

Electronic Filing Instructions for your 2008 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.



Robert P Campbell
2421 Winding Road
Hatboro, PA 19040

Balance Due/Refund	Your federal tax return (Form 1040) shows a refund due to you in the amount of \$2,573.00. Your tax refund should be direct deposited into your account within 8 to 14 days after your return is accepted. The account information you entered - Account Number: 1010127220422 Routing Transit Number: 031000503.																		
Where's My Refund?	Before you call the Internal Revenue Service with questions about your refund, give them 8 to 14 days processing time from the date your return is accepted. If then you have not received your refund, or the amount is not what you expected, contact the Internal Revenue Service directly at 1-800-829-4477. You can also check www.irs.gov and select the "Where's my refund?" link.																		
No Signature Document Needed	No signature form is required since you signed your return electronically.																		
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your federal return																		
2008 Federal Tax Return Summary	<table><tr><td>Adjusted Gross Income</td><td>\$</td><td>27,528.00</td></tr><tr><td>Taxable Income</td><td>\$</td><td>14,138.00</td></tr><tr><td>Total Tax</td><td>\$</td><td>1,718.00</td></tr><tr><td>Total Payments/Credits</td><td>\$</td><td>4,291.00</td></tr><tr><td>Amount to be Refunded</td><td>\$</td><td>2,573.00</td></tr><tr><td>Effective Tax Rate</td><td></td><td>6.24%</td></tr></table>	Adjusted Gross Income	\$	27,528.00	Taxable Income	\$	14,138.00	Total Tax	\$	1,718.00	Total Payments/Credits	\$	4,291.00	Amount to be Refunded	\$	2,573.00	Effective Tax Rate		6.24%
Adjusted Gross Income	\$	27,528.00																	
Taxable Income	\$	14,138.00																	
Total Tax	\$	1,718.00																	
Total Payments/Credits	\$	4,291.00																	
Amount to be Refunded	\$	2,573.00																	
Effective Tax Rate		6.24%																	

Form 1040

U.S. Individual Income Tax Return 2008

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

Label (See instructions.)

Use the IRS label. Otherwise, please print or type.

Presidential Election Campaign

For the year Jan 1 - Dec 31, 2008, or other tax year beginning , 2008, ending , 20
Your first name MI Last name Robert P Campbell
Your social security number 196-26-6887
Home address (number and street). If you have a P.O. box, see instructions. 2421 Winding Road
City, town or post office. If you have a foreign address, see instructions. Hatboro PA 19040
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions) You Spouse

Filing Status

Check only one box.

1 [X] Single 4 [] Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here
2 [] Married filing jointly (even if only one had income)
3 [] Married filing separately. Enter spouse's SSN above & full name here. 5 [] Qualifying widow(er) with dependent child (see instructions)

Exemptions

If more than four dependents, see instructions.

6a [X] Yourself. If someone can claim you as a dependent, do not check box 6a. 1
6b [] Spouse
c Dependents: (2) Dependent's social security number (3) Dependent's relationship to you (4) [X] if qualifying child for child tax credit (see instrs)
(1) First name Last name
d Total number of exemptions claimed 1

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 instructions.

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

7 Wages, salaries, tips, etc. Attach Form(s) W-2 7
8a Taxable interest. Attach Schedule B if required 8a
8b Tax-exempt interest. Do not include on line 8a 8b
9a Ordinary dividends. Attach Schedule B if required 9a
9b Qualified dividends (see instrs) 9b
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) 10
11 Alimony received. 11
12 Business income or (loss). Attach Schedule C or C-EZ 12
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here [] 13
14 Other gains or (losses). Attach Form 4797 14
15a IRA distributions 15a b Taxable amount (see instrs) 15b
16a Pensions and annuities 16a 27,935. b Taxable amount (see instrs) 16b 27,528.
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17
18 Farm income or (loss). Attach Schedule F 18
19 Unemployment compensation 19
20a Social security benefits 20a b Taxable amount (see instrs) 20b
21 Other income 21
22 Add the amounts in the far right column for lines 7 through 21. This is your total income 22 27,528.

Adjusted Gross Income

23 Educator expenses (see instructions) 23
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24
25 Health savings account deduction. Attach Form 8889 25
26 Moving expenses. Attach Form 3903 26
27 One-half of self-employment tax. Attach Schedule SE 27
28 Self-employed SEP, SIMPLE, and qualified plans 28
29 Self-employed health insurance deduction (see instructions) 29
30 Penalty on early withdrawal of savings 30
31a Alimony paid b Recipient's SSN 31a
32 IRA deduction (see instructions) 32
33 Student loan interest deduction (see instructions) 33
34 Tuition and fees deduction. Attach Form 8917 34
35 Domestic production activities deduction. Attach Form 8903 35
36 Add lines 23 - 31a and 32 - 35 36
37 Subtract line 36 from line 22. This is your adjusted gross income 37 27,528.

Tax and Credits

38	Amount from line 37 (adjusted gross income)	38	27,528.
39 a	Check if: <input checked="" type="checkbox"/> You were born before January 2, 1944, <input type="checkbox"/> Spouse was born before January 2, 1944, <input type="checkbox"/> Blind. Total boxes checked ▶ 39 a <input type="checkbox"/> 1		
	b If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here ▶ 39 b <input type="checkbox"/>		
	c Check if standard deduction includes real estate taxes or disaster loss (see instructions) . . . ▶ 39 c <input type="checkbox"/>		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	9,890.
41	Subtract line 40 from line 38	41	17,638.
42	If line 38 is over \$119,975, or you provided housing to a Midwestern displaced individual, see instructions. Otherwise, multiply \$3,500 by the total number of exemptions claimed on line 6d	42	3,500.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	14,138.
44	Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	1,718.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Add lines 44 and 45	46	1,718.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Credit for the elderly or the disabled. Attach Schedule R	49	
50	Education credits. Attach Form 8863	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit (see instructions). Attach Form 8901 if required	52	
53	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	53	
54	Other crs from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	
55	Add lines 47 through 54. These are your total credits	55	
56	Subtract line 55 from line 46. If line 55 is more than line 46, enter -0-	56	1,718.

Standard Deduction for –
 • People who checked any box on line 39a, 39b, or 39c or who can be claimed as a dependent, see instructions.
 • All others:
 Single or Married filing separately, \$5,450
 Married filing jointly or Qualifying widow(er), \$10,900
 Head of household, \$8,000

Other Taxes

57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H	60	
61	Add lines 56-60. This is your total tax	61	1,718.

Payments

If you have a qualifying child, attach Schedule EIC.

62	Federal income tax withheld from Forms W-2 and 1099	62	4,291.
63	2008 estimated tax payments and amount applied from 2007 return	63	
64 a	Earned income credit (EIC)	64 a	
	b Nontaxable combat pay election . . . ▶ 64 b		
65	Excess social security and tier 1 RRTA tax withheld (see instructions)	65	
66	Additional child tax credit. Attach Form 8812	66	
67	Amount paid with request for extension to file (see instructions)	67	
68	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	68	
69	First-time homebuyer credit. Attach Form 5405.	69	
70	Recovery rebate credit (see worksheet)	70	0.
71	Add lines 62 through 70. These are your total payments	71	4,291.

Refund

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

72	If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid	72	2,573.
73 a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here . . ▶ <input type="checkbox"/>	73 a	2,573.
	▶ b Routing number 031000503 ▶ c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	▶ d Account number 1010127220422		
74	Amount of line 72 you want applied to your 2009 estimated tax . . . ▶ 74		

Amount You Owe

75	Amount you owe. Subtract line 71 from line 61. For details on how to pay, see instructions	75	
76	Estimated tax penalty (see instructions)	76	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? 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.

Your signature	Date	Your occupation	Daytime phone number
		Retired	
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 ▶

Firm's name (or yours if self-employed), address, and ZIP code ▶ Self-Prepared ▶ EIN ▶ Phone no. ▶

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

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

OMB No. 1545-0074

2008

Attachment
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

Robert P Campbell

196-26-6887

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1	3,933.	
	2	Enter amount from Form 1040, line 38 . . . 2 27,528.			
	3	Multiply line 2 by 7.5% (.075)	3	2,065.	
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4		1,868.
Taxes You Paid	5 State and local (check only one box):				
	a	<input type="checkbox"/> Income taxes, or			
	b	<input type="checkbox"/> General sales taxes	5		
	6	Real estate taxes (see instructions)	6	2,953.	
	7	Personal property taxes	7		
	8	Other taxes. List type and amount ▶	8		
(See instructions.)	9	Add lines 5 through 8	9		2,953.
Interest You Paid	10	Home mtg interest and points reported to you on Form 1098	10	4,212.	
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying number, and address ▶			

		-----	11		

Note. Personal interest is not deductible.	12	Points not reported to you on Form 1098. See instrs for spcl rules	12		
	13	Qualified mortgage insurance premiums (see instructions)	13		
	14	Investment interest. Attach Form 4952 if required. (See instrs.)	14		
	15	Add lines 10 through 14	15		4,212.
Gifts to Charity	16	Gifts by cash or check. If you made any gift of \$250 or more, see instrs	16		
	17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	857.	
	18	Carryover from prior year	18		
	19	Add lines 16 through 18	19		857.
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20		

(See instructions.)	21	Unreimbursed employee expenses — job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶	21		
	22	Tax preparation fees	22		
	23	Other expenses — investment, safe deposit box, etc. List type and amount ▶	23		
	24	Add lines 21 through 23	24		
	25	Enter amount from Form 1040, line 38 . . . 25			
	26	Multiply line 25 by 2% (.02)	26		
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27		
Other Miscellaneous Deductions	28	Other — from list in the instructions. List type and amount ▶			

Total Itemized Deductions	29	Is Form 1040, line 38, over \$159,950 (over \$79,975 if married filing separately)? <input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input type="checkbox"/> Yes. Your deduction may be limited. See instructions for the amount to enter.	29		9,890.
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ <input type="checkbox"/>			

Statement of Person Claiming Refund Due a Deceased Taxpayer

▶ See instructions.

Tax year decedent was due a refund:

Calendar year 2008, or other tax year beginning _____, and ending _____

Please type or print	Name of decedent <u>Robert P Campbell</u>	Date of death <u>06/26/2008</u>	Decedent's social security number <u>196-26-6887</u>
	Name of person claiming refund <u>Stacey L Campbell</u>		Your social security number <u>172-54-9527</u>
	Home address (number and street). If you have a P.O. box, see instructions <u>2421 Winding Road</u>		Apartment number
	City, town or post office. If you have a foreign address, see instructions <u>Hatboro</u>		State ZIP code <u>PA 19040</u>

Part I Check the box that applies to you. Check only one box. Be sure to complete Part III below.

- A Surviving spouse requesting reissuance of a refund check (see instructions).
- B Court-appointed or certified personal representative (see instructions). Attach a court certificate showing your appointment, unless previously filed (see instructions).
- C Person, other than A or B, claiming refund for the decedent's estate (see instructions). Also, complete Part II.

Part II Complete this part only if you checked the box on line C above.

	Yes	No
1 Did the decedent leave a will?	X	
2a Has a court appointed a personal representative for the estate of the decedent?		X
b If you answered 'No' to 2a, will one be appointed?		X
If you answered 'Yes' to 2a or 2b, the personal representative must file for the refund.		
3 As the person claiming the refund for the decedent's estate, will you pay out the refund according to the laws of the state where the decedent was a legal resident?	X	
If you answered 'No' to 3, a refund cannot be made until you submit a court certificate showing your appointment as personal representative or other evidence that you are entitled under state law to receive the refund.		

Part III Signature and verification. All filers must complete this part.

I request a refund of taxes overpaid by or on behalf of the decedent. Under penalties of perjury, I declare that I have examined this claim, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of person claiming refund ▶

Date ▶ 04/14/2009

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **1310** (Rev 11-2005)

Valid Proof of Death is in my Possession

Noncash Charitable Contributions

OMB No. 1545-0908

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.**

Attachment
Sequence No. **155**

Name(s) shown on your income tax return

Robert P Campbell

Identifying number

196-26-6887

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).

Part I Information on Donated Property — If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) Description of donated property <small>(For a donated vehicle, enter the year, make, model, condition, and mileage, and attach Form 1098-C if required.)</small>
A	Impact Thrift Stores, Inc. 14 East Moreland Avenue Hatboro PA 19040	Livingroom set
B	Impact Thrift Stores, Inc. 14 East Moreland Avenue Hatboro PA 19040	Diningroom set
C	Impact Thrift Stores, Inc. 14 East Moreland Avenue Hatboro PA 19040	Bedroom set
D	Impact Thrift Stores, Inc. 14 East Moreland Avenue Hatboro PA 19040	Sony television
E	Impact Thrift Stores, Inc. 14 East Moreland Avenue Hatboro PA 19040	GE Microwave oven

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).

(c)	Date of the contribution	(d) Date acquired by donor (mo., yr)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) Fair market value (see instructions)	(h) Method used to determine the fair market value
A	10/27/2008	01/2001	Purchase	1.	1.	Thrift shop value
B	10/27/2008				400.	Thrift shop value
C	10/27/2008				300.	Thrift shop value
D	10/27/2008				100.	Thrift shop value
E	10/27/2008				50.	Thrift shop value

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).

2 a 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 ZIP code _____

d For tangible property, enter the place where the property is located or kept ▶ _____

e Name of any person, other than donee organization, having actual possession of the property ▶ _____

3 a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

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?

Noncash Charitable Contributions

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

Name(s) shown on your income tax return

Robert P Campbell

Identifying number

196-26-6887

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).

Part I Information on Donated Property — If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) Description of donated property <small>(For a donated vehicle, enter the year, make, model, condition, and mileage, and attach Form 1098-C if required.)</small>
A	Impact Thrift Stores, Inc. 14 East Moreland Avenue Hatboro PA 19040	Designer suits
B		
C		
D		
E		

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).

	(c) Date of the contribution	(d) Date acquired by donor (mo., yr)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) Fair market value (see instructions)	(h) Method used to determine the fair market value
A	10/27/2008		Purchase	6.	6.	Thrift shop value
B						
C						
D						
E						

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).

2 a 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 ZIP code _____

d For tangible property, enter the place where the property is located or kept ▶ _____

e Name of any person, other than donee organization, having actual possession of the property ▶ _____

3 a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?

	Yes	No
3 a		
3 b		
3 c		

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?

Charitable Contributions Summary

2008

▶ Keep for your records

Name(s) Shown on Return Robert P Campbell	Social Security Number 196-26-6887
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Part I Cash Contributions Summary

Name of Charitable Organization	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) 100% Limit
Totals: _____				

Part II Non-Cash Contributions Summary

Name of Charitable Organization	Total	Other Property		Capital Gain Property	
	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) 30% Limit	(e) 20% Limit
Impact Thrift Stores, Inc.	1.	1.			
Impact Thrift Stores, Inc.	400.	400.			
Impact Thrift Stores, Inc.	300.	300.			
Impact Thrift Stores, Inc.	100.	100.			
Impact Thrift Stores, Inc.	50.	50.			
Impact Thrift Stores, Inc.	6.	6.			
Totals: _____	857.	857.			

Part III Contribution Carryovers to 2009

	Total	Cash and Other Non-Capital Gain Property			Capital Gain Property	
	(a) Total	(b) 100% Limit	(c) 50% Limit	(d) 30% Limit	(e) 30% Limit	(f) 20% Limit
1 2008 contributions . . .	857.		857.			
2 2008 contributions allowed	857.	0.	857.	0.	0.	0.
3 Carryovers from:						
a 2007 tax year						
b 2006 tax year						
c 2005 tax year						
d 2004 tax year						
e 2003 tax year						
4 Carryovers allowed in 2008	0.		0.	0.	0.	0.
5 Carryovers disallowed in 2008	0.		0.	0.	0.	0.
6 Carryovers to 2009:						
a From 2008	0.		0.	0.	0.	0.
b From 2007						
c From 2006						
d From 2005						
e From 2004						
f From 2003						

Part IV Special Situations in Your Return for Current Year Donations

- 1 Was the **entire interest** given for all property donated to all charities? Yes No
- 2 Were **restrictions** attached to any charities's right to use or dispose of any property donated to any charity? ▶ Yes No
- 3 Did you give to anyone other than the charity the right to income from any of the donated property or to possession of any of the donated property? ▶ Yes No
- 4 Was any charity other than a 50% charity? Yes No

Federal Carryover Worksheet

2008

▶ Keep for your records

Name(s) Shown on Return Robert P Campbell	Social Security Number 196-26-6887
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2007 State and Local Income Tax Information (See Tax Help)

(a) State or Local ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With- held/Pmts	(e) Paid With Return	(f) Total Over- payment	(g) Applied Amount
Totals . .						

Other Tax and Income Information			2007	2008
1	Filing status	1	—	1 Single
2	Number of exemptions for blind or over 65 (0 - 4)	2		1
3	Itemized deductions after limitation	3		9,890.
4	Check box if required to itemize deductions	4	<input type="checkbox"/>	<input type="checkbox"/>
5	Adjusted gross income	5		27,528.
6	Tax liability for Form 2210 or Form 2210-F	6		1,718.
7	Alternative minimum tax	7		
8	Federal overpayment applied to next year estimated tax	8		

QuickZoom to the IRA Information Worksheet for IRA information (see Tax Help) ▶

Excess Contributions			2007	2008
9 a	Taxpayer's excess Archer MSA contributions as of 12/31	9 a		
	b Spouse's excess Archer MSA contributions as of 12/31	b		
10 a	Taxpayer's excess Coverdell ESA contributions as of 12/31	10 a		
	b Spouse's excess Coverdell ESA contributions as of 12/31	b		
11 a	Taxpayer's excess HSA contributions as of 12/31	11 a		
	b Spouse's excess HSA contributions as of 12/31	b		

Loss and Expense Carryovers			2007	2008
12 a	Short-term capital loss	12 a		
	b AMT Short-term capital loss	b		
13 a	Long-term capital loss	13 a		
	b AMT Long-term capital loss	b		
14 a	Net operating loss available to carry forward	14 a		
	b AMT Net operating loss available to carry forward	b		
15 a	Investment interest expense disallowed	15 a		
	b AMT Investment interest expense disallowed	b		
16	Nonrecaptured net Section 1231 losses from:	16 a		
	a 2008	a		
	b 2007	b		
	c 2006	c		
	d 2005	d		
	e 2004	e		
	f 2003	f		

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING
TAXPAYER: Robert P Campbell
PRIMARY SSN: 196-26-6887

FEDERAL RETURN SUBMITTED: April 14, 2009 07:36 AM PDT
FEDERAL RETURN ACCEPTANCE DATE:

Your return was electronically transmitted on 04/15/2009

The Intuit Electronic Postmark shows the date and time Intuit received your federal tax return. The Intuit Electronic Postmark documents the filing date of your income tax return, and the electronic postmark information should be kept on file with your tax return and other tax-related documentation.

There are two important aspects of the Intuit Electronic Postmark:

1. THE INTUIT ELECTRONIC POSTMARK.

The electronic postmark shows the date and time Intuit received the federal return, and is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal individual income tax return.

TIMELY FILING:

For your federal return to be considered filed on time, your return must be postmarked on or before midnight April 15, 2009. Intuit's electronic postmark is issued in the Pacific Time (PT) zone. If you are not filing in the PT zone, you will need to add or subtract hours from the Intuit Electronic Postmark time to determine your local postmark time. For example, if you are filing in the Eastern Time (ET) zone and you electronically file your return at 9 AM on April 15, 2009, your Intuit electronic postmark will indicate April 15, 2009, 6 AM. If your federal tax return is rejected, the IRS still considers it filed on time if the electronic postmark is on or before April 15, 2009, and a corrected return is submitted and accepted before April 20, 2009. If your return is submitted after April 20, 2009, a new time stamp is issued to reflect that your return was submitted after the IRS deadline and, consequently, is no longer considered to have been filed on time.

If you request an automatic six-month extension, your return must be electronically postmarked by midnight October 15, 2009. If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before October 15, 2009, and the corrected return is submitted and accepted by October 20, 2009.

2. THE ACCEPTANCE DATE.

Once the IRS accepts the electronically filed return, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return.

SMART WORKSHEET FOR: Form 1040: Individual Tax Return

Tax Smart Worksheet	
A	Tax <u>1,718.</u>
Check if from:	
1	Tax table <input checked="" type="checkbox"/>
2	Tax Computation Worksheet (see instructions) <input type="checkbox"/>
3	Schedule D Tax Worksheet <input type="checkbox"/>
4	Qualified Dividends and Capital Gain Tax Worksheet <input type="checkbox"/>
5	Schedule J <input type="checkbox"/>
6	Form 8615 <input type="checkbox"/>
7	Foreign Earned Income Tax Worksheet <input type="checkbox"/>
B	Additional tax from Form 8814 _____
C	Additional tax from Form 4972 _____
D	Tax from additional Form(s) 4972 _____
E	Recapture tax from Form 8863 _____
F	IRC Section 197(f)(9)(B)(ii) election for an additional tax _____
G	Tax. Add lines A through F. Enter the result here and on line 44 <u>1,718.</u>