

For the year Jan. 1–Dec. 31, 2011, or other tax year beginning _____, 2011, ending _____, 20 _____ See separate instructions.

Your first name and initial **MARY** Last name **GOLD** Your social security number **002-11-2011**

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 instructions. **123 COMMODITY LANE** Apt. no. _____ **▲ Make sure the SSN(s) above and on line 6c are correct.**

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). **RURAL VILLAGE NC 27665-6789** **Presidential Election Campaign** Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund You Spouse

Foreign country name _____ Foreign province/country _____ Foreign postal code _____

Filing Status 1 Single 4 Head of household (with qualifying person). (See instr.) 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 and full name here. 5 Qualifying widow(er) with dependent child

Exemptions 6a Yourself. If someone can claim you as a dependent, do not check box 6a. } Boxes checked on 6a and 6b **1**
 b Spouse } No. of children on 6c who:
 • lived with you _____
 • did not live with you due to divorce or separation (see instructions) _____
c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) if child under age 17 qualifying for child tax credit (see instructions)
 If more than four dependents, see instructions and check here Dependents on 6c not entered above _____
 Add numbers on lines above **1**
d Total number of exemptions claimed **1**

Income	7	8a	8b	9a	9b	10	11	12	13	14	15a	15b	16a	16b	17	18	19	20a	20b	21	22	
Wages, salaries, tips, etc. Attach Form(s) W-2	6,000																					
Taxable interest. Attach Schedule B if required		100																				
Tax-exempt interest. Do not include on line 8a			0																			
Ordinary dividends. Attach Schedule B if required				0																		
Qualified dividends					0																	
Taxable refunds, credits, or offsets of state and local income taxes						0																
Alimony received																						
Business income or (loss). Attach Schedule C or C-EZ																						
Capital gain or (loss). Attach Schedule D if required. If not required, check here									0													
Other gains or (losses). Attach Form 4797																						
IRA distributions												0										
Pensions and annuities												0										
Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E																						
Farm income or (loss). Attach Schedule F																21,904						
Unemployment compensation																						
Social security benefits																						
Other income. List type and amount																					0	
Combine the amounts in the far right column for lines 7 through 21. This is your total income																						28,004

Adjusted Gross Income	23	24	25	26	27	28	29	30	31a	32	33	34	35	36	37
Educator expenses															
Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ							0								
Health savings account deduction. Attach Form 8889							0								
Moving expenses. Attach Form 3903							0								
Deductible part of self-employment tax. Attach Schedule SE							1,547								
Self-employed SEP, SIMPLE, and qualified plans							4,000								
Self-employed health insurance deduction							0								
Penalty on early withdrawal of savings							0								
Alimony paid Recipient's SSN							0								
IRA deduction							5,000								
Student loan interest deduction							0								
Tuition and fees. Attach Form 8917							0								
Domestic production activities deduction. Attach Form 8903							0								
Add lines 23 through 35															10,547
Subtract line 36 from line 22. This is your adjusted gross income															17,457

Tax and Credits

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-55 for Tax and Credits.

Standard Deduction for—

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.
• All others:
Single or Married filing separately, \$5,800
Married filing jointly or Qualifying widow(er), \$11,600
Head of household, \$8,500

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 56-61 for Other Taxes.

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Includes lines 62-72 for Payments.

Refund

Direct deposit? See instructions.

Table with 3 columns: Line number, Description, and Amount. Includes lines 73-75 for Refund.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 76-77 for Amount You Owe.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below [X] No

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.

Paid Preparer Use Only

Print/Type preparer's name, Preparer's signature, Date, Firm's name, Firm's EIN, Firm's address, Phone no.