qualifying persons, see Part II the instructions. (c) Qualified expenses Credit for child (a) Qualifying person's name (b) Qualifying person's social you incurred and paid and dependent security number in 2007 for the person First Last care expenses listed in column (a) 4,789,161 1,170,479 3 Add the amounts in column (c) of line 2. Do not enter more than \$3,000 for one qualifying person or \$6,000 for two or more persons. If you completed Part III, enter the amount from line 27. 3 4,876,573 4 Enter your earned income. See the instructions. 4 56,892,445 5 If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions); all others, enter the amount from line 4. 5 11,290,721 6 Enter the smallest of line 3, 4, or 5. 6 4,861,571 7 Enter the amount from Form 1040A, line 22. 8 Enter on line 8 the decimal amount shown below that applies to the amount on line 7. If line 7 is: If line 7 is: **But not Decimal But not Decimal** Over amount is Over amount is over over \$0-15,000 35 \$29,000-31,000 .27 15,000—17,000 17,000—19,000 .34 31,000-33,000 .26 .33 33,000-35,000 .25 19,000-21,000 .24 .32 35,000—37,000 21,000-23,000 .31 37.000-39.000 .23 23,000-25,000 .30 39,000-41,000 .22 25,000-27,000 .29 41,000-43,000 .21 27,000-29,000 .28 43,000-No limit 8 Multiply line 6 by the decimal amount on line 8. If you paid 2006 1,269,615 current vr. expenses in 2007, see the instructions. 9 prior year -28 10 Enter the amount from Form 1040A, line 28. 10 Credit for child and dependent care expenses. Enter the smaller total credit- 952,868 of line 9 or line 10 here and on Form 1040A, line 29.

Schedule 2 (Form 1040A)	2007	7					P	age 2
Part III Dependent care benefits	12	for 2007. This amount should be shown in box 10	nter the total amount of <b>dependent care benefits</b> you received or 2007. This amount should be shown in box 10 of your Form(s) <i>I-2</i> . <b>Do not</b> include amounts that were reported to you as wages box 1 of Form(s) W-2.					
	13 Enter the amount, if any, you carried over from 2006 and used in 2007 during the grace period. See the instructions.					13	210,084	
	14	Find the grade period less the instructions.  Enter the amount, if any, you forfeited or carried forward to 2008. See the instructions.				14	(	)
	15	Combine lines 12 through 14. See the instructions	s.		1	15		
	16	Enter the total amount of <b>qualified expenses</b> incurred in 2007 for the care of the qualifying person(s).	16	457,178				
	17	Enter the <b>smaller</b> of line 15 or 16.	17					
	18	Enter your <b>earned income</b> . See the instructions.	18	56,892,445				
	20	<ul> <li>Enter the amount shown below that applies to you.</li> <li>If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions for line 5).</li> <li>If married filing separately, see the instructions for the amount to enter.</li> <li>All others, enter the amount from line 18.</li> <li>Enter the smallest of line 17, 18, or 19.</li> <li>Excluded benefits. Enter here the smaller of the</li> <li>The amount from line 20, or</li> </ul>						
		<ul> <li>\$5,000 (\$2,500 if married filing separately and yenter your spouse's earned income on line 19).</li> </ul>		were required t		21	174,168	
	22	<b>Taxable benefits.</b> Subtract line 21 from line 15. A amount on Form 1040A, line 7. In the space to th "DCB."				22	24,308	
		To claim the child and dependent credit, complete lines 23–27 below						
	23	Enter \$3,000 (\$6,000 if two or more qualifying per	rsons	s).	2	23		
	24	Enter the amount from line 21.			2	24	174,168	
	25	Subtract line 24 from line 23. If zero or less, <b>stop</b> , the credit. <b>Exception.</b> If you paid 2006 expenses instructions for line 9.			2	25		

26 Complete line 2 on the front of this schedule. **Do not** include in column (c) any benefits shown on line 21 above. Then, add the amounts in column (c) and enter the total here.

on the front of this schedule and complete lines 4-11.

27 Enter the smaller of line 25 or 26. Also, enter this amount on line 3

26

27

#### 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

Schedule 3 (Form 1040A)

Department of the Treasury-Internal Revenue Service AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

**Credit for the Elderly or the Disabled** for Form 1040A Filers

2007

OMB No. 1545-0074

Name(s) shown on Form 1040A	Your social security number
Total Schedules Filed = 72,359	

You may be able to take this credit and reduce your tax if by the end of 2007:

- You were age 65 or older
- or
- You were under age 65, you retired on permanent and total disability, and you received taxable disability income.

But you must also meet other tests. See the separate instructions for Schedule 3.

In most cases, the IRS can figure the credit for you. See the instructions

Part I	If your filing status is:	And by the end of 2007:	Check only one box:
Check the box for your filing status	Single, Head of household, or	1 You were 65 or older	1 🗖
and age	Qualifying widow(er)	2 You were under 65 and you reti and total disability	
		3 Both spouses were 65 or older	3
		4 Both spouses were under 65, but retired on permanent and total d	
	Married filing	5 Both spouses were under 65, a permanent and total disability.	
	jointly	6 One spouse was 65 or older, and was under 65 and retired on pedisability	ermanent and total
		7 One spouse was 65 or older, and was under 65 and <b>not</b> retired of total disability	on permanent and
	Married filing	8 You were 65 or older and you live spouse for all of 2007	
	separately	<b>9</b> You were under 65, you retired total disability, and you lived spouse for all of 2007	apart from your
	Did you check	—Yes——▶ Skip Part II and o	complete Part III on the back
	box 1, 3, 7, or 8?	No Complete Parts I	I and III.

# Part II Statement of permanent and total disability

Complete this part only if you checked box 2, 4, 5, 6, or 9 above.

- **1** You filed a physician's statement for this disability for 1983 or an earlier year, or you filed or got a statement for tax years after 1983 and your physician signed line B on the statement, and
  - 2 Due to your continued disabled condition, you were unable to engage in any substantial gainful activity in 2007, check this box
    - If you checked this box, you do not have to get another statement for 2007.
    - If you did not check this box, have your physician complete the statement on page 4 of the instructions. You must keep the statement for your records.

Schedule 3 (Form 1040A) 2007

10

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# DOLLARS) Page **2**Enter: . \$5,000 . \$7,500

# Part III Figure your credit

10
10
4.0

Did you check box 2, 4, 5, 6, or 9 in Part I?

Yes — You must complete line 11.

Enter the amount from line 10 on line 12 and go to line 13.

11 If you checked (in Part I):

If you checked (in Part I):

- Box 6, add \$5,000 to the taxable disability income of the spouse who was under age 65. Enter the total.
- Box 2, 4, or 9, enter your taxable disability income.
- Box 5, add your taxable disability income to your spouse's taxable disability income. Enter the total.

	For more details on what to include on line 11, see the instructions.	11	74,359	
12	If you completed line 11, enter the smaller of line 10 or line 11; all	4.0		
	others, enter the amount from line 10.	12	385,882	

- Enter the following pensions, annuities, or disability income that you (and your spouse if filing a joint return) received in 2007.
  - a Nontaxable part of social security benefits

Nontaxable part of railroad retirement benefits treated as social security (see the instructions). 13a 125,253

**b** Nontaxable veterans' pensions and

Any other pension, annuity, or disability benefit that is excluded from income under any other provision of law (see the instructions).

**13b** 12,175

126,506

c Add lines 13a and 13b. (Even though these income items are not taxable, they **must** be included here to figure your credit.) If you did not receive any of the types of nontaxable income listed on line 13a or 13b, enter -0- on line 13c. 13c

14 Enter the amount from Form 1040A, line 22.

15	If you checked (in Part I): Enter: Box 1 or 2			
	Box 3, 4, 5, 6, or 7	15		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	467,602	
17	Enter one-half of line 16.	17	233,817	

18	Add lines 13c and 17.	18	360,323	
19	Subtract line 18 from line 12. If zero or less, stop; you cannot take			
	the credit. Otherwise, go to line 20.	19	110,303	
20	Multiply line 19 by 15% (.15).	20		
21	Enter the amount from Form 1040A, line 28, minus any amount on			
<u> </u>	Form 1040A, line 29.	21		
22	Credit for the elderly or the disabled. Enter the smaller of line 20			
	or line 21 here and on Form 1040A, line 30.	22	8,247	

Schedule 3 (Form 1040A) 2007

**SCHEDULES A&B** (Form 1040)

Department of the Treasury Internal Revenue Service

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **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 Attachment Sequence No. **07** 

Name(s) shown or	n Form	า 1040			You	r social security nu	mber
		Total Schedules Filed = 51,090,4	56				
Medical and Dental	1 2	Caution. Do not include expenses reimbursed or paid by others.  Medical and dental expenses (see page A-1)  Enter amount from Form 1040, line 38 2	1	119,153,650			
Expenses	3 4	Multiply line 2 by 7.5% (.075)	3 nter -0	42,806,188   D	4	76,347,462	
Taxes You Paid	5	State and local (check only one box):  a   Income taxes, or	5	287,873,621		Income Tax = 269,3	
(See page A-2.)	6	b ☐ General sales taxes ∫	6	166,884,976 9,207,161		General Sales Tax =	18,522,4
	7 8	Personal property taxes	8	1,914,783			
	9	Add lines 5 through 8			9	465,880,541	
Interest You Paid (See page A-5.)	10 11	Home mortgage interest and points reported to you on Form 1098  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	10	484,500,709			
Note.			11	6,931,592			
Personal interest is not	12	Points not reported to you on Form 1098. See page A-6 for special rules	12	2,057,338			
deductible.	13 14	Qualified mortgage insurance premiums (See page A-7). Investment interest. Attach Form 4952 if required. (See page A-7.)	13	1,846,093 29,454,467			
	15	Add lines 10 through 14			15	524,790,200	
Gifts to Charity	16	Gifts by cash or check. If you made any gift of \$250 or more, see page A-8	16	143,826,766			
If you made a gift and got a benefit for it, see page A-8.	17 18 19	Other than by cash or check. If any gift of \$250 or more, see page A-8. You <b>must</b> attach Form 8283 if over \$500 Carryover from prior year	17 18	58,747,438 25,522,568	19	193,603,968	
Casualty and Theft Losses		Casualty or theft loss(es). Attach Form 4684. (See page A			20	2,337,018	
Job Expenses and Certain Miscellaneous	21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-9.) ▶	21	82,105,794			
Deductions	22	Tax preparation fees	22	6,485,717			
(See page A-9.)	23	Other expenses—investment, safe deposit box, etc. List type and amount ▶	23	34,643,576			
	24	Add lines 21 through 23	24	123,235,088			
	25 26	Enter amount from Form 1040, line 38 <b>25</b> Multiply line 25 by 2% (.02)	26	81,174,287		05 217 002	
Other	27	Subtract line 26 from line 24. If line 26 is more than line 2	24, en	ter -0	27	85,217,982	
Miscellaneous Deductions	28	Other—from list on page A-10. List type and amount ► Gambling Loss Deduction = 21,113,627 Other Than Gamblin  Property income, Casualty & Theft Deduction = 302,7	~	uction = 2,544,908	28	23,961,243	
———— Total	29	Is Form 1040, line 38, over \$156,400 (over \$78,200 if mar		iling separately)?			
Itemized Deductions		<ul> <li>No. Your deduction is not limited. Add the amounts in the for lines 4 through 28. Also, enter this amount on F</li> <li>Yes. Your deduction may be limited. See page A-10 for the page A-10 for</li></ul>	he far Form 1	right column 040, line 40.	29	1,333,036,542	
	30	If you elect to itemize deductions even though they are less than your standar		,			

Schedules A&B (Form 1040) 2007 AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side.

Total Schedules Filed = 27,330,503

OMB No. 1545-0074

Your social security number

Page 2

		Total Schedules Filed = 27,330,503				
		Schedule B—Interest and Ordinary Dividends		Attac Sequ	hment ence N	o. <b>08</b>
Part I Interest	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶		Amo	ount	
(See page B-1 and the instructions for Form 1040, line 8a.)		Of the total schedules filed the component parts are as follows: F1040 = 24,879,307 F1040A = 2,451,196	1			
Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter	The component parts of line 2 are as follows:					
the total interest	_	F1040 = 244,670,595 F1040A = 12,119,917	2	256,790,5	511	
form.	3	Add the amounts on line 1	3	62,969		
		Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a <b>bete.</b> If line 4 is over \$1,500, you must complete Part III.	4	Amo	ount	
Part II Ordinary Dividends (See page B-1	5	List name of payer ▶				
and the instructions for Form 1040, line 9a.)						
Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter			5			
the ordinary dividends shown on that form.		The component parts of line 6 are as follows:				
	6	F1040 = 230,219,429 F1040A = 2,119,505  Add the amounts on line 5. Enter the total here and on Form 1040, line 9a .	6	232,338,9	934	
	_	ote. If line 6 is over \$1,500, you must complete Part III.				
Part III	You	must complete this part if you (a) had over \$1,500 of taxable interest or ordinary divide reign account; or (c) received a distribution from, or were a grantor of, or a transferor to,			Yes	No
Foreign Accounts	7a	At any time during 2007, did you have an interest in or a signature or other authority account in a foreign country, such as a bank account, securities account, or other fin	ancia	l account?		
and Trusts (See page B-2.)	b 8	See page B-2 for exceptions and filing requirements for Form TD F 90-22.1  If "Yes," enter the name of the foreign country ▶  During 2007, did you receive a distribution from, or were you the grantor of, or foreign trust? If "Yes," you may have to file Form 3520. See page B-2	transf	feror to, a		
		Joseph and the common of the control of the co				

**SCHEDULE C** (Form 1040)

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Profit or Loss From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

Department of the Treasury Internal Revenue Service (99) Attach to Form 1040, 1040NR, or 1041. See Instructions for Schedule C (Form 1040).

Business name. If no separate business name, leave blank.  D Employer ID nu	n pages C-8, 9, & 10										
E Business address (including suite or room no.) ► City, town or post office, state, and ZIP code  F Accounting method: (1) □ Cash (2) □ Accrual (3) □ Other (specify) ► Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses If you started or acquired this business during 2007, check here  Part I Income  1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here  2 Returns and allowances 3 Subtract line 2 from line 1 4 Cost of goods sold (from line 42 on page 2) 5 Gross profit. Subtract line 4 from line 3 6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3). 7 Gross income. Add lines 5 and 6  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising 9 Car and truck expenses (see page C-4). 9 81,897,517 18 Office expense 19 Pension and profit-sharing plans 20 Rent or lease (see page C-5):											
City, town or post office, state, and ZIP code  F Accounting method: (1) □ Cash (2) □ Accrual (3) □ Other (specify) ▶  G Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses If you started or acquired this business during 2007, check here  Part I Income  1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here  1 1,357 2 Returns and allowances 2 4,34 3 Subtract line 2 from line 1 4 Cost of goods sold (from line 42 on page 2) 5 Gross profit. Subtract line 4 from line 3. 6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3). 7 Gross income. Add lines 5 and 6  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising 9 Car and truck expenses (see page C-4). 9 81,897,517 18 Office expense 19 Pension and profit-sharing plans 19 1,27	mber (EIN), if any										
Did you "materially participate" in the operation of this business during 2007? If "No," see page C-3 for limit on losses If you started or acquired this business during 2007, check here  Part I Income  1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here  2 Returns and allowances 3 Subtract line 2 from line 1 4 Cost of goods sold (from line 42 on page 2) 5 Gross profit. Subtract line 4 from line 3. 6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3). 7 Gross income. Add lines 5 and 6  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising 9 Sal,897,517 9 Rent or lease (see page C-5):  9 Rent or lease (see page C-5):											
H If you started or acquired this business during 2007, check here  Part I Income  1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here  2 Returns and allowances 2 4,34 3 Subtract line 2 from line 1 4 Cost of goods sold (from line 42 on page 2) 5 Gross profit. Subtract line 4 from line 3. 6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3). 7 Gross income. Add lines 5 and 6  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising 9 Car and truck expenses (see page C-4).  9 81,897,517 2 Returns and the "Statutory 1.357 3 1,357 4 4.34 5 20 Rent or lease (see page C-5):  1 1,357 1 1,3											
Part I Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here 1 1,357.  Returns and allowances 2 4,34.  Subtract line 2 from line 1 3 1,352.  Cost of goods sold (from line 42 on page 2) 4 472,4.  Gross profit. Subtract line 4 from line 3 5 880,4.  Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3) 6 20,3.  Gross income. Add lines 5 and 6 7 900,7.  Part II Expenses. Enter expenses for business use of your home only on line 30.  Advertising 8 15,704,781 18 Office expense 18 13,2.  Part II Expenses (see page C-4) 8 18,897,517 20 Rent or lease (see page C-5):	☐ Yes ☐ No										
1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here  2 Returns and allowances  3 Subtract line 2 from line 1  4 Cost of goods sold (from line 42 on page 2)  5 Gross profit. Subtract line 4 from line 3.  6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3).  7 Gross income. Add lines 5 and 6  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising  9 Car and truck expenses (see page C-4).  9 81,897,517  10 10 145 27 544  10 10 10 10 10 10 10 10 10 10 10 10 10 1	▶⊔										
employee" box on that form was checked, see page C-3 and check here  Returns and allowances  Subtract line 2 from line 1  Cost of goods sold (from line 42 on page 2)  Gross profit. Subtract line 4 from line 3.  Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3).  Gross income. Add lines 5 and 6  Part II Expenses. Enter expenses for business use of your home only on line 30.  Advertising  Advertising  Bandard  Bandard  18 Office expense  19 Pension and profit-sharing plans  19 1,27  10 144 527 544  10 10 144 527 544  11 1.357  2 4,34  3 1,352  4 472,4  5 880,4  6 20,3  7 900,7  Part II Pension and profit-sharing plans  19 1,27  20 Rent or lease (see page C-5):											
2 4,34 3 Subtract line 2 from line 1 4 Cost of goods sold (from line 42 on page 2) 5 Gross profit. Subtract line 4 from line 3. 6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3). 7 Gross income. Add lines 5 and 6.  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising 8 15,704,781 18 Office expense 18 13,2 9 Car and truck expenses (see page C-4). 9 81,897,517 20 Rent or lease (see page C-5):	251,769										
3 1,352 4 Cost of goods sold (from line 42 on page 2) 4 472,4 5 Gross profit. Subtract line 4 from line 3. 5 880,4 6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3). 6 20,3 7 Gross income. Add lines 5 and 6 7 900,7  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising 8 15,704,781 18 Office expense . 18 13,2 9 Car and truck expenses (see page C-4)	1,764										
4 Cost of goods sold (from line 42 on page 2)  5 Gross profit. Subtract line 4 from line 3.  6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3).  7 Gross income. Add lines 5 and 6  Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising  9 Car and truck expenses (see page C-4).  9 81,897,517  10 14,527,544  10 10 14,527,544  11 Office expense  12 Pension and profit-sharing plans  13 13,2  14 12,754	910,004										
5 Gross profit. Subtract line 4 from line 3	75,439										
7 Gross income. Add lines 5 and 6	34,565										
Part II Expenses. Enter expenses for business use of your home only on line 30.  8 Advertising 8 15,704,781	43,738										
8       Advertising	78,303										
9 Car and truck expenses (see page C-4)											
page C-4)	99,721										
page 0 -7)	77,544										
40 Commissions and face   10   14 52 / 541     2 Valides made and aminoral   20a   9.48	00.405										
a venices, machinery, and equipment.	92,125										
United trade (See page 0-4)	30,708										
The Depletion	68,980										
Depreciation and section 179   22 Supplies (not included in 1 at iii)	67,360 67,458										
expense deduction (not	,436										
included in Part III) (see page C-4) 13 39,786,407 24 Travel, meals, and entertainment: 24a 13,1	01,850										
a nate of the contract of the	71,000										
14 Employee benefit programs b Deductible meals and (other than on line 19) 14 2.902.172 entertainment (see page C-6) 24b 7.64	7.180										
45 10 380 601	33,370										
10 instrance (ether than nearth) .	73,076										
a Mortgage (paid to banks, etc.)  16a 6,477,263  27 Other expenses (from line 48 on											
21 Other expenses (normalized about 1)	14,868										
17 Legal and professional											
services											
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns .   28 610,3	318,690										
23 Toritative profit (1033). Oubtract fine 20 from fine 7	159,613										
30 Expenses for business use of your home. Attach <b>Form 8829</b>	23,164										
31 Net profit or (loss). Subtract line 30 from line 29.											
• If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR,	736,260										
into 10 (statutory employees), see page 6 7). Estates and tradition entries of 10 th 1041, line 6.											
• If a loss, you <b>must</b> go to line 32. nondeductible loss (+)/suspended loss carryover (-) = 499,8	11										
32 If you have a loss, check the box that describes your investment in this activity (see page C-7).											
	estment is at risk. investment is not										
<ul> <li>If you checked 32b, you must attach Form 6198. Your loss may be limited.</li> </ul>	line 3.										

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Page 2 Part III Cost of Goods Sold (see page C-7) Method(s) used to value closing inventory: a Cost **b** Lower of cost or market c Other (attach explanation) Was there any change in determining quantities, costs, or valuations between opening and closing inventory? 34 ☐ No 44,172,765 35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . 295,536,203 36 32,166,214 37 Cost of labor. Do not include any amounts paid to yourself . . . . . . 37 59,209,862 38 86,874,598 39 39 40 45,484,203 41 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4 42 Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562. 43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ // Of the total number of miles you drove your vehicle during 2007, enter the number of miles you used your vehicle for: Business b Commuting (see instructions) c Other ☐ No 45 No 46

ra bo you have evidence to support your deduction:	🗆 165 🗀 NO
b If "Yes," is the evidence written?	🗌 Yes 🔲 No
Part V Other Expenses. List below business expenses not included on lines 8–26 or lin	ne 30.
2. Table the control of the bound of the C7	
8 Total other expenses. Enter here and on page 1, line 27	

#### **SCHEDULE C-EZ** (Form 1040)

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

### **Net Profit From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B. ► Attach to Form 1040, 1040NR, or 1041. ► See instructions on back. Attachment Sequence No. **09A** 

Department of the Treasury Internal Revenue Service

	Total Forms Filed = 4,401,351 Data is tabulated with the Schedule C's	Social Security Humber (SSN)						
Pai	t I General Information							
School School	<ul> <li>May Use edule C-EZ ead of edule C plid not have an inventory at any time during the year.</li> <li>Did not have a net loss from your business.</li> <li>Had only one business as either a sole proprietor or statutory employee.</li> <li>Had business expenses of \$5,000 or less.</li> <li>Are not roughless.</li> <li>And You:</li> <li>And You:</li> </ul>	equir tion a ness. dule o nd ou educ use use ave p	ed to fi and Am See th C, line It if you t exper of your	le Fori lortizat e instr 13, on must ses fo home ar unal	m 4562 tion, for tuctions page file. or	,		
Α	Principal business or profession, including product or service	В	Enter co	de from	pages C-	-8, 9, 8 	§ 10	
С	Business name. If no separate business name, leave blank.	D	Employ	er ID n	umber (	EIN), i	if any	
E	Business address (including suite or room no.). Address not required if same as on page 1 of your tax is	etur	า.					
	City, town or post office, state, and ZIP code							
Par	t II Figure Your Net Profit							
1	<b>Gross receipts. Caution.</b> If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see <b>Statutory Employees</b> in the instructions for Schedule C, line 1, on page C-3 and check here		1					
2	Total expenses (see instructions). If more than \$5,000, you must use Schedule C		2					
3	Net profit. Subtract line 2 from line 1. If less than zero, you must use Schedule C. Enter to both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13. (Statuto employees do not report this amount on Schedule SE, line 2. Estates and trusts, enter on Fo 1041, line 3.)	ry rm	3					
Par	Information on Your Vehicle. Complete this part only if you are claiming car of	or tr	uck ex	pens	es on	line	2.	
4	When did you place your vehicle in service for business purposes? (month, day, year) ▶	/		/				
5	Of the total number of miles you drove your vehicle during 2007, enter the number of miles	you	used y	our v	ehicle	for:		
а	Business b Commuting (see instructions) c Other	er						
6	Do you (or your spouse) have another vehicle available for personal use?			. 🗆	Yes		No	
7	Was your vehicle available for personal use during off-duty hours?			. 🗆	Yes		No	
8a	Do you have evidence to support your deduction?			. 🗆	Yes		No	

Cat. No. 14374D

**b** If "Yes," is the evidence written?

☐ Yes

#### SCHEDULE D (Form 1040)

Department of the Treasury Internal Revenue Service

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Capital Gains and Losses**

▶ Attach to Form 1040 or Form 1040NR.
 ▶ See Instructions for Schedule D (Form 1040).
 ▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2007

Attachment
Sequence No. 12

Name(s) shown on return

Total Schedules Filed = 22,939,950 Total Sales reported with Form 1099 = 4,726,454,414

Your social security number

Pa	rt I Short-Term Capital Gains	and Losses	-Assets F	leld	One Year	or L	ess			
	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date so (Mo., day,		(d) Sales pri (see page D- the instruction	7 of	(e) Cost or other (see page Dathe instruction	-7 of	(f) Gain or (los Subtract (e) from	
1		(Wo., day, yr.)				110)	the medical	1		
										<u> </u>
2	Enter your short-term totals, if any line 2			2					1,953,182	
3	Total short-term sales price amount			3	3,086,892,	263				
4	column (d)				orms 4684, 6	5781	and 8824	4	4,753,687	
5	Net short-term gain or (loss) from					nd ti	rusts from	5	26,054,938	
6	Schedule(s) K-1	er the amount,	if any, fro	m li	ne 10 of you				/ 00 207 026	
	Carryover Worksheet on page D-7 o	f the instruction	ns	٠				6	( 98,287,936	<u> </u>
7	Net short-term capital gain or (loss)	. Combine line	s 1 through	h 6 i	n column (f)			7	-65,525,733	
Pa	rt II Long-Term Capital Gains a	and Losses—	Assets H	leld	More Than	On	e Year Sno	nt Ten	m Non-Ded. Loss	s = 39
	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date so (Mo., day,		(d) Sales pri (see page D- the instruction	7 of	(e) Cost or other (see page D- the instruction	7 of Subtract (a) from (d)		
8										
										<u> </u>
										i !
_										
9	Enter your long-term totals, if any, line 9			9					349,108,251	
10	Total long-term sales price amount column (d)			10	1,639,562,	151				
11	Gain from Form 4797, Part I; long-terr (loss) from Forms 4684, 6781, and 882							11	228,422,111	
12	Net long-term gain or (loss) from   Schedule(s) K-1	oartnerships, S	corporat	ions	, estates, ai	nd ti	rusts from	12	216,518,974	
13	Capital gain distributions. See page D							13	74,415,564	
14	Long-term capital loss carryover. Enter Carryover Worksheet on page D-7 of	oital Loss	14	(185,854,582	)					
15	Net long-term capital gain or (loss) Part III on the back	hen go to	15	682,638,770						

# Part III Summary

16	Combine lines 7 and 15 and enter the result,	16	617,113,020	
17	<ul> <li>If line 16 is:</li> <li>A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>Zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.</li> <li>Are lines 15 and 16 both gains?</li> <li>☐ Yes. Go to line 18.</li> </ul>			
18	No. Skip lines 18 through 21, and go to line 22.  Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18	5,186,580	
19	Enter the amount, if any, from line 18 of the <b>Unrecaptured Section 1250 Gain Worksheet</b> on page D-9 of the instructions	19	22,560,695	
20	Are lines 18 and 19 both zero or blank?  ☐ Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below.  ☐ No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the <b>smaller</b> of:			
	<ul> <li>The loss on line 16 or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21	(	)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?  ☐ Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR).  ☐ No. Complete the rest of Form 1040 or Form 1040NR.			

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AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

## SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Part I Income or Loss From Rental Real Estate and Royalties. Note If you are in the business of renting personal property, use

OMB No. 1545-0074

2007

Attachment
Sequence No. 13

Department of the Treasury Internal Revenue Service Name(s) shown on return

Total Forms Filed = 17,976,462

Your social security number

	Schedule C or C-EZ (see page	E-3). I						come or loss from					ine 40.
1	List the type and location of each re							ch rental real es				s No	
Α						us	se it o	on line 1, did you during the tax you ses for more that	ear for	perso	onal	A	
В						•	14 c	days <b>or</b> 6 of the total da				В	
С						fair rental value? (See page E-3)						С	
Inc	ome:		A		Prop	erties	5	С		(Ad		otals mns A, B,	and C.)
3	Rents received	3	RENT							3	254.	925,36	5
4	Royalties received	4			ROYAL1	ГҮ				4		503,331	
Fxr	Denses:										,		
5	Advertising	5											
6	Auto and travel (see page E-4)	6											
7	Cleaning and maintenance	7											
8	Commissions	8											
9	Insurance	9											
10	Legal and other professional fees	10											
11	Management fees	11											
12	Mortgage interest paid to banks,												
	etc. (see page E-4)	12								12	80,9	971,923	
13	Other interest	13						7,673,741					
14	Repairs	14	13,414,904		4,033,58	31		2,087,134					
15	Supplies	15											
16	Taxes	16											
17	Utilities	17											
18	Other (list) ▶												
		18											
19	Add lines 5 through 18	19	213,935,877		3,590,58	81				19			
20	Depreciation expense or depletion (see page E-5)	20	58,570,016		2,373.07	73				20			
21	Total expenses. Add lines 19 and 20	21											
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if												
	you must file Form 6198	22	-17.580.527		17,639,6	77							
23	Deductible rental real estate loss. <b>Caution.</b> Your rental real estate loss on line 22 may be limited. See				e rental los			22,845,319					
	page E-5 to find out if you must file <b>Form 8582.</b> Real estate professionals must complete line	23	suspend (56,216,892	ied lo	ss carryov	er	)	5,802,238	)				
04	43 on page 2		1	) - • · · · ·	dudo esse l	0000	)		)	24	83 1	567,321	
24	Income. Add positive amounts show									25		465,091	
25	Losses. Add royalty losses from line 22									20	(50,	.50,001	
26	Total rental real estate and royalty in If Parts II, III, IV, and line 40 on page												
	line 17, or Form 1040NR, line 18. Other									26	17,	102,230	

Schedule E (Form 1040) 2007

Name(s) shown on return. Do not enter name and social security number if shown on other side. Your social security number Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1 Part II Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See page E-1. 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see page E-6 before completing this section. (c) Check if (b) Enter P for (e) Check if (d) Employer 28 (a) Name partnership; **S** for S corporation foreign partnership identification ny amount is not at risk number Α В C D **Passive Income and Loss** Nonpassive Income and Loss (f) Passive loss allowed (g) Passive income (h) Nonpassive loss (i) Section 179 expense (i) Nonpassive income (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 from Schedule K-1 deduction from Form 4562 PARTNERSHIPS **PARTNERSHIPS PARTNERSHIPS PARTNERSHIPS PARTNERSHIPS** Α 24,035,764 89,752,244 4,796,454 212,582,462 В 66.701.800 S-CORPS S-CORPS S-CORPS S-CORPS S-CORPS C 5,096,979 42,394,445 72,847,333 18,976,496 308,531,773 D 109,096,245 521,114,235 29a Totals 29,132,744 162,599,577 23,772,949 **b** Totals 30 630,210,480 Add columns (g) and (j) of line 29a . (215,505,270 31 Add columns (f), (h), and (i) of line 29b. Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below. 32 414,705,210 **Income or Loss From Estates and Trusts** Part III (b) Employer (a) Name 33 identification number В **Passive Income and Loss** Nonpassive Income and Loss (c) Passive deduction or loss allowed (d) Passive income (e) Deduction or loss (f) Other income from (attach Form 8582 if required) from Schedule K-1 Schedule K-1 from Schedule K-1 <u>A</u> В 11,400,533 9,876,465 34a Totals 739.370 2,430,733 **b** Totals 21,276,998 35 35 Add columns (d) and (f) of line 34a . 36 3,170,103 Total estate and trust income or (loss), Combine lines 35 and 36. Enter the result here and include in the total on line 41 below 37 18,106,895 Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) -Residual Holder (c) Excess inclusion from (b) Employer (d) Taxable income (net loss) (e) Income from (a) Name Schedules Q, line 2c 38 Schedules Q. line 3b identification number from Schedules Q, line 1b (see page E-7) 4,013 135,184 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below 39 Part V Summary 3,401,393 40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below . 453,450,913 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18 ▶ 41 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and 72,185,602 42 Schedule K-1 (Form 1041), line 14, code F (see page E-7) . . . Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules

9,736,271

SCHEDULE EIC (Form 1040A or 1040) AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Earned Income Credit

Qualifying Child Information

1040A 1040 or 1040 g child.

OMB No. 1545-0074

2007

Attachment Sequence No. 43

Department of the Treasury Internal Revenue Service Name(s) shown on return Complete and attach to Form 1040A or 1040 only if you have a qualifying child.

Total Schedules Filed = 18,956,901

_	•		re							
_	<u>^</u> +	_	20	- 1 4	$\sim$		h	$\sim$	W I P	•
			/ (=	v				= ( •		I _
	•		_		•	•				

See the instructions for Form 1040A, lines 40a and 40b, or Form 1040, lines 66a and 66b, to make sure that (a) you can take the EIC, and (b) you have a qualifying child.



- 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 back of schedule 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.
- 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.

Q	ualifying Child Information	Child 1	Child 2				
1	Child's name  If you have more than two qualifying children, you only have to list two to get the maximum credit.	First name Last name	First name Last name				
2	Child's SSN  The child must have an SSN as defined on page 41 of the Form 1040A instructions or page 47 of the Form 1040 instructions unless the child was born and died in 2007. If your child was born and died in 2007 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate.						
3	Child's year of birth	Year If born after 1988, skip lines 4a and 4b; go to line 5.	Year If born after 1988, skip lines 4a and 4b; go to line 5.				
	If the child was born before 1989— Was the child under age 24 at the end of 2007 and a student?	Yes. No.  Go to line 5. Continue.	Yes. No.  Go to line 5. Continue.				
b	Was the child permanently and totally disabled during any part of 2007?	Yes. No.  Continue. The child is not qualifying child.					
5	Child's relationship to you (for example, son, daughter, grandchild, niece, nephew, foster child, etc.)						
6	Number of months child lived with you in the United States during 2007  • If the child lived with you for more than half of 2007 but less than 7 months, enter "7."  • If the child was born or died in 2007 and your home was the child's home for the entire time he or she was alive during 2007, enter "12."	months  Do not enter more than 12 months.	months  Do not enter more than 12 months.				



You may also be able to take the additional child tax credit if your child (a) was under age 17 at the end of 2007, and (b) is a U.S. citizen or resident alien. For more details, see the instructions for line 41 of Form 1040A or line 68 of Form 1040.

**SCHEDULE F** (Form 1040)

Department of the Treasury

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Profit or Loss From Farming

▶ Attach to Form 1040, Form 1040NR, Form 1041, Form 1065, or Form 1065-B.

Attachment ► See Instructions for Schedule F (Form 1040).

OMB No. 1545-0074

IIIICITIC	ii i leveride dei vide		P Oce manacin	3113 101	Ochead	1) 1 01	01111 1040).			Sequence NO	. 17
Name	of proprietor		Total Forms Fil	led = 2	2,045,05	6		S	ocial se	curity number (SSN	)
A D.:	and a second sec									1.6 5.00	
A Pri	ncipal product. Describe in one or two	words y	our principal crop or a	activity 1	for the cur	rent tax	c year.	B	Enter	code from Part IV	
								D	Emplo	yer ID number (EIN	), if any
C Ac	counting method:	(1)	Cash	(2)	Acc	rual					
E Die	d you "materially participate" in the	operat	ion of this business	durina	2007? If	"No."	see page F-2 for lin	nit on r	passive	losses.  Yes	□ No
	t I Farm Income—Cash Mo										
Га											
	Do not include sales of li	vesto	ck neid for draft,	breed	ing, spo			Report	tnese	sales on Form 4	+/9/.
1	Sales of livestock and other items	you b	ought for resale.			1	30,312,156				
2	Cost or other basis of livestock as	nd oth	er items reported or	n line 1		2	18,795,187				
3	Subtract line 2 from line 1								3	11,516,969	
4	Sales of livestock, produce, grains								4	**90,892,995	
- 5а	Cooperative distributions (Form(s) 1		1 1 = (	**1,58		ι .	<b>5b</b> Taxable an		5b	**1,465,574	
			,	**5,56					6b	**5,489,759	
	Agricultural program payments (se		C1 0).				<b>6b</b> Taxable an	lourit	OD	0,107,107	
7	Commodity Credit Corporation (C								7-	**1,292,412	
а	CCC loans reported under election	n .			740				7a		
b	CCC loans forfeited			**62			7c Taxable an	nount	7c	**59,570	
8	Crop insurance proceeds and fed	eral cr	op disaster paymen			3):				***	
а	Amount received in 2007		8a	2,329	7,504		<b>8b</b> Taxable an	nount	8b	**2,037,243	
С	If election to defer to 2008 is atta	ched,	check here ▶		8d Am	ount c	deferred from 2006		8d		
9	Custom hire (machine work) incor								9	**4,095,231	
10	Other income, including federal and								10	**8,720,694	
11	Gross income. Add amounts in the										
••	the amount from Part III, line 51	_	· · · · · ·	_					11	123,462,700	
Par	t II Farm Expenses—Cash			<del></del>	<del></del>						
ı aı	Do not include personal			ac ta	voe inc	uranc	o or ropaire on w	our be	omo		
	Do not include personal		ig expenses such	1 43 16	1,63, 1113	urario	e, or repairs on y	oui iii	Jille.		
12	Car and truck expenses (see page		4.740.457		<b>25</b> Pe	nsion	and profit-sharing				
	F-4). Also attach Form 4562	12	1,742,156		pla	ans .			25	14,161	
13	Chemicals	13	4,910,396		<b>26</b> Re	nt or I	ease (see page F-6	i):			
14	Conservation expenses (see				<b>a</b> Ve	hicles.	machinery, and				
	page F-4)	14	166,031			uipme			26a		
15	Custom hire (machine work) .	15	3,812,608				nd, animals, etc.)		26b		
							and maintenance .		27	8,401,166	
16	Depreciation and section 179						nd plants		28	6,454,688	
	expense deduction not claimed	16	22,769,607						29	-,,	
	elsewhere (see page F-5)	10	22,107,001				and warehousing ,			4,188,885	
17	Employee benefit programs other		207.427						30		
	than on line 25	17	397,436		<b>31</b> Ta	xes .			31	2,877,614	
18	Feed	18	16,495,123			lities			32		
19	Fertilizers and lime	19	11,721,215		<b>33</b> Ve	terinary	, breeding, and medic	ine	33		
20	Freight and trucking	20			<b>34</b> Ot	her ex	penses (specify):				
21	Gasoline, fuel, and oil	21	7,139,500						34a		
22	Insurance (other than health)	22	4,416,084		b				34b		
23	Interest:				С				34c		
	Mortgage (paid to banks, etc.)	23a	5,170,235		d				34d		
	Other	23b	4,624,115		e e				34e		
24	Labor hired (less employment credits)	24	5,743,967		f				34f		
	Total expenses. Add lines 12 thr			Total o	-	kęd exi	penses = 29 080 9	93 -	35	140,125,980	
35									33	140,123,700	
36	Net farm profit or (loss). Subtract						uspended Carryove			14 (00 050	
	<ul> <li>If a profit, enter the profit on Form If you file Form 1040NR, enter the</li> </ul>				aule SE,	line 1.	} = 158,4	1//	36	-14,693,259	
	<ul> <li>If a loss, you must go to line 37.</li> </ul>				see page	F-6.	J				
37	If you have a loss, you <b>must</b> check						vity (see page F-7).	)			
	<ul> <li>If you checked 37a, enter the local</li> </ul>								37a	All investment is	at risk.
	If you file Form 1040NR, enter	the los	s on Form 1040NR	, line 1	19.					Some investment is n	
	• If you checked 37b, you must	attach	Form 6198. Your lo	oss ma	y be limit	ed.		J			

Schedule F (Form 1040) 2007

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Part III Farm Income—Accrual Method (see page F-7).

Do not include sales of livestock held for draft, breeding, sport, or dairy purposes. Report these sales on Form 4797 and do not include this livestock on line 46 below.

38	Sales of livestock, produce, grains, and other products			38	**90,892,995	
39a	Cooperative distributions (Form(s) 1099-PATR) . 39a **1,587,321	39b	Taxable amount	39b	**1,465,574	
000	Cooperative distributions (Commo) 1000 171111y		randolo amodin			
40a	Agricultural program payments	40b	Taxable amount	40b	**5,489,759	
41	Commodity Credit Corporation (CCC) loans:					
а	CCC loans reported under election			41a	**1,292,412	
		1		44.5	**59.570	
b	CCC loans forfeited	41c	Taxable amount	41c	37,370	
42	Crop insurance proceeds			42	**2,037,243	
43	Custom hire (machine work) income			43	**4,095,231	
70						
44	Other income, including federal and state gasoline or fuel tax credit or refun	d		44	**8,720,694	
45	Add amounts in the right column for lines 38 through 44			45	2,541,350	
46	Inventory of livestock, produce, grains, and other products at beginning of					
	the year	46				
47	Cost of livestock, produce, grains, and other products purchased during the year	47				
	ule year					
48	Add lines 46 and 47	48				
49	Inventory of livestock, produce, grains, and other products at end of year	49				
-10	This is a second product, grains, and only products at one or year					
50	Cost of livestock, produce, grains, and other products sold. Subtract line 49	from line 48	8*	50		
51	Gross income. Subtract line 50 from line 45. Enter the result here and on P	art I, line 11		51	1,811,544	

<sup>\*</sup>If you use the unit-livestock-price method or the farm-price method of valuing inventory and the amount on line 49 is larger than the amount on line 48, subtract line 48 from line 49. Enter the result on line 50. Add lines 45 and 50. Enter the total on line 51 and on Part I, line 11.

#### Part IV Principal Agricultural Activity Codes



File Schedule C (Form 1040) or Schedule C-EZ (Form 1040) instead of Schedule F if (a) your principal source of income is from providing

agricultural services such as soil preparation, veterinary, farm labor, horticultural, or management for a fee or on a contract basis, or **(b)** you are engaged in the business of breeding, raising, and caring for dogs, cats, or other pet animals.

These codes for the Principal Agricultural Activity classify farms by their primary activity to facilitate the administration of the Internal Revenue Code. These six-digit codes are based on the North American Industry Classification System (NAICS).

Select the code that best identifies your primary farming activity and enter the six digit number on page 1, line B.

#### **Crop Production**

111100 Oilseed and grain farming111210 Vegetable and melon farming

111300 Fruit and tree nut farming

111400 Greenhouse, nursery, and floriculture production

111900 Other crop farming

#### **Animal Production**

112111 Beef cattle ranching and farming

112112 Cattle feedlots

112120 Dairy cattle and milk production

112210 Hog and pig farming

112300 Poultry and egg production

112400 Sheep and goat farming

112510 Aquaculture

112900 Other animal production

#### Forestry and Logging

113000 Forestry and logging (including forest nurseries and timber tracts)

Page 2

#### Schedule R (Form 1040)

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Credit for the Elderly or the Disabled**

► Attach to Form 1040.

You may be able to take this credit and reduce your tax if by the end of 2007:

► See Instructions for Schedule R (Form 1040).

• You were under age 65, you retired on permanent and total disability, and

OMB No. 1545-0074 Attachment Sequence No.

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040

• You were age 65 or older or

Total Schedules Filed = 240,104

you received taxable disability income.

Your social security number

Part I Check the B	Sox for Yo	our Filing Status and Age		
If your filing status is:	Aı	nd by the end of 2007: Check on	ly o	ne box:
Single, Head of household, or Qualifying widow(er)	1 2	You were 65 or older		
	3	Both spouses were 65 or older	3	
	4	Both spouses were under 65, but only one spouse retired on permanent and total disability	4	
Married filing jointly		Both spouses were under 65, and both retired on permanent and total disability	5	
		One spouse was 65 or older, and the other spouse was under 65 and retired on permanent and total disability	6	
	7	One spouse was 65 or older, and the other spouse was under 65 and <b>not</b> retired on permanent and total disability	7	
Married filing		You were 65 or older and you lived apart from your spouse for all of 2007	8	
separately	9	You were under 65, you retired on permanent and total disability, and you lived apart from your spouse for all of 2007	9	
Did you check box 1, 3, 7,	– Yes –	Skip Part II and complete Part III on the back.		
	– No –	Complete Parts II and III.		
Part II Statement o	f Perman	ent and Total Disability (Complete only if you checked box 2, 4, 5, 6,	or 9	above.)
statement for tax y	vears after ued disab	ement for this disability for 1983 or an earlier year, or you filed or go 1983 and your physician signed line B on the statement, and led condition, you were unable to engage in any substantial gainful actives the condition.	vity	
• If you checked the	his box, yo	ou do not have to get another statement for 2007. box, have your physician complete the statement on page R-4. You <b>mu</b>		

Page 2

Schedule R (Form 1040) 2007

Par	Till Figure Your Credit			
10	If you checked (in Part I):     Enter:       Box 1, 2, 4, or 7     \$5,000       Box 3, 5, or 6     \$7,500       Box 8 or 9     \$3,750	10		
	Did you check box 2, 4, 5, 6, or 9 in Part I?  Yes You must complete line 11.  Enter the amount from line 10 on line 12 and go to line 13.			
11		11	74,359	
110	taxable disability income. Enter the total.  For more details on what to include on line 11, see page R-3.			
12	If you completed line 11, enter the <b>smaller</b> of line 10 or line 11; <b>all others,</b> enter the amount from line 10	12	711,654	
13	Enter the following pensions, annuities, or disability income that you (and your spouse if filing a joint return) received in 2007.			
а	Nontaxable part of social security benefits and nontaxable part of railroad retirement benefits treated as social security (see page R-3).			
b	Nontaxable veterans' pensions and any other pension, annuity, or disability benefit that is excluded from income under any other provision of law (see page R-3).			
	Add lines 13a and 13b. (Even though these income items are not taxable, they <b>must</b> be included here to figure your credit.) If you did not receive any of the types of nontaxable income listed on line 13a or 13b, enter -0- on line 13c			
14	Enter the amount from Form 1040, line 38			
15	If you checked (in Part I): Enter:  Box 1 or 2 \$7,500  Box 3, 4, 5, 6, or 7 \$10,000  Box 8 or 9 \$5,000			
16	Subtract line 15 from line 14. If zero or less, enter -0			
17	Enter one-half of line 16			
18 19	Add lines 13c and 17	18	708,002	
20	go to line 20	20	,	
21 22	Enter the amount from Form 1040, line 46			
23	Subtract line 22 from line 21. If zero or less, <b>stop</b> ; you <b>cannot</b> take the credit	23		
24	Credit for the elderly or the disabled. Enter the smaller of line 20 or line 23 here and on Form 1040, line 48	24	12 469	

### **SCHEDULE SE** (Form 1040)

Department of the Treasury Internal Revenue Service

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Self-Employment Tax**

► Attach to Form 1040. ► See Instructions for Schedule SE (Form 1040).

OMB No. 1545-0074 Attachment Sequence No. 17

Name of person with self-employment income (as shown on Form 1040)

Total Scheduled Filed = 17,881,314

Social security number of person with self-employment income ▶

#### Who Must File Schedule SE

You must file Schedule SF if:

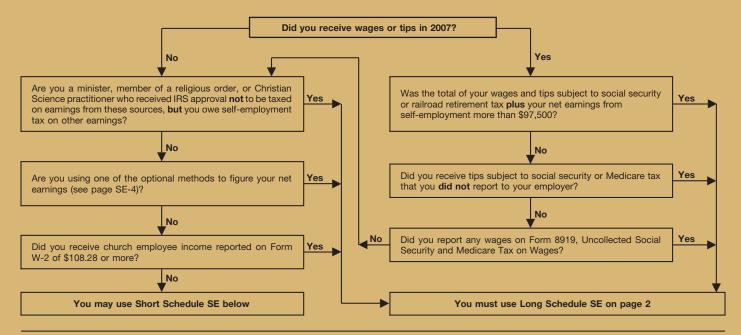
- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is not church employee income (see page SE-1).

Note. Even if you had a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either "optional method" in Part II of Long Schedule SE (see page SE-4).

Exception. If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361 and received IRS approval not to be taxed on those earnings, do not file Schedule SE. Instead, write "Exempt-Form 4361" on Form 1040, line 58.

#### May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE, above.



#### Section A—Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1	10,238,934	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see page SE-1 for amounts to report on this line. See page SE-3 for other income to report	2	498,929,811	
3	Combine lines 1 and 2	3		
4	Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If less than \$400, do not file this schedule; you do not owe self-employment tax	4	470,169,642	
5	Self-employment tax. If the amount on line 4 is:  • \$97,500 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 58.			
	• More than \$97,500, multiply line 4 by 2.9% (.029). Then, add \$12,090 to the result. Enter the total here and on <b>Form 1040, line 58</b>	5	49,511,062	
6	Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 27			

Schedule SE (Form 1040) 2007 Attachment Sequence No. 17 Page 2 Social security number of person

Name of person with self-employment income (as shown on Form 1040)

with self-employment income

Section	B—Lo	ng Sc	hedul	e SE
---------	------	-------	-------	------

Part I Self-Employment Ta
---------------------------

Note. If your only income subject to self-employment tax is church employee income, skip lines 1 through 4b. Enter -0- on line 4c and go to line 5a. Income from services you performed as a minister or a member of a religious order is not church employee

	no. oco pago oz			
Α	If you are a minister, member of a religious order, or Christian Science practitioner <b>and</b> you filed had \$400 or more of <b>other</b> net earnings from self-employment, check here and continue with Pa			
1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. <b>Note.</b> Skip this line if you use the farm optional method (see page SE-4)	1	10.238.934	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see page SE-1 for amounts to report on this line. See page SE-3 for other income to report. <b>Note.</b> Skip this line if you use the nonfarm optional method (see page SE-4)	2	498,929,811	
3	Combine lines 1 and 2	3		
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3	4a	470,169,642	
	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b		
	Combine lines 4a and 4b. If less than \$400, <b>stop</b> ; you do not owe self-employment tax. <b>Exception.</b> If less than \$400 and you had <b>church employee income</b> , enter -0- and continue	4c	470,732,833	
5a	Enter your <b>church employee income</b> from Form W-2. See page SE-1 for definition of church employee income			
b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0	5b		
6	Net earnings from self-employment. Add lines 4c and 5b	6	471,579,614	
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2007	7	97,500	00
	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$97,500 or more, skip lines 8b through 10, and go to line 11	_		
	Wages subject to social security tax (from Form 8919, line 10) 8c 75,110			
	Add lines 8a, 8b, and 8c	8d	115,909,487	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 .	9		
0	Multiply the <b>smaller</b> of line 6 or line 9 by 12.4% (.124)	10	35,834,953	
1	Multiply line 6 by 2.9% (.029)	11	13,675,736	
2	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 58	12	49,511,062	
3	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.5). Enter the result here and on Form 1040, line 27   13			
Par	t II Optional Methods To Figure Net Earnings (see page SE-4)			
	<b>Optional Method.</b> You may use this method <b>only</b> if <b>(a)</b> your gross farm income¹ was not more \$2,400, <b>or (b)</b> your net farm profits² were less than \$1,733.			
4	Maximum income for optional methods	14	1,600	00
5	Enter the <b>smaller</b> of: two-thirds (%) of gross farm income¹ (not less than zero) <b>or</b> \$1,600. Also include this amount on line 4b above	15	34,386	
han rom	farm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less \$1,733 and also less than 72.189% of your gross nonfarm income,⁴ and (b) you had net earnings self-employment of at least \$400 in 2 of the prior 3 years.			
aut	tion. You may use this method no more than five times.			
6	Subtract line 15 from line 14	16		
7	Enter the <b>smaller</b> of: two-thirds (3/3) of gross nonfarm income <sup>4</sup> (not less than zero) <b>or</b> the amount on line 16. Also include this amount on line 4b above	17	13,790	
_	0   5   11   10   14   15   1005   25   0   0   0   0   0   14   15   16   16   16   16   16   16   16	205) !		

<sup>&</sup>lt;sup>1</sup> From Sch. F, line 11, and Sch. K-1 (Form 1065), box 14, code B.

<sup>&</sup>lt;sup>2</sup>From Sch. F, line 36, and Sch. K-1 (Form 1065), box 14, code A.

From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.

 $<sup>^4</sup>$  From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.

2106

# **Employee Business Expenses**

AMOUNTS OF SELECTED IN STATE THE THE HERE (IN 17 HOUSANDS OF DOLLARS)

Occupation in which you incurred expenses

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Your name

► Attach to Form 1040 or Form 1040NR.

Attachment Sequence No. 54

Social security number

Total Forms Filed = 8.966.892 Includes 4.494.485 Form 2106EZ's Part I **Employee Business Expenses and Reimbursements** Column B Column A **Step 1 Enter Your Expenses** Other Than Meals Meals and and Entertainment Entertainment Vehicle expense from line 22 or line 29. (Rural mail carriers: See 31,529,459 Parking fees, tolls, and transportation, including train, bus, etc., that 2 1,648,224 did not involve overnight travel or commuting to and from work . . . Travel expense while away from home overnight, including lodging, 4,806,104 3 airplane, car rental, etc. Do not include meals and entertainment Business expenses not included on lines 1 through 3. Do not 17,459,825 include meals and entertainment. . . . 10,017,308 Meals and entertainment expenses (see instructions) . . . . . Total expenses. In Column A, add lines 1 through 4 and enter the 55,443,612 6 result. In Column B, enter the amount from line 5 Note: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8. Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1 7 Enter reimbursements received from your employer that were not reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see 2,092,529 550,444 instructions) Step 3 Figure Expenses To Deduct on Schedule A (Form 1040 or Form 1040NR) Subtract line 7 from line 6. If zero or less, enter -0-. However, if line 7 is greater than line 6 in Column A, report the excess as 53.414.561 9.517.013 income on Form 1040, line 7 (or on Form 1040NR, line 8) . . . Note: If both columns of line 8 are zero, you cannot deduct employee business expenses. Stop here and attach Form 2106 to your return.

In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 75% (.75)

instead of 50%. For details, see instructions.) . . . . .

Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 9). (Reservists, qualified performing artists, fee-basis state or local government officials, and individuals with

disabilities: See the instructions for special rules on where to enter the total.)

5,511,078

58,925,639

Form 2106 (2007)

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Page 2 Part II **Vehicle Expenses** Section A—General Information (You must complete this section if you (b) Vehicle 2 (a) Vehicle 1 are claiming vehicle expenses.) Enter the date the vehicle was placed in service . . . . Total miles the vehicle was driven during 2007 . . . . . . 12 miles miles 12 miles miles 13 % % 14 Percent of business use. Divide line 13 by line 12 . . . . . . . . . 15 miles miles 16 miles miles 16 17 miles miles Other miles. Add lines 13 and 16 and subtract the total from line 12, . . 17 18 Do you (or your spouse) have another vehicle available for personal use? ■ No Was your vehicle available for personal use during off-duty hours? . . . . 19 Yes No Yes No If "Yes," is the evidence written?. No Section B—Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.) 23,561,948 Multiply line 13 by 48.5¢ (.485) Section C—Actual Expenses (a) Vehicle 1 (b) Vehicle 2 Gasoline, oil, repairs, vehicle insurance, etc. . . . . . 23 24a 24b **b** Inclusion amount (see instructions). 24c c Subtract line 24b from line 24a . Value of employer-provided vehicle (applies only if 100% of annual lease value was included 25 on Form W-2—see instructions) 26 Add lines 23, 24c, and 25. 26 Multiply line 26 by the 27 percentage on line 14 . . . 28 28 Depreciation (see instructions) . Add lines 27 and 28. Enter total here and on line 1. 2,740,379 29 Section D—Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.) (a) Vehicle 1 (b) Vehicle 2 Enter cost or other basis (see 30 instructions) . . . . . . 31 Enter section 179 deduction 31 (see instructions) . . . . . 32 Multiply line 30 by line 14 (see instructions if you claimed the section 179 deduction or 32 special allowance) . . . . Enter depreciation method and 33 percentage (see instructions) . 34 Multiply line 32 by the percentage 34 on line 33 (see instructions) . . 35 35 Add lines 31 and 34 . . . . Enter the applicable limit explained 36 in the line 36 instructions . . . Multiply line 36 by the 37 percentage on line 14 . . . Enter the smaller of line 35 38 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above 38

Form **2106-EZ** 

# AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Unreimbursed Employee Business Expenses**

► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2007

Attachment
Sequence No. 54A

Department of the Treasury Internal Revenue Service Your name

Occupation in which you incurred expenses

Social security number

You	May	Use	This	Form	Only	ı if	All	of	the	Following	<b>Apply</b>
-----	-----	-----	------	------	------	------	-----	----	-----	-----------	--------------

- You are an employee deducting ordinary and necessary expenses attributable to your job. An ordinary expense is one that is common and accepted in your field of trade, business, or profession. A necessary expense is one that is helpful and appropriate for your business. An expense does not have to be required to be considered necessary.
- You do not get reimbursed by your employer for any expenses (amounts your employer included in box 1 of your Form W-2 are not considered reimbursements for this purpose).
- If you are claiming vehicle expense, you are using the standard mileage rate for 2007.

Total Forms Filed = 4,494,485

Caution: You can use the standard mileage rate for 2007 only if: (a) you owned the vehicle and used the standard mileage rate for the first year you placed the vehicle in service, or (b) you leased the vehicle and used the standard mileage rate for the portion of the lease period after 1997.

you p	placed the venicle in service, <b>or (b)</b> you leased the venicle and used the standard mileage rate for the portion	n of the lease period after 1997.
Pai	rt I Figure Your Expenses	
1	Vehicle expense using the standard mileage rate. Complete Part II and multiply line 8a by 48.5¢ (.485)	1
2	Parking fees, tolls, and transportation, including train, bus, etc., that <b>did not</b> involve overnight travel or commuting to and from work	2
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc.  Do not include meals and entertainment	3
4	Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment	4
5	Meals and entertainment expenses: \$ × 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 75% (.75) instead of 50%. For details, see instructions.)	5
6	Total expenses. Add lines 1 through 5. Enter here and on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR, line 9)). (Armed Forces reservists, fee-basis state or local government officials, qualified performing artists, and individuals with disabilities: See the instructions for special rules on where to enter this amount.)	6
Par	rt II Information on Your Vehicle. Complete this part only if you are claiming vehicle.	
7	When did you place your vehicle in service for business use? (month, day, year) ▶	/
8	Of the total number of miles you drove your vehicle during 2007, enter the number of miles you	ou used your vehicle for:
	a Business b Commuting (see instructions) c C	Other
9	Do you (or your spouse) have another vehicle available for personal use?	Yes . No
10	Was your vehicle available for personal use during off-duty hours?	🗆 Yes 🗆 No
11a	Do you have evidence to support your deduction?	Yes . No
b	If "Yes," is the evidence written?	Yes 🗌 No

VOID	CORRECTED	(99)		
Name, address, and ZIP code of RIC or REIT	OMB No. 1545-0145	Notice to Shareholder or Long-Term Capital		
	2007	For calendar year 2007, or othe regulated investment compa real estate investment tr	ny (RIĆ) or the	
Total Forms Filed = 27,174	Form <b>2439</b>	beginning, 2 ending, 2		
Identification number of RIC or REIT	1a Total undistributed lo	ong-term capital gains	Сору А	
Shareholder's identifying number	1b Unrecaptured section 1,582	on 1250 gain	Attach to Form 1120-RIC or Form 1120-REIT	
Shareholder's name, address, and ZIP code	1c Section 1202 gain	1d Collectibles (28%) gain		
	0	748	For Instructions	
	2 Tax paid by the RIC	or REIT on the box 1a gains	and Paperwork Reduction Act Notice, see back o Copies A and D.	
Form <b>2439</b>	Cat. No. 11858E	Department of the Treasury	- Internal Revenue Service	

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)
AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

2441

# **Child and Dependent Care Expenses**

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) ► Attach to Form 1040 or Form 1040NR.

Your social security number

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► See separate instructions.

Total Forms Filed = 7,296,478

2007	
Attachment	04
Sequence No.	21

OMB No. 1545-0074

Bef	<b>ore you begin:</b> Figure line 46		oreign tax credit you	are claiming	on Form	1040,	line 51, or Form 104	40NR,
Pa			rovided the Care—\ oviders, see the inst		mplete th	nis par	t.	
1	(a) Care provider's name		(b) Address apt. no., city, state, and ZIP		(c) Identifyi		er (d) Amount paid	
							30,327,637	
		id you receive	No	→ Con	nplete only	Part II	below.	
	tion. If the care was prov	dent care benefits?	Yes — Yes — u may owe employmen				the back next. Form 1040, line 62, o	r Form
	ONR, line 57.  rt II Credit for Child	<u> </u>	<u>.</u>					
2	Information about your	qualifying person(s)	. If you have more that	n two qualifyi	ng persons	s, see t		
	(a) ( First	Qualifying person's name	Last		g person's soo ty number	cial	(c) Qualified expenses incurred and paid in 2007 for person listed in column	for the
							21,130,209	
							6,666,774	
3	Add the amounts in col	lumn (c) of line 2. Do r	not enter more than \$3	,000 for one o	qualifying			
	person or \$6,000 for tw line 35	o or more persons. If	you completed Part III,	enter the amo	ount from	3	18,054,803	
4	Enter your earned inco	ome. See instructions				4	385,805,518	
5	If married filing jointly,				a student	_	105 026 462	
	or was disabled, see the		hers, enter the amoun	t from line 4		5 6	185,836,463 17,765,253	
6	Enter the smallest of li					0	17,703,233	
7	Enter the amount from 1040NR, line 36							
8	Enter on line 8 the dec	imal amount shown b	elow that applies to th	e amount on	line 7			
	But not Over over	Decimal amount is	But over		mal unt is			
	\$0—15,000		I					
	15,000—17,000	.35 .34	\$29,000—31,00 31,000—33,00		?7 ?6			
	17,000—19,000	.33	33,000—35,00		25	8	×	
	19,000—21,000	.32	35,000—37,00		24			
	21,000—23,000	.31	37,000—39,00		23			
	23,000—25,000	.30	39,000—41,00		22			
	25,000—27,000 27.000—29.000	.29 .28	41,000—43,00 43,000—No lir		21 20			
9	Multiply line 6 by the c	decimal amount on lin		expenses in 2		9	4,002,134	
10	Enter the amount from 1040NR, line 43	om Form 1040, line	e 46, or					
11	Enter the amount fro							

here and on Form 1040, line 47, or Form 1040NR, line 44

Subtract line 11 from line 10. If zero or less, stop. You cannot take the credit . . . . Credit for child and dependent care expenses. Enter the smaller of line 9 or line 12 12

3,483,152

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Form 2441 (2007)

Page 2 Part III Dependent Care Benefits Enter the total amount of dependent care benefits you received in 2007. Amounts you received as an employee should be shown in box 10 of your Form(s) W-2. Do not include amounts reported as wages in box 1 of Form(s) W-2. If you were self-employed or a partner, include amounts you received under a dependent care assistance program from your sole 3,833,890 Enter the amount, if any, you carried over from 2006 and used in 2007 during the grace 7.956 15 68,130 16 16 Enter the amount, if any, you forfeited or carried forward to 2008. See instructions 17 Combine lines 14 through 16. See instructions Enter the total amount of qualified expenses incurred 8,251,456 18 in 2007 for the care of the qualifying person(s) 19 19 Enter the **smaller** of line 17 or 18 . . . . . . 385,805,518 Enter your earned income. See instructions . . . 20 20 Enter the amount shown below that applies to you. • If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions for line 5). 185.836.463 21 • If married filing separately, see the instructions for the amount to enter. • All others, enter the amount from line 20. 22 Enter the smallest of line 19, 20, or 21 . . . . . Enter the amount from line 14 that you received from your sole proprietorship or partnership. 14,400 23 If you did not receive any such amounts, enter -0-24 Enter \$5,000 (\$2,500 if married filing separately and you were required to enter your 25 Deductible benefits. Enter the smallest of line 22, 23, or 25. Also, include this amount 26 8.112 26 on the appropriate line(s) of your return. See instructions Enter the **smaller** of line 22 or 25 . . . . . . 27 Enter the amount from line 26 2,850,057 Excluded benefits. Subtract line 28 from line 27. If zero or less, enter -0-Taxable benefits. Subtract line 29 from line 24. If zero or less, enter -0-. Also, include this amount on Form 1040, line 7, or Form 1040NR, line 8. On the dotted line next to Form 1040, line 7, or Form 1040NR, line 8, enter "DCB". 909,941 To claim the child and dependent care credit, complete lines 31-35 below. 31 2,858,169 32 32 Subtract line 32 from line 31. If zero or less, stop. You cannot take the credit. 33 **Exception.** If you paid 2006 expenses in 2007, see the instructions for line 9 . . . . Complete line 2 on the front of this form. Do not include in column (c) any benefits shown 34 on line 32 above. Then, add the amounts in column (c) and enter the total here. . . . Enter the smaller of line 33 or 34. Also, enter this amount on line 3 on the front of this 18,054,803 form and complete lines 4-13

Form 3468
(Rev. December 2006)
Department of the Treasury
Internal Revenue Service (99)

#### **Investment Credit**

#### AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

► Attach to your tax return. See instructions.

OMB No. 1545-0155

Attachment Sequence No. **52** 

Name(s) shown on return Identifying number Total Forms Filed = 30,469 1 Rehabilitation credit (see instructions for requirements that must be met): a Check this box if you are electing under section 47(d)(5) to take your qualified rehabilitation expenditures into account for the tax year in which paid (or, for self-rehabilitated property, when capitalized). See instructions. Note: This election applies to the current tax year and to all later tax years. You may not revoke this election without IRS consent . . . . . . . . . . **b** Enter the date on which the 24- or 60-month measuring period begins \_\_\_\_/ and ends \_\_\_\_/ \_\_\_ c Enter the adjusted basis of the building as of the beginning date above **d** Enter the amount of the qualified rehabilitation expenditures incurred. or treated as incurred, during the period on line 1b above . . . . \$\_\_\_\_\_\_ Enter the amount of qualified rehabilitation expenditures and multiply by the percentage shown: e Pre-1936 buildings located in the Gulf Opportunity Zone . \$\_\_\_\_\_ \* 13% (.13) 1e 1f 13.498 g Certified historic structures located in the Gulf Opportunity Zone .\$ \_\_\_\_\_ × 26% (.26) \* 1g 185.058 1h For properties identified on lines 1g or 1h, complete lines 1i and 1j i Enter the assigned NPS project number or the pass-through entity's employer identification number (see instructions) . . . . . . . . . j Enter the date that the NPS approved the Request for Certification of 3.096 1k k Rehabilitation credit from an electing large partnership (Schedule K-1 (Form 1065-B), box 9) 2 Energy credit: a Basis of property using geothermal energy placed in service during 1.458 2a the tax year (see instructions) \$ \_\_\_\_\_ × 10% (.10) **b** Basis of property using solar illumination or solar energy placed in service 2b 36,161 during the tax year (see instructions) \$ \_\_\_\_\_ × 30% (.30) Qualified fuel cell property (see instructions): c Basis of property installed during the tax year \$ ..... × 30% (.30) d Kilowatt capacity of property in c above . . . ▶ .....×\$1,000 Qualified microturbine property (see instructions): f Basis of property installed during the tax year \$ ..... × 10% (.10) g Kilowatt capacity of property in f 2g above . . . ▶ .....×\$200 2h 37,649 2i i Total. Add lines 2a, 2b, 2e, and 2h . . . . . . . . . 3 Qualifying advanced coal project credit (see instructions): a Basis of qualified investment in integrated gasification combined cycle property 3a placed in service during the tax year \$ \_\_\_\_\_ × 20% (.20) **b** Basis of qualified investment in property other than in **a** above placed 3b in service during the tax year ▶ \$\_\_\_\_\_ × 15% (.15) 28.127 3c c Total. Add lines 3a and 3b Qualifying gasification project credit (see instructions). Basis of qualified investment in property 4 584 159 Credit from cooperatives. Enter the unused investment credit from cooperatives . . . 5 Add lines 1e through 1h, 1k, 2i, 3c, 4, and 5. Report this amount on the applicable line of Form 3800 (e.g., line 1a of the 2006 Form 3800) . . . Nondeductible investment credit = 324 269,413

#### **General Business Credit**

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) ► See separate instructions.

► Attach to your tax return.

Attachment Sequence No. **22** 

OMB No. 1545-0895

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Total Forms Filed = 437,644

Identifying number

Part I

#### **Current Year Credit**

Important: You may not be required to complete and file a separate credit form (shown in parentheses below) to claim the credit. For details, see the instructions.

12	Investment credit (attach Form 3468)	1a	269,415	
	Welfare-to-work credit (Form 8861)	1b	19,965	
	Credit for increasing research activities (Form 6765)	1c	466,368	
	Low-income housing credit (Form 8586) (enter EIN if claiming this credit from a pass-through			
	entity:)	1d	138,669	
e	Disabled access credit (Form 8826) (do not enter more than \$5,000)	1e	25,751	
f	Renewable electricity production credit (Form 8835, Section A only)	1f	27,019	
q	Indian employment credit (Form 8845)	1g	41,222	
h	Orphan drug credit (Form 8820)	1h	1,985	
i.	New markets credit (Form 8874) (enter EIN if claiming this credit from a pass-through entity:			
		1i	5,347	
i i	Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	1j	1,876	
k	Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming			
	this credit from a pass-through entity:)	1k	4,732	
- 1	Qualified railroad track maintenance credit (Form 8900)	11	26,615	
m	Biodiesel and renewable diesel fuels credit (attach Form 8864)	1m	9,252	
n	Low sulfur diesel fuel production credit (Form 8896)	1n	46,059	
0	Distilled spirits credit (Form 8906)	10	17,894	
р	Nonconventional source fuel credit (Form 8907)	1p	40,191	
q	Energy efficient home credit (Form 8908)	1q	22,458	
r	Energy efficient appliance credit (Form 8909)	1r	538	
s	Alternative motor vehicle credit (Form 8910)	1s	36,937	
t	Alternative fuel vehicle refueling property credit (Form 8911)	1t	1,493	
u	Hurricane Katrina housing credit (only from S corporations, partnerships, estates, and			
	cooperatives)	1u	1,820	
V	Mine rescue team training credit (Form 8923)	1v	2,971	
w	Credit for contributions to selected community development corporations (Form 8847)	1w	18	
X	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1x	9,518	
			4 000 777	
2	Add lines 1a through 1x	2	1,238,777	
		3	239,702	
3	Passive activity credits included on line 2 (see instructions)	3	239,702	
		4	999,071	
4	Subtract line 3 from line 2	4	999,071	
_	D 1 11 11 11 11 16 2027 ( 1 1 1 1 1 )	5	266,411	
5	Passive activity credits allowed for 2007 (see instructions)	3	200,411	
	0 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	6	3,891,318	
6	Carryforward of general business credit to 2007. See instructions for the schedule to attach	0	0,001,010	
_		7		
7	Carryback of general business credit from 2008 (see instructions)			
8	Current year credit. Add lines 4 through 7	8	5,156,800	
	Parameter Parketion Act Nation and parameter instructions	U	5,150,000	(0007)

# Part II Allowable Credit

9	Regular tax before credits:						
	• Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line 41 .				9		
	• Corporations. Enter the amount from Form 1120, Schedule J, line 2; applicable line of your return		,	•			
	• Estates and trusts. Enter the sum of the amounts from Form 1041, S lines 1a and 1b, or the amount from the applicable line of your return						
10	Alternative minimum tax:		,				
	• Individuals. Enter the amount from Form 6251, line 35				10	2,620,409	
	<ul> <li>Corporations. Enter the amount from Form 4626, line 14</li> <li>Estates and trusts. Enter the amount from Form 1041, Schedule I, line</li> </ul>			•		, ,	
	2 Estates and dideter Enter the unionic norm 10111, 1011, contoade 1, in		. ,				
11	Add lines 9 and 10				11		
40-	Out 11th from Form 4040 lines 47 through 50 and lines 50 through 54						
12a	Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)	12a					
b	Foreign tax credit	12b					
С	Credits from Forms 5735 and 8834	12c					
d	Non-business alternative motor vehicle credit (Form 8910,	12d					
_	line 18)	120					
	(Form 8911, line 19)	12e					
f	Add lines 12a through 12e				12f		
40	Not income toy. On his year line 106 from line 11. If your claim lines 14 they	ماسييم	17 and antau 0				
13	<b>Net income tax.</b> Subtract line 12f from line 11. If zero, skip lines 14 thr line 18	ougn		- 011	13	74,391,607	
		1	74 770 544				
14	Net regular tax. Subtract line 12f from line 9. If zero or less, enter -0-	14	71,772,514				
15	Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions)	15	16,212,269				
16	Tentative minimum tax:						
	• Individuals. Enter the amount from Form 6251, line 33		00 400 000				
	• Corporations. Enter the amount from Form 4626, line 12	16	69,129,338				
	• Estates and trusts. Enter the amount from Form 1041, Schedule I, line 54						
17	Enter the greater of line 15 or line 16				17		
18	18 Subtract line 17 from line 13. If zero or less, enter -0				18		
19	19 Credit allowed for the current year. Enter the smaller of line 8 or line 18. Individuals, estates,						
	and trusts: See the instructions for line 19 if claiming the research credit. C corporations: See the line 19 instructions if there has been an ownership change, acquisition, or reorganization.						
	Report the amount from line 19 (if smaller than line 8, see instructions) as indicated below or on the applicable line of your return:						
	<ul> <li>Individuals. Form 1040, line 55 or Form 1040NR, line 50</li> <li>Corporations. Form 1120, Schedule J, line 5c</li> <li></li></ul>					045 500	
	<ul> <li>Corporations. Form 1120, Schedule J, line 5c</li> <li>Estates and trusts. Form 1041, Schedule G, line 2c</li> <li></li></ul>				19	845,539	
	2513155 3113 133151 1311 1311, 301103315 3, 1110 25		,				

Department of the Treasury Internal Revenue Service Name(s) shown on return

# **Moving Expenses**

► Attach to Form 1040 or Form 1040NR. AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) OMB No. 1545-0074

Your social security number

3,094,573

289,047

3

4

5

Total Forms Filed = 1.118.610 See the Distance Test and Time Test in the instructions to find out if you can deduct your moving Before you begin: expenses. See Members of the Armed Forces on the back, if applicable. 2,341,394 1 Transportation and storage of household goods and personal effects (see instructions) . Travel (including lodging) from your old home to your new home (see instructions). **Do not** include 753,179 2 the cost of meals

Enter the total amount your employer paid you for the expenses listed on lines 1 and 2 that is not included in box 1 of your Form W-2 (wages). This amount should be shown in box 12 of your Form W-2 with code P

5	ls	line	3	more	than	line	4?

Add lines 1 and 2

☐ No.	You cannot deduct your moving expenses. If line 3 is less than line 4, subtract line 3
	from line 4 and include the result on Form 1040, line 7, or Form 1040NR, line 8.

Yes. Subtract line 4 from line 3. Enter the result here and on Form 1040, line 26, or Form 1040NR, line 26. This is your moving expense deduction

Members of the Armed Forces may not have to meet the distance test and time test. See instructions on the back.

2,819,118

# **General Instructions** What's New

For 2007, the standard mileage rate for using your vehicle to move to a new home is 20 cents a mile.

#### **Purpose of Form**

Use Form 3903 to figure your moving expense deduction for a move related to the start of work at a new principal place of work (workplace). If the new workplace is outside the United States or its possessions, you must be a U.S. citizen or resident alien to deduct your expenses.

If you qualify to deduct expenses for more than one move, use a separate Form 3903 for each move.

For more details, see Pub. 521, Moving Expenses.

#### Moving Expenses You Can **Deduct**

You can deduct the reasonable expenses of moving your household goods and personal effects and of traveling from your old home to your new home. Reasonable expenses can include the cost of lodging (but not meals) while traveling to your new home. You cannot deduct the cost of sightseeing trips.

#### Who Can Deduct Moving **Expenses**

If you move to a new home because of a new principal workplace, you may be able to deduct your moving expenses whether you are self-employed or an employee. But you must meet both the distance test and time test that follow.

#### **Distance Test**

Your new principal workplace must be at least 50 miles farther from your old home than your old workplace was. For example, if your old workplace was 3 miles from your old home, your new workplace must be at least 53 miles from that home. If you did not have an old workplace, your new workplace must be at least 50 miles from your old home. The distance between the two points is the shortest of the more commonly traveled routes between them.



To see if you meet the distance test, you can use the worksheet below.

### Distance Test Workshoot

Keen a Conv for Your Reco

<u>///</u>

Distance rest worksheet	resp a copy for real flooride
1. Number of miles from your old home to your new workplace	<b>1.</b> miles
2. Number of miles from your old home to your old workplace	<b>2.</b> miles
3. Subtract line 2 from line 1. If zero or less, enter -0	<b>3.</b> miles
Is line 3 at least 50 miles?  Yes. You meet this test.  No. You do not meet this test. You cannot deduct your moving expenses. Do not	ot complete Form 3903.

### **Credit for Federal Tax Paid on Fuels**

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) ► See the separate instructions.

► Attach this form to your income tax return.

OMB No. 1545-0162 Attachment Sequence No. 23

Department of the Treasury Internal Revenue Service

Name (as shown on your income tax return) Data on this form reflects only form 1040 filers, not business or fiduciary filers

Taxpayer identification number Total Forms Filed = 305,765

Caution. Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 and 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 and 14), claimant certifies that a certificate has not been provided to the credit card issuer.

### **Nontaxable Use of Gasoline**

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cree	dit (e) CRN
а	Off-highway business use		\$ .183	)	\$	
b	Use on a farm for farming purposes		.183	}		362
С	Other nontaxable use (see Caution above line 1)		.183	J	46,671	
d	Exported		.184		1,145	411

#### **Nontaxable Use of Aviation Gasoline**

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ .15/.000*		\$	354
	Caution. This credit is not available for aviation gasoline taxed at \$.044 (purchased after February 29, 2008).				151	
b	Other nontaxable use (see Caution above line 1)		.193/.043*		826	324
С	Exported		.194/.044*		36	412
	*This rate applies after February 29, 2008.					

### **Nontaxable Use of Undyed Diesel Fuel**

Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here

		(a) Type of use	(b) Rate	(c) Gallons	(a) Amount of ci	realt	(e) CRN
а	Nontaxable use		\$ .243	l	\$ 29,711		360
b	Use on a farm for farming purposes		.243	S			300
С	Use in trains		.243		9		353
d	Use in certain intercity and local buses (see Caution						
	above line 1)		.17		290		350
е	Exported		.244		17		413

#### Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Claimant certifies that the kerosene did not contain visible evidence of dye.

	<b>Exception.</b> If any of the kerosene included in this claim did	contain visible	evidence of dy	/e, attach an exp	explanation and check here			
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cred	it (e) CRN		
а	Nontaxable use taxed at \$.244		\$ .243	<b></b> }	\$ 6,906	346		
b	Use on a farm for farming purposes		.243	$\int$		340		
С	Use in certain intercity and local buses (see <b>Caution</b> above line 1)		.17		*	347		
d	Exported		.244		0	414		
е	Nontaxable use taxed at \$.044		.043		14	377		
f	Nontaxable use taxed at \$.219		.218		70	369		

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 12625R

Form **4136** (2007)

Page 2

Form 4136 (2007)

### 5 Kerosene Used in Aviation (see Caution above line 1)

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		\$ .200		\$ 149	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219/.044*  Caution. This credit is not available for kerosene taxed at \$.044 (purchased after February 29, 2008).		.175/.000*		248	355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		6,906	346
d	Nontaxable use (other than use by state or local government) taxed at \$.219/.044*		.218/.043*		70	369
	*This rate applies after February 29, 2008.					

### 6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. ▶

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here . . .

	(b) Rate	(c) Gallons	(d) Amount of c	redit	(e) CRN
a Use by a state or local government	\$ .243		\$ 29,711		360
b Use in certain intercity and local buses	.17		290		350

# 7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

Registration No. ▶

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye. **Exception.** If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here.

		(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Use by a state or local government	\$ .243		6,906		346
b	Sales from a blocked pump	.243	<u></u>	\$		340
С	Use in certain intercity and local buses	.17		*		347

### 8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation

**Registration No.** ▶

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$.219/.044*		\$.175/.000*		\$		355
	<b>Caution.</b> This credit is not available for kerosene taxed at \$.044 (purchased after February 29, 2008).				248		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		149		417
С	Nonexempt use in noncommercial aviation		.025/.200*		*		418
d	Other nontaxable uses taxed at \$.244		.243		6,906		346
е	Other nontaxable uses taxed at \$.219/.044*		.218/.043*		70		369
	*This rate applies after February 29, 2008						

Page 3

### **Alcohol Fuel Mixture Credit**

### Registration No. ▶

Claimant produced an alcohol fuel mixture by mixing taxable fuel with alcohol. The alcohol fuel mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant.

		(b) Rate	(c) Gallons of alcohol	(d) Amount of c	redit	(e) CRN
а	Alcohol fuel mixtures containing ethanol	\$ .51		\$ *		393
b	Alcohol fuel mixtures containing alcohol (other than ethanol)	.60		0		394

#### **Biodiesel or Renewable Diesel Mixture Credit**

#### Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. Renewable diesel mixtures. Claimant produced a mixture by mixing renewable diesel with diesel fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass (as defined in section 45K(c)(3)) using a thermal department of the produced may be additives and met ASTM D975 or D396. The mixture was depolymerization process, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975 or D396. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller, both of which have been edited as discussed in the Instructions for Form 4136. See the instructions for line 10 for details

		(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of cr	edit	(e) CRN
а	Biodiesel (other than agri-biodiesel) mixtures	\$ .50		\$ *		388
b	Agri-biodiesel mixtures	1.00		495		390
С	Renewable diesel mixtures	1.00		0		307

### **Nontaxable Use of Alternative Fuel**

Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See page 5 in the Instructions for Form 4136 for the credit rate.

		(a) Type of use	(b) Rate	(c) Gallons or gasoline gallon equivalents (GGE)	(d) Amount of c	redit	(e) CRN
а	Liquefied petroleum gas (LPG)		\$.183		\$ 133		419
b	"P Series" fuels		.183		0		420
С	Compressed natural gas (CNG) (GGE = 126.67 cu. ft.)		.183		*		421
d	Liquefied hydrogen		.183		0		422
е	Any liquid fuel derived from coal (including peat) through the Fischer-Tropsch process		.243		0		423
f	Liquid fuel derived from biomass		.243		25		424
g	Liquefied natural gas (LNG)		.243		*		425

# 12 Alternative Fuel Credit and Alternative Fuel Mixture Credit

### Registration No. ▶

		(b) Rate	(c) Gallons or gasoline gallon equivalents (GGE)	(d) Amount of cr	edit	(e) CRN
а	Liquefied petroleum gas (LPG)	\$ .50		\$ 1,848		426
b	"P Series" fuels	.50		23		427
С	Compressed natural gas (CNG) (GGE = 121 cu. ft.)	.50		104		428
d	Liquefied hydrogen	.50		0		429
е	Any liquid fuel derived from coal (including peat) through the					
	Fischer-Tropsch process	.50		0		430
f	Liquid fuel derived from biomass	.50		0		431
<u>g</u>	Liquefied natural gas (LNG)	.50		*		432

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Form 4136 (2007)

Page 4

### 13 Registered Credit Card Issuers

### **Registration No.** ▶

		(b) Rate	(c) Gallons	(d) Amount of c	redit	(e) CRN
а	Diesel fuel sold for the exclusive use of a state or local government	\$ .243		\$ 29,711		360
b	Kerosene sold for the exclusive use of a state or local government	.243		6,906		346
С	Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219/.044*	.218/.043*		70		369
	*This rate applies after February 29, 2008					

### 14 Nontaxable Use of a Diesel-Water Fuel Emulsion

	Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See page 6 in the Instructions for Form 4136 for the credit rate.									
(a) Type of use (b) Rate (c) Gallons (d) Amount of credit (										
а	Nontaxable use		\$ .197		\$ *		309			
b	Exported		.198		0		306			

### 15 Diesel-Water Fuel Emulsion Blending

### **Registration No.** ▶

	(b) Rate	(c) Gallons	(d) A	mount of c	redit	(e) CRN
Blender credit	\$ .046		\$	0		310

### 16 Exported Dyed Fuels

	(b) Rate	(c) Gallons	(d) Amount of c	redit	(e) CRN
a Exported dyed diesel fuel	\$ .001		\$ *		415
<b>b</b> Exported dyed kerosene	.001		0		416

### 17 Leaking Underground Storage Tank (LUST) Tax

		(b) Rate	(c) Gallons	(d	) Amount of c	(e) CRN	
a LUST ta	ax on aviation fuels used in foreign trade	\$ .001		\$	0		433
<b>b</b> LUST ta	ax on fuels used in trains or inland waterways	.001			0		434
Form 1	ncome tax credit claimed. Add lines 1 through 17, column (040, line 70 (also check box b on line 70); Form 1120, line 32 orm 1041, line 24g; or the proper line of other returns.		\$	88,950			

\* Entry for this line is greater than zero, but too small to report

Form **4136** (2007)

**Depreciation and Amortization** 

(Including Information on Listed Property)

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) ► See separate instructions.

Attachment

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service ► Attach to your tax return Sequence No. 67 Name(s) shown on return Business or activity to which this form relates Identifying number Total Forms Filed = 12,231,434 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. **EPZONE** \$125.000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 1 42,147,745 2 2 Total cost of section 179 property placed in service (see instructions) . 3 \$500,000 3 Threshold cost of section 179 property before reduction in limitation . 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 626,899,545 separately, see instructions (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 . . . . . . . . . . 7 47,995,320 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7. 8 47,910,456 9 9 10 1,660,800 Carryover of disallowed deduction from line 13 of your 2006 Form 4562 . . . . . 10 384,819,862 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 47,496,390 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 ▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see 566,103 14 13,306 15 Other depreciation (including ACRS) 3.802.344 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) **Section A** 41,807,401 MACRS deductions for assets placed in service in tax years beginning before 2007 . . . . If you are electing to group any assets placed in service during the tax year into one or more 18 general asset accounts, check here Section B—Assets Placed in Service During 2007 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction (business/investment use vear placed in only—see instructions) service 696,066 19a 3-year property 2,601,628 19,348,452 3.183.166 b 5-year property 2,268,421 7-year property 20,570,519 10-year property 3,241,551 222,609 265,408 15-year property 6,281,147 20-year property 2,344,753 83,295 444,352 13,304 25 yrs. g 25-year property 27.5 yrs. 189,674,464 4,135,867 MM h Residential rental 1,765 property undetermined type 27.5 yrs. ММ S/L 1.765 undetermined type 65,175,066 1,001,910 ММ S/L 39 yrs. Nonresidential real Total GDS cost 309,683,696 ММ S/L 11,871,811 Total GDS cost Section C—Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System 20a Class life 684,489 S/L 33,794 942 **b** 12-year 27,026 12 yrs. S/L c 40-year 974,997 15,484 40 yrs. ММ S/L Summary (see instructions) Total ADS Cost = 1,686,513 Total ADS Deduction = 50,220 Part IV 6,213,328 Listed property. Enter amount from line 28 . . . . . . Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.

For assets shown above and placed in service during the current year,

enter the portion of the basis attributable to section 263A costs

Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr.

7.273

111,820,903

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Page 2

Part V

**Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Sec	tion A—Depre	ciation and O	ther Inforr	nation	(Cautio	n: See	the ins	structio	ns for lir	nits for	passer	nger au	tomobil	es.)	
	Do you have evid										•		written?		s 🗌 No
Тур	(a) pe of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage		(d) or other pasis			oreciation vestment nly)		y Me	(g) thod/ vention	Depr	(h) reciation duction	Ele secti	(i) ected on 179 ost
25		nce for qualified used more than													
26		more than 50					000)				.   20				
			%												
			%												
			%												
27	Property used	50% or less i			iess use	<del>)</del> :				T 6 //					
			% %			to	tal 26e	+ 27e		S/L -					
			%				51,171			5/L -					
28	Add amounts	in column (h).			7. Ente	r here			1. page		28	6,2	13,328		
29	Add amounts												. 29	1,83	32,716
Con If you	nplete this secti u provided vehicles	on for vehicles to your employee	s used by a	a sole p	roprieto	r, part	ner, or	other"	Vehicles more that eet an exc	an 5%	owner,' o comple	or rela	ated per section fo	rson. or those	vehicles.
30	during the year (	investment mile	ommuting	(a Vehic	-		b) icle 2	1	(c) icle 3	Vehic	•		e) icle 5	(f Vehic	
31		miles driven durin													
32	Total other pe	ersonal (noncor	nmuting)												
33	Total miles driv	ren during the yhhe 32													
34		e available for duty hours? .		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	more than 5% of	ele used primar owner or related	person?												
36	use?	cle available for													
	wer these quest more than 5%		nine if you	meet a	n excep	tion to								yees w	ho <b>are</b>
							noroon	al una	of vobial	oo inol	udina	ommu	ting	Yes	No
37		ain a written po byees?	-					ai use i	or venici	es, inci	uaing c	commu	ung,		
38	Do you maintain	a written policy ions for vehicles	statement th	nat prohi	bits pers	onal us	e of veh								
39		all use of vehic													
40	Do you provid	le more than fi vehicles, and	ve vehicles	s to you	ır emplo	yees,	obtain	informa	ation fro	m your	emplo	yees al	bout		
41	Do you meet th		concerning of	qualified	automob	oile den	nonstrat	ion use'	? (See ins	struction	ıs.) .				
Pa		tization			<u>,                                      </u>		<u> </u>								
	(a) Description	of costs	Date am	b) ortization gins		Amor	<b>c)</b> tizable ount		(c Co sect	de	Amort	ization od or entage		(f) rtization f his year	or
42	Amortization of	f costs that beg	gins during	your 200	07 tax y	ear (se	e instru	ctions):			<sub>1</sub> µ 3. 30	3-			
							3,979							105	
43 44		of costs that be nounts in colur	_									43		432,356	
44	iotal. Add all	iourits in colur	IIII (I). SEE	THE ITISI	i uctions	3 101 V	mere (	report				44	1,	884,843	

# AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Casualties and Thefts**

► See separate instructions.

► Attach to your tax return.

▶ Use a separate Form 4684 for each casualty or theft.

OMB No. 1545-0177

2007

Attachment

151

Name(s) shown on tax return

Form 4684

Department of the Treasury Internal Revenue Service

Total Forms Filed = 268.350

Identifying number

SECTION A—Personal Use Property (Use this section to report casualties and thefts of property not used in a trade or business or for income-producing purposes.) Description of properties (show type, location, and date acquired for each property). Use a separate line for each property lost or damaged from the same casualty or theft. Property A Property B Property C **Properties** A В C 2 Cost or other basis of each property. . . . . Insurance or other reimbursement (whether or not you filed a claim) (see instructions) . . . . . Note: If line 2 is more than line 3, skip line 4. Gain from casualty or theft. If line 3 is more than line 2, enter the difference here and skip lines 5 through 9 for that column. See instructions if line 3 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year. Fair market value **before** casualty or theft . . . 6 Fair market value after casualty or theft . . . . 7 Enter the smaller of line 2 or line 7 . . . . 8 8 Subtract line 3 from line 8. If zero or less, 9 10 Casualty or theft loss. Add the amounts on line 9 in columns A through D . . . . 10 Enter the **smaller** of line 10 or \$100 . . . . . . 11 11 12 12 Caution: Use only one Form 4684 for lines 13 through 18. 13 13 14 • If line 14 is more than line 13, enter the difference here and on Schedule D. Do not 15 28,545 complete the rest of this section (see instructions). 15 • If line 14 is less than line 13, enter -0- here and go to line 16. • If line 14 is equal to line 13, enter -0- here. Do not complete the rest of this section. 3,365,303 16 16 17 Enter 10% of your adjusted gross income from Form 1040, line 38, or Form 1040NR, line 36. Estates and

2,058,536

1,842,452

17

18

tax return

Subtract line 17 from line 16. If zero or less, enter -0-. Also enter the result on Schedule A (Form 1040), line 20, or Schedule A (Form 1040NR), line 8. Estates and trusts, enter the result on the "Other deductions" line of your

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES) AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Attachment Sequence No. 26

Page 2 Form 4684 (2007)

Name(s) shown on tax return. Do not enter name and identifying number if shown on other side.

Identifying number

	CTION B—Business and Income-Producin									
Pa	rt I Casualty or Theft Gain or Loss (Use	a sep	arate Part	I for	each casua	alty or	theft.)			
19	Description of properties (show type, location, and da aged from the same casualty or theft.	ate acc	uired for eacl	n prop	erty). Use a s	eparate	e line for each	prope	erty lost or dar	m-
	Property A									
	Property B									
	Property C									
	Property <b>D</b>					Prope	erties			
			Α		В		C		D	
20	Cost or adjusted basis of each property	20								
21	Insurance or other reimbursement (whether or not	21								
	you filed a claim). See the instructions for line 3 . <b>Note:</b> <i>If line 20 is more than line 21, skip line 22.</i>	21								
22	Gain from casualty or theft. If line 21 is <b>more</b> than line 20, enter the difference here and on line 29 or line 34, column (c), except as provided in the instructions for line 33. Also, skip lines 23 through 27 for that column. See the instructions for line 4 if line 21 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year.	22								
00		23								
23	Fair market value <b>before</b> casualty or theft Fair market value <b>after</b> casualty or theft	24								
24	•	25								
25	Subtract line 24 from line 23	26								
26	Enter the smaller of line 20 or line 25 Note: If the property was totally destroyed by casualty or lost from theft, enter on line 26 the amount from line 20.	20								
27	Subtract line 21 from line 26. If zero or less, enter -0-	27								
28	Casualty or theft loss. Add the amounts on line 27. Ent		otal here and	on line	29 <b>or</b> line 34	(see in	structions),	28		
Pa	rt II Summary of Gains and Losses (from	sep	arate Parts	I)	(b) Losses	from c	asualties or the	fts	() 0 : (	
	(a) Identify casualty or theft				(i) Trade, busi rental or roy property	alty	(ii) Incom producing employee pro	and	(c) Gains from casualties or the includible in includible	thefts
	Casualty or The	ft of	Property H	leld (				porty		
					(	)	(	)		
29					(	)	(	)		
20	Totals Add the execusts on line 20			30	(	)	(	)		
30	Totals. Add the amounts on line 29				4707 !!	44.16	- 4707			
31	Combine line 30, columns (b)(i) and (c). Enter the net g					9 14. If	Form 4/9/	31	-161,108	
32	is not otherwise required, see instructions	viduals orm 10	, enter the am 40NR), line 16	ount fi	om income-penter the amo	unt fro	m property	- OI	101,100	
	trusts, partnerships, and S corporations, see instructi	ons.		<u>. ` .                                  </u>				32		
	Casualty or Theft	of Pi	operty He	ld Me	ore Than C	ne Y	ear			
33	Casualty or theft gains from Form 4797, line 32 .							33	118,813	
34					(	)	(	)		
					(	)	(	)		
35	Total losses. Add amounts on line 34, columns (b)(i) a	and (b)	(ii)	35	( 260,961	)	(	)		
36	Total gains. Add lines 33 and 34, column (c)							36	194,032	
37	Add amounts on line 35, columns (b)(i) and (b)(ii) .							37	484,092	
38 a	If the loss on line 37 is <b>more</b> than the gain on line 36 Combine line 35, column (b)(i) and line 36, and enter the net gand S corporations, see the note below. All others, enter the required, see instructions	ain or (lo nis amo	unt on Form 47	'97, line	e 14. If Form 47	797 is n	ot otherwise	38a	-237,288	
b	Enter the amount from line 35, column (b)(ii) here. Indion Schedule A (Form 1040), line 28, or Schedule A (Form 1040), line as an employee on Schedule A (Form 1040), lir trusts, enter on the "Other deductions" line of your ta	viduals orm 10 ne 23 d x retur	, enter the am 40NR), line 16 or Schedule A n. Partnership	ount fi , and (Form os (exc	rom income-p enter the amo i 1040NR), lin ept electing la	roducii unt fro e 11. E arge pa	ng property m property Estates and artnerships)	201	102.006	
39	and S corporations, see the note below. Electing larg	line 36,	combine lines	36 and	d 37 and enter	here. F	artnerships	38b	192,006 168,879	
	(except electing large partnerships), see the note below.	All other	ers, enter this a	amount	on Form /179	/ lina '		- Ku	IDX X/9	

# **Sales of Business Property**

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return. ► See separate instructions.

2007

Attachment Sequence No. 27

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

\_\_\_\_\_

Total Forms Filed = 3,071,277

Identifying number

1	enter the gross proceeds from statement) that you are included the statement of the stateme	•			1099-B or 1099-S · · · · · · ·	`	e   1	53,520,502
Pa	rt I Sales or Exchang	es of Property	Used in a Tra	de or Busines	ss and Involun	tary Conv	ersic	
	Than Casualty or	Theft—Most I	Property Held	More Than 1	Year (see inst	ructions)		
	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or of basis, plu improvement expense of	s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2								
								130,241,120
3	Gain, if any, from Form 4684,	line 39					3	221,153
4	Section 1231 gain from instal						4	7,705,717
5	Section 1231 gain or (loss) from						5	1,978,351
6	Gain, if any, from line 32, from		· ·				6	44,383,137
7	Combine lines 2 through 6. E						7	184,529,478
•	Partnerships (except electing							
	instructions for Form 1065, Sch							
	Individuals, partners, S corp	oration sharehold	lers, and all other	s. If line 7 is zero	or a loss, enter the	e amount		
	from line 7 on line 11 below a	nd skip lines 8 and	9. If line 7 is a gai	n and you did not	have any prior year	ar section		
	1231 losses, or they were rec				as a long-term cap	pital gain		
	on the Schedule D filed with	your return and ski	ip lines 6, 9, 11, a	nd 12 below.				
8	Nonrecaptured net section 12						8	4,424,754
9	Subtract line 8 from line 7. If If line 9 is more than zero, er long-term capital gain on the	nter the amount fro	om line 8 on line 1	2 below and ente	r the gain from lin	ie 9 as a	9	29,125,790
Pai	rt II Ordinary Gains ar			e mstructions), ,	<u> </u>		9	20,120,700
10	Ordinary gains and losses no	•		clude property hel	d 1 year or less):			
	Trainary game and lecoco no	Thioladad on mico	Transagn 15 (m					
								3,375,893
11	Loss, if any, from line 7						11	( 7,871,373 )
12	Gain, if any, from line 7 or an						12	1,511,645
13	Gain, if any, from line 31 .						13	7,475,839
14	Net gain or (loss) from Form						14	-198,381
15	Ordinary gain from installmen						15	138,556
16	Ordinary gain or (loss) from li						16	124,536
17	Combine lines 10 through 16	•					17	4,556,716
18	For all except individual retur				ine of vour return	and skip		
	lines a and b below. For indiv				or your rotain	a.ia orip		
а	If the loss on line 11 includes	a loss from Form 4	684, line 35, colun	nn (b)(ii), enter that				
	the part of the loss from inco	ome-producing pro	perty on Schedule	A (Form 1040), I	ine 28, and the pa	art of the		
	loss from property used as at 18a." See instructions					+797, line	18a	0
h	Redetermine the gain or (loss					rm 1040		
	line 14	,					18b	4,556,716

Form	4797 (2007) AMOUNTS OF SELECTED L	INES	FILED (IN THO	USANDS OF DO	LLARS)		Page 2
Pa	rt III Gain From Disposition of Property Under (see instructions)	Sect	ions 1245, 12	50, 1252, 1254	1, and 12	55	
19	(a) Description of section 1245, 1250, 1252, 1254, or 1255 pro	operty:			(b) Date acc (mo., day,		(c) Date sold (mo., day, yr.)
Α							
В							
<u>C</u>							
D							
	These columns relate to the properties on lines 19A through 19D		Property A	Property B	Property	С	Property D
20	Gross sales price (Note: See line 1 before completing.)	20					
21	Cost or other basis plus expense of sale	21					
22 23	Depreciation (or depletion) allowed or allowable	23					
20	Adjusted basis. Subtract line 22 from line 21						
24	Total gain. Subtract line 23 from line 20	24					
25	If section 1245 property:	25a					
a b	Depreciation allowed or allowable from line 22	25b	7,087,912				
26	If section 1250 property: If straight line depreciation was used, enter	200	.,,				
	-0- on line 26g, except for a corporation subject to section 291.	26a					
	Additional depreciation after 1975 (see instructions)	20a					
b	Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a (see instructions)	26b					
С	Subtract line 26a from line 24. If residential rental property <b>or</b> line 24 is not more than line 26a, skip lines 26d and 26e	26c					
d	Additional depreciation after 1969 and before 1976	26d					
е	Enter the <b>smaller</b> of line 26c or 26d	26e					
f	Section 291 amount (corporations only)	26f	208,396				
<u> </u>		26g	200,390				
27	<b>If section 1252 property:</b> Skip this section if you did not dispose of farmland or if this form is being completed for a						
	partnership (other than an electing large partnership).						
а	Soil, water, and land clearing expenses	27a					
b	Line 27a multiplied by applicable percentage (see instructions)  Enter the <b>smaller</b> of line 24 or 27b	27b	*				
		27c					
28	If section 1254 property:						
а	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and						
	mining exploration costs (see instructions)	28a					
b	Enter the <b>smaller</b> of line 24 or 28a	28b	181,020				
29	If section 1255 property:						
а	Applicable percentage of payments excluded from income	00.					
h	under section 126 (see instructions)	29a 29b	1,545				
	nmary of Part III Gains. Complete property columns			l line 29b befor	re aoina ta	line	30.
			<u> </u>				
30	Total gains for all properties. Add property columns A through	D, line	e 24			30	51,997,128
31	Add property columns A through D, lines 25b, 26g, 27c, 28b,					31	7,475,839
32	Subtract line 31 from line 30. Enter the portion from casualty of other than casualty or theft on Form 4797, line 6					32	44,521,289
Pa	rt IV Recapture Amounts Under Sections 179 a (see instructions)					to 5	0% or Less
					(a) Secti 179	on	(b) Section 280F(b)(2)

			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
34	Recomputed depreciation (see instructions)	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		
				4505

**4835** 

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Farm Rental Income and Expenses**

(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income not subject to self-employment tax)

OMB No. 1545-0074

2007

Attachment
Sequence No. 37

Intern	al Revenue Service	► Atta	ich t	o Form 1040 or For	m 10	40NR. ► S	ee instructions on b	oack.	Sequence No	b. <b>37</b>
Name	e(s) shown on tax return							Your soc	ial security number	
		_			_			Employer	r ID number (EIN), if a	ny
		10	otal F	forms Filed = 583,60	/					
<u>A</u> [	Did you actively partici	pate in the o	pera	ation of this farm of	durin	g 2007 (see in	structions)?		🗌 Yes	☐ No
Pa	rt I Gross Farm F	Rental Inco	me-	-Based on Prod	lucti	on. Include ar	mounts converted	to cash	or the equivaler	nt.
1	Income from product	ion of livesto	ock.	produce, grains, a	and c	other crops		1	5,012,360	
2a	Cooperative distribution			·		,945	<b>2b</b> Taxable amount	2b		
	Agricultural program pa			′   _	943	,008	<b>3b</b> Taxable amount	3b	917,093	
4	Commodity Credit Co	•			ctions	3):				
_	CCC loans reported	•		*				4a	3,534	
	CCC loans forfeited			4b	1,3	399	4c Taxable amount	4c		
5	Crop insurance proce	eeds and fed	deral	crop disaster pay	/men	ts (see instruc	tions):			
а	Amount received in 2					,349	<b>5b</b> Taxable amount	5b	83,911	
	If election to defer to				5	d Amount de		5d		
6	Other income, includir	ng federal an	nd st	ate gasoline or fue	l tax	credit or refun	d (see instructions)	6	2,116,351	
7	Gross farm rental in	come. Add	amo	unts in the right co	olum	n for lines 1 th	rough 6. Enter the			
	total here and on Sch	nedule E (Fo	rm 1	040), line 42			<u> ▶</u>	7	8,275,182	
Pai	t II Expenses—F	arm Renta	l Pro	operty. Do not in	clude	e personal or	living expenses.			
8	Car and truck expens	es (see				21 Pension	and profit-sharing			
	Schedule F instruction					plans		21	*	
	attach Form 4562		8	85,067		22 Rent or I	ease:			
9	Chemicals	L	9	191,052		<b>a</b> Vehicles	, machinery,			
10	Conservation expense						pment (see			
	instructions)	,	10	45,654		instruction	ons)	22a		
11	Custom hire (machine	e work) . L	11	137,007		<b>b</b> Other (la	nd, animals, etc.).	22b		
12	Depreciation and sect	tion 179					and maintenance.	23	309,774	
	expense deduction no	ot				24 Seeds a	nd plants	24	213,614	
	claimed elsewhere		12	623,972		25 Storage	and warehousing.			
13	Employee benefit pro	grams				26 Supplies			96,263	<u> </u>
	other than on line 21					27 Taxes		27	757,239	<u> </u>
	Schedule F instruction	_	13	134		28 Utilities		28		
14	Feed	–	14	51,002			ry, breeding, and			
15	Fertilizers and lime	–	15	554,566				29		<u> </u>
16	Freight and trucking	–	16	170.051		30 Other ex				
17	Gasoline, fuel, and oi	–	17	170,251		(specify)				
18	Insurance (other than	health)	18	283,267		a				-
19	Interest:		10-	254.425				200-		
	Mortgage (paid to bank	10, 010.,	19a 19b	354,425 118,527				00-1		
	Other		190	118,327				20-		$\vdash$
20	Labor hired (less emp	-						006		
	credits) (see Schedule instructions)		20	56,358		f   g		30g		_
	manachona)		20	00,000		9		Jog		
24	Total avnances Asla	l linos O House	مامري	20g (000 instruct)	one)			31	4,906,837	
31	Total expenses. Add		_	• •					1,700,007	
32	Net farm rental inco it here and on Sched								3,368,344	
22					_			33a	All investment is a	at riols
33	If line 32 is a loss, ch (see instructions).							33a		
•	You may have to con							, 50.5		Turion.
C	which box you check									
	Form 6198 before go									
	on Schedule E, line 4							49 <b>33c</b>	595,544	

# AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Investment Interest Expense Deduction**

Attach to your tax return.

OMB No. 1545-0191

2007

Attachment
Sequence No. 51

Department of the Treasury Internal Revenue Service Name(s) shown on return

Total Forms Filed = 1 805 166

Identifying number

	10tal Forms Filed = 1,095,100		
Pai	rt I Total Investment Interest Expense		
1	Investment interest expense paid or accrued in 2007 (see instructions)	1	39,796,712
2	Disallowed investment interest expense from 2006 Form 4952, line 7	2	17,685,070
3	Total investment interest expense. Add lines 1 and 2	3	57,481,782
Par	t II Net Investment Income		
	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)		
b	defined dividence included on the late.	4c	106,387,370
C	Subtract line 4b from line 4a	40	100,307,370
d	The gain with the disposition of property field for invocations.		
е	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment (see instructions)  4e 333,059,560		
		4f	40,375,584
T	Subtract line 4e from line 4d	41	40,373,304
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see	4g	5,752,713
	instructions)	4h	152,515,667
	Investment income. Add lines 4c, 4f, and 4g	5	11,660,600
5 6	Investment expenses (see instructions)	6	141,711,334
_	t III Investment Interest Expense Deduction	0	171,711,004
_	<u> </u>		
7	Disallowed investment interest expense to be carried forward to 2008. Subtract line 6 from	_	00 000 770
	line 3. If zero or less, enter -0	7	20,696,776
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions,	8	36,785,007

Section references are to the Internal Revenue Code unless otherwise noted.

# **General Instructions Purpose of Form**

Use Form 4952 to figure the amount of investment interest expense you can deduct for 2007 and the amount you can carry forward to future years. Your investment interest expense deduction is limited to your net investment income.

For more information, see Pub. 550, Investment Income and Expenses.

#### Who Must File

If you are an individual, estate, or a trust, you must file Form 4952 to claim a deduction for your investment interest expense.

**Exception.** You do not have to file Form 4952 if all of the following apply.

- Your investment income from interest and ordinary dividends minus any qualified dividends is more than your investment interest expense.
- You do not have any other deductible investment expenses.
- You do not have any carryover of disallowed investment interest expense from 2006.

# Allocation of Interest Expense

If you paid or accrued interest on a loan and used the loan proceeds for more than one purpose, you may have to allocate the interest. This is necessary because different

rules apply to investment interest, personal interest, trade or business interest, home mortgage interest, and passive activity interest. See Pub. 535, Business Expenses.

# Specific Instructions Part I—Total Investment Interest Expense

#### Line 1

Enter the investment interest expense paid or accrued during the tax year, regardless of when you incurred the indebtedness. Investment interest expense is interest paid or accrued on a loan or part of a loan that is allocable to property held for investment (as defined on this page).

Include investment interest expense reported to you on Schedule K-1 from a partnership or an S corporation. Include amortization of bond premium on taxable bonds purchased after October 22, 1986, but before January 1, 1988, unless you elected to offset amortizable bond premium against the interest payments on the bond. A taxable bond is a bond on which the interest is includible in gross income.

Investment interest expense does not include any of the following:

- Home mortgage interest.
- Interest expense that is properly allocable to a passive activity. Generally, a passive activity is any trade or business activity in which you do not materially participate and any rental activity. See the Instructions for Form 8582, Passive Activity Loss Limitations, for details.

- Any interest expense that is capitalized, such as construction interest subject to section 263A.
- Interest expense related to tax-exempt interest income under section 265.
- Interest expense, disallowed under section 264, on indebtedness with respect to life insurance, endowment, or annuity contracts issued after June 8, 1997, even if the proceeds were used to purchase any property held for investment.

Property held for investment. Property held for investment includes property that produces income, not derived in the ordinary course of a trade or business, from interest, dividends, annuities, or royalties. It also includes property that produces gain or loss, not derived in the ordinary course of a trade or business, from the disposition of property that produces these types of income or is held for investment. However, it does not include an interest in a passive activity.

**Exception.** A working interest in an oil or gas property that you held directly or through an entity that did not limit your liability is property held for investment, but only if you did not materially participate in the activity.

# Part II—Net Investment Income

### Line 4a

Gross income from property held for investment includes income, unless derived in the ordinary course of a trade or business, from interest, ordinary dividends (except Alaska Permanent Fund dividends), annuities, and royalties. Include investment income

# AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# Tax on Lump-Sum Distributions

(From Qualified Plans of Participants Born Before January 2, 1936)

▶ Attach to Form 1040, Form 1040NR, or Form 1041.

OMB No. 1545-0193 Attachment

Sequence No. 28

Department of the Treasury Internal Revenue Service Name of recipient of distribution

Total Forms Filed = 14,214

Identifying number

Pai	Complete this part to see if you can use Form 4972				
1	Was this a distribution of a plan participant's entire balance (excluding deductible voluntary	emplove	e 📖	Yes	No
	contributions and certain forfeited amounts) from all of an employer's qualified plans of one kind				
	profit-sharing, or stock bonus)? If "No," do not use this form		<u> </u>		
2	Did you roll over any part of the distribution? If "Yes," <b>do not</b> use this form		. 2		
3	Was this distribution paid to you as a beneficiary of a plan participant who was born before				
	January 2, 1936?		. 3		
4	Were you (a) a plan participant who received this distribution, (b) born before January 2, 1936,	and (c)	a 📗		
	participant in the plan for at least 5 years before the year of the distribution?		Î   4		
	If you answered "No" to both questions 3 <b>and</b> 4, <b>do not</b> use this form.				
5a	Did you use Form 4972 after 1986 for a previous distribution from your own plan? If "Yes," <b>do no</b>	t use this			
•	form for a 2007 distribution from your own plan		5a		
b	If you are receiving this distribution as a beneficiary of a plan participant who died, did you use F	orm 497	2		
_	for a previous distribution received for that participant after 1986? If "Yes," <b>do not</b> use the form				
	distribution		. 5b		
Par	T II Complete this part to choose the 20% capital gain election (see instructions)				
6	Capital gain part from Form 1099-R, box 3	6	6,141		
7	Multiply line 6 by 20% (.20)	7			
	If you also choose to use Part III, go to line 8. Otherwise, include the amount from line 7 in the total				
	on Form 1040, line 44, Form 1040NR, line 41, or Form 1041, Schedule G, line 1b, whichever applies.				
Par	Complete this part to choose the 10-year tax option (see instructions)				
8	Ordinary income from Form 1099-R, box 2a minus box 3. If you did not complete Part II, enter		454.40		
	the taxable amount from Form 1099-R, box 2a	8	151,42		
9	Death benefit exclusion for a beneficiary of a plan participant who died before August 21, 1996	9	5,018		
10	Total taxable amount. Subtract line 9 from line 8	10	146,40	2	
11	Current actuarial value of annuity from Form 1099-R, box 8. If none, enter -0	11	0		
12	Adjusted total taxable amount. Add lines 10 and 11. If this amount is \$70,000 or more, <b>skip</b> lines		4.40, 40	_	
	13 through 16, enter this amount on line 17, and go to line 18	12	146,40	_	
13	Multiply line 12 by 50% (.50), but <b>do not</b> enter more than \$10,000 .	-			
14	Subtract \$20,000 from line 12. If line 12 is				
	\$20,000 or less, enter -0				
15		16	40,566	,	
16	Minimum distribution allowance. Subtract line 15 from line 13	17	10,000		
17	Subtract line 16 from line 12	18	328		
18	Federal estate tax attributable to lump-sum distribution	19	020		
19	Subtract line 18 from line 17. If line 11 is zero, <b>skip</b> lines 20 through 22 and go to line 23	19			
20	Divide line 11 by line 12 and enter the result as a decimal (rounded to at least three places)				
21	to at least three places)	1			
22	Subtract line 21 from line 11				
23		23			
24	Multiply line 19 by 10% (.10)	24	1,336		
25	Multiply line 24 by ten (10). If line 11 is zero, <b>skip</b> lines 26 through 28, enter this amount on line 29, and go to line 30	25			
26	Multiply line 22 by 10% (.10)				
27	Tax on amount on line 26. Use the Tax Rate Schedule in the				
	instructions				
28	Multiply line 27 by ten (10)	28			
29	Subtract line 28 from line 25. Multiple recipients, see instructions	29	13,356	3	
30	Tax on lump-sum distribution. Add lines 7 and 29. Also include this amount in the total on Form				
	1040, line 44, Form 1040NR, line 41, or Form 1041, Schedule G, line 1b, whichever applies ▶	30	13,823	3	

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

Form **5329** 

# AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

► Attach to Form 1040 or Form 1040NR

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service		► See separate instructions.		Attachment Sequence No.	29
Name of individual subject	to additional	tax. If married filing jointly, see instructions.	Your	social security nu	
		Total Forms Filed = 1,479,094			
Fill in Your Address If You Are Filing Thi		Home address (number and street), or P.O. box if mail is not delivered to your home	Apt.	no.	
Form by Itself and N With Your Tax Retur		City, town or post office, state, and ZIP code		s is an amended	
If you <b>only</b> owe the a	dditional 1	0% tax on early distributions, you may be able to report this tax directly	on F	form 1040, line	60, or
Form 1040NR, line 55	5, without	filing Form 5329. See the instructions for Form 1040, line 60, or for For	m 104	40NR, line 55.	
Complete an IRA) or You may	this part if modified e also have t	on Early Distributions If you took a taxable distribution, before you reached age 59½, from a qualification and the contract (unless you are reporting this tax directly on Form 1040 of complete this part to indicate that you qualify for an exception to the additional RA distributions (see instructions).	r Form	n 1040NR—sèe a	above).
1 Early distribution	s included	in income. For Roth IRA distributions, see instructions	1		
2 Early distribution	ns included	d on line 1 that are not subject to the additional tax (see instructions).			
		eption number from the instructions:	2	10.070.700	_
3 Amount subject	to additio	nal tax. Subtract line 2 from line 1	3	13,270,709	-
1040NR, line 55		6 (.10) of line 3. Include this amount on Form 1040, line 60, or Form	4	1,346,454	
to include 25% o	part of the of that amo	amount on line 3 was a distribution from a SIMPLE IRA, you may have punt on line 4 instead of 10% (see instructions).			
Complete	e this part	on Certain Distributions From Education Accounts if you included an amount in income, on Form 1040 or Form 1040NR, account (ESA) or a qualified tuition program (QTP).	line 2	1, from a Cove	rdell
5 Distributions inc	luded in ir	ncome from Coverdell ESAs and QTPs	5		
6 Distributions inc	luded on I	ine 5 that are not subject to the additional tax (see instructions)	6		4
		nal tax. Subtract line 6 from line 5	7	117,554	<u> </u>
	•	0) of line 7. Include this amount on Form 1040, line 60, or Form 1040NR, line 55	8	11.761	<u> </u>
Complete	e this part	on Excess Contributions to Traditional IRAs if you contributed more to your traditional IRAs for 2007 than is allowed a sound sound in the sound in the sound is allowed as the sound in th	able o	or you had an a	imount
		utions from line 16 of your 2006 Form 5329 (see instructions). If zero,	9		
and the second of the second o		ontributions for 2007 are less than your oution, see instructions. Otherwise, enter -0-			
11 2007 traditional	IRA distrib	utions included in income (see instructions)			
12 2007 distribution	ns of prior	year excess contributions (see instructions)			
<b>13</b> Add lines 10, 11	l, and 12		13		
		tions. Subtract line 13 from line 9. If zero or less, enter -0	14 15		
		2007 (see instructions)	16	107,153	_
		s. Add lines 14 and 15	10	107,100	
(including 2007 cor	ntributions m	nade in 2008). Include this amount on Form 1040, line 60, or Form 1040NR, line 55	17	6,157	
Complete		on Excess Contributions to Roth IRAs if you contributed more to your Roth IRAs for 2007 than is allowable or orm 5329.	you h	ad an amount o	on line
18 Enter your excess	contribution	ns from line 24 of your 2006 Form 5329 (see instructions). If zero, go to line 23	18		
19 If your Roth IRA	contribut	ions for 2007 are less than your maximum e instructions. Otherwise, enter -0 19			
		ur Roth IRAs (see instructions)			
21 Add lines 19 and	d 20 .		21		
•		tions. Subtract line 21 from line 18. If zero or less, enter -0	22		
23 Excess contribu	tions for 2	2007 (see instructions)	23		

Additional tax. Enter 6% (.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2007 (including 2007 contributions made in 2008). Include this amount on Form 1040, line 60, or Form 1040NR, line 55 24

203,595

11,636

_				
Р	а	a	e	-

Pa	rt V	Additional Tax on Excess Contributions to Co Complete this part if the contributions to your Coverd amount on line 33 of your 2006 Form 5329.			007 were	more than	is allo	wable or you h	nad an
26	Enter t	he excess contributions from line 32 of your 2006 For	m 5320 (	eee in	etruction	s) If zero			T
20		ine 31					26		
27		ontributions to your Coverdell ESAs for 2007 were less t							
	maxim	um allowable contribution, see instructions. Otherwise, e	nter -0-	27			.		
28		listributions from your Coverdell ESAs (see instructions		28					
29		es 27 and 28					29		+
30		ear excess contributions. Subtract line 29 from line 26.					30		+-
31		contributions for 2007 (see instructions)					32	*	+-
32		xcess contributions. Add lines 30 and 31					32		+
33	Decem	ber 31, 2007 (including 2007 contributions made in 20 ine 60, or Form 1040NR, line 55	08). Inclu	de thi	is amoun	t on Form	33	*	
Pa	rt VI	Additional Tax on Excess Contributions to Arc	her MS	As					
		Complete this part if you or your employer contributed had an amount on line 41 of your 2006 Form 5329.	d more to	your	Archer N	//SAs for 200	07 tha	n is allowable	or you
34		he excess contributions from line 40 of your 2006 For ine 39	•				34		
35	If the	contributions to your Archer MSAs for 2007 are less the	nan the	35					
36		um allowable contribution, see instructions. Otherwise, e listributions from your Archer MSAs from Form 8853, li		36			-		
37		les 35 and 36					37		
38		ear excess contributions. Subtract line 37 from line 34.					38		
39		contributions for 2007 (see instructions)					39		
40	Total e	xcess contributions. Add lines 38 and 39					40	7,456	
41	Additio	onal tax. Enter 6% (.06) of the smaller of line 40 or t	he value o	of you	ır Archer	MSAs on			
	Decem 1040,	ber 31, 2007 (including 2007 contributions made in 20 ine 60, or Form 1040NR, line 55	08). Inclu 	de thi 	s amoun	t on Form	41	220	
Pa		Additional Tax on Excess Contributions to He							
		Complete this part if you, someone on your behalf, or allowable or you had an amount on line 49 of your 20			contribu	ted more to	your F	HSAs for 2007	than is
42	Enter t	he excess contributions from line 48 of your 2006 Form	n 5329. If	zero,	go to lir	ne 47	42		
43	allowa	ontributions to your HSAs for 2007 are less than the maple contribution, see instructions. Otherwise, enter -0-		43					
44				44			AF		
45		es 43 and 44					45 46		+-
46		ear excess contributions. Subtract line 45 from line 42. contributions for 2007 (see instructions)	it zero o	r iess,	, enter -u		47		+-
47 48		xcess contributions. Add lines 46 and 47		•			48	71,267	+-
49		nal tax. Enter 6% (.06) of the smaller of line 48 or the value of you	· · · · r HSAs on Γ	 Decemb	 ber 31. 200	7 (including		, ,	
		ntributions made in 2008). Include this amount on Form 1040, lin					49	2.730	
Pai	rt VIII	Additional Tax on Excess Accumulation in Qu Complete this part if you did not receive the minimum							
50		um required distribution for 2007 (see instructions) .					50		
51		at actually distributed to you in 2007					51	05.50	+
52		ct line 51 from line 50. If zero or less, enter -0-	1040 5			NID 15 55	52	25,586	+
53 Sign		nal tax. Enter 50% (.50) of line 52. Include this amount on Form Complete only if you are filing this form by itself					53	12,837	
Sig	nature.	Under penalties of perjury, I declare that I have examined this form, incl					s and to	the best of my kno	wledge
Ple Sig	ase	and belief, it is true, correct, and complete. Declaration of preparer (other							
Hei									
- 101		Your signature				Date			
Paid	d parer's	Preparer's signature	Date			ck if self- ployed	Prep	arer's SSN or PTIN	
	Only	Firm's name (or yours if self-employed),				EIN			
-500	Jy	address and ZIP code				Phone no.	(		

**Residential Energy Credits** 

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

See instructions.

► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2007

Attachment Sequence No. 158

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Total Forms Filed = 4,366,023

Your social security number

Before you begin Part I: Figure the amount of any foreign tax credit or retirement savings contributions credit you are claiming.

Pa	Nonbusiness Energy Property Credit (See instructions be	etore	completing this	part	.)		
1	Were the qualified energy efficiency improvements or residential energ main home located in the United States? (see instructions)		perty costs for yo		1	☐ Yes [	No
	Caution: If you checked the "No" box, you cannot claim the nonbusine	ss en	ergy property cred	dit.			
	Do not complete Part I.						
2	Qualified energy efficiency improvements (see instructions).						
а	Insulation material or system specifically and primarily designed to re				2a	2,275,865	
L	your home				2b	1,815,880	+
	o Exterior doors · Metal roof with appropriate pigmented coatings that meet the Energy S				20	1,010,000	
•	and is specifically and primarily designed to reduce heat gain in your h				2c	509,344	
d	Exterior windows (including skylights)	2d	4,099,603				
	Maximum amount of cost on which the credit can be figured	2e	\$2,000				
	Enter the amount, if any, from your 2006 Form 5695, line 2b. Otherwise,						
	enter -0	2f	419,526				
g	Subtract line 2f from line 2e	2g	8,241,580				
h	Enter the smaller of line 2d or line 2g				2h	2,451,892	<u> </u>
3	Add lines 2a, 2b, 2c, and 2h			.	3	7,052,980	
4	Multiply line 3 by 10% (.10)			.	4	705,452	-
5	Residential energy property costs (see instructions).	1_	000 244				
	Energy-efficient building property. Do not enter more than \$300	<u>5a</u>	288,241				
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150	5b	129,954				
c	Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more than \$50	5c	10,719				
6	Add lines 5a through 5c			.	6	428,914	<u> </u>
7	Add lines 4 and 6			.	7	1,134,366	-
8	Maximum credit amount. (If you jointly occupied the home, see instruc			.  -	8	\$500	
9	Enter the amount, if any, from your 2006 Form 5695, line 8. Otherwise	•		.  -	9	132,984	-
10	Subtract line 9 from line 8			· -	10	2,035,238 954,993	-
11	Enter the smaller of line 7 or line 10	140		.  -	11	904,990	
12	Enter the amount from Form 1040, line 46, or Form 1040NR, line 43	12					
13	Enter the total, if any, of your credits from Form 1040, lines 47 through 49, and lines 51 and 53, or Form 1040NR, lines 44, 46, and 48	13					
14	Subtract line 13 from line 12. If zero or less, <b>stop.</b> You cannot take		nonhusiness once	COV			
7	property credit	ti le	i lo i busili essi el lei		14		
15	Nonbusiness energy property credit. Enter the smaller of line 11 or I	ine 14	1		15	938,036	

Before you begin Part II: Figure the amount of any of the following credits you are claiming.

- Foreign tax credit
- Child tax credit
- Retirement savings contributions credit
- Mortgage interest credit
- Adoption credit
- District of Columbia first-time homebuyer credit

Qualified solar electric property costs	379,031		
Multiply line 16 by 30% (.30)	113,710		
Maximum credit amount	\$2,000		
Enter the smaller of line 17 or line 18		19	38,339
Qualified solar water heating property costs	107,671		
Multiply line 20 by 30% (.30)	32,304		
Maximum credit amount	\$2,000		
Enter the smaller of line 21 or line 22		23	27,658
Qualified fuel cell property costs	2,911		
Multiply line 24 by 30% (.30)	873		
Kilowatt capacity of property on line 24 above ▶	1,952,930		
Enter the smaller of line 25 or line 26		27	873
Credit carryforward from 2006. Enter the amount, if any, from your 2006 Fo		28	12,752
Add lines 19, 23, 27, and 28		29	79,622
Enter the amount from Form 1040, line 46, or Form 1040NR, line 43			
1040 filers: Enter the total, if any, of your credits from Form			
1040, lines 47 through 49, and lines 51, 53, and 54; line 15 of			
this form; and line 12 of the Line 11 Worksheet in Pub. 972 (see \)	201,781		
instructions).			
1040NR filers: Enter the total, if any, of your credits from Form			
1040NR, lines 44, 46, 48, and 49; line 15 of this form; and line 12			
of the Line 11 Worksheet in Pub. 972 (see instructions).			
Subtract line 31 from line 30. If zero or less, enter -0- here and on line 33		32	58,440,494
Residential energy efficient property credit. Enter the smaller of line 29 c	or line 32	33	69,408
Credit carryforward to 2008. If line 33 is less than line 29, subtract line 33 from line 29	10,214		
rt III Current Year Residential Energy Credits			
A	ID !! 45	35	4.007.411
Add lines 15 and 33. Enter here and on Form 1040, line 50, or Form 1040N	IR, line 45	33	1,007,444

Form **5695** (2007)

**5884** 

# **Work Opportunity Credit**

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

► Attach to your tax return.

OMB No. 1545-0219

2007
Attachment
Sequence No. 77

Department of the Treasury Internal Revenue Service Name(s) shown on return

Total Forms Filed = 45.253

Identifying number

	Total Forms Filed = 45,253			
Pa	rt   Current Year Credit			
1	Enter on the applicable line below the total qualified first- or second-year wages paid or incurred during the tax year, and multiply by the percentage shown, for services of employees who are certified (if required) as members of a targeted group.			
а	Qualified first-year wages of employees who worked for you at least 120 hours but fewer than 400 hours \$	1a	2,403	
b	Qualified first-year wages of employees who worked for you at least 400 hours	1b	12,895	
С	Qualified second-year wages of employees certified as long-term family assistance recipients	1c	32	
2	Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make for salaries and wages	2	15,330	
3	Work opportunity credit from partnerships, S corporations, cooperatives, estates, and trusts.	3	294,563	
4	Add lines 2 and 3. Partnerships and S corporations, report this amount on Schedule K; all others, go to line 5	<b>4 5</b>	307,335 24,820	
5	Work opportunity credit included on line 4 from passive activities (see instructions)	6	282,514	
6	Subtract line 5 from line 4	7	19,731	
7 8	Work opportunity credit allowed for 2007 from a passive activity (see instructions)	8	109	
9	from 2008 of the work opportunity credit (see instructions)			
10	this amount to complete Part II	9	304,787	
11	instructions)	10		
Do	Part II	11		
	rt II Allowable Credit	40		
12	Regular tax before credits (see instructions)	12		
13	Alternative minimum tax (see instructions)	14		
14	Add lines 12 and 13	14		
	Credits from Form 1040, lines 47 through 50 and 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)			
	Foreign tax credit	- 1		
С	Credits from Forms 5735 and 8834	- 1		
d e	Non-business alternative motor vehicle credit (Form 8910, line 18)  Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)			
f	Add lines 15a through 15e	15f		
16	Net income tax. Subtract line 15f from line 14. If zero, skip lines 17 through 20 and enter -0- on line 21	16	18,841,870	
17	Net regular tax. Subtract line 15f from line 12. If zero or less, enter -0	17	18,352,213	
18	Enter 25% (.25) of the excess, if any, of line 17 over \$25,000 (see instructions)	18	4,402,039	
19	Subtract line 18 from line 16. If zero or less, enter -0	19		
	denotal business creat (Form 5555, into 15)			
b	Empowerment zone and renewal community employment credit (Form 8844, line 26)			
С	Add lines 20a and 20b	20c		
21	Subtract line 20c from line 19. If zero or less, enter -0	21		
22	Credit allowed for the current year. Cooperatives, estates, and trusts. Enter the smaller of line 11 or 21. Report this amount on Form 1120-C, Schedule J, line 5c; or Form 1041, Schedule G, line 2c. If line 21 is smaller than line 11, see instructions. <b>All others.</b> Enter the smaller of line 9 or 21. Report this amount on Form 1040, line 55; Form 1040NR, line 50; Form 1120, Schedule J, line			
	5c; or the applicable line of your return. If line 21 is smaller than line 9, see instructions	22	224,666	
	Panamical Padration Act Nation and instructions		F 500 <i>1</i> (6	

Alternative Minimum Tax—Individuals

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

▶ See separate instructions.

► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074 Attachmen

Department of the Treasury Internal Revenue Service (99) Name(s) shown on Form 1040 or Form 1040NR

Total Forms Filed = 9,528,998

Sequence No. 32 Your social security number

Pai	Alternative Minimum Taxable Income (See instructions for how to comple	te e	ach line.)
1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise,		
	enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	2,217,065,143
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line		
	38. If zero or less, enter -0	2	1,828,690
3	Taxes from Schedule A (Form 1040), line 9	3	190,390,635
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	1,245,108
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	27,465,623
6	If Form 1040, line 38, is over \$156,400 (over \$78,200 if married filing separately), enter the amount from	6	(20,002,214
_	line 11 of the Itemized Deductions Worksheet on page A-10 of the instructions for Schedule A (Form 1040)	6 7	(29,082,314 )
7	Tax refund from Form 1040, line 10 or line 21	8	-344.456
8	Investment interest expense (difference between regular tax and AMT)	9	413,884
9	Depletion (difference between regular tax and AMT)	10	33,527,637
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	11	3,077,004
11	Interest from specified private activity bonds exempt from the regular tax	12	73,161
12		13	2,135,166
13 14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	1,222,613
15	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	15	-1,126
16	Disposition of property (difference between AMT and regular tax gain or loss)	16	-5,027,910
17	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	17	2,411,942
18	Passive activities (difference between AMT and regular tax income or loss)	18	1,560,769
19	Loss limitations (difference between AMT and regular tax income or loss)	19	560,167
20	Circulation costs (difference between regular tax and AMT)	20	-1,997
21	Long-term contracts (difference between AMT and regular tax income)	21	-146,222
22	Mining costs (difference between regular tax and AMT)	22	86,445
23	Research and experimental costs (difference between regular tax and AMT)	23	114,801
24	Income from certain installment sales before January 1, 1987	24	( 3,734 )
25	Intangible drilling costs preference	25	299,464
26	Other adjustments, including income-based related adjustments	26	93,478
27	Alternative tax net operating loss deduction	27	( 8,928,950 )
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line		
Do	28 is more than \$207,500, see page 7 of the instructions.)	28	2,432,176,844
Pai			
29	Exemption. (If this form is for a child under age 18, see page 7 of the instructions.)		
	IF your filing status is AND line 28 is not over THEN enter on line 29		
	Single or head of household		
	Married filing jointly or qualifying widow(er) . 150,000	29	417,800,160
	Married filing separately		417,000,100
30	If line 28 is <b>over</b> the amount shown above for your filing status, see page 7 of the instructions. Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 33 and 35		
30	and skip the rest of Part II	30	2,098,527,292
31	• If you are filling Form 2555 or 2555-EZ, see page 8 of the instructions for the amount to enter.		
0.	If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends		
	on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured	31	480,668,368
	for the AMT, if necessary), complete Part III on the back and enter the amount from line 55 here.		
	<ul> <li>All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26).</li> <li>Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.</li> </ul>		
32	Alternative minimum tax foreign tax credit (see page 8 of the instructions)	32	13,558,991
33	Tentative minimum tax. Subtract line 32 from line 31	33	467,268,981
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040,		
O.T	line 51). If you used Schedule J to figure your tax, the amount from line 44 of Form 1040 must be refigured		
	without using Schedule J (see page 9 of the instructions)	34	474,626,892
35	Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0 Enter here and on		
	Form 1040, line 45	35	24,107,229

Page 2

Form 6251 (2007)

# Part III Tax Computation Using Maximum Capital Gains Rates

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-line 3 of the worksheet on page 8 of the instructions	EZ, en	ter the amount	from	36		
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see page 9 of the instructions). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter	37	740,858,532				
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see page 9 of the instructions). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter	38	17,396,955				
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see page 10 of the instructions for the amount to enter	39	757,588,377		40		
41	Subtract line 40 from line 36				41		
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multi- Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married result			` '	42	303,442,443	
43	Enter:  • \$63,700 if married filing jointly or qualifying widow(er),  • \$31,850 if single or married filing separately, or  • \$42,650 if head of household.	43					
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0	44					
45	Subtract line 44 from line 43. If zero or less, enter -0	45					
46	Enter the <b>smaller</b> of line 36 or line 37	46					
47	Enter the <b>smaller</b> of line 45 or line 46	47					
48	Multiply line 47 by 5% (.05)			, <b>•</b>	48	763,730	
49	Subtract line 47 from line 46	49					
50	Multiply line 49 by 15% (.15)			. ▶	50	103,053,244	
	If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwis	se, go	to line 51.				
51	Subtract line 46 from line 40	51					
52	Multiply line 51 by 25% (.25)			. •	52	3,228,107	
53	Add lines 42, 48, 50, and 52				53		
54	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multi-			(.26).			
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married result	filing s	separately) from	the	54	501,907,123	
55 	Enter the <b>smaller</b> of line 53 or line 54 here and on line 31. If you are filing Form enter this amount on line 31. Instead, enter it on line 4 of the worksheet on page 15.				55		

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Installment Sale Income**

► Attach to your tax return.

▶ Use a separate form for each sale or other disposition of property on the installment method.

OMB No. 1545-0228 Attachment

165

Sequence No. 79

Identifying number

Total Forms Filed = 833,114 Description of property ▶ ..... 2a Date acquired (month, day, year) ▶ / / b Date sold (month, day, year) ▶ // ☐ No Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No," complete Part III for the year of sale and the 2 years after the year of sale ☐ No Part I Gross Profit and Contract Price. Complete this part for the year of sale only. 65,133,553 5 5 Selling price including mortgages and other debts. Do not include interest whether stated or unstated Mortgages, debts, and other liabilities the buyer assumed or took 6 the property subject to (see instructions) . . . . . . . . . . . . 7 8 9 10 10 Adjusted basis. Subtract line 9 from line 8 . . . . . . . 11 11 12 Income recapture from Form 4797, Part III (see instructions) . . . 12 17.829.536 13 13 47,304,017 14 14 Subtract line 13 from line 5. If zero or less, do not complete the rest of this form (see instructions) If the property described on line 1 above was your main home, enter the amount of your excluded 15 540,859 15 16 46,799,871 16 247,840 17 Subtract line 13 from line 6. If zero or less, enter -0- . . . . . . . . . Contract price. Add line 7 and line 17 18 64,465,143 18 Installment Sale Income. Complete this part for the year of sale and any year you receive a payment or Part II have certain debts you must treat as a payment on installment obligations. 19 Gross profit percentage. Divide line 16 by line 18. For years after the year of sale, see instructions 19 20 20 If this is the year of sale, enter the amount from line 17. Otherwise, enter -0-65,342,876 21 Payments received during year (see instructions). Do not include interest, whether stated or unstated 21 22 65,590,716 22 23 Payments received in prior years (see instructions). **Do not** include 112.931.118 41,969,825 24 24 25 141,844 Enter the part of line 24 that is ordinary income under the recapture rules (see instructions). 26 Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797 (see instructions) 41,827,980 Part III Related Party Installment Sale Income. Do not complete if you received the final payment this tax year. Name, address, and taxpayer identifying number of related party 28 If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. Check the box that applies. a 
The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition (month, day, year) **b** The first disposition was a sale or exchange of stock to the issuing corporation. c The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition. **d** The second disposition occurred after the death of the original seller or buyer. e 🔲 It can be established to the satisfaction of the Internal Revenue Service that tax avoidance was not a principal purpose for either of the dispositions. If this box is checked, attach an explanation (see instructions). 30 30 31 31 32 33 33 Total payments received by the end of your 2007 tax year (see instructions) . . . . . 34 43.547 35 35 Multiply line 34 by the gross profit percentage on line 19 for year of first sale . . . . . 36 \* Enter the part of line 35 that is ordinary income under the recapture rules (see instructions). Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797 (see instructions) 23,703 37

6252

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Department of the Treasury Internal Revenue Service

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Gains and Losses From Section 1256 Contracts and Straddles**

► Attach to your tax return.

OMB No. 1545-0644

Attachment Sequence No. **82** 

Name(s) shown on tax return			-	Total Forms Fi	Ide	Identifying number					
Chec	k all applicable boxes (see instr	ructions).	A Mix	ed straddle elec	tion		С	Mixed stra	addle	account election	
				ddle-by-straddle i	dentification ele	ection	D	Net section	n 125	6 contracts loss ele	ection
Pai	t I Section 1256 Co	ontracts	Marked	to Market							
	(a) Identification of	of account	t					(b) (Loss	s)	(c) Gain	
1											
											<u> </u>
2	Add the amounts on line 1 in	columns (b	o) and (c)			L	2 (		<u> </u>	) 0.504.044	<u> </u>
3	Net gain or (loss). Combine lin								3	05.050	
4	Form 1099-B adjustments. Se								5	0.500.050	
5	Combine lines 3 and 4								3	0,020,012	+
	<b>Note:</b> If line 5 shows a net gain instructions.	n, skip line	6 and enter	the gain on line	7. Partnershi	ips and S	s corp	orations, see			
6	If you have a net section 125								6	67,682	
	carried back. Enter the loss as	s a positive	e number				٠.		-	07,002	+
7	Combine lines 5 and 6								7	8,594,654	
8	Short-term capital gain or (I										
	line of Schedule D (see instructiong-term capital gain or (lo	ctions)							8	3,437,864	
9	line of Schedule D (see instruc			y 60% (.60). En					9	5,156,790	
Par	t II Gains and Losse										
Sec	tion A—Losses From S	traddles									
	(a) Description of property	(b) Date entered into or acquired	(c) Date closed out or sold	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Los If colum is more (d), en differer Otherw enter	in (e) than ter ice. rise,	(g) Unrecogni gain or offsettin position	n g	(h) Recognized If column (f) is r than (g), ente difference. Otherwise, enter	nore er
10											
											<u> </u>
11a	Enter the short-term portion of Schedule D (see instructions)								118	a ( 22,811	)
b	Enter the long-term portion of Schedule D (see instructions)								111	b ( 21,522	)
Sec	tion B—Gains From Str	addles									
	(a) Description of property	(b) Date entered into or acquired	(c) Date closed out or sold	(d) G sales			bas	st or other sis plus use of sale		(f) Gain. If column (d) is more than (e) enter difference. Otherwise, enter -0	,
12											
13a	Enter the short-term portion of Schedule D (see instructions)								138	726,438	
b	Enter the long-term portion o Schedule D (see instructions)	of gains fro	m line 12,	column (f), here	and include	on the	appro	priate line of	138	446,069	
Par	Schedule D (see instructions) t III Unrecognized G	ains Fro	m Positi	ons Held on	Last Day	of Ta	x Ye	ar. Memo E	ntry C	Only (see instructi	ons)
	(a) Description of property		(b) Da acquir	te (c) Fair	market value o ess day of tax y	n last		Cost or other ba as adjusted		(e) Unrecognized of the state o	gain. ore rence.
14											

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Noncash Charitable Contributions**

(Rev. December 2006)

Department of the Treasury
Internal Revenue Service

Attach to your tax return if you claimed a total deduction of over \$500 for all contributed property.

▶ See separate instructions.

OMB No. 1545-0908

Attachment
Sequence No. **155** 

Name(s) shown on your income tax return

Total Forms Filed = 6,904,786

Identifying number

Note. Figure the amount of your contribution deduction before completing this form. See your tax return instructions. Section A. Donated Property of \$5,000 or Less and Certain Publicly Traded Securities—List in this section only items (or groups of similar items) for which you claimed a deduction of \$5,000 or less. Also, list certain publicly traded securities even if the deduction is more than \$5,000 (see instructions). Information on Donated Property—If you need more space, attach a statement. Part I (b) Description of donated property (a) Name and address of the 1 (For a donated vehicle, enter the year, make, model, condition, and mileage donee organization and attach Form 1098-C if required.) A В C D Ε Note. If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (d), (e), and (f). (g) Fair market value (c) Date of the (e) How acquired (f) Donor's cost (h) Method used to determine (d) Date acquired contribution by donor (mo., yr.) (see instructions) by donor or adjusted basis the fair market value A 34,376,981 39,442,280 В C D Ε Part II Partial Interests and Restricted Use Property—Complete lines 2a through 2e if you gave less than an entire interest in a property listed in Part I. Complete lines 3a through 3c if conditions were placed on a contribution listed in Part I; also attach the required statement (see instructions). 2a Enter the letter from Part I that identifies the property for which you gave less than an entire interest > If Part II applies to more than one property, attach a separate statement. b Total amount claimed as a deduction for the property listed in Part I: (1) For this tax year (2) For any prior tax years c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above): Name of charitable organization (donee) Address (number, street, and room or suite no.) City or town, state, and ZIP code d For tangible property, enter the place where the property is located or kept ▶ Name of any person, other than the donee organization, having actual possession of the property Yes No 3a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated b Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire? . . . . . . . . . . . . c Is there a restriction limiting the donated property for a particular use?

Form	n 8283 (Rev. 12-2006	AMOU	NTS OF SEL	ECTED LI	NES FIL	LED (IN TH	lous	ANDS OF DOLLARS	3)	F	Page 2
Nam	e(s) shown on your i	ncome tax return								Identifying number	
Sec	items)	for which you claim	ed a deduction	on of more t	:han \$5,0	000 per item	or gr	List in this section or oup (except contribution perty listed in Section	ons o	of certain publicly t	
Pa	rt I Infor	mation on Dona	ated Prope	rty—To b	e com	pleted by	the t	axpayer and/or th	е ар	praiser.	
othe	Art* (contrib Art* (contrib Collectibles* includes paintings, sor r similar objects. Ilectibles include coin		more) 20,000)  prints, drawings, ms, jewelry, spo	G G G G G G G G G G G G G G G G G G G	other Rea ntellectua tiques, dec	I Property corative arts, tetc., but not a	extiles	, carpets, silver, rare manu		Equipment Securities Other s, historical memorabi	ilia, and
5		of donated property (if attach a separate state						a brief summary of the o	verall	(c) Appraised fa	air
A B C										19,498,924	
D											
	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's adjusted			bargain sales, nount received		(h) Amount claimed as deduction		tructions (i) Average trading p of securities	orice
A B			5,238,72	21	1,6	21,701		6,638,815		760,573	
С											
D Pa	rt II Taxpa	 aver (Donor) Sta	l atement—l	ist each it	tem incl	luded in P	art I a	labove that the appr	aisa	l identifies as ha	avina
(per Sign	item). Enter identi	ifying letter from Par (donor) ▶	rt I and descri					and belief an appraised  ▶  Date		e of not more than	n \$500 ———
I dec marr appr Also, appr value the p resul me to	clare that I am not the lied to any person wh aisals during my tax y, I declare that I hold aisal, I am qualified to e. Furthermore, I undoenalty under section the penalty under so the penalty under so	o is related to any of the year for other persons. I myself out to the puber make appraisals of the erstand that a false or fin 6701(a) (aiding and a al of the value of the pr	rty to the transace e foregoing persolic as an apprai e type of propertraudulent overst betting the under operty that I kno	ser or perform ty being value atement of the erstatement o ww, or reasona	egularly use on appraisa d. I certify e property of tax liabil ably should om present	als on a regulathat the appravalue as descity). In additional throw, would ting evidence	ar basis aisal fee cribed in on, I un be use	ty, employed by, or related ee, or party to the transact s; and that because of my es were not based on a pe in the qualified appraisal or ider stand that a substantiation of the connection with a retuining by the Office of Pro	tion, I provided the recentant of the contract	performed the majorite fications as described ge of the appraised porm 8283 may subject pross valuation misstablaim for refund, may	d in the roperty of me to atement
Hei Busir	1 - 3	ing room or suite no.)			Title ▶	·		Date ▶		Identifying number	
Í	or town, state, and z										_
		e Acknowledgr									
		ation acknowledges ove on the following		lified organiz	zation und	der section 1	70(c) a	and that it received the o	donat	ed property as des	cribed
port	ion thereof) within		e of receipt, it	will file <b>Form</b>	n <b>8282,</b> D	onee Inform	ation I	s of the property descri Return, with the IRS and		the donor a copy o	of that
	s the organization e of charitable organ	intend to use the p	roperty for an	unrelated u	ise? .	Employer i		cation number		▶	No
Addr	ress (number, street,	and room or suite no.)	)			City or tow	n, state	e, and ZIP code			
Auth	orized signature					Title			Da	ate	

Department of the Treasury Internal Revenue Service AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Mortgage Interest Credit**

(For Holders of Qualified Mortgage Credit Certificates Issued by State or Local Governmental Units or Agencies)

 OMB No. 1545-0074

2007

Attachment
Sequence No. 138

Name(s) shown on your tax return

Total Forms Filed = 35.010

Your social security number

Enter the address of your main home to which the qualified mortgage certificate relates if it is different from the address shown on your tax return. Name of Issuer of Mortgage Credit Certificate Mortgage Credit Certificate Number Issue Date Part I **Current Year Mortgage Interest Credit** Interest paid on the certified indebtedness amount. If someone else (other than your spouse if 1 filing jointly) also held an interest in the home, enter only your share of the interest paid . . . Enter the certificate credit rate shown on your mortgage credit certificate. Do not enter the 2 % 3 If line 2 is 20% or less, multiply line 1 by line 2. If line 2 is more than 20%, or you refinanced 35,950 3 your mortgage and received a reissued certificate, see the instructions for the amount to enter. You must reduce your deduction for home mortgage interest on Schedule A (Form 1040) by the amount on line 3. 7,728 Enter any 2004 credit carryforward from line 18 of your 2006 Form 8396 . . . . . . . . 4 5 4,772 5 Enter any 2005 credit carryforward from line 16 of your 2006 Form 8396 . . . . 6,102 6 Enter any 2006 credit carryforward from line 19 of your 2006 Form 8396 . . . 6 54,552 7 8 Enter the amount from Form 1040, line 46, or Form 1040NR, line 43 Enter the total of the amounts from Form 1040, lines 47 through 49 and 1040 filers: lines 51 and 53; line 12 of the line 11 Worksheet in Pub. 972 (see instructions); and Form 5695, line 15 9 1040NR filers: Enter the total of the amounts from Form 1040NR, lines 44, 46 and 48; line 12 of the line 11 Worksheet in Pub. 972 (see instructions); and Form 5695, line 15 10 Subtract line 9 from line 8. If zero or less, enter -0- here and on line 11 and go to Part II . . . 10 Current year mortgage interest credit. Enter the smaller of line 7 or line 10. Also include this amount in the total on Form 1040, line 54, or Form 1040NR, line 49, and check box a on 37.432 that line Part II Mortgage Interest Credit Carryforward to 2008. (Complete only if line 11 is less than line 7.) 12 12 Add lines 3 and 4 13 13 Enter the amount from line 7 14 Enter the larger of line 11 or line 12 . . . . . 14 15 15 16 16 2006 credit carryforward to 2008. Enter the smaller of line 6 or line 15 . 17 17 18 2005 credit carryforward to 2008. Enter the smaller of line 5 or line 17 . . . . 18 2007 credit carryforward to 2008. Subtract line 11 from line 3. If zero or less, enter -0-19

# AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# **Passive Activity Loss Limitations**

► See separate instructions.

► Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2007

Attachment
Seguence No. 88

Department of the Treasury Internal Revenue Service (S Name(s) shown on return

Total Forms = 3,965,093

Identifying number

# Part I 2007 Passive Activity Loss Caution: Complete Worksheets

Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.

	tal Real Estate Activities With Active Participation (For the definit Special Allowance for Rental Real Estate Activities on page 3 of			tion,			
1a	Activities with net income (enter the amount from Worksheet 1, column (a))	1a	14,972,082				
b	Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	( 45,140,858	)			
	Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	( 35,210,798	)			
<u>d</u>	Combine lines 1a, 1b, and 1c				1d	-65,379,574	
Com	nmercial Revitalization Deductions From Rental Real Estate Acti	vities					
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a	( 2,606	)			
b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	( 50,208	)			
С	Add lines 2a and 2b				2c	( 52,814	)
	Other Passive Activities						
All C	The Passive Activities						
	Activities with net income (enter the amount from Worksheet 3,	3a	40,405,092				
3a	Activities with net income (enter the amount from Worksheet 3, column (a))	3a 3b	40,405,092	)			
3a b	Activities with net income (enter the amount from Worksheet 3, column (a))			)			
3a b	Activities with net income (enter the amount from Worksheet 3, column (a))	3b 3c	( 29,126,939	)	3d	-26,900,485	
3a b	Activities with net income (enter the amount from Worksheet 3, column (a))	3b 3c	( 29,126,939 ( 38,178,637 are allowed, inc		3d 4	-26,900,485 -92,332,873	

- Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
- Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

**Caution:** If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.

# Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example.

5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	5	72,602,311				
6	Enter \$150,000. If married filing separately, see page 8	6	365,415,156				
7	Enter modified adjusted gross income, but not less than zero (see page 8)	7	466,995,400				
	<b>Note:</b> If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.						
8	Subtract line 7 from line 6	8	112,696,173				
9	Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married	ie 8	9	33,452,852			
10	Enter the <b>smaller</b> of line 5 or line 9	<b>.</b>	10	18,211,753			
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.						

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

	1			
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	33,045	
12	Enter the loss from line 4	12		
13	Reduce line 12 by the amount on line 10	13	115,536	
14	Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13	14	11,710	
Pa	rt IV Total Losses Allowed			
15	Add the income, if any, on lines 1a and 3a and enter the total	15	15,969,467	
16	Total losses allowed from all passive activities for 2007. Add lines 10, 14, and 15. See			

page 10 of the instructions to find out how to report the losses on your tax return.

16

39,826,983

(Rev. December 2006) Department of the Treasury

### AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) **Low-Income Housing Credit**

Attach to your tax return.

-1			
ı	OMB	No.	1545-0984

Identifying number

Attachment Sequence No. 36a

Internal Revenue Service (99) Name(s) shown on return

Total Forms File

Estates and trusts. Subtract line 6 from line 5. Report this amount on the applicable line of

Total Forms Filed = 59,523			
Number of Forms 8609-A attached			
Current year credit from attached Form(s) 8609-A (see instructions)	3	1,915	
Low-income housing credit from partnerships, S corporations, estates, and trusts	4	108,479	
Add lines 3 and 4. Estates and trusts, go to line 6; partnerships and S corporations, report this amount on Schedule K; all others, report this amount on the applicable line of Form 3800 (e.g., line 1e of the 2006 Form 3800)	5	110,394	
Amount allocated to beneficiaries of the estate or trust (see instructions)	6		

### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Form 3800 (e.g., line 1e of the 2006 Form 3800)

### What's New

- The tax liability limit is no longer figured on this form; instead, it must be figured on Form 3800, General Business Credit.
- Taxpayers that are not partnerships, S corporations, estates, or trusts, and whose only source of this credit is from those pass-through entities, are not required to complete or file this form. Instead, they can report this credit directly on line 1e of Form 3800.
- The IRS will revise this December 2006 version of the form only when necessary. Continue to use this version for tax years beginning after 2005 until a new revision is issued.

### **Purpose of Form**

Use Form 8586 to claim the low-income housing credit. This general business credit is allowed for each new qualified low-income building placed in service after 1986. Generally, it is taken over a 10-year credit period.

### **Qualified Low-Income Housing Project**

The credit cannot exceed the amount allocated to the building. See section 42(h)(1) for details.

The low-income housing credit can only be claimed for residential rental buildings in low-income housing projects that meet one of the minimum set-aside tests. For details, see the instructions for Form 8609, Part II, line 10c.

Except for buildings financed with certain tax-exempt bonds, you may not take a low-income housing credit on a building if it has not received an allocation from the housing credit agency. No allocation is needed when 50% or more of the aggregate basis of the building and the land on which the building is located is financed with certain tax-exempt bonds issued after 1989 for buildings placed in service after 1989. The owner still must get a Form 8609 from the appropriate housing credit agency (with the applicable items completed, including an assigned BIN). "Land on which the building is located" includes only land that is functionally related and subordinate to the qualified low-income building (see Regulations sections 1.103-8(a)(3) and 1.103-8(b)(4)(iii)).

### **Recapture of Credit**

There is a 15-year compliance period during which the residential rental building must continue to meet certain requirements. If, as of the close of any tax year in this period, there is a reduction in the qualified basis of the building from the previous year, you may have to recapture a part of the credit you have taken. Similarly, you may have to recapture part of the credits taken in previous years upon certain dispositions of the building or interests therein. If you must recapture credits, use Form 8611, Recapture of Low-Income Housing Credit. See section 42(i) for details.

### Recordkeeping

Keep a copy of this Form 8586 together with all Forms 8609, Schedules A (Form 8609) (and successor Forms 8609-A), and Forms 8611 for 3 years after the 15-year compliance period ends.

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# Nondeductible IRAs

► See separate instructions.

► Attach to Form 1040, Form 1040A, or Form 1040NR.

Attachment Sequence No. 48

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name. If married, file a separate form for each spouse required to file Form 8606. See page 5 of the instructions.

Your social security number

Fill in Your Address Only If You Are Filing This Form by Itself and Not With Your Tax Return

Total Forms Filed = 2,138,006 Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

City, town or post office, state, and ZIP code

#### Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2007.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2007 and you made nondeductible contributions to a traditional IRA in 2007 or an earlier year. For this purpose, a distribution does not include a rollover, qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007 (excluding any portion

	you recharacterized) and you made nondeductible contributions to a traditional ma	111 2001	Oi	an earner year.	
1	Enter your nondeductible contributions to traditional IRAs for 2007, including those made f 2007 from January 1, 2008, through April 15, 2008 (see page 5 of the instructions)	. L	1	3,347,778	
2	Enter your total basis in traditional IRAs (see page 5 of the instructions)	. 🗀	2	19,771,312	
3	Add lines 1 and 2		3	23,119,091	
	In 2007, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion?  No Enter the amount from line 3 on line 14. Do not complete the rest of Part I.  Yes Go to line 4.				
4	Enter those contributions included on line 1 that were made from January 1, 2008, throug			25,745	
	April 15, 2008	· -	4		
5	Subtract line 4 from line 3		5	23,093,345	
6	Enter the value of <b>all</b> your traditional, SEP, and SIMPLE IRAs as of December 31, 2007, plus any outstanding rollovers (see page 6 of the instructions)				
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2007. <b>Do not</b> include rollovers, qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see page 6 of the instructions)				
8	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007. <b>Do not</b> include amounts converted that you later recharacterized (see page 6 of the instructions). Also enter this amount on line 16				
9	Add lines 6, 7, and 8				
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000" $10$				
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also enter this amount on line 17				
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA				
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	. —	3	603,309	
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2007 and earlier year	rs 1	4	22,515,781	
15	Taxable amount. Subtract line 12 from line 7. Also include this amount on Form 1040, line 15	ib;			
	Form 1040A, line 11b; or Form 1040NR, line 16b	. 1	5	5,138,893	
	<b>Note:</b> You may be subject to an additional 10% tax on the amount on line 15 if you were und age 59½ at the time of the distribution (see page 6 of the instructions).	der			

Page	2
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### 2007 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2007 (excluding any portion you recharacterized).

Caution: If your modified adjusted gross income is over \$100,000 or you are married filing separately and you lived with your spouse at any time in 2007, you cannot convert any amount from traditional, SEP, or SIMPLE IRAs to Roth IRAs for 2007. If you erroneously made a conversion, you must recharacterize (correct) it (see page 6 of the instructions).

16	converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2007. <b>Do not</b> include amounts you later recharacterized back to traditional, SEP, or SIMPLE IRAs in 2007 or 2008 (see page 6								16	1,043,375	
17		•		the amount from line 11. C instructions)		rise, enter your bas			17	71,988	
18				ne 17 from line 16. Also ind b; or Form 1040NR, line 1					18	971,388	
Par	 ii	nclude a rolle	s part onl over, qual	Roth IRAs y if you took a distribution fied charitable distribution, ee page 6 of the instruction	one-t						
19				distributions from Roth IRAs age 6 of the instructions).					19	1,689,255	
20	Qualifie \$10,000		nomebuye	r expenses (see page 7 of	the ins	structions). <b>Do not</b>	enter	more than	20	48,406	
21	Subtrac	ct line 20 fro	m line 19	If zero or less, enter -0- a	ınd sk	ip lines 22 through	n 25		21	1,648,270	
22	Enter y	our basis in	Roth IRA	contributions (see page 7	of the	instructions) .			22	1,678,910	
23				If zero or less, enter -0- and ditional tax (see page 7 of					23	614,655	
24	Enter y	our basis in	Roth IRA	conversions (see page 7 o	of the i	instructions) .			24	400,517	
25				ne 24 from line 23. If zero on n 1040A, line 11b; or Form				nis amount	25	424,216	
Are by It	Filing TI	Only If You his Form I Not With eturn	knowledge	nalties of perjury, I declare that I I e and belief, it is true, correct, and signature			iding ac	companying at	tachmer	nts, and to the best	t of my
Paid		Preparer's signature				Date		ck if self-	Prepa	rer's SSN or PTIN	
	oarer's Only	Firm's name ( if self-employ address, and	ed),	<u> </u>			CITIP	EIN Phone no.	(	)	

Form **8606** (2007)

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

# Tax for Children Under Age 18 With Investment Income of More Than \$1,700

► Attach only to the child's Form 1040, Form 1040A, or Form 1040NR. ► See separate instructions.

OMB No. 1545-0074

Attachment Sequence No. **33** Department of the Treasury Internal Revenue Service Child's social security number Child's name shown on return Total Forms Filed = 458,397 Before you begin: If the child, the parent, or any of the parent's other children under age 18 must use the Schedule D Tax Worksheet or has income from farming or fishing, see Pub. 929, Tax Rules for Children and Dependents. It explains how to figure the child's tax using the Schedule D Tax Worksheet or Schedule J (Form 1040). Parent's name (first, initial, and last). Caution: See instructions before completing. B Parent's social security number Parent's filing status (check one): Single ☐ Married filing jointly ☐ Married filing separately ☐ Head of household Qualifying widow(er) Child's Net Investment Income 1 5,902,341 If the child did not itemize deductions on Schedule A (Form 1040 or Form 1040NR), enter 2 812,270 Subtract line 2 from line 1. If zero or less, stop; do not complete the rest of this form but do 3 5,106,412 Enter the child's taxable income from Form 1040, line 43; Form 1040A, line 27; or Form 1040NR, 4 5,146,487 line 40. If the child files Form 2555 or 2555-EZ, see the instructions . . . . . . . . . . . . Enter the smaller of line 3 or line 4. If zero, stop; do not complete the rest of this form but do 4,722,494 5 Part II **Tentative Tax Based on the Tax Rate of the Parent** Enter the parent's taxable income from Form 1040, line 43; Form 1040A, line 27; Form 1040EZ, line 6; Form 1040NR, line 40; or Form 1040NR-EZ, line 14. If zero or less, enter -0-. If the parent 6 273,753,782 Enter the total, if any, from Forms 8615, line 5, of all other children of the parent named 4,241,616 8 282,717,893 Add lines 5, 6, and 7 (see instructions) Enter the tax on the amount on line 8 based on the parent's filing status above (see instructions). If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) is used to figure the tax, check here . . . . . . . . . . . 9 59,852,656 Enter the parent's tax from Form 1040, line 44; Form 1040A, line 28, minus any alternative minimum tax; Form 1040EZ, line 10; Form 1040NR, line 41; or Form 1040NR-EZ, line 15. Do not include any tax from Form 4972, 8814, or 8889 or any tax from recapture of an education credit. If the parent files Form 2555 or 2555-EZ, see the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to 58,010,648 10 Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line 1,842,008 11 13 and go to Part III 344,028 12b Divide line 5 by line 12a. Enter the result as a decimal (rounded to at least three places) Multiply line 11 by line 12b 13 884,556 Child's Tax-If lines 4 and 5 above are the same, enter -0- on line 15 and go to line 16. Part III 423,993 Enter the tax on the amount on line 14 based on the child's filing status (see instructions). If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or 31,398 15 Schedule J (Form 1040) is used to figure the tax, check here . . . . . . . . . . 915,955 16 Enter the tax on the amount on line 4 based on the child's filing status (see instructions). If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or 628.614 Schedule J (Form 1040) is used to figure the tax, check here . . . . . . . . . . 17 Enter the larger of line 16 or line 17 here and on the child's Form 1040, line 44; Form 1040A,

line 28; or Form 1040NR, line 41. If the child files Form 2555 or 2555-EZ, see the instructions

925,251

18

Department of the Treasury

# Credit for Prior Year Minimum Tax— Individuals, Estates, and Trusts

► See separate instructions.

► Attach to Form 1040, 1040NR, or 1041.

OMB No. 1545-1073

2007

Attachment
Sequence No. 74

Internal Revenue Service Name(s) shown on return Identifying number Total Forms Filed = 1,435,383 Part I **Net Minimum Tax on Exclusion Items** 441,002,536 1 Combine lines 1, 6, and 10 of your 2006 Form 6251. Estates and trusts, see instructions 52.330.294 2 Enter adjustments and preferences treated as exclusion items (see instructions) . . . . . . 3 2,342,727 Minimum tax credit net operating loss deduction (see instructions) . . . . . . . . . . . . . . . . Combine lines 1, 2, and 3. If more than zero or you filed Form 2555 or 2555-EZ for 2006, go to line 5. If zero or less and you did not file Form 2555 or 2555-EZ for 2006, enter -0- here and on line 15 and go to Part II. If more than \$200,100 and you were married filing separately for 2006, 496,863,526 Enter: \$62,550 if married filing jointly or qualifying widow(er) for 2006; \$42,500 if single or head of 5 83,215,688 household for 2006; or \$31,275 if married filing separately for 2006. Estates and trusts, enter \$22,500 Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2006; \$112,500 if single or head of 6 202,826,336 household for 2006; or \$75,000 if married filing separately for 2006. Estates and trusts, enter \$75,000 7 320,079,937 7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9 . . . 80,020,113 8 9 49,337,483 Subtract line 8 from line 5. If zero or less, enter -0-. If this form is for a child under age 18, see instructions Subtract line 9 from line 4. If more than zero or you filed Form 2555 or 2555-EZ for 2006, go to line 11. If zero or less and you did not file Form 2555 or 2555-EZ for 2006, enter -0- here and 453,067,393 10 on line 15 and go to Part II. Form 1040NR filers, see instructions • If for 2006 you filed Form 2555 or 2555-EZ, see page 2 of the instructions for the amount to • If for 2006 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 14a and 15, column (2), of Schedule D (Form 1041)), 99,457,443 11 complete Part III of Form 8801 and enter the amount from line 48 here. • All others: If line 10 is \$175,000 or less (\$87,500 or less if married filing separately for 2006), multiply line 10 by 26% (.26). Otherwise, multiply line 10 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2006) from the result. 2,029,685 12 12 Minimum tax foreign tax credit on exclusion items (see instructions) . . . . . 97,453,266 13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11 90,722,943 14 Enter the amount from your 2006 Form 6251, line 34, or 2006 Form 1041, Schedule I, line 55 Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-8,272,524 15 Part II Current Year Nonrefundable and Refundable Credits and Carryforward to 2008 9.304.542 16 Enter the amount from your 2006 Form 6251, line 35, or 2006 Form 1041, Schedule I, line 56 17 1.032.019 18 Subtract line 17 from line 16. If less than zero, enter as a negative amount . . . . . . 18 9,559,535 19 19 2006 minimum tax credit carryforward. Enter the amount from your 2006 Form 8801, line 26 20 4,131 Enter your 2006 unallowed qualified electric vehicle credit (see instructions) . . . . . . 20 11,281,446 21 Combine lines 18, 19, and 20. If zero or less, stop here and see instructions . . . . . 21 22 99,586,384 Enter your 2007 regular income tax liability minus allowable credits (see instructions) . . . 22 104,489,201 23 23 Enter the amount from your 2007 Form 6251, line 33, or 2007 Form 1041, Schedule I, line 54. 2,938,900 24 Current year nonrefundable credit. Enter the smaller of line 21 or line 24. Also enter this amount 1,031,802 on your 2007 Form 1040, line 55; Form 1040NR, line 50; or Form 1041, Schedule G, line 2d 25 • Estates and trusts: Leave lines 26 and 27 blank and go to line 28. Individuals: Did you have a minimum tax credit carryforward to 2005 (on your 2004 Form 8801, No. Leave lines 26 and 27 blank and go to line 28. 590,050 Yes. Complete Part IV of Form 8801 to figure the amount to enter . . . . 26 27 Is line 26 more than line 25? No. Leave line 27 blank and go to line 28. Yes. Subtract line 25 from line 26. This is your current year refundable credit. Enter the result here and on your 2007 Form 1040, line 71, or Form 1040NR, line 69 . . . . . 508.074 27 Credit carryforward to 2008. Subtract the larger of line 25 or line 26 from line 21. Keep a record

9,741,570

28

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Form 8801 (2007)

**Tax Computation Using Maximum Capital Gains Rates** Part III

	<b>Caution.</b> If you did not complete the 2006 Qualified Dividends and Capital Gair the 2006 Schedule D Tax Worksheet, or Part V of the 2006 Schedule D (For instructions before completing this part.			
20	Enter the amount from Form 2001 line 10		29	
30	Enter the amount from Form 8801, line 10			
	If you figured your 2006 tax using the 2006 Qualified Dividends and Capital Gain Tax Worksheet, skip line 31 and enter the amount from line 30 on line 32. Otherwise, go to line 31.			
31	Enter the amount from line 19 of your 2006 Schedule D (Form 1040), or line 14b, column (2), of the 2006 Schedule D (Form 1041) 31			
32	Add lines 30 and 31, and enter the <b>smaller</b> of that result or the amount from line 10 of your 2006 Schedule D Tax Worksheet			
33	Enter the <b>smaller</b> of line 29 or line 32		33	
34			34	
J-	Subtract line 35 from line 29		<u> </u>	
35	If line 34 is \$175,000 or less (\$87,500 or less if married filing separately for 20 34 by 26% (.26). Otherwise, multiply line 34 by 28% (.28) and subtract \$3,500 (8)	\$1,750 if married	35	
	filing separately for 2006) from the result		00	
36	Enter:	1		
	• \$61,300 if married filing jointly or qualifying widow(er) for 2006,			
	• \$30,650 if single or married filing separately for 2006,			
	• \$41,050 if head of household for 2006, or			
	• \$2,050 for an estate or trust			
37	Enter the amount from line 7 of your 2006 Qualified Dividends and Capital			
	Gain Tax Worksheet, the amount from line 14 of your 2006 Schedule D Tax			
	Worksheet, or the amount from line 23 of the 2006 Schedule D (Form 1041),			
	whichever applies. If you did not complete either worksheet or Part V of			
	the 2006 Schedule D (Form 1041), enter -0			
38	Subtract line 37 from line 36. If zero or less, enter -0			
39	Enter the <b>smaller</b> of line 29 or line 30			
40	Enter the <b>smaller</b> of line 38 or line 39			
41	Multiply line 40 by 5% (.05)		41	
42	Subtract line 40 from line 39			
43	Multiply line 42 by 15% (.15)		43	
	If line 31 is zero or blank, skip lines 44 and 45 and go to line 46. Otherwis	e, go to line 44.		
44	Subtract line 39 from line 33			
45	Multiply line 44 by 25% (.25)		45	
46	Add lines 35, 41, 43, and 45		46	
47	If line 29 is \$175,000 or less (\$87,500 or less if married filing separately for 20	06), multiply line		
	29 by 26% (.26). Otherwise, multiply line 29 by 28% (.28) and subtract \$3,500 (\$			
	filing separately for 2006) from the result		47	
40	Enter the <b>smaller</b> of line 46 or line 47 here and on line 11. (If you filed Form 2			
48	for 2006, see page 4 of the instructions)	2000 OF 2000-EZ	48	
	TO EUOD, SEE DAGE TO THE HISTIACHOUSE			

Page 2

<sup>\*</sup> The 2006 Qualified Dividends and Capital Gain Tax Worksheet is on page 38 of the 2006 Instructions for Form 1040. The 2006 Schedule D Tax Worksheet is on page D-10 of the 2006 Instructions for Schedule D (Form 1040) (page 38 of the 2006 Instructions for Form 1041).

8812

# **Additional Child Tax Credit**

1040 OMB No. 1545-0074 1040A 1040NR

AMOUNT\$ OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Department of the Treasury Internal Revenue Service

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

Sequence No. 47

Name	e(s) shown on return	Your so	Your social security number				
		Total Forms Filed = 16,018,377					
Pa	rt I All File	rs					
1	page 36 of the F	from line 1 of your Child Tax Credit Worksheet on page 40 of form 1040A instructions, or page 21 of the Form 1040NR instruction from line 8 of the worksheet on page 4 of the publication	truction		1	31,119,304	
2	Enter the amoun	t from Form 1040, line 52, Form 1040A, line 32, or Form 10	)40NR,	line 47	2	6,771,929	
3	Subtract line 2 f	rom line 1. If zero, <b>stop</b> ; you cannot take this credit			3	24,347,375	
4a		earned income (see instructions on back)	4a	437,493,926			
b		bat pay (see instructions on   4b   3,539,226					
5							
		line 5 blank and enter -0- on line 6.					
		et \$11,750 from the amount on line 4a. Enter the result	5	251,167,912		27 675 704	
6		ount on line 5 by 15% (.15) and enter the result			6	37,675,704	
	_	6 is zero, stop; you cannot take this credit. Otherwise, sk	ip Par	t II and enter the			
		r of line 3 or line 6 on line 13.					
		6 is equal to or more than line 3, skip Part II and enter the Otherwise, go to line 7.	amou	nt from line 3 on			
Pai	t II Certaiı	n Filers Who Have Three or More Qualifying Ch	ildrer	า			
7	6. If married fili	security and Medicare taxes from Form(s) W-2, boxes 4 and ng jointly, include your spouse's amounts with yours. If you lroad, see instructions on back	7	2,545,110			
8	1040 filers:	Enter the total of the amounts from Form 1040, lines 27 and 59, plus any taxes that you identified using code "UT" and entered on the dotted line next to line 63.	8	381,088			
	1040A filers: 1040NR filers:	Enter -0 Enter the total of the amounts from Form 1040NR, line 54, plus any taxes that you identified using code "UT" and entered on the dotted line next to line 58.					
9	Add lines 7 and		9	2,926,198			
10	1040 filers:	Enter the total of the amounts from Form 1040, lines 66a and 67.					
	1040A filers:	Enter the total of the amount from Form 1040A, line 40a, plus any excess social security and tier 1 RRTA taxes withheld that you entered to the left of line 42 (see instructions on back).	10	3,529,606			
	1040NR filers:	Enter the amount from Form 1040NR, line 61.					
		, , , , , , , , , , , , , , , , , , , ,					
11	Subtract line 10	from line 9. If zero or less, enter -0			11	1,366,944	
12	Enter the larger	of line 6 or line 11			12	2,981,833	
	Next, enter the	smaller of line 3 or line 12 on line 13.					
Pai	t III Additio	nal Child Tax Credit					
					12	16 600 040	
13	This is your a	dditional child tax credit		1040 A 1040 A	For For	ter this amount on 1040, line 68, rm 1040A, line 41, or 1040NR, line 62	

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AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) **Parents' Election To Report Child's Interest and Dividends** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

► See instructions. ► Attach to parents' Form 1040 or Form 1040NR.

Your social security number Name(s) shown on your return Total Forms Filed = 206,336

Caution. The federal income tax on your child's income, including qualified dividends and capital gain distributions, may be less if you file a separate tax return for the child instead of making this election. This is because you cannot take certain tax benefits

	your child could take on his or her own return. For details, see <b>Tax</b>	bene	rits you cannot take			
Α	Child's name (first, initial, and last)  Combined Totals for Forr	n 8814	1	ВС	hild's social security n	umber
_			<u> </u>		1 1	$\overline{}$
С	If more than one Form 8814 is attached, check here		<u> </u>			
Pa	Child's Interest and Dividends To Report on Your F	eturi	n			
1a	Enter your child's <b>taxable</b> interest. If this amount is different from t child's Forms 1099-INT and 1099-OID, see the instructions		nounts shown on the	1a	143,055	
b	Enter your child's <b>tax-exempt</b> interest. <b>Do not</b> include this amount on line 1a	1b	6,729			
<b>2</b> a	Enter your child's ordinary dividends, including any Alaska Permandchild received any ordinary dividends as a nominee, see the instruc			2a	309,337	
b	Enter your child's qualified dividends included on line 2a. See the instructions	2b	99,575			
3	Enter your child's capital gain distributions. If your child received ar as a nominee, see the instructions			3	202,615	
4	Add lines 1a, 2a, and 3. If the total is \$1,700 or less, skip lines 5 thr If the total is \$8,500 or more, <b>do not</b> file this form. Your child <b>mus</b> to report the income.	t file h	is or her own return	4	655,007	
5	Base amount			5	1,700	00
6	Subtract line 5 from line 4			6	179,612	
	If both lines 2b and 3 are zero or blank, skip lines 7 through 10, go to line 12. Otherwise, go to line 7.	ente	r -0- on line 11, and			
7	Divide line 2b by line 4. Enter the result as a decimal (rounded to at least three places)	7				
8	Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places)	8				
9	Multiply line 6 by line 7. Enter the result here. See the instructions for where to report this amount on your return	9	34,920			
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return	10	72,318			
11	Add lines 9 and 10			11	107,239	
12	Subtract line 11 from line 6. Include this amount in the total on Fo	rm 10	040, line 21, or Form			
	1040NR, line 21. In the space next to line 21, enter "Form 8814" an					
	checked the box on line C above, see the instructions. Go to line	3 bel	ow	12	73,618	
Pai	t II Tax on the First \$1,700 of Child's Interest and Divid	dends	5			
13	Amount not taxed			13	850	00
14	Subtract line 13 from line 4. If the result is zero or less, enter -0			14	215,712	
15	Tax. Is the amount on line 14 less than \$850?		)	15	21,550	
	No. Enter \$85 here and see the <b>Note</b> below.  Yes. Multiply line 14 by 10% (.10). Enter the result here and see the	ne <b>No</b> t	e below	_ 13		
Note	e. If you checked the box on line C above, see the instructions. Other			om line	15 in the tax you	enter
	form 1040, line 44, or Form 1040NR, line 41. Be sure to check box a					

# **Like-Kind Exchanges**

(and section 1043 conflict-of-interest sales)

► Attach to your tax return.

2007
Attachment Sequence No. 109

Department of the Treasury Internal Revenue Service

Name(s) shown on tax return

Total Forms Filed = 197,019

Identifying number

Pa	rt I Information on the Like-Kind Exchange						
1	Note: If the property described on line 1 or line 2 is real or personal p  Description of like-kind property given up ▶						
2	Description of like-kind property received ▶						
3	Date like-kind property given up was originally acquired (month, or	day, year) .		3	/	/	
4	Date you actually transferred your property to other party (month,	day, year).		4	/	/	
5	Date like-kind property you received was identified by written not day, year). See instructions for 45-day written notice requirement		party (month,	5	/	/	
6	Date you actually received the like-kind property from other party (months)	th, day, year). S	See instructions	6	/	/	
7	Was the exchange of the property given up or received made with (such as through an intermediary)? See instructions. If "Yes," comp					Yes	□No
Pa	rt II Related Party Exchange Information						
8	Name of related party	Relation	ship to you	Relate	ed party's ide	ntifying	number
	Address (no., street, and apt., room, or suite no., city or town, state, and ZIP code)	<u> </u>					
9	During this tax year (and before the date that is 2 years after the la exchange), did the related party directly or indirectly (such as thro part of the like-kind property received from you in the exchange?	ugh an interm	ediary) sell or dis	pose	of any	Yes	□No
10	During this tax year (and before the date that is 2 years after the la exchange), did you sell or dispose of any part of the like-kind prop					Yes	□No
	If both lines 9 and 10 are "No" and this is the year of the exchange, go year of the exchange, stop here. If either line 9 or line 10 is "Yes," cor gain or (loss) from line 24 <b>unless</b> one of the exceptions on line 11 app	nplete Part III a					
11	If one of the exceptions below applies to the disposition, check the	ne applicable	box:				
а	☐ The disposition was after the death of either of the related pa	rties.					
b	☐ The disposition was an involuntary conversion, and the threat	of conversion	occurred after t	he ex	change.		
c	You can establish to the satisfaction of the IRS that neither to principal purpose. If this box is checked, attach an explanation			on ha	d tax avoi	dance	as its

# 2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

Form 8824 (2007) AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Page 2 Name(s) shown on tax return. Do not enter name and social security number if shown on other side. Your social security number

			i i	
Pa	rt III Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property	Rec	eived	
	Caution: If you transferred and received (a) more than one group of like-kind properties or (b) cash of see Reporting of multi-asset exchanges in the instructions.	r othei	r (not like-kind) pro	perty,
	Note: Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherw	ise, g	o to line 15.	
2	Fair market value (FMV) of other property given up   12   2,047,995			
3	Adjusted basis of other property given up			
14	Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or (loss) in the same manner as if the exchange had been a sale	14	1,474,773	
	Caution: If the property given up was used previously or partly as a home, see Property used as home in the instructions.			
15	Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced			
	(but not below zero) by any exchange expenses you incurred (see instructions)	15	4,524,638	
16	FMV of like-kind property you received	16	58,822,899	
17	Add lines 15 and 16	17	63,347,537	
18	Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses <b>not</b> used on line 15 (see instructions)	18	37,536,419	
19	Realized gain or (loss). Subtract line 18 from line 17	19	25,811,117	
20	Enter the smaller of line 15 or line 19, but not less than zero	20	3,814,386	
21	Ordinary income under recapture rules. Enter here and on Form 4797, line 16 (see instructions) .	21	112,683	
22	Subtract line 21 from line 20. If zero or less, enter -0 If more than zero, enter here and on Schedule D or Form 4797, unless the installment method applies (see instructions)	22	3,729,222	
23	Recognized gain. Add lines 21 and 22	23	3,841,905	
24	Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions	24	21,974,952	
25	Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23.	25	36,853,687	
Pa	rt IV Deferral of Gain From Section 1043 Conflict-of-Interest Sales			
26	Enter the number from the upper right corner of your certificate of divestiture. ( <b>Do not</b> attach a copy of your certificate. Keep the certificate with your records.)			
27	Description of divested property ▶			
28	Description of replacement property ►			
		29	, ,	
29	Date divested property was sold (month, day, year)	29	//	
30	Sales price of divested property (see instructions)			
31	Basis of divested property			
32	Realized gain. Subtract line 31 from line 30	32		
33	Cost of replacement property purchased within 60 days after date of sale			
34	Subtract line 33 from line 30. If zero or less, enter -0	34		-
35	Ordinary income under recapture rules. Enter here and on Form 4797, line 10 (see instructions)	35		
36	Subtract line 35 from line 34. If zero or less, enter -0 If more than zero, enter here and on Schedule D or Form 4797 (see instructions)	36		
37	<b>Deferred gain.</b> Subtract the sum of lines 35 and 36 from line 32	37		
00	Basis of replacement property Subtract line 37 from line 33	38		

Form **8829** 

## AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) **Expenses for Business Use of Your Home**

► File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.

2007
Attachment

Department of the Treasury Sequence No. 66 See separate instructions. Internal Revenue Service Name(s) of proprietor(s) Your social security number Total Forms Filed = Not available Part I Part of Your Home Used for Business Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory 1 2 2 3 For daycare facilities not used exclusively for business, go to line 4. All others go to line 7. Multiply days used for daycare during year by hours used per day Total hours available for use during the year (365 days  $\times$  24 hours) (see instructions) 5 Divide line 4 by line 5. Enter the result as a decimal amount . . . 6 6 Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3. . . . . . . . 7 % Part II **Figure Your Allowable Deduction** Enter the amount from Schedule C, line 29, plus any net gain or (loss) derived from the business use of your home and shown on Schedule D or Form 4797. If more than one place of business, see instructions 8 See instructions for columns (a) and (b) before (a) Direct expenses (b) Indirect expenses completing lines 9-21. 9 Casualty losses (see instructions) . . . . . 9 10 10 Deductible mortgage interest (see instructions) 11 11 Real estate taxes (see instructions) . . . . 12 12 Add lines 9, 10, and 11. . . . . . . . . . 13 13 Multiply line 12, column (b) by line 7 . . . . 14 Add line 12, column (a) and line 13. . . . . 14 15 15 Subtract line 14 from line 8. If zero or less, enter -0-16 16 Excess mortgage interest (see instructions) . . 17 17 18 18 19 19 20 20 Other expenses (see instructions) . . . . . 21 21 22 22 Add lines 16 through 21 . . . . . . . . . . 23 Carryover of operating expenses from 2006 Form 8829, line 42 . . . 24 25 25 Add line 22 in column (a), line 23, and line 24 . . . . . . . . . . . . . . 26 26 Allowable operating expenses. Enter the **smaller** of line 15 or line 25 Limit on excess casualty losses and depreciation. Subtract line 26 from line 15 . . . 27 27 28 1,440,170 29 Carryover of excess casualty losses and depreciation from 2006 Form 8829, line 43 31 31 32 32 Allowable excess casualty losses and depreciation. Enter the smaller of line 27 or line 31 . . . 33 33 105,800 Casualty loss portion, if any, from lines 14 and 32. Carry amount to Form 4684, Section B. 34 Allowable expenses for business use of your home. Subtract line 34 from line 33. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions ▶ 35 **Depreciation of Your Home** Part III Enter the **smaller** of your home's adjusted basis or its fair market value (see instructions) . 37 37 38 38 39 40 % 40 Depreciation percentage (see instructions) Depreciation allowable (see instructions). Multiply line 39 by line 40. Enter here and on line 29 above 41 Part IV Carryover of Unallowed Expenses to 2008

For Paperwork Reduction Act Notice, see page 4 of separate instructions.

1,275,113

43

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) **Qualified Adoption Expenses** 

Attach to Form 1040 or 1040NR.

See separate instructions.

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

Name(s) shown on return Your social security number Total Forms Filed = 111,480 Before you begin: See Definitions on page 1 of the instructions. Information About Your Eligible Child or Children—You must complete this part. See page 2 of the instructions for details, including what to do if you need more space. Check if child was-1 (e) Child's year Child's born before a child Child's name identifying number of birth **1990** and with special foreian disabled needs child First Last Child Child 2 Caution. If the child was a foreign child, see Special rules in the instructions for line 1, column (e), that begin on page 2, before you complete Part II or Part III. If you received employer-provided adoption benefits, complete Part III on the back next. Part II Adoption Credit Child 1 Child 2 \$11,390 00 \$11,390 00 Maximum adoption credit per child Did you file Form 8839 for a prior year for the same child? ■ No. Enter -0-. Yes. See page 4 of the instructions for the amount to enter. Subtract line 3 from line 2 Qualified adoption expenses (see page 4 5 699,350 85,208 of the instructions) . . . . . . . . . Caution. Your qualified adoption expenses may not be equal to the adoption expenses you paid in 2007. 6 Enter the **smaller** of line 4 or line 5 467,495 Add the amounts on line 6. If zero, skip lines 8 through 11 and enter -0- on line 12 . 7 Modified adjusted gross income (see page 4 of the instructions) . . . Is line 8 more than \$170,820? ■ No. Skip lines 9 and 10, and enter -0- on line 11. ☐ **Yes.** Subtract \$170,820 from line 8 . . . . . . . . . Divide line 9 by \$40,000. Enter the result as a decimal (rounded to at least three places). 10 10 11 11 Multiply line 7 by line 10 . . . 12 441,516 12 Credit carryforward from prior years (line 23 of your Credit Carryforward Worksheet on 685,020 13 1,126,536 14 14 Add lines 12 and 13 Enter the amount from Form 1040, line 46, or Form 1040NR, line 43 . | 15 Enter the total of any amounts from 1040 filers: 16 Form 1040, lines 47 through 49, line 51, and line 53; line 12 of the Line 11 Worksheet in Pub. 972 (see page 4 of the instructions); Form 8396, line 16 11; and Form 5695, line 15. **1040NR filers:** Enter the total of any amounts from Form 1040NR, lines 44, 46, and 48; line 12 of the Line 11 Worksheet in Pub. 972 (see page 4 of the instructions); Form 8396, line 11; and Form 5695, line 15. 17 Subtract line 16 from line 15 . . Adoption credit. Enter the smaller of line 14 or line 17 here and include on Form 1040,

you may have a credit carryforward (see page 4 of the instructions)

line 54, or Form 1040NR, line 49. Check box c on that line. If line 17 is smaller than line 14,

396,039

Cat. No. 228431

#### Part III Employer-Provided Adoption Benefits

			Child 1		Child 2				
19	Maximum exclusion per child	19	\$11,390	00	\$11,390	00			
20	Did you receive employer-provided adoption benefits for a prior year for the same child?  No. Enter -0  Yes. See page 5 of the instructions for the amount to enter.	20							
21	Subtract line 20 from line 19	21							
22	Employer-provided adoption benefits you received in 2007. This amount should be shown in box 12 of your 2007 Form(s) W-2 with code T	22							
23	Add the amounts on line 22						23	41,522	
24	Enter the <b>smaller</b> of line 21 or line 22. But if the child was a child with special needs and the adoption became final in 2007, enter the amount from line 21	24							
25	Add the amounts on line 24. If zero, skip line enter -0- on line 30, and go to line 31		6 through 29,	25					
26	Modified adjusted gross income (from the worksheet on page 6 of the instructions)								
27	Is line 26 more than \$170,820?  No. Skip lines 27 and 28, and enter -0- on line 29.  Yes. Subtract \$170,820 from line 26								
28	Divide line 27 by \$40,000. Enter the result a to at least three places). Do not enter more			28	× .				
29	Multiply line 25 by line 28			29					
30	Excluded benefits. Subtract line 29 from	line 2	25				30	29,305	
31	Taxable benefits. Is line 30 more than line 23?  No. Subtract line 30 from line 23. Also, include this amount, if more than zero, on line 7 of Form 1040 or line 8 of Form 1040NR. On the dotted line next to line 7 of Form 1040 or line 8 of Form 1040NR, enter "AB."								
	Yes. Subtract line 23 from line 30. Enter the total you would enter on line by the amount on Form 8839, line or line 8 of Form 1040NR. Enter line.		31	12,217					

You may be able to claim the adoption credit in Part II on the front of this form if any of the following apply.



- You paid adoption expenses in 2006, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2006.
- The total adoption expenses you paid in 2007 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2007 or earlier.
- You adopted a child with special needs and the adoption became final in 2007.

184

8844 **8844** 

# AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Empowerment Zone and Renewal Community Employment Credit

► Attach to your tax return.

OMB No. 1545-1444

2007

Attachment
Sequence No. 99

Department of the Treasury Internal Revenue Service Name(s) shown on return

Total Forms Filed = 36,166

Identifying number

Total 1 011115 1 lieu = 30, 100		
Part I Current Year Credit		_
1 Enter the total qualified wages paid or incurred during calendar year 2007 only (see insti	ructions)	
a Qualified empowerment zone wages \$		3,209
<b>b</b> Qualified renewal community wages \$	4.1	4,054
2 Add lines 1a and 1b. You <b>must</b> subtract this amount from your deduction for salaries and		
B Employment zone and renewable community employment credit from partnerships, S corpo	-	
cooperatives, estates, and trusts		
4 Add lines 2 and 3. Partnerships and S corporations, report this amount on Schedule K; all ot		
to line 5		
5 Empowerment zone and renewal community employment credit included on line 4 from		
activities (see instructions)	· · · · · · · · · · · · · · · · · · ·	
Subtract line 5 from line 4		
Passive activity credit allowed for 2007 (see instructions)	7	8,286
Carryforward of empowerment zone and renewal community employment credit to 2007		123,275
Carryback of empowerment zone and renewal community employment credit from 2008 (see instru		
Add lines 6 through 9. Cooperatives, estates, and trusts, go to line 11. All others, use this ar		
complete Part II		287,330
Amount allocated to the patrons of the cooperative or the beneficiaries of the estate or tr		
instructions)	11	
Cooperatives, estates, and trusts. Subtract line 11 from line 10. Use this amount to complete	e Part II 12	
art II Allowable Credit		
Regular tax before credits:		
• Individuals. Enter the amount from Form 1040, line 44; Form 1040NR, line 41	1	
• Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the applicable line of		
your return	13	
• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and		
1b, or the amount from the applicable line of your return		
Alternative minimum tax:		
• Individuals. Enter the amount from Form 6251, line 35		
• Corporations. Enter the amount from Form 4626, line 14	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	351,430
• Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56	J	
5 Add lines 13 and 14	15	
Ga Credits from Form 1040, lines 47 through 50 and lines 52 through 54 (or		
Form 1040NR, lines 44, 45, and 47 through 49)		
<b>b</b> Foreign tax credit		
c Credits from Forms 5735 and 8834		
d Non-business alternative motor vehicle credit (Form 8910, line 18) 16d		
e Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)		
<b>f</b> Add lines 16a through 16e	16f	
Net income tax. Subtract line 16f from line 15. If zero, skip lines 18 through 24 and enter -0- on		13,489,739
Net regular tax. Subtract line 16f from line 13. If zero or less, enter -0-		
Tentative minimum tax (see instructions)	671	
Enter 25% (.25) of the excess, if any, of line 18 over \$25,000 (see		
instructions)		
Multiply line 19 by 75% (.75)		
Properties the greater of line 20 or line 21		
Subtract line 22 from line 17. If zero or less, enter -0		
General business credit (Form 3800, line 19)		
Subtract line 24 from line 23	25	
Government Cooperatives, estates, and trusts. Enter the smaller of li		
line 25. Report this amount on Form 1041, Schedule G, line 2c; or Form 1120-C, Schedule J, I		
line 25 is smaller than line 12, see instructions. <b>All others.</b> Enter the <b>smaller</b> of line 10 or line 25	· ·	
this amount on Form 1040, line 55; Form 1040NR, line 50; Form 1120, Schedule J, line 50		140.000
applicable line of your return. If line 25 is smaller than line 12, see instructions	26	116,603

8846

## Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

OMB No. 1545-1414

2007
Attachment
Sequence No. 98

Name(s) shown on return Identifying number

Total Forms Filed = 69,655

Note. Claim this credit only for social security and Medicare taxes paid by a food or beverage establishment where tipping is customary for providing food or beverages. See the instructions for line 1

cust	omary for providing food or beverages. See the instructions for line 1.		
Pa	Current Year Credit		
1	Tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year (see instructions)	1	238,274
2	Tips not subject to the credit provisions (see instructions)	2	22,143
3	Creditable tips. Subtract line 2 from line 1	3	216,130
4	Multiply line 3 by 7.65% (.0765). If you had any tipped employees whose wages (including tips) exceeded \$97,500, see instructions and check here	4	16,490
5	Credit for employer social security and Medicare taxes paid on certain employee tips from partnerships and S corporations	5	365,314
6	Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K; all others, go to line 7	6	381,804
7	Credit for employer social security and Medicare taxes paid on certain employee tips included on line 6 from passive activities (see instructions)	7	50,556
8	Subtract line 7 from line 6	8	331,248
9	Credit for employer social security and Medicare taxes paid on certain employee tips allowed	0	36,481
10	for 2007 from passive activities (see instructions)	9	30,401
10	tips from 2008 (see instructions)	10	
11	Add lines 8 through 10. Use this amount to complete Part II	11	367,729
	rt II Allowable Credit		001,120
12	Regular tax before credits (see instructions)	12	
13	Alternative minimum tax (see instructions)	13	
14	Add lines 12 and 13	14	
	Credits from Form 1040, lines 47 through 50 and 52 through 54 (or Form 1040NR, lines 44, 45, and 47 through 49)		
b	Foreign tax credit		
	Credits from Forms 5735 and 8834		
d	Non-business alternative motor vehicle credit (Form 8910, line 18)		
	Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)		
f	Add lines 15a through 15e	15f	
16	Net income tax. Subtract line 15f from line 14. If zero, skip lines 17 through 20 and enter -0-		
	on line 21	16	21,524,799
17	Net regular tax. Subtract line 15f from line 12. If zero or less, enter -0	17	20,737,602
18	Enter 25% (.25) of the excess, if any, of line 17 over \$25,000 (see instructions)	18	4,908,636
19	Subtract line 18 from line 16. If zero or less, enter -0	19	
	General business credit (Form 3800, line 19)		
b	Empowerment zone and renewal community employment credit (Form 8844, line 26)		
С	Work opportunity credit (Form 5884, line 22)		
d	Alcohol fuels credit (Form 6478, line 24)		
	Renewable electricity, refined coal, and Indian coal production credit (Form 8835, line 36)		
f	Add lines 20a through 20e	20f	
21	Subtract line 20f from line 19. If zero or less, enter -0	21	
22	<b>Credit allowed for the current year.</b> Enter the smaller of line 11 or 21. Report this amount on Form 1040, line 55; Form 1040NR, line 50; Form 1120, Schedule J, line 5c; or the		
_	applicable line of your return. If line 21 is smaller than line 11, see instructions	22	291,552

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## AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Archer MSAs and **Long-Term Care Insurance Contracts**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

► Attach to Form 1040 or Form 1040NR.

► See separate instructions.

Attachment Sequence No. **39** 

Name	Total Forms Filed - 90 227	social security r ccount holder.	If both	spouses		1	1		
<u></u>	11			1 of the instructions			<u> </u>	Alam F	
	tion A. Archer MSAs. If you have only a Medicare Ad t I General Information. See page 2 of the instruc-		15A, S	skip Section A	and con	тріете	Sec	tion E	<u>5.</u>
Par	General information. See page 2 of the instruc-	CHORIS.						Yes	Nia
	5.1		^				10	res	INO
	Did you or your employer make contributions to your Archer M						1a 1b		
	If "Yes," were you uninsured when the MSA was established (s						ID		
	If line 1a is "Yes," indicate coverage under high deductible hea				☐ Family	70	2a		
2a b	If married, did your spouse or spouse's employer make contrib If "Yes," was your spouse uninsured when the MSA was estab	outions to yo lished (see r	ur spo nage 2	ouse's Archer MS.  Of the instruction	A for 200 ns)?	<i>l</i> :	2b		
	If line 2a is "Yes," indicate coverage under high deductible hea	· ·	_		Family	•	20		
Par						compl	etino	this	part
	If you are filing jointly and both you and your						_		
	coverage, complete a separate Part II for each								,
3	Total employer contributions to your Archer MSA(s) for 200	7	3	23,499					
4	Archer MSA contributions you made for 2007, including those		Janua	rv 1 2008 throug	dr				
	April 15, 2008, that were for 2007. Do not include rollovers (see				4	3	32,10	2	
5	Limitation from the worksheet on page 3 of the instructions				5	3	33,25	5	
6	Compensation (see page 3 of the instructions) from the emplo				ole				
	health plan. (If self-employed, enter your earned income from								
	the high deductible health plan was established.)				6	1,4	408,7	'48	
7	Archer MSA deduction. Enter the smallest of line 4, 5, or	6 here. Als	o inc	lude this amount	in				
	the total on Form 1040, line 36, or Form 1040NR, line 34. O				40,				
	line 36, or Form 1040NR, line 34, enter "MSA" and the amo				. 7		21,74	8	
	Caution: If line 4 is more than line 7, you may have to pay an a	additional tax	(see	page 3 of the ins	tructions).				
Par	t III Archer MSA Distributions								
8a	Total distributions you and your spouse received in 2007 from	om all Arch	er MS	SAs (see page 4			10.04	_	
	the instructions)				8a		10,04	1	
b	Distributions included on line 8a that you rolled over to another Ar								
	Also include any excess contributions (and the earnings on the				on   <b>8b</b>		522		
	line 8a that were withdrawn by the due date of your return (see	e page 4 of 1	ine ins	structions)	8c		39,54	2	
_	Subtract line 8b from line 8a				9		37,11		
9	Unreimbursed qualified medical expenses (see page 4 of th		1				.,,		
10	Taxable Archer MSA distributions. Subtract line 9 from lin								
	include this amount in the total on Form 1040, line 21, or Foline next to line 21, enter "MSA" and the amount				10		9,962	2	
112	If any of the distributions included on line 10 meet any of the								
IIa	<b>15% Tax</b> (see page 4 of the instructions), check here								
h	Additional 15% tax (see page 4 of the instructions). Enter 15								
~	on line 10 that are subject to the additional 15% tax. Also								
	Form 1040, line 63, or Form 1040NR, line 58. On the dotted	d line next to	o Forr	m 1040, line 63,	or				
	Form 1040NR, line 58, enter "MSA" and the amount						1,492		
Sec	tion B. Medicare Advantage MSA Distributions. If y								
	distributions in 2007 from a Medicare Advant	age MSA,	com	olete a separat	e Sectio	n B to	or ea	ch sp	ouse
	(see page 4 of the instructions).								
12	Total distributions you received in 2007 from all Medicare A	_					1 663	,	
	instructions)						1,663		
13	Unreimbursed qualified medical expenses (see page 5 of the						1,662	-	
14	Taxable Medicare Advantage MSA distributions. Subtract								
	enter -0 Also include this amount in the total on Form 104						*		
4-	On the dotted line next to line 21, enter "Med MSA" and th				. 14				
15a	If any of the distributions included on line 14 meet any of the								
h	<b>50% Tax</b> (see page 5 of the instructions), check here <b>Additional 50% tax</b> (see page 5 of the instructions). Also								
D	Form 1040, line 63, or Form 1040NR, line 58. On the dotted								
	Form 1040NR, line 58, enter "Med MSA" and the amount				. 15b		*		

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) Attachment Sequence No. 39 Form 8853 (2007)

Page 2

Name of policyholder (as shown on Form 1040)

Socia	I security	number
of pol	icyholder	

	If more than one Section C is attached, check here					.▶ □				
16a	Name of insured ▶	ne of insured ▶								
17	In 2007, did anyone other than you receive payments on a per diem or o LTC insurance contract covering the insured or receive accelerated depolicy covering the insured?	eath b	enefits under a	life insura	ınce	□ No				
18	Was the insured a terminally ill individual?	erated	death benefits	that were		□ No				
19	Gross LTC payments received on a per diem or other periodic basis. Enter from box 1 of all Forms 1099-LTC you received with respect to the indiem" box in box 3 is checked	sured	on which the "	Per	792,556					
	Caution: Do not use lines 20 through 28 to figure the taxable amount of LTC insurance contract that is not a qualified LTC insurance contract are not excludable from your income (for example, if the benefits are not or sickness through accident or health insurance), report the amount on Form 1040, line 21.	t. Inst t paid	ead, if the bene for personal inju	ries						
20	Enter the part of the amount on line 19 that is from qualified LTC insu	urance	contracts .	20	717,306					
21	Accelerated death benefits received on a per diem or other periodic because the insured was terminally ill (see page				26,091					
22	Add lines 20 and 21			22	743,397					
	Note: If you checked "Yes" on line 17 above, see Multiple Payees on page 7 of the instructions before completing lines 23 through 27.									
23	Multiply \$260 by the number of days in the LTC period	23	2,357,897							
24	Costs incurred for qualified LTC services provided for the insured during the LTC period (see page 7 of the instructions)	24	1,174,380							
25	Enter the <b>larger</b> of line 23 or line 24	25	2,617,067							
26	Reimbursements for qualified LTC services provided for the insured during the LTC period	26	335,277							
	Caution: If you received any reimbursements from LTC contracts issued before August 1, 1996, see page 7 of the instructions.									
				27	2,283,561					
27	Per diem limitation. Subtract line 26 from line 25									
27 28	Taxable payments. Subtract line 27 from line 22. If zero or less, en amount in the total on Form 1040, line 21. On the dotted line next to	ter -0								

2007 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

#### **Education Credits** (Hope and Lifetime Learning Credits)

► See instructions to find out if you are eligible to take the credits. Department of the Treasury ► Attach to Form 1040 or Form 1040A. Internal Revenue Service (99)

Attachment

Sequence No. 50

OMB No. 1545-0074

Name(s) shown on return

Total Forms Filed = 7,499,740

Caution: • You cannot take the Hope credit and the lifetime learning credit for the same student in the same year.

Your social security number

Before you begin: Figure the amount of any credit you are claiming on Form 1040, line 51.   Part II   Hope Credit. Caution: You cannot take the Hope credit for more than 2 tax years for the same student.   1		<ul> <li>You cannot take in the same year.</li> </ul>	both an education c	redit and the tuition	on and fees	dedu	iction (see Fo	rm 89°	17) fo	r the <b>same st</b>	udent
(a) Student's name (as shown on page 1 of your tax return)								o for t	the ac	ma student	
Student # 2   183,024   3,621   143,869   2,983   Student # 4   2,216   1,662	_	(a) Student's name (as shown on page 1 of your tax return) First name	(b) Student's social security number (as shown on page 1	(c) Qualified expenses (see instructions). Do not enter more than \$2,200 for	(d) Er smalle amo	nter the punt in the contract of the contract	he the <b>(e</b> )	) Add nn (c) a	and	(f) Enter one of the amou	-half nt in
Student # 2   183,024   3,621   143,869   2,983   Student # 4   2,216   1,662		Children # 4		4 022 704						3 801 210	
Student # 3   3,621   2,983   1,662											<del>                                     </del>
2 Tentative Hope credit. Add the amounts on line 1, column (f). If you are taking the lifetime learning credit for another student, go to Part III column (f). If you are taking the lifetime learning credit (a) Student's name (as shown on page 1 of your tax return)										The state of the s	
credit for another student, go to Part II; otherwise, go to Part III  3 (a) Student's name (as shown on page 1 of your tax return)  First name  Last name  Student # 1  Student # 3  Add the amounts on line 3, column (c), and enter the total . Student # 4  Enter the smaller of line 4 or \$10,000  Tentative lifetime learning credit. Multiply line 5 by 20% (.20) and go to Part III  Allowable Education Credits  Tentative education credits. Add lines 2 and 6  Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er)  Enter the amount from Form 1040, line 38*, or Form 1040A, line 22  Subtract line 9 from line 8. If zero or less, stop; you cannot take any education credits  11 Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)  12 If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)  13 Multiply line 7 by line 12  15 Enter the total, if any, of your credits from Form 1040, lines 47, 48, and 51; or Form 1040A, lines 29 and 30  4 (b) Student's social security mumber (as shown on page 1 of your tax return)  16 (c) Qualifie expenses (sinstruction expenses (sinstruction of expenses (sinstruction expe		Student # 4		2,216						1,662	
Part II Lifetime Learning Credit  (a) Student's name (as shown on page 1 of your tax return)  First name  Last name  Last name  Student # 1  Student # 2  Student # 3  Add the amounts on line 3, column (c), and enter the total Student # 3  Enter the smaller of line 4 or \$10,000  Tentative lifetime learning credit. Multiply line 5 by 20% (.20) and go to Part III  Allowable Education Credits  Tentative education credits. Add lines 2 and 6  Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er)  Enter the amount from Form 1040, line 38*, or Form 1040A, line 22  If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 14, enter the amount from line 7 on line 13 and go to line 14. Enter the amount from Form 1040, line 46, or Form 1040A, line 28  Enter the total, if any, of your credits from Form 1040A, lines 47, 48, and 51; or Form 1040A, lines 29 and 30	2	Tentative Hope credit.	Add the amounts on li	ne 1, column (f). If	you are taki	ing th	e lifetime learr	ning			
3 (a) Student's name (as shown on page 1 of your tax return) First name  Last name  Student # 1 Student # 1 Student # 2 Student # 3 Student # 3  Add the amounts on line 3, column (c), and enter the total. Student # 4 Enter the smaller of line 4 or \$10,000  Tentative lifetime learning credit. Multiply line 5 by 20% (.20) and go to Part III  Allowable Education Credits  Tentative education credits. Add lines 2 and 6 Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er)  Enter the amount from Form 1040, line 38*, or Form 1040A, line 22  Subtract line 9 from line 8. If zero or less, stop; you cannot take any education credits  In Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)  In Int 12,495,545  In Int 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 15, enter the amount from Form 1040, line 46, or Form 1040A, line 28  Enter the amount from Form 1040, line 46, or Form 1040A, line 28  Enter the amount from Form 1040, line 46, or Form 1040A, lines 47, 48, and 51; or Form 1040A, lines 29 and 30	De			wise, go to Part II	<u> </u>		<del></del>	<u> </u>	2	4,048,740	
Student # 1   25,457,324     Student # 2   621,639     Student # 3   17,906     Add the amounts on line 3, column (c), and enter the total   Student # 4   4   26,098,849     Enter the smaller of line 4 or \$10,000   5   20,739,133     Tentative lifetime learning credit. Multiply line 5 by 20% (.20) and go to Part III   Allowable Education Credits    Tentative education credits. Add lines 2 and 6   7   8,196,596     Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er)   9   Enter the amount from Form 1040, line 38*, or Form 1040A, line 22   9   373,084,441     10   283,699,196   11   112,495,545     11   112,495,545   12   If line 10 is less than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)   14   26,751,384   15   261,443   15   261,443   15   261,443   15   261,443   15   261,443   15   261,443   15   261,443   15   261,443   15   261,443   15   261,443   15   261,639   17,906   42   26,751,324   26,751,324   26,751,384   261,040   27,849,382   2		(a) Student's r	(a) Student's name (as shown on page 1 of your tax return) (b) Student's social security number (as shown on page							expenses (	see
Student # 2   621,639							1	<u>,                                      </u>		<u> </u>	
Add the amounts on line 3, column (c), and enter the total . Student #.4										621,639	Student
5 Enter the smaller of line 4 or \$10,000											1,903
Tentative lifetime learning credit. Multiply line 5 by 20% (.20) and go to Part III 6 4,147,856  Part III Allowable Education Credits  Tentative education credits. Add lines 2 and 6 7 8,196,596  Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er) 9 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22 9 373,084,441  Subtract line 9 from line 8. If zero or less, stop; you cannot take any education credits 10 283,699,196  If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places) 72,365,366 × 11 72,365,366  Multiply line 7 by line 12 14 26,751,384 15 261,443				enter the total . St	tudenț#4						
Part III Allowable Education Credits  7 Tentative education credits. Add lines 2 and 6  8 Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er)  9 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22  10 Subtract line 9 from line 8. If zero or less, stop; you cannot take any education credits  11 Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)  12 If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)  13 Multiply line 7 by line 12  14 Enter the amount from Form 1040, line 46, or Form 1040A, line 28  15 Enter the total, if any, of your credits from Form 1040, lines 47, 48, and 51; or Form 1040A, lines 29 and 30  16 A 26, 400, 640						 Dort l		•			
7 Tentative education credits. Add lines 2 and 6  8 Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er)  9 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22  10 Subtract line 9 from line 8. If zero or less, stop; you cannot take any education credits  11 Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)  12 If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)  13 Multiply line 7 by line 12  14 Enter the amount from Form 1040, line 46, or Form 1040A, line 28  15 Enter the total, if any, of your credits from Form 1040, lines 47, 48, and 51; or Form 1040A, lines 29 and 30  16 43,727,090  9 373,084,441  10 283,699,196  11 112,495,545  12 72,365,366  12 72,365,366  12 72,365,366				Tie 3 by 20% (.20)	and go to	raiti	<u> </u>	•	0	4,147,000	
8 Enter: \$114,000 if married filing jointly; \$57,000 if single, head of household, or qualifying widow(er)  9 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22  10 Subtract line 9 from line 8. If zero or less, stop; you cannot take any education credits  11 Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)  12 If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)  13 Multiply line 7 by line 12  15 Enter the amount from Form 1040, line 46, or Form 1040A, line 28  16 643,727,090  9 373,084,441  10 283.699,196  11 112,495,545  12 72,365,366  12 × .  13 7,849,382				 ი					7	8,196,596	
or qualifying widow(er)							 I	i			
9 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22  10 Subtract line 9 from line 8. If zero or less, stop; you cannot take any education credits  11 Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)  12 If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)  13 Multiply line 7 by line 12  14 Enter the amount from Form 1040, line 46, or Form 1040A, line 28  15 Enter the total, if any, of your credits from Form 1040, lines 47, 48, and 51; or Form 1040A, lines 29 and 30  16 400,040											
education credits  11 Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)  12 If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)  13 Multiply line 7 by line 12  14 Enter the amount from Form 1040, line 46, or Form 1040A, line 28  15 Enter the total, if any, of your credits from Form 1040, lines 47, 48, and 51; or Form 1040A, lines 29 and 30  16 283,699,196  11 112,495,545  72,365,366  20 72,365,366  12 72,365,366  13 7,849,382	9	Enter the amount from F	Form 1040, line 38*, c	or Form 1040A, lin	e 22 .	9	373,084,441				
or qualifying widow(er)  12 If line 10 is equal to or more than line 11, enter the amount from line 7 on line 13 and go to line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)  13 Multiply line 7 by line 12  14 Enter the amount from Form 1040, line 46, or Form 1040A, line 28  15 Enter the total, if any, of your credits from Form 1040, lines 47, 48, and 51; or Form 1040A, lines 29 and 30  16 261,443	10					10	283,699,196				
line 14. If line 10 is less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places)	11				nousehold,	11	112,495,545				
13 Multiply line 7 by line 12	12	line 14. If line 10 is less	s than line 11, divide	e line 10 by line 1	11. Enter th	ne res	sult as a deci	mal	12		
15 Enter the total, if any, of your credits from Form 1040, lines 47, 48, and 51; or Form 1040A, lines 29 and 30	13							<b>&gt;</b>	13	7,849,382	
51; or Form 1040A, lines 29 and 30	14						26,751,384				
16 Subtract line 15 from line 14. If zero or less, stop. You cannot take any education credits . <b>16</b> 26,489,942	15					15	261,443		-		
	16	Subtract line 15 from line	e 14. If zero or less,	stop. You cannot	take any ed	ducati	on credits .	<b>&gt;</b>	16	26,489,942	
17 Education credits. Enter the smaller of line 13 or line 16 here and on Form 1040, line 49, or Form 1040A, line 31	17	Education credits. Enter Form 1040A, line 31	er the smaller of line	13 or line 16 her	re and on F	orm	1040, line 49	, or ▶	17	6,910,412	

#4=

Form **8864** 

#### **Biodiesel and Renewable Diesel Fuels Credit**

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

• Attach to your tax return.

OMB No. 1545-1924

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Total Forms Filed = 4.306

Identifying number

Caution: You cannot claim any amounts on Form 8864 that you claimed (or will claim) on Schedule C (Form 720), Form 8849, or Form 4136.

Claimant has a certificate from the producer or importer of biodiesel or renewable diesel reported on lines 1 through 6 below and, if applicable, claimant also has a statement from the reseller. Claimant has no reason to believe that the information in the certificate or statement is false. Claimant may need to attach a copy of the certificate and statement. See *Certification* below.

Type of Fuel (a) Number of Gallons Sold or Used						Column (a) x Column (b)		
1	Biodiesel (other than agri-biodiesel)	1		\$ .5	0	261		
2	Agri-biodiesel	2		\$1.0	0	501		
3	Renewable diesel	3		\$1.0	0	*		
4	Biodiesel (other than agri-biodiesel) included in a biodiesel mixture				0	0		
5	Agri-biodiesel included in a biodiesel mixture	0	0					
6	Renewable diesel included in a renewable diesel mixture 6 \$1.00					0		
7	Qualified agri-biodiesel production (gallons sold)					*		
8	Add lines 1 through 7. Include this amount in your income for	2007 (	see instructions)		8	765	<u> </u>	
9	Biodiesel and renewable diesel fuels credit from partnership estates, and trusts				9	8,487		
10						9,252		
11								
12	Cooperatives, estates, and trusts. Subtract line 11 from line 10. line 1m			′	12			

#### **General Instructions**

Section references are to the Internal Revenue Code.

#### **Purpose of Form**

Use Form 8864 to figure your biodiesel and renewable diesel fuels credit. Claim the credit for the tax year in which the sale or use occurs. This credit consists of the:

- Biodiesel credit,
- Renewable diesel credit.
- Biodiesel mixture credit,
- · Renewable diesel mixture credit, and
- Small agri-biodiesel producer credit.

#### **Definitions and Special Rules**

#### Certification

To claim a credit on lines 1 through 6, you generally must attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, to Form 8864. To claim a credit on lines 3 or 6, the certificate must indicate at all appropriate locations that the fuel to which it relates is renewable diesel and state that the fuel meets the requirements discussed under *Renewable Diesel* on page 2. However, if the certificate or statement was attached to a previously filed claim, attach a separate sheet with the following information.

- Certificate identification number.
- Total gallons of agri-biodiesel, biodiesel other than agri-biodiesel, or renewable diesel on the certificate.
- Total gallons claimed on Schedule 3 (Form 8849).
- Total gallons claimed on Schedule C (Form 720).
- Total gallons claimed on Form 4136.

See Notice 2005-62 on page 443 of Internal Revenue Bulletin 2005-35 or Pub. 510, Excise Taxes, for the model certificate and statement.

#### **Biodiesel**

Biodiesel means the monoalkyl esters of long chain fatty acids derived from plant or animal matter which meet the registration requirements for fuels and fuel additives established by the Environmental Protection Agency (EPA) under section 211 of the Clean Air Act, and the requirements of the American Society of Testing and Materials (ASTM) D6751.

Biodiesel includes both agri-biodiesel and biodiesel other than agri-biodiesel.

#### **Agri-Biodiesel**

Agri-biodiesel means biodiesel derived solely from virgin oils, including esters derived from virgin vegetable oils from corn, soybeans, sunflower seeds, cottonseeds, canola, crambe, rapeseeds, safflowers, flaxseeds, rice bran, and mustard seeds, and from animal fats.

#### AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS) **Credit for Qualified Retirement Savings Contributions**

► Attach to Form 1040, Form 1040A, or Form 1040NR.

OMB No. 1545-0074 Attachment Sequence No. 55

Department of the Treasury Internal Revenue Service

► See instructions on back.

Name(s) shown on return Your social security number Total Forms Filed = 6,429,354



You cannot take this credit if either of the following applies.

- The amount on Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 36 is more than \$26,000 (\$39,000 if head of household; \$52,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 1990, (b) is claimed as a dependent on someone else's 2007 tax return, or (c) was a student (see instructions).

						(a) You			(b) Your spo	use
1	Traditional and	d Roth IRA co	ontributions for 2007. <b>D</b>	o not include rollover						
	contributions				1	1,873,410			783,946	
2		ntributions, ar	x) or other qualified emplor 501(c)(18)(D) plan c	ontributions for 2007		6,902,342			1,600,092	
3	Add lines 1 ar				3	8,775,751			2,384,038	
4	(including extensions) of your 2007 tax return (see instructions). If married filing jointly, include <b>both</b> spouses' amounts in <b>both</b> columns. See instructions for an exception				4	378,089 8,551,814			248,794 2,257,758	
					6	5,783,554			1,404,802	
6			smaller of line 5 or \$2			0,700,004		7	7,188,356	
7			6. If zero, <b>stop</b> ; you ca						7,100,000	
8			rm 1040, line 38*; For		.   8	184,499,304				
					0	104,499,304				
9	Enter the app	licable decim	nal amount shown belo	ow:						
	If line	2 is	Δr	nd your filing status	ie		ا ٦			
	II IIIIC	0 13—	Married	Head of		la Marriad filing	1			
	0	But not	filing jointly	household	_	le, Married filing				
	Over—	over—			1	eparately, or lifying widow(er)				
			Enter o	on line 9—	Qua	ullying widow(er)	-			
		\$15,500	.5	.5		.5				
	\$15,500	\$17,000	.5	.5		.2			.,	
	\$17,000	\$23,250	.5	.5		.1		9	X .	
	\$23,250	\$25,500	.5	.2		.1				
	\$25,500	\$26,000	.5	.1		.1				
	\$26,000	\$31,000	.5	.1		.0				
	\$31,000	\$34,000	.2	.1		.0				
	\$34,000	\$39,000	.1	.1		.0				
	\$39,000	\$52,000	.1	.0		.0				
	\$52,000		.0	.0		.0				
		Note: /	f line 9 is zero, <b>stop</b> ; y	you cannot take this o	credit					
10	Multiply line 7		· · · · · · · · · · · ·					10	1,241,682	
11			orm 1040, line 46; For		.					
				The state of the s	11	9,175,125				
40								•		
12	1040 filers:	through 49	otal of your credits fro	om lines 47						
	1040A filers:		tal of your credits from li	nos 20 through 21	12	547.949				
						0.1.,0.10				
	1040NR filers	Enter the tand 46.	otal of your credits fro	om lines 44						
13	Subtract line	12 from line	11. If zero, <b>stop</b> ; you o	cannot take this cred	it .			13	8,627,176	
	Credit for qu	alified retire	ment savings contril ), line 53; Form 1040A	butions. Enter the sn	naller			14	976,846	
									5 . 5.	
	See Pub. 590 f	or the amount	to enter if you are filing	Form 2555, 2555-EZ, or	4563 0	r you are excluding	inco	me fro	m Puerto Rico.	

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

#### AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

### **Health Savings Accounts (HSAs)**

► Attach to Form 1040 or Form 1040NR.

See separate instructions.

OMB No. 1545-0074 Attachment Sequence No. 53

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040 or Form 1040NR

Total Forms Filed = 1,243,268

Social security number of HSA beneficiary. If both spouses have HSAs, see page 2 of the instructions

Par	<b>HSA Contributions and Deduction.</b> See page 3 of the instructions before con are filing jointly and both you and your spouse each have separate HSAs, compleach spouse.			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2007 (see page 4 of the instructions)	☐ Se	elf-only 🗌 Far	nily
2	HSA contributions you made for 2007 (or those made on your behalf), including those made from January 1, 2008, through April 15, 2008, that were for 2007. <b>Do not</b> include employer contributions, contributions through a cafeteria plan, or rollovers (see page 4 of the instructions)	2	1,685,844	
3	If you were under age 55 at the end of 2007, and on the first day of <b>every</b> month during 2007, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$2,850 (\$5,650 for family coverage) (see page 4 of the instructions)	3	4,258,869	
4	Enter the amount you and your employer contributed to your Archer MSAs for 2007 from Form 8853, lines 3 and 4. If you or your spouse had family coverage under an HDHP at any time during 2007, also include any amount contributed to your spouse's Archer MSAs	4	21,924	
5	Subtract line 4 from line 3. If zero or less, enter -0	5	4,241,475	
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2007, see the instructions on page 4 for the amount to enter	6	4,155,957	
7	If you were age 55 or older at the end of 2007, married, and you or your spouse had family coverage under an HDHP at any time during 2007, enter your additional contribution amount (see page 4 of the instructions)	7	81,913	
8	Add lines 6 and 7	8	4,237,869	
9	Employer contributions made to your HSAs for 2007			
10	Qualified HSA funding distributions		4 457 700	
11	Add lines 9 and 10	11	1,157,732	
12	Subtract line 11 from line 8. If zero or less, enter -0-	12	3,238,433	
13	<b>HSA deduction.</b> Enter the <b>smaller</b> of line 2 or line 12 here and on Form 1040, line 25, or Form 1040NR, line 25	13	1,500,881	
	Caution: If line 2 is more than line 13, you may have to pay an additional tax (see page 5 of the instructions).	10	1,000,001	
Par	<b>HSA Distributions.</b> If you are filing jointly and both you and your spouse each had complete a separate Part II for each spouse.	ave se	eparate HSAs,	
14a	Total distributions you received in 2007 from all HSAs (see page 6 of the instructions)	14a	1,661,847	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return (see page 6 of the instructions)	14b	20,386	
С	Subtract line 14b from line 14a	14c	1,641,462	
15	Unreimbursed qualified medical expenses (see page 6 of the instructions)	15	1,561,087	
16	<b>Taxable HSA distributions.</b> Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Form 1040, line 21, or Form 1040NR, line 21. On the dotted line next to line 21, enter "HSA" and the amount	16	106,952	
	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 10% Tax (see page 6 of the instructions), check here  Additional 10% tax (see page 6 of the instructions). Enter 10% (.10) of the distributions included on line 16 that are subject to the additional 10% tax. Also include this amount in the total on Form 1040, line 63, or Form 1040NR, line 58. On the dotted line next to Form 1040, line 63, or			
	Form 10/10ND line 59, onter "USA" and the amount	476	0.225	

Department of the Treasury Internal Revenue Service

## AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

#### **Domestic Production Activities Deduction**

► Attach to your tax return. ► See separate instructions.

OMB No. 1545-1984 Attachment Sequence No. **143** 

Identifying number Name(s) as shown on return Total Forms Filed = 532.517 951,942,806 Domestic production gross receipts (DPGR) Allocable cost of goods sold. If you are using the small business 653.095.839 simplified overall method, skip lines 2 and 3 . . . . . . . If you are using the section 861 method, enter deductions and 148,910,930 3 losses allocable to DPGR. All others, see instructions If you are using the small business simplified overall method, enter the amount of cost of goods sold and other deductions or losses 55,508,961 you ratably apportion to DPGR. All others, skip line 4 . . . 857,676,044 Add lines 2 through 4 . . . . . . 94,266,762 Subtract line 5 from line 1 Qualified production activities income from estates, trusts, and certain partnerships and 66.629.283 S corporations (see instructions) 8 Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to line 10 9 Amount allocated to beneficiaries of the estate or trust (see instructions) . . . . . . . Qualified production activities income. Estates and trusts, subtract line 9 from line 8, all others, enter amount from line 8. If zero or less, enter -0- here, skip lines 11 through 19, 165,019,147 10 Income limitation (see instructions): • Individuals, estates, and trusts. Enter your adjusted gross income figured without the 381,751,026 11 • All others. Enter your taxable income figured without the domestic production activities deduction (tax-exempt organizations, see instructions) . . . . Enter the smaller of line 10 or line 11. If zero or less, enter -0- here, skip lines 13 through 118,177,645 12 7,009,528 Enter 6% of line 12 . . . . . . 13 13 140,597,512 14 Form W-2 wages (see instructions) Form W-2 wages from estates, trusts, and certain partnerships and S corporations 15 93,768,294 (see instructions) Add lines 14 and 15. Estates and trusts, go to line 17, all others, skip line 17 and go to line 16 17 Amount allocated to beneficiaries of the estate or trust (see instructions) . . . . 18 234,365,806 Estates and trusts, subtract line 17 from line 16, all others, enter amount from line 16 117,183,009 19 Form W-2 wage limitation. Enter 50% of line 18 . . . . . 19 20 6.723.795 20 21 Domestic production activities deduction from cooperatives. Enter deduction from 46,498 21 Form 1099-PATR, box 6 . . . . . . 94 22 Domestic production activities deduction. Combine lines 20 through 22 and enter the result here and on Form 1040, line 35; Form 1120, line 25; or the applicable line of your return 23 6,770,387

Form **8910** 

#### **Alternative Motor Vehicle Credit**

OMB No. 1545-1998

Department of the Treasury Internal Revenue Service Name(s) shown on return ► Attach to your tax return.

AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

Total Forms Filed = 176,161

Attachment Sequence No. 152

Form **8910** (2007)

Identifying number

Part I Tentative Credit									
Use a separate column for each vehicle. If you need more columns, additional Forms 8910 and include the totals on lines 8 and 12.	use		(a)			(b)		(c)	
<ol> <li>Year, make, and model of vehicle</li> <li>Enter date vehicle was placed in service (MM/DD/YYYY)</li> <li>Maximum credit allowable (see instructions)</li> </ol>	1 2 3	/	/	0/	/	/	0/	/ /	0/
4 Phaseout percentage (see instructions)	5			%			%		%
Part II Credit for Business/Investment Use Part of V	ehic	le							
6 Business/investment use percentage (see instructions)	6			%			%		%
7 Multiply line 5 by line 6	7								
8 Add columns (a) through (c) on line 7							8	17,700	
9 Alternative motor vehicle credit from partnerships and S corpo							9	167	
<b>10</b> Business/investment use part of credit. Add lines 8 and 9. Pothis amount on Schedule K; all others, report this amount on						port	10	17,867	
Part III Credit for Personal Use Part of Vehicle									
<b>11</b> Subtract line 7 from line 5	11								
12 Add columns (a) through (c) on line 11							12	218,836	
<ul> <li>13 Regular tax before credits:</li> <li>Individuals. Enter the amount from Form 1040, line 44 (or Follower 41)</li> </ul>							13		
Other filers. Enter the regular tax before credits from your regular tax.									
<b>14</b> Credits that reduce regular tax before the alternative motor ve <b>a</b> Credits from Form 1040, lines 47 through 50 and 52 through 1040NR, lines 44, 45, and 47 through 49)	54 (d	or Form	14a						
<b>b</b> Foreign tax credit			14b						
c Qualified electric vehicle credit (Form 8834, line 11)			14c		0				
d Add lines 14a through 14c							14d	81,698	
15 Net regular tax. Subtract line 14d from line 13. If zero or less, you are claiming a credit on line 10							15	4,231,853	
16 Tentative minimum tax (see instructions):						١	40	0.407.000	
• Individuals. Enter the amount from Form 6251, line 33						· . }	16	3,497,303	
Other filers. Enter the tentative minimum tax from your alter  Rubtreet line 16 from line 15. If zero or less step bereide not									
17 Subtract line 16 from line 15. If zero or less, stop here; do not a credit on line 10	. ille ti	iis iorm	uniess	s you	are ciain	ning	17	778,439	
<b>18 Personal use part of credit.</b> Enter the <b>smaller</b> of line 12 or 17 1040NR line 50; or the appropriate line of your return. If line 17 is							18	182 735	

Internal Revenue Service

#### AMOUNTS OF SELECTED LINES FILED (IN THOUSANDS OF DOLLARS)

#### **Tuition and Fees Deduction**

See Instructions.

► Attach to Form 1040 or Form 1040A.

OMB No. 1545-0074

Department of the Treasury Name(s) shown on return

Total Forms Filed = 4.471.217

Your social security number



You cannot take both an education credit from Form 8863 and the tuition and fees deduction from this form for the same student in the same year.

√ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below. Before you begin: ✓ If you file Form 1040, use the instructions for line 36 to figure any write-in adjustments to be entered on the dotted line next to Form 1040, line 36. (a) Student's name (as shown on page 1 of your tax return) (b) Student's social security (c) Qualified number (as shown on page expenses (see First name Last name 1 of your tax return) instructions) Student 1 SSN = 22.600.560 Student 2 SSN = 1,648,542 Student 3 SSN = 56,075 14 Student 4 SSN = 24,305,191 Add the amounts on line 1, column (c), and enter the total Enter the amount from Form 1040, line 22, or Form 1040A, line 15 Enter the total from either: • Form 1040, lines 23 through 33, plus any write-in adjustments entered on the dotted line next to Form 1040, line 36, or • Form 1040A, lines 16 through 18 Subtract line 4 from line 3.\* If the result is more than \$80,000 (\$160,000 if married filing jointly) 310,019,891 5 You cannot take the deduction for tuition and fees . . . . . . . Tuition and fees deduction. Is the amount on line 5 more than \$65,000 (\$130,000 if married filing jointly)? Yes. Enter the smaller of line 2, or \$2,000. Also enter this amount on Form 1040,

10.399.406 6 No. Enter the smaller of line 2, or \$4,000. Also enter this amount on Form 1040, line 34, or Form 1040A, line 19.

\*If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, use Worksheet 6-1 in Pub. 970 to figure the amount to enter.

Section references are to the Internal Revenue Code unless otherwise noted.

line 34, or Form 1040A, line 19.

#### **General Instructions**

#### Purpose of Form

Use Form 8917 to figure and take the deduction for tuition and fees expenses paid in 2007.

This deduction is based on qualified education expenses paid to an eligible postsecondary educational institution. See What Expenses Qualify, on page 2, for more information.



You may be able to take the Hope credit or lifetime learning credit for your education expenses instead of the tuition and fees deduction. Figure your tax both ways and choose the one that gives you the lower tax. See

Form 8863, Education Credits, and Pub. 970, Tax Benefits for Education, for more information about the Hope and lifetime learning credits.

#### Who Can Take the Deduction

You may be able to take the deduction if you, your spouse, or a dependent you claim on your tax return was a student enrolled at or attending an eligible educational institution. The deduction is based on the amount of qualified education expenses you paid for the student in 2007 for academic periods beginning in 2007 and the first 3 months of 2008.



Qualified education expenses must be reduced by any expenses paid directly or indirectly using tax-free educational assistance. See Tax-free educational

assistance and refunds of qualified education expenses on page 2.

Generally, in order to claim the deduction for qualified education expenses for a dependent, you must have paid the expenses in 2007 and must claim an exemption for the student as a dependent on your 2007 tax return (line 6c of Form 1040 or 1040A). For additional information, see chapter 6 of Pub. 970.

You cannot claim the tuition and fees deduction if any of the following apply.

- Your filing status is married filing separately.
- Another person can claim an exemption for you as a dependent on his or her tax return. You cannot take the deduction even if the other person does not actually claim that exemption.
- Your modified adjusted gross income (MAGI), as figured on line 5, is more than \$80,000 (\$160,000 if filing a joint return).
- You were a nonresident alien for any part of the year and did not elect to be treated as a resident alien for tax purposes. More information on nonresident aliens can be found in Pub. 519, U.S. Tax Guide for Aliens.