



TAX YEAR 2009
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TAXSLAYER.COM

		a Employee's social security number 270-86-4986		OMB No. 1545-0008			
b Employer identification number (EIN) 74-2579628				1 Wages, tips, other compensation 5070		2 Federal income tax withheld 19	
c Employer's name, address, and ZIP code NORTHERN ARIZONA UNIVERSITY PO BOX 4113 FLAGSTAFF, AZ 86011-				3 Social security wages 750		4 Social security tax withheld 47	
				5 Medicare wages and tips 750		6 Medicare tax withheld 11	
				7 Social security tips		8 Allocated tips	
d Control number				9 Advance EIC payment		10 Dependent care benefits	
e Employee's first name and initial BRIAN J Last name CULLINAN Suff. 7572 E BUTEO DR SCOTTSDALE, AZ 85255-				11 Nonqualified plans		12a See instructions for box 12	
				13 Statutory employee Retirement plan Third-party sick-pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
				14 Other		12c	
						12d	
f Employee's address and ZIP code							
15 State AZ	Employer's state ID number 742579628	16 State wages, tips, etc. 5070	17 State income tax 4	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form **W-2 Wage and Tax Statement 2009** Copyright (c) 2009 TaxSlayer Department of the Treasury--Internal Revenue Service

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Form **W-2 Wage and Tax Statement 2009** Copyright (c) 2009 TaxSlayer Department of the Treasury--Internal Revenue Service

Form
1040EZ**Income Tax Return for Single and
Joint Filers With No Dependents** (99) **2009**

OMB No. 1545-0074

Label(See Page 9.)
**Use the IRS
label.**Otherwise,
please print
or type.

L A B E L H E R E	Your first name and initial BRIAN J		Last name CULLINAN		Your social security number 270-86-4986	
	If a joint return, spouse's first name and initial		Last name		Spouse's social security number	
	Home address (number and street). If you have a P.O. box, see page 9. 7572 E BUTEO DR			Apt. no.		You must enter your SSN(s) above. ▲
	City, town or post office, state, and ZIP code. If you have a foreign address, see page 9. SCOTTSDALE, AZ 85255-0000					

**Presidential
Election
Campaign**
(see page 9) ▶Check here if you, or your spouse if a joint return, want \$3 to go to this fund ▶ ☐ You ☐ Spouse**Income****Attach
Form(s) W-2
here.**Enclose, but
do not
attach any
payment.You may
benefit from
filing Form
1040 or
1040A. See
*Before You
Begin* on
page 4.

1	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	1	5070
2	Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.	2	
3	Unemployment compensation in excess of \$2,400 per recipient and Alaska Permanent Fund dividends (see page 11).	3	
4	Add lines 1, 2, and 3. This is your adjusted gross income .	4	5070
5	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. <input checked="" type="checkbox"/> You <input type="checkbox"/> Spouse If no one can claim you (or your spouse if a joint return), enter \$9,350 if single ; \$18,700 if married filing jointly . See back for explanation.	5	5370
6	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your taxable income .	▶ 6	0

**Payments,
Credits,
and tax**

7	Federal income tax withheld from Form(s) W-2 and 1099.	7	19
8	Making work pay credit (see worksheet on back).	8	
9a	Earned income credit (EIC) (see page 13).	NO	9a
b	Nontaxable combat pay election.	9b	
10	Add lines 7, 8, and 9a. These are your total payments .	▶ 10	19
11	Tax. Use the amount on line 6 above to find your tax in the tax table on pages 27 through 35 of the instructions. Then, enter the tax from the table on this line.	11	0

RefundHave it directly
deposited! See
page 18 and fill
in 12b, 12c,
and 12d or
Form 8888.

12a	If line 10 is larger than line 11, subtract line 11 from line 10. This is your refund . If Form 8888 is attached, check here ▶ <input type="checkbox"/>	12a	19
▶ b Routing number <u>XXXXXXXXXX</u> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
▶ d Account number <u>XXXXXXXXXXXXXXXXXXXX</u>			

**Amount
you owe**

13	If line 11 is larger than line 10, subtract line 10 from line 11. This is the amount you owe . For details on how to pay, see page 19.	▶ 13
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**Third party
designee**Do you want to allow another person to discuss this return with the IRS (see page 20)? ☐ **Yes**. Complete the following. ☐ **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
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**Sign
here**Joint return?
See page 6.Keep a copy for
your records. ▶

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 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.

Your signature	Date 04/11/10	Your occupation	Daytime phone number 480-513-1717
Spouse's signature. If joint return, both must sign.	Date	Spouse's occupation	

**Paid
preparer's
use only**

Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code ▶	EIN		Phone no.

**Worksheet
for Line 5 -
Dependents
who checked
one or both
boxes**

Use this worksheet to figure the amount to enter on line 5 if someone can claim you (or your spouse if married filing jointly) as a dependent, even if that person chooses not to do so. To find out if someone can claim you as a dependent, see Pub. 501.

- A. Amount, if any, from line 1 on front 5070
+ 300.00 Enter total ► A. 5370
- B. Minimum standard deduction B. 950.00
- C. Enter the **larger** of line A or line B here C. 5370
- D. Maximum standard deduction. If **single**, enter \$5,700; if **married filing jointly**, enter \$11,400 D. 5700
- E. Enter the **smaller** of line C or line D here. This is your standard deduction E. 5370
- F. Exemption amount.
- If single, enter -0-.
 - If married filing jointly and --
 - both you and your spouse can be claimed as dependents, enter -0-.
 - only one of you can be claimed as a dependent, enter \$3,650.
- F. 0
- G. Add lines E and F. Enter the total here and on line 5 on the front. G. 5370

(keep a copy for
your records)

If you did not check any boxes on line 5, enter on line 5 the amount shown below that applies to you.

- Single, enter \$9,350. This is the total of your standard deduction (\$5,700) and your exemption (\$3,650).
- Married filing jointly, enter \$18,700. This is the total of your standard deduction (\$11,400), your exemption (\$3,650), and your spouse's exemption (\$3,650).

**Worksheet
for Line 8 -
Making
work pay
credit**

Use this
worksheet to
figure the amount
to enter on line 8
if you (or your
spouse if filing a
joint return)
cannot be
claimed as a
dependent on
another person's
return.

Before you begin: ✓ If you can be claimed as a dependent on someone else's return, you **do not** qualify for this credit.
✓ If married filing jointly, include your spouse's amounts with yours when completing this worksheet.

- 1a. Important.** See the instructions on page 12 if (a) you received a taxable scholarship or fellowship grant not reported on a Form W-2, (b) your wages include pay for work performed while an inmate in a penal institution, or (c) you received a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan. Do you (and your spouse if filing jointly) have 2009 wages of more than \$6,451 (\$12,903 if married filing jointly)?

- ☐ **Yes.** Skip lines 1a through 3. Enter \$400 (\$800 if married filing jointly) on line 4 and go to line 5.
- ☐ **No.** Enter your earned income (see instructions) **1a.** _____

- b.** Nontaxable combat pay included on line 1a (see instructions) **1b.** _____

2. Multiply line 1a by 6.2% (.062) **2.** _____
3. Enter \$400 (\$800 if married filing jointly) **3.** _____
4. Enter the **smaller** of line 2 or line 3 (unless you checked "Yes" on line 1a) **4.** _____
5. Enter amount from Form 1040EZ, line 4 (on front) **5.** _____
6. Enter \$75,000 (\$150,000 if married filing jointly) **6.** _____
7. Is the amount on line 5 more than the amount on line 6?
- ☐ **No.** Skip line 8. Enter the amount from line 4 on line 9 below.
- ☐ **Yes.** Subtract line 6 from line 5 **7.** _____
8. Multiply line 7 by 2% (.02) **8.** _____
9. Subtract line 8 from line 4. If zero or less, enter -0- **9.** _____
10. Did you (or your spouse, if filing jointly) receive an economic recovery payment in 2009? You may have received this payment if you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits (see instructions).
- ☐ **No.** Enter -0- on line 10.
- ☐ **Yes.** Enter the total of the economic recovery payments received by you (and your spouse, if filing jointly). **Do not** enter more than \$250 (\$500 if married filing jointly) **10.** _____

(keep a copy for
your records)

11. **Making work pay credit.** Subtract line 10 from line 9. If zero or less, enter -0-. Enter the result here and on Form 1040EZ, line 8. **11.** _____

**Mailing
return**

Mail your return by **April 15, 2010**. Use the envelope that came with your booklet. If you do not have that envelope or if you moved during the year, see the back cover for the address to use.