

# Fair Flat Tax Act of 2007

## Simplified U.S. Individual Income Tax Return

	Your first name and initial	Last name	Your Social Security number
	If a joint return, spouse's first name and initial	Last name	Spouse's Social Security number
	Home address (if number and street). If you have a P.O. box, see page 16.	Apt. no.	
	City, town or post office, state and ZIP code. If you have a foreign address, see page 16		
<b>Presidential Election Campaign</b>	Do you or your spouse, if filing a joint return, want \$3 to go to this fund?	You Yes/No	Spouse Yes/No
<b>Filing Status</b>	<b>1</b> <input type="checkbox"/> Single <b>2</b> <input type="checkbox"/> Married filing jointly (even if only one had income) <b>3</b> <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here ►	<b>4</b> <input type="checkbox"/> 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 ► _____ <b>5</b> <input type="checkbox"/> Qualifying widow(er) with dependent child (see page 17)	
<b>Exemptions</b>	<b>6a</b> <input type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a <b>6b</b> <input type="checkbox"/> Spouse <b>6c</b> Dependents		
	(1) First name	Last name	(2) Dependent's Social Security number
			(3) Dependent's relationship to you
			(4) <input type="checkbox"/> if qualifying child for child tax credit (see page 18)
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
	<b>6d</b> Number of exemptions		<input type="checkbox"/>
<b>Income</b>	<b>7</b> Total income from all sources (from schedule B and/or D)		<b>7</b>
<b>Adjusted Gross Income</b>	<b>8</b> IRA deductions or other qualified savings (see instructions p._)		<b>8</b>
	<b>9</b> HSA and self-employed health insurance (see instructions p._)		<b>9</b>
	<b>10</b> Education/Teacher Classroom/Reservist Expenses/Other adjustments (see instructions p._)		<b>10</b>
	<b>11</b> Add lines 8, 9, and 10		<b>11</b>
	<b>12</b> Adjusted Gross Income (subtract line 11 from line 7)		<b>12</b>
<b>Deductions</b>	<b>13a</b> Mortgage interest deduction (see instructions p._)		<b>13a</b>
	<b>13b</b> Deduction for charitable contributions (see instructions p._)		<b>13b</b>
	<b>13c</b> Other deductions (e.g., disabled)		<b>13c</b>
	<b>14</b> Total deduction (add lines 13a and 13b) or Standard Deduction		<b>14</b>
	<b>15</b> Personal Exemptions (multiply \$3,100 by number of exemptions on line 6d)		<b>15</b>
	<b>16</b> Taxable Income (subtract lines 14 and 15 from line 12)		<b>16</b>
	<b>17</b> Tax (see instructions p._)		<b>17</b>
<b>Tax Credits</b>	<b>18</b> Education/Family Priorities/Other credits (see instructions p._)		<b>18</b>
	<b>19a</b> Tax after Credits (subtract line 18 from line 17)		<b>19a</b>
	<b>19b</b> Other taxes (see schedule B)		<b>19b</b>
	<b>20</b> Total Tax (add lines 19a and 19b)		<b>20</b>
<b>Payments</b>	<b>21</b> Federal income tax withheld and estimated tax (see instructions p._)		<b>21</b>
	<b>22</b> EIC and Child Credit (see table _)		<b>22</b>
	<b>23</b> Total state and local taxes paid (income, property, and sales; see instructions p._)		<b>23</b>
	<b>24</b> State and local tax credit refund (10% of line 23)		<b>24</b>
	<b>25</b> Total payments (add lines 21, 22 and 24)		<b>25</b>
<b>Refund</b>	<b>26</b> If line 25 is greater than line 21, subtract line 21 from 25. This is the amount you overpaid		<b>26</b>
	<b>27a</b> Amount of line 26 you want refunded to you		<b>27a</b>
	<b>b</b> Routing number _____ <b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	<b>d</b> Account number _____		
	<b>28</b> Amount of line 26 you want applied to your 2005 estimated tax		<b>28</b>
<b>Amount You Owe</b>	<b>29</b> Amount You Owe. Subtract line 25 from line 20.		<b>29</b>
	<b>30</b> Estimated Tax penalty (see instructions p._)		<b>30</b>
<b>Sign Here</b>	Your Signature	Date	Occupation
	Spouse's Signature	Date	Spouse's occupation
	Preparer's Signature	Date	Preparer's SSN or PIN