Caution: DRAFT FORM

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If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

Form	1	045
Form	1	045

Application for Tentative Refund See separate instructions.

OMB No. 1545-0098

2009

See	separate	msu ucuons.	
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▶ Do not attach to your income tax return—mail in a separate envelope.

For use by individuals, estates, or trusts.

	ment of the Treasury I Revenue Service			ndividuals, esta	ites, or trusts.	ate envelope.		ZUUJ
	Name(s) shown on return					Social secu	rity or employer	identification number
<u>i</u>								
e or print	Number, street, and apt. or suite no. If a P.O. box, see page 4 of the instructions. Spouse's social s					ocial security n	security number (SSN)	
Type	City, town or post office, state, and ZIP code. If a foreign address, see page 4 of the instructions. Daytime phone number ()							
1	This application is filed to carry back: a Net operating loss (NOL) (Sch. A, line 25, page 2) b Unused general business credit c Net section 1256 contracts loss s							
2a	For the calendar year 2009, or other tax year b Date tax return was filed beginning , 2009, and ending , 20							
3	If this application is	for an unused cred	lit created by	another carryb	ack. enter vea	r of first carry	oack ►	
4	If you filed a joint re years and specify w	turn (or separate re hether joint (J) or s	eturn) for some separate (S) ref	e, but not all, c :urn for each ▶	of the tax years	s involved in fig	guring the ca	arryback, list the
5	If SSN for carryback ye							
6	If you changed your							
7	Have you filed a pet							
8 9	Is any part of the de If you are carrying bac							
9	or the release of othe							🗌 Yes 🗌 No
	Computation of I		precedir	ng	precedir	ng	prece	dina
	(see page 4 of the inst		tax year ended Before	After	tax year ended Before	After	tax year ende Before	After
Note	If 1a and 1c are blank, ski		carryback	carryback	carryback	carryback	carryback	carryback
10	NOL deduction after page 4 of the instruction							
11	Adjusted gross inco	,						
12	Deductions (see page 6	of the instructions)						
13	Subtract line 12 from	m line 11						
14	Exemptions (see page 6	of the instructions)						
15	Taxable income. Line	13 minus line 14						
16	Income tax. See instructions and attac							
17	Alternative minimum	ntax						
18	Add lines 16 and 17							
19	General business croof the instructions)	edit (see page 7						
20	Other credits. Identit	fy						
21	Total credits. Add lir	-						
22	Subtract line 21 from							
23	Self-employment tax							
24	Other taxes							
25	Total tax. Add lines	•						
26	Enter the amount carryback" column each year							
27	Decrease in tax. Line							
28	Overpayment of tax	due to a claim of r	ight adjustme	nt under section	on 1341(b)(1) (a	attach computa	ation)	
Sig Her	knowledge and	es of perjury, I declare t d belief, they are true, co			n and accompany	ing schedules and	I statements, an	d to the best of my
Keep	a copy of pplication	ature					Date	
	· · · —	signature. If Form 1045	is filed jointly, bot	h must sign.			Date	
Prepa	arer Other <u>Name</u>						Date	
	Taxpayer Address	•						

Schedule A-NOL (see page 7 of the instructions)

Sch	edule A—NOL (see page 7 of the instructions)		
1	Enter the amount from your 2009 Form 1040, line 41, or Form 1040NR, line 38, minus any amount on Form 8914, line 6. Estates and trusts, enter taxable income increased by the total of the charitable deduction, income distribution deduction, and exemption amount	1	
2 3 4	Nonbusiness capital losses before limitation. Enter as a positive number 2 Nonbusiness capital gains (without regard to any section 1202 exclusion) 3 If line 2 is more than line 3, enter the difference; otherwise, enter -0- 4		
4 5	If line 3 is more than line 2, enter the difference; otherwise, enter -0		9
6 7	Nonbusiness deductions (see page 7 of the instructions) 6 Nonbusiness income other than capital gains 7		
8 9	(see page 8 of the instructions)	9	
10	If line 8 is more than line 6, enter the difference; otherwise, enter -0 But do not enter more than line 5		
11 12	Business capital losses before limitation. Enter as a positive number 11 Business capital gains (without regard to any section 1202 exclusion) 12		
13 14 15	Add lines 10 and 12		
16	Enter the loss, if any, from line 16 of your 2009 Schedule D (Form 1040). (Estates and trusts, enter the loss, if any, from line 15, column (3), of Schedule D (Form 1041).) Enter as a positive number. If you do not have a loss on that line (and do not have a section 1202 exclusion), skip lines 16 through 21 and enter on line 22 the amount from line 15		
17	Section 1202 exclusion. Enter as a positive number	17	
18 19	Subtract line 17 from line 16. If zero or less, enter -0- 18 Enter the loss, if any, from line 21 of your 2009 Schedule D (Form 1040). 19 (Form 1041).) Enter as a positive number 19		
20 21	If line 18 is more than line 19, enter the difference; otherwise, enter -0- 20 If line 19 is more than line 18, enter the difference; otherwise, enter -0-	21 22	
22 23	Subtract line 20 from line 15. If zero or less, enter -0	23	
24	NOL deduction for losses from other years. Enter as a positive number	24	
25 	NOL. Combine lines 1, 9, 17, and 21 through 24. If the result is less than zero, enter it here and on page 1, line 1a. If the result is zero or more, you do not have an NOL	25	

Form 1045 (2009)

Schedule B—NOL Carryover (see page 8 of the instructions)

Sch	edule B-NOL Carryover (see page	e 8 of the inst	ructions)			
	plete one column before going to the					
	column. Start with the earliest	precedii		precedir	preced	
carr	/back year.	tax year ended		tax year ended	tax year ende	d 🕨
1	NOL deduction (see page 8 of the instructions). Enter as a positive number					
2	Taxable income before 2009 NOL carryback (see page 8 of the instructions). Estates and trusts, increase this amount by the sum of the charitable deduction and income distribution deduction			3.	99	
3	Net capital loss deduction (see page 8 of the instructions)					
4	Section 1202 exclusion. Enter as a positive number					
5	Domestic production activities deduction					
6	Adjustment to adjusted gross income (see page 8 of the instructions)					
7	Adjustment to itemized deductions (see page 8 of the instructions)					
8	Individuals, enter deduction for exemptions (minus any amount on Form 8914, line 6, for 2006; line 2 for 2005 and 2008). Estates and trusts, enter exemption amount					
9	Modified taxable income. Combine lines 2 through 8. If zero or less, enter -0-					
10	NOL carryover (see page 9 of the instructions). Subtract line 9 from line 1. If zero or less, enter -0 Adjustment to Itemized Deductions (Individuals Only) Complete lines 11 through 38 for the carryback year(s) for which you itemized deductions only if line 3, 4, or 5 above is more than zero.					
11	Adjusted gross income before 2009 NOL carryback					
12	Add lines 3 through 6 above					
13	Modified adjusted gross income. Add lines 11 and 12					
14	Medical expenses from Sch. A (Form 1040), line 4 (or as previously adjusted)					
15	Medical expenses from Sch. A (Form 1040), line 1 (or as previously adjusted)					
16	Multiply line 13 by 7.5% (.075)					
17	Subtract line 16 from line 15. If zero or less, enter -0-					
18	Subtract line 17 from line 14					
19	Qualified mortgage insurance premiums from Sch. A (Form 1040), line 13 (or as previously adjusted)					
20	Refigured qualified mortgage insurance premiums (see instructions)					
21	Subtract line 20 from line 19					1045 (2020)

Schedule B—NOL Carryover (Continued)

Form 1045 (2009)

Sch	edule B-NOL Carryover (Continue	ed)				
	plete one column before going to the					
	column. Start with the earliest yback year.	tax year ende		precedin tax year ended	tax year ende	
22	Modified adjusted gross income from line 13 on page 3			C		
23	Enter as a positive number any NOL carryback from a year before 2009 that was deducted to figure line 11 on page 3			3.	9	
24	Add lines 22 and 23		-			
25	Charitable contributions from Sch. A (Form 1040), line 18 (line 19 for 2007 and 2008), or Sch. A (Form 1040NR), line 7 (or as previously adjusted).					
26	Refigured charitable contributions (see page 9 of the instructions)					
27	Subtract line 26 from line 25					
28	Casualty and theft losses from Form 4684, line 18 (line 20 for 2005 and 2006; line 23 for 2008) (or as previously adjusted)					
29	Casualty and theft losses from Form 4684, line 16 (line 18 for 2005 and 2006; line 21 for 2008) (or as previously adjusted)					
30	Multiply line 22 by 10% (.10)					
31	Subtract line 30 from line 29. If zero or less, enter -0					
32 33	Miscellaneous itemized deductions from					
55	Sch. A (Form 1040), line 26 (line 27 for 2007 and 2008), or Sch. A (Form 1040NR), line 15 (or as previously adjusted)					
34	Miscellaneous itemized deductions from Sch. A (Form 1040), line 23 (line 24 for 2007 and 2008), or Sch. A (Form 1040NR), line 12 (or as previously adjusted)					
35	Multiply line 22 by 2% (.02)		-			
36	Subtract line 35 from line 34. If zero or less, enter -0					
37 38	Subtract line 36 from line 33 . Complete the worksheet on page 10 of the instructions if line 22 is more than the applicable amount shown below (more than one-half that amount if married filing separately for that year). • \$126,600 for 1999. • \$128,950 for 2000.					
	 \$128,950 for 2000. \$132,950 for 2001. \$137,300 for 2002. \$139,500 for 2003. \$142,700 for 2004. \$145,950 for 2005. \$150,500 for 2006. \$156,400 for 2007. \$159,950 for 2008. 					
	Otherwise, combine lines 18, 21, 27, 32, and 37; enter the result here and on line 7 (page 3).		Printed on recycled			

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