§ 104	0	L	I.S. Individual Income Tax Return 2009 (59) 95 Use Only	- Donet w	mte crist	aple si tilis space
Label	F	17 10 e	year Jan. 1-Deb. 31, 2009, or other cax year beginning 2009 ending 20			OMS No. 1845-0074
(See	L	You	r first name and initial Last name		×.	r agent manually number
instructions	A		NDER M. LEVIN			
on page 14.)	BE	If a	point return, spouse's first name and initial Last name		орс	ABOT BOUM SECURIVITATION
Use the IRS label.	┞	Hor	ne address (number and street). If you have a P.O. box, see page 14.	Apt. no.		You must enter
Otherwise,	H		48 HOLLOW GLEN PL	,		your SSN(s) above.
please print	R		town or post office, state, and ZIP codo if you have a loreign address, see purpe 14.		City	ecking a box below will not
or type. Presidential	E		LVER SPRING, MD 20910-1138			inne your tax or reland.
Election Can	paig		Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page	4) >		You Spouse
		1			ılifying i	person). If the qualifying
Filing Stat	us	2	Married filing jointly (even if only one had income) person is a child but	not you	ir depen	dent, enter this child's
Check only		3	Married filing separately. Enter spouse's SSN above name here. ▶			
one box.			and full name here. Cualifying widow(er) with de	penden	tich id (see page 16)
Exemption		6a	X Yourself. If someone can claim you as a dependent, do not check box 6a			an 60 and 6b
Exemption	13	b	Spouse		v doubly	No of children on 6c who:
		С	Dependents: (2) Dependent's social social relationship to	10	n coall for It tax cross	ised with you did not live with
		_	(1) First name List name you	1,4	cone (1)	you due to devoice of peparation
						(see page 16)
If more than for dependents, se						* Degendents on 6c
page 17 and	e (===					ant argered above
check here	Ĺ	.~-				Add numbers on lines strove
			Total number of exemptions claimed	1	7	162,621.
Income		7	Wages, salaries, tips, etc. Altach Form(s) W-2		8a	131
Attach Form(s)	i	8a L	Taxable interest. Attach Schedule 8 if required Tax-exempt interest. Do not include on line 8a 8b			The second
W-2 here, Also)	b 9a	Ordinary dividends. Attach Schedule B if required		9a	
attach Forms W-2G and		9a b	Qualified dividends (see page 22)			——————————————————————————————————————
1099-R if tax		10	Taxable refunds, credits, or offsets of state and local income taxes STMT 3 STMT	5	10	0.
was withheld.		11	Aimony received STMT 7	Ì	11	
		12	Business income or (less). Attach Schedule C or C-EZ		12	
If you did not		13	Capital gain or (loss). Attach Schedule D if required, if not required, check here		13	-3,000.
get a W-2, see page 22.		14	Other gains or (losses). Attach Form 4797	Ī	14	
p-3		15a	IRA distributions 15a b Taxable amount		15b	93,306.
Enclose, but do)	16a	Pensions and annuities 16a 102,679. b Taxable amount		16b	21,024.
not attach, any payment. Also,		17	Rental real estate, royalities, partnerships, S corporations, trusts, etc. Attach Schedule E	10 004	17	6,153.
please use		18	Farm locome or (loss), Attach Schedule F		18	
Form 1040-V.		19	Unsupprogramme companisation at excess of \$2,400 per recipient. Like page 27)		19	
		20a	Social security benefits 20a 29,791. b Taxable amount (see pag	e 27)	206	25,322
		21	Other income. List type and amount (see page 29)			
			The process in the contract of		21	305,557.
		22	Add the amounts in the far right column for lines 7 through 21. This is your total income	_	22	303,337.
		23	Full cator expanses (see page 29) Cortee bytiness expenses of reservoirs, preferring artists, and fee cases government and see page 24			
Adjusted Gross		24				
Income		25				
		26 27	Meving expenses. Attach Form 3903 One-part of self-employment tax. Attach Schedule SE 27			
		28	Sed-employed SEP, SIMPLE, and qualified claims 28	***		
		29	Self-employed hearth insurance deduction (see page 30) 29			
		30	Penalty on carry withdrawal of cavings 30			
		31a	Almony paid b Recipient's SSN ➤ 31a			
		32	IRA deduction (see page 31) 32			
		33	Sauten: can interest deduction (see page 34)			
		34	Tot on and fees distraction. Attach Form 6917 34			
		35	Pemestic production activities deduction. Attach Form 8903 35			
		36	Add lines 23 frrough 3 taland 32 through 35		36	
or or the second		37	Subtract line 36 from line 22. This is your adjusted gross income	>	37	305,557.

Form 1040 (2009)	S	ANDER M. LEVIN		Fage 2
Tax and		Amount from line 37 (adjusted gross income)	38	305,557.
Credits		Check \(\begin{align*} align		
Standard		if: Spouse was born before January 2, 1945, Blind. Checked > 39a 1		
Deduction for a	h	If your spouse itemizes on a separate return or you were a dual-status after, see page 35 and check here	1	
• People who		Itamized deductions (from Schedule A) nevour standard deduction (see left margin)	40a	120,223.
check any box on line	- #00 b	If you are increasing your standard deduction by certain real estate taxes, now motor vehicle taxes, or a net	-	
39a, 39b, or 40b 0f who		Subtract line 40a from line 38	41	185,334.
cart 56 etal and as a	41	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual,		
dependent,	42	multiply \$3,650 by the number on line 6d. Otherwise, see page 37	42	2,433.
	40	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	182,901.
	43	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972	44	45,500.
All officials	44		45	5,048.
Single of Manied Bling	45	Alternative minimum tax. Attach Form 6251	46	50,548.
separately. \$5,700	46	And tines 44 and 45 Foreign tax credit Attach Form 1116 if required 47	40	30,330.
Manied Rling	47	Totagn by area made and area a	-	
ye nify to	48	Credit for child and dependent care expenses. Attach Form 2441 48	1	
Contdying vidower),	49	Education credits from Form 8863, line 29	-	
\$11,400	50	Retirement savings contributions credit. Attach Form 8880 50	-	
Head of household.	51	Child tax credit (see page 42)	-	
\$9,450	52	Credits from Form: a 8396 b 8839 c 5695 52		
	53	Other credits from Form: a 3800 b 8801 c 53	1	
	54	Add lines 47 through 53. These are your total credits	54	= = = = = = = = = = = = = = = = = = = =
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	50,548.
Other	56	Self-employment tax. Attach Schedule SE	56	
Taxes	57	Unreported social security and Medicare tax from Form: a 4137 b 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59	Additional taxes: a AEIC payments b X Household employment taxes. Attach Schedule H	59	361.
	60	Add tines 55 through 59. This is your total tax	60	50,909.
Payments	61	Federal income tax withheld from Forms W-2 and 1099 61 30, 537.	4	STATEMENT 9
	62	2009 estimated tax payments and amount applied from 2008 return 62 12,200.		
	63	Making work pay and government retiree credits. Attach Schedule M 63		
if you trave a qualifying if	_ 64	a Earned income credit (EIC)		
craid, attach	I	Nontaxable combat pay election 64b		
Schedule E.C.	65	Additional child tax credit. Attach Form 8812		
	66	Refundable education credit from Form 8863, line 16 66		
	67	First-time homebuyer credit, Attach Form 5405		
	68	Amount paid with request for extension to file (see page 72) 68		
	69	Excess social security and tier 1 RRTA tax withheld (see page 72) 69		
	70	Credits from Form: a 2439 b 4136 c 8801 d 8885 70		
	71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments	71	42,737.
Refund	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	72	
Ovect deposit? See page 73		a Amount of line 72 you want refunded to you. If Form 3888 is attached, check here	73a	
und fill in 23b,	>	Passing Descriptor]	
73a, and 73a. or Farm 368a.	74	Amount of line 72 you want applied to your 2010 estimated tax > 74		
Amount	75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74	75	8,202.
You Owe	76	Estimated tax penalty (see page 74) 76 30.		
Third Par	ty	Do you want to allow another person to discuss this return with the IRS (see page 75)? 【X】Yes. Complete the f	ollowin	g. No
Designee	<i>;</i>	PROBERT KLEIMAN 100 248-372-7300	MURREL COM	41/4/41
Sign	तुम् हा जन्म	organities of perjuty, I declare that I have expensed this return and society daying activities and statements, and to the heat of my kno complete. Declaration of proposer other than tax payer) is based on all information of which pressure has any smoothodys.		
Here		Your skytisting State Your occupation		time (norm example)
legant retione? Legange st	1	MEMBER OF CONGRESS	20	2 225496
nemo acid, incynum	1	Spoule' organise if a portressen DOM trust sage. Date Spoule's especialists		
1000005				
Paid		and a Court of self-	Programa	w's 59N or P15N
Preparer'	Silin			Annual States St
Use Only	13/19	BAKER TILLY VIRCHOW KRAUSE, LLP		
		ONE TOWNE SQUARE, SUITE 600	24	8-372-7300
940,094 100,259 9		SOUTHFIELD, MI 48076		

2210

Department of the Treasury

Internal Payance Service

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

> See separate instructions.

Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

2009 Attachment Sequence No. 06

OMB No 1545-0140

Name(s) shown on tax return

Identifying number

SANDER M. LEVIN

Do You Have To File Form 2210? Yes Complete lines 1 through 7 below. Is line 7 less than \$1,000? Do not file Form 2210. You do not owe a penalty. No You do not owe a penalty. Do not file Form 2210 (but if box Complete lines 8 and 9 below. Is line 6 equal to or more Yes E in Part II applies, you must file page 1 of Form 2210). than line 9? Yes You must file Form 2210. Does box B, C, or D in Part II apply? You may owe a penalty. Does any box in Part II below apply? No Yes No You must figure your penalty. You are **not** required to figure your penalty because the IRS will Do not file Form 2210. You are not required to figure your penalty because the IRS will figure it and send you a bill for any figure it and send you a bill for any unpaid amount. If you want to unpaid amount. If you want to figure it, you may use Part III or figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax return, but file only page 1 of Part IV as a worksheet and enter your penalty amount on your tax return, but do not file Form 2210. Form 2210. Part I Required Annual Payment 50,548. Enter your 2009 tax after credits from Form 1040, line 55 (see instructions if not filing Form 1040) 361. 2 2 Other taxes, including self-employment tax (see page 2 of the instructions) 3 Refundable credits. Enter the total of your making work pay and government retiree credits, earned income credit, additional child tax credit, refundable education credit, first-time homebuyer credit, credit for federal tax paid on fuels, refundable credit for prior year minimum tax, and health coverage tax credit 909. 4 Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop; you do not owe a penalty. Do not file Form 2210 4 45,818 5 Multiply line 4 by 90% (.90) 30,537. 6 Withholding taxes. Do not include estimated tax payments (see page 3 of the instructions) 7 20,372. Subtract line 6 from line 4. If less than \$1,000, stop; you do not owe a penalty. Do not file Form 2210 51,151. Maximum required annual payment based on prior year's tax (see page 3 of the instructions) 8 45,818. Required annual payment. Enter the smaller of line 5 or line 8 9 Next: Is line 9 more than line 6? No. You do not owe a penalty. Do not file Form 22 10 unless box E below applies. X Yes. You may owe a penalty, but do not file Form 2210 unless one or more boxes in Part II below applies. • If box B, C, or D applies, you must figure your genalty and file Form 2210. • if box A, E, or F applies, (but not B, C, or D) file only page 1 of Form 2210. You are not required to figure your penalty; the IRS will figure it and send you a bill for any unpairi amount. If you want to figure your penalty, you may use Part III or IV as a worksheel and enter your penalty on your tax return, but file only page 1 of Form 2210. Part II Reasons for Filing. Check applicable boxes. If none apply, do not file Form 2210. You request a waiver (see page 2 of the instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you are not required to figure your penalty. You request a waiver (see page 2 of the instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210. Your income varied during the year and your penalty is reduced or climinated when I gured using the annualized income installment method. You must figure the penalty using Schedule AI and file Form 2210. 0 Vour penalty is lower when figured by treating the federal income tax withheld from your income as pold on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210. E 🔃 You filed or are filing a joint return for either 2008 or 2009, but not for both years, and kne 8 above is smaller than line 5 above. You must file page 1 of Form 22.10, but you are not required to figure your penalty (unless box B, C, or D applies). F Our are certifying that more than 50% of the gross income shown on your 2008 tax return is income from a small business (as defined in the instructions) and your adjusted gross income for 2008 is less than \$500,000 (less than \$250,000 if your 2009 fling status is married filing separately).

Part IV Regular Method (See page 3 of the inst	ructio	ins if you are filing For			
			Payment D	Oue Dates	######################################
Section A - Figure Your Underpayment		(a) 4/15/09	(b) 6/15/09	(c) 9/15/09	(d) 1/15/10
18 Required installments. If box C in Part II applies, enter					
the amounts from Schedule Al, line 25. Otherwise, enter					
25% (.25) of line 9, Form 2210, in each column	18	11,455.	11,455.	11,455.	11,453.
19 Estimated tax paid and tax withhold. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 16 for all payment periods, slop here; you do not owe a penalty. Do not file Form 22.10 unless you checked a box in Part III.	19	19,834.	7,634.	7,634.	7,635.
Complete lines 20 through 26 of one column before going to line 20 of the next column.		Andread Commission Control of the Co			
20 Enter the amount, if any, from line 26 in the previous column	20		8,379.	4,558.	737. 8,372.
21 Add lines 19 and 20	21		16,013.	12,192.	8,372.
22 Add the amounts on lines 24 and 25 in the previous column	22				
23 Subtract line 22 from line 21. If zero or less, enter -0					
For column (a) only, enter the amount from line 19	23	19,834.	16,013.	12,192.	8,372.
24 If line 23 is zero, subtract line 21 from line 22.				_	
Otherwise, enter -0-	24		0.	0.	
25 Underpayment. If line 18 is equal to or more than line					
23, subtract line 23 from line 18. Then go to line 20 of					2 001
the next column. Otherwise, go to line 26	25				3,081.
26 Overpayment, If line 23 is more than line 18, subtract line		0.350	4 550	n o n	
18 from tine 23. Then go to line 20 of the next column	26	8,379.	4,558.	737.	
Section B - Figure the Penalty (Complete lines					
Note: Only one underpayment rate applies for all underpayments	s of rec		· · · · · · · · · · · · · · · · · · ·		
April 16, 2009 - April 15, 2010		4/15/09 Dayo	6/15/09 Days	9/15/09 Dave	1/15/10
29 Number of days from the date shown above line		100	200,4		
29 to the date the amount on line 25 was paid or	20	CEE AMMACU	ED WORKSHEE	m	
4/15/10, whichever is earlier	29	SEE ATTACH	THEN WORKSHEE		
30 Underpayment on ine 25 Number of days on line 29 x .04	30	g.	\$	\$	\$
31 Penalty. Add all amounts in each column of line 30. Enter t		here and on Form 1040	Jine 76: Form 1040A.		
line 49; Form 1040NR, line 71; Form 1040NR-EZ, line 26; or					
Do not file Form 2210 unless you checked a box in Part II				▶ 31	30.

Form 2210 (2009)

UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

lame(s)				Identifying Nu	mber
SANDER M. L	EVIN				
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
		0-			
04/15/09	11,455.	11,455.	and the second s		
04/15/09	-7,634.	3,821.			
04/15/09	-12,200.	-8,379.			
06/15/09	11,455.	3,076.			
06/15/09	-7,634.	4,558.			
09/15/09	11,455.	6,897.			
09/15/09	-7,634.	-737.			
12/31/09	0.	737.	15	.000109589	
01/15/10	11,453.	10,716.			& M. C.
01/15/10	-7,635.	3,081.	90	.000109589	3
			AVE. SALES AND S		
					ndanning for A saar WA . A saar was
					and the same of the same and a same section of the same of the sam
1134					
Committee Commit					
malty Due (Sum of Colum	-a []				3

^{*} Date of estimated tax payment, withholding credit date or installment due date.

SCHEDULE A (Form 1040)

Department of the Treasury (99) nternal Revenue Service (99) Nunels) shows on Form 1840

Itemized Deductions

➤ Attach to Form 1040. ➤ See Instructions for Schedule A (Form 1040).

2009
Attachment Sequence No 07
Your social security souther

SANDER M	. 1	LEVIN			<u> </u>
Medical		Caution. Do not include expenses reimbursed or paid by others.			
and	1	Medical and dental expenses (See page A-1.) SEE STATEMENT 13	1	3,006.	
Dental	2	Enter amount from Form 1040, line 38 2 305,557.	П		
Expenses	3	Multiply line 2 by 7.5% (.075)	3	22,917.	
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter 0		4	0.
Taxes You	5	State and local (check only one box):			
Paid		a X Income taxes, or SEE STATEMENT 10	5	8,625.	
(See		b General sales taxes			
page A-2.)	6	Real estate taxes (See page A-5.) SEE STATEMENT 15	6	10,987.	
	7	New motor vehicle taxes from line 11 of the worksheet on page 2.			
		Skip this line if you checked box 5b	7		
	8	Other taxes. List type and amount			
		PERSONAL PROPERTY TAXES 323.	8	323.	
	9	Add lines 5 through 8		9	19,935.
Interest	10	Home mortgage interest and points reported to you on Form 1098	10	16,346.	
You Paid	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-7 and show that person's name,			
(See		identifying no., and address			
page A-6.)	1				
Note.			11		
Personal Interest is	12	Points not reported to you on Form 1098	12		
not	13	Qualified mortgage insurance premiums (See page A-7.)	13		
deductible.	14	Investment interest. Attach Form 4952 if required. (See page A-8.)	14		
	15	Add lines 10 through 14		. 15	16,346.
Gifts to	16	Gifts by cash or check SEE STATEMENT 11	16	79,300.	
Charity	17	Other than by cash or check. If any gift of \$250 or more, see page A-8.			
If you made a		You must attach Form 8283 if over \$500 SEE STATEMENT 12	17	480.	
gift and got a benefit for it,	18	Carryover from prior year	18		
see page A-8.	19	Add lines 16 through 18		19	79,780.
Casualty and					
Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See page A-10.)	ТТ		
Job Expenses and Certain	21				
Miscellaneous		Attach Form 2106 or 2106-EZ if required. (See page A-10.)			
Deductions	1		21		
		T	22	2,550.	
		Tax preparation fees Other expenses - investment, safe deposit box, etc. List type and amount	122		
(2)		LIVING EXPENSES FOR MEMBER		1	
(See page A-10.)		OF CONGRESS 9,111.			
pagayttay			23	9,111.	
	24	Add lines 21 through 23	24	11,661.	
	24 25	Enter amount from Form 1040, line 38 [25] 305,557			
	26	Multiply line 25 by 2% (.02)	26	6,111.	
	27	Subtract line 26 from line 24, if line 26 is more than line 24, enter 0	1	27	5,550.
Other	28				
Miscellaneous		Care indicase on page A in case type and another			
Deductions					
				28	
Total	29	Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)?			
Itemized	and.	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 40a.	S	ГМТ 14▶ 29	120,223.
		X Yes. Your deduction may be limited. See page A-11 for the amount to enter.)		
	30		k here	▶	

	Before you begin: You cannot take this deduction if the amount or	r Form 1040, line 38, is equal to	or greater than \$135,000
for Line 7 -	(\$260,000 if married filling jointly).		
New motor	See the instructions for line 7 on page A-6.		
vehicle			
taxes	1 Enter the state or local sales or excise taxes you paid in 2009		
	for the purchase of any new motor vehicle(s) after February 16,		
	2009 (see page A·6)		
Use this worksheet	2 Enter the purchase price (before taxes) of the new motor vehicle(s)	2	
to figure the	2. Effet the barchase blice (actors taxes) of the new motor vehicle(s)		
amount to	3 Is the amount on line 2 more than \$49,500?		
enter on line 7.	No. Enter the amount from line 1.		
	Yes. Figure the portion of the tax from line 1		
(Кеер а сору			3
for your	of the purchase price of each new motor		
records.)	vehicle and enter it here (see page A-6).		
1000143.1	, sinoto and sinot in the Larry (s. 1.)		
	4 Enter the amount from Form 1040, line 38	4	
	5 Enter the total of any -		
	 Amounts from Form 2555, lines 45 and 50; 		
	Form 2555-EZ, line 18; and Form 4563, line 15,	5	
	and		
	• Exclusion of income from Puerto Rico		
	6 Add lines 4 and 5	6	
	7 Enter \$125,000 (\$250,000 if married filing jointly)	7	
	8 is the amount on line 6 more than the amount on line 7?		
	No. Enter the amount from line 3 above on Schedule A,		
	line 7. Do not complete the rest of this worksheet. Yes. Subtract line 7 from line 6	8	
	Li Yes. Subtract line / from line 6		-
	9 Divide the amount on line 8 by \$10,000. Enter the result as a		
	decimal (rounded to at least three places). If the result is 1.000		
	or more, enter 1.000	9	
	10 Multiply line 3 by line 9		10
	11 Deduction for new motor vehicle taxes. Subtract fine 10 from line	3. Enter the result here	
	and on Schedule A, line 7		11
			Schadula A (Form 1040) 2009

SCHEDULE B

(Form 1040A or 1040)

Department of the Treasury Internal Revenue Service Name(a) shown on return

Interest and Ordinary Dividends

➤ Attach to Form 1040A or 1040.

➤ See instructions.

2009 Attachment Swarpings No. 08

SANDER M.	T	EVIN			
Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the		Amount	_
Interest	•	property as a personal residence, see page B-1 and list this interest first. Also, show that			
		buyer's social security number and address			
		CONGRESSIONAL FEDERAL CREDIT UNION		1	26.
		FROM K-1 - LRS COMPANY, L.L.C.			5.
Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the			1		
payer and enter the total interest shown on that form.					
	2	Add the amounts on line 1	2	1	31.
	3	Excludable interest on series EE and LU.S. savings bonds issued after 1989.			
		Attach Form 8815	3		
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a	> 4	1	31.
	No	te. If line 4 is over \$1,500, you must complete Part III.		Amount	<u>t</u>
Part II Ordinary Dividends	5	List name of payer			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the			5		
payer and enter the ordinary dividends shown on that form.					
	6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a	> 6		
	Mahhom	Act the amounts directed. Enter the sources and directed your part ill.	·		
Part III		и must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) i	nad a fore	ign	T
Foreign Accounts		count; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	Lin a forcio	in in	No
and	1	 country, such as a bank account, securities account, or other treations account? See page 8-2 for exception 	s and file g	Microsoft Control of C	X
Trusts		requirements for Form TD F 90-22.1 b If Yes," enter the name of the foreign country >			1
		D. C.	areign tri s	st7	
997881	8	Eurning 2009, 3rd you receive a distribution from or were you the grantor or, or mansteror to, a fit "York" you may base to fite Form 3520. See page 8.2	morgin mai		X

SCHEDULE D (Form 1040)

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.

2009 Arischment Sustance No. 12

Schedule D (Form 1040) 2009

Department of the Freasury Internal Revenue Service (95 Number) shown on retain

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	(a) Description of property	(b) Date accorded	(C) Date sold (Mol, day, yr.)	(d) Salas price	(e) Cost or cifier basis	(f) Gain or (joso) Subtract (a) from (d)
	(Example: 100 sh, XYZ Co.)	(Maliday, yel)	(Mo , day, yr.)			
			~			
	Enter your short-term totals, if any, from Sch	nedule D-1, line 2	2			
	Total short-term sales price amounts.					*
		ave vain or (long)	3	<u> </u>		
	Short-term gain from Form 6252 and short-t from Forms 4684, 6781, and 8824	enti gain or nossi			4	
	Net short-term gain or (loss) from partnershi	ps, S corporations, o	states, and trusts			
					5	
	Short-term capital loss carryover. Enter the				6	,
	Carryover Worksheet in the instructions	F	1 1010 90 00 100 1	0000000 12 12 11 12		1
					1	
	Mot chart term capital gain or floss) Com	thine loss t through	6 in column (f)		7	
) 2	Net short-term capital gain or (loss). Com rt II Long-Term Capital Gains and	ibine lines 1 through 1 Losses - Asse	6 in column (I) ts Held More Th	an One Year	1 7	
9	Net short-term capital gain or (foss). Com rt II Long-Term Capital Gains and (a) Description of property (Example 190 sh XYZ Co.)	bine lines 1 through Losses - Asse (b) Data acquired iMol, day, yr)	6 in column (I) ts Held More Th (c) Date sold (Mo , day, yr.)	nan One Year	(6) Cost or other basis	(1) Gain er (loss) Subtract (e) from (d)
=	rt II Long-Term Capital Gains and	1 Losses - Asset	ts Held More Its (c) Date sold		(8) Cost or	
-	rt II Long-Term Capital Gains and	1 Losses - Asset	ts Held More Its (c) Date sold		(8) Cost or	
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LHA For Paperwork Reduction Act Notice, see Form 1040 or Form 1040NR instructions.

16 Combine lines 7 and 15 and enter the result If line 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. 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 D8 of the instructions 19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D9 of the Instructions Are lines 18 and 19 both zero or blank? 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 39 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 D-10 of the instructions. Do not complete lines 21 and 22 below. 11 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of		till Summary		tags 2
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 The loss on line 16 or (\$3,000), or if married filing separately, (\$1,500) Note. When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, line 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 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). 				
 (\$3,000), or if married filing separately, (\$1,500) Note. When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, line 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 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). 	21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:		
 (\$3,000), or if married filing separately, (\$1,500) Note. When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, line 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 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). 		SEE STATEMENT 16	21 (3,000.
Do you have qualified dividends on Form 1040, line 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 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR).		The least of line 10 of		
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 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR).		Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
the Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR).	22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		
for Form 1040 (or in the Instructions for 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 Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

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

Your social security number

	NDER M. LEVIN	1 FS		Man Hata Kusu	ora in the business of real	00.00	reneal prapa	cha ne	_
P	Income or Loss From Renta Schedule C or C-EZ (see page E-3). If you						зены ргоре	rty, us	g
	List the type and address of each rental real estate						to d	Yes	No
	MUSKEGON DEVELOPMENT		ity.		ach rental real estate prop le 1, did you or your family			16:	3 140
Α	The second secon				g the tax year for personal			1	
-	MI MASSACHUSETTS SUMMER I	JOME	1	for m	ore than the greater of:		<u> </u>	-	+
В	MASSACHUSETTS SUMMER I	IOM	i4		4 days or		В		Х
	BREITBURN OPERATING L	Ď			0% of the total days rented intal value?	i at fair	-	 	
С	MI				page E-3)		c		
		T		Properties			Total		
Inc	come:	ŀ	A	В	С	(Add columns A, B,			nd C.)
3	Rents received	3		26,100.		3			
_	Royalties received	4	116.		1,608.	4			
	penses:								
	Advertising	5		489.					
	Auto and travel (see page E-4)	6		1,419.					
	Cleaning and maintenance	7		6,986.					
8	Commissions	8							
	Insurance	9		5,392.					
10	Legal and other professional fees	10							
11	Management fees	11							
12	Mortgage interest paid to banks, etc.								
	(see page E-5)	12		13,134.		12			
	Other interest	13					-		
14	Repairs	14		5,404.					
	Supplies	15		612.					
	Taxes	16		5,468.					
	Utilities	17							
18	Other (list)	-	17.						
	SEE STATEMENT 17 SEE STATEMENT 18	-	1/•	113,					
		18		L L J •	183.				
	SEE STATEMENT 19				100.				
		-							
10	Add lines 5 through 18	19	17.	39,017.	183.	19			
	Depreciation expense or depletion (see page E-5)	20		22,027		20			
	Total expenses, Add lines 19 and 20	21	17.	39,017.	183.				
2 2	Income or (loss) from rental real estate								
	or royalty properties. Subtract fine 21								
	from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to								
	find out if you must file Form 6198	22	99.	-12,917.	1,425.				
	Out of the control and and base Control								
23	Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may								
	be limited. See page E-5 to find out if you								
	must file Form 8582. Real estate professionals								
must complete line 43 on page 2 23			<u> </u>	17,592.	1				
	24 Income. Add positive amounts shown on line 22. Do not include any losses					24			
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here					25	f.			
26	Total rental real estate and royalty income or (los								
	If Parts II, IV, and line 40 on page 2 do not apply					20			
	line 17, or Form 1040NR, line 18. Otherwise, inclea	c 111 5 3	PROBLEM RECEIPTED IN B. 4.1	95 1895 Z		26	i		

SCHEDULE E

(Form 1040)

Department of the Treasury Internal Revenue Service

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 Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

Name(s) shown on return

Your social security number

	art I Income or Loss From Renta Schedule C or C-EZ (see page E-3). If you	il Real I	state and Royal	ties Note. If you	are in the business of	renting personal	proper	y, use	_
	List the type and address of each rental real estat				ach rental real estate			Yes	No
	HIGHMOUNT EXPLORATION			on lir	on line 1, did you or your family use it			1.00	1
^	16945 NORTHCHASE DR SU	ITE 1	750, HOUSTO	N durin	g the tax year for pers		Α		
8				101 11	iore than the greater of 4 days or)1 <u>.</u>			
Marine 1					0% of the total days r	ented at fair	В		ļ
С					ntal value? page E-3)				
				Properties	page c-3)		C Totals	<u></u>	_
In	come:		A T	B	С	(Add colu			d C.)
2	Rents received	3				3 1			00.
	Royalties received	4	4,816.			4	·		40.
-	penses:	<u> </u>						,	
	Advertising	5							
	Auto and travel (see page E-4)	6							
7	Cleaning and maintenance	7							
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11							
12	Mortgage interest paid to banks, etc.						1	7 1	2.4
	(see page E-5)	12				12	1	3,1	34.
	Other interest	13			-				
	Repairs	14							
	Supplies	15							
	Faxes	16							
	Utilities Other Clean	 '' -							
10	Other (list) > SEE STATEMENT 20	ļ <u> </u>	521.						
	OHE DIVILLE 20								
		18							
				,					
19	Add lines 5 through 18	19	521.			19	3	9,7	738.
	Depreciation expense or depletion (see page E-5)	20				20			
21	Total expenses, Add lines 19 and 20	21	521.						
20	income or (loss) from rental real estate								
4.	or royalty properties. Subtract line 21								
	from line 3 (rents) or line 4 (royalties).								
	if the result is a (loss), see page E-5 to		4 225						
	find out if you must file Form 6198	22	4,295.						
23	Deductible rental real estate loss. Caution.					and the same of th			
	Your rental real estate loss on line 22 may				į	1000			
	he limited. See page E-5 to find out if you				V				
	must file Form 8582. Real estate professionals must complete line 43 on page 2	23	,						
9.4	Income. Add positive amounts shown on line 22.		ide any losses		<u></u>	24		5.8	319.
	Losses. Add royalty losses from line 22 and centar			r total losses here		25 (1	7,5	92.
	Total rental real estate and royalty income or (to								****
۷۵	f Parts II, III, IV, and line 40 on page 2 do not appl	y to you, at	se enter this amount on F	orm 1040,					
	line 17, or Form 1040MR line 18. Otherwise include					26	- 1	1.7	773.

Second 5 (Form 1949) 2029 Manu (S) shown on return the act safet share and social secondy mother of shown on page 1

Apachusers Sequence No. 13 Flage 2

Your social security number

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J.	α	w	√ الانتد	1.7 +	لنة	١ نند	/ 4	ŦΑ

		shown on Schedule(s) K-1.

SAI	NDER M. LEVIN					5 11					
	on. The IRS compares amounts reperted on you	r tax return with am	ounts sh	own on Schedule(s) l	(-1.				•		
Pa	rt II Income or Loss From Part	•							at-risk	activity fo	r which
	any amount is not at risk, you mus										·····
27	Are you reporting any loss not allowed in a prio						wed loss fro	ım a		[TE]	r
	passive activity (if that loss was not reported or			ed partnership expen	ses?		or in a			X Yes	No
	If you answered Yes," see page E-7 before con	pleting this section.			1765	P	(C) Chack		() E me	nuar	Int Chart if
28	(a)	Name			537	B merenan	if foreign		i) Empl lication	number	(e) Check if any amount is not at risk
	, .			.,	9/3	09.00.3167	parmeramp			_	X
A					-			4		-	X
В				y a propried to the second second of district to the second		The same of the same of the same of					X
C		יידדים ד.ד.יי	4		+-			-		-	
D		(a) Name (b) State Post (c) Check (d) State Post (c) Check (d) State Post (d) Post	come an	dLos	S	1					
		-	ame	(h) Monnassive lo	22				**********	i) Nonpassiv	ie incoma
										from Sche	
						+					
A B		-			*******	 					
C						+				***************************************	
D	1.03	18	035.			+					
29a	Totals					+					
zəa b											
30									30	1	8,035.
31									31	(109.1
32		r (loss). Compine li	nes 30 a	nd 31. Enter the							· · · · · · · · · · · · · · · · · · ·
					,		in car		32	1	7,926.
Pa			S	<u> </u>						·	
							.,		T	(b) En	nployer
33		(a) Nan	16								on number
Α		****									
В											
	Passive Inco	me and Loss					Nonpa	assive In	come	and Loss	;
									(f) Other inc	
	(attach Form 8582 if required)		from S	Schedule K-1		from :	Schedule K	-1		Schedul	e K-1
Α											
В											
34a	iotais										
b	Totals										.,
35	Add columns (d) and (f) of line 34a								35		
36	And columns (c) and (e) of line 34b								36	(1
37	Total estate and trust income or (loss). Comb	ine lines 35 and 36.	Enter th	e result here and inch	ude ir	the tot	al on line 41	below	37		
Pa	rt IV Income or Loss From Real								dual		
38	(a) Mame					(0) (1) (0) (1) (0) (1)	from Sche	ne (et iules Q,		e) Incom Schedules	
		Denniques: No		Outcome and the second			line 15				a , into 00
.,		n t			H W / W HH / W						
39	Combine columns (d) and (e) only. Enter the re	esuit here and includ	le in the	otar on the 41 below				iv a ir	39	l	
	rt V Summary	00 11-							40	r	a
40	Net form rental income or (loss) from Form 48							54	40		6,153.
41	Total income or (loss). Comong irea 26, 32, 37,				. 0 10	orm (Usiji	NR (6) 15	>	41		v,LJJ.
42	Reconciliation of farming and fishing income										
	reported on Form 4835, line 7; Schedule K-1 (i				40	1					
	(Form 11295), box 17, code U; and Schedule E			i	42	_L					
43	Reconcilitation for real estate professionals.										
	enter the net laceme or floss) you reported anywhere as			n all relation real estate	43	1					
	Bandles es which you markalis, ketting sted order me	THE WAY DAY A. 18	M3		40	.4			Sch	edule F /Fo	rm 1040) 2009
									Ovil		

Statement of Rental and Royalty Income

	e(s) as shown on return				Your	social security number
Kind	DER M. LEVIN MASSACHUSETTS SUMMER HOMI	<u> </u>		TOTAL DAYS	SONAL 14 RE USED DURIN : 59/73 =	IG YEAR 73
0	tal and Royalty Income		GROSS	PERSONAL/DUAL OWNERSHIP EXCLUSION	VACATION HOME LOSS LIMITATION	NET TO SCH E
	Rents received	T 3	26,100.			26,100.
	Royalties received	4	270720			
	tal and Royalty Expenses	1				
	Advertising	5	489.			489
	•	6	1,756.	337.		1,419
	Auto and travel Cleaning and maintenance	7	8,644.	1,658.		6,986
	Commissions	8		<u> </u>		······································
		9	6,672.	1,280.		5,392
	Insurance Legal and other professional fees	10	.,			
	Management fees	111				
	Mortgage Interest paid to banks, etc.	12	16,250.	3,116.		13,134
	Other Interest	13				
	Repairs	14	6,687.	1,283.		5,404
	Supplies	15	757.			612
	Taxes	16	6,765.	1,297.		5,468
	Utilities	17				
	Other (list) INTERNET	18	140.	27.		113
20. 21.	Add lines 5 through 18 Depreciation expense or depetion Total expenses, Add lines 19 and 20 Income or (lose) from rental or royally properties.	19 20 21	48,160.	9,143.		39,017 39,017
	Subtract line 21 from line 3 (rents) or line 4 (royallies)	22	-22,060.			-12,917

6198 om

(Rev. November 2009) Department of the Trassury Internal Revenue Service **At-Risk Limitations**

Attach to your tax return.

➤ See separate instructions.

CM3 No. 1515-0112

Attachment Sequence No. 31

Identifying number

CAN	NDER M. LEVIN	1	
	ston of actually (see page 2 of the inative foots)		
	COMPANY, L.L.C.		
Par		of the	instructions.
1	Ordinary income (loss) from the activity (see page 2 of the instructions)	Ti	-1,929.
2	Gain (loss) from the sale or other disposition of assets used in the activity (or of your interest in the activity)	ļ	
2			
	that you are reporting on: Schedule D	2a	
d h	Form 4797	26	
U	Other form or schedule	2c	
2	Other income and gains from the activity, from Schedule K-1 of Form 1965, Form 1965-B, or Form 1120S,		
3	that were not included on lines 1 through 2c	3	5.
4	Other deductions and losses from the activity, including investment interest expense allowed from		
4	Form 4952, that were not included on lines 1 through 2c	4	1
5	Current year profit (loss) from the activity. Combine lines 1 through 4. See page 3 of the instructions before completing	-	<u> </u>
J	the rest of this form	5	-1,924.
Da	rt II Simplified Computation of Amount At Risk. See page 3 of the instructions before completing	g this p	part.
6	Adjusted basis (as defined in section 1011) in the activity (or in your interest in the activity)	Ť	
0	on the first day of the tax year. Do not enter less than zero	6	0.
7	Increases for the tax year (see page 3 of the instructions)	7	
8	Add lines 6 and 7	8	
9	Decreases for the tax year (see page 4 of the instructions)	9	
	Subtract line 9 from line 8		
b	If line 10a is more than zero, enter that amount here and go to line 20 (or complete Part III).	7	
_	Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	10b	
Pa	rt III Detailed Computation of Amount At Risk.		
L	If you completed Part III of Form 6198 for the prior year, see page 4 of the instructions.		
11	Investment in the activity (or in your interest in the activity) at the effective date. Do not enter less	T	
	than zero	11	
12	Increases at effective date	12	
13	Add lines 11 and 12	13	
14	Decreases at effective date	14	
15	Amount at risk (check box that applies):		
a	At effective date. Subtract line 14 from line 13. Do not enter less than zero.		
b	From your prior year Form 6198, line 19b. Do not enter the amount from line 10b of your prior year form.	15	
16	Increases since (check box that applies);		
a	Effective date b The end of your prior year	16	
17	Add lines 15 and 16	17	
18	Decreases since (check nex first applies):		
a	Effective date b fife and of your prior year	18	
19 a	Subtract line 18 from line 17		
b	If line 19a is more than zero, enter that amount here and go to line 20. Otherwise, enter		
	-0- and see Pub. 925 for information on the recapture rules	196	<u> </u>
Pa	rt IV Deductible Loss		ngama mana ana ana ana ana ana ana ana ana
20	Amount at risk. Enter the larger of line 10b or line 19b	20	0.
21	Deductible loss. Enter the smaller of the line 5 loss (treated as a positive number) or line 20. See the instructions		
	to find out how to report any deductible loss and any carryover SEE STATEMENT 22	21	1(0,
	Note: If the loss is from a passive activity, see the Instructions for Form 8582, Passive Activity Loss Limitations, or Corporate Passive Activity Loss and Credit Limitations, to find out if the loss is allowed under the passive a is subject to the passive activity loss rules, report only that part on Form 8532 or Form 8810, whichever app	ctivity r	tructions for Form 8810, rules. If only part of the loss

6251

Alternative Minimum Tax - Individuals

MHE No. 1545-00/4 Attrohiment Sequence No. 32

Department of the Treatury Internal Revenue Service

➤ Attach to Form 1040 or Form 1040NR.

Your social security number Name(s) shown on Form 1040 or Form 1040NR SANDER M. LEVIN Part I Alternative Minimum Taxable Income 1 If filing Schafule Aliform 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 6), and go to line 2. Otherwise, 185,334. 1 enser the amount from Form 1046, line 38 (minus any amount on Form 8914, line 6), and go to line 7. (If leas than zero, enter as a negative amount.) 2 2 Medical and denial, Enter the smaller of Schamina A (Form 1940), line 4, Or 2.5% (,025) of Form 1940, line 39, if zero or less, enter-0-19,935. 3 3 Taxes from Schedule A (Form 1040), lines 5, 6, and 8 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions 4 5,550. 5 5 Miscellaneous deductions from Schedule A (Form 1040), line 27 6 If Form 1040, line 38, is over \$166,800 (over \$83,400 if married filing separately), enter the amount from line 11 -1,388.6 of the Itemized Deductions Worksheet on page A-11 of the instructions for Schedule A (Form 1040) 7 It filing Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 20 from that schedule 7 8 8 Tax refund from Form 1040, line 10 or line 21 9 Investment interest expense (difference between regular tax and AMT) 9 10 10 Depletion (difference between regular tax and AMT) 11 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount 11 12 12 Alternative tax net operating loss deduction 13 Interest from specified private activity bonds exempt from the regular tax 13 14 Qualified small business stock (7% of gain excluded under section 1202) 14 15 Exercise of incentive stock options (excess of AMT income over regular tax income) 15 16 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 16 17 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 17 18 18 Disposition of property (difference between AMT and regular tax gain or loss) 19 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 19 4,851. SEE STATEMENT 23 20 Passive activities (difference between AMT and regular tax income or loss) 20 21 Loss limitations (difference between AMT and regular tax income or loss) 21 22 Circulation costs (difference between regular tax and AMT) 22 23 23 Long-term contracts (difference between AMT and regular tax income) 24 24 Mining costs (difference between regular tax and AMT) 25 25 Research and experimental costs (difference between regular tax and AMT) 26 26 Income from certain installment sales before January 1, 1987 27 27 Intancible drilling costs preference 28 Other adjustments, including income-based related adjustments 28 29 Alternative minimum taxable income. Combine lines 1 through 28. (If married filing separately and line 214,282. 29 is more than \$216,900, see instructions.) 29 Part II Alternative Minimum Tax (AMT) 30 Exemption. (If you were under age 24 at the end of 2009, see instructions.) THEN enter on line 30 AND line 29 is not over IF your filing status is Single or head of household \$112,500 346,700 Married fling to ntly or qualifying widow(er) 150,000 70,950 21,254. STMT 24 30 35,475 75.000 Married filing separately If the 29 is over the amount shown above for your filing status, see instructions. 31 Subtract line 30 from line 29. If more than zero, go to line 32. If zero or less, enter -0- here and on lines 193,028. 31 34 and 36 and skip the rest of Part II 32 • If you are filing Form 2565 or 2555-EZ, see page 9 of the instructions for the amount to enter. If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividences on Form 1640, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured 50,548. 32 for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here. All others: If line 31 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 31 by 26% (.26). Otherwise, multiply line 31 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result. 33 33 Alternative minimum tax foreign tax credit (see instructions) 50,548. 34 Tentative minimum tax. Subtract fine 33 from line 32 34 35 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). 45,500. If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J 5,048.

36 AMT. Subtract line 35 from line 34. If zero or less, enter O. Exter here and on Form 1040, line 45.

36

	n 6251 (2009) SANDER M. LEVIN			Page 2
Pa	rt III Tax Computation Using Maximum Capital Gains Rates			
37	Enter the amount from Form 6251, line 31. If you are filing Form 2555 or 2555-EZ, en	ter the amount from		
	line 3 of the worksheet in the instructions		37	700 11 11 11 11 11 11 11 11 11 11 11 11 1
	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax			
	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,			
		38	200	
	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the			
	AMT, If necessary) (see instructions). If you are filing Form 2555 or 2555-EZ,		848E	
		39		
10	If you did not complete a Schedule D Tax Worksheet for the regular tax or the			
	AMT, enter the amount from line 38. Otherwise, add lines 38 and 39, and enter		1216	
	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			
		40	-	
	Circulation of the second of t		41	
	Enter the smaller of line 37 or line 40		42	
42	Subtract line 41 from line 37. If line 42 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line	42 by 2694 / 261	124	
43				
	Otherwise, multiply line 42 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing		43	
	the result		10	
44	Enter:			
	\$67,900 if married filing jointly or qualifying widow(er),	44		
	\$33,950 if single or married filing separately, or			
	• \$45,500 if head of household.			
45	Enter the amount from line 7 of the Qualified Dividends and Capital Gain			
	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	46		
	you did not complete either worksheet for the regular tax, enter-0-	45	189	
		10		
46	Subtract line 45 from line 44. If zero or less, enter 0-	46	1:18	
		47		
47	Enter the smaller of line 37 or line 38	41		
-		48		
48	Enter the smaller of line 46 or line 47	40		
-		49		
49	Subtract line 48 from line 47	40		
	14 10 1 10 - 10 1 150/ (15)		50	
50	Multiply line 49 by 15% (.15)		-	
	If line 39 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go t	o line 51,		
e 4	Dubband to A7 from the A1	51		
21	Subtract line 47 from line 41	<u> </u>		
	Marking Rev E4 hor 25% (25)	>	52	
52	Multiply line 51 by 25% (25)	and the contraction of the contr		
60	Asid Soon 49, EO, and EQ		53	
04	Add lines 43, 50, and 52			
E 4	If tine 37 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line	37 by 26% (26)		
04	Otherwise, multiply line 37 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing			
	the result		54	
	U)5 (COURT COURT C			
==	Enter the smaller of line 53 or line 54 here and on line 32. If you are filling Form 2555	or 2555-EZ, do not enter		
JO	this amount on line 32, Instead, enter it on line 4 of the worksheet in the instructions		55	
1000	and different all thing out in ordering of the it of the Total of Total of the Indiana of the In			0011

		ALTERNAT	IVE MINIMUM TAX RE	ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT	37		
Name(s)					en e		Social Security Number
SANDER	IR M. LEVIN						
Form					Adjustment		
Name	Description	Income	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251, Line 21	Form 6251 Other Adjustment
Ä	LRS COMPANY, L.L.C. * REGULAR INCOME PAL CARRYOVER * AMT NET INCOME				104. 104.		
1 77 84	LEVINSON-LEVIN PROPERT IES, LLC * REGULAR INCOME AMT ADJUSTMENTS * AMT NET INCOME	18,035. 18,107.			72.		
ю	MASSACHUSETTS SUMMER H OME - MA * REGULAR INCOME PAL CARRYOVER * AMT NET INCOME	-17,592. 4,675. -12,917.			4,675.		
	** TOTAL ADJ & PREF **				4,851.		

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.

See separate instructions.

OMB No. 1545-1971

Cep atment of the Treasury Internal Revenue Service (99) Name of employer

Social security number Employer identification number

SA	NDER M.	LEVIN		
A	Did you pay under age 2°	any one household employee cash wages of \$1,700 or more in 2009? (If any household employee w I, your parent, or anyone under age 18, see the line A instructions on page H-4 before you answer thi	as you s ques	r spouse, your child tion.)
	X Yes.	Skip lines B and C and go to line 1. Go to line B.		
В	Dia you with	hold federal income tax during 2009 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 2008 or 2009 to all household emplo nt cash wages paid in 2008 or 2009 to your spouse, your child under age 21, or your parent.)	yees?	
	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 employed do not have to complete this form for 2009.)	s in 20	009
P	art I Soci	al Security, Medicare, and Federal Income Taxes		and the state of t
1	Total cash wa	ges subject to social security taxes (see page H-4) [1] 2,241.		
2	Social security	v taxes. Multiply line 1 by 12.4% (.124)	2	278.
3	Total cash wa	ges subject to Medicare taxes (see page H-4) 3 2,241.		
4	Medicare taxo	es. Multiply line 3 by 2.9% (-029)	4	65.
5	Federal incom	e tax withheld, if any	5	
6	Total social s	ecurity, Medicare, and federal income taxes. Add lines 2, 4, and 5	6	343.
7	Advance ear	ed income credit (EIC) payments. If any	7	
8	Net taxes (su	btract line 7 from line 6)	8	343.
9	Did you pay t (Do not coun	otal cash wages of \$1,000 or more in any calendar quarter of 2008 or 2009 to all household employed cash wages paid in 2008 or 2009 to your spouse, your child under age 21, or your parent.)	es?	
	No.	Stop. Include the amount from line 8 above on Form 1040, line 59, and check box b on that line, if you 1040, see the line 9 instructions on page H-4.	ou are :	not required to file Form
	X 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) 2009

	ederal Unemployr		ìХ					_		
L									C	Yes No
10 Did you pay	unemployment contrit	butions to only one	state? (If	you paid o	ontributions	s to Michigan, c	heck "No.")	-	10	1.
11 Did you pay	all state unemploymer	nt contributions for	2009 by /	April 15, 20	107 Fiscal	year filers, see p			11	-
12 Were all wa	iges that are taxable for	r FUTA tax also tax	able for yo	our state's	unemploym	ient tax?	40.00 ()0.00 ()		12	1 ^ 1
Next: If you ch	ecked the "Yes" box or	n all the lines above	a, comple	te Section	A.	ta Castian D				
If you ch	ecked the "No" box on	any of the lines ab				te Section B.				***************************************
				Section	<u> </u>	MD			T	
	e state where you paid					MID				
14 State repor	ting number as shown	on state unemploy	ment tax	return		0% RAT	F			
	e di el el		¥	. 1 C #1	}	15	. 1.1			
	ns paid to your state u			e n-o)		13		16		2,241.
16 Total cash	wages subject to FUTA	tax (see page H-b)					(I-)-0(PE0009)		<u> </u>	
			ا مونان سان شا	Santina D	and on to lir	26		17		18.
17 FUTA tax.	Multiply line 16 by .008	s. Enter the result no	are, skip c	Section	R	18 20			L	
19 Complete	all columns below that a	apply (if you need n							annual production of the control of	
(a)	(b)	(c)		d)	(e)	(f)	(g)	T	(h)	(i)
Name (State reporting number as shown on state	Taxable wages (as	State expe	rionee rate	State explance	Multiply col. (c) by .654	Multiply cal. (c by cal. (e)) [1	Euptract col. (g) from col. (f).	Contributions paid to state
el state	unemployment tax	defined in state act)	From	To	1319	07.051	by 551. (c)		if zero or less, enter -0-	unemp öyment rund
	193011									
						·				ı
			,							
									1.7 (20.40)	
										
19 Totals					ent Santonio e	This would be a section		19		
	uns (h) and (i) of line 19					20				
	wages subject to FUTA	A tax (see the line 1	6 instruct	ions on pa	ge H-5)			21		
								22		
	e 21 by 5.4% (.054)					23				
	maller of line 20 or line									
(Michigan	employers must use the	e worksheet in the	separate i	instructions	s and check	(here)		24	ļ	
25 FUTA tax.	Subtract line 24 from li	ine 22. Enter the re	sult here a	and go to li	ne 26			25		
	otal Household E									
26 Enter the	imount from line 8. If yo	ou checked the "Ye	s" box on	line C of c	age 1, ente	r -0-		26	<u> </u>	343.
27 Add line 1	7 (or line 25) and line 26	6 (see page H-5)						27		361.
	quirea to file Form 1040									
X Yes.	Stop. Include the amou	int from line 27 abo	ve on For	m 1040, lir	ie 59, and c	heck box b on t	that line. Do no	t com	iplete	
	Part IV below.			1 -1 - 2						
No.	You may have to comp Address and Signa	lete Part IV. See pa	ge H-5 10	r details.	to and Consultation	a line 20 hotas	tions on page	Lis		
Part IV A	Address and Signal and Signal and Signal is	not different la street ad	inis pari c	only it requ	ired, see ui	e inte zo manac	nons on page	Adr.	room, or state no	
A CHAS (PRODES A	nd all says at 10. 150 a trade of									
Markett Karle	अंदर्भ, धर्मण, बार्च गीर्ड code	along the law company and a plant of the company of						L		wa na managama
A STANCE OF STANCE										
United participant of	pergary, I declare that I have ex-	aminad this schedule, inc	uding accor	apacying state	ments, and to s	he cast of my knowle	idge and belief, it s	rua, co	rrest, and comple	ata No part of my
payment made to a which prepare has	rathse unemployment fund clas-	medias a codit was or o	to be, decur	oted from the p	say nents to em	plovees Declarition	of proparer (other th	an taxp	ay si) is based or	all intermitted of
wiston fraction area	hiy Minimaraga.									
Finebour's	(27.7.1/2.2.1.)		the growth of the state of the	and the second of the second o		Dina				
* Tarakanaka N S	Oronavaria			<u> </u>	Date	I	Check if		Preparer's	SSN or PTIN
Paid	Preparer's				1		self-employed			
Preparer's	Firm's name (cr	and the second of the second o			L			EI	N	
Use Only	yours if self-employed	4) 🛕					and the second second second second		none no.	**************************************
	address, and ZIP cor	9								
	constitutionally obtains in COL	***								

8801

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

➤ See separate instructions.

Attach to Form 1040, 1040NR, or 1041.

2009
Attachment Sequence No. 74

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

Identifying number

Part I Net Minimum Tax on Exclusion Items	1	
1 Combine lines 1, 6, 7, and 11 of your 2008 Form 6251. Estates and trusts, see instructions	1	169,089.
Enter adjustments and preferences treated as exclusion items (see instructions)	2	38,365.
3 Minimum tax credit net operating loss deduction (see instructions)	3 (
4 Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more than \$214,900 and you were married filling separately for 2008, see instructions	4	207,454.
5 Enter: \$69,950 if married filing jointly or qualifying widow(er) for 2008; \$46,200 if single or head of household for 2008; or \$34,975 if married filing separately for 2008. Estates and trusts, enter \$22,500	5	69,950.
6 Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2008; \$112,500 if single or head of household for 2008; or \$75,000 if married filing separately for 2008. Estates and trusts, enter \$75,000	6	150,000.
7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7	57,454.
8 Multiply line 7 by 25% (.25)	8	14,364.
9 Subtract line 8 from line 5. If zero or less, enter -0 If under age 24 at the end of 2008, see instructions	9	55,586.
10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 1040NR filers, see instructions	10	151,868.
• If for 2008 you filed Form 2555 or 2555-EZ, see page 2 of the instructions for the amount to enter. • If for 2008 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 Schedule D (Form 1040) (lines 14a and 15, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 49 here. Form 1040NR filers, see instructions.	11	39,400.
• All others: If line 10 is \$175,000 or less (\$87,500 or less if married filing separately for 2008), multiply line 10 by 26% (.26), Otherwise, multiply line 10 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2008) from the result. Form 1040NR filers, see instructions.		
12 Minimum tax foreign tax credit on exclusion items (see instructions)	12	and the law of the law
13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13	39,400.
14 Enter the amount from your 2008 Form 6251, line 35, or 2008 Form 1041, Schedule I, line 55	14	34,370.
15 Net minimum tax on exclusion items. Subtract line 14 from line 13 if zero entess, enter 0	15	5,030. Form 8801 (2009)

	m 8801 (2009) SANDER M. LEVIN		Page 2
P	art II Current Year Nonrefundable and Refundable Credits and Carryforward to 2010		
16	Enter the amount from your 2008 Form 6251, line 36, or 2008 Form 1041, Schedule I, line 56	16	5,325.
17	Enter the amount from line 15	17	5,030.
18	Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	295.
19	2008 credit carryforward. Enter the amount from your 2008 Form 8801, line 31	19	4,143.
20	Enter your 2008 unallowed qualified electric vehicle credit (see instructions)	20	
21	Combine lines 18 through 20. If zero or less, enter 0	21	4,438.
22	Enter 50% (.50) of the total interest and penalties you paid before October 3, 2008, on alternative minimum tax attributable to the exercise of incentive stock options for 2007 or any prior year	22	
23	Add lines 21 and 22. If zero, stop here and see instructions	23	4,438.
24	Enter your 2009 regular income tax liability minus allowable credits (see instructions)	24	45,500.
25	Enter the amount from your 2009 Form 6251, line 34, or 2009 Form 1041, Schedule I, line 54	25	50,548.
26	Subtract line 25 from line 24. If zero or less, enter 0-	26	0.
27	Current year nonrefundable credit. Enter the smaller of line 23 or line 26. Also enter this amount on your 2009 Form 1040, line 53 (check box b); Form 1040NR, line 49 (check box b); or Form 1041, Schedule G, line 2d	27	0.
28	• Estates and trusts: Leave lines 28 and 29 blank and go to line 30.		
	• Individuals: Did you have a minimum tax credit carryforward to 2007 (on your 2006 Form 8801, line 26) or pay any interest or penalties before October 3, 2008, on alternative minimum tax attributable to the exercise of incentive stock options for 2007 or any prior year?		
	No. Leave lines 28 and 29 blank and go to line 30.		
	Yes. Complete Part IV of Form 8801 to figure the amount to enter	28	
29	Is line 28 more than line 27?		
	No. Leave line 29 blank and go to line 30.		
	Yes. Subtract line 27 from line 28. This is your current year refundable credit. Enter the result here and on your 2009 Form 1040, fine 70 (check box c), or Form 1040NR, line 64 (check box c)	29	

30 Credit carryforward to 2010. Subtract the larger of line 27 or line 28 from line 23. Keep a record

of this amount because you may use it in future years

4 , 438 . Form **8801** (2009)

30

 The 2008 Qualified Dividences and Capital Gam Tax Worksheet is on page 38 of the 2008 instructions for Form 1040. The 2008 Schedule D Tax Worksheet is on page D-10 of the 2008 Instructions for Schedule D (Form 1040) (page 8 of the 2008 Instructions for Schedule D (Form 1041)).

not enter this amount on line 11, Instead, enter it on line 4 of the worksheet on page 2 of the instructions

39,400.

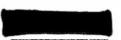
49

Form	8801 (2009) SANDER M. LEVIN		age 4
Pa	rt IV Tentative Refundable Credit		
50	Enter the amount from line 21	50	
51	Enter the total of lines 18 and 20 from your 2007 Form 8801. If zero or less, enter 0- 51		
52	Enter the total of lines 18 and 20 from your 2008 Form 8801. If zero or less, enter 0- 52		
53	Enter the total of lines 18 and 20 from your 2009 Form 8801. If zero or less, enter 0		
54	Add lines 51 through 53	54	
5 5	Long-term unused minimum tax credit. Subtract line 54 from line 50 iff zero or less, enter -0- here and on line 59 and go to line 60)	55	
56	Multiply line 55 by 50% (.50)	56	
57	Enter the amount from your 2008 Form 8801, line 61	57	
58	Enter the larger of line 56 or line 57	58	<u></u>
59	Enter the smaller of line 55 or line 58	59	
60	Enter the amount from line 22	60	
61	Add lines 59 and 60. Enter the result here and on line 28	61	

Form 8801 (2009)

SANDER M. LEVIN

FORM 1040	PENSIONS AND ANNUITIES		STATEMENT	
OFFICE OF PERSONNEL MANA	GEMENT			
AMOUNT RECEIVED THIS YE NONTAXABLE AMOUNT CAPITAL GAIN DISTRIBUTI		21,024.		
			21,02	24
THRIFT SAVINGS PLAN				
AMOUNT RECEIVED THIS YE NONTAXABLE AMOUNT (ROLL CAPITAL GAIN DISTRIBUTI	OVER)	81,655. 81,655.		
				0
TOTAL INCLUDED IN FORM	1040, LINE 16B	-	21,02	24



SOCIAL SECURITY BENEFITS WORKSHEET STATEMENT FORM 1040 CHECK ONLY ONE BOX: X A. SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER) B. MARRIED FILING JOINTLY C. MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE AT ANY TIME DURING 2009 D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE FOR ALL OF 2009 1. ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON 29,791. IF YOU CHECKED BOX B: TAXPAYER AMOUNT . . SPOUSE AMOUNT . . . 14,896. INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099 280,235. 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 295,131. 6. ADD THE AMOUNTS ON FORM 1040, LINES 23 THROUGH LINE 32, AND ANY WRITE-IN ADJUSTMENTS YOU ENTERED ON THE DOTTED 0. 295,131. 7. SUBTRACT LINE 6 FROM LINE 5 \$25,000 IF YOU CHECKED BOX A OR D, OR \$32,000 IF YOU CHECKED BOX B, OR \$-0- IF YOU CHECKED BOX C. 25,000. 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 2009, BE SURE YOU ENTERED 'D' TO THE RIGHT OF THE WORD "BENEFITS" ON LINE 20A. 270,131. 10. ENTER \$9,000 IF YOU CHECKED BOX A OR D, \$12,000 IF YOU CHECKED BOX B 4,500. 4,500. 221,961. 15. MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-226,461. 17. MULTIPLY LINE 1 BY 85% (.85) 18. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17 25,322.

* ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B

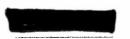
SANDER M. LEVIN

FORM 1040 STATE AND L	OCAL INCOME TAX	REFUNDS	STATEMENT	3
	2008	2007	2006	
	MARYLAND			
GROSS STATE/LOCAL INC TAX REFUNDS LESS: TAX PAID IN FOLLOWING YEAR	1,264.			
NET TAX REFUNDS MARYLAND	1,264.			
	MICHIGAN			
GROSS STATE/LOCAL INC TAX REFUNDS	1,464.			
LESS: TAX PAID IN FOLLOWING YEAR	148.			
NET TAX REFUNDS MICHIGAN	1,316.			
TOTAL NET TAX REFUNDS	2,580.			

The state of the s PERSONAL EXEMPTION WORKSHEET STATEMENT FORM 1040 IS THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR FILING STATUS? STOP. MULTIPLY \$3,650 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42. YES. CONTINUE MULTIPLY \$3,650 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED 3,650. ENTER THE AMOUNT FROM FORM 1040, LINE 38 . . 305,557. Α. 4. ENTER THE AMOUNT FOR YOUR FILING STATUS . . 166,800. \$166,800 MARRIED FILING JOINTLY OR WIDOW(ER) \$250,200 \$125,100 MARRIED FILING SEPARATELY \$208,500 HEAD OF HOUSEHOLD 138,757. 5. SUBTRACT LINE 4 FROM LINE 3 IS LINE 5 MORE THAN \$122,500 (\$61,250 IF MARRIED FILING SEPARATELY)? [X] YES. MULTIPLY \$2,433 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. DIVIDE LINE 5 BY \$2,500 (\$1,250 [] NO. IF MARRIED FILING SEPARATELY). IF THE RESULT IS NOT A WHOLE NUMBER, INCREASE IT TO THE NEXT WHOLE NUMBER (FOR EXAMPLE, INCREASE 2,433. 7. MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT

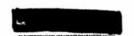
10. SUBTRACT LINE 9 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.

.....



FORM	1040	TAXABLE STATE AND	LOCAL INCOME	TAX REFUNDS	STATEMENT	5
			2008	2007	2006	
		S FROM STATE AND TAX REFUNDS STMT.	2,580.			
LESS		O BENEFIT DUE TO AMT AX BENEFIT REDUCTION	2,580.			
1	NET REFUND	S FOR RECALCULATION				
2 3 4	BEFORE PHODEDUCTION	IZED DEDUCTIONS ASSOUT NOT SUBJ TO PHASEOUT OS FROM LINE 1	85,030. 27,549.			
5 6 7 8	MULT LN 5 PRIOR YEAR	US LINES 3 AND 4 BY APPL SEC. 68 PCT R AGI PHASEOUT THRESHOLD	57,481. 15,328. 254,119. 159,950.			
9	(IF ZERO C	LINE 8 FROM LINE 7 OR LESS, SKIP LINES H 15, AND ENTER OM LINE 1 ON LINE 16)	94,169.			
10 11	MULT LN 9 ALLOWABLE (LINE 5 LE LINE 6 OF	BY APPL SEC. 68 PCT ITEMIZED DEDUCTIONS ESS THE LESSER OF R LINE 10)	942. 56,539.			
12		NOT SUBJ TO PHASEOUT	27,549.			
	PRIOR YR.	ITEMIZED DEDUCTIONS STD. DED. AVAILABLE ALLOWABLE ITEM. DED.	84,088. 14,000. 84,088.			
15 16		THE GREATER OF LINE INE 13B FROM LINE 14				
17 18	(LESSER OF	F LINE 15 OR LINE 1) PRIOR YR. ITEM. DED. R STD. DED. AVAILABLE	84,088. 14,000.			
19 20		LINE 18 FROM LINE 17 LINE 16 OR LINE 19	70,088.	The second secon	er (ing.)	
21		R TAXABLE INCOME	163,311.			
22	* IF LINE	INCLUDE ON FORM 1040, 21 IS -0- OR MORE, US 21 IS A NEGATIVE AMOUNT	E AMOUNT FROM	LINE 20 20 AND 21		0
	STATE AND	LOCAL INCOME TAX REFU	NDS PRIOR TO 2	2006	Comment of the Commen	
	TOTAL TO	FORM 1040, LINE 10				0.

FORM 1040	IRA	DISTRIBUTI	ONS				STATE	EMENT	6
NAME OF PAYER			Ι	GR DISTR	ROSS RIBUT	TION	TAXABI	LE AMO	UNT
MERRILL LYNCH MERRILL LYNCH						000.		75,0 18,3	
TOTAL TO FORM 1040, LINE	15				93,	306.		93,3	06.
FORM 1040 REFUNDS ATT	RIBUTABLE	TO EST. TAX	C PAID	FOLI	1IWOL	IG YR	STATI	EMENT	7
		2008	STATE	REFU	J N D		UNT SUI TAXABI		
STATE TAX PAID IN FOLLOW	MICHI VEAR	GAN 940.		1,4	164.	-		148	•
TOTAL STATE TAX PAID 200	8	9,283.				incommunic controlled			
TOTAL STATE TAX PAID 200 FORM 1040			ŒS WIT	гннег			STATI	EMENT	8
		9,283.	STAT	re X	.D CIJ	TY DI	STATI FICA TAX	EMENT MEDIC	ARE
FORM 1040 W	NAGES RECEI	9,283. IVED AND TAX FEDERAL TAX	STAN TAX WITHI	re X	.D CIJ	TY DI	FICA	MEDIC TA	ARE X
T S EMPLOYER'S NAME T HOUSE OF REP - MEMBER	AMOUNT	9,283. EVED AND TAX FEDERAL TAX WITHHELD 30,330.	STAN TAN WITHE	re x HELD	.D CIJ	TY DI	FICA TAX	MEDIO	ARE
FORM 1040 W T S EMPLOYER'S NAME T HOUSE OF REP - MEMBER SERVICES	AMOUNT PAID 162,621.	9,283. EVED AND TAX FEDERAL TAX WITHHELD 30,330.	STAN TAX WITHE 5,5	FE X HELD 523.	.D CIJ	TY DI	FICA TAX 6,622	MEDIO	ARE
T S EMPLOYER'S NAME T HOUSE OF REP - MEMBER SERVICES TOTALS	AMOUNT PAID 162,621.	9,283. IVED AND TAX FEDERAL TAX WITHHELD 30,330. 30,330.	STAN TAX WITHE 5,5	FE X HELD 523.	.D CIJ	TY DI	FICA TAX 6,622 6,622 STATI	MEDIC TF	84.
FORM 1040 W T S EMPLOYER'S NAME T HOUSE OF REP - MEMBER SERVICES TOTALS FORM 1040	AMOUNT PAID 162,621. 162,621. FEDERAL	9,283. IVED AND TAX FEDERAL TAX WITHHELD 30,330. 30,330.	STAN TAX WITHE 5,5	FE X HELD 523.	.D CIJ	TY DI	FICA TAX 6,622 6,622 STATI	MEDIO TA . 2,4 . 2,4 EMENT MOUNT	84.



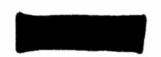
SCHEDULE A	STATE AND LO	CAL INCOME TA	XES	STATEMENT	10
DESCRIPTION				AMOUNT	
HOUSE OF REP - MEMBE	R SERVICES			5,5	23.
MICHIGAN 2ND QTR EST	IMATE PAYMENTS				76.
MICHIGAN 3RD QTR EST		· PD		1,4	70.
MICHIGAN PRIOR YEAR MICHIGAN PRIOR YEAR					40.
REDUCTION OF STATE T.					48.
FOTAL TO SCHEDULE A,	LINE 5			8,6	25.
SCHEDULE A	CASH CO	ONTRIBUTIONS		STATEMENT	11
DESCRIPTION			AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	
	Toward (ACT) 19				
SUBTOTALS			79,300.		·····
TOTAL TO SCHEDULE A,	LINE 16			79,3	00.
			OD OUTON	OM A GUNATANIO	1 0
SCHEDULE A	CONTRIBUTIONS OTE	HER THAN CASH	OR CHECK	STATEMENT	12
DESCRIPTION	AMOUNT		AMOUNT 30% LIMIT	AMOUNT 20% LIMI	
NCC		480.			
SUBTOTALS		480.	, ja tiesaka		

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SCHEDULE A MEDICAL AND DEN	TAL EXPENSES STATEMENT 13
DESCRIPTION	AMOUNT
MEDICARE PREMIUMS WITHHELD	3,006.
TOTAL TO SCHEDULE A, LINE 1	3,006.

SCHE	EDULE A ITEMIZED DEDUCTIONS	WORKSHEET	STATEMENT	14
1.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHOOL 19, 15, 19, 20, 27, AND 28		. 121,6	11.
3.	14, AND 20, PLUS ANY GAMBLING AND CASUAL LOSSES INCLUDED ON LINE 28	LTY OR THEFT		0.
4. 5. 6.	ENTER: \$166,800 (\$83,400 IF MARRIED FIL SEPARATELY)	97,289 8 305,557 ING 166,800	•	11.
8. 9. 10.	ON LINE 5? IF NO, YOUR DEDUCTION IS NOT LIMITED. THE AMOUNT FROM LINE 1 ABOVE ON SCHEDUL LINE 29. IF YES, SUBTRACT LINE 6 FROM LINE 5 MULTIPLY LINE 7 BY 3% (.03) ENTER THE SMALLER OF LINE 4 OR LINE 8 . DIVIDE LINE 9 BY 1.5	E A,	• • 4,1 • 2,7	
12.	TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LI ENTER THE RESULT HERE AND ON SCHEDULE A	NE 11 FROM LINE 1. , LINE 29	120,2	23.
SCHE	EDULE A REAL ESTATE TA	XES	STATEMENT	15
DESC	CRIPTION		AMOUNT	
MICH MARY	SACHUSETTS SUMMER HOME - MA HIGAN RESIDENCE YLAND RESIDENCE NS DEN		3,4 4,7	197. 186. 134.
ТОТА	AL TO SCHEDULE A, LINE 6		10,9	87.



SCHEDU	JLE D CAPITAL LOSS CARRYOVE	R STATEMENT 16
2. DI X 3. SU 4. EN 5. CO	NTER THE AMOUNT FROM FORM 1040, LINE 41 ID YOU FILE FORM 8914? NO. ENTER -0- YES. ENTER THE AMOUNT FROM YOUR FORM 8914, L UBTRACT LINE 2 FROM LINE 1	INE 6
8. EN LI 9. AL 10. SH	NTER THE LOSS FROM SCHEDULE D, LINE 7, AS A P NTER THE GAIN, IF ANY, FROM SCHEDULE D, INE 15	
12. EN LI 13. SU EN 14. AU 15. LO	NTER THE LOSS FROM SCHEDULE D, LINE 15, AS A NTER THE GAIN, IF ANY, FROM SCHEDULE D, INE 7	3,000. 3,000.
SCHEDU	ULE E OTHER EXPENSES	STATEMENT 1
MUSKE	GON DEVELOPMENT CO - MI	
DESCRI	IPTION	AMOUNT
SEV TA	AX DEDUCTIONS	6.
TOTAL	TO SCHEDULE E, PAGE 1, LINE 18	17.

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REVENUE DEDUCTION

TOTAL TO SCHEDULE E, PAGE 1, LINE 18

SEV TAX

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SCHEDULE E	OTHER	EXPENSES	STATEMENT 18
MASSACHUSETTS SUMMER HOME -	MA		
DESCRIPTION			AMOUNT
INTERNET			113.
TOTAL TO SCHEDULE E, PAGE 1	, LINE 18		113.
SCHEDULE E	OTHER	EXPENSES	STATEMENT 19
BREITBURN OPERATING LP - MI	:		
DESCRIPTION			AMOUNT
TAXES EXPENSES			81. 102.
TOTAL TO SCHEDULE E, PAGE 1	, LINE 18		183.
SCHEDULE E	OTHER	EXPENSES	STATEMENT 20
HIGHMOUNT EXPLORATION & PRO	DUCTION LLC	- 16945 NORTHCHAS	E DR SUITE 1750, HOU
DESCRIPTION			AMOUNT

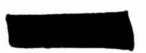
289.

232.

521.



FORM 6198	ALLOCATION	OF INCOME A	ND AMOUNT AT	P-RISK S	STATEMENT 21
LRS COMPANY, L.L.C. DESCRIPTION	INCOME	LOSS	PERCENT OF LOSS	ALLOCATION OF INCOME	ALLOCATION OF AMOUNT AT-RISK
ORDINARY SCHEDULE E C/O INTEREST	5.		.43545878		
TOTALS	5.	1,929.	1.00000000	5.	
FORM 6198	ALLOCA	ATION OF ALL	OWABLE LOSSI	ES S	STATEMENT 22
LRS COMPANY, L.L.C.					
DESCRIPTION	LOSS	ALLOCATION OF INCOME			DISALLOWED LOSS
ORDINARY SCHEDULE E C/O	840. 1,089.	2.	0.0		
TOTALS	1,929.	5.	0 .	. 5.	1,924.
FORM 6251		PASSIVE ACT	IVITIES	S	STATEMENT 23
		N.	ET INCOME (1	LOSS)	
NAME OF ACTIVITY	FORM	AMT	RI	EGULAR	ADJUSTMENT
LRS COMPANY, L.L.C. LEVINSON-LEVIN	SCH E SCH E		-5.	-109.	104.
PROPERTIES, LLC MASSACHUSETTS SUMMER		1	8,107.	18,035.	72.
HOME - MA	SCH E	-1	2,917.	-17,592.	4,675.
TOTAL TO FORM 6251,	LINE 20			1,000,00000	4,851.



FOR	м 6251	EXEMPTION WORKSHEET	STATEMENT	24
1	MARRI	\$46,700 IF SINGLE OR HEAD OF HOUSEHOLD; \$70,950 IF ED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$35,475 RRIED FILING SEPARATELY	46,7	00.
2	ENTER Y	OUR ALTERNATIVE MINIMUM TAXABLE INCOME 5) FORM 6251, LINE 29		
3	ENTER: \$150,	\$112,500 IF SINGLE OR HEAD OF HOUSEHOLD; 000 IF MARRIED FILING JOINTLY OR FYING WIDOW(ER); \$75,000 IF MARRIED		
4		IG SEPARATELY		
*		8 -0		
	SUBTRAC ANY C AGE 2 OTHER	LY LINE 4 BY 25% (.25)	25,4	
	LINE	30, AND GO TO FORM 6251, LINE 31	21,2	454.
8	ENTER Y	M EXEMPTION AMOUNT FOR CERTAIN CHILDREN UNDER AGE 24 YOUR EARNED INCOME, IF ANY		
10		THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, 30, AND GO TO FORM 6251, LINE 31		