

LATEST #3

FORMS REQUIRED: FORM 1040, SCH A, FORM 2106EZ, FORM 2441, FORM 8283, FORM 8888, LA IT540, SCH E, SCH G, 2007 NONREFUNDABLE CHILDCARE CREDIT WORKSHEET

INFORMATION RETURNS ATTACHED: W-2 (1), 1099R (1)

STATEMENTS: 1

PREPARED BY: TAXPAYER

TAXPAYER NAME: RONALD F. BLACKBURN

SSN: 400-00-4305

OCCUPATION: CHEF

DOB: 05/10/1959

PRES ELECTION FUND: BOTH YES

DISABLED: NO (RONALD)

BLIND: NO

YES (MARY)

BLIND: YES

DOB: 05/19/1961

DAYTIME PHONE: 225-240-1246

SPOUSE NAME: MARY J. BLACKBURN

SSN: 400-00-2005

CHECK DIGITS FROM IRS LABEL: QQ

ADDRESS: 74 BUILDER DR

BATON ROUGE LA 70807

FILING STATUS: MARRIED FILING JOINTLY

LINE 6D: 8

DEPENDENT INFORMATION:

NAME	DOB	AGE	SSN	RELATIONSHIP	#MO	CHILDCARE
BILL BLACKBURN	020488	20	400-00-3005	SON	12	CREDIT
BOB BLACKBURN	031795	13	400-00-4005	SON	12	
KIM BLACKBURN	081097	11	400-00-5005	DAUGHTER	12	
KATIE BLACKBURN	122098	10	400-00-6005	DAUGHTER	12	
LEAH BLACKBURN	091101	7	400-00-7005	DAUGHTER	12	
LANCE BLACKBURN	040204	4	400-00-8005	SON	12	X

**LATEST #3**

**SCHEDULE A**

**LINE 5: 1204**

**LINE 6: 2500**

**LINE 9: 3704**

**LINE 10: 7000**

**LINE 15: 7000**

**LINE 16: 2750**

**LINE 19: 2750**

**LINE 29: 13454**

**FORM 2441:**

**PART I:**

<b>LINE 1:</b>	<b>(a)</b>	<b>(b)</b>
	<b>KINDER CARE</b>	<b>12 FUN ST BATON ROUGE LA 70807</b>

**PART II**

<b>LINE 2:</b>	<b>(a)</b>	<b>(b)</b>	<b>(c)</b>
	<b>LANCE BLACKBURN</b>	<b>400-00-8005</b>	<b>3600</b>

**LINE 3: 3000**

**LINE 4: 38400**

**LINE 5: 3000**

**NOTE: MAY WAS FULLY DISABLED FOR FIVE MONTHS**

**LINE 6: 3000**

**LINE 7: 60904**

**LINE 9: 600**

**LINE 10: 2119**

**LINE 11: 0**

**LATEST # 3**

**FORM 8888 (PLEASE INPUT A RTN AND ACCOUNT NUMBER THAT WILL WORK FOR YOU)**

**LINE 1A: 6829**

**LINE 1B: 105432106**

**LINE 1C: CHECKING**

**LINE 1D: 26543210891**

**LINE 2A: 6828**

**LINE 2B: 101234567**

**LINE 2C: SAVINGS**

**LINE 2D: 12345678910**

**LINE 4: 13657**

**LA**

**TOTAL LA PROPERTY INSURANCE PREMIUM 1234**

**LOUISIANA CITIZENS INSURANCE CREDIT 108**

**INSURANCE NAME: EVERYSTATE**

**POLICY NO: 321C246A**

**MILITARY FAMILY ASSISTANCE FUND 33**

**START PROGRAM DONATION 125**

**RECAPTURE OF START 325**

**FEDERAL RETIREMENT BENEFITS 22509**

**RETIREMENT DATE 10/07**

**CHILD CARE STAR RATING 3**

**LATEST #3**

**FORMS INCLUDED: FORM 1040, FORM W – 2, FORM 1099R**

**FORM 1040:**

<b>TAXPAYER’S FIRST NAME, INITIAL, LAST NAME</b>	<b>RONALD F BLACKBURN</b>
<b>TAXPAYER’S SOCIAL SECURITY NUMBER</b>	<b>400-00-4305</b>
<b>SPOUSE’S FIRST NAME, INITIAL, LAST NAME</b>	<b>MARY J BLACKBURN</b>
<b>SPOUSE’S SOCIAL SECURITY NUMBER</b>	<b>400-00-2005</b>
<b>HOME ADDRESS</b>	<b>74 BUILDER DR</b>
<b>CITY STATE ZIP</b>	<b>BATON ROUGE LA 70807</b>
<b>TAXPAYER’S PRESIDENTIAL ELECTION CAMPAIGN FUND</b>	<b>YES</b>
<b>SPOUSE’S PRESIDENTIAL ELECTION CAMPAIGN FUND</b>	<b>YES</b>
<b>FILING STATUS</b>	<b>MARRIED FILING JOINTLY</b>
<b>LINE 6A: YOURSELF (EXEMPTION)</b>	<b>X</b>
<b>LINE LB: SPOUSE (EXEMPTION)</b>	<b>X</b>
<b>NUMBER OF BOXES CHECKED ON 6A AND 6B</b>	<b>2</b>

**LATEST #3**

**LINE 6C: LITERAL STATEMENT #1**

**DEPENDENT #1:**

<b>NAME</b>	<b>BILL BLACKBURN</b>
<b>SOCIAL SECURITY NUMBER</b>	<b>400-00-3005</b>
<b>RELATIONSHIP</b>	<b>SON</b>

**DEPENDENT #2:**

<b>NAME</b>	<b>BOB BLACKBURN</b>
<b>SOCIAL SECURITY NUMBER</b>	<b>400-00-4005</b>
<b>RELATIONSHIP</b>	<b>SON</b>

**DEPENDENT #3:**

<b>NAME</b>	<b>KIM BLACKBURN</b>
<b>SOCIAL SECURITY NUMBER</b>	<b>400-00-5005</b>
<b>RELATIONSHIP</b>	<b>DAUGHTER</b>

**DEPENDENT #4:**

<b>NAME</b>	<b>KATIE BLACKBURN</b>
<b>SOCIAL SECURITY NUMBER</b>	<b>400-00-6005</b>
<b>RELATIONSHIP</b>	<b>DAUGHTER</b>

**DEPENDENT #5:**

<b>NAME</b>	<b>LEAH BLACKBURN</b>
<b>SOCIAL SECURITY NUMBER</b>	<b>400-00-7005</b>
<b>RELATIONSHIP</b>	<b>DAUGHTER</b>

**DEPENDENT #6:**

<b>NAME</b>	<b>LANCE BLACKBURN</b>
<b>SOCIAL SECURITY NUMBER</b>	<b>400-00-8005</b>
<b>RELATIONSHIP</b>	<b>SON</b>

<b>NUMBER OF CHILDREN WHO LIVED WITH YOU</b>	<b>6</b>
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<b>LINE 6D: TOTAL NUMBER OF EXEMPTIONS CLAIMED</b>	<b>8</b>
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LINE 7: WAGES SALARIES TIPS ETC	38400
LINE 16B TAXABLE AMOUNT	22509
LINE 22: TOTAL INCOME	60909
LINE 37: ADJUSTED GROSS INCOME	60909
LINE 38: AMOUNT FROM LINE 37	60909
LINE 39A: SPOUSE BLIND      X TOTAL BOXES CHECKED 1	
LINE 40: ITEMIZED DEDUCTIONS	13454
LINE 41: SUBTRACT 40 FROM 38	47455
LINE 42: MULTIPLY 3500 BY # OF EXEMPTIONS	28000
LINE 43: TAXABLE INCOME	19455
LINE 44: TAX	2119
LINE 46: ADD LINES 44 AND 45	2119
LINE 48: CREDIT FOR CHILD AND DEPENDENT CARE	600
LINE 52: CHILD TAX CREDIT	1519
LINE 55: TOTAL CREDITS	2119
LINE 56: SUBTRACT 55 FROM 46	0
LINE 61: TOTAL TAX	0
LINE 62: FEDERAL INCOME TAX WITHHELD	4260
LINE 66: ADDITIONAL CHILD TAX CREDIT	3481
LINE 71: TOTAL PAYMENTS	7741
LINE 72: OVERPAYMENT	7741
LINE 73A: REFUND	7741

**LATEST #3**

**W-2:**

<b>BOX B: EMPLOYER IDENTIFICATION NUMBER</b>	<b>80-1435678</b>
<b>BOX C: EMPLOYER'S NAME ADDRESS AND ZIP CODE</b>	<b>JOHNS WASHINGTON STEAKHOUSE 424 N WASHINGTON ST BATON ROUGE LA 70807</b>
<b>BOX D: EMPLOYEE'S SOCIAL SECURITY NUMBER</b>	<b>400-00-4305</b>
<b>BOX E: EMPLOYEE'S FIRST NAME INITIAL AND LAST NAME</b>	<b>RONALD F BLACKBURN</b>
<b>BOX F: EMPLOYEE'S ADDRESS AND ZIP CODE</b>	<b>74 BUILDERS DR BATON ROUGE LA 70807</b>
<b>BOX 1: WAGES TIPS OTHER COMPENSATION</b>	<b>38400</b>
<b>BOX 2: FEDERAL INCOME TAX WITHHELD</b>	<b>4260</b>
<b>BOX 3: SOCIAL SECURITY WAGES</b>	<b>38400</b>
<b>BOX 4: SOCIAL SECURITY TAX WITHHELD</b>	<b>2381</b>
<b>BOX 5: MEDICARE WAGES AND TIPS</b>	<b>38400</b>
<b>BOX 6: MEDICARE TAX WITHHELD</b>	<b>557</b>
<b>BOX 15: STATE</b>	<b>LA</b>
<b>EMPLOYER'S STATE ID NUMBER</b>	<b>4578932001</b>
<b>BOX 16: STATE WAGES TIPS ETC</b>	<b>38400</b>
<b>BOX 17: STATE INCOME TAX</b>	<b>1204</b>

**LATEST #3**

**FORM 1099R RETIREMENT DATE**

**10/07**

**PAYER'S NAME STREET ADDRESS CITY STATE AND ZIP**

**USDA**

**3000 N DAKOTA ST**

**WASHINGTON DC 20006**

**PAYER'S FEDERAL IDENTIFICATION NUMBER**

**57-8888875**

**RECIPIENT'S IDENTIFICATION NUMBER**

**400-00-4305**

**RECIPIENT'S NAME**

**RONALD BLACKBURN**

**RECIPIENT'S STREET ADDRESS**

**74 BUILDER DR**

**RECIPIENT'S CITY STATE AND ZIP**

**BATON ROUGE LA 70807**

**BOX 1A: GROSS DISTRIBUTION**

**22509**

**BOX 2A: TAXABLE AMOUNT**

**22509**

**BOX 2B: TOTAL DISTRIBUTION**

**0**

**BOX 6: NET UNREALIZED**

**7**

**BOX 7: DISTRIBUTION CODE**



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<b>LINE 13: EDUCATION CREDIT</b>	<b>100</b>
<b>LINE 14: OTHER NONREFUND CREDIT</b>	<b>100</b>
<b>LINE 15: TOTAL NONREFUNDABLE TAX CREDITS</b>	<b>250</b>
<b>LINE 16: ADJUSTED LA INCOME TAX</b>	<b>395</b>
<b>LINE 18: TOTAL INCOME TAX</b>	<b>395</b>
<b>LINE 22: LA CITIZENS INSURANCE CREDIT</b>	<b>108</b>
<b>LINE 23: LA PROPERTY INSURANCE CREDIT</b>	<b>79</b>
<b>LINE 25: LA TAX WITHHELD</b>	<b>1204</b>
<b>LINE 30: TOTAL REFUND CREDIT</b>	<b>1391</b>
<b>LINE 31: OVERPPAYMENT</b>	<b>996</b>
<b>LINE 33: ADJUSTED OVERPAYMENT</b>	<b>996</b>
<b>LINE 34: MILITARY FAMILY ASSISTANCE FUND</b>	<b>33</b>
<b>LINE 35: START</b>	<b>125</b>
<b>LINE 40: TOTAL DONATIONS</b>	<b>158</b>
<b>LINE 41: SUBTOTAL</b>	<b>838</b>
<b>LINE 43: REFUND</b>	<b>838</b>

**SCHEDULE E**

<b>LINE 1: FEDERAL ADJUSTED GROSS INCOME</b>	<b>60909</b>	
<b>LINE 2A: RECAPTURE START</b>	<b>325</b>	
<b>LINE 3: TOTAL</b>	<b>61239</b>	
<b>LINE 4A: FEDERAL RETIREMENT BENEFITS 04E</b>	<b>22509</b>	
<b>LINE 4I: EXEMPT INCOME</b>	<b>22509</b>	
<b>LINE 4K: EXEMPT INCOME</b>	<b>22509</b>	
<b>LINE 5A: LA ADJUSTED GROSS INCOME</b>	<b>38725</b>	
<b>LINE 5C: LA ADJUSTED GROSS INCOME</b>	<b>38725</b>	
<b>FEDERAL RETIREMENT BENEFITS</b>	<b>TAXPAYER DATE RETIRED</b>	<b>10/07</b>

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**SCHEDULE G**

<b>LINE 2B:</b>	<b>SPOUSE</b>	<b>BLIND</b>
<b>LINE 2D:</b>	<b>TOTAL</b>	<b>1</b>
<b>LINE 2E:</b>		<b>100</b>
<b>LINE 11:</b>	<b>TOTAL</b>	<b>100</b>