2005 ESTIMATED DATA LINE COUNTS - (ALL FIGURES ARE ESTIMATES BASED ON SAMPLES)

NUMBER OF RETURNS FILED FOR SELECTED LINES

Form **1040** Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** **2005** (99) IRS Use Only—Do not write or staple in this space.

OMB No. 1545-0074

Label (See instructions on page 16.) **Use the IRS label.** Otherwise, please print or type.

LABEL HERE

For the year Jan. 1–Dec. 31, 2005, or other tax year beginning , 2005, ending , 20

Your first name and initial	Last name	Your social security number
	Total of all returns filed = 134,372,678	134,372,678
If a joint return, spouse's first name and initial	Last name	Spouse's social security number
1040 = 81,497,559	Electronically filed returns = 73,471,852	54,968,533
Home address (number and street). If you have a P.O. box, see page 16.	Apt. no.	▲ You **must** enter your SSN(s) above. ▲
1040A = 31,326,141		
City, town or post office, state, and ZIP code. If you have a foreign address, see page 16.		Checking a box below will not
1040EZ = 21,548,977		Y = *6,009,718 Y = **9,701,609

Presidential Election Campaign ▶ Check here if you, or your spouse if filing jointly, want $3 to go to this fund (see page 16) ▶ ☐ **You** ☐ **Spouse**

Filing Status Check only one box.

59,347,974 **1** ☐ Single

2 ☐ Married filing jointly (even if only one had income)

52,505,729 **3** ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶ 2,462,804 71,111

19,985,059 **4** ☐ Head of household (with qualifying person). (See page 17.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

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

Exemptions

6a ☐ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a = 124,673,055

b ☐ **Spouse** = 52,526,380 . . . . No. of returns (below) No. of exem. (below). . . .

Boxes checked on 6a and 6b Exem. = 177,199,436

No. of children on 6c who: Returns = 45,872,301

- **lived with you** Exem. = 81,170,334
- **did not live with you due to divorce or separation (see page 20)** Returns = 736,110 Exem. = 967,043

Dependents on 6c not entered above

Total returns = 124,673,055

Add numbers on lines above Total exem. = 269,043,070

c Dependents:

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if qualifying child for child tax credit (see page 19)
CHILDREN AT HOME	45,872,301	81,170,334	35,169,327
CHILDREN AWAY FROM HOME	736,110	967,043	22,548,476
PARENTS	2,621,622	3,104,763	7,523,668
TOTAL DEPENDENTS	50,530,455	91,843,635	2,001,416

If more than four dependents, see page 19.

d Total number of exemptions claimed 124,673,055 269,043,070 Qualifying child not depend. = 5,545

Income

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

If you did not get a W-2, see page 22.

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

7	Wages, salaries, tips, etc. Attach Form(s) W-2 ** depen. othr ernd inc = 50,285		7	114,070,880
8a	**Taxable** interest. Attach Schedule B if required		8a	59,249,357
b	**Tax-exempt** interest. **Do not** include on line 8a	8b 4,497,973		
9a	Ordinary dividends. Attach Schedule B if required		9a	31,175,376
b	Qualified dividends (see page 23)	9b 25,853,686		
10	Taxable refunds, credits, or offsets of state and local income taxes (see page 23)		10	22,110,769
11	Alimony received		11	457,488
12	Business income or (loss). Attach Schedule C or C-EZ 13* cap gain distrib = 4,155,219		12	21,057,329
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		13	22,040,458
14	Other gains or (losses). Attach Form 4797		14	1,777,203
15a	IRA distributions 15a 10,024,085	b Taxable amount (see page 25)	15b	9,387,189
16a	Pensions and annuities 16a 25,352,088	b Taxable amount (see page 25)	16b	23,247,374
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	15,510,991
18	Farm income or (loss). Attach Schedule F		18	1,981,249
19	Unemployment compensation		19	7,887,700
20a	Social security benefits 20a 15,510,458	b Taxable amount (see page 27)	20b	12,660,754
21	Other income. List type and amount (see page 29)		21	6,811,025
22	Add the amounts in the far right column for lines 7 through 21. This is your **total income** ▶		22	134,114,986

Adjusted Gross Income

23	Educator expenses (see page 29)	23 3,503,719		21 For. earn. inc. excl. = 303,940
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24 100,111		21 Net operat. loss = 862,791
25	Health savings account deduction. Attach Form 8889	25 215,781		21 Gambling inc. = 1,809,182
26	Moving expenses. Attach Form 3903	26 1,134,137		21 Stock options = 13,160
27	One-half of self-employment tax. Attach Schedule SE	27 16,694,655		
28	Self-employed SEP, SIMPLE, and qualified plans	28 1,256,900		
29	Self-employed health insurance deduction (see page 30)	29 3,901,082		
30	Penalty on early withdrawal of savings	30 805,625		
31a	Alimony paid b Recipient's SSN ▶ 587,704	31a 588,463		
32	IRA deduction (see page 31)	32 3,256,066		
33	Student loan interest deduction (see page 33)	33 8,072,896		36 For. housing ded. = 2,417
34	Tuition and fees deduction (see page 34)	34 4,696,013		36 Archer MSA = 18,808
35	Domestic production activities deduction. Attach Form 8903	35 336,959		36 Other adj. = 257,014
36	Add lines 23 through 31a and 32 through 35		36	33,591,124
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶		37	***134,114,265

Total of all Returns Filed

* Number of returns with one election yes box checked ** Number of returns with both yes boxes checked

*** Returns that reported an exact $0.00 adjusted gross income were not included in this item

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Form 1040 (2005) a = 17,382,128 b = 6,864,936 c = 305,165 d = 77,504

Tax and Credits

38	Amount from line 37 (adjusted gross income)			38	
39a	Check if: [a] **You** were born before January 2, 1941, [c] Blind. [b] **Spouse** was born before January 2, 1941, [d] Blind. **Total boxes checked** ▶ 39a				Basic Stand. Ded. = 84,841,222 Add Stand. Ded. = 10,996,440
b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here ▶39b		539,491		
40	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)			40	47,755,427
41	Subtract line 40 from line 38			41	118,115,885
42	If line 38 is over $109,475, or you provided housing to a person displaced by Hurricane Katrina, see page 37. Otherwise, multiply $3,200 by the total number of exemptions claimed on line 6d			42	123,102,372
43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-			43	104,330,653
44	**Tax** (see page 37). Check if any tax is from: **a** ☐ Form(s) 8814 **b** ☐ Form 4972			44	104,321,332
45	**Alternative minimum tax** (see page 39). Attach Form 6251			45	4,004,756
46	Add lines 44 and 45 ▶			46	104,345,964
47	Foreign tax credit. Attach Form 1116 if required	47	5,398,046		54a F8396 = 48,221
48	Credit for child and dependent care expenses. Attach Form 2441	48	6,500,596		
49	Credit for the elderly or the disabled. Attach Schedule R	49	101,627		55a F3800 = 251,386
50	Education credits. Attach Form 8863	50	7,057,251		55b F8801 = 290,376
51	Retirement savings contributions credit. Attach Form 8880	51	5,293,605		55c F8844 = 30,487
52	Child tax credit (see page 41). Attach Form 8901 if required	52	25,950,568		55c Fuel Source = 4,712
53	Adoption credit. Attach Form 8839	53	84,793		55c Other = 53,852
54	Credits from: **a** ☐ Form 8396 **b** ☐ Form 8859	54			
55	Other credits. Check applicable box(es): **a** ☐ Form 3800 **b** ☐ Form 8801 **c** ☐ Form _____	55			
56	Add lines 47 through 55. These are your **total credits**			56	40,526,374
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- ▶			57	92,343,186

Standard Deduction for—

- People who checked any box on line 39a or 39b **or** who can be claimed as a dependent, see page 36.
- All others:

Single or Married filing separately, $5,000

Married filing jointly or Qualifying widow(er), $10,000

Head of household, $7,300

Other Taxes

58	Self-employment tax. Attach Schedule SE	58	16,694,655
59	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	59	335,818
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	4,822,297
61	Advance earned income credit payments from Form(s) W-2	61	122,078
62	Household employment taxes. Attach Schedule H	62	228,381
63	Add lines 57 through 62. This is your **total tax** Recapture Tax = 15,206 Other Taxes = 600,072 ▶	63	99,880,223

Payments

64	Federal income tax withheld from Forms W-2 and 1099	64	118,161,380		
65	2005 estimated tax payments and amount applied from 2004 return	65	11,053,213		
66a	**Earned income credit (EIC)**	66a	22,751,904		
b	Nontaxable combat pay election ▶ 66b 21,973				
67	Excess social security and tier 1 RRTA tax withheld (see page 59)	67	1,383,240		
68	Additional child tax credit. Attach Form 8812	68	15,219,712		70a F2439 = 19,812
69	Amount paid with request for extension to file (see page 59)	69	1,627,572		70b F4136 = 340,769
70	Payments from: **a** ☐ Form 2439 **b** ☐ Form 4136 **c** ☐ Form 8885	70			70c F8885 = 13,380
71	Add lines 64, 65, 66a, and 67 through 70. These are your **total payments** ▶			71	126,781,067

If you have a qualifying child, attach Schedule EIC.

Refund

Direct deposit? See page 59 and fill in 73b, 73c, and 73d.

72	If line 71 is more than line 63, subtract line 63 from line 71. This is the amount you **overpaid**	72	104,778,359
73a	Amount of line 72 you want **refunded to you** ▶	73a	101,870,385
b	Routing number ▶ c Type: ☐ Checking ☐ Savings		
d	Account number ▶		
74	Amount of line 72 you want **applied to your 2006 estimated tax** ▶ 74 4,055,960		

Amount You Owe

75	**Amount you owe.** Subtract line 71 from line 63. For details on how to pay, see page 60 ▶	75	25,659,937
76	Estimated tax penalty (see page 60) 76 5,882,477		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 61)? ☐ **Yes.** Complete the following. ☐ **No**

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

Sign Here

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

Joint return? See page 17.

Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
			( )
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ☐	Preparer's SSN or PTIN
80,032,527			
Firm's name (or yours if self-employed), address, and ZIP code		EIN	
		Phone no. ( )	

Total of all Returns Filed

Printed on recycled paper