Form 1040	U,	S. Individual Income Tax	Return 201	2 OMB No. 154	5-0074 IRS U	; lse Onlv	— Do	not write or staple in this spac		
Form the weet land - D	ec 31, 2		D12, ending	, 20				parate instructions.		
Your first name and in	itial	Last name				Your social security number				
		L	RUTHERFORD				and the last			
DAN If a joint return, spouse	's first r	t name and initial Last name				Spouse's social security number				
If a joint return, span						٠.				
address (number	r and str	eet). If you have a P.O. box, see instructions.		Apartm	nent no.	<u> </u>	Aaka	cure the CCNICA		
Home address (Name	950	NORTH BOAD					and	sure the SSN(s) above on line 6c are correct.		
13266 EAST	e. state.	NORTH ROAD and ZIP code. If you have a foreign address, also co	omplete spaces below (see in	structions).		Proc		ial Election Campaign		
		( )								
CHENOA Foreign country name		TL 61726  Foreign province/state/county Foreign postal code					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			
Foreign country marris		Foreign province/state/county Foreign postal code						- Command		
de la companya della companya della companya de la companya della		V 0: 1		☐ Head of hou	repold (mi	th gua		Opouse		
Filing Status	1	instructions) If the qualifying person is a child								
	2	Married filing jointly (even if only one had i		but not your	r dependen	t, ente	rthis	child's		
Check only	3	Married filing separately. Enter spouse's SS		name here						
one box.		name here	5	Qualifying v	widow(er) w	vith∵de	pende	ent child		
Exemptions	6 8	Yourself. If someone can claim yo	ou as a dependent, <mark>do</mark>	not check box	6a			Boxes checked on 6a and 6b		
•	ł	Spouse				,		No. of children		
		Dependents:	(2) Dependent			(4)	if under	on 6c who:		
	`		social security number	relatio to y		age	ing for	with you		
		(1) First name Last nam			0 4	qualify child (see i	tax cr nstrs)	did not live with you		
	-					1.		due to divorce or separation		
If more than four		:		,				(see instrs)		
dependents, see instructions and	***************************************	0.7						on 6c not entered above		
check here ►						1		Add numbers		
	C	Total number of exemptions claimed .						on lines		
	7	Wages, salaries, tips, etc. Attach Form	n(s) W-2			4	7	98,221.		
Income	8 8	Taxable interest. Attach Schedule B if	required				8 a			
	t	Tax-exempt interest. Do not include on	line 8a	8 ы	3,8	344.				
ttach Form(s)	9 a	Ordinary dividends. Attach Schedule B	if required				9a	19,855.		
V-2 here. Also		Qualified dividends								
V-2G and 1099-R		Taxable refunds, credits, or offsets of s					10	0.		
I tax was withheld.	11	Alimony received					11			
you did not	12 13	Business income or (loss). Attach Sche Capital gain or (loss). Att Sch D if reqd. If not red	edule C or C-EZ				12 13	-1,710.		
et a W-2, se instructions.	14	Other gains or (losses). Attach Form 4:	qu, ck nere			-1.	14	-3,000.		
oc mad dedona.							15 b	12,052.		
	16 a	IRA distributions	12/032. b	Taxable amou	nt nt		16 b			
	17	Rental real estate, royalties, partnershi	ips. S corporations. tr	usts. etc. Attac	h Schedule	Ε	17	-11,952.		
nclose, but do	18	Farm income or (loss). Attach Schedule					18	11/302.		
at attach, any ayment. Also,	19	Unemployment compensation					19			
ease use	<b>20</b> a	Social security benefits 20 a	b	Taxable amou	nt	;	20 b			
orm 1040-V.	21	Other income Non-employee compen					21	619.		
1	22	Combine the amounts in the far right column for				>	22	114,145.		
djusted	23 24	Educator expenses		23			i di			
ross	24	government officials. Attach Form 2106 or 2106-E.	ng arusts, and ree-dasis	24						
come	25	Health savings account deduction. Attach								
	26	Moving expenses. Attach Form 3903								
	27	Deductible part of self-employment tax. Attach Sc								
	28	Self-employed SEP, SIMPLE, and quali								
	29	Self-employed health insurance deducti								
	30	Penalty on early withdrawal of savings								
	<b>3</b> 1 a	Alimony paid <b>b</b> Recipient's SSN •		31 a		9		*		
	32	IRA deduction								
	33	Student loan interest deduction				t				
	34	Tuition and fees. Attach Form 8917			***************************************					
	35	Domestic production activities deduction. Attach F					36			
		Add lines 23 through 35					36	111111		

Form 1040 (201	2)	DAN L RUTHERFORD		Page 2
	38	Amount from line 37 (adjusted gross income)	. 38	114,145.
Tax and Credits	39	a Check		
Credits		if: Spouse was born before January 2, 1948, Blind. checked ▶ 39 a		
Standard		b If your spouse itemizes on a separate return or you were a dual-status alien, check here		§
Deduction	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)		41,885.
for -	41	Subtract line 40 from line 38	41	72,260.
People who check any box	42	Exemptions. Multiply \$3,800 by the number on line 6d	42	3,800.
an line 39a or	43	Taxable income. Subtract line 42 from line 41		
on or who can		If line 42 is more than line 41, enter -0-	43	68,460.
be claimed as a dependent, see	44	Tax (see instrs). Check if any from: a Form(s) 8814 c 962 election		
instructions.	45	<b>b</b> Form 4972	44	11,918.
All others:	45	Alternative minimum tax (see instructions). Attach Form 6251	45	1,836.
Single or	46	Add lines 44 and 45	200000000000000000000000000000000000000	13,754.
Married filing	47	Foreign tax credit. Attach Form 1116 if required	<u>.</u>	
eparately, 5,950	48	Credit for child and dependent care expenses. Attach Form 2441	_	
Married filing	49	Education credits from Form 8863, line 19	_	
ointly or	50	Retirement savings contributions credit. Attach Form 8880 50	_	
Qualifying vidow(er),	51	Child tax credit. Attach Schedule 8812, if required 51		
11,900	52	Residential energy credits. Attach Form 5695		
lead of	53	Other crs from Form: a 3800 b 8801 c 53		
jousehold,	54	Add lines 47 through 53. These are your total credits	54	453.
8,700	<sup>-</sup> 55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-		13,301.
ther	56	Self-employment tax. Attach Schedule SE	_	13/301.
axes	57	Unreported social security and Medicare tax from Form: a 4137 b 8919		
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		
	59 a	Nousehold employment taxes from Schedule H	59 a	
		First-time homebuyer credit repayment. Attach Form 5405 if required		
	60	Other taxes. Enter code(s) from instructions	60	<u>'</u>
	61		61	13,301.
ayments	62	Add lines 55-60. This is your total tax	-	13,301.
you have a	63	2012 estimated tax payments and amount applied from 2011 return	-	
ualifying		Earned income credit (EIC)	-	
nild, attach		Nontaxable combat pay election •   64b	-	
chedule EIC.		Additional child tax credit. Attach Schedule 8812	3.4	
	66	American opportunity credit from Form 8863, line 8	-	
	67	Reserved	-	
	68	Amount paid with request for extension to file	4	
	69	Excess social security and tier 1 RRTA tax withheld	-	
	70	Credit for federal tax on fuels. Attach Form 4136	-	
	71	Credits from Form: a 2439 b Reserved c 8801 d 8885 . 71	-	
			-	10050
efund	73	Add Ins 62, 63, 64a, & 65-71. These are your total pmts	72	19,056.
eiuna		If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	5,755.
		Amount of line 73 you want <b>refunded to you.</b> If Form 8888 is attached, check here	74 a	5,755.
ect deposit?		Routing number   Checking   Savings		
e instructions.	75	Account number		
		Amount of line 73 you want applied to your 2013 estimated tax	_	
nount	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay see instructions	76	
u Owe	77	Estimated tax penalty (see instructions)		
ird Party	Do you	want to allow another person to discuss this return with the IRS (see instructions)?	plete l	below. No
signee	Design	ea's		I identification
	name	Rex L. Schaeffer no.	number	(PIN)
gn	Under places	penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the be they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which pre-	st of my	/ knowledge and
ere	Your	signature   Date   Your occupation -		ytime phone number
nt return? e instructions.		MDEA CUDED		
ep a copy	Spor	ITREASURER  use's signature. If a joint return, both must sign.  Date  Spouse's occupation		100 I I I I I D
your records.	•	opouse a compatibility and must sign,	lf th	ne IRS sent you an Identity Pro-
	Print/To	/pe preparer's name Preparer's s)gnature // / Date Check		ere (see instrs)
8-1	-	Clieck	_] if _	PTIN
iid	-	L. Schaeffer 04/12/2013 self-employ	red	
eparer	Firm's r	Tax a recounting ray, ring,	_	
e Only	Firm's a	address ► 501 N. Clinton St VV Firm's E	IN ►	
8		Bloomington IL 61701-3201 Phone n	0.	

Form 1040 (2012)



	DAN		L RUTHERFORD			
	13266 EAST CHENOA		0 NORTH ROAD  IL 61726			
		C	Filing status (see instructions)  X Single or head of household Married filing jointly Married filing separate Check if civil union return (see instructions)	ely		Widowed
•	Step 2: Income	1	Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4		1	(Whole dollars only) 114,145.00
STAPL	income	2	Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 1040EZ Other additions. <b>Attach</b> Schedule M.		2	3,844.00
PLE		4	Total income. Add Lines 1 through 3.		4	117,989.00
W 2 A	Step 3: Base	. 5	Social Security benefits and certain retirement plan income received if included in Line 1. Attach page 1 of federal return.  5 12,052.0	0		
N D	Income	6	Illinois Income Tax overpayment included in U.S. 1040, Line 10 6 00	-		
9			Other subtractions. Attach Schedule M. 7 Check if Line 7 includes any amount from Schedule 1299-C.	<u>U</u>	0	10,050,00
F O R			Add Lines 5, 6, and 7. This is the total of your subtractions.  Illinois base income. Subtract Line 8 from Line 4.		8 9	12,052.00 105,937.00
	Step 4: 10 a Number of exemptions from your federal return 1 x \$2,050 a 2,050.0  Exemptions b If someone can claim you as a					
H E R E	Litempuons		dependent, see instructions. $\times$ \$2,050 b 00 C C Check if 65 or older: $\times$ \$1,000 c $\times$	-		
<b>A</b>			Check if legally blind: You + Spouse = x \$1,000 d  Exemption allowance. Add Lines a through d.		10	2,050.00
	Step 5:	11	Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12.		11	103,887.00
	Net Income	12	•			
<b>V</b>			Check the box that applies to you during 2012 Nonresident    Dart-year resident   Name		and	enter the Illinois
T A P	Step 6:	13	Residents. Multiply Line 11 by 5% (.05).  Nonresidents and part-year residents. Enter the tax from Schedule NR.		13	5,194.00
Ē	Ida	14	Recapture of investment tax credits. Attach Schedule 4255.		14	00
Y		15	Income tax. Add Lines 13 and 14. Cannot be less than zero.		15	5,194.00
	Step 7: Tax After	16	Income tax paid to another state while an Illinois resident.  Attach Schedule CR.  16	0		
E	Non- refundable		Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR. 17 426.0			
	Credits		Credit amount from Schedule 1299-C. Attach Schedule 1299-C.  Add Lines 16, 17, and 18. This is the total of your credits.		10	406.00
i L 1		20	Cannot exceed the tax amount on Line 15.  Tax after nonrefundable credits. Subtract Line 19 from Line 15.		19 20	426.00
_			· ·			

ILIA0112 01/03/13

This form is authorized as outlined under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information could result in a penalty.



DAN L RUTHE	RFOR	D					
	21	Tax after nonrefundable credits from page 1, Line 20	21	4,768	. 00		
Step 8:	22	Household employment tax. See instructions.	22		00		
Other	23	Use tax on internet, mail order, or other out-of-state purchases from UT	-				
Taxes	24	Worksheet or UT Table in the instructions. <b>Do not</b> leave blank. <b>Total Tax.</b> Add Lines 21, 22, and 23.	23	0	. 00		
Step 9:	25	Illinois Income Tax withheld. Attach W-2 and 1099 forms.	25	4.760		4	4,768.0
Payments and	26	Estimated payments from Forms IL-1040-ES and IL-505-I,	25	4,768	. 00		
Refundable	20	including overpayment applied from 2011 return	26	0.	. 00		
Credit	27	Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T.	27		00		
0.00.0	28	Earned Income Credit from Schedule ICR. Attach Schedule ICR.	28		00		
	29	Total payments and refundable credit. Add Lines 25 through	gh 28.		2	9	4,768.0
Step 10:	30	Overpayment. If Line 29 is greater than Line 24, subtract L	ine 24 f	rom Line 29.	3	0	0
Result	31	Underpayment. If Line 24 is greater than Line 29, subtract	Line 29	from Line 24.	· 3	1	0.0
Step 11:	32	Late payment penalty for underpayment of estimated tax.	32		00		
Underpayment	á	Check if at least two-thirds of your federal gross income is	from far	ming.	4		
of Estimated		Check if you or your spouse are 65 or older and permanen					
Tax Penalty		nursing home.					
and Donations	C	Check if your income was not received evenly during the year	ear and	you $\square$			
	c	annualized your income on Form IL-2210. Attach Form IL-2 Check if you were not required to file an Illinois Individual I	221U. ncoma T	·av	•		
		return in the previous tax year.	ricorrie i				
	33	Voluntary charitable donations. Attach Schedule G.	33		00		
	34	Total penalty and donations. Add Lines 32 and 33.	-		3	4	0(
Step 12:	35	If you have an overpayment on Line 30 and this amount is	greater	han Line 34, subt			
Refund or	26	Line 34 from Line 30. This is your remaining overpayment.			. 3	5	0.0
Amount You	36	Amount from Line 35 you want refunded to you. If you want t into your checking or savings account, complete the direct deposit informal	o deposit y tion on Lin	our refund directly	30	6	0(
Owe	37	Complete to direct deposit your refund	and on Em				
	3,	Routing number Checking or	Пса	vings			
		Account number		virigs			
	38	Subtract Line 36 from Line 35. This amount will be applied	to more	2012		0	
	39				X.   3	5	00
	39	If you have an underpayment on Line 31, add Lines 31 and overpayment on Line 30 and this amount is less than Line 3	34. <b>or</b> li	you have an	:		
		Line 34. This is the <b>amount you owe.</b> See instructions.	J4, SUDII	act Line 30 Hom	39	<b>3</b>	0.00
Step 13:	Under	penalties of perjury, I state that I have examined this return, and, to the bes	t of my kn	owledge, it is true, con	rect, and	complete	
Sign and			,,	o	roog and	romproto.	
Date	Your si	Date Daytime phone numb	er	Your spouse's si	gnature		Date
4	$\Rightarrow$	12 Mark 04/12/13	The same	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•		
	Palid pr	parer's signature Date Preparer's phone num	nber	Preparer's FEIN,	SSN, or F	TIN	
		(V			."		
mil 1 1 m							
Third Party	K C	neck, and complete below, to allow another person to discus	ss this re	turn with the Illino	ois Depa	rtment of R	levenue.

If no payment enclosed, mail to:
ILLINOIS DEPARTMENT OF REVENUE
PO BOX 1040
GALESBURG IL 61402-1040

Name (please print) Rex L. Schaeffer

If payment enclosed, mail to:
ILLINOIS DEPARTMENT OF REVENUE
SPRINGFIELD IL 62726-0001

Designee's

Phone number

ILIA0112 01/03/13



Form 1099-G

Information

Designee's

Check the box if you still want us to mail you a paper Form 1099-G next year.

We are no longer automatically mailing 1099-G forms. Instead, we ask that you get this information from our website.