104	U	Į	J.S. Individual Income Tax Return	2007	ifts (se Only - Con	of write or si	
Label			e year San. 1-Dac. 31, 2007, or other tax year beginning	and the second second second	enring 23		CAUS No. 1949-0074
(See	L		ur first name and initial	Last name		Y (5)	or social security number
instructions	AB		ANDER M.	LEVIN Last name			ouse's social security number
on page 12.)	E		joint return, spouse's first name and initial			Sp	nose's social security number
Use the IRS	L	V.	ICTORIA S. me address (number and street). If you have a P.C	LEVIN	Aut.	10	You must enter
label. Otherwise,	Н	l .		nox, see pays 12.	rye.		your SSN(s) above.▲
please print	R		801 MORGAN DRIVE		D. C.		
or type.	E	1	κ town or post effice, state, and ZIP code. If you have a form HEVY CHASE, MD 20815	squidatetes and adjo in		1	ecking a box below will not and expense.
Presidential Election Can	2021		The state of the s	na injutty want \$3 to ac	to this fund (see page 12)	→ 2	You X Spouse
Election Can	ipai		Single Single	ag jointy, wark 55 to ge	Head of household (with		
Filing Stat	us	1 2	Married filing jointly (even if only one had in	rome)	person is a child but not		
		3	Married sing jointy (even it only one had so Married sing separately. Enter spouse's SS		name here.	, 34 40,	
Check only		з	and full name here.	5		n depender	it child (see page 14)
one box.		- Ra	X Yourself. If someone can claim you as a de				Boyes checked 2
Exemption	15		X Spouse				No. of children
			Dependents:	-2) Dependent's social	(a) Copendert is relationship to	Thy I gesally ing stalls for	r on so who. , • lived with you
		-	(1) First name Last name	security number	yeu	ched tax free (ste bage 15	cid not live with voir dun to divorce
							or septration ene page 18)
							- Departments on As
if more than fo	IJſ			. Now we you a manage grown as more than the contract of the c			Dependents on 8c not entered above
dependents, see page 15.					,	l ,	Add numbers
		d	· · · · · · · · · · · · · · · · · · ·				on ones ≥ 2
Income		7	Wages, salaries, tips, etc. Attach Form(s) W-2			7	260,411.
Attach Form(s	١	8a			1 025	8a	230.
W-2 here. Also		b	Tax-exempt interest. Do not include on line 8a		1,935		3,969.
attach Forms W-2G and		9a	Ordinary dividends. Attach Schedule B if require	d	9b 2,489	9a	3,303.
1099-R if tax		b		facet hancen touce	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	10	0.
was withheld.		10	Taxable refunds, credits, or offsets of state and	STMT 7	SIMI Z SIMI 4	11	
		11	Alimony received Business income or (loss). Attach Schedule C o		er aller i respession	12	
If you did not		12	Capital gain or (loss). Attach Schedule D if requi		hora	13	47,970.
get a W-2,		13 14	Other gains or (losses). Attach Form 4797	dea, it not required, one on	1100	14	
see page 19.		15a		,	b Taxable amount	15b	3,991.
Enclose, but d	C .	16a			b Taxable amount	16b	
not attach, any		17	Rental real estate, royalties, partnerships, Scorp	porations, trusts, etc. Attac	ch Schedule E	17	8,581.
payment. Also please use	,	18	Farm income or (loss). Attach Schedule F			18	
Form 1040-V.		19	Unemployment compensation			19	
		20a	Social security benefits 20a	44,384.	b Taxable amount (see page 24	20b	37,726.
		21	Other income. List type and amount (see page 2	24)			
						21	262 070
·		22	Add the paroants is the far right column for line	s ž mrough 21. Tietus <i>j</i> or		22	362,878.
		23	Educator expenses (see page 26) Codan buologic arcenses of rolers sis, redomin 4 arc	ore, as the party are morest	23	4.00	
Adjusted		24	Curtain business expenses of reservists, netominiques ansists. Attach Ferm 2198 or 2196 EZ		24	****	
Gross		25	Health savings account deduction. Attach Form	56 h 9	25		
Income		26	Moving expenses. Attach Form 3903	Di on	26 27		
		27	One-haif of self-employment tax. Attach Schedu Self-employed SEP, SIMPLE, and qualified plan		28		
		28	Self-employed Self, Shartic, and qualified pain Self-employed health insurance deduction (see		29		
		29 30	Penalty on early withdrawal of savings	page Caj	30		
		318			31a		
		32	IRA deduction (see page 27)		32		
		33	Student loan interest deduction (see page 30)		33		
		34	Tuben and fees deduction. Attach Form 8917		34		
		35	Demost a production activities deduction. Attac	n ^C erm 3903	35		
		36	Add lines 23 traceigh 31a and 32 fraceigh 35			36	والمنافقة والمنا
11 601		37	Systematisme 36 from line 22. This is your adjust	sted gross income	3	➤ 37	362,878.

	(2007)	S	ANDER M. & VICTORIA S	. LEVIN					Page 2
Tax an			Amount from line 37 (adjusted gross income)	The second secon				38	362,878.
Credits			Check \ X You were born before Janua	rv 2. 1943.	Blind.	Total boxes			
Stundard	1	3 Ta	if: X Spouse was born before Jan		-, >	checked	➤ 39a 2		
Deduction	101	ь	If your apouse itemizes on a separate return or you were				▶ 39b		
People v checked br	who La ny		Itemized deductions (from Schedule A) or you					40	62,281.
box on line or 395 01 v	39a -		Subtract line 40 from line 38	, Jianuara decuari	1011 (353 (311))	. g.,,		41	300,597.
can be da		41	If line 38 is \$117,300 or less, multiply \$3,400 b	or the total number	of exemptions	claimed on l	line 6d		AND AND A TO THE REAL PROPERTY OF THE PARTY
as a depen	naesii	42	If line 38 is over \$117,300 to less, multiply \$6,400 to		or manphore	3,411,64 3.11		42	2,266.
1		40	Taxable income. Subtract line 42 from line 41.	If line 42 is more t	han line 41 en	ter -0-		43	298,331.
All other	re:	43	Tax. Check if any tax is from: a Form(s) 8	R14 b Form	4972	Form(s) 88)	89	44	68,567.
Single of		44	Alternative minimum tax. Attach Form 6251	WIN BETTERM	14012 6	1 2111(3) 36	0.0	45	8,674.
Married file separately.	ing	45				and the same		46	77,241.
\$5,350		46	Add lines 44 and 45 Credit for child and dependent care expenses. A	Attack Form 2.141		47	-		Lyn, and and a Roll of the
Marnedfi	ing	47	Credit for the elderly or the disabled. Attach Sci			48	W A DOWN MAN THE WAY AND A PARTY OF A PARTY OF THE PARTY		
jointly or Qualifying		48		teane ii		49	graph and the first and the state of the sta		
\$10,700		49	Education credits. Attach Form 8863			50	and a summa series after the term of the terms of the ter		
Head of		50	Residential energy credits. Attach Form 5695	111 1 H + 444		51	and an experience of the second second		
household	1,	51	Foreign tax credit. Attach Form 1116 if required			52	the property of the court of th		
\$7,650		52	Child tax credit (see page 39). Attach Form 890			53	man man para di sa atra pranca de la trada de la trada de la compansión de		
		53	Retirement savings contributions credit. Attach		0020				
		54	Credits from: a Form 8396 b Form			54 55	and the second s		
		55	Other credits: a Form 3800 b Form		[11]	33		56	Name of the state
		56	Add lines 47 through 55. These are your total of		- 63		•	57	77,241.
		57	Subtract line 56 from line 46. If fine 56 is more	main and an enter		April 1 - 2 - 2 - 1 - 2 - 1 - 1 - 1 - 1	encerne a serie de la company com a per el central de la company de la c	58	
Other		58	Self-employment tax, Attach Schedule SE Unreported social security and Medicare tax fro	en l'Esra	(1127 h]	Form 9010		59	
Taxes		59	Unreported social security and Medicare lax at	Jill. di FUIT	h Enem 5230 #	raquirad		60	
		60	Additional tax on IRAs, other qualified retireme			required		61	
		61	Advance earned income credit payments from		a			62	476.
		62	Household employment taxes, Attach Schedule					63	77,717.
		63	Add lines 57 through 62. This is your total tax			64	47,855.		STATEMENT 10
Payme	ents		Federal income tax withheld from Forms W-2 a		tan Yan Y	64	31,120.		DIMILLIAM TO
		65	2007 estimated tax payments and amount appl	ned from 2000 ten	3111	65	21,140.	1	
if you hav			Earned income credit (EIC)	Lag. I		66a		-	
child, atta Schedule	acn		Nontaxable combat pay election	66b					
Scheppie	EIC	67	Excess social security and tier 1 RRTA tax with	ineid (see page 59,	*1.14	67	and the section of th		
						68			
		68	Additional child tax credit. Attach Form 8812				The state of the s	1	
		69	Amount paid with request for extension to hie		7r 5005	69			1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		69 70	Amount paid with request for extension to life Payments from: a Form 2439 b	Form 4136 c 🗀		69 70			The second secon
		69 70 71	Amount paid with request for extension to life a Payments from: a Form 2439 b Refundable credit for prior year minimum tax to	Form 4136 c	ne 27	69		79	78 975.
		69 70 71 72	Amount paid with request for extension to life and Payments from: a Form 2439 b I Refundable credit for prior year minimum tax for Add times 64, 65, 66a, and 67 through 71. The	Form 4136 c from Form 8801, le se are your total p	ne 27 ayments	69 70 71	>	72	
Refun		69 70 71 72 73	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax 1 Add lines 64, 65, 663, and 67 through 71. The If fine 72 is more than line 63, subtract line 63	Form 4136 c from Form 8801, le se are your total p ar from line 72. This	ne 27 ayments is the amount y	69 70 71	<u> </u>	73	78,975. 1,258.
Direct dep Ses page t	oosit? 59	69 70 71 72 73 74	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax 1 Add lines 64, 65, 663, and 67 through 71. The If fine 72 is more than line 63, subtract line 63 Amount of line 73 you want refunded to you.	Form 4136 c. from Form 8801, he se are your total p from line 72. This If Form 8888 is atta	ne 27 ayments is the amount y acned, check for	69 70 71	>	1	
Direct dep See page t and fill in 7 14c, and 7	osit? 59 745,) 74d,	69 70 71 72 73 74	Amount paid with request for extension to his a Payments from: a Form 2439 b F	Form 4136 c from Form 8801, list se are your total p our total p our form line 72. This lift Form 8888 is attacking savings	ne 27 ayments is the amount y ached, chack in Account d number	69 70 71 71	<u> </u>	73 74a	
Direct dep See page t and fill in 7 74c, and 7 or Form is:	oosit? 59 745,) 74d, 888.	69 70 71 72 73 743 175	Amount paid with request for extension to his a Payments from: a Form 2439 b F	Form 4136 c from Form 8801, lisse are your total parent from line 72. This if Form 8888 is attacking from Savings food estimated tax	ne 27 ayments is the amount y acreed, check to Acreed d synter	69 70 71 71 700 overpaid	1,258.	73 74a	
Direct dep Ses page 5 and fill in 7 4c, and 7 or Form fit Amou	osit? 59 745, > 745, 888.	69 70 71 72 73 743 175 76	Amount paid with request for extension to his a Payments from: a Form 2439 b 18 Refundable credit for prior year minimum tax 1 Add lines 64, 65, 663, and 67 through 71. The It fine 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. It feating the first 73 you want applied to your 20 Amount of line 73 you want applied to your 20 Amount you owe. Subtract line 72 from fine 63	Form 4136 c from Form 8801, lisse are your total parent from line 72. This if Form 8888 is attacking from Savings food estimated tax	ne 27 ayments is the amount y acreed, check to Acreed d synter	69 70 71 70 71 70 70 70 70 70 70 70 70 70 70 70 70 70	<u> </u>	73 74a	
Direct dep See page to and fill in 7 Pac, and 7 or Form by Amou You C	oosit? 59 745, > 745, 188. Int	69 70 71 72 73 743 ► 1 75 76 77	Amount paid with request for extension to his a Payments from: a Form 2439 b 1 Refundable credit for prior year minimum tax I Add lines 64, 65, 66a, and 67 through 71. The If line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. I feating the first line 73 you want applied to your 20 Amount you owe. Subtract line 72 from the 63 Estimated tax penalty (see page 61)	Form 4136 c from Form 4801, list se are your total parties from line 72. This life Form 8888 is attracting from Savegs 008 estimated tax 3. For details on ho	ayments is the amount y acned, check the Acrount d sunter where the control of the control acrount of the contro	69 70 71 71 75 page 60 77 6122 8	1,258.	73 74a 76	1,258.
Oirect dep See page 5 and fill in 7 Tac, and 7 or Form or Amou You C Third	osst? 59 745,) 744, 888 Int Owe Part	69 70 71 72 73 742 75 76 77	Amount paid with request for extension to his a Payments from: a Form 2439 b F	Form 4136 c from Form 4801, list se are your total parties from line 72. This life Form 8888 is attracting from Savegs 008 estimated tax 3. For details on ho	ayments is the amount y acned, check the Acrount d sunter where the control of the control acrount of the contro	69 70 71 71 75 page 60 77 6122 8	1,258.	73 74a 76	ng. No
Ses page 1 and fill in 2 Tac, and 7 or Fam in Amou You C Third Desig	osst? 59 745,) 744, 888 Int Owe Part	69 70 71 72 73 742 1 75 76 77 77 79 10 10 10 10 10 10 10 10 10 10 10 10 10	Amount paid with request for extension to his a Payments from: a Form 2439 b I Refundable credit for prior year minimum tax 1 Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. It souths Subtract line 73 you want applied to your 20 Amount you owe. Subtract line 72 from one 63 Estimated tax penalty (see page 61). Do you want to allow another person to discuss the same PREPARER.	Form 4136 c from Form 8801, lisse are your total professional professional from line 72. This if Form 8888 is attracting savings 608 estimated tax 3. For details on healths return with the	ne 27 ayments is the amount y acned, check he Account disprese sw to pay, see p HRS (see page Phase 19.	69 70 71 71 75 75 75 77 75 77 75 77 75 77 75 75 75	1,258	73 74a 76	1,258.
Direct dep Ses page 1 and filt in 1 7 ac Form se Amou You C Third Desig Sign	osst? 59 745,) 744, 888 Int Owe Part	69 70 71 72 73 742 1 75 76 77 77 79 10 10 10 10 10 10 10 10 10 10 10 10 10	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax I Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. I housing Carlot line 73 you want applied to your 20 Amount you owe. Subtract line 72 from sine 63 Estimated tax penalty (see page 61). Do you want to allow another person to discuss larges PREPARER and PREPARER.	Form 4136 c from Form 8801, lisse are your total particle. If Form line 72. This lifer 8888 is attacking are savings 608 estimated tax. 3. For details on he little return with the little and accompany based on all informations.	ayments is the amount y acned, check he Account of aunter ow to pay, see p e IRS (see page page page y og schedules u en ef given creck	69 70 71 70 71 75 76 77 61)2 X 3 stidements, ager has beyon and stidements.	1,258	73 74a 76 Collowing Percer por bo	1,258.
Ses page 1 and fill in 2 Tac, and 7 or Fam in Amou You C Third Desig	osst? 59 74b, \$ 74b, \$ 74d, \$ we Dwe Part	69 70 71 72 73 742 1 75 76 77 77 79 10 10 10 10 10 10 10 10 10 10 10 10 10	Amount paid with request for extension to his a Payments from: a Form 2439 b I Refundable credit for prior year minimum tax 1 Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. It souths Subtract line 73 you want applied to your 20 Amount you owe. Subtract line 72 from one 63 Estimated tax penalty (see page 61). Do you want to allow another person to discuss the same PREPARER.	Form 4136 c from Form 8801, lisse are your total professional professional from line 72. This if Form 8888 is attracting savings 608 estimated tax 3. For details on healths return with the	ne 27 ayments is the amount y acned, check the Account of aunter by to pay, see p IRS (see page Phase 19 you see pains of which areo Year openios atternation	69 70 71 70 71 75 76 61)2 X A stidements, ager has try ar	1 , 258 . Yes. Complete the land to the pest of my keep lower light.	73 74a 76 Collowin	1,258. 10g. No oal prentication of the contest, while process competitions.
Orrect dec See page 1 and filt in 7 7ac, and 7 or Form for Amou You C Third Desig Sign Here Jont refer See page	ossit? 59 746, \$ 714, \$ 888. unt Owe Part nee	69 70 71 72 73 742 1 75 76 77 77 79 10 10 10 10 10 10 10 10 10 10 10 10 10	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax 1 Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. It have been seen as a country of line 73 you want applied to your 20 Amount you owe. Subtract line 72 from one 63 Estimated tax penalty (see page 61). Do you want to allow another person to discuss the same PREPARER and PREPARER.	Form 4136 c from Form 8801, lisse are your total particle. If Form line 72. This lifer 8888 is attacking are savings 608 estimated tax. 3. For details on he little return with the little and accompany based on all informations.	ayments is the amount y acned, check he Account of aunter ow to pay, see p e IRS (see page page page y og schedules u en ef given creck	69 70 71 vou overpaid ere 75 page 60 77 61)? X Stidements, are has bry are	1,258	73 74a 76 Collowin	1,258.
Orrect dep Ges page : and filt in J 74c, and 7 or Forst se Amou You C Third Desig Sign Here Joant ratus See page Keep a Co Ser you	ossit? 59 746, \$ 714, \$ 888. unt Owe Part nee	69 70 71 72 73 742 1 75 76 77 77 79 10 10 10 10 10 10 10 10 10 10 10 10 10	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax I Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. I housing Carlot line 73 you want applied to your 20 Amount you owe. Subtract line 72 from sine 63 Estimated tax penalty (see page 61). Do you want to allow another person to discuss larges PREPARER and PREPARER.	Form 4136 c from Form 8801, lisse are your total parent from line 72. This life Form 8888 is attracting are savings on the saving are details on he company based on all internal life forms at life f	ayments is the amount y acned, check the Account distribution distribution be own to pay, see p IRS (see page Phare) yog schedules ar on of which perco	69 70 71 //OU overpaid one 75 page 60 77 61)? X of statements, see has my ser OF CC	1,258 . Yes, Complete the same to the pert of my known which get. DNGRESS	73 74a 76 Collowin	1,258. 10g. No oal prentication of the contest, while process competitions.
Orrect dep See page 1 and fill in 2 7 ac, and 7 or Form se Amou You C Third Desig Sign Here Jost refus See page see page see page see page	ossit? 59 746, \$ 714, \$ 888. unt Owe Part nee	69 70 71 72 73 742 75 76 77 79 10 10 10 10 10 10 10 10 10 10 10 10 10	Amount paid with request for extension to his a Payments from: a Form 2439 b 1 Refundable credit for prior year minimum tax I Add lines 64, 65, 66a, and 67 through 71. The If line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. I feating the first line 73 you want applied to your 20 Amount you owe. Subtract line 72 from tine 63 Estimated tax penalty (see page 61). Do you want to allow another person to discuss inspect PREPARER are penalties of person, desclare that have examined this penalties. Deciration of preparer interminant associated for supportance. Secured a penalties of person, desclare that have examined this penalties of person, desclare that have examined this penalties of person of preparer interminant associated. Special's examined that is penalties both must also appendix.	Form 4136 c from Form 8801, lisse are your total parent from line 72. This life Form 8888 is attracting are savegs 008 estimated tax 3. For details on his life return with the life from and accompanious and internal from a life from	ayments is the amount y acned, check its dereent dereent sow to pay, see p a IRS (see page Phace 19 you generates you for production MEMBER	69 70 71 //OU overpaid one 75 page 60 77 61)? X of statements, see has my ser OF CC	1,258 . Yes, Complete the same to the pert of my known while specified and th	73 74a 76 Collowing Person Person Security Secur	1,258. 10g. No oal prentication of the contest, while process competitions.
Orrect dep Ges page : and filt in J 74c, and 7 or Forst se Amou You C Third Desig Sign Here Joant rotes See stage Keep a Co See yage Keep a Co See yage Keep a Co See yage Keep a Co	nosit? 59 74b, \$ 74b, \$ 74b, \$ 100 74b, \$ 100 Part Part Part 13	69 70 71 72 73 742 1 75 76 77 77 19 10 10 10 10 10 10 10 10 10 10 10 10 10	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax f Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 and anount of line 73 you want refunded to you. It seems to be a first than 173 you want applied to your 20 Amount you owe. Subtract line 72 from tine 63 Estimated tax ponaity (see page 61). Do you want to allow another person to discuss its page? PREPARER and penalties of persey, desclare that have examined this complete. Declaration of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of penalties for penalties of penalties.	Form 4136 c from Form 4801, lisse are your total particle. This from line 72. This if Form 8888 is attracting. Savings 008 estimated tax 3. For details on his return with the return and accompanious of the state.	ayments is the amount y acned, check fit account d streent bow to pay, see p talks (see page phase y og schedulas ar on of which droco Year occupation SOCIAL SOCIAL	69 70 71 //OU overpaid one 75 page 60 77 61)? X See has my see OF CC pates SERVI Data	1,258. Yes, Complete the same to the peet of my known while sign. DNGRESS CES Chack of Acid.	73 74a 76 Collowing Person Person Security Secur	1,258. ng. No selection of the correct value va
Cirrect dep See page 1 2 ac. 300 7 or Form 50 Amou You C Third Desig Sign Here Joset refus See page See page Feed a Co for your records.	Part	69 70 71 72 73 742 175 76 77 Vy 10 00 00 00 00 00 00 00 00 00 00 00 00 0	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax f Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 a Amount of line 73 you want refunded to you. I found for the 73 you want refunded to you. I cannot you owe. Subtract line 72 from fine 63 Amount you owe. Subtract line 72 from fine 63 Estimated tax penalty (see page 61) Do you want to allow another person to discuss a segment. PREPARER enter plane of person, capture faither than tax payer is the penaltic. The person of preparer faither than tax payer is the penaltic. **ROBERT KLEIMAN** **ROBERT KLEIMAN** **AUTROMORE KRAIT**	Form 4136 c from Form 4801, lisse are your total particle. This from line 72. This if Form 8888 is attracting and Savegs 008 estimated tax 3. For details on his return with the return and accompanions of the Cate.	ayments is the amount y acned, check the Accent of author white pay, see p IRS (see page Phase) ying acheous a and a phon account MEMBER Spoura's occup	75 20 20 20 20 20 20 20 2	1,258. Yes, Complete the same to the peet of my known while sign. DNGRESS CES Chack of Acid.	73 74a 76 Collowing Person Person Security Secur	1,258. ng. No selection of the correct value va
Orrect dep Ges page : and filt in J 74c, and 7 or Forst se Amou You C Third Desig Sign Here Joant rotes See stage Keep a Co See yage Keep a Co See yage Keep a Co See yage Keep a Co	Part	69 70 71 72 73 744 75 76 77 Und displayed	Amount paid with request for extension to his a Payments from: a Form 2439 b Refundable credit for prior year minimum tax f Add lines 64, 65, 66a, and 67 through 71. Then It line 72 is more than line 63, subtract line 63 and anount of line 73 you want refunded to you. It seems to be a first than 173 you want applied to your 20 Amount you owe. Subtract line 72 from tine 63 Estimated tax ponaity (see page 61). Do you want to allow another person to discuss its page? PREPARER and penalties of persey, desclare that have examined this complete. Declaration of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of preparer father than tax payer is the penalties of penalties of penalties for penalties of penalties.	Form 4136 c from Form 8801, lisse are your total particles from line 72. This if Form 8888 is attacking Savegs 008 estimated tax 3. For details on his return with the control of the con	ayments is the amount y acned, check in a daymer dayments is the amount y acned, check in acceptation who have been proper to a construction MEMBER Spoura's occup SOCIAL	75 20 20 20 20 20 20 20 2	1,258. Yes. Complete the sand to the peut of my knowledge. ONGRESS CES Chaos of self-employed [134]	73 74a 76 Collowing Person Surpho	1,258. ng. No selection of the correct value va

SCHEDULES A&B (Form 1040)

Department of the Treasury Internal Revenue Service

Schedule A - Itemized Deductions

(Schedule B is on page 2)

> Attach to Form 1040.

► See Instructions for Schedules A&B (Form 1040).

2007
Attachment 5 aguince No 07

SANDER M. & VICTORIA S. LEVIN Caution. Do not include expenses reimbursed or paid by others. Medical Medical and dental expenses (see page A-1) SEE STATEMENT 15 3,435. and Enter amount from Form 1040, line 38 2 362,878 Dental 27,216 Multiply line 2 by 7.5% (.075) Expenses 3 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-0. Taxes You State and local (check only one box): 15,747. SEE STATEMENT 11 5 Paid a X Income taxes, or General sales taxes (See page A-2.) 14,514. SEE STATEMENT 17 6 Real estate taxes (see page A-5) 175. 7 7 Personal property taxes Other taxes. List type and amount Я R 30,436. 9 Add lines 5 through 8 25,521. Interest Home mortgage interest and points reported to you on Form 1098 10 Home mortgage interest not reported to you on Form 1098. If paid to the person 11 You Paid from whom you bought the home, see page A-6 and show that person's name. (See identifying no., and address page A-5.) Note. 11 Personal Points not reported to you on Form 1098. 12 interest is Qualified mortgage insurance premiums (See page A-7) 13 13 not deductible 6. Investment interest. Attach Form 4952 if required. (See page A-7.) STMT 13 14 14 25,527. 15 15 Add lines 10 through 14 5,175. SEE STATEMENT Gifts to 16 Gifts by cash or check. Charity Other than by cash or check, if any gift of \$250 or more, see page A-8 SEE STATEMENT 14 25. If you made a You must attach Form 8283 if over \$500 17 gift and got a Carryover from prior year 18 benefit for it, see page A-8. 5,200. 19 Add lines 16 through 18 19 Casualty and Theft Losses Casualty or theft loss(es). Attach Form 4684. (See page A-9.) 20 Unreimbursed employee expenses - job travel, union dues, job education, etc. Job Expenses and Certain Attach Form 2106 or 2106-EZ if required. (See page A-9.) Miscellaneous 3,611. ▶FROM FORM 2106 **Deductions** 21 3,611. 1,650. 22 22 Tax preparation fees 23 Other expenses - investment, safe deposit box, etc. List type and amount ►LIVING EXPENSES FOR MEMBER (See page A-9.) 7,244. OF CONGRESS 7,244. 23 12,505. 24 Add lines 21 through 23 _____ 24 362,878. 25 Enter amount from Form 1040, line 38 7,258. Multiply line 25 by 2% (.02) 26 5,247. Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-27 27 Other - from list on page A-10. List type and amount Öther 28 Miscellaneous Deductions 28 Total is Form 1040, line 38, over \$156,400 (over \$78,200 if married filing separately)? Itemized No. Your deduction is not limited. Add the amounts in the far right column Deductions for lines 4 through 28. Also, enter this amount on Form 1040, line 40. STMT 16≯ 62,281. X Yes. Your deduction may be limited. See page A-10 for the amount to enter 30 If you elect to itemize deductions even strongh they are less than your standard deduction, where here

OMB No. 1545-0074 Pa.
Your social cecurity number

	_
_	
_	

		Schedule B - Interest and Ordinary Dividends		Attach Seduel	ment nce No.	80
Part I Interest	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address MARTHA'S VINEYARD CO-OP BANK MERRILL LYNCH	I spend is greatly many of state of frame, pro-		ount 2 , 1 !	
Note. If you received a Form 1099-INT,		WACHOVIA		A STATE OF THE STA		3.
Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.			1		And the second	
		CIDMOMAI POD ITNE 1			2,1	65.
		SUBTOTAL FOR LINE 1 TAX-EXEMPT INTEREST SEE STATEMENT 18			1,9	
	^		2			30.
	2	1000				2.4.
	3	Attach Form 8815	3			
	4	1010 5	4		2	30.
		te. If line 4 is over \$1,500, you must complete Part III.		Arr	ount	
Part II		List name of payer	7			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.			5			
	6	Add the amounts on line 5. Enter the total here and on Form 1040, line 9a	6		3,9	69.
A A AAA A WALL OF THE CONTROL OF THE		ite. If line 6 is over \$1,500, you must complete Part III				
Part III		u must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (b) h	ad a for	eign	Yes	No
Foreign Accounts and	46 7	count; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust At any time during 2007, 3id you have an interest in or a signature or other authority over a triasocial account in country, such as a bank occount, securities account, or other financial account? See page 8-2 for exceptions a requirements for Form TD F 90-22.1	a assign of filing	Construence of the Construence o		Х
Trusts		aguitements for not of the foreign country ►				
11030	8	The second of th	ian trust	?		
11 10 7	0	If "Yes," you may have to file Form 3520. See page 3-2	91			Х

SCHEDULE D (Form 1040)

Department of the Treasury ntamii Revenue Service Name(s) shown on return

Capital Gains and Losses

Attach to Form 1040 or Form 1040NR. See Instructions for Schedule D (Form 1040).

➤ Use Schedule D-1 to list additional transactions for lines 1 and 8.

tractioner to 12

Your second security number

SANDER M. & VICTORIA S. LEVIN Part 1 | Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Cate (e) Cost or (C) Date sold (Mo., day, yr.) (a) Description of property (f) Gain or (loss) (d) Sales price acquired Mol, day, yr (other basis #Example: 100 sh, XYZ Co 1 Subtract (e) from (d) 2 Enter your short-term totals, if any, from Schedule D-1, line 2 Total short-term sales price amounts. Add lines 1 and 2 in column (d) Short-term gain from Form 6252 and short-term gain or (loss) 4 4 from Forms 4684, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts 5 5 from Schedule(s) K-1 Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss 6 Carryover Worksheet in the instructions Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f) Part II | Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (Example: 100 sh XYZ Co.) (b) Date (c) Cate sold (Mo , day, yr) (8) Cost or (f) Gain or (loss) (d) Sales price acquired (Mol, day, yr.) other has s Subtract (e) from (d) 8 MERRILL LYNCH 91,676 46,540. VARIOUS VARIOUS 138,216. MERRILL LYNCH 38,766 -983. 37,783. VARIOUS VARIOUS 9 Enter your long-term totals, if any, from Schedule D-1, line 9 9 10 Total long-term sales price amounts. 175,999 10 Add lines 8 and 9 in column (d) 11 Gain from Form 4797, Part I; long term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 11 12 Net long-term gain or (loss) from partnerships. S corporations, estates, and trusts from Schedule(s) K-1 12 2,413. SEE STATEMENT 19 13 Capital gain distributions 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 15 of your Capital Loss 14 Carryover Worksheet in the instructions 15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to 47,970. Part lil on page 2 Schedule D (Form 1040) 2007

LHA For Paperwork Reduction Act Notice, see Form 1040 or Form 1040NR instructions.

	t III Summary	1 1	w
16	Combine lines 7 and 15 and enter the result.	16	47,970.
	 If fine 16 is: A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. Zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22. 		
17	Are lines 15 and 16 both gains? X Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22.		
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18	general and compression of the c
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions	19	
20	Are lines 18 and 19 both zero or blank? X Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below. No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet on page 9-10 of the instructions. Do not complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:	TOTAL CONTRACTOR CONTRA	
	 The loss on line 16 or (\$3,000), or if married filling separately, (\$1,500) 	21 (
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, fine 9b. or Form 1040NR, line 10b? Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). No. Complete the rest of Form 1040 or Form 1040NR.		

SCHEDULE E

(Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040NR, or Form 1041. See Instruc

2007 2007

Your social security number

Organization of the Treasury Internal Revision Service Name(s) shown on return ➤ See Instructions for Schedule E (Form 1040).

SANDER M. & VICTORIA S. LEVIN Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-3). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Yes No 1 List the type and location of each rental real estate property: 2 For each rental real estate property listed on fine 1, did you or your family use it DOMINION MIDWEST ENERGY during the tax year for personal purposes A for more than the greater of: MASSACHUSETTS SUMMER HOME 14 days or Χ В . 10% of the total days rented at fair MA MERIT ENERGY COMPANY rental value? С (See page E-3.) C Totals **Properties** Income: (Add columns A, B, and C.) C Δ В 26,100 3 3 3 Rents received 8,146 21. 4 4 4 Royalties received Expenses: 280. 5 5 Advertising 2,567. 6 6 Auto and travel (see page E-4) 4,075. 7 7 Cleaning and maintenance 8 a Commissions 5,167. 9 9 Insurance 10 10 Legal and other professional fees 11 Management fees 11 12 Mortgage interest paid to banks, etc. 13,684. 12 12 (see page E-4) 13 13 Other interest 12,407. 14 14 Repairs 5,319 15 15 Supplies 4,329 16 16 Taxes 6,297. 17 17 Utilities 18 Other (list) 787 SEE STATEMENT 20 150 SEE STATEMENT 18 1. SEE STATEMENT 22 787. 54,275. 1. 19 19 Add lines 5 through 18 19 20 20 Depreciation expense or depletion (see page ξ-5) 20 54,275 787. 1. 21 Total expenses, Add lines 19 and 20 21 22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from tine 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to 20. 7,359. -28,175. 22 find out if you must file Form 6198 23 Gaquetiole rental real estate loss. Caution. Your rental real estate, oscion line 22 may be limited. See page E-5 to find out if you must file Form 8582. Real estate professionals 20,123. must complete line 43 on page 2 24 Income. Add positive amounts allown on tine 22. Do not include any lesses 24 25 25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. it Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040MR, line 18, 0th crwise, include this amount in the total on line 41 on page 2.

SCHEDULE E

(Form 1040)

Supplemental Income and Loss

➤ Attach to Form 1040, 1040NR, or Form 1041.

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074 2007 Attachment 13

Department of the Treasury Internal Povenue Service
Name(s) shown on return

Your social security number

	NDER M. & VICTORIA S. art I Income or Loss From Renta	LEVIN I Real	Estate and Rova	Ities N	ote. If you are in	the business of	renting persons	al proper	ty, use	.
	Schedule C or C-EZ (see page E-3). If you									4.44.4
1	List the type and location of each rental real estate				2 For each r	ental real estate	property listed		Yes	No
Α	MUSKEGON DEVELOPMENT C	C				dia you or your f		A. SAAC WALLES		
	MI			VA 12 AM F 27 F 12 F 17 F 17 F 1		tax year for pen han the greater (Α		
В	QUICKSILVER RESOURCES,	INC.			• 14 day		<i>i</i> 1.	1		
					,	t the total days r	ented at fair	В	ļ	
С	gan, y way of the second plant of the second p				rental					
		- 1			(See page	t-3.)		C	1	ļ ,
In	come:			Proper			i Add co	Total: Jumns A		101
	(A	В		С				.00.
-	Rents received	3	200		220		3			93.
	Royallies received	4	206.	1	,220.		4		9,5	133.
	penses:									
	Advertising	5		gan in go na unagres na unagrado nacen		**************************************				
	Auto and travel (see page E-4)	6								
	Cleaning and maintenance	8					-			
	Commissions Insurance	9					Market Street			
.,	Legal and other professional fees	10								
	Management fees	11		a described to the second of the		-				
	Mortgage interest paid to banks, etc.									
14	(see page E-4)	12			-		12	1	13,6	84.
13	Other Interest	13								
	Repairs	14								
	Supplies	15								
	Taxes	16								
17	Utilities	17								
18	Other (Est) >		To the state of th							
	SEE STATEMENT 23	ļ	25.	~~						
	SEE STATEMENT 24	18		.,	199.					
	errore and the experience of t									
					100			t	ar a	07
	Add lines 5 through 18	19	25.		199.		19		20,2	287.
	Depreciation expense or depletion (see page E-5)	20	25.		199.		20			
21	Total expenses. Add lines 19 and 20	21	40.		1.33.					
22	Income or (loss) from rental real estate									
	or royalty properties. Subtract line 21		E .				1			
	from line 3 (rents) or line 4 (royalties).									
	if the result is a (loss), see page 5-5 to find out if you must file Form 6198	22	181.	1	,021.					
	A CO TO A CONTROL OF THE CONTROL OF				•					
23	Deductible rental real estate loss. Caution.									
	Your rental real estate loss on line 22 may be failted. See page E-5 to find out if you						:			
	must file Form 8582. Real estate professionals				Ì					
	must complete line 43 on page 2	23 (:/		<u>į</u>					
	fncome. Add positive amounts shown on line 22. I						24			581.
	Losses. Add roya ty losses from line 22 and rental						25 (30,1	<u> 123 J</u>
26	Total rental real estate and royalty income or (lo						and the second			
	if Parts II, III, IV, and line 40 on page 2 do not sop!									
	line 17, or Form 1040NR, line 18. Otherwise, includ	le this amo	unt in the total on line 4.	1 on page :	7	money with comment and country which the second	26		١. ١. ١	342.

Attachment Bequence No. 13 Page :
Your social security number

Schedule E (Form 1040) 2007

ra 2	NDER M. & VI	CTORIA S. 1	LEVIN				and	1		
	on. The IRS compares amo	ounts reported on your	tax return with amounts sh							
Pa			erships and S Co					at-risk	activity for	which
			check column (e) on lir							
27			year due to the at-risk or b Form 8582), or unreimburs			аномен шез п	он а		Yes	X No
	if you answered "Yes," see			sed parmersing expen	364:				163	212 140
	a yea answered 105, 30	s page C. O belone comp	mand and seviron.		(b) Enter	Piter (c) Check	(d	I) Empl	oyer	(e) Check if any aniount is
28		(a) N	ame		for S corpo	p S if foreign faller partnership	identi	lication	number	any amount is not at risk
Α	LEVINSON-LE	VIN PROPER'	TIES, LLC		P					
В	LRS COMPANY				P					
C			man come con come a a come in more manual Parameter (1) a 1 com by built (1)		-					*
D			and the second s	1	<u> </u>		<u>L</u>			NAME OF THE PERSON NAME OF THE P
***		sive Income and Los	community in the same content of the	ASI Niaman nagina lan		onpassive In Section 179			.,	a incarna
	(f) Passive loss a taitach Form 8582 i		(g) Passive income from Schedule K-1	(h) Nonpassive los from Schedule K-		duction from F) Nonpassiv from Sched	
A 1	,		21,134.			****	er ar sanormalis receptions also			CONTRACTOR AND
A B		1,011.	nr Trage							W 17 WA HA W SHA PART AT AT A
C			or experimental analogy products, to control or appropriate to the significant device of the field of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		and a parameter of the commence of the ball of the first	an majo monas las de la			
D										The second of the second commence
29a	Totals		21,134.			man many or the statement at the statement and				of the Tay 21 Child Commission (See Free Co.)
b	Totals	1,011.								
30	Add columns (g) and (j)							30		1,134.
31	Add columns (f), (h), and			101 6 1				31	<u> </u>	1,011.)
32			(loss). Combine lines 30 a	ind 31. Enter the				32	21	0,123.
Da	result here and include in	oss From Estat	es and Trusts					JZ		7,149.
Fa	TO THE MICONIO OF L			way a sea of a real and a sharp in the delegan communication of the second					(b) Em	niover
33			(a) Name						dentificatio	, ,
A			and the second s							
В			and a second of the second of							w
	/// /* // // -/	Passive Incon							and Loss	and the state of t
		iction or loss a lowed 8582 if required)		issive income Schedule K-1		Deduction or I om Schedule K		(f) Other inco Schedulo	
									t as a tiple decoderate to	
В	was an example of the second control of the					and a district state of the second state of th				
34a	Totals									
b	Totals			<u> </u>						
35	Add columns (d) and (f)	of line 34a						35		,
36	Add sciumns (c) and (e)		-0-1:				. 511	36)
37	Total estate and trust in Income or L	come or (lass). Combin	ne lines 35 and 36. Enter th	ne result nere and inclu	ide in the	(REMICs)	- Rosi	dual	Holder	
Pa	rt iv income or L	oss From near!	(b) Employer	(c) Excess inclusion	trom (0	i) faxable inco	me (net	, acatal	(e) Income	e from
38	(a) Name		identification number	Schedules Q, line	11 011	oss) from Sche Une 15	dules Q,		Schedules C	
								- /-	AND 3 224 325 70 3 10 10 10 10 10 10 10 10 10 10 10 10 10	
39		d (e) usly. Enter the res	ad liere and incodes in the	total on line 41 below				39		
Pa	et V Summary	., .						E :-		107.17
40			5. Also, complete line 42 b					40		8,581.
41	1 /), and 40. Enter the result here :		ge form i	touðNH, meita	>	41		0,001.
42			Enter your gross farming a orm 1065), box 14, code B	į.						
			1 (Form 1041), line 14, coa		42					
43			you ware a real systate profession							
			Form 1040 or Form 1040NB tros	1)			
		als particulated under the t			43					

Statement of Rental and Royalty Income

ANDER M. & VICTORIA S. LEVIN ind MASSACHUSETTS SUMMER HOM cecation MA	E		TOTAL DAYS	SONAL 14 REUSED DURING: 61/75 =	IG YEAR 75
Rental and Royalty Income		GROSS	PERSONAL/DUAL OWNERSHIP EXCLUSION	VACATION HOME LOSS LIMITATION	NET TO SCH E
3. Rents received	3	26,100.			26,100
4. Royalties received	4		and a second control of the second control o		
Rental and Royalty Expenses					
5. Advertising	5	280.			280
6. Auto and travel	6	3,156.	589.		2,567
7. Cleaning and maintenance	7	5,010.	935.		4,075
8. Commissions	8				
9. Insurance	9	6,353.	1,136.		5,167
Legal and other professional fees	10		Ĺ	_ ,, , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Management fees	11				
2. Mortgage interest paid to banks, etc.	12	16,825.	3,141.		13,684
3. Other interest	13				
4. Repairs	14	15,255.			12,407
5. Supplies	15	6,540.			- 5,319
6. Taxes	16	5,322.	993.		4,329
7. Utilifies	17	7,742.	1,445.		6,29
8. Other (list) ► MAILING COSTS		16.	3.		. 1.
INTERNET		143.	27.		116
OFFICE SUPPLIES	.	26.	5.		23
A CONTROL OF THE PROPERTY OF T					,, , , , , , , , , , , , , , , , , , ,
* M * * * * * * * * * * * * * * * * * *				, , , , , , , , , , , , , , , , , , , ,	
		A A B 1			1 / Way 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		7.17.9.17 · 1.17.43 /			· · · · · · · · · · · · · · · · · · ·
t a control and the control of the c					
	40			., , ,	
grant Armine Control of the Control of Armine Control of the Contr	18				
The second of the desirence of the second of	-				
with a reconstruction and a second se	-				
A Company of the Comp					
and a second of the second of					
19. Add lines 5 through 18	19	66,668.	12,393.		54,27
20 Erepreciation expense or depletion	20			ļl	
21. Total expenses. Add lines 19 and 20	21	66,668.	12,393.	E .	54,27
22. Income or (loss) from rental or royalty properties.					
Subtract line 21 from line 3 (rents) or tine 4 (royalties)	22	-40,568.			-28,17

6251 **6251**

Department of the Treasury Internal Devenue Service (99)

Alternative Minimum Tax - Individuals

2007

➤ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

Part I Alternative Minimum Taxable Income		
1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise,		
enter the amount from Form 1040, line 38, and go to line 7, (If less than zero, enter as a negative amount.)	1	300,597
Medical and dental. Enter the smaller of Schedule A (Form 1940), line 4, Or 2.5% (,025) of Form 1940, line 38. If zero or less, enter -0	2	
3 Taxes from Schedule A (Farm 1040), line 9	3	30,436
Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
Miscellaneous deductions from Schedule A (Form 1040), line 27	5	5,247
If Form 1040, line 38, is over \$156,400 (over \$78,200 if married filing separately), enter the amount from line 11	1,44	
of the Itemized Deductions Worksheet on page A-10 of the instructions for Schedule A (Form 1040)	6	-4,129
7 Tax refund from Form 1040, line 10 or line 21	7	THE REPORT OF THE PARTY AND ADDRESS OF THE PAR
3 Investment interest expense (difference between regular tax and AMT)	8	No. Ann ann agus agus agus agus agus agus agus agus
Depletion (difference between regular tax and AMT)	9	
Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
Interest from specified private activity bonds exempt from the regular tax SEE STATEMENT 27	11	279
Qualified small business stock (7% of gain excluded under section 1202)	12	manager and an arrangement of the second of
Exercise of incentive stock options (excess of AMT income over regular tax income)	13	and a compact of the
4 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	14	
5 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	15	
Disposition of property (difference between AMT and regular tax gain or loss)	16	
7 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	17	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 25	18	
9 Loss limitations (difference between AMT and regular tax income or loss)	19	
Circulation costs (difference between regular tax and AMT)	20	
Long-term contracts (difference between AMT and regular tax income)	21	
2 Mining costs (difference between regular tax and AMT)	22	
Research and experimental costs (difference between regular tax and AMT)	23	
4 Income from certain installment sales before January 1, 1987	24	
5 Intangible drilling costs preference	25	NA
Other adjustments, including income-based related adjustments	26	
7 Alternative tax net operating loss deduction	27	
8 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line		
28 is more than \$207,500, see instructions)	28	332,430
Part II Alternative Minimum Tax		
9 Exemption. (If this form is for a child under age 18, see instructions.)		
IF your filing status is AND line 28 is not over THEN enter on line 29	100	
Single or head of household \$112,500 \$44,350 Married filing jointly or qualifying widow(er) 150,000 \$66,250 }		
Murried filing separately 75,000 33,125 STMT 26	29	20,642
If line 28 is over the amount shown above for your filing status, see instructions.		
Subtract line 29 from line 28, if more than zero, go to line 31, if zero or less, enter -0-here and on lines.		
33 and 35 and skip the rest of Part II	30	311,788
1 ● If you are fling Form 2555 or 2555-EZ, see page 8 of the instructions for the amount to enter.		
If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends		6 V 115
on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here.	31	77,241
All others: If line 30 is \$175,000 or less (\$87,500 or less if married filling separately), multiply line 30 by		
26% (26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing		
separately) from the result.		
2 Aternative minimum tax foreign tax credit (see instructions)	32	
3 Tentative minimum tax. Subtract line 32 from line 31	33	77,241
1 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 51).		
If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	34	68,567
5 Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter D. Enter here and on	1	8,674

	urt III Tax Computation Using Maximum Capital Gains Rates				
	Enter the amount from Form 6251, line 30. if you are filing Form 2555 or 2555-EZ,		mount from		
	line 3 of the worksheet in the instructions			36	311,788.
	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax	1 1			
	Worksheet in the instructions for Form 1040, line 44, or the amount from				
	line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for				
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if				
	necessary) (see the instructions). If you are filing Form 2555 or 2555-EZ,				
	at antique for the agreement to option	37	50,459.		
20	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the				
30	AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ,				
	see instructions for the amount to enter	38			
00	If you did not complete a Schedule D Tax Worksheet for the regular tax or the		THE PARTY AND ADDRESS OF THE PARTY ADDRESS OF THE PAR		
39	AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter				
	the smaller of that result or the amount from line 10 of the Schedule D Tax				
	Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555				
	or 2555-EZ, see instructions for the amount to enter	39	50,459.		
40	Enter the smaller of line 36 or line 39	1 4.5. 1		40	50,459.
	Subtract line 40 from line 36			41	261,329.
41	if line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply		6% (26)		
42	Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married fil	ing separati	elv) from		
	the result	g oopaa.	>	42	69,672.
12	Enter:		and to sell begins a		
43	• \$63,700 if married filling jointly or qualifying widow(er),				
	• \$31,850 if single or married filing separately, or	43	63,700.		
	• \$42,650 if head of household.		A TOUR A TO A TEMPORATE OF THE		
4.4	Enter the amount from line 7 of the Qualified Dividends and Capital Gain				
-t-t	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from				
	line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for				
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If				
	you did not complete either worksheet for the regular tax, enter -0-	44	247,872.		
	you did not complete either worksheet for the regular tax, onto	1	and the second s		
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	0.		
45	Subject time 44 from time 45. is 2010 or 1000, critical 5				
46	Enter the smaller of line 36 or line 37	46	50,459.		
70	Little the difficulty of the 55 of this 57		and the second s		
47	Enter the smaller of line 45 or line 46	47			
	Enter the diffusion of the second of	,			
48	Multiply line 47 by 5% (.05)		>	48	100
40	manuful and the office of the control of the contro				
49	Subtract line 47 from line 46	49	50,459.		
50	Multiply line 49 by 15% (.15)		>	50	7,569.
	If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, g	o to line 51			
	If line 38 is zero of brank, skip lines 51 and 52 and go to line 55. Since Wise, 9	4 6			
51	Subtract line 46 from line 40	51			
			>	52	
52	Multiply line 51 by 25% (.25)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J&	
53	Add ines 42, 48-50, and 52			53	77,241.
54	If fine 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply			i i	
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married fi	ling separat	ely) from	1	00.000
	the result			54	83,801.
55	Enter the smaller of line 53 or line 54 here and on line 31. If you are filing Form 2		-EZ, do not enter	EC	77,241.
	this amount on line 31. Instead, enter it on line 4 of the worksheet in the instruction	JEQ		55	Form 6251 (2007)
					1 STATE OF 1 121/07 /

~
~
$\tilde{}$
ũ
(REPC
á
01
5
ليد
O
Ž
0
Ö
Ш
(RECO
×
⋖
5
₹
=
Z
5
-
ATIVE
=
3
~
10
Ξ
-
⋖

Name(s)	MANAGEMENT CONTRACTOR	to the state state state and the state of th				Social Security Number
SANDER M. & VICTORIA S. LEVIN				The state of the s		
mau_i				Adjustment		
Name Description	Income	Form 6251, Line 16	Form 6251, Line 17 F	Form 6251, Line 18	Form 6251, Line 19	Form 6251 Other Adjustment
K1- IRS COMPANY, L.L.C. * REGULAR INCOME PAL CARRYOVER PAL DISALLOWED AMT PAL DISALLOWED * AMT NET INCOME	1 - 1 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 -					
KI: LEVINSON LEVIN PROPERTIES, LLC * REGULAR INCOME AMT ADJUSTMENTS * AMT NET INCOME	21,134.			77		
E- MASSACHUSETTS SUMMER H OME " MA ' * REGULAR INCOME PAL CARRYOVER PAL DISALLOWED AMT PAL DISALLOWED AMT NET INCOME	-20,123. -13,211. -20,278.			5,159. -13,211. 7,897.		
** TOTAL ADJ & PREF **				Ö		
			``			

SCHEDULE H (Form 1040)

Household Employment Taxes
(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

➤ Attach to Form 1040, 1040NR, 1040-SS, or 1041.

CMB No. 1545-1971

Department of the Treasury Internal Revenue Service

See separate instructions.

Name of employer

Social security number Employer identification number

SA	NDER M.	LEVIN	52-1926285
A	Did you pay	any one household employee cash wages of \$1,500 or more in 2007? (If any household employee wa I, your parent, or anyone under age 18, see the line A instructions on page H-3 before you answer this	s your spouse, your child question.)
	X Yes.	Skip lines B and C and go to line 1. Go to line B.	
В	Did you with	hold federal income tax during 2007 for any household employee?	
	Yes.	Skip line C and go to line 5. Go to line C.	
С	Did you pay (Do not cou	total cash wages of \$1,000 or more in any calendar quarter of 2006 or 2007 to all household employ nt cash wages paid in 2006 or 2007 to your spouse, your child under age 21, or your parent.)	ees?
	No. Yes.	Stop. Do not file this schedule. Skip lines 1-9 and go to line 10 on page 2. (Calendar year taxpayers having no household employees do not have to complete this form for 2007.)	s in 2007
P	art I Soci	al Security, Medicare, and Income Taxes	
1	Total cash wa	ges subject to social security taxes (see page H-4)	
2	Social security	taxes. Multiply line 1 by 12.4% (.124)	2 386.
3	Total cash wa	ges subject to Medicare taxes (see page H-4) 3,113.	
4	Medicare taxe	s. Multiply line 3 by 2.9% (.029)	90.
5	Federal incom	e tax withheld, if any	5
6	Total social s	ecurity, Medicare, and income taxes. Add lines 2, 4, and 5	6 476.
7	Advance earn	ed income credit (EIC) payments, if any	7
3	Net taxes (so	btract line 7 from line 6)	8 476.
9	Did you pay to	otal cash wages of \$1,000 or more in any calendar quarter of 2006 or 2007 to all household employed cash wages paid in 2006 or 2007 to your spouse, your child under age 21, or your parent.)	es?
	X No.	Stop, Enter the amount from line 8 above on Form 1040, line 62. If you are not required to file Form 10 the line 9 instructions on page H-4.	040, see
	Yes.	Go to line 10 on page 2.	

For Privacy Act and Paperwork Reduction Act Notice, see page H-7 of the instructions.

Schedule H (Form 1040) 2007

Schedule H.F.	Federal Unemployr										Page 2
Partu	rederal Offernploys	nent (rote) to	3X							Yes	No
	u pay unemployment contril								10		ļ
	u pay all state unemployme								11		ļ
	all wages that are taxable for our checked the "Yes" box of					ient tax?	er held it blever t		L.12		.1
If yo	u checked the "No" box on	any of the lines ab	ove, skip	Section A	and comple	te Section B.					
	and an absolute mid-fairly of from the control of account to the second of the second	/- / / V		Section	Α			7	_		
	of the state where you paid				>	ranson a market and a market and a serve	C AMPLE OF THE PARTY OF THE				
14 State	reporting number as shown	on state unemploy	ment (ax	letum	>		*				
15 Contri	butions paid to your state u	nemployment fund	(see page	e H-5)	L	15	e o e a compression de contra compression de la formación de la formación de la formación de la formación de l				
16 Total o	eash wages subject to FUTA	tax (see page H-5)	11 + 2511					16			
Um area serie	tax, Multiply line 16 by .008	t. The book there were the be	nun atun S	Santian D	and an to be	na 26		17			
17 FUIA	tax, Multiply line to by 200	. unter the result in	еге, вкър с	Section	B	AS A.U.			 		
18 Comp	lete all columns below that	apply (if you need n	nore spac	e, see pag	ре H-5):	parameter and the Mark of the second	g/				
(a) Name	(b) State reporting number	(c) Taxable wages as	Crate expe	d) nence rute	(e) State	(f) Multiply onl (b)	(g) Multiply col. ((c)	(h) Subtract col. (g)	Contrá	(i) butions
of state	as snown on state unemployment tax return	delined in state 201)	. total	rod To	expenesca raid	by 054	by col. (e)		from col. f). If zero or less, enter G.,	unempl	o state loyment nd
	(25 M) ;		1.7		Andrew Control of the						
			.,								
		Model Anna Amara				I	**************************************			ı	
				<u> </u>			1				
19 Totals							L	19			
					k E	1			the terrorus		
	olumns (h) and (i) of line 19	Name of the American			· · · · · · · · · · · · · · · · · · ·	20	N. A. SANSKAR, SANSKAR STATE	21	magazina.		
21 lotalo	cash wages subject to FUTA	A tax (see the line 1	b instruct	ons on pa	ige rr-oj	- [[[]]]]					
22 Multip	ly line 21 by 6.2% (.062)							22			
					¥.	1					
	ly line 21 by 5.4% (.054)				L	23	the AV byb A read more supplement control	24			
24 citter	the smaller of line 20 or line	. 23						2.1			
	tax. Subtract line 24 from hi Total Household E			and go to l	ne 26	·····		25			
Part III	Total nouselloid E	inployment ra	X62				AMA 4 W W	į			
26 Enter	the amount from line 8, if yo	u chacked the "Ye	s" box on	line C of p	sage 1, enter	r-0-		26			
	ne 17 (or line 25) and line 26			****(**********************************		ores progressions.		27	1		
	ou required to file Form 1040 es. Stop. Enter the amount		on Form	1040, line	62 Do not	complete Part IV	/ below.				
	. Стори —					E11					
	 You may have to complete Address and Signa 					- 15 Otto- 18		115			
	Address and Signal be address of the second			only if respo	ared. See th	e ine zo instruct	ious ou bage	1.5	asoni, ar sulteina		
City town or	nostrome state, antičil oddo										
	es of portury, I decrare that I have exa	minor inc antique an	dan eren	t joyens fora	mants, and to 9	e best of my constar	ge particular to	None	rect and ments	ra Nom	vi of any
payment man	ws of portry, Clediare traff individes a teith a stafe whemployment for a swin	ned and overfilled or is	to be, deduc	ान्य (रुपय माल्य) इ.स. (रुपय माल्य)	a, ments to eng	Acynto	rya anne architete il le			407 EN	
>)					
	er Sognificati			5 NY /1	3 W - 3						

Form **4952**

Department of the Treasury Internal Revenue Service

Investment Interest Expense Deduction

➤ Attach to your tax return.

2007 Attachment 51

Name(s) shown on return

Identifying number

	TDER M. & VICTORIA S. LEVIN t Total Investment Interest Expense				
Par	T1 Total investment interest Expense		1 22 2 2 2 4 4 5 4 4 5 4 5 4 5 4 5 4 5 5 5 5		
1	Investment interest expense paid or accrued in 2007 (see instructions)	EE S	TATEMENT 28	. 1	6.
2	Disallowed investment interest expense from 2006 Form 4952, line 7			2	
3	Total investment interest expense. Add lines 1 and 2			3	6.
Par				,	y
	5 (100 × 100				
4 a	Gross income from property held for investment (excluding any net				
	gain from the disposition of property held for investment) STMT 29	4a	13,792.		
			0 400		
b	Qualified dividends included on line 4a	4b	2,489.		
					11,303.
c	Subtract line 4b from line 4a	1 [4c	11,505.
	and the second s	4d	47,970.		
d	Net gain from the disposition of property held for investment	40		1	1
	Enter the smaller of line 4d or your net capital gain from the disposition	1,1			
е	of property held for investment (see instructions)	4e	47,970.		STATEMENT 31
	Of property ried for investment (see mandedons)	1 .0			
f	Subtract line 4e from line 4d			4f	0.
	Odditast into 40 from into 19				
q	Enter the amount from lines 4b and 4e that you elect to include in investment in	come			
3	(see instructions)		Saniamonta vice la cir	<u>4g</u>	
	The state of the s				
h	Investment income. Add lines 4c, 4f, and 4g		man de la deste e	4h	11,303.
				-	1 010
5	Investment expenses (see instructions)	SEE, S	TATEMENT 30	5	1,012.
					10,291.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter 0-		······································	6	10,291.
Pa	rt III Investment Interest Expense Deduction			Í	[
		lina & fra	im lina 3		
7	Disailowed investment interest expense to be carried forward to 2008. Subtract If zero or less, enter 0-	inte o iro	in in in e o.	7	0.
	if zero or less, enter 0-		101 No. 11 No. 27		
	Investment interest expense deduction. Enter the smaller of line 3 or 6, See :	astructio	os	8	6.
8	myeatment uncreat expense dedection. Their the smaller of the 3-30 to 250 to			·	· · · · · · · · · · · · · · · · · · ·

Investment Interest Expense Deduction

Attach to your tax return.

CM3 46 1545-0191

Attachment Sequence No. **51**

Department of the Treasury Internal Revenue Service Identifying number Name(s) shown on return SANDER M. & VICTORIA S. LEVIN Part I | Total Investment Interest Expense 6. SEE STATEMENT 32 Investment interest expense paid or accrued in 2007 (see instructions) 1 Disallowed investment interest expense from 2006 Form 4952, line 7 6. Total investment interest expense. Add lines 1 and 2 Part II Net Investment Income 4a Gross income from property held for investment (excluding any net 14,071. gain from the disposition of property held for investment) 4a 2,489. b Qualified dividends included on line 4a 4b 11,582. c Subtract line 4b from line 4a 47,970. d Net gain from the disposition of property held for investment 4de Enter the smaller of line 4d or your net capital gain from the disposition 47,970. of property held for investment (see instructions) 4e 0. Subtract line 4e from line 4d g. Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions) 11,582. 4h h Investment income. Add lines 4c, 4f, and 4g 1,012. Investment expenses (see instructions) 10,570. Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-6 Part III Investment Interest Expense Deduction Disallowed investment interest expense to be carried forward to 2008. Subtract line 6 from line 3. 0. 7 If zero or less, enter -0-6. 8 Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions 6. REGULAR FORM 4952, LINE 8 LESS RECOMPUTED FORM 4952, LINE 8 6.

INTEREST ADJUSTMENT - FORM 6251, LINE 8

Form 4952 (2007)

Form **2106**

Employee Business Expenses

➤ See separate instructions.

➤ Attach to Form 1040 or Form 1040NR.

2007 Attachment Jequence No. 54

Department of the Treasury Internal Revenue Service
Your name

Occupation in which you incurred expenses

Social security number

SANDER M. LEVIN

MEMBER OF CONGRESS

	С	olumn A	Column B
Step 1 Enter Your Expenses		r Than Meals Entertainment	Meals and Entertainment
Vehicle expense from line 22 or line 29. (Bural mail carriers: See instructions.)	1		
Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel or commuting to and from work	2	* 1 mm and and 21 to 12 mm and 21 to 12 mm and 21 to 12 mm	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3		
Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 33	4	3,611.	
5 Meals and entertainment expenses (see instructions)	5		
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	3,611.	
 Step 2 Enter Reimbursements Received From Your Employer for 7 Enter reimbursements received from your employer that were not reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions) 	7	es Listed in Step 1	
Step 3 Figure Expenses To Deduct on Schedule A (Form 1040 o	r Form 10	040NR)	
8 Subtract line 7 from line 6. If zero or less, enter -0 However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040, line 7 (or on Form 1040NR, line 8)	8	3,611.	
9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 75% (.75) instead of 50%. For details, see instructions.)	9	3,611.	
10 Add the amounts on line 9 of both columns and enter the total here. Also, enter to (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 9). (Reservists, qual fee basis state or local government officials, and individuals with disabilities. See trules on where to enter the total.)	lified perform	ning artists, ons for special	o 3,61

LHA For Paperwork Reduction Act Notice, see instructions.

Form 2106 (2007)

	2106 (2007) SANDER M. LEVIN				a principal companion in the contract of the c	Page 2
	rt II Vehicle Expenses	a raabaa ira	were a proving a chiefe were	was i	(-) Vahiota	(b) Vehicle
Secti	on A - General Information (You must complete th			5 3	(a) Vehicle	(D) vernote
11	Enter the date the vehicle was placed in serv			11	miles	miles
12	Total miles the vehicle was driven during 200		articles) memor egree.	12	······	
13	Business miles included on line 12			13	miles	miles o _s
14	Percent of business use. Divide line 13 by lin		. Even			
15	Average daily roundtrip commuting distance			1	miles	miles
16	Commuting miles included on line 12				miles	miles
17	Other miles. Add lines 13 and 16 and subtra-			17	miles	miles
18	Do you (or your spouse) have another vehicle	e available fo	r personal use?			Yes No
19	Was your vehicle available for personal use of	during off-dut	y hours?	****	manyananana (m. 1864)	Yes No
20	Do you have evidence to support your dedu	ction?				Yes No
21	if "Yes," is the evidence written?					Yes No
Sec	tion B - Standard Mileage Rate (See the ins	tructions for l	Part II to find out whethe	r to comple	ete this section or Section	(C.)
22	Multiply line 13 by 48.5¢ (.485)					22
Sec	tion C - Actual Expenses		(a) Vehicle		(!	n) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23			page by the CA of the William to the time	
24 a	Vehicle rentals	24a			· · · · · · · · · · · · · · · · · · ·	
b	Inclusion amount (see instructions)	24b				
С	Subtract fine 24b from line 24a	24c				
25	Value of employer-provided vehicle (applies					
	only f 100% of annual lease value was					5
	included on Form W-2see instructions)	25				
26	Add lines 23, 24c, and 25	26				,
27	Multiply line 26 by the percentage on In 14	27				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
28	Depreciation (see instructions)	28				
29	Add lines 27 and 28. Enter total here and					
20	on line 1	29				
Sec	tion D - Depreciation of Vehicles (Use this	ection only	f you owned the vehicle	and are cor	mpleting Section C for the	vehicle.)
		[(a) Vehicle			b) Vehicle
30	Enter cost or other basis (see instructions)	30				
31	Enter section 179 deduction		ate a man a name of property of the second o	, yanga 10, yangan katar (11 da 16 d		
01	(see instructions)	31				
30	Multiply line 30 by line 14 (see instructions					
٠.	if you claimed the section 179 deduction					
	or special allowance)	32			-0.15 - 0.15 - 0.15 - 0.15	
33	Enter depreciation method and percentage					
55	(see instructions)	33				
34	Multiply Ine 32 by the percentage on	· • •				
54	line 33 (see instructions)	34				
35	Add lines 31 and 34	35				
36	Enter the applicable limit explained					
30	in the line 36 instructions	36				
37	Multiply line 36 by the percentage on in 14	37	- M 1 1 7		*****	
	Enter the smaller of the 35 or the 37.				7 (2.3)	
38	if you skipped lines 36 and 37, actor the					
		,				
	amount from the 35. Also enter this amount on line 28 above	38				
	AUTORIUM SO SECTION	1 - 203		and the parameter of the second secon		and the second s

8801

Credit for Prior Year Minimum Tax -Individuals, Estates, and Trusts

➤ See separate instructions.

OMB No. 1645-1673 2007 Attachment Sequence No. 74

Department of the Treasury internal Revenue Service

Attach to Form 1040, 1040NR, or 1041.

Identifying number Name(s) shown on return SANDER M. & VICTORIA S. LEVIN Part I Net Minimum Tax on Exclusion Items 247,213. 1 Combine lines 1, 6, and 10 of your 2006 Form 6251. Estates and trusts, see instructions 38,239. 2 Enter adjustments and preferences treated as exclusion items (see instructions) 2 3 Minimum tax credit net operating loss deduction (see instructions) 3 4 Combine lines 1, 2, and 3, if more than zero or you filed Form 2555 or 2555-EZ for 2006, go to line 5. If zero or less and you did not file Form 2555 or 2555-EZ for 2006, enter -0- here and on line 15 and go to Part II. If more 285,452. than \$200,100 and you were married filling separately for 2006, see instructions 5 Enter: \$62,550 if married filing jointly or qualifying widow(er) for 2006; \$42,500 if single or head of household for 62,550. 2006; or \$31,275 if married filing separately for 2006. Estates and trusts, enter \$22,500 6 Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2006; \$112,500 if single or head of household for 150,000. 2006; or \$75,000 if married filing separately for 2006. Estates and trusts, enter \$75,000 6 135,452. 7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9 7 33,863. 8 Multiply line 7 by 25% (.25) 8 28,687. 9 Subtract line 8 from line 5. If zero or less, enter -0-. If this form is for a child under age 18, see instructions 10 Subtract line 9 from line 4. If more than zero or you filed Form 2555 or 2555-EZ for 2006, go to line 11. If zero or less and you did not file Form 2555 or 2555-EZ for 2006, enter -0- here and on line 15 and go to Part II. Form 256,765. 1040NR filers, see instructions 11 • If for 2006 you filed Form 2555 or 2555-EZ, see page 2 of the instructions for the amount to enter. • If for 2006 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of 66,505. Schedule D (Form 1040) (lines 14a and 15, column (2), of Schedule D (Form 1041)), complete Part III of 11 Form 8801 and enter the amount from line 48 here. All others: If line 10 is \$175,000 or less (\$87,500 or less if married filing separately for 2006), multiply line 10 by 26% (.26). Otherwise, multiply line 10 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2006) from the result. 12 Minimum tax foreign tax credit on exclusion items (see instructions) 12 66,505. 13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11 59,032. 14. Enter the amount from your 2006 Form 6251, line 34, or 2006 Form 1041, Schedule I, line 55 15 Net minimum tax on exclusion items. Subtract line 14 from line 13, if zero or less, enter 0-7,473. 15 Part II Current Year Nonrefundable and Refundable Credits and Carryforward to 2008 11,616. 16 Enter the amount from your 2006 Form 6251, line 35, or 2006 Form 1041, Schedule I, line 56 16 7,473. 17 Enter the amount from line 15 above 17 4,143. 18 18 Subtract line 17 from line 16. If less than zero, enter as a negative amount 19 2006 minimum tax credit carryforward. Enter the amount from your 2006 Form 8801, line 26 19 20 Enter your 2006 unallowed qualified electric vehicle credit (see instructions) 20 4,143. 21 Combine lines 18, 19, and 20, if zero or less, stop here and see instructions 21 68,567. 22 22 Enter your 2007 regular income tax liability minus allowable credits (see instructions) 77,241. 23 23 Enter the amount from your 2007 Form 6251, line 33, or 2007 Form 1041, Schedule I, line 54 0. 24 Subtract line 23 from line 22. If zero or less, enter 0-24 25 Current year nonrefundable credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2007 ũ. Form 1040, line 55; Form 1040NR, fine 50; or Form 1041, Schedule G, line 2d 25 26 * Estates and trusts: Leave lines 26 and 27 blank and go to line 28. Individuals: Did you have a minimum tax credit carryforward to 2005 (on your 2004 Form 8801, line 26)? X No. Leave lines 26 and 27 blank and go to line 28. Yes. Complete Part IV of Form 8801 to figure the amount to enter 26 27 Is line 26 more than line 25? No. Leave line 27 blank and go to line 28. Yes. Subtract line 25 from line 26. This is your current year refundable credit. Enter the result here and on your 2007 Form 1040, line 71, or Form 1040NR, line 69 27 28 Credit carryforward to 2008. Subtract the target of line 25 or line 26 from line 21. Keep a record of this amount because you may use it in future years 4,143. 28

Pa	rt III T	ax Computation Using Maximum Capital Gains Ra	tes			
	the 2006 Sc	you did not complete the 2006 Qualified Dividends and Capital Gai chedule D Tax Worksheet, or Part V of the 2006 Schedule D (Form before completing this part.	n Tax Workshi 1041), see the	eet,		
29	Enter the ar	nount from Form 9801, line 10			29	256,765.
30	Enter the ar	mount from line 6 of your 2006 Qualified Dividends and Capital				
•	Gain Tax W	orksheet, the amount from line 13 of your 2006 Schedule D Tax			Ì	
	Worksheet,	or the amount from line 22 of the 2006 Schedule D (Form 1041),			1	
	whichever a		30	14,528.		
	lf <u>y</u> ou figur	ed your 2006 tax using the 2006 Qualified Dividends	To many and the state of the st			
	and Capita	I Gain Tax Worksheet, skip line 31 and enter the amount		1	200	
	from line 3	0 on line 32. Otherwise, go to line 31.				
31		mount from line 19 of your 2006 Schedule D (Form 1040),				
		column (2), of the 2006 Schedule D (Form 1041)	31			
32		0 and 31, and enter the smaller of that result or the amount		14 500		
		of your 2006 Schedule D Tax Worksheet		14,528.		14,528.
33	Enter the s	maller of line 29 or line 32			33	242,237.
34	Subtract lin	ne 33 from line 29			34	244,231.
35	34 by 26%	\$175,000 or less (\$87,500 or less if married filing separately for 200 (.26). Otherwise, multiply line 34 by 28% (.28) and subtract \$3,500	06), multiply lir (\$1,750 if mai	ne rried	35	64,326.
		ately for 2006) from the result		THE PERSON		The second secon
36	Enter:) if married filing jointly or qualifying widow(er) for 2006,				
) if single or married filing separately for 2006,				
) if head of household for 2006, or	The state of the s			
		for an estate or trust	36	61,300.		
37		mount from line 7 of your 2006 Qualified Dividends and Capital Vorksheet, the amount from line 14 of your 2006 Schedule D Tax	THE REPORT OF THE PARTY OF THE		A THE STATE OF THE	
		, or the amount from line 23 of the 2006 Schedule D (Form 1041),				
	whichever	applies. If you did not complete either worksheet or Part V of the				
	2006 Sche	dule D (Form 1041), enter 0-	37	232,943.		
20	Subtract lir	ne 37 from line 36. If zero or less, enter 0-	38	0.	Chi prante la	
38 39		smaller of line 29 or line 30	39	14,528.		
40		maller of line 38 or line 39	40	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
41		e 40 by 5% (.05)	The second secon	>	41	
42	, ,	ne 40 from line 39	42	14,528.		
43		e 42 by 15% (.15)		>	43	2,179.
	If line 31 is	s zero or blank, skip lines 44 and 45 and go to line 46. Otherwise	e, go to line 4	4.		
44	Subtract li	ne 39 from line 33	44			
45		e 44 by 25% (.25)		>	45	
46	Ada lines (35, 41, 43, and 45			46	66,505.
47	If line 29 is	\$175,000 or less (\$87,500 or less if married filing separately for 20	C6), multiply li	ne 29		
	by 26% (.2	26). Otherwise, multiply line 29 by 28% (.28) and subtract \$3,500 (\$	1,750 if marrie	ed filling	47	68,394.
, ~	separately	for 2006) from the result	555 or 2555 FI	7 for 2006.		
48	unter the s	smaller of this work made we have and of this et. St you they to the zo			48	66,505

[•] The 2006 Qualified Dividends and Capital Gain Tax Worksheet is on page 38 of the 2006 Instructions for Form 1040. The 2006 Schedule D Tax Worksheet is on page D-10 of the 2006 Instructions for Schedule D (Form 1040) /page 38 of the 2008 Instructions for Form 1041).

Form	8801 (2007) SANDER M. & VICTORIA S. LEVIN			Page 3
Pa	art IV Tentative Refundable Credit		· · · · · · · · · · · · · · · · · · ·	
49	Enter the amount from line 21		49	and a programmer of the second
50	Enter the total of lines 18 and 20 from your 2005 Form 8801.			
	If zero or less, enter-0-	50	A SHARING MARKET OF THE STREET OF THE STREET	
51	Enter the total of lines 18 and 20 from your 2006 Form 8801.			
	If zero or less, enter-0-			
52	Enter the total of lines 18 and 20 from your 2007 Form 8801.	50		
	If zero or less, enter 0-		53	
53	Add lines 50 through 52		33,	
54	Long-term unused minimum tax credit. Subtract line 53 from line 49 (If ze stop; enter 0- on line 26. Do not complete the rest of Part IV)		54	
55	If line 64 is:			
	 Less than \$5,000, enter the amount from line 54 			
	 At least \$5,000, but not more than \$25,000, enter \$5,000 			
	More than \$25,000, multiply line 54 by 20% (.20)	Andreas and the property of the second	55	AND STREET, ST
56	Enter the amount from Form 1040, line 38, or Form 1040NR, line 36 (If you	11		
	are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from			
	sources within Puerto Rico, see the instructions for the amount to enter)	. 56	217 200 207 21 200 21 200 21 207 21 27 21	
57	Is line 56 more than the amount shown below for your filing status?		ACC 1 m Open 1 m O	
	• Single · \$156,400			
	 Married filing jointly or qualifying widow(er) - \$234,600 			
	 Married filing separately - \$117,300 			
	Head of Household - \$195,500			
	No. Stop: enter the amount from line 55 above on line 26.			

57

58

Form 8801 (3007)

60

61

62

Do not complete the rest of Part IV.

Subtract line 57 from line 56

Multiply line 55 by line 60

59

60

61

Yes. Enter the amount shown above for your filing status

Yes. Stop; enter -0- on line 26. Do not complete the rest of Part IV. No. Divide line 58 by \$2,500 (\$1,250 if married filing separately). If the result is not a whole number, increase it to the next higher whole

Multiply line 59 by 2% (.02) and enter the result as a decimal (rounded to at least three places)

Is line 58 more than \$122,500 (\$61,250 if married filing separately)?

number (for example, increase 0.0004 to 1)

62 Suptract line 61 from line 55. Enfor the result here and on line 26.

8582 Form

Passive Activity Loss Limitations ➤ See separate instructions.

OMB No. 1545-1008

Identifying number

Ore atment of the Tressury Internal Revenue Service (93) Name(s) shown on return

➤ Attach to Form 1040 or Form 1041.

SANDER M. & VICTORIA S. LEVIN Part I 2007 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities on page 3 of the instructions.) 1a Activities with net income (enter the amount from Worksheet 1, 1a celumn (a)) b Activities with net loss (enter the amount from Worksheet 1, -28,175. 1b c Prior years unallowed losses (enter the amount from Workshoet -5,159. 10 1, column (c)) -33,334. 14 d Combine lines 1a, 1b, and 1c Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) 2ab Prior year unallowed commercial revitalization deductions from 2b Worksheet 2, column (b) 2c c Add lines 2a and 2b All Other Passive Activities 3a Activities with net income (enter the amount from Worksheet 3, 21,134. За b Activities with net loss (enter the amount from Worksheet 3, -1,290.3b c Prior years unallowed losses (enter the amount from Worksheet 3, -384.3c column (c)) 19,460. 34 d Combine lines 3a, 3b, and 3c 4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unailowed icsses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and 13,874. schedules normally used If line 4 is a loss and: • Line 1d is a loss, go to Part II. Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts if and III and go to line 15. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15. Part II Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example. 13,874. 5 Enter the smaller of the loss on line 1d or the loss on line 4 150,000 6 Enter \$150,000. If married filing separately, see the instructions STATEMENT 39 Enter modified adjusted gross income, but not less than zero (see the instr.) 325,152. 7 Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8. 8 Subtract line 7 from line 6 9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000, if married filing separately, see the instructions 0. 10 Enter the smaller of line 5 or line 9 10 if line 2c is a loss, go to Part III. Otherwise, go to line 15, Part III | Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions. 11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions 11 12 12 Enter the loss from line 4 13 13 Reduce line 12 by the amount on line 10 14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 Part IV | Total Losses Allowed 21,134. 15 Add the income, if any, on lines 1a and 3a and enter the total 15 16 Total losses allowed from all passive activities for 2007. Add lines 10, 14, and 15. See the instructions 21,134. to find out how to report the losses on your tax return SEE STATEMENT 38

Form 8582 (2007) SANDER M. & VICT Caution: The worksheets must be filed with your two Worksheet 1 - For Form 8582, Lines 1	lax return. Keep a copy	y for your					Page 2
Worksheet 1 - 1 of 1 offit 0002, Lines 1	Current		.,	Prior years		Overall g	ain or loss
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)		(c) Unallowed loss (line 1c)			(e) Loss
				The state of the s	and death court by		
	SEE ATTACE	HED S'	ratem.	ENT FOR WO	RKSHE	<u>er 1</u>	
Total. Enter on Form 8582, lines 1a, 1b, and 1c	in the state of th	-28	,175.	-5,159			
Worksheet 2 - For Form 8582, Lines 2	a and 2b (See instr	uctions.)			m	1444 A A A A A A B / A A A A A	AND COMMENT OF THE PROPERTY OF
Name of activity	(a) Current ye deductions (lin		unallov	(b) Prior year ved deductions (li	ne 2b)	(c) (Overall loss
Total. Enter on Form 8582, lines 2a and 2b Worksheet 3 - For Form 8582, Lines 3	la 3h and 3c/s	a inchanti					
Worksheet 3 - For Form 6582, Lines 5			ons.)		Ī		
Name of activity	Curren			Prior years		Overan g	ain or loss
	(a) Net income (line 3a)	(b) Ne (line		(c) Unallowed loss (line 3c)	(d) (Gain	(e) Loss
	SEE ATTAC	HED S	TATEM	ENT FOR WO	ORKSHE	ET 3	
Total. Enter on Form 8582, lines 3a, 3b, and 3c	21,134.	-1	,290.	-384	•		
Worksheet 4 - Use this worksheet if a	an amount is sho	wn on l	orm 85	82, line 10 or	14 (See ins	tructions	
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) L	oss	(b) Ratio	, , , ,	oecial vance	(d) Subtract column (c) from column (a)
Fotal Worksheet 5 - Altocation of Unallowe	ed Losses (See insti	ructions)	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3				
Name of activity	Form or sche and line num to be reporte (see instructi	dule iber d on	(a) L	oss	(b) Ratio	(c) Unallowed loss

SEE ATTACHED STATEMENT FOR WORKSHEET 5

35,008. 1.000000000

13,874. Form **8582** (2007)

Form 8582 (2007)

ALTERNATIVE MINIMUM TAX

Form **8582**

Passive Activity Loss Limitations

► See separate instructions.

► Attach to Form 1040 or Form 1041.

Department of the Termory internal Revocua Service (99)

Name(s) shown on return

Identifying number

SANDER M. & VICTORIA S. LEVIN Part I 2007 Passive Activity Loss Caution: Complete Worksheets	1. 2. and 3 on a	age 2 before comple	ting Part I	
Rental Real Estate Activities With Active Participation (For the definition of activities)				many or year years no choice of the see decision of the contract of
Special Allowance for Rental Real Estate Activities on page 3 of the instruction				
•	<i>.,</i>			
1a Activities with net income (enter the amount from Worksheet 1, column (a))	ta			
b Activities with net loss (enter the amount from Worksheet 1, column (b)).	1b	-28,175.		
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c			
d Combine lines 1a, 1b, and 1c			1d	-28,175.
Commercial Revitalization Deductions From Rental Real Estate Activities				
2a Commercial revitalization deductions from Worksheet 2, column (a)	2a			
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b		2c	
c Add lines 2a and 2b			2.0	
All Other Passive Activities				
3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	21,206.	To have been seen as a second	
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	-1,290.	The state of the s	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	Зс	was a second was a second as a	The state of the s	
d. Combine lines 3a, 3b, and 3c			3d	19,916.
4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are	e allowed, includ	ling any prior year		
unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582.	Report the losse	es on the forms and		
schedules normaily used	OBSTRUCT II ME		4	-8,259.
if line 4 is a loss and: ● Line 1d is a loss, go to Part II.				
 Line 2c is a loss (and line 1d is zero or more), skip 				
 Line 3d is a loss (and lines 1d and 2c are zero or m 				
Caution: If your filing status is married filing separately and you lived with your sport III. Instead, go to line 15.			not compi	ete
Part II Special Allowance for Rental Real Estate Activities V				
Note: Enter all numbers in Part II as positive amounts. See page 8 of ti	he instructions f	or an example.	· ·	
5 Enter the smaller of the loss on line 1d or the loss on line 4	= R × N		5	8,259.
6 Enter \$150,000. If married filing separately, see the instructions	6	150,000.		
7 Enter modified adjusted gross income, but not less than zero (see the instr.)	7	325,152.		
Note: If line 7 is greater than or equal to line 6, skip lines 8 and			(
9, enter -0- on line 10. Otherwise, go to line 8.				
8 Subtract line / from line 6	8			
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing s	separately, see t	he instructions	9	
10 Enter the smaller of line 5 or line 9			10	0.
If line 2c is a loss, go to Part III. Otherwise, go to line 15.		on the second superior and the second	e o an habo never him a habo bir indi dayo	and the second s
Part III Special Allowance for Commercial Revitalization De	ductions Fro	om Rental Real	Estate A	Activities
Note: Enter all numbers in Part III as positive amounts. See the examp	le for Cart II on i	page 8 of the instruct	ions.	
11 Enter \$25,000 reduced by the amount, if any, on line 10, if married filling sepa	arately, see instr	uctions	11	
12 Enter the loss from line 4			12	
13 Reduce line 12 by the amount on line 10			13	
14 Enter the smallest of line 2c (treated as a postive amount), line 11, or line 13		y y y y game a set a great or y y years at a set a second and a set a second and	14	Acceptance of the control of the con
Part IV Total Losses Allowed			1 [21 206
15 Add the income, if any, on lines 1a and 3a and enter the total	=		15	21,206.
16 Total losses allowed from all passive activities for 2007. Add lines 10, 14,				31 300
to find out how to report the losses on your tax return		ATEMENT 44	16	21,206.
LHA 719761/10-11-07 For Paperwork Reduction Act Notice, see separate instruc	ctions.			Form 8582 (2007)

ALTERNATIVE MINIMUM TAX

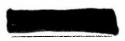
Form 8582 (2007) SANDER M. & VICTORIA S. LEVIN Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c (See instructions) Prior years Overall gain or loss Current year Name of activity (c) Unallowed (a) Net income (b) Net loss (d) Gain (e) Loss loss (line 1c) (line 1a) (line 1b) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 1a, 28,175 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions) (b) Prior year (a) Current year (c) Overall loss Name of activity deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a and 2b Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) Overall gain or loss Prior years Current year Name of activity (c) Unallowed (a) Net income (b) Net loss (d) Gain (e) Loss (line 3b) loss (line 3c) (line 3a) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 3a, -1,290. 21,206. 3b, and 3c Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.) Form or schedule (d) Subtract (c) Special and line number column (c) (b) Ratio (a) Loss Name of activity to be reported on allowance from column (a) (see instructions) Worksheet 5 - Allocation of Unallowed Losses (See Instructions.) Form or schedule and line number (c) Unallowed loss (a) Loss (b) Ratio Name of activity to be reported on (see instructions) SEE ATTACHED STATEMENT FOR WORKSHEET 5 29,465. 1.000000000 Total Form 8582 (2007)

7-9767 10-11-57

ALTERNATIVE MINIMUM TAX

om 8582 (2007) SANDER M. & VICTO Worksheet 6 - Allowed Losses (See instru	RIA S. LI	EVIN		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and the second second		Page 3
Name of activity	Form or sch and line nu to be report (see instruc	ımber ted on	(a) L	oss	(b) Una	illowed loss	(c) Allowed loss
	SEE ATT	ACHED	STATE	MENT F	OR WO	RKSHEET	6
Total Worksheet 7 - Activities With Losses R	eported on T	wo or N	2 More Forn	19,465. ns or Sch	edules	8,259.	21,206.
Name of Activity:	(a)		(b)	(c) Ra	-	(d) Unallowed	
Form or schedule and line number to be reported on (see instructions):				mana de la composição d	(Con (it) appl (Albandor) (Cons)		
1a Net loss plus prior year unallowed loss from form or schedule							
b Net income from form or schedule	(A.S.) (A.A.) A. S. T. (A.S.) (B.) (B.) (B.)					and the second of the second o	
c Subtract line 1b from line 1a, if zero or less, ent	er O· 🕨		· · · · · · · · · · · · · · · · · · ·				100 mm mm
Form or schedule and line number to be reported on (see instructions):		and the second section of the second section s		\$0.000 mm and an	este a francisco de la constante de la constan		
1a Net foss plus prior year unallowed loss from form or schedule							
b Net income from form or schedule	e services province si in promonosi manos manda il chimado dell'adoli della colora dell'adoli della colora del						
c Subtract line 1b from line 1a. If zero or less, ent	er -0- >					No Code Anna Code (Code	on the state of
Form or schedule and line number to be reported on (see instructions):					THE PERSON NAMED IN COLUMN		MATERIAL (TO A A A A A A A A A A A A A A A A A A A
1a Net loss plus prior year unailowed loss from form or schedule				and the same of th			
b Net income from form or schedule					:	917	National Company
c Subtract line 1b from line 1a. If zero or loss, ent	er O· >				, .		
Total	>			2 2 3 4 4 4			

Form 8582 (2007)

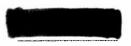


FORM 1040 SOCIAL SECURITY BENEFITS WORKSHEET STATEMENT 1

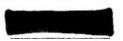
CHECK ONLY ONE BOX:	
A. SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)	
X B. MARRIED FILING JOINTLY	
C. MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE	
AT ANY TIME DURING 2007	
D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE	
FOR ALL OF 2007	
4 WATER MANY MODEL ANOTHER EDON DOV 5 OF ALL VOID	
1. ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON	•
FORM 1040, LINE 20A	44,384.
2. ENTER ONE HALF OF LINE 1	22,192.
3. ADD THE AMOUNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 14,	22,252
15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT	
INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099	327.087.
4. ENTER THE AMOUNT OF ANY EXCLUSIONS FROM FOREIGN EARNED	,
INCOME, FOREIGN HOUSING, INCOME FROM U.S. POSSESSIONS,	
OR INCOME FROM PUERTO RICO BY BONA FIDE RESIDENTS OF	
PUERTO RICO THAT YOU CLAIMED	
5. ADD LINES 2, 3, AND 4	349,279.
6. ADD THE AMOUNTS ON FORM 1040, LINES 23 THROUGH LINE 32,	
AND ANY WRITE-IN ADJUSTMENTS YOU ENTERED ON THE DOTTED	
LINE NEXT TO LINE 36	0.
7. SUBTRACT LINE 6 FROM LINE 5	349,279.
8. ENTER: \$25,000 IF YOU CHECKED BOX A OR D, OR	
\$32,000 IF YOU CHECKED BOX B, OR	
\$-0- IF YOU CHECKED BOX C	32,000.
9. IS THE AMOUNT ON LINE 8 LESS THAN THE AMOUNT ON LINE 7?	
[] NO. STOP. NONE OF YOUR SOCIAL SECURITY BENEFITS ARE	
TAXABLE. ENTER -0- ON FORM 1040, LINE 20B. IF YOU ARE	
MARRIED FILING SEPARATELY AND YOU LIVED APART FROM YOUR	
SPOUSE FOR ALL OF 2007, BE SURE YOU ENTERED 'D' TO THE	
RIGHT OF THE WORD "BENEFITS" ON LINE 20A. [X] YES. SUBTRACT LINE 8 FROM LINE 7	317 279.
10. ENTER \$9,000 IF YOU CHECKED BOX A OR D,	317,273.
\$12,000 IF YOU CHECKED BOX B	
S=0= IF YOU CHECKED BOX C	12,000.
\$-0- IF YOU CHECKED BOX C	305,279.
10 PARTE THE SMALLER OF LINE 9 OR LINE 10	12.000.
13. ENTER ONE HALF OF LINE 12	6,000.
14. ENTER THE SMALLER OF LINE 2 OR LINE 13	6,000.
13. ENTER ONE HALF OF LINE 12	259,487.
- 10. AUU 111NES 14 AND 13	400,100,0
17. MULTIPLY LINE 1 BY 85% (.85)	37,726.
	27 776
18. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17 * ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B	31,120.
" ALSO ENTER INTO AMOUNT ON FORM 1040, BINE 200	Andrew Control of the

	market and a second

FORM 1040 STATE AND I	LOCAL INCOME TAX	REFUNDS	STATEMENT	2
	2006	2005	2004	
GROSS STATE/LOCAL INC TAX REFUNDS LESS: TAX PAID IN FOLLOWING YEAR	MARYLAND 3,043.			
NET TAX REFUNDS MARYLAND	3,043.			***************************************
GROSS STATE/LOCAL INC TAX REFUNDS LESS: TAX PAID IN FOLLOWING YEAR	MICHIGAN 503. 32.			
NET TAX REFUNDS MICHIGAN	471.			<i></i>
TOTAL NET TAX REFUNDS	3,514.			



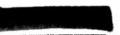
PERSONAL EXEMPTION WORKSHEET STATEMENT FORM 1040 1. IS THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR FILING STATUS? NO. STOP. MULTIPLY \$3,400 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42. YES. CONTINUE 2. MULTIPLY \$3,400 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED 6,800. 3. ENTER THE AMOUNT FROM FORM 1040, LINE 38 . . 362,878. 4. ENTER THE AMOUNT FOR YOUR FILING STATUS . . 234,600. 4. ENTER THE AMOUNT FOR YOUR FILING STATUS . . \$156,400 SINGLE MARRIED FILING JOINTLY OR WIDOW(ER) \$234,600 \$117,300 MARRIED FILING SEPARATELY \$195,500 HEAD OF HOUSEHOLD 128,278. SUBTRACT LINE 4 FROM LINE 3 . . . 6. IS LINE 5 MORE THAN \$122,500 (\$61,250 IF MARRIED FILING SEPARATELY)? [X] YES. MULTIPLY \$1,133 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D. ENTER THE RESULT HERE AND ON FORM 1040, LINE 42. DO NOT COMPLETE THE REST OF THIS WORKSHEET. [] NO. DIVIDE LINE 5 BY \$2,500 (\$1,250 IF MARRIED FILING SEPARATELY). IF THE RESULT IS NOT A WHOLE NUMBER, INCREASE IT TO THE NEXT WHOLE NUMBER (FOR EXAMPLE, INCREASE 7. MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT 10. SUBTRACT LINE 9 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.



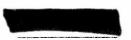
FORM	1040	TAXABLE STATE AND	LOCAL INCOME	TAX REFUNDS	STATEMENT	4
			2006	2005	2004	
		FROM STATE AND AX REFUNDS STMT.	3,514.			
LESS		BENEFIT DUE TO AMT X BENEFIT REDUCTION	3,546.			
1	NET REFUNDS	FOR RECALCULATION				
3	BEFORE PHA	ZED DEDUCTIONS ASEOUT OT SUBJ TO PHASEOUT S FROM LINE 1	74,600. 20.			
6 7	MULT LN 5 E PRIOR YEAR	JS LINES 3 AND 4 BY APPL SEC. 68 PCT AGI PHASEOUT THRESHOLD	74,580. 39,776. 321,813. 150,500.			
	(IF ZERO OF 10 THROUGH AMOUNT FROM	TNE 8 FROM LINE 7 R LESS, SKIP LINES 15, AND ENTER M LINE 1 ON LINE 16)	171,313.			
11	ALLOWABLE 3 (LINE 5 LES LINE 6 OR	RY APPL SEC. 68 PCT TEMIZED DEDUCTIONS SS THE LESSER OF LINE 10) NOT SUBJ TO PHASEOUT	3,426. 71,154. 20.			
13B	PRIOR YR. S	ITEMIZED DEDUCTIONS STD. DED. AVAILABLE ALLOWABLE ITEM. DED.	71,174. 12,300. 71,174.			
15 16	13A OR LIN TAXABLE REE	HE GREATER OF LINE NE 13B FROM LINE 14 FUNDS LINE 15 OR LINE 1)				
17 18	ALLOWABLE E	PRIOR YR. ITEM. DED. STD. DED. AVAILABLE	71,174. 12,300.			
		INE 18 FROM LINE 17 LINE 16 OR LINE 19	58,874.		uma para di managan di mangana di	
		TAXABLE INCOME	247,471.			
22	* IF LINE 2	INCLUDE ON FORM 1040, 21 IS -0- OR MORE, USE 21 IS A NEGATIVE AMOUN	E AMOUNT FROM			0
	STATE AND I	LOCAL INCOME TAX REFUN	IDS PRIOR TO	2004		
	TOTAL TO FO	ORM 1040, LINE 10			A the second content of the second content o	0



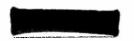
FORM 1040				IRA DISTRIBUTIO	NS	STATEMENT	5
NAME OF PAYER					GROSS DISTRIBUTION	TAXABLE AMO	UNT
MERRILL LYNCH MERRILL LYNCH					3,091. 900.	3,0	91. 00.
TOTAL TO FORM	1040,	LINE	15		3,991.	3,9	91.
FORM 1040				TAX-EXEMPT INTER	EST	STATEMENT	6
NAME OF PAYER						AMOUNT	
MERRILL LYNCH						1,9	35.
TOTAL TO FORM	1040,	LINE	8B			1,9	35.



SANDER M. & VICTORIA S	J. LEVIN						man an solden and state			
FORM 1040 REFUNDS ATT	RIBUTABLE	TO EST.	TAX	PAID	FOLL	OWING	YR	STATE	MENT	7
		2006		STATE	REFUN			UNT SUB		
STATE TAX PAID IN FOLLOW	MICHI VYEAR	48	0. —X		5(03. =	:		32	•
TOTAL STATE TAX PAID 200	06	7,44	3.				===		and the second s	===
FORM 1040 V	VAGES RECE	IVED AND	TAX	KES WI'	PHHELI	D		STATE	MENT	8
T S EMPLOYER'S NAME	AMOUNT PAID	FEDERA TAX WITHHE		STA' TAI WITH		CITY SDI TAX W		FICA TAX	MEDIC:	
T HOUSE OF REP - MEMBER SERVICES	155,440.	30,3	30.	5,	523.			6,045.	2,3	74.
S DEFENSE FINANCE & ACCOUNTING SERVICE	104,971.	17,2	16.	8,	186.			6,045.	1,6	77.
TOTALS	260,411.	47,5	46.	13,	709.		***************************************	12,090.	4,0	51.
FORM 1040	QU	ALIFIED	DIV:	IDENDS				STATE	MENT	9
NAME OF PAYER						INARY IDENI			LIFIE	
MERRILL LYNCH	1			endal Pri		3,9	969.		2,4	89.
TOTAL INCLUDED IN FORM	1040, LINE	9B							2,4	89.
FORM 1040	FEDERA	L INCOME						STATE		1(
T S DESCRIPTION								AM	OUNT	
T HOUSE OF REP MEMBER S DEFENSE FINANCE & ACC T MERRILL LYNCH		RVICE							30,3 17,2 3	
TOTAL TO FORM 1040, LIN	E 64								47,8	



SCHEDULE A	STATE AND LOCAL INCOME TA	AXES	STATEMENT	11
DESCRIPTION			AMOUNT	
HOUSE OF REP - MEMBER DEFENSE FINANCE & ACC MICHIGAN 1ST QTR ESTI MICHIGAN 2ND QTR ESTI MICHIGAN 3RD QTR ESTI MICHIGAN PRIOR YEAR O MICHIGAN PRIOR YEAR E	OUNTING SERVICE MATE PAYMENTS MATE PAYMENTS MATE PAYMENTS VERPAYMENT APPLIED		5 5 5 4	
TOTAL TO SCHEDULE A,			15,7	
SCHEDULE A	CASH CONTRIBUTIONS		STATEMENT	12
DESCRIPTION		AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	
		1.		
SUBTOTALS		5,175.		
TOTAL TO SCHEDULE A,	LINE 16		5,1	75.
SCHEDULE A	INVESTMENT INTEREST		STATEMENT	13
DESCRIPTION			AMOUNT	
MERRILL LYNCH				6.
TOTAL TO SCHEDULE A,	LINE 14			б.

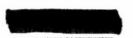


SCHEDULE A	CONTRIBUTIONS OTH	ER THAN CASH OR	CHECK	STATEMENT	14
DESCRIPTION	AMOUNT 100% LIMIT	AMOUNT 50% LIMIT	AMOUNT	AMOUNT	
CLOTHING		25.			
SUBTOTALS		25.			
TOTAL TO SCHEDULE	A, LINE 17				25.
SCHEDULE A	MEDICAL AND	DENTAL EXPENSES		STATEMENT	15
DESCRIPTION				AMOUNT	
111111111111111111111111111111111111111	WITHHELD WITHHELD				715.
TOTAL TO SCHEDULE	A, LINE 1			3,4	135.

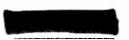


SCHEDULE A	ITEMIZED DEDUCTIONS WORKSHEET	STATEMENT	16
9, 15, 19, 20, 2. ENTER THE TOTAL	L OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 27, AND 28	66,4	10.
LOSSES INCLUDE 3. IS THE AMOUNT IF NO, YOUR DE	D ON LINE 28		6.
IF YES, SUBTRA 4. MULTIPLY LINE 5. ENTER THE AMOU 6. ENTER: \$156,40 SEPARATELY)	CT LINE 2 FROM LINE 1		04.
7. IS THE AMOUNT ON LINE 5? IF NO, YOUR DE THE AMOUNT FRO LINE 29. IF YES, SUBTRA 8. MULTIPLY LINE 9. ENTER THE SMAL 10. DIVIDE LINE 9	ON LINE 6 LESS THAN THE AMOUNT DUCTION IS NOT LIMITED. ENTER M LINE 1 ABOVE ON SCHEDULE A, CT LINE 6 FROM LINE 5	6,1 2,0	94.
12. TOTAL ITEMIZED	10 FROM LINE 9	62,2	
SCHEDULE A	REAL ESTATE TAXES	STATEMENT	17
DESCRIPTION		AMOUNT	
MASSACHUSETTS SUMME MICHIGAN RESIDENCE MARYLAND RESIDENCE LIONS DEN	R HOME - MA	3,3 8,3	93. 160. 140.
TOTAL TO SCHEDULE A	LINE 6	14,5	

SCHEDULE B	TAX-EXEMPT INTEREST		STATEMENT	18
NAME OF PAYER			AMOUNT	
MERRILL LYNCH		states	1,9	35.
TOTAL TAX-EXEMPT INTERI	EST TO SCHEDULE B, LINE 1	and a second	1,9	35.
SCHEDULE D	CAPITAL GAIN DISTRIBUTIONS		STATEMENT	19
NAME OF PAYER		TOTAL CAPITAL GAIN	28% GAI	N
MERRILL LYNCH		2,413.		
TOTALS TO SCHEDULE D, 1	LINE 13	2,413.		
SCHEDULE E	OTHER EXPENSES		STATEMENT	20
DOMINION MIDWEST ENERGY	Y			
DESCRIPTION		-	AMOUNT	
REVENUE DEDUCTION SEVERENCE TAX				49. 38.
TOTAL TO SCHEDULE E, PA	AGE 1, LINE 18	2220	7	87.
SCHEDULE E	OTHER EXPENSES		STATEMENT	21
MASSACHUSETTS SUMMER HO	OME - MA			
DESCRIPTION			TNUOMA	
MAILING COSTS INTERNET OFFICE SUPPLIES				13. 16. 21.
TOTAL TO SCHEDULE E, PA	AGE 1 LINE 18	and (2)	1	50.



AGE 1, LINE 18			AMOUNT	
AGE 1, LINE 18			AMOUNT	
AGE 1, LINE 18				
AGE 1, LINE 18				1.
,				1.
OTHER	EXPENSES		STATEMENT	23
O - MI				
			AMOUNT	
				11. 14.
AGE 1, LINE 18				25.
OTHER	EXPENSES		STATEMENT	2.4
INC.				
			AMOUNT	
			1	61. 138.
AGE 1, LINE 18			1	199.
PASSIVE	ACTIVITIES		STATEMENT	25
	NET INCOM	E (LOSS)		
FORM	AMT	REGULAR	ADJUSTMEN	4T
SCH E	21,206. -928.	21,134. -1,011.		72. 83.
SCH E	-20,278.	-20,123.	e (155.
NE 18				0.
	O - MI AGE 1, LINE 18 OTHER INC. PASSIVE FORM SCH E SCH E SCH E	AGE 1, LINE 18 OTHER EXPENSES INC. AGE 1, LINE 18 PASSIVE ACTIVITIES NET INCOM FORM AMT SCH E SCH E SCH E SCH E -20,278.	O - MI O - MI OTHER EXPENSES INC. AGE 1, LINE 18 PASSIVE ACTIVITIES NET INCOME (LOSS) FORM AMT REGULAR SCH E SCH E 21,206. 21,1349281,011. SCH E -20,27820,123.	O - MI AGE 1, LINE 18 OTHER EXPENSES STATEMENT INC. AMOUNT AGE 1, LINE 18 PASSIVE ACTIVITIES STATEMENT NET INCOME (LOSS) FORM AMT REGULAR ADJUSTMENT SCH E 21,206. 21,134. SCH E -9281,011. SCH E -20,27820,123.



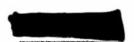
2 ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 28	FOR	M 6251	EXEMPTION WORKSHEET	STATEMENT 2
(AMTI) FORM 6251, LINE 28		MARRIED IF MARRI	FILING JOINTLY OR QUALIFYING WIDOW(ER); \$33,125 ED FILING SEPARATELY	. 66,250
FILING SEPARATELY	_	(AMTI) F ENTER: \$11 \$150,000	ORM 6251, LINE 28 332,430 2,500 IF SINGLE OR HEAD OF HOUSEHOLD; IF MARRIED FILING JOINTLY OR	•
6 SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0 IF THIS FORM IS FOR A CHILD UNDER AGE 18, GO TO LINE 7 BELOW. OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30	4	FILING S SUBTRACT L	EPARATELY	
LINE 29, AND GO TO FORM 6251, LINE 30	5 : 6	SUBTRACT L THIS FOR	INE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0 IF M IS FOR A CHILD UNDER AGE 18, GO TO LINE 7 BELOW.	
8 ENTER THE CHILD'S EARNED INCOME, IF ANY		LINE 29,	AND GO TO FORM 6251, LINE 30	. 20,642
LINE 29, AND GO TO FORM 6251, LINE 30	8	ENTER THE	CHILD'S EARNED INCOME, IF ANY	•
DESCRIPTION MERRILL LYNCH TOTAL TO FORM 6251, LINE 11 FORM 4952 INVESTMENT INTEREST EXPENSE STATEMENT DESCRIPTION MERRILL LYNCH 6.	10	ENTER THE LINE 29,	SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, AND GO TO FORM 6251, LINE 30	
MERRILL LYNCH TOTAL TO FORM 6251, LINE 11 FORM 4952 INVESTMENT INTEREST EXPENSE CURRENT CARRYOVE MERRILL LYNCH 6.	FOR	м 6251	INTEREST FROM SPECIFIED PRIVATE ACTIVITY BONDS	STATEMENT 2
TOTAL TO FORM 6251, LINE 11 FORM 4952 INVESTMENT INTEREST EXPENSE STATEMENT DESCRIPTION CURRENT CARRYOVE MERRILL LYNCH 6.	DES	CRIPTION		AMOUNT
FORM 4952 INVESTMENT INTEREST EXPENSE STATEMENT DESCRIPTION CURRENT CARRYOVE MERRILL LYNCH 6.	MER	RILL LYNCH		279
DESCRIPTION CURRENT CARRYOVE MERRILL LYNCH 6.	TOT	AL TO FORM	6251, LINE 11	279
MERRILL LYNCH 6.	FOR	M 4952	INVESTMENT INTEREST EXPENSE	STATEMENT 2
PHARLED HEROT	DES	CRIPTION	CURRENT	CARRYOVER
TOTALS TO FORM 4952. LINES 1 AND 2	MER	RILL LYNCH	6.	A STATE AND THE PROPERTY OF TH
1011110 10 10111 1001, 201120 2 1112 2	TOT	ALS TO FOR	M 4952, LINES 1 AND 2 6.	



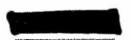
FORM 4952 INCOME	FROM PROPERTY HELD FOR INVESTMENT	STATEMENT	29
DESCRIPTION		AMOUNT	
INTEREST INCOME DIVIDEND INCOME MUSKEGON DEVELOPMENT CO - I QUICKSILVER RESOURCES, INC DOMINION MIDWEST ENERGY MERIT ENERGY COMPANY	MI	3,9 2 1,2 8,1	06. 20.
TOTAL TO FORM 4952, LINE 4	A	13,7	92.
FORM 4952	INVESTMENT EXPENSES	STATEMENT	30
DESCRIPTION		AMOUNT	
MUSKEGON DEVELOPMENT CO - QUICKSILVER RESOURCES, INC DOMINION MIDWEST ENERGY MERIT ENERGY COMPANY	MI		25. .99. /87.
TOTAL TO FORM 4952, LINE 5		1,0)12.
	APITAL GAIN FROM THE DISPOSITION OF PROPERTY HELD FOR INVESTMENT	STATEMENT	31
DESCRIPTION		AMOUNT	
MERRILL LYNCH MERRILL LYNCH CAPITAL GAIN DISTRIBUTIONS			540. 983. 113.
TOTAL TO FORM 4952, LINE 4	lE	47,9) 70.



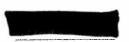
FORM 4952AMT	INVESTME	ENT INTEREST	EXPENSE		STATEMENT	32
DESCRIPTION			CURREI	NT	CARRYOVER	
MERRILL LYNCH			er som som filmer som er state filmer til med film til	6.		
TOTALS TO FORM 4952AM	MT, LINES 1 AM	ND 2		6.		
FORM 2106/SBE	OTHER	BUSINESS EX	XPENSES		STATEMENT	33
MEMBER OF CONGRESS						
DESCRIPTION					AMOUNT	
TOTAL REFLECTS \$3,000 OF CONGRESS) IRC 162(A) I	LIMIT ON DC	LIVING EXP-M	EMBER	3,6	11.
TOTAL TO FORM 2106/SE	BE, PART I, LI	INE 4		:	3,6	11.
FORM 8582 AC	CTIVE RENTAL (OF REAL ESTA	ATE - WORKSHE	ET 1	STATEMENT	34
	CURREN	r year	PRIOR YEAR	OVERAL	L GAIN OR I	oss
NAME OF ACTIVITY	NET INCOME	NET LOSS	UNALLOWED LOSS	GAIN	LOSS	
MASSACHUSETTS SUMMER HOME - MA	0.	-28,175.	-5,159.		-33,3	34.
TOTALS	0.	-28,175.	-5,159.		-33,3	34.
FORM 8582	OTHER PASSIVI	E ACTIVITIES	5 - WORKSHEET	3	STATEMENT	3 5
	CURRENT		PRIOR YEAR	OVERAL	L GAIN OR I	oss
NAME OF ACTIVITY	NET INCOME		UNALLOWED LOSS	GAIN	LOSS	; }
LRS COMPANY, L.L.C. LEVINSON-LEVIN			-384.	ጎ1 1	-1,6	74.
PROPERTIES, LLC	221 KIND 22 22 MAY 1999 F WIN & F.		A LOS (MARINES) PROPERTY OF THE PROPERTY OF TH			
TOTALS	21,134.		-384.		341,6	74.



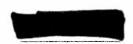
FORM 8582	ALLOCATION	OF UNALI	OWED LOSSE	s - Worksh	HEET 5 STA	rement 36
NAME OF ACTIVITY		٤	FORM OR CHEDULE	LOSS	RATIO	UNALLOWED LOSS
LRS COMPANY, L.L.C MASSACHUSETTS SUMM			SCH E SCH E	33,334.	.047817642 .952182358	
TOTALS				35,006.	1.00000000	13,874.
FORM 8582	AI	LLOWED LOS	SSES - WORK	SHEET 6	STA	rement 37
NAME OF ACTIVITY			FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
LRS COMPANY, L.L.C MASSACHUSETTS SUMM		MA	SCH E	1,674. 33,334.		1,011. 20,123.
TOTALS				35,008.	13,874.	21,134.
FORM 8582	SUN	MMARY OF E	ASSIVE ACT	IVITIES	STA'	rement 38
R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR S YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
L.L.C. LEVINSON-LEVIN PROPERTIES, LLC	SCH E	-1,290.	-384.	-1,674	663.	1,011.
		21,134.		21,134	١.	
	SCH E	-28,175.	-5,159.	~33,334	13,211.	20,123.
TOTALS		-8,331.	-5,543.	-13,874	13,874.	21,134.
PRIOR YEAR CARRYOV	VERS ALLOWE	ED DUE TO	CURRENT YE	AR NET ACT	CIVITY INCOM	Ξ
TOTAL TO FORM 8582	2, LINE 16					21,134.
						The state of property and the state of the s



FORM 8582	MODIFIED AGI	S'	TATEMENT	39
INCOME				
WAGES, SALARIES, TIPS ETC. DIVIDEND INCOME TAXABLE REFUNDS			260,4 3,9	111. 969.
ALIMONY RECEIVED TAXABLE IRA DISTRIBUTIONS TAXABLE PENSIONS AND ANNUITIES UNEMPLOYMENT COMPENSATION OTHER INCOME	5		3,9	91.
INTEREST INCOME ADD: SERIES EE AND I EXCLUSI	ON _	230.		
BUSINESS INCOME OR LOSS ADD: PASSIVE LOSSES SUBTRACT: PASSIVE INCOME			2	230.
SALE OF ASSETS ADD: PASSIVE/RREA PROFESSION SUBTRACT: PASSIVE INCOME	NAL LOSSES	47,970.		
RENTAL, ROYALTY OR PASSTHROUGH ADD: PASSIVE/RREA PROFESSION SUBTRACT: PASSIVE INCOME		8,581. 21,134. -21,134.	47,9	70.
FARM OR FARM RENTAL INCOME OR ADD: PASSIVE/RREA PROFESSION SUBTRACT: PASSIVE INCOME			8,5	581 .
TOTAL INCOME			325,1	L52.
ADJUSTMENTS				
MOVING EXPENSES SELF-EMPLOYED HEALTH INSURANCE PENALTY ON EARLY WITHDRAWAL OF ALIMONY PAID KEOGH/SEP DEDUCTION OTHER ADJUSTMENTS				
TOTAL ADJUSTMENTS	-			
TOTAL TO FORM 8582, LINE 7			325,1	



FORM 8582	CTIVE				MUM TAX ATE - WORKSH		TEMENT 40
			YEAR		PRIOR YEAR UNALLOWED	OVERALL GA	IN OR LOSS
NAME OF ACTIVITY	NET					GAIN	LOSS
MASSACHUSETTS SUMMER HOME - MA		0.	-28,	175.			-28,175.
TOTALS		0.	-28,	175.			-28,175.
FORM 8582	ОТНЕР			MINI	MUM TAX S - WORKSHEE	STA	ATEMENT 41
		CURREN'	r year		PRIOR YEAR		AIN OR LOSS
NAME OF ACTIVITY	NET	INCOME	NET I	LOSS	UNALLOWED LOSS		LOSS
LRS COMPANY, L.L.C.	a mail Waldward and and Medicand and	0.	-1	290.		and the second s	-1,290.
LEVINSON-LEVIN PROPERTIES, LLC	21,206.		0.			21,206.	
TOTALS		21,206.				• • • •	-1,290.
FORM 8582	LOCAT				MUM TAX SSES - WORKS		ATEMENT 42
NAME OF ACTIVITY			FOI OI SCHEI	3	LOSS	RATIO	UNALLOWED LOSS
LRS COMPANY, L.L.C.			SCH I			.043780757	362.
MASSACHUSETTS SUMMER - MA	HOME		SCH I			.956219243	
TOTALS						1.000000000	And the second s
TOTITIO					•		



FORM 8582		ALTERNATI LOWED LOS	STATEMENT 43			
NAME OF ACTIVITY		S	FORM OR CHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
LRS COMPANY, L.L.C MASSACHUSETTS SUMM			CH E CH E		362. 7,897.	928. 20,278.
TOTALS			 	29,465.	8,259.	21,206.
R R E A NAME	FORM OR		PRIOR	NET GAIN/LOSS	UNALLOWED	ALLOWED
LRS COMPANY, L.L.C. LEVINSON-LEVIN PROPERTIES, LLC X MASSACHUSETTS SUMMER HOME - MA	SCH E SCH E	-1,290. 21,206. -28,175.	TEAN C/O		362.	928.
TOTALS		-8,259.		-8,259	8,259.	21,206.
PRIOR YEAR CARRYOV	ERS ALLOWEI	DUE TO	CURRENT YE	EAR NET ACT	IVITY INCOME	
TOTAL TO FORM 8582.	AMT, LINE 1	16				21,206.