<b>1040</b>	EX	TENSION GRANTED TO 10 J.S. Individual Income Tax Retu	/15/082007	7					
E IOTC				<u> </u>	IRS Use Only - Do n	ot write	or stap	ple in this space. OMB No. 1545-00	74
Label		e year Jan. 1-Dec. 31, 2007, or other tax year beginning Ir first name and initial	, 200 Last name	07, ending	, 20				
(See	.		1	3 T N T				social security num	
instructions on page 12 )		IMON joint return, spouse's first name and initial	BERNSTE Last name	2 T TA				71 32 5:	
on page 12.)	:   " " " "	IIRLEY	BERNSTE	2 T NT				47 30 9'	•
lobal	Шо	ne address (number and street). If you have a		7 T.M	Apt. n	10			
Otherwise,	7	)20 LIONS HEAD LANE	.o. box, ace page 12.		1 700	٠.		You must ent your SSN(s) ab	
please print	3	, town or post office, state, and ZIP code. If you have a	foreign address, see nego 12				_		
or type.		CA RATON, FL 33496	ioleigii addiess, see page 12.					cking a box below v ige your tax or refur	
Presidential Election Campa			filing jointly, want \$2 to	go to this fund	(poo pago 12)	<u> </u>	· Cilian	-	Spouse
	1	Single	ming jointly, want 40 to		f household (with	_	<u> </u>		
Filing Status		X Married filing jointly (even if only one had	Lincomo\		i is a child but not :				
	3	Married filling separately. Enter spouse's			nere. 🕨	your ue	hello	ieni, enter tins ci	Jillu S
Check only one box.	J	and full name here.	SON above		ing widow(er) with	denen	dont	child (eee page	14)
one box.	Ro	X Yourself. If someone can claim you as a	denendent de natcheck h					Boxes checked	2
Exemptions		X Spouse						on 6a and 6b No. of children	
		Dependents:	(2) Dependent's social	(3) D	ependent's	(4) √ ij g	uality-	on 6c who:	
		(1) First name Last name	security number	relat	lonship to you	(4)√ıl q ing chil child tax (see pag	credit e 15)	<ul> <li>lived with you</li> <li>did not live with</li> </ul>	th
	-		i i	_	<u>,                                      </u>	(and bag	1107	you due to divord or separation	ce
	-		<del></del>				—	(see page 16)	
If more than four	-		<u> </u>		·····			Dependents on 6	
dependents, see page 15.	-		: :					Add numbers	<b>`</b>
ooo pago 10:	ď	Total number of exemptions claimed	, ,				<del></del>	on lines	12
Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2					_	404,	<u> 199.</u>
	8a	Taxable interest. Attach Schedule B if require				. 8a	$\top$	61,	182.
Attach Form(s) W-2 here. Also	b			ايما	1/ 071		51.2 201.	·	
attach Forms	9a	Ordinary dividends. Attach Schedule B if requ	ired			98		61,	390.
W-2G and	b	Ordinary dividends. Attach Schedule B if requ Qualified dividends (see page 19)		.   9b	18,316	•	Canada Ca		
1099-R if tax was withheld.	10	Taxable refunds, credits, or offsets of state ar	d local income taxes			10	П		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11	Alimony received							
If you did not	12	Business income or (loss). Attach Schedule (	or C-EZ			. 12	:		0.
If you did not get a W-2,	13	Capital gain or (loss). Attach Schedule D if re-				13		317,	830.
see page 19.	14	Other gains or (losses). Attach Form 4797				. 14	ı	-	
	15a	IRA distributions15a		<b>b</b> Taxable amo	ount	. 15	b		
Enclose, but do not attach, any	16a	Pensions and annuities 16a			ount		b		
payment. Also,	17	Rental real estate, royalties, partnerships, S c					<u>'</u>	3,793,	<u>471.</u>
please use	18	Farm income or (loss). Attach Schedule F				. 18	,		<del> </del>
Form 1040-V.	19	Unemployment compensation Social security benefits 20a				. 19	丄		
	20a	Social security benefits 20a	37,851.	<b>b</b> Taxable amo	ount (see page 24)	20	b _	<u> </u>	173.
	21	Other income. List type and amount (see pag	e 24)				hadron destron destron		
						2	$\rightarrow$	4 650	0.4E
	22	Add the amounts in the far right column for li			<u> </u>	22	2	4,670,	<u>245.</u>
A -12 A2	23	Educator expenses (see page 26) Certain business expenses of reservists, performing officials. Attach Form 2106 or 2106-EZ	artists, and fee-basis governme	nt 23			100		
Adjusted	24	officials. Attach Form 2106 or 2106-EZ		24					
Gross	25	Health savings account deduction, Attach For				_	2000 P		
Income	26	Moving expenses. Attach Form 3903 26							
	27	One-half of self-employment tax. Attach Schedule SE 27 Self-employed SEP, SIMPLE, and qualified plans 28							
	28								
	29 20	Self-employed health insurance deduction (se				The state of the s	ALL THE STATE OF T		
	30	Penalty on early withdrawal of savings				-			
	31a 32	Alimony paid b Recipient's SSN >				-	2.(2.5 2000) 2000) 2000)		
	32 33	IRA deduction (see page 27) Student loan interest deduction (see page 30	 \	32					
	34	Tuition and fees deduction. Attach Form 891.				Control of the Contro			
	٠.	, and on and root downstrong remoner of the OO I.		🕶		1000000	2000		

35

36

Domestic production activities deduction. Attach Form 8903 \_\_\_\_\_ 35

Subtract line 36 from line 22. This is your adjusted gross income

Add lines 23 through 31a and 32 through 35

4,670,245.

36

37

Form 1040 (2007)	S	IMON & SHIRLEY BERNSTEIN	371-	32-521	1		Page 2
Tax and	38	Amount from line 37 (adjusted gross income)	***********			38	4,670,245.
Credits		Check \( \int \) You were born before January 2, 1943, \( \square \) Blind.				PART PROPERTY	
Standard		if: X Spouse was born before January 2, 1943, Blind.	D	39a	2		
Deduction for -	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 ar		➤ 39b		Park of the second	
● People who L checked any	40	Itemized deductions (from Schedule A) or your standard deduction (see lef			_ [	40	304,122.
box on line 39a or 39b <b>01</b> who	41	Subtract line 40 from line 38	41	4,366,123.			
can be claimed as a dependent.		If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemption				Hall Street	
		If line 38 is over \$117,300, see the worksheet on page 33			ľ	42	2,266.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41	enter -0-		·····	43	4,363,857.
● All others:	44	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972 c				44	1,444,150.
Single or Married filing	45	Alternative minimum tax. Attach Form 6251				45	0.
separately,	46	Add lines 44 and 45			<b>I</b>	46	1,444,150.
\$5,350	47	Credit for child and dependent care expenses. Attach Form 2441		•••••			
Married filing jointly or	48	Credit for the elderly or the disabled. Attach Schedule R			$\neg$		
Qualifying widow(er),	49	Education credits. Attach Form 8863				On the second se	
\$10,700	50	Residential energy credits. Attach Form 5695					
Head of	51	Foreign tax credit. Attach Form 1116 if required		91	1.	1 ng unin 100m n	
household, \$7,850	-	Child tax credit (see page 39). Attach Form 8901 if required					
	53	Retirement savings contributions credit. Attach Form 8880	53				
	54	Credits from: a Form 8396 b Form 8859 c Form 8839	54				
	55	Other credits: a Form 3800 b Form 8801 c Form					
		Add lines 47 through 55. These are your total credits				56	911.
						57	1,443,239.
	57 58	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-				58	1,443,233.
Other		Self-employment tax. Attach Schedule SE	Enrm 9010	******	•••••	59	
Taxes	59 en	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 532		60			
	60					61	
	61	Advance earned income credit payments from Form(s) W-2, box 9				62	
	62	Household employment taxes. Attach Schedule H	*,	••••••	·····	63	1,443,239.
Payments	63	Add fines 57 through 62. This is your total tax  Federal income tax withheld from Forms W-2 and 1099	64	53,13	2/		STATEMENT 6
rayments			65	$\frac{33,1}{336,1}$			SIAIEMENI O
If you have	65 - cc -	2007 estimated tax payments and amount applied from 2006 return		JJU, 12	40.		
a qualifying	-	Earned income credit (EIC)	66a		$\dashv$		
child, attach Schedule ElC.		Nontaxable combat pay election <b>66b</b>	67				
		Excess social security and tier 1 RRTA tax withheld (see page 59)					
		Additional child tax credit. Attach Form 8812		100,00	<u> </u>		
	69	Amount paid with request for extension to file (see page 59)  Payments from: a Form 2439 b Form 4136 c Form 888.	~	100,00			
			= 1				
		Refundable credit for prior year minimum tax from Form 8801, line 27	•••			70	1,489,254.
Refund	72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	<del> </del>			72 73	44,895.
Direct deposit?	73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount Amount of line 73 you want refunded to you. If Form 8888 is attached, check		<b>.</b>	····	74a	44,090.
See page 59 and fill in 74b,	/4-0 - h	Double Account	. 11616			140	
74c, and 74d, or Form 8888,	75	Amount of line 73 you want applied to your 2008 estimated tax	75	44,89	35		
Amount	76	Amount or line 75 you want appried to you 2008 estimated tax		<del>1</del> 1,0.	-	76	
You Owe	77	• • • • • • • • • • • • • • • • • • • •	77	1,1	20	76	
Third Part		Estimated tax penalty (see page 61)  o you want to allow another person to discuss this return with the IRS (see page 61)	****	s, Complete		واسوال	G. No
Designee	De	by you want to allow allourer person to discuss this return with the ins (see pro- pho- pho- pho- no.		ss, complete	uje ic		al identification
Sign	Unde	penalties of perjury, I declare that I have examined this return and accompanying schedule	s and statements, and to	the best of m	y know	ledge a	nd belief, they are true, correct,
Here		omplete, Declaration of preparer (other than taxpayer) is based on all information of which p Your signature   Date   Your occupa		ge.		ן Day	time phone number
Joint return?		EXECU					
See page 13. Keep a copy		Spouse's signature. If a joint return, both must sign. Date Spouse's or					
for your records.		INSUR	ANCE			and the second	
Paid	Prepa		Date	Check if self-		Prepare	er's SSN or PTIN
Preparer's				employed	l		00127193
Use Only		COLDEDETH LEWIN C CO			EIN		9:2147155
-		Than of	FTH FLOOR		Phone		61)994-5050
710002 11-05-07		d), address,  ROCA PATON FI. 33486					21/22 JOSO

**Underpayment of** Estimated Tax by Individuals, Estates, and Trusts

Department of the Treasury Internal Revenue Service

Name(s) shown on tax return

► See separate instructions.

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

OMB No. 1545-0140

SIMON & SHIRLEY BERNSTEIN

ldentifying number 371-32-5211

#### Do You Have To File Form 2210?

		. V			
Co	mplete lines 1 through 7 below. Is line 7 less than \$1,000?	Yes	Do not file Form	<b>2210.</b> You do no	t owe a penalty.
	₩ No	÷			
Co	mplete lines 8 and 9 below. Is line 6 equal to or more	Yes	You do not owe	a penalty. <b>Do not</b>	file Form 2210 (but if box
tha	n line 9?		E below applies,	you must file pag	e 1 of Form 2210).
	Ų No	1			
You	u may owe a penalty. Does any box in Part II below apply?	Yes	You <b>must</b> file Fo	rm 2210. Does bo	ox B, C, or D apply?
	No	•	No	Yes	ou must figure your penalty.
pen unp Par	not file Form 2210. You are not required to figure your alty because the IRS will figure it and send you a bill for any aid amount. If you want to figure it, you may use Part III or IV as a worksheet and enter your penalty amount on your tax m, but do not file Form 2210.		figure it and send figure it, you may	l you a bill for any use Part III or Pa	r penalty because the IRS will unpaid amount. If you want to urt IV as a worksheet and enter eturn, but file only page 1 of
Pai	Required Annual Payment				
1 2 3 4 5 6 7 8	Enter your 2007 tax after credits from Form 1040, line 57 (or comparal Other taxes, including self-employment tax (see page 2 of the instruction Refundable credits. Enter the total of your earned income credit, addition fuels, health coverage tax credit, and refundable credit for prior year Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, you do Multiply line 4 by 90% (.90)  Withholding taxes. Do not include estimated tax payments. (see page 2 Subtract line 6 from line 4. If less than \$1,000, you do not owe a penal Maximum required annual payment based on prior year's tax (see page Required annual payment. Enter the smaller of line 5 or line 8  Next: Is line 9 more than line 6?  No. You do not owe a penalty. Do not file Form 2210 unless box 1 X Yes. You may owe a penalty, but do not file Form 2210 unless on	ons) onal child tax cro r minimum tax onot owe a pena 2 of the instructi ty; do not file Fo e 2 of the instru E below applies.	edit, credit for federal lity; do not file Form 2 5 1 1 cons)	2210 , 298, 915.	1 1,443,239.  2 3 ( ) 4 1,443,239.  6 53,134. 7 1,390,105. 8 388,110. 9 388,110.
	<ul> <li>If box B, C, or D applies, you must figure your penalty and file it</li> </ul>		s iii rait ii below appi	165.	
	<ul> <li>If only box A or E (or both) applies, file only page 1 of Form 22 will figure it and send you a bill for any unpaid amount. If you wan worksheet and enter your penalty on your tax return, but file only</li> </ul>	10. You are <b>not</b> t to figure your :	penalty, you may use		
Pa	water turns				
A B C	You request a waiver (see page 1 of the instructions) of your entire but you are not required to figure your penalty.  You request a waiver (see page 1 of the instructions) of part of your file Form 2210.  Your income varied during the year and your penalty is reduced or method. You must figure the penalty using Schedule AI and file Form 2210.	our penalty. You r eliminated whe orm 2210.	must figure your pen	alty and waiver amo	unt and nstallment
D E	Your penalty is lower when figured by treating the federal income withheld, instead of in equal amounts on the payment due dates. You filed or are filing a joint return for either 2006 or 2007, but no must file page 1 of Form 2210, but you are not required to figure y	You must figure It for both years,	your penalty and file f and line 8 above is si	Form 2210. maller than line 5 ab	
			·		

For Paperwork Reduction Act Notice, see page 6 of separate instructions. LHA

Form **2210** (2007)

Part V Regular Method (See page 2 of the instructions if you are filing Form 1040NR or 1040NR-EZ.) Payment Due Dates Section A - Figure Your Underpayment (**b**) 6/15/07 (d) 1/15/08 (a) 4/15/07 (c) 9/15/07 18 Required installments. If box C in Part II applies, enter the amounts from Schedule Al. line 25. Otherwise, enter 97,026. 97,028. 97,028. 97,028. 18 25% (.25) of line 9, Form 2210, in each column 19 Estimated tax paid and tax withheld. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 18 for all payment periods, stop here; you do not owe a penalty. Do not 13.284 283,284 46.344. 46,342. file Form 2210 unless you checked a box in Part II 19 Complete lines 20 through 26 of one column before going to line 20 of the next column. 20 Enter the amount, if any, from line 26 in the previous 102,512 51,828. 20 column 283,284 21 148.856 21 Add lines 19 and 20 83,744. 22 Add the amounts on lines 24 and 25 in previous column 22 23 Subtract line 22 from line 21. If zero or less, enter -0-. 13,284 199,540 148,856 98,170. For column (a) only, enter the amount from line 19 23 24 If line 23 is zero, subtract line 21 from line 22. 0 0 24 Otherwise, enter -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 83,744 25 the next column. Otherwise, go to line 26 26 Overpayment, If line 23 is more than line 18, subtract line 102,512. 51,828 18 from line 23. Then go to line 20 of the next column 26 Section B - Figure the Penalty (Complete lines 27 through 30 of one column before going to the next column.) April 16, 2007 - December 31, 2007 4/15/07 6/15/07 9/15/07 Days: Days: Days; 27 Number of days from the date shown above line Rate Period 1 27 to the date the amount on line 25 was paid or 12/31/07, whichever is earlier 27 Number of days 28 Underpayment on on line 27 365 28 January 1, 2008 - April 15, 2008 12/31/07 12/31/07 12/31/07 1/15/08 Days: Days: 29 Number of days from the date shown above line Period 2 SEE ATTACHED WORKSHEET 29 to the date the amount on line 25 was paid or 4/15/08, whichever is earlier 29 Rate Number of days 30 Underpayment on on line 29 30 Penalty. Add all amounts on lines 28 and 30 in all columns. Enter the total here and on Form 1040, line 77; Form 1040A, line 47; Form 1040NR, line 75; Form 1040NR-EZ, line 26; or Form 1041, line 26; but do not 1,120. file Form 2210 unless you checked a box in Part II.

Form 2210 (2007)

#### **UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s)				Identifying Nu	mber
SIMON & SHI	RLEY BERNSTE	IN		371-32	2-5211
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
Date	Amount	-0-	Dalance Due	relially nate	relidity
04/15/07	97,028.	97,028.			
04/15/07	<13,284.>		61	.000219178	1,120
06/15/07	97,028.	180,772.			
06/15/07	<13,284.>	167,488.			
06/15/07	<270,000.>	<102,512.	<b>&gt;</b>		
09/15/07	97,028.	<5,484.	>		
09/15/07	<13,284.>	<18,768.	<b>&gt;</b>		
09/15/07	<33,060.>	<51,828.	<b>&gt;</b>		
12/31/07	0.	<51,828.	> 15	.000191257	
01/15/08	97,026.	45,198.			
01/15/08	<13,282.>	31,916.			
01/15/08	<33,060.>	<1,144.	>		
			<del>.</del>		
	<u></u>			· .	···
				1	
enalty Due (Sum of Colu	mn F)				1,120

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

#### **SCHEDULES A&B** (Form 1040)

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040

LHA 719501 11-08-07

Schedule A - Itemized Deductions

(Schedule B is on page 2)

► Attach to Form 1040.

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

OMB No. 1545-0074

SIMON & SHIRLEY BERNSTEIN 371 32 5211 Caution. Do not include expenses reimbursed or paid by others. Medical Medical and dental expenses (see page A-1) SEE STATEMENT 11 2,788. and Enter amount from Form 1040, line 38 24,670,245. Dental 350,268. **Expenses** Multiply line 2 by 7.5% (.075) 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): SEE STATEMENT Paid a Income taxes. or 5 1,862. **b** X General sales taxes (See Real estate taxes (see page A-5) page A-2.) 69,896 6 7 Personal property taxes Other taxes. List type and amount 8 71,758. Interest Home mortgage interest and points reported to you on Form 1098 10 107.528 Home mortgage interest and points reported to you on Form 1098.

Home mortgage interest not reported to you on Form 1098. If paid to the person 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. STMT 8 12 1.784. interest is 13 Qualified mortgage insurance premiums (See page A-7) not deductible. 142,441 Investment interest. Attach Form 4952 if required. (See page A-7.) STMT 10 14 Add lines 10 through 14..... 251,753. 15 Gifts by cash or check. SEE STATEMENT 9 70.869. Gifts to 16 Charity 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 17 gift and got a benefit for it. 18 Carryover from prior year see page A-8. 70,869. Add lines 16 through 18 19 Casualty and Theft Losses Casualty or theft loss(es). Attach Form 4684. (See page A-9.), Job Expenses Unreimbursed employee expenses - job travel, union dues, job education, etc. and Certain Attach Form 2106 or 2106 EZ if required. (See page A-9.) Miscellaneous Deductions 21 22 Tax preparation fees 23 Other expenses - investment, safe deposit box, etc. List type and amount SEE STATEMENT 7\_\_\_\_\_ (See page A-9.) 24,828. 24 24,828. Add lines 21 through 23 Multiply line 25 by 2% (.02) Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-0. Other Other - from list on page A-10. List type and amount Miscellaneous ▶FROM K-1 - EVERGREEN PRIVATE **Deductions** INVESTMENTS FUNDS 19. 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 for lines 4 through 28. Also, enter this amount on Form 1040, line 40. STMT 12▶ 304.122. **Deductions** X Yes. Your deduction may be limited. See page A-10 for the amount to enter. If you elect to itemize deductions even though they are less than your standard deduction, check here

#### SIMON & SHIRLEY BERNSTEIN

371 32 5211

		Schedule B - Interest and Ordinary Dividends		Sequence No. 08
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 ▶		
		SEE STATEMENT 15		61,182.
			<u> </u>	
			<u> </u>	
Note. If you received a Form			<b>├</b>	
1099-INT, Form 1099-OID,			▎╻┝╴	
or substitute			' ├─	
statement from a brokerage firm,		<del></del>	ļ <u></u>	
list the firm's			l	
name as the payer and enter			<del> </del>	
the total interest shown on that				
form.				
			l	
				64 465
	2	Add the amounts on line 1	2	61,182.
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.		
	4	Attach Form 8815 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a	3 4	61,182.
		te. If line 4 is over \$1,500, you must complete Part III.	4	Amount
Part II		List name of payer	┨	Amount
Ordinary	J	PERSHING LLC (17)		9,135.
Dividends		PERSHING LLC (213)		2,516.
		PERSHING LLC (221)		12,282.
		PERSHING LLC (668)		10,068.
		PERSHING LLC (11036)		26,038.
Note: If you received a Form		FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS		968.
1099-DIV or		FROM K-1 - EVERGREEN PRIVATE INVESTMENT FUNDS		383.
substitute statement from				
a brokerage firm, list the firm's			5	
name as the				
payer and enter the ordinary			<b>I</b>	
dividends shown				
on that form.				
			<u> </u>	
			-	
			1 🗀	
	6	Add the amounts on line 5. Enter the total here and on Form 1040, line 9a	6	61,390.
	No	te. If line 6 is over \$1,500, you must complete Part III.		
Part III		u must complete this part if you <b>(a)</b> had over \$1,500 of taxable interest or ordinary dividends; or <b>(b)</b> had	ad a foreig	n Yes No
Foreign	ace	count; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	foreign	
Accounts	7:	At any time during 2007, did you have an interest in or a signature or other authority over a financial account in a country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions an	a roceign d filing	
and		requirements for Form TD F 90-22.1		Х
Trusts		If "Yes," enter the name of the foreign country	ana deserve do	The second secon
727501 11-08-07	8	During 2007, did you receive a distribution from, or were you the grantor of, or transferor to, a forell f "Yes," you may have to file Form 3520. See page B-2		X
11.00-01				,

#### SCHEDULE C (Form 1040) Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

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

► See Instructions for Schedule C (Form 1040).

OMB No. 1545-0074

Name	of proprietor					So	cial secu	ırity number (SSN)
C) Th	MON BERNSTEIN						27.	1-32-5211
A STT	Principal business or profession, including		hust ar assulas (see sees (	١ ٥١				
	BURANCE SALES		B Enter code from pages C-8, 9, & 10  • 524290					
C	Business name. If no separate business name, leave blank.							
E	Business address (including suite or room City, town or post office, state, and ZIP co	ode						
F	Accounting method: (1) X Cast	)	(2) Accrual (3)	Othe	r (specify) 🕨			
G H	Did you "materially participate" in the ope if you started or acquired this business d	ration ouring 2	007 1 1 1		r (specify) ► o," see page C-3 for limit on losses			
Pa	ncome							
1	Gross receipts or sales. Caution. If this in	icome	was reported to you on Fo	orm W-2	and the "Statutory employee" box on			
	that form was checked, see page C-3 and	l check	here			-	1	8,795,654.
2	Returns and allowances					******	2	
3							3	8,795,654.
4							4	
5	Gross profit. Subtract line 4 from line 3						5	<u>8,795,654.</u>
6	Other income, including federal and state	gasoli	ne or fuel tax credit or refi	und (s <del>e</del> e	page C-3)		6	
7 Dai	Gross Income. Add lines 5 and 6  Expenses. Enter expense	s for b	susiness use of your ho	me only	v on line 30.	<u></u> <b>&gt;</b>	7	8,795,654.
8 8	Advertising	8	don ood doo or your no	18	Office expense	··········	18	
9	Car and truck expenses			19	Pension and profit-sharing plans		19	
ð		9		20	Rent or lease (see page C-5):			
10	(see page C-4) Commissions and fees	10	8,795,654.				000	
		10	0,193,034.	a	, , , , , , , , , , , , , , , , , , , ,		20a	
11	Contract labor	4.4		b	***************************************		20b	
40	(see page C-4)	11		21	Repairs and maintenance		21	
12	Depletion	12		22	Supplies (not included in Part III)		22	
13	Depreciation and section 179			23	Taxes and licenses		23	
	expense deduction (not included in			24	Travel, meals, and entertainment:			
	Part III) (see page C-4)	13		a	Travel		24a	
14	Employee benefit programs (other			b	Deductible meals and			
	than on line 19)	14			entertainment (see page C-6)		24b	
15	Insurance (other than health)	15		25	Utilities		25	
16	Interest:			26	Wages (less employment credits)		26	
a	Mortgage (paid to banks, etc.)	16a		27	Other expenses (from line 48 on			
b	Other	16b			page 2)		27	
17	Legal and professional							Joseph Control of Cont
	services	17					CONTRACTOR OF THE	
28	Total expenses before expenses for bus	iness u	se of home. Add lines 8 ti	rough 2	7 in columns	🕨	28	8,795,654.
								•
29	Tentative profit (loss). Subtract line 28 fr	om line					29	0.
30				,			30	
31	Net profit or (loss). Subtract line 30 from					_		
	<ul> <li>If a profit, enter on both Form 1040, li</li> </ul>		·		•	1		-
	(statutory employees, see page C-7). Est	ates ar	d trusts, enter on Form 1	041, line	3.	P	31	0.
	<ul> <li>If a loss, you must go to line 32.</li> </ul>					J		
32	If you have a loss, check the box that des					_		
	<ul> <li>If you checked 32a, enter the loss on b</li> </ul>				· ·	)		Affician i
	line 13 (statutory employees, see page C		·		41, line 3.	þ	32a	All investment Is at risk.
	<ul> <li>If you checked 32b, you must attach F</li> </ul>	orm 6	1 <b>98.</b> Your loss may be lim	ited.		J	32b	Some investment is not at risk.

#### SCHEDULE D (Form 1040)

Department of the Treasury Internal Revenue Service (99) 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.

OMB No. 1545-0074

2007

Attachment
Sequence No. 12

our social security number

#### SIMON & SHIRLEY BERNSTEIN

371	32	521	1
~ , _		: - 4 -	

SIMON & SHIRLEY BERNSTEI				37	1 32 5211
Part   Short-Term Capital Gains a		ts Held One Ye	ar or Less		
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(C) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
TRANSACTIONS W/THE STANFORD GROUP (17)	VARIOUS	VARIOUS	124,316.	124,312	2. 4.
TRANSACTIONS W/THE STANFORD GROUP (213)	VARIOUS	VARIOUS	224,293.	242,109	<17,816.
TRANSACTIONS W/THE					
STANFORD GROUP (221) TRANSACTIONS W/THE	VARIOUS	VARIOUS	320,353.	303,463	16,890.
STANFORD GROUP (668)	VARIOUS	VARIOUS	82,733.	77,741	4,992.
		<u> </u>		Since is bridged the control we conver a week	MA A AAV
Enter your short-term totals, if any, from S	chedule D-1, line 2	2			
Total short-term sales price amounts.		3	751,695.		
Add lines 1 and 2 in column (d) Short-term gain from Form 6252 and shor			751,095.		
from Forms 4684, 6781, and 8824	SE	EE STATEMEN	T 16		1,158.
Net short-term gain or (loss) from partners	hips, S corporations, o	estates, and trusts	·=···-		
from Schedule(s) K-1	SE	E STATEMEN	T 18	5	53,849.
Short-term capital loss carryover. Enter the				6	
Carryover Worksheet in the instructions	,	,	***************************************		,
Net short-term capital gain or (loss). Co	mbine lines 1 through	6 in column (f)	,		59,077.
Part II Long-Term Capital Gains ar	nd Losses - Asse	ts Held More Th	nan One Year	•	
(a) Description of property (Example: 100 sh, XYZ Co.)	(b) Date acquired (Mo., day, yr.)	( <b>c</b> ) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
TRANSACTIONS W/THE	TIND TOTAL	III D T OILG	141 000	00.00	40.046
STANFORD GROUP (17)	VARIOUS	VARIOUS	141,880.	93,034	48,846.
TRANSACTIONS W/THE STANFORD GROUP (213)	VARIOUS	VARIOUS	201,662.	142,118	59,544.
TRANSACTIONS W/THE	VIIIII	VILLEGED	201,002.	142,110	35,344.
STANFORD GROUP (221)	VARIOUS	VARIOUS	286,537.	216,685	69,852.
	and Dr. Ban C				and the same
<ul> <li>Enter your long-term totals, if any, from Sci</li> <li>Total long-term sales price amounts.</li> </ul>	neaule ม- เ, Ilne 9	9			
Add lines 8 and 9 in column (d)		10	630,079.	No. 1 (1) Complete (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
1 Gain from Form 4797, Part I; long-term gair	n from Forms 2439 and	d 6252; and	-		0.000
long-term gain or (loss) from Forms 4684, 6 Net long-term gain or (loss) from partnershi			LT T	1	1 2,283.
from Schedule(s) K-1	EE STATEMEN	IT 19		2 54,760.	
3 Capital gain distributions	SI	EE STATEMEN	IT 20		3 23,468.
4 Long-term capital loss carryover. Enter the	amount, if any, from li	ne 15 of your <b>Capit</b> a	Il Loss		
Carryover Worksheet in the instructions			,	<u>1</u>	4 (
5 Net long-term capital gain or (loss). Com	nbine lines 8 through 1	4 in column (f). Then	go to		
Part III on page 2				J.	5 258,753.

Pa	rt-III Summary		
16	Combine lines 7 and 15 and enter the result.	16	317,830.
	If line 16 is:		
	<ul> <li>A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> </ul>	promote and the second of the	
	A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.	The second of th	
	<ul> <li>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.</li> </ul>	And the second of the second o	
17	Are lines 15 and 16 both gains?	The control of the co	
	X Yes. Go to line 18.	product or one of the set of the	
	No. Skip lines 18 through 21, and go to line 22.	The control of the co	
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions SEE STATEMENT 21	in other amments of control of the c	81.
20	Are lines 18 and 19 both zero or blank?	Section of the sectio	
20	Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the	ordinance controller and of the plants are inclusions or in the Billianness in which is not to the controller and the plants are also as the controller and the plants are also as the plants a	
	Qualified Dividends and Capital Gain Tax Worksheet on page 35 of the Instructions for Form	Silver of the second of the se	
	1040 (or in the Instructions for Form 1040NR). <b>Do not</b> complete lines 21 and 22 below.	in the administration of the control	
	No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the	Committee of the commit	
	Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and		
	22 below.	The second secon	
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:	Berg de page agginner pare.  De de la companya del la companya de la companya de la companya del la companya de la companya de la companya del la companya d	,
	• The loss on line 16 or	21 (	,
	• (\$3,000), or if married filing separately, (\$1,500)	Triping of representations of a street and depth of the control of	en jaron
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.	Control E Shakes are Market and Control E Shakes are Market an	
22	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	Section of the control of the contro	
	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.		

Name(s)	shown	on return

EIMC	ON & SHIRLEY BERNSTEIN	371-32-5211
	mplete this worksheet only if line 18 or line 19 of Schedule D is more than zero. Otherwise, complete the Qu	ualified Dividends and
Ca	pital Gain Tax Worksheet on page 35 of the Instructions for Form 1040 (or in the Instructions for Form 1040	NR) to figure your tax.
	ception: Do not use the Qualified Dividends and Capital Gain Tax Worksheet or this worksheet to figure your tax i	
or _	Line 15 or line 16 of Schedule D is zero or less <mark>and</mark> you have no qualified dividends on Form 1040, line 9b (or For Form 1040, line 43 (or Form 1040NR, line 40) is zero or less.	
Inst	tead, see the instructions for Form 1040, line 44 (or Form 1040NR, line 41).	
1.	Enter your taxable income from Form 1040, line 43 (or Form 1040NR, line 40)	1. <u>4,363,857.</u>
2.	Enter your qualified dividends from Form	
•	1040, line 9b (or Form 1040NR, line 10b) 218 , 316 .	
	Enter the amount from	
	Form 4952 (used to figure investment	
i	interest expense	
	deduction), line 4g 3	
	Enter the amount from	
	Form 4952, line 4e* 4	
5.	Form 4952, line 4e* 4	
6.	Subtract line 5 from line 2. If zero or less, enter -0	
/. I	Enter the smaller of line 15 or line 16 of Sch. D 7. 258, 753.	
ο,	Enter the smaller of line 3 or line 48	
10	Add lines 6 and 9	9.
11.	Add lines 18 and 19 of Schedule D	<del></del>
12.	Enter the smaller of line 9 or line 11 12.	1.
13.	Subtract line 12 from line 10	
14.	Subtract line 13 from line 1. If zero or less, enter -0-	14. 4,086,869.
	Enter the smaller of:	
	The amount on line 1 or	
	\$31,850 if single or married filing separately;	
	\$31,850 if single or married filing separately; \$63,700 if married filing jointly or qualifying widow(er); or \$42,650 if head of household  Enter the smaller of line 14 or line 15  15. 63,700.	
16.	Enter the <b>smaller</b> of line 14 or line 15	
17.	Subtract line 10 from line 1, if zero or less, enter -0- 17. 4, U86, 788	10
18.	Enter the larger of line 16 or line 17 ▶ 18. 4 , 086 , 78	88.
	If lines 15 and 16 are the same, skip lines 19 and 20 and go to line 21. Otherwise, go to line 19.	
	Subtract line 16 from line 15	
	Multiply line 19 by 5% (.05)	20
	If lines 1 and 15 are the same, skip lines 21 through 33 and go to line 34. Otherwise, go to line 21.  Enter the smaller of line 1 or line 13	
	Enter the amount from line 19 (if line 19 is blank, enter -0-)  21. 270, 500.	
23	Subtract line 22 from line 21. If zero or less, enter -0-	88.
24.	Multiply line 23 by 15% (.15)	
	If Schedule D, line 19, is zero or blank, skip lines 25 through 30 and go to line 31. Otherwise, go to line 25.	
	Enter the smaller of line 9 above or Schedule D, line 19 25. 81.	
26.	Add lines 10 and 18 26. 4 , 363 , 857 •	
27.	Enter the amount from line 1 above $27.\overline{4,363,857}$ .	
28.	Subtract line 27 from line 26, If zero or less, enter -0 28 0.	
29.	Subtract line 28 from line 25. If zero or less, enter -0-	<u>81.</u>
	Multiply line 29 by 25% (.25)	30. 20.
	If Schedule D, line 18, is zero or blank, skip lines 31 through 33 and go to line 34. Otherwise, go to line 31.	
	Add lines 18, 19, 23, and 29	
	Subtract line 31 from line 1 32.	<del></del>
	Multiply line 32 by 28% (.28)	
	Figure the tax on the amount on line 18. Use the Tax Table or Tax Computation Worksheet, whichever applies	4 4 4 4 = 0
	Add lines 20, 24, 30, 33, and 34  Figure the tax on the amount on line 1. Use the Tax Table or Tax Computation Worksheet, whichever applies	
	Tax on all taxable income (including capital gains and qualified dividends). Enter the smaller of line 35 or	00. <u>, 100, 100, 100, 100, 100, 100, 100, </u>
	line 36. Also include this amount on Form 1040, line 44 (or Form 1040NR, line 41)	37.1.444.150.
720515 11-09-07 <b>-</b>	and 2011 and another with which the regime of the restriction of the mile of the	11-001
8± <b>-</b>	* If applicable, enter instead the smaller amount you entered on the dotted line next to line 4e of Form 4952.	<del></del>

#### SCHEDULE E

#### (Form 1040)

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

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

OMB No. 1545-0074

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

➤ See Instructions for Schedule E (Form 1040).

Your social security number

	IMON & SHIRLEY BERNSTEI								2-521	
P	art I Income or Loss From Rent							onal pro	perty, use	
	Schedule C or C-EZ (see page E-3). If yo			ntal income	or loss fror	m <b>Form 4835</b> on page 2	, line 40.			
1	List the type and location of each rental real estat	e prop	erty:			ach rental real estate pr		d _	Yes	No
A						ne 1, did you or your far				
	EVERGREEN PRIVATE INVE	STM	ENTS FUNDS -	- ROY		ig the tax year for perso nore than the greater of:		es L	Α	
В						4 days or				
						0% of the total days ren	ted at fair		В	
С						ental value?				
					1	page E-3.)			<u>c  </u>	<u></u>
ne	come:		···	Proper			J	Tot		
			Α	В	l	С	(Add	column	s A, B, an	d C.)
	Rents received	3			<u>., ., , , ,</u>		3			
	Royalties received	4	7.				4			<u>7.</u>
	penses:						Company of the compan			
5	Advertising	5								
	Auto and travel (see page E-4)	6								
	Cleaning and maintenance	7					English St. Very Co.			
8	Commissions	8					Line community det in presentation on the land			
	Insurance	9					200 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
10	Legal and other professional fees	10					77. A 2 M/2 100 100 100 100 100 100 100 100 100 10			
11	Management fees	11					Section of the sectio			
12	Mortgage interest paid to banks, etc.						Language and by			
	(see page E-4)	12	•				12			
13	Other interest	13								
	Repairs	14					The second secon			
	Supplies	15					Carrier P 60 40-5 Carrier St. Carrier St.			
	Taxes	16								
	Utilities	17								
	Other (list)						200			
	SEE STATEMENT 22		5.				and published the second of th			
	-	ا ۱								
		18					Control of the Contro			
19	Add lines 5 through 18	19	5.				19			5.
	Depreciation expense or depletion (see page E-5)	20					20			
	Total expenses. Add lines 19 and 20	21	5.							
							Annual Control of the			
<b>ZZ</b>	Income or (loss) from rental real estate or royalty properties. Subtract line 21						Complete Com			
	from line 3 (rents) or line 4 (royalties).						The second of th			
	If the result is a (loss), see page E-5 to									
	find out if you must file Form 6198	22	2.				A CONTRACTOR OF THE STATE OF TH			
	,									
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						44 St. (1974)			
	must complete line 43 on page 2	23	k			1				
24	Income. Add positive amounts shown on line 22.		n			W	24			2.
	Losses. Add royalty losses from line 22 and rental				sas here	******************************	25 (			<u> </u>
	Total rental real estate and royalty income or (lo				-					
۷,	If Parts II, III, IV, and line 40 on page 2 do not appl									
	line 17 or Form 1040NR line 18 Otherwise include						ا مو ا			2

Your social security number

,	,	•									,
g TN	IMON & SHIRLEY BERNSTEIN 371-32-5211										
	Gaution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.										
	Income or Loss From Pa	rtnerships	and S Cor	porations Not	e. If v	ou rer	ort a loss	from an	at-risk	activity for	which
i di	any amount is not at risk, you m			-							
27	Are you reporting any loss not allowed in a pi										
<u>~1</u>	passive activity (if that loss was not reported	on Form 8582)	or uprelmhurg	ed nartnershin eynen	9007	unano	1100 1000 110	2111 W		X Yes	□ No
	If you answered "Yes," see page E-6 before of			ou partitoromp oxpon	500:	********					
	il you allswelled Tes, see page 10 before to	Jilipieting the sc	ouon.		(b)Er	nter P for	(C) Check	(d	) Empl	over	(e) Check If
28	(1	a) Name			partne for S cr	ership; S	(C) Check if foreign partnership	identif	ication	number	(e) Check If any amount is not at risk
A	SEE STATEMENT 23			·	-		# M. W. W. W. W.				
В	DEE DIRIEMENT 25				+						
C					╁						
D					╁						
ן ט	Passive Income and	Loca				Nonn	assive Inc	come an	an I h	 s	
	(f) Passive loss allowed		/e income	(h) Nonpassive lo		, <u> </u>	ction 179 e			) Nonpassivi	e income
	(attach Form 8582 if required)		edule K-1	from Schedule K			ion from Fo			from Sched	
. 1	(									<del></del>	<del></del>
A B								<del></del>			
C											
D		+									
29a	Totals Property Control of the Contr	1	3,472.		A A	1970, housestander		nor, or day, with principle colored in program against		3 828	3,342.
			.J, <del>1</del> 14	6	80.		<b>4</b> 1	250.		3,020	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b oo			A A A A A A A A A A A A A A A A A A A			<del></del>	*	-	30	ጓ ጸፈ1	L,814.
30									31	7 48	3,345.)
31 32	Total partnership and S corporation income			nd 21 Enter the				*******	-	,	3,01017
32	result here and include in the total on line 41								32	3.793	3,469.
Da	Income or Loss From Est	ates and T	rusts	*********				*********		5,75	
i Njip M	Reality Wildering of Edge 1.011 = 0.								Т	(b) Em	nlover
33		(a	ı) Name							identificatio	
А									$\neg$		<del></del>
В											
	Passive Inc	come and Los	s				Nonpa	assive Ir	come	and Loss	
	(c) Passive deduction or loss allowe	d		ssive income			duction or k		(	(f) Other inco	
	(attach Form 8582 if required)		from S	Schedule K-1		from	Schedule K	-1		Schedul	e K-1
Α											
В											
34a	Totals				The state of the s				***************************************		
b	Totals								***************************************		
35	Add columns (d) and (f) of line 34a							,	35		
36	Add columns (c) and (e) of line 34b								36	(	)
37	Total estate and trust income or (loss). Con	mbine lines 35 ar	nd 36. Enter the	e result here and incl	ude in	the to	al on line 4	1 below	37	<u> </u>	
Pa	rt IV Income or Loss From Re					Its (H	(EMICS)	- Hesi	duai		
38	(a) Name	(b) Em		(c) Excess inclusion Schedules Q, line		loss)	axable inco from Sche line 1b	me met dules Q,	(e) Income from Schedules Q, line 3b		
	(1,)		JII IIUIIIDEI	Concuerca a, and	, 20	<u> </u>	line 1b		· commonwhile	I	<b>4,</b> iiii ob
		1	In the deal of the								
39	Combine columns (d) and (e) only. Enter the						7 T M 37		39	<u> </u>	
				F PASSIVE					40	1	
40						_	41	3 79	3,471.		
41					/, or ⊢o	rm 1040	init, iinė 18 .		71		-
42	Reconciliation of farming and fishing incol	-								P APT Moved 1 APT A common resource of the common and the common a	
	reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see page E-7)  42							A commence of the commence of			
49	•	8. If you were a real estate professional (see page E-2), e on Form 1040 or Form 1040NR from all rental real estate			42					TIN CONTRACTOR OF THE CONTRACT	
43									7 0. 7 0. 10		
	enter the net income or (loss) you reported anywhere activities in which you materially participated under				43		2000000	nagna rengo (sia sirania nana sana).			
	activities in which you materially participated under	passive activity	(dipa		-10						

EVERGREEN PRIVATE INVESTMENTS FUNDS

I.D. NUMBER: 56-2114125

TYPE: PARTNERSHIP

#### ACTIVITY INFORMATION:

#### EVERGREEN PRIVATE INVESTMENTS FUNDS

#### OTHER PASSIVE ACTIVITY

OTHER PORTFOLIO INCOME (LOSS)	-594
TOTAL NONPASSIVE INCOME (LOSS)	-594
ORDINARY INCOME (LOSS) RENTAL REAL ESTATE INCOME (LOSS) OTHER RENTAL INCOME (LOSS) SEC 988 GAIN(LOSS) SEC 59(E)(2) -	10715 -6 117 0 -41
TOTAL PASSIVE ACTIVITY INCOME (LOSS)	10785

#### TAX PREFERENCE ITEMS:

DEPRECIATION ADJUSTMENT	139
ADJUSTED GAIN OR LOSS	-15
OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS	60

#### OTHER K-1 INFORMATION:

INTEREST INCOME	1419
ORDINARY DIVIDENDS	968
QUALIFIED DIVIDENDS	738
TAX-EXEMPT INTEREST	119
SECTION 1231 GAIN (LOSS)	527
NET SHORT-TERM CAPITAL GAIN (LOSS)	19036
NET LONG-TERM CAPITAL GAIN (LOSS)	13693
SECTION 1256 CONTRACTS AND STRADDLES	-1059
INVESTMENT INTEREST EXPENSE - SCHEDULE A	8031
CHARITABLE CONTRIBUTIONS	3
DEDUCTIONS RELATED TO PORTFOLIO INCOME	7112
ROYALTY	7
ROYALTY EXPENSES/DEPLETION	5
BACKUP WITHHOLDING	1
INVESTMENT INCOME	2394
INVESTMENT EXPENSE	7117
UNRECAPTURED SECTION 1250 GAIN	40
NONDEDUCTIBLE EXPENSES	35

2007 IIICOME II OM Fassum	ougnis	
EVERGREEN PRIVATE INVESTMENT FUNDS I.D. NUMBER: 52-2223144 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
EVERGREEN PRIVATE INVESTMENT FUNDS		
OTHER PASSIVE ACTIVITY		
OTHER PORTFOLIO INCOME (LOSS)	-78	
TOTAL NONPASSIVE INCOME (LOSS)	-78	
ORDINARY INCOME (LOSS)	2160 486	
SEC 59(E)(2) -	0	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER		2646 -6374
ALLOWABLE PASSIVE LOSS FROM FORM 8582	_	-3728
TAX PREFERENCE ITEMS:  AMT PAL CARRYOVER - SCHEDULE E		6332
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS)		1756 383 204 1 19
NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) SECTION 1256 CONTRACTS AND STRADDLES INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME		34916 41318 577 6650 8862
BACKUP WITHHOLDING INVESTMENT INCOME INVESTMENT EXPENSE UNRECAPTURED SECTION 1250 GAIN		3 2139 8862 19

15

LIC HOLDINGS INC

I.D. NUMBER: 20-5290314 TYPE: S CORPORATION

#### ACTIVITY INFORMATION:

LIC HOLDINGS INC

#### TRADE OR BUSINESS - MATERIAL PARTICIPATION

ORDINARY INCOME (LOSS)	3828342
TOTAL NONPASSIVE INCOME (LOSS)	3828342
SECTION 179 AND CARRYOVER	-41250
TOTAL SECTION 179 EXPENSE	-41250

#### TAX PREFERENCE ITEMS:

DEPRECIATION ADJUSTMENT	5085
ADJUSTED GAIN OR LOSS	25
OBUSE V_1 INSODMANTON.	÷

INTEREST INCOME	28623
CHARITABLE CONTRIBUTIONS	4366
INVESTMENT INCOME	28623
NONDEDUCTIBLE EXPENSES	11252

### 2007 Income from Passthroughs UNITED STATES NATURAL GAS FUND L.P. I.D. NUMBER: 20-5576760 TYPE: PARTNERSHIP ACTIVITY INFORMATION: UNITED STATES NATURAL GAS FUND L.P. 100% DISPOSITION AT A NET LOSS -8 ORDINARY INCOME (LOSS) TOTAL NONPASSIVE INCOME (LOSS) -8 OTHER K-1 INFORMATION: 47 INTEREST INCOME SECTION 1256 CONTRACTS AND STRADDLES 1658 INVESTMENT INCOME 47

17

POWERSHARES DB COMMODITY INDEX TRACKING

I.D. NUMBER: 32-6042243

TYPE: PARTNERSHIP

#### ACTIVITY INFORMATION:

POWERSHARES DB COMMODITY INDEX TRACKING

100% DISPOSITION AT A NET GAIN

#### OTHER K-1 INFORMATION:

INTEREST INCOME	1046
NET SHORT-TERM CAPITAL GAIN (LOSS)	-106
NET LONG-TERM CAPITAL GAIN (LOSS)	-251
SECTION 1256 CONTRACTS AND STRADDLES	965
DEDUCTIONS RELATED TO PORTFOLIO INCOME	168

POWERSHARES DB G10 CURRENCY I.D. NUMBER: 16-6562496

TYPE: PARTNERSHIP

#### ACTIVITY INFORMATION:

POWERSHARES DB G10 CURRENCY

OTHER PASSIVE ACTIVITY

#### OTHER K-1 INFORMATION:

INTEREST INCOME	1233
NET SHORT-TERM CAPITAL GAIN (LOSS)	3
SECTION 1256 CONTRACTS AND STRADDLES	754
DEDUCTIONS RELATED TO PORTFOLIO INCOME	205

728021

#### SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

#### OTHER K-1 INFORMATION:

INTEREST INCOME	34124
ORDINARY DIVIDENDS	1351
QUALIFIED DIVIDENDS	942
TAX-EXEMPT INTEREST	120
SECTION 1231 GAIN (LOSS)	546
NET SHORT-TERM CAPITAL GAIN (LOSS)	53849
NET LONG-TERM CAPITAL GAIN (LOSS)	54760
SECTION 1256 CONTRACTS AND STRADDLES	2895
INVESTMENT INTEREST EXPENSE - SCHEDULE A	14681
CHARITABLE CONTRIBUTIONS	4369
DEDUCTIONS RELATED TO PORTFOLIO INCOME	16347
ROYALTY	7
ROYALTY EXPENSES/DEPLETION	5
BACKUP WITHHOLDING	4
UNRECAPTURED SECTION 1250 GAIN	59
NONDEDUCTIBLE EXPENSES	11287
INVESTMENT INTEREST EXPENSE:	
INVESTMENT INCOME	33203
INVESTMENT EXPENSE	15979
TAX PREFERENCE ITEMS:	
DEPRECIATION ADJUSTMENT	5224
ADJUSTED GAIN OR LOSS	10
OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS	60
AMT PAL CARRYOVER - SCHEDULE E	6332
	2332

Department of the Treasury Internal Revenue Service (99)

Foreign Tax Credit
(Individual, Estate, or Trust)
Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Attachment Sequence No. **19** 

Name							1d	Identifying number as shown on page 1 of your tax return			
SIMON & SHIRLEY BERNSTEIN						371-32-5211					
					w. See Categories fied in Part II below		nning on page 3	of the instructio	ns. Check only on	e box on each	
a	X Passive ca	tegory income	e c 🗆	Section 901	(j) income		e Lump	-sum distributio	ns		
b		tegory income			me re-sourced by t	reaty					
f F	Resident of (name	of country)	► USA							·	
No	te: If you paid ta	xes to only o	one foreign co		possession, use d			in Part II. If you	u paid taxes to n	nore than one	
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k	Other deduction	ns (attach stat	ement)				·	·	Salan Parameters Marine Salan Salan Marine		
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11 Add lines 9 and 10  12 Reduction in foreign taxes  13 Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit  13 Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit  14 Enter the amount from line 7. This is your taxable income or (less) from sources outside the United States (before adjustments) for the category of income encoked above Part I 9, 587.  15 Adjustments to line 14  16 Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income your checked above Part I 16, you are not foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income your checked above Part I 16, you must complete line 19.)  17 Individuals: Enter the amount from Form 1040, line 41. If you are a nonresident alian, enler the amount from Form 1040MR, line 38. Estates and trusts: Enter your taxable income without the deduction for your examption SEE STATEMENT 25 17 4, 207, 829.  18 Divide line 16 by line 17. If line 16 is more than line 17, enter 17.  19 Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alian, enter the amount from Form 1040, line 44. If you are a nonresident alian, enter the amount from Form 1040, line 44. If you are a nonresident alian, enter the amount from Form 1041, Schedule G, line 16, or the total of Form 990-T, lines 36 and 37.  19 Individuals: Enter the amount from Form 1041, Schedule G, line 16, or the total of Form 990-T, lines 36 and 37.  20 Multiply line 19 by line 18 (maximum amount of credit)  21 Enter the smaller of line 13 or line 20. If this is the only Form 116 you are tiling, skip lines 22 through 26 and order this amount on line 27. Otherwise, complete the appropriate line in Part IV  22 Total for taxes on constain income re-sourced by teaty  23 Credit for taxes on constain income re-sourced by teaty  24 Credit for ta		for the category of income checked above Part I	9 911.		
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18 0 vide line 16 by line 17. If line 16 is more than line 17, enter "1"  19 Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 41.  Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37  Caution: If you are completing line 19 for separate category e (lump-sum distributions), see pg. 20 of the instructions.  20 Multiply line 19 by line 18 (maximum amount of credit)  21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV  Part IV  Summary of Credits From Separate Parts III  22 Credit for taxes on passive category income  23 Credit for taxes on certain income re-sourced by treaty  24 Credit for taxes on lump-sum distributions  25 Credit for taxes on lump-sum distributions  26 Add lines 22 through 25  27 Enter the smaller of line 19 or line 26  28 Reduction of credit for international boycott operations  29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	17	enter the amount from Form 1040NR, line 38. Estates and trusts: Enter your taxable	4,207,829	Committee	
19 Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 41.  Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37  Caution: If you are completing line 19 for separate category e (lump-sum distributions), see pg. 20 of the instructions.  20 Multiply line 19 by line 18 (maximum amount of credit)  21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV  Part IV  Summary of Credits From Separate Parts III  22 Credit for taxes on passive category income  23 Credit for taxes on general category income  24 Credit for taxes on certain income re-sourced by treaty  25 Credit for taxes on lump-sum distributions  26 Add lines 22 through 25  27 Enter the smaller of line 19 or line 26  28 Reduction of credit for international boycott operations  29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;					
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lines 36 and 37  Caution: If you are completing line 19 for separate category e (lump-sum distributions), see pg. 20 of the instructions.  20 Multiply line 19 by line 18 (maximum amount of credit)  21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV  21 911.  Part IV  Summary of Credits From Separate Parts III  22 Credit for taxes on passive category income  23 Credit for taxes on general category income  24 Credit for taxes on certain income re-sourced by treaty  25 Credit for taxes on lump-sum distributions  26 Add lines 22 through 25  27 Enter the smaller of line 19 or line 26  28 Reduction of credit for international boycott operations  29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	19		nount from		
Caution: If you are completing line 19 for separate category e (lump-sum distributions), see pg. 20 of the instructions.  20 3,290.  21 Enter the smaller of line 18 (maximum amount of credit)  22 1 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV  21 911.  Part IV  Summary of Credits From Separate Parts III  22 Credit for taxes on passive category income  23 Credit for taxes on general category income  24 Credit for taxes on certain income re-sourced by treaty  25 Credit for taxes on lump-sum distributions  26 Add lines 22 through 25  27 Enter the smaller of line 19 or line 26  28 Reduction of credit for international boycott operations  29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;					
Multiply line 19 by line 18 (maximum amount of credit)  Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV  Part IV  Summary of Credits From Separate Parts III  Credit for taxes on passive category income  Credit for taxes on general category income  Credit for taxes on certain income re-sourced by treaty  Credit for taxes on lump-sum distributions  Add lines 22 through 25  Enter the smaller of line 19 or line 26  Reduction of credit for international boycott operations  Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;		lines 36 and 37		19	1,444,150.
21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV  Part IV  Summary of Credits From Separate Parts III  22 Credit for taxes on passive category income  23 Credit for taxes on general category income  24 Credit for taxes on certain income re-sourced by treaty  25 Credit for taxes on lump-sum distributions  26 Add lines 22 through 25  Enter the smaller of line 19 or line 26  Reduction of credit for international boycott operations  28 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	~~	• • • • • • • • • • • • • • • • • • • •			3 200
amount on line 27. Otherwise, complete the appropriate line in Part IV  Part IV  Summary of Credits From Separate Parts III  22 Credit for taxes on passive category income  23 Credit for taxes on general category income  24 Credit for taxes on certain income re-sourced by treaty  25 Credit for taxes on lump-sum distributions  26 Add lines 22 through 25  27 Enter the smaller of line 19 or line 26  28 Reduction of credit for international boycott operations  29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;				120	5,250.
Part IV Summary of Credits From Separate Parts III  22 Credit for taxes on passive category income 23 Credit for taxes on general category income 24 Credit for taxes on certain income re-sourced by treaty 25 Credit for taxes on lump-sum distributions 26 Add lines 22 through 25 27 Enter the smaller of line 19 or line 26 28 Reduction of credit for international boycott operations 29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	21			21	911.
22 Credit for taxes on passive category income 23 Credit for taxes on general category income 24 Credit for taxes on certain income re-sourced by treaty 25 Credit for taxes on lump-sum distributions 26 Add lines 22 through 25 27 Enter the smaller of line 19 or line 26 28 Reduction of credit for international boycott operations 29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	P	art V Summary of Credits From Separate Parts III		1	7224
23 23 24 Credit for taxes on general category income 24 Credit for taxes on certain income re-sourced by treaty 25 Credit for taxes on lump-sum distributions 25 25 26 Add lines 22 through 25 26 Enter the smaller of line 19 or line 26 27 911.  28 Reduction of credit for international boycott operations 28 29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	72.77		22	and F	
24 Credit for taxes on certain income re-sourced by treaty 25 Credit for taxes on lump-sum distributions 26 Add lines 22 through 25 27 Enter the smaller of line 19 or line 26 28 Reduction of credit for international boycott operations 29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;					
25 Credit for taxes on lump-sum distributions 26 Add lines 22 through 25 27 Enter the smaller of line 19 or line 26 28 Reduction of credit for international boycott operations 29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	24	Credit for taxes on certain income re-sourced by treaty	24	0.0000000000000000000000000000000000000	
26 Add lines 22 through 25 26 27 Enter the smaller of line 19 or line 26 27 911.  28 Reduction of credit for international boycott operations 28 28 29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	25	Credit for taxes on lump-sum distributions	25		
27Enter the smaller of line 19 or line 2627911.28Reduction of credit for international boycott operations2829Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;0	26	Add lines 22 through 25		26	
28 Reduction of credit for international boycott operations 29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	27	Enter the smaller of line 19 or line 26		_	911.
29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 51;	28	Reduction of credit for international boycott operations			
				29	911.

## Form **4797**

Internal Revenue Service (99

Name/s) shown on return

#### Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

1 Enter the gross proceeds from sales or exchanges reported to you for 2007 on Form(s) 1099-B or 1099-S

➤ Attach to your tax return. ➤ See separate instructions.

OMB No. 1545-0184

2007

Attachment
Sequence No. 27

dentifying number

#### SIMON & SHIRLEY BERNSTEIN

(or substitute statement) that you are including on line 2, 10, or 20

371-32-5211

Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Part I Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) (d) Gross sales (a) Description (b) Date acquired (C) Date sold allowed or basis, plus Subtract (f) from the of property (mo., day, yr.) (mp., day, yr.) price Improvements and allowable since sum of (d) and (e) acquisition expense of sale EVERGREEN PRIVATE INVESTMENTS FUNDS 527. **EVERGREEN PRIVATE** INVESTMENT FUNDS 19. Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: 546. Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. Nonrecaptured net section 1231 losses from prior years (see instructions) R Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions) Part II Ordinary Gains and Losses (see instructions) 10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 11 Loss, if any, from line 7 11 Gain. if any, from line 7 or amount from line 8, if applicable 12 12 13 Gain, if any, from line 31 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 15

Ordinary gain or (loss) from like-kind exchanges from Form 8824

Combine lines 10 through 16

For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines

a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a."

See instructions

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14

LHA For Paperwork Reduction Act Notice, see separate instructions.

a and b below. For individual returns, complete lines a and b below:

Form 4797 (2007)

16

17

18

16

17

18a

18b

(a) Description of section 1245, 1250, 1252, 1254,	or 1255	property:			(b) Date acquire (mo., day, yr.)		(c) Date sold (mo., day, yr.)
A							
В							
С							
D		•					
These columns relate to the properties on							
lines 19A through 19D.	<b>&gt;</b>	Property A	Property I	В	Property (	·	Property D
20 Gross sales price (Note: See line 1 before completing.)	20						
21 Cost or other basis plus expense of sale	21						
22 Depreciation (or depletion) allowed or allowable	22						
23 Adjusted basis. Subtract line 22 from line 21	23						
24 Total gain. Subtract line 23 from line 20	24						
25 If section 1245 property:							
a Depreciation allowed or allowable from line 22	25a						
<b>b</b> Enter the <b>smaller</b> of line 24 or 25a	25b						
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
a Additional depreciation after 1975 (see instructions)	26a		<u> </u>				
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b						
c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d				***		
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f	26g						
<ul> <li>If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).</li> <li>a Soil, water, and land clearing expenses</li> <li>b Line 27a multiplied by applicable percentage</li> </ul>	27a 27b						
c Enter the smaller of line 24 or 27b	27c	,	ĺ				
28 If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs (see instructions) b Enter the smaller of line 24 or 28a	28a 28b						
29 If section 1255 property:			1				
Applicable percentage of payments excluded from income under section 126 (see instructions)	29a		1	•		1	
b Enter the smaller of line 24 or 29a (see instructions)	29b						
Summary of Part III Gains. Complete property	columns	A through D throug	h line 29b before	going	to line 30.		
Total gains for all properties. Add property columns	s A throu	igh D, line 24	.,,.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			30	
31 Add property columns A through D, lines 25b, 26g	, 27c, 28	b, and 29b. Enter h	ere and on line 13	3		31	
32 Subtract line 31 from line 30. Enter the portion from from other than casualty or theft on Form 4797, lin	e 6	*				32	
Part IV Recapture Amounts Under Secti (see instructions)	ons 17	9 and 280F(b)(2	) When Busin	ness	Use Drops t	o 50%	or Less
(acc incomond)			·		(a) Section 179		(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation all	owable i	n prior vears	!	33			√-, //-,
				34	-	-	<del></del>
Recapture amount. Subtract line 34 from line 33. S				35		-	

OMB No. 1545-0074

**Alternative Minimum Tax - Individuals** Department of the Treasury Internal Revenue Service (99) ▶ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR	Yours	social security number
SIMON & SHIRLEY BERNSTEIN	3	71 32 5211
Part Alternative Minimum Taxable Income	<del></del>	
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	4,366,123.
2 Medical and dental, Enter the Smaller of Schedule A (Form 1040), line 4, Or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-		
3 Taxes from Schedule A (Form 1040), line 9		71,758.
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions		
5 Miscellaneous deductions from Schedule A (Form 1040), line 27		
6 If Form 1040, line 38, is over \$156,400 (over \$78,200 if married filing separately), enter the amount from line 11		<del>,</del>
of the Itemized Deductions Worksheet on page A-10 of the instructions for Schedule A (Form 1040)	6	<90,277.>
7 Tax refund from Form 1040, line 10 or line 21		
8 Investment interest expense (difference between regular tax and AMT)		480.
9 Depletion (difference between regular tax and AMT)		
10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount		
11 Interest from specified private activity bonds exempt from the regular tax SEE STATEMENT 2		346.
12 Qualified small business stock (7% of gain excluded under section 1202)		
13 Exercise of incentive stock options (excess of AMT income over regular tax income)		
14 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		
15 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	F 1	· · · · · · · · · · · · · · · · · · ·
16 Disposition of property (difference between AMT and regular tax gain or loss)		25.
17 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) STMT 25		5,085.
18 Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 20	5 18	226.
· · · · · · · · · · · · · · · · · · ·	·	
20 Circulation costs (difference between regular tax and AMT)	"	
21 Long-term contracts (difference between AMT and regular tax income)	··	
22 Mining costs (difference between regular tax and AMT)	··	
23 Research and experimental costs (difference between regular tax and AMT)	·	
24 Income from certain installment sales before January 1, 1987	··   ·· · · ·	
25 Intangible drilling costs preference	··	
26 Other adjustments, including income-based related adjustments		
27 Alternative tax net operating loss deduction	27	
28 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line		4,353,766.
28 is more than \$207,500, see instructions)  Part I Alternative Minimum Tax	28	4,333,700.
	A Secretary Log To	
29 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	Commence of the Commence of th	
Single or head of household		
Married filing jointly or qualifying widow(er) 150,000 66,250		0
Married filing separately	29	0.
If line 28 is over the amount shown above for your filing status, see instructions.	And the second s	
30 Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines		4 252 BCC
33 and 35 and skip the rest of Part II	30	4,353,766.
31 ● If you are filing Form 2555 or 2555-EZ, see page 8 of the instructions for the amount to enter.	1	
<ul> <li>If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured</li> </ul>	Constant of the Constant of th	1 170 540
for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here.	31	1,179,543.
• All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by	Service of the Control of the Contro	
26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filling	Commission of the commission o	
separately) from the result.	And the second s	
32 Alternative minimum tax foreign tax credit (see instructions)		911.
33 Tentative minimum tax. Subtract line 32 from line 31	33	1,178,632.
34 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	1,443,239.
35 Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0 Enter here and on		
Form 1040, line 45	35	0.
719481 12-26-07 LHA For Paperwork Reduction Act Notice, see instructions.		Form <b>6251</b> (2007)

A	Tax Computation Using Maximum Capital Gains hates				
	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, and the second sec				1 252 766
	line 3 of the worksheet in the instructions			36	4,353,766.
	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			was amplifyed to the	
	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,	27	276,988.		
20	see instructions for the amount to enter	37	270,500.	Section of the sectio	
	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the	1		multiplication and below to	
	AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ,	38	81.	Paradian salahan	
	see instructions for the amount to enter	36	0.1.	A STATE OF THE STATE OF T	
			!	Continuous and a second and a s	
	AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter			And hand (1967)	
	the smaller of that result or the amount from line 10 of the Schedule D Tax			Sept / provinger	
	Worksheet (as refigured for the AMT, if necessary). If you are filling Form 2555	39	277,069.	Total Control of the	
	or 2555-EZ, see instructions for the amount to enter			40	277,069.
	Enter the smaller of line 36 or line 39			41	4,076,697.
	Subtract line 40 from line 36			<del>                                     </del>	±,0,0,057*
42	Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing				
				42	1,137,975.
	the resultEnter:	• • • • • • • • • • • • • • • • • • • •		T_	<u> </u>
40	• \$63,700 if married filing jointly or qualifying widow(er),			Company of the Compan	
	• \$31,850 if single or married filling separately, or	43	63,700.	Production of the contract of	
	• \$42,650 if head of household.		007,000	Adjust to the second of	
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain				
77	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			the administration of	
	you did not complete either worksheet for the regular tax, enter -0-	44	4,086,869.		
	you did not complete either worksheet for the regular tax, enter -o		1,000,0050		
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	0.		
70	Subtract and 44 month are 40. in 2010 of 1033, officer o	- <del>"</del>		Appropriate Control of the Control o	
46	Enter the smaller of line 36 or line 37	46	276,988.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
0	Entor the difference of the door		,	Control of the contro	
47	Enter the smaller of line 45 or line 46	47	.,	Committee Commit	
48	Multiply line 47 by 5% (.05)		<b>&gt;</b>	48	
				No. 100 Gabor asthroft to the cool asthroft to the cool of the cool of the cool of the cool of the cool of the cool of the the cool of the cool of the the cool of the cool of the	·
49	Subtract line 47 from line 46	49	276,988.	Charles and Charle	
50	Multiply line 49 by 15% (.15)		<b>&gt;</b>	50	41,548.
	If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go	to line	e 51.	Wilders and State of the State	
51	Subtract line 46 from line 40	51	81.		
52	Multiply line 51 by 25% (.25)		<b>&gt;</b>	52	20.
					4 450 540
53	Add lines 42, 48, 50, and 52			53	1,179,543.
54	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply li				
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married fili			ا ـ ـ ا	1 215 554
	the result			54	1,215,554.
مربع	Enter the annulus of the 50 or the 54 here and on the 64 three are filled 5-	55 a- 0	ESS.E7 de not enter		•
ອອ	Enter the <b>smaller</b> of line 53 or line 54 here and on line 31. If you are filing Form 25 this amount on line 31. Instead, enter it on line 4 of the worksheet in the instruction			55	1,179,543.
_	tills amount on line 31. Instead, enter it on line 4 of the worksheet in the instructio	6110		1 22	Form <b>6251</b> (2007)
					1 Juni <b>Jeu 1</b> (2007)

Name     STRING E SHIRLEY BERNSTEIN			ALTERNA:	ATIVE MINIMUM TAX RECONCILIATION REPORT	CONCILIATION REPO	RT		
Form   Description   Process   Form 6251, Libe 16   Form 6251, Libe 18   Form 6251, Libe 19   Chies Apples	Name(s,							Social Security Number
Form   Description   Process   Form 6251, Line 18   Form 6251, Line 18   Form 6251, Line 19   Chies Apparatus   Chies Apparatus	SIMOR	& SHIRLEY						71-32-52
Name	Form					Adjustment		
KI - IIC HOLDINGS INC   5,0826,342   5,085   5,085   5,085	Name	Description	Income	Form 6251, Line 16	6251, Line	Form 6251, Line 18	Form 6251, Line 19	Form 6251 Other Adjustment
The column of	K1-	LIC HOLDINGS INC		22	5033655			
# ANT NET INCOME	Application of the control of the co	* REGULAR UNCOME DEPR ADT	3,828,542. 5,085.		80	with the same of t	A CANADA	The second of th
# AMT NET INCOME 3,833,452. 25. 5,085.  # PERGREN PRIVATE INVE 527.  * REGULAR INCOME 527.  * REGULAR INCOME 19.  * AMT NET INCOME 10,785.  * REGULAR INCOME 10,785.  * REGULAR INCOME 10,785.  * REGULAR INCOME 10,969.  * REGULAR INCOME 10,969.  * REGULAR INCOME 10,969.  * REGULAR INCOME 23,728.  * AMT NET INCOME 23,728.  * REGULAR INCOME 23,728.  * AMT NET INCOME 23,728.  * AMT NET INCOME 6,332.  * AMT NET INCOME 6,332.  * AMT PAL CARRYOVER 6,332.  * AMT NET INCOME 6,332.  * AMT NET INCOME 73,6866.	Section 1	ADJ GAIN/LOSS, EN	25;	22			Annual of the control	The state of the s
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* AMT NET INCOME       10,969.         K1- EVERGREEN PRIVATE INVE         K1- EVERGREEN PRIVATE INVE         * REGULAR INCOME       <3,728.>         * REGULAR INCOME       <6,332.>         AMT PAL CARRYOVER       <6,332.>         * AMT INCOME       <3,686.>	Description of the control of the co	REGULAR INCOME	· C 0 / 0 T	property of the property of th				Activity of the control of the contr
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		ALTERNA	NATIVE MINIMUM TAX RECONCILIATION REPORT	CONCILIATION REPOF	Т.		
Name(s)							Social Security Number
NOMIS	& SHIRLEY BERNSTEIN				1		371-32-5211
For					Adjustment		
Name	Description	Income	Form 6251, Line 16	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251 Other Adjustment
distribution of the control of the c	** TOTAL ADJ & PREF **		25.	5,085.	226.		
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00028							

## Form 1116

Department of the Treasury Internal Revenue Service (99)

#### ALTERNATIVE MINIMUM TAX

### Foreign Tax Credit

(Individual, Estate, or Trust)

Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2007

Attachment

Name Identifying number as shown on page 1 of your tax return 371-32-5211 SIMON & SHIRLEY BERNSTEIN Use a separate Form 1116 for each category of income listed below. See Categories of Income beginning on page 3 of the instructions, Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. X Passive category income c Section 901(i) income e Lump-sum distributions General category income Certain income re-sourced by treaty f Resident of (name of country) > USA Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession. Taxable Income or Loss From Sources Outside the United States (for Category Checked Above) Foreign Country or U.S. Possession Total Α С В (Add cols. A, B, and C.) Enter the name of the foreign country or U.S. VARIOUS possession 1a Gross income from sources within country shown above and of the type checked above: 9,675 9,675. 1a **b** Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) Deductions and losses (Caution: See pages 14 and 15 of the instructions): Expenses definitely related to the income on line 1a (attach statement) Pro rata share of other deductions not definitely related: 19 a Certain itemized deductions or standard deduction b Other deductions (attach statement) 19. c Add lines 3a and 3b 9,675. d Gross foreign source income ..... 13487953. e Gross income from all sources .000717 Divide line 3d by line 3e ..... Multiply line 3c by line 3f Pro rata share of interest expense: a Home mortgage interest (use worksheet on page 14 78 of the instructions) **b** Other interest expense 5 Losses from foreign sources 83. 6 Add lines 2, 3g, 4a, 4b, and 5 7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 Part II Foreign Taxes Paid or Accrued Credit is claimed Foreign taxes paid or accrued for taxes In U.S. dollars In foreign currency (you must check one) (r) Other (s)Total foreign (n) Other Taxes withheld at source on: Taxes withheld at source on: (h) X Pald foreign foreign taxes paid or taxes paid or taxes paid or accrued (add cols. accrued accrued (o) through (r)) (j) Date paid or accrued (k) Dividends (I) Rents and royalties (m) interest (0) Dividends (p) Rents and royalties (a) Interest 12/31/07 525. 911. 386. В c 8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 911. ▶ 8

For Paperwork Reduction Act Notice, see separate instructions.

Form 1116 (2007)

Part	III Figuring the Credit				•
9 Ent	er the amount from line 8. These are your total foreign taxes paid or accrued	1		Company of the Compan	
for	the category of income checked above Part I	9	911.		
<b>10</b> Car	rryback or carryover (attach detailed computation)	. 10		Section 1	
				000000	
11 Ad	d lines 9 and 10	11	911.	200.000	
<b>12</b> Red	duction in foreign taxes	. 12		700 TO	
<b>13</b> Sul	otract line 12 from line 11. This is the total amount of foreign taxes available for credit	**********	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13	911.
<b>14</b> Ent	ter the amount from line 7. This is your taxable income or (loss) from sources outside the			APP (7)	
Uni	ited States (before adjustments) for the category of income checked above Part I	. 14	9,592.		
	justments to line 14	. 15			
<b>16</b> Co	mblne the amounts on lines 14 and 15. This is your net foreign source taxable income.				
(II) VOI	the result is zero or less, you have no foreign tax credit for the category of income u checked above Part I. Skip lines 17 through 21. However, if you are filing more than				
on	e Form 1116, you must complete line 19.)	16	9,592.		
17 Inc	lividuals: Enter the amount from Form 1040, line 41. If you are a nonresident allen,				
ent	ter the amount from Form 1040NR, line 38. Estates and trusts: Enter your taxable				
inc	ome without the deduction for your exemption SEE STATEMENT 25	17	4,225,151.		
Ca	ution: If you figured your tax using the lower rates on qualified dividends or capital	gains, se	e instructions.	1 1	
<b>18</b> Div	ride line 16 by line 17. If line 16 is more than line 17, enter "1"			18	.002270
	fividuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the	amount <b>f</b>	rom		
For	rm 1040NR, line 41.				
Est	tates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form	990-T,			
line	es 36 and 37		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	19	1,179,543.
Ca	ution: If you are completing line 19 for separate category e (lump-sum distributions	s), see pg	. 20 of the instructions.		
	ultiply line 19 by line 18 (maximum amount of credit)			20	2,678.
	ter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22	through 2	6 and enter this		
	ount on line 27. Otherwise, complete the appropriate line in Part IV		<u></u>	21	911.
/	Summary of Credits From Separate Parts III			Till share s	
	edit for taxes on passive category income				
	edit for taxes on general category income				
	edit for taxes on certain income re-sourced by treaty			20000000000000000000000000000000000000	
	edit for taxes on lump-sum distributions				
	d lines 22 through 25			26	
	ter the smaller of line 19 or line 26			27	911.
	duction of credit for international boycott operations			28	
	btract line 28 from line 27. This is your <mark>foreign tax credit.</mark> Enter here and on Form 1040, line				
For	rm 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a		<b>)</b>	29	911.

## Form **4952**

**Investment Interest Expense Deduction** 

2007

Attach to your tax return.

Department of the Treasury internal Revenue Service

Sequence No. 51

Name(s) shown on return		Identifying number
SIMON & SHIRLEY BERNSTEIN		371-32-5211
Part Total Investment Interest Expense		
1 Investment interest expense paid or accrued in 2007 (see instructions) SEE STATEMENT 30	1	99,758.
2 Disallowed investment interest expense from 2006 Form 4952, line 7	2	42,683.
3 Total investment interest expense. Add lines 1 and 2	3	142,441.
Part II Net Investment Income		
4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) STMT 31 4a 122,579.	A Variance of S. (2015)  Control of the Control of	
b Qualified dividends included on line 4a 4b 18,316.		
c Subtract line 4b from line 4a	4c	104,263.
d Net gain from the disposition of property held for Investment 4d 317, 284.	S BO NAME OF THE PARTY OF THE P	
e Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions) 4e 258,207.	Section and Control of the Control o	STATEMENT 33
f Subtract line 4e from line 4d	4f	59,077.
g Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)	4g	
h Investment income. Add lines 4c, 4f, and 4g	4h	163,340.
5 Investment expenses (see instructions) SEE STATEMENT 32	5	29.
6 Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6	163,311.
Part III Investment Interest Expense Deduction		
7 Disallowed investment interest expense to be carried forward to 2008. Subtract line 6 from line 3.		
If zero or less, enter -0-	7	0.

Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions,

142,441.

#### ALTERNATIVE MINIMUM TAX

Form 4952 **Investment Interest Expense Deduction** Department of the Treasury Internal Revenue Service Attach to your tax return. Identifying number Name(s) shown on return 371-32-5211 SIMON & SHIRLEY BERNSTEIN Total Investment Interest Expense Investment interest expense paid or accrued in 2007 (see instructions) SEE STATEMENT 34 99,758. 1 42,203. Disallowed investment interest expense from 2006 Form 4952, line 7 2 Total investment interest expense. Add lines 1 and 2 141,961. Part II Net Investment Income 4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) 4a 122,925. 18,316. Qualified dividends included on line 4a 104,609. Subtract line 4b from line 4a Net gain from the disposition of property held for investment 317,284. 4d Enter the smaller of line 4d or your net capital gain from the disposition

h	Investment income. Add lines 4c, 4f, and 4g	4h	163,686.
5	Investment expenses (see instructions)	5	29.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6	163,657.
Ра	rt III Investment Interest Expense Deduction		
7	Disallowed investment interest expense to be carried forward to 2008. Subtract line 6 from line 3.  If zero or less, enter -0-	7	0.

REGULAR FORM 4952, LINE 8	·	142,441.
LESS RECOMPUTED FORM 4952, L	INE 8	141,961.
INTEREST ADJUSTMENT - FORM 6	5251, LINE 8	480.

258,207.

4g

of property held for investment (see instructions)

Enter the amount from lines 4b and 4e that you elect to include in investment income

Subtract line 4e from line 4d

(see instructions)

Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions.

141,961.

59,077.

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

### **Depreciation and Amortization**

(Including Information on Listed Property) See separate instructions.

SUMMARY

OMB No. 1545-0172

Attach to your tax return. Business or activity to which this form relates

Saquence No. **67** 

SIMON & SHIRLEY BERNSTEIN ALL BUSINESS ACTIVITIES 371-32-5211 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount. See the instructions for a higher limit for certain businesses 125,000. 2 0. 2 Total cost of section 179 property placed in service (see Instructions) 3 500,000. Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Ō. 125.000. 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-, if married filing separately, see instructions (a) Description of property (b) Cost (business use only) 6 TOTAL ALLOWABLE PASS-THROUGH SECTION 179 EXPENSE 7 Listed property. Enter the amount from line 29 41,250. 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 41,250. 9 Tentative deduction. Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2006 Form 4562 10 125,000. 11 Business Income limitation. Enter the smaller of business income (not less than zero) or line 5 41,250. 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 ▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2007 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here .... Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery (a) Classification of property (e) Convention (a) Depreciation deduction (business/investment use in service only - see Instructions) 19a 3-year property 5-year property b c 7-year property d 10-year property 15-year property е 20-year property f 25 yrs. S/L 25-year property g S/L 27.5 yrs. MM Residential rental property h 27.5 yrs. ММ S/L ММ S/L 39 yrs. i Nonresidential real property Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. 40-year 40 yrs. ММ S/L Part IV Summary (see instructions) 21 Listed property. Enter amount from line 28 21 22 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Form **8621**(Rev. December 2004)
Department of the Treasury

# Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund See separate instructions.

OMB No. 1545-1002

Attachment Sequence No. 69

internal nevertue del vice		
Name of shareholder	Identifying number (see page 2	of instructions)
SIMON BERNSTEIN	371-32-5211	
Number, street, and room or suite no. (If a P.O. box, see page 2 of instructions.)	Shareholder tax year: calendar year 2	007 or other tax year beginning
7020 LIONS HEAD LANE	•	ending ,
City or town, state, and ZIP code or country BOCA RATON, FL 33496		
Check type of shareholder filling the return: X Individual Corporation Partnersh	ip S Corporation	Nongrantor Trust Estate
Name of passive foreign investment company (PFIC) or qualified electing fund (QEF)	Employer identification number	
HELICON RE HOLDINGS LTD		•
C/O OLYMPUS REINSURANCE COMPANY		
Address (Enter number, street, city or town, and country.)	Tax year of company or fund: ca	llendar year 2007 or other
CUMBERLAND HOUSE, VICTORIA	tax year beginning	, and
HAMILTON HM 1 BD	ending	,
Part Elections (See instructions.)		
A Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as	a QEF. Complete lines 1a throi	ugh 2c of Part II.
B Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QE	F, elect to recognize gain on the de	emed sale
of my interest in the PFIC. Enter gain or loss on line 10f of Part IV.		
C Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year as		
an amount equal to my share of the post-1986 earnings and profits of the CFC as an exc	ess distribution <i>. Enter this amou</i>	ınt on line 10e of Part IV.
D Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend	the time for payment of tax on the	undistributed
earnings and profits of the QEF until this election is terminated. Complete lines 3a three	ough 4c of Part II to calculate t	he tax that may be deferred.
Note: If any portion of line 1a or line 2a of Part II is includible under section 551	or 951, you may not make this	election. Also, see sections
1294(c) and 1294(f) and the related regulations for events that terminate this e		
Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC		
as an excess distribution the gain recognized on the deemed sale of my interest in the Pl		
and profits deemed distributed, on the last day of its last tax year as a PFIC under section		
F Election to Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mar	ket the PFIC stock that is marketal	ole within the
meaning of section 1296(e). Complete Part III.		
Part II Income From a Qualified Electing Fund (QEF). All QEF shareh Election D, also complete lines 3a through 4c. (See page 5 of instructions.)	olders complete lines 1a through 2	2c. If you are making
1 a Enter your pro rata share of the ordinary earnings of the QEF	1a	Edition services (
b Enter the portion of line 1a that is included in income under		
section 551 or 951 or that may be excluded under section 1293(g)	1b	Section 2 to 1 to
c Subtract line 1b from line 1a. Enter this amount on your tax return as dividend income		1c
	2a	And the second of the second o
b Enter the portion of line 2a that is included in income under		Contraction of the contraction o
section 551 or 951 or that may be excluded under section 1293(g)	2b	The state of the s
c Subtract line 2b from line 2a. This amount is a net long-term capital gain. Enter this amount		
in Part II of the Schedule D used for your income tax return. (See instructions.)		20
3 a Add lines 1c and 2c	I	3a
b Enter the total amount of cash and the fair market value of other property distributed		The state of the s
or deemed distributed to you during the tax year of the QEF. (See instructions.)	3b	Control of the contro
e Enter the portion of line 3a not already included in line 3b that is		
attributable to shares in the QEF that you disposed of, pledged,		
or otherwise transferred during the tax year	3c	
d Add lines 3b and 3c	_\	3d
e Subtract line 3d from line 3a, and enter the difference (if zero or less, enter amount in bracket		3e
Important: If line 3e is greater than zero, and no portion of line 1a or 2a is includible		American American Control of the Con
under section 551 or 951, you may make Election D with respect to the amount on	une se. 4a	Profital de Common Comm
4 a Enter the total tax for the tax year (See instructions.)	Ta	America de programa de la composición del composición de la composición de la composición del composición de la composición del composición de la composición de la composición de la composición del composición del composición de la composición del composición del composición del composición del composición del compos
b Enter the total tax for the tax year determined without regard to	4b	Politication of the Control of the C
the amount entered on line 3e		- Birthold y polyment of the control
extended by making Election D. See instructions.		40
ASSAURAN N. LICHELLE MEANINE DE AAA HIAMAGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGG		<u> </u>

34

## Form **6781**

Gains and Losses From Section 1256 Contracts and Straddles

► Attach to your tax return.

OMB No. 1545-0644
2007
<b>/</b> 11111/
Attachment Seguence No. 82

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

ldentifying number

SI	IMON & SHIRLEY BERNSTEIN															371-32-5211					
Che	ck all applicable boxe	s	ΑĹ		Mixed	stra	add	le elec	ction					Ç		Mixed s	traddle ac	count election			
	(see instructions).  B Straddle-by-straddle identification election  D Net section 1256 c  Part Section 1256 Contracts Marked to Market														contrac	ts loss	election				
Pa	rt I Section 12	256	Co	ntra	acts N	/lar	'ke	d to	Mar	ket											
(a) Identification of account (b) (Loss)														b) (Loss)			(c) Gain				
1 SEE STATEMENT 37																					
																<del>,</del>					
2		dd the amounts on line 1 in columns														( 1,0		159.		3,9	
3								olumns (b) and (c)												2,8	95.
4		m 1099-B adjustments. See instructions and attach schedule												4			<u> </u>				
5	Combine lines 3 and	combine lines 3 and 4											***************************************	5		2,8	<u>95.</u>				
	<b>Note:</b> If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions.															s, see	P Andreas Andreas Principals of the Control of the				
6	If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be												A STATE OF STATE OF								
	carried back. Enter the loss as a positive number										6										
7	Combine lines 5 and	mbine lines 5 and 6												7		2,8	<u>95.</u>				
8	Short-term capital of Schedule D (see it																	8		1,1	58.
9	Long-term capital gain or (loss). Multiply line 7 by 60% (.60). Enter here and include on the appropriate line of Schedule D (see instructions)													ate line	9		1,7	37.			
Pa	irt II Gains and	Lo	SSE	es F	rom S	Stra	ado	lles.	Attac	h a se	parate s	chedu	le li:	sting	g each	straddle	and its co	mpone.	nts.	•	
Se	ction A - Losses				addle	s															
(;	clo	(b) Date entered into or acquired (c) Date closed out or sold			(d) Gross sales price				(e) Cost or other basis plus expense of sale			(f) Loss. If column (e) is more than (d), enter difference. Otherwise, enter -0-			(g) Unrecognized gain on offsetting positions		(h) Recognized loss. If column (f) Is more than (g), enter difference. Otherwise, enter -0-				
10		1	. Duy	1			-		<u> </u>				Citte	1 -0-				<u> </u>			
IU		$\vdash$	-	-	1													1			
	<del></del>	+	+						<del> </del>									<b>-</b>			
		$\vdash$	╁┈																		
112	Enter the short-tern	 n pa	rtion	oflo	osses fi	om	line	10. c	olumr	(h), he	ere and i	include	e on	the	appro	u opriate lin	e of				<del></del>
																		11a	í		,
Schedule D (see instructions)  b Enter the long-term portion of losses from line 10, column (h), here and include on the appropriate line of									·												
Schedule D (see instructions)										11b	(		)								
Se	ction B - Gains	Fro	m S	Stra														-			<u>_</u>
(a) Description of property						out or sold					(d) Gross sales price				(e) Cost or other basis plus expense of sale			(f) Gain. If column (d) Is more than (e), enter difference. Otherwise, enter -0-			
						Mo. Day Yr.											· · · · · · · · · · · · · · · · · · ·	+			
12					ŀ			$\vdash$													
13 a Enter the short-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D												13a									
<b>b</b> Enter the long-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D												13b									
	irt III Unrecogn																		nstruc	ctions)	
(b) Date acquired (c) Fair market value (c)											18 (d) Cos	st or other		(e) Unrecognized gain.							
			(a) Description of prope				erty			Mo.		Day Yr				ousiness day lax year	of Carolina	s adjusted	1	(c) is more than (d) difference. Otherwise,	
14													<del>                                     </del>	$\dashv$		-	$\neg$			<u> </u>	
							-				1			7							

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

# Passive Activity Loss Limitations See separate instructions.

Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

Identifying number

371-32-5211 SIMON & SHIRLEY BERNSTEIN Part 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. column (a)) **b** Activities with net loss (enter the amount from Worksheet 1. 1b column (b)) c Prior years unallowed losses (enter the amount from Worksheet 1, column (c)) d Combine lines 1a, 1b, and 1c Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) **b** Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) c Add lines 2a and 2b All Other Passive Activities 3a Activities with net income (enter the amount from Worksheet 3, 13,977. column (a)) **b** Activities with net loss (enter the amount from Worksheet 3. column (b)) c Prior years unallowed losses (enter the amount from Worksheet 3. <6,374. column (c)) 34 7,603. d Combine lines 3a, 3b, and 3c Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and 7,603. 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 II 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. 5 Enter the smaller of the loss on line 1d or the loss on line 4 Enter \$150,000. If married filing separately, see the instructions 7 Enter modified adjusted gross income, but not less than zero (see the instr.) 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. Subtract line 7 from line 6 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filling separately, see the instructions Enter the smaller of line 5 or line 9 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. 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 Reduce line 12 by the amount on line 10 \_\_\_\_\_ 13 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 14 Part IV Total Losses Allowed Add the income, if any, on lines 1a and 3a and enter the total 15 Total losses allowed from all passive activities for 2007. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return SEE STATEMENT

371-32-5211 Page 2 Form 8582 (2007) SIMON & SHIRLEY BERNSTEIN 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.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) Total, Enter on Form 8582, lines 1a, 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year Name of activity (c) Overall loss deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) Prior years **Current** year Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET 3 Total. Enter on Form 8582, lines 3a, 13,977. <6,374. 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 and line number (c) Special column (c) Name of activity (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions) Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions)

Total

### ALTERNATIVE MINIMUM TAX

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

SIMON & SHIRLEY BERNSTEIN

### Passive Activity Loss Limitations

See separate instructions. ► Attach to Form 1040 or Form 1041.

ldentifying number

371-32-5211

OMB No. 1545-1008

Part 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, column (a)) **b** Activities with net loss (enter the amount from Worksheet 1. 1b column (b)) c Prior years unallowed losses (enter the amount from Worksheet 1, column (c)) ...... d Combine lines 1a, 1b, and 1c 1d 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 2b Worksheet 2, column (b) c Add lines 2a and 2b **All Other Passive Activities** 3a Activities with net income (enter the amount from Worksheet 3, 14,161. column (a)) **b** Activities with net loss (enter the amount from Worksheet 3, 3b column (b)) c Prior years unallowed losses (enter the amount from Worksheet 3, <6.332. column (c)) 7.829. d Combine lines 3a, 3b, and 3c ..... 3d Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c, Do not complete Form 8582. Report the losses on the forms and schedules normally used 7,829. 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 II 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. Enter the smaller of the loss on line 1d or the loss on line 4 Enter \$150,000. If married filing separately, see the instructions 7 Enter modified adjusted gross income, but not less than zero (see the instr.) 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. Subtract line 7 from line 6

Multiply line 8 by 50% (.5). **Do not** enter more than \$25,000. If married filling separately, see the instructions 9 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. 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 Reduce line 12 by the amount on line 10 13 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 14 Part IV Total Losses Allowed Add the income, if any, on lines 1a and 3a and enter the total Total losses allowed from all passive activities for 2007. Add lines 10, 14, and 15. See the Instructions 6,332 to find out how to report the losses on your tax return SEE STATEMENT 16 LHA 719761/10-11-07 For Paperwork Reduction Act Notice, see separate instructions. Form 8582 (2007)

ALTERNATIVE MINIMUM TAX 371-32-5211 Form 8582 (2007) SIMON & SHIRLEY BERNSTEIN 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.) Current year Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) Total, Enter on Form 8582, lines 1a, 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year Name of activity (c) Overall loss deductions (line 2a) unallowed deductions (line 2b) Total, Enter on Form 8582, lines 2a Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) Overall gain or loss Prior years **Current** year Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 3a, 14,161. <6,332. 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 and line number (c) Special column (c) Name of activity (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions)

**Total** 

Worksheet 5 - Allocation of Oliai	TOWEU LOSSES (See Instructions.)			
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total	<b>&gt;</b>			

719762 10-11-07

### **Domestic Production Activities Deduction**

OMB No. 1545-1984

Department of the Treasury ► Attach to your tax return. ► See separate instructions. Internal Revenue Service Name(s) as shown on return Identifying number SIMON & SHIRLEY BERNSTEIN 371-32-5211 155. 1 Domestic production gross receipts (DPGR) 2 Allocable cost of goods sold. If you are using the small business simplified overall method, skip lines 2 and 3 3 If you are using the section 861 method, enter deductions and losses allocable 56. to DPGR. All others, see instructions 4 If you are using the small business simplified overall method, enter the amount of cost of goods sold and other deductions or losses you ratably apportion to DPGR. All others, skip line 4 129. 5 Add lines 2 through 4 26. 6 Subtract line 5 from line 1 ß 7 Qualified production activities income from estates, trusts, and certain partnerships and S corporations (see 7 instructions) 8 Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to line 10 26. 9 Amount allocated to beneficiaries of the estate or trust (see instructions) 10 Qualified production activities income. Estates and trusts, subtract line 9 from line 8, all others, enter amount 26. from line 8, If zero or less, enter ·0· here, skip lines 11 through 19, and enter ·0· on line 20 11 Income limitation (see instructions): Individuals, estates, and trusts. Enter your adjusted gross income figured without the domestic production activities deduction • All others. Enter your taxable income figured without the domestic production activities deduction (tax-exempt organizations, see instructions) 4,670,245. 11 12 Enter the smaller of line 10 or line 11. If zero or less, enter -0- here, skip lines 13 through 19, 26. and enter -0- on line 20 2. 13 Enter 6% of line 12 14 Form W-2 wages (see instructions) 15 Form W-2 wages from estates, trusts, and certain partnerships and S corporations (see instructions) 15 16 Add lines 14 and 15. Estates and trusts, go to line 17, all others, skip line 17 and go to line 18 17 Amount allocated to beneficiaries of the estate or trust (see instructions) 17 18 Estates and trusts, subtract line 17 from line 16, all others, enter amount from line 16 Form W-2 wage limitation. Enter 50% of line 18 Enter the smaller of line 13 or line 19 21 Domestic production activities deduction from cooperatives. Enter deduction from Form 1099-PATR, box 6 22 Expanded affiliated group allocation (see instructions) 23 Domestic production activities deduction. Combine lines 20 through 22 and enter the result here and on Form 1040, line 35; Form 1120, line 25; or the applicable line of your return

# Qualified Production Activity Income Schedule

Name SIMON & SHIRLEY BERNSTEIN								Identifying Number: 371-32-5211		
	Domestic Production		Directly Allocable Expenses	llocable ises	÷	Interest B Ap	Interest Expense Allocation/ Apportionment	ication/ t	Totol	Qualified
Description	Gross Receipts (DPGR)	DPGR Ratio	Costs of Goods Sold	Other Costs	Apportioned Expenses	Allocable Assets	Assets Ratio	Interest Expense	Qualified	Activity
EVERGREEN PRIVATE INVESTMENTS	155.	. 000012		56.	0 0				129.	26.
	12,001,039.	_	40.4	1					#0#	
TOTAL	. # CD , LOO , 21		1 2 1	90.						
TOTAL FROM QUALIFIED ACTIVITIES	155.	ZIOOOO.	73.	.56.	0				129.	26.
						-				
						:				
	•					ı				
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					1		1			

Form 1116 U.S. and Fo	oreign Source Income Sumn	nary	
NAME SIMON & SHIRLEY BERNSTEIN			371-32-5211
SIMON & SHIKHEI BEKNSIEIN			FOREIGN
INCOME TYPE	TOTAL	U.S.	PASSIVE
Compensation	404,199.	404,199.	
Dividends/Distributions	61,390.	61,390.	
Interest	61,182.	61,182.	
Capital Gains	335,646.	335,646.	
Business/Profession	8,795,65 <b>4.</b> 7.	8,795,654.	7.
Rent/Royalty State/Local Refunds	/•		/ •
Partnership/S Corporation	3,797,324.	3,792,345.	4,979.
Trust/Estate	3,737,324.	J,152,545.	4,010.
Other Income	32,173.	27.484.	4,689.
Gross Income	13,487,575.	27,484. 13,477,900.	9,675.
aross mounts			
Laser	·		
Less: Section 911 Exclusion			
Capital Losses	17,816.	17,816.	
Capital Gains Tax Adjustment		,	
Total Income - Form 1116	13,469,759.	13,460,084.	9,675.
Deductions:			
Business/Profession Expenses		8,795,695.	
Rent/Royalty Expenses	5.		5.
Partnership/S Corporation Losses	3,814.	3,814.	
Trust/Estate Losses			
Capital Losses			
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction			
Self-employment Health Insurance			
Keogh Contributions Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments			
Capital Gains Tax Adjustment			
Total Deductions	8,799,514.	8,799,509.	5.
Adjusted Gross Income	4,670,245.	4,660,575.	9,670.
Less Itemized Deductions:			
Specifically Allocated	45,477.	45,477.	
Home Mortgage Interest	70,145.	70,095.	50.
Other Interest	142,441.	142,441.	
Ratably Allocated	46,059.	46,026.	33.
Total Adjustments to Adjusted Gross Income	304,122.	304,039.	83.
Taxable Income Before Exemptions	4,366,123.	4,356,536.	9,587.

### **Allocation of Itemized Deductions**

NAME

SIMON & SHIRLEY BE	RNSTEIN			3′	71-32-5211
	Total Itemized	Itemized Deductions After Sec. 68		Form 1116	
	Deductions	Reduction	Specifically U.S.	Specifically Foreign	Ratable
Taxes	71,758.	46,047.			46,047.
Interest - Not including investment Interest	109,312.	70,145.	70,095.	50.	
Contributions	70,869.	45,477.	45,477.		
Miscellaneous Deductions Subject to 2%					
Other Miscelianeous Deductions - Not Including Gambling Losses	19.	12.			12.
Foreign Adjustment					
Total Itemized Deductions Subject to Sec. 68	251,958.	161,681.			
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental					
Investment Interest	142,441.	142,441.	142,441.		
Post Aug. 27 Contributions					
Casualty Losses	-				
Gambling Losses					
Foreign Adjustment		en e			
Total Itemized Deductions	394,399.				
Total Allowed on Schedule A		304,122.	258,013.	50.	46,059.

### Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

### SIMON & SHIRLEY BERNSTEIN

371-32-5211

### Foreign income Category

### PASSIVE INCOME

	rolongh meeting dategory				······································
legu	lar	2004	2005	2006	2007
1.	Foreign tax paid/accrued		And the second s		911
	FTC carryback to 2007	The state of the s			
	for amended returns	The Print of A Company of Commany and the Second Annual An		No. 1 April 10 April	
3.	Reduction allocated to excluded income			The second secon	
4.	Foreign tax available	A CONTROL OF THE CONTROL OF T		Security Security (1997) and the security of t	911
5.	Maximum credit allowable				3,290
6.	Unused foreign tax ( + )			Ì	
	or excess of limit ( - )		i	<3,338.>	<2,379
7.	Foreign tax carryback	22/17 - 0x (v ); v 0/1/0 x 2/0 x 0x	An American Control of the Control o		·
8.	Foreign tax carryforward				·
9.	Less treaty adjustment	Company of the compan			
	Foreign tax or excess limit remaining			<3,338.>	<2,379
	Total foreign taxes from all available years to be carried to next year	.,.,			
		2000	2001	2002	2003
	Foreign tax paid/accrued			Toping California (California	
2.	FTC carryback to 2007				
	for amended returns				
	Reduction allocated to excluded income				
4.	Foreign tax available	The second secon			
	Maximum credit allowable		Martin and the same of the sam		
6.	Unused foreign tax ( + )				
	or excess of limit ( - )				
7.	Foreign tax carryback	A contract of a			
8.	Foreign tax carryforward				
9.	Less treaty adjustment		Andrews and the second		
	Foreign tax or excess limit remaining				
		1999			
1.	Foreign tax paid/accrued				
2.	FTC carryback to 2007				
	for amended returns				
3.	Reduction allocated to excluded income				
	Foreign tax available	\$2.400 12 W. S. SWALLES AND TO SERVICE STATE OF THE SERVICE STATE STATE			
	Maximum credit allowable				
	Unused foreign tax ( + )				
	or excess of limit ( - )				
7.	Foreign tax carryback	COUNTY NO YOUR TRANSPORTED AND PROPERTY OF THE			
	Foreign tax carryforward				
8.					

### Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

### SIMON & SHIRLEY BERNSTEIN

371-32-5211

### Foreign Income Category

### PASSIVE INCOME

Alten	native Minimum Tax	2004	2005	2006	2007
	Foreign tax paid/accrued	The state of the s			911.
	FTC carryback to 2007			Section 2012 of the control of the c	···
	for amended returns	The second of th		I beginner hander in ein der sonere geltere (m. 19. aus judig gelte (a. halb mit 19. a.). beleich (a. b.). best der der der der der der der der der der	
3.	Reduction allocated to excluded income	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Part of the second seco	Comments of the Comments of th	
4.	Foreign tax available	An experiment of programs in a risk of the control			911
5.	Maximum credit allowable			SECRETARY AND CONTROL CONTROL OF A CONTROL O	2,678
6.	Unused foreign tax ( + )				
	or excess of limit ( - )			<2,743.	<1,767.
7.	Foreign tax carryback		A figure of production of the control of the contro		
8.	Foreign tax carryforward				
9.	Less treaty adjustment	And the second s		A property of the control of the con	
10.	Foreign tax or excess limit remaining			<2,743.	<1,767 ×
	Total foreign taxes from all available years to be carried to next year				
		2000	2001	2002	2003
4	Foreign tax paid/accrued	(Allen and a second		A Warren A Phone To State or your a revenue and a work of the state of	
	FTC carryback to 2007			A burner and the second of the	
۴	for amended returns			The second secon	
3	Reduction allocated to excluded income		The second secon		
4.	Foreign tax available	Other and the second of the se	A CONTROL OF THE PROPERTY OF T	The second of th	
5.	Maximum credit allowable				The second secon
	Unused foreign tax ( + )		1 min	Year a second and the	
٠.	or excess of limit ( - )				
7	Foreign tax carryback	BORNING TO WIT THRAVE THE STREET SHOULD AND A STREET			
	Foreign tax carryforward				
9.		A had become a very management of the common of			Application of the county of t
	Foreign tax or excess limit remaining				
	-		1		
		1999			
1.	Foreign tax pald/accrued				
2.	FTC carryback to 2007				
_	for amended returns				
3.	Reduction allocated to excluded income	01.0 m			
4,	Foreign tax available	Order to the second of the sec			
5.	Maximum credit allowable	an variable de l'acceptant de la constant de la con			
6.	Unused foreign tax (+)				
	or excess of limit ( - )				

42

Foreign tax carryback
 Foreign tax carryforward
 Less treaty adjustment
 Foreign tax or excess limit remaining

	ABLE 1 (Keep for your records.)		
P	art Qualified Loan Limit		
1	Enter the average balance of all your grandfathered debt. See line 1 instructions	1	
	Enter the average balance of all your home acquisition debt. See line 2 instructions	2	
3	Enter \$1,000,000 (\$500,000 if married filing separately)	3	
4	Enter the targer of the amount on line 1 or the amount on line 3	4	_
	Add the amounts on lines 1 and 2. Enter the total here	5	
6	Enter the smaller of the amount on line 4 or the amount on line 5	6	
7	Enter \$100,000 (\$50,000 if married filling separately). See line 7 instructions for a limit that may apply	7	
8	Add the amounts on lines 6 and 7. Enter the total. This is your qualified loan limit	8	
P	art II Deductible Home Mortgage Interest		
9	Enter the total of the average balances of all mortgages on all qualified homes. See line 9 instructions	9	
	• If line 8 is less than line 9, GO ON to line 10.		
	• If line 8 is equal to or more than line 9, STOP HERE. All of your interest on all the mortgages included on line 9 is deductible	[ ]	
	as home mortgage interest on Schedule A (Form 1040).		
10	Enter the total amount of interest that you paid. See line 10 instructions	10	
	Divide the amount on line 8 by the amount on line 9. Enter the result as a decimal amount (rounded to three places)	11	Х
12	Multiply the amount on line 10 by the decimal amount on line 11. Enter the result. This is your deductible home		
	mortgage interest. Enter this amount on Schedule A (Form 1040)	12	
13	Subtract the amount on line 12 from the amount on line 10. Enter the result. This is not home mortgage interest.		·
	See line 13 instructions	13	

FORM	M 1040 SOCIAL SECURITY BENEFITS WORKSHEET	STATEMENT 1
A. X B.	CK ONLY ONE BOX: SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER) MARRIED FILING JOINTLY MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE AT ANY TIME DURING 2007	
D.	MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SP FOR ALL OF 2007	OUSE
1.	ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON	ſ
	FORM 1040, LINE 20A	18,926.
4.	INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB 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	3-1099 4,652,143.
5. 6.	ADD LINES 2, 3, AND 4	4,671,069.
	LINE NEXT TO LINE 36	0. 4,671,069.
9.	\$-0- IF YOU CHECKED BOX C	RE
10.	[X] YES. SUBTRACT LINE 8 FROM LINE 7 ENTER \$9,000 IF YOU CHECKED BOX A OR D, \$12,000 IF YOU CHECKED BOX B	4,639,069.
12. 13. 14. 15. 16.	\$-0- IF YOU CHECKED BOX C	-0 4,627,069. 12,000. 6,000. 6,000.
18.	TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE * ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B	32,173.

FORM 1040 PERSONAL EXEMPTION WORKSHEET	STATEMENT
1. IS THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT SELOW FOR YOUR FILING STATUS?  NO. STOP. MULTIPLY \$3,400 BY THE TOTAL NUMBER OF EXEMPTION ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42 YES. CONTINUE	NS CLAIMED
2. MULTIPLY \$3,400 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED	
ON FORM 1040, LINE 6D	6,800
3. ENTER THE AMOUNT FROM FORM 1040, LINE 38 4,670,249 4. ENTER THE AMOUNT FOR YOUR FILING STATUS 234,600 SINGLE \$156,400 MARRIED FILING JOINTLY OR WIDOW(ER) \$234,600 MARRIED FILING SEPARATELY \$117,300 HEAD OF HOUSEHOLD \$195,500	
5. SUBTRACT LINE 4 FROM LINE 3	· ·
0.0004 TO 1)	6.
7. MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT	•
AS A DECIMAL	
9. DIVIDE LINE 8 BY 1.5	
10. SUBTRACT LINE 9 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.	
FORM 1040 TAX-EXEMPT INTEREST	STATEMENT
NAME OF PAYER	AMOUNT
PERSHING LLC (17) FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - EVERGREEN PRIVATE INVESTMENT FUNDS	13,951 119 1
TOTAL TO FORM 1040, LINE 8B	14,071

FORM 1040	WAGES RECE	VED AND TAX	ES WITHHE	LD	STATE	MENT	4
T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA I	MEDICA TAX	
T ARBITRAGE INTERNATIONAL HOLDINGS	404,199.	53,130.			6,045.	6,15	58.
TOTALS	404,199.	53,130.			6,045.	6,15	8.
FORM 1040	QUA	ALIFIED DIVI	DENDS		STATE	MENT	5
NAME OF PAYER				DINARY VIDENDS		LIFIED IDENDS	
PERSHING LLC (17) PERSHING LLC (213) PERSHING LLC (221) PERSHING LLC (668)				9,135. 2,516. 12,282. 10,068.		7,75 2,40 3,40 3,81	)4. )5.
FROM K-1 - EVERGREEN INVESTMENTS FUNDS FROM K-1 - EVERGREEN FUNDS		STMENT		968. 383.			38. 04.
TOTAL INCLUDED IN FO	RM 1040, LINE	9В				18,31	
FORM 1040	FEDERAI	L INCOME TAX	K WITHHELD		STATE	MENT	6
T S DESCRIPTION					AM	OUNT	
T ARBITRAGE INTERNAT T EVERGREEN PRIVATE T EVERGREEN PRIVATE	INVESTMENTS FU	UNDS				53,13	30. 1. 3.
TOTAL TO FORM 1040,	LINE 64					53,13	3 <b>4.</b>

SCHEDULE A MISCELLANEOUS	DEDUCTIONS :	SUBJEC'	TO FLOO	OR .	STATEMENT	7
DESCRIPTION					AMOUNT	
WACHOVIA BANK FROM K-1 - EVERGREEN PRIVATE IN FROM K-1 - EVERGREEN PRIVATE IN FROM K-1 - POWERSHARES DB COMMO FROM K-1 - POWERSHARES DB G10 C	VESTMENT FUNDITY INDEX T	os	3	-		3.
TOTAL TO SCHEDULE A, LINE 23				=	24,82	28.
SCHEDULE A POINTS N	OT REPORTED	ON FOR	M 1098		STATEMENT	8
DESCRIPTION	DATE RE- FINANCED		TAL INTS	AMORT. PERIOD /MOS.	AMORTIZAT THIS YEA	
WELLS FARGO	01/01/01		26,759.	180	1,78	34.
TOTAL TO SCHEDULE A, LINE 12					1,7	34.
SCHEDULE A C	ASH CONTRIBU	rions			STATEMENT	9
DESCRIPTION			AMOU 50% LI		AMOUNT 30% LIMIT	
AMERICAN HEART ASSOCIATION SUSAN KOMEN CURE FOR CANCER BOCA RATON COMMUNITY HOSPITAL CANCER SOCIETY VARIOUS ORGANIZED CHARITIES FROM K-1 - EVERGREEN PRIVATE IN FROM K-1 - LIC HOLDINGS INC	IVESTMENTS FU	nds	1 2 1 1	7,000. 0,000. 0,000. 5,000. 4,500. 3. 4,366.		
SUBTOTALS		•	7	0,869.		
TOTAL TO SCHEDULE A, LINE 16		:			70,8	69.

SCHEDULE A	INVESTMENT INTEREST	STATEMENT	10
DESCRIPTION		AMOUNT	
STANFORD GROUP WELLS FARGO BANK DISALLOWED INVESTMENT FROM K-1 - EVERGREEN FROM K-1 - EVERGREEN		85,05 42,68 8,03 6,65	3.
TOTAL TO SCHEDULE A,	LINE 14	142,44	1.
SCHEDULE A	MEDICAL AND DENTAL EXPENSES	STATEMENT	11
DESCRIPTION		AMOUNT	
	THHELD THHELD	1,66 1,12	
TOTAL TO SCHEDULE A,	LINE 1	2,78	8.

SCHEDULE A ITEMIZED DEDUCTIONS WORKSHEET	STATEMENT 12
1. ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28	. 394,399.
14, AND 20, PLUS ANY GAMBLING AND CASUALTY OR THEFT LOSSES INCLUDED ON LINE 28	. 142,441.
IF YES, SUBTRACT LINE 2 FROM LINE 1	•
SEPARATELY)	•
LINE 29.  IF YES, SUBTRACT LINE 6 FROM LINE 5 4,513,845  8. MULTIPLY LINE 7 BY 3% (.03)	. 135,415. . 45,138.
12. TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 11 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 29	304,122.
SCHEDULE A STATE AND LOCAL GENERAL SALES TAXES	STATEMENT 13
DESCRIPTION	AMOUNT
STATE SALES TAX LOCAL SALES TAX	1,719. 143.
TOTAL TO SCHEDULE A, LINE 5	1,862.

SCI	HEDULE A GENERAL SALES TAX DEDUCTION WORKSHEET	STATEMENT	14
1	ENTER YOUR STATE GENERAL SALES TAXES FROM THE APPLICABLE TABLE. FLORIDA	1,7	19.
	IF, FOR ALL OF 2007, YOU LIVED ONLY IN CONNECTICUT, THE DISTRICT OF COLUMBIA, HAWAII, INDIANA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, MISSISSIPPI, NEW JERSEY,		
	RHODE ISLAND, VIRGINIA, OR WEST VIRGINIA, SKIP LINES 2 THROUGH 5, ENTER -0- ON LINE 6, AND GO TO LINE 7. OTHERWISE, GO TO LINE 2.		
2	DID YOU LIVE IN ALASKA, ARIZONA, ARKANSAS (TEXARKANA ONLY), CALIFORNIA (LOS ANGELES COUNTY ONLY), COLORADO, GEORGIA, ILLINOIS,		
	LOUISIANA, NEW YORK STATE, OR NORTH CAROLINA IN 2007? IF NO, ENTER -0 IF YES, ENTER YOUR LOCAL GENERAL SALES		
3	TAXES FROM THE APPLICABLE TABLE.  DID YOUR LOCALITY IMPOSE A LOCAL GENERAL		
	SALES TAX IN 2007? RESIDENTS OF CALIFORNIA, NEVADA AND TEXARKANA, ARKANSAS, SEE INSTRUCTIONS. THE NO. CELL LINES 3 THROUGH 5 ENTER		
	IF NO, SKIP LINES 3 THROUGH 5, ENTER -0- ON LINE 6 AND GO TO LINE 7. IF YES, ENTER YOUR LOCAL GENERAL SALES		
4	TAX RATE, BUT OMIT PERCENTAGES5000 BOCA RATON DID YOU ENTER -0- ON LINE 2 ABOVE?		
4	IF NO, SKIP LINES 4 AND 5 AND GO TO LINE 6. IF YES, ENTER YOUR STATE GENERAL SALES		
5	TAX RATE, BUT OMIT PERCENTAGES. 6.0000 DIVIDE LINE 3 BY LINE 4. ENTER THE RESULT AS A DECIMAL (ROUNDED TO AT LEAST THREE PLACES)0830		
6	DID YOU ENTER -0- ON LINE 2 ABOVE? IF NO, MULTIPLY LINE 2 BY LINE 3.		
<b>C</b> 3	IF YES, MULTIPLY LINE 1 BY LINE 5.		L43
bΑ	ADD LINE 1 AND LINE 6.	Τ, δ	362
	PART-YEAR DAYS RATE. MULTIPLY LINE 6A BY LINE 6B.	1.000	0000 362
7	ENTER YOUR GENERAL SALES TAXES PAID ON SPECIFIED ITEMS, IF ANY.		
8	DEDUCTION FOR GENERAL SALES TAXES. ADD LINES 6C AND 7. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 5 AND CHECK BOX "B" ON THAT LINE.	1,8	362

SCHEDULE B INTEREST INCO	ME	STATEMENT	15
NAME OF PAYER		AMOUNT	
BANK OF AMERICA		4,64	9.
PERSHING LLC (213)		75	
PERSHING LLC (221)		58 1 61	
PERSHING LLC (668) STANFORD INTERNATIONAL BANK LTD (839(		1,61 16,93	9.
STANFORD INTERNATIONAL BANK LTD (494		1,35	
WACHOVIA BANK (945)		1,03	9.
WACHOVIA BANK (315)		11	
FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUND		1,41	
FROM K-1 - EVERGREEN PRIVATE INVESTMENT FUNDS FROM K-1 - LIC HOLDINGS INC		1,75 28,62	
FROM K-1 - LIC HOLDINGS INC FROM K-1 - UNITED STATES NATURAL GAS FUND L.P	•		7.
FROM K-1 - POWERSHARES DB COMMODITY INDEX TRA		1,04	
FROM K-1 - POWERSHARES DB G10 CURRENCY		1,23	3.
TOTAL TO SCHEDULE B, LINE 1		61,18	2.
SCHEDULE D NET SHORT-TERM GAIN C FORMS 6252, 4684, 678		STATEMENT	16
DESCRIPTION OF PROPERTY		GAIN OR LO	)SS
FORM 6781, PART I		1,15	8.
TOTAL TO SCHEDULE D, PART I, LINE 4		1,15	8.
SCHEDULE D NET LONG-TERM GAIN OR LO 4797, 2439, 6252, 4684,		STATEMENT	17
DESCRIPTION OF PROPERTY	GAIN OR LOSS	28% GAIN	1
FORM 6781, PART I FORM 4797	1,737. 546.		
TOTAL TO SCHEDULE D, PART II, LINE 11	2,283.		

				·
SCHEDULE D	NET SHORT-TERM GAIN OR LO PARTNERSHIPS, S CORPORATIONS, AN		STATEMENT	18
DESCRIPTION OF	ACTIVITY		GAIN OR	LOSS
EVERGREEN PRIV	ATE INVESTMENTS FUNDS ATE INVESTMENT FUNDS COMMODITY INDEX TRACKING G10 CURRENCY		34,	036. 916. 106.>
TOTAL TO SCHED	ULE D, PART I, LINE 5		53,	849.
SCHEDULE D	NET LONG-TERM GAIN OR LOS PARTNERSHIPS, S CORPORATIONS, AN		STATEMENT	19
DESCRIPTION OF	ACTIVITY	GAIN OR LOSS	28% GA	IN
EVERGREEN PRIV	ATE INVESTMENTS FUNDS ATE INVESTMENT FUNDS COMMODITY INDEX TRACKING	13,693. 41,318. <251.	>	-
TOTAL TO SCHED	ULE D, PART II, LINE 12	54,760.		
SCHEDULE D	CAPITAL GAIN DISTRIBUT	IONS	STATEMENT	20
NAME OF PAYER		TOTAL CAPITAL GAI	N 28% GA	IN
PERSHING LLC (PERSHING LLC (PERSHING LLC (	221)	17,677 3,873 1,918	•	
TOTALS TO SCHE	EDULE D, LINE 13	23,468	•	

SCHI	EDULE D UNRECAPTURED SECTION 1250 GAIN	STATEMENT	21
1.	IF YOU HAVE A SECTION 1250 PROPERTY IN PART III OF FORM 4797 FOR WHICH YOU MADE AN ENTRY IN PART I OF FORM 4797, ENTER THE SMALLER OF LINE 22 OR LINE 24 OF FORM 4797 FOR THAT PROPERTY. IF YOU DID NOT HAVE ANY SUCH PROPERTY, GO TO LINE 4		
2.	ENTER THE AMOUNT FROM FORM 4797, LINE 26G, FOR THE PROPERTY FOR WHICH YOU MADE AN ENTRY ON LINE 1		
	SUBTRACT LINE 2 FROM LINE 1		
5.	SALES OF TRADE OR BUSINESS PROPERTY HELD MORE THAN 1 YEAR ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1 FROM A PARTNERSHIP OR AN S CORPORATION AS "UNRECAPTURED SECTION 1250 GAIN"		59.
6.	ADD LINES 3 THROUGH 5	<del></del>	59.
7.	ENTER THE SMALLER OF LINE 6 OR THE GAIN FROM FORM 4797, LINE 7		
	ENTER THE AMOUNT, IF ANY, FROM FORM 4797, LINE 8		
	SUBTRACT LINE 8 FROM LINE 7. IF ZERO OR LESS, ENTER -0 ENTER THE AMOUNT OF ANY GAIN FROM THE SALE OR EXCHANGE OF AN INTEREST IN A PARTNERSHIP ATTRIBUTABLE TO UNRECAPTURED		59.
11.	SECTION 1250 GAIN	•	
12.	INVESTMENT COMPANY)	ALES ON	22.
	ADD LINES 9 THROUGH 12	•	81.
15.	4 OF THE 28% RATE GAIN WORKSHEET ENTER THE (LOSS), IF ANY, FROM SCH D, LINE 7.  IF SCH D, LINE 7, IS ZERO OR A GAIN ENTER -0	) <b>.</b>	
16.	ENTER YOUR LONG-TERM CAPITAL LOSS CARRYOVERS FROM SCHEDULE D, LINE 14, AND SCHEDULE K-1 (FORM 1041),		
17.	LINE 11C		0.
18.	SUBTRACT LINE 17 FROM LINE 13. IF ZERO OR LESS, ENTER -0 ENTER THE RESULT ON SCHEDULE D, LINE 19	•	81.

SCHEDULE E			ОТН	ER EXPENSI	ES 	STA	TEMENT	22
EVERGREEN :	PRIVATE IN	IVESTM	ENTS FUNDS	- ROYALTY				
DESCRIPTION	N						AMOUNT	
ROYALTY INCINVESTMENT		CTION	- EVERGREEN	PRIVATE				5.
TOTAL TO S	CHEDULE E	PAGE	1, LINE 18	l		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	·····	5.
SCHEDULE E	INCON	1E OR	(LOSS) FROM	PARTNERS	HIPS AND S C	ORPS STA	ATEMENT	23
NAME								
EMPLOYER	ANY NOT X AT IF		PASSIVE	PASSIVE	NONPASSIVE			
ID NO.	RISK FRN	CODE	LOSS 	INCOME	LOSS	DEDUCTION	INCOM	E
	DD TX13 ME T3	P			0.			
EVERGREEN 56-2114125 SEC 59(E)(		P	ENTS FUNDS	10,826.	594.			
56-2114125 EVERGREEN 52-2223144 PRIOR YEAR 52-2223144	PRIVATE II	P IVESTM P	41. ENT FUNDS 6,374.	2,646.	78.			
32-6042243	TES NATURA	P * ODITY P *	INDEX TRACK	IING	8.	41,250.	38283	42.
POWERSHARE 16-6562496		CURREN P	O.					
TOTALS TO	SCH. E, Lì	. 29	6,415.	13,472.	680.	41,250.	38283	342.

<sup>\*</sup> ENTIRE DISPOSITION OF PASSIVE ACTIVITY

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STATEMENT

FORM 1116

	AMT/FORETON		-AMOUNT IN U.S	. DOTILARS	
DATE PAID ACCRUED	CURRENCY	DIVIDENDS			OTHER
VARIOUS .2/31/07	0.	525.			
VARIOUS	0.				105
VARIOUS	0.				281
		525.			386
TOTAL TO FORM 1116,	PART II, LIN	E 8		,	911
PRIOR YEAR TAXES PA		RENT YEAR: OREIGN AMT	CONV. RATE	U.S. AMT	

SUMMARY OF FOREIGN TAXES PAID OR ACCRUED

FORM	M 1116		CAPITAL GAINS T FOR LINE 17		STATEMENT	25
1	ENTER THE AMOUNT IF YOU ARE A NONR AMOUNT FROM FORM	ESIDENT ALIEN,	ENTER THE		4,366,1	.23.
2	ENTER WORLDWIDE 2	8% GAINS				
3	MULTIPLY LINE 2 B	Y 0.2000				
4	ENTER WORLDWIDE 2	5% GAINS		81.		
5	MULTIPLY LINE 4 B	Y 0.2857		23.		
6	ENTER WORLDWIDE 1 QUALIFIED DIVIDEN			276,988.		
7	MULTIPLY LINE 6 B	Y 0.5714		158,271.		
8	ENTER WORLDWIDE 5 QUALIFIED DIVIDEN					
9	MULTIPLY LINE 8 B	Y 0.8571				
10	ADD LINES 3, 5, 7	, AND 9			158,2	94.
11	SUBTRACT LINE 10 RESULT HERE AND C			-	4,207,8	329.
===	W 6251	DACCI	DEFENTATION GIVE		STATEMENT	26
F.OKI	M 6251	PASSI	IVE ACTIVITIES		STATEMENT	∠6
			NET INCOM	E (LOSS)		
NAM	E OF ACTIVITY	FORM	AMT	REGULAR	ADJUSTMEN	T'T
INVI EVEI INVI	RGREEN PRIVATE ESTMENTS FUNDS RGREEN PRIVATE ESTMENTS FUNDS RGREEN PRIVATE	FORM 4797 SCH E FORM 4797	527. 10,969.	527. 10,785.	1	L8 <b>4.</b>
INV	ESTMENT FUNDS RGREEN PRIVATE	SCH E	19.	19.		
	ESTMENT FUNDS		<3,686.>	<3,728.>		42.
	AL TO FORM 6251, I	.TNF 18			2	226.

FORM 6251	INTEREST	FROM	SPECIFIED	PRIVA	PE ACTIV	/ITY	BONDS	STATEMENT	27
DESCRIPTION								AMOUNT	
PERSHING LLC	(17)						•	3	46.
TOTAL TO FORM	M 6251, LINE	11						3	46.
FORM 6251	DEPRECIATION	ON A	SSETS PLAC	ED IN	SERVICE	AFTE	R 1986	STATEMENT	28
DESCRIPTION								TRUUOMA	
FROM K-1 - L	IC HOLDINGS II	NC					•	5,0	85.
TOTAL TO FORM	M 6251, LINE	17					•	5,0	85.

ORM 1116 ALTERNATIVE MINIMUM TAX FOREIGN WORLDWIDE CAPITAL GAI WORKSHEET FOR LINE 1	INS	STATEMENT 29
1 ENTER THE AMOUNT FROM FORM 6251, LINE 28		4,353,766.
2 ENTER WORLDWIDE 25% GAINS	81.	
3 MULTIPLY LINE 2 BY 0.1071	9.	
4 ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS	276,988.	
5 MULTIPLY LINE 4 BY 0.4643	128,606.	
6 ENTER WORLDWIDE 5% GAINS AND QUALIFIED DIVIDENDS		
7 MULTIPLY LINE 6 BY 0.8214		
8 ADD LINES 3, 5, AND 7		128,615
9 SUBTRACT LINE 8 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116 AMT, LINE 17		4,225,151
TANKE CHANGE THE COME IN	Z Dance	STATEMENT 3
ORM 4952 INVESTMENT INTEREST EX	CLENSE	STATEMENT 3
DESCRIPTION	CURRENT	CARRYOVER
TANFORD GROUP VELLS FARGO BANK DISALLOWED INVESTMENT INTEREST PRIOR YEARS	27. 85,050.	42,683
FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - EVERGREEN PRIVATE INVESTMENT FUNDS	8,031. 6,650.	
POTALS TO FORM 4952, LINES 1 AND 2	99,758.	42,683

		<u> </u>	
FORM 4952 INCOME FROM PROPERTY HELD FOR	RINVESTMENT	STATEMENT	31
DESCRIPTION		AMOUNT	
INTEREST INCOME DIVIDEND INCOME EVERGREEN PRIVATE INVESTMENTS FUNDS - ROYALTY		61,1 61,3	
TOTAL TO FORM 4952, LINE 4A		122,5	79.
FORM 4952 INVESTMENT EXPENSE	ES	STATEMENT	32
DESCRIPTION		AMOUNT	
EVERGREEN PRIVATE INVESTMENTS FUNDS - ROYALTY FROM - EVERGREEN PRIVATE INVESTMENTS FUNDS. SCHEDULE A DEDUCTIONS			5. 5. 19.
TOTAL TO FORM 4952, LINE 5			29.
FORM 4952 NET CAPITAL GAIN FROM THE DIS		STATEMENT	33
DESCRIPTION		AMOUNT	
TRANSACTIONS W/THE STANFORD GROUP (17) TRANSACTIONS W/THE STANFORD GROUP (213) TRANSACTIONS W/THE STANFORD GROUP (221) FORM 6781, PART I CAPITAL GAIN DISTRIBUTIONS GAIN OR LOSS FROM PARTNERSHIPS, S CORPS, TRUSTS,	ETC.	48,8 59,5 69,8 1,7 23,4 54,7	344. 352. 37. 168.
TOTAL TO FORM 4952, LINE 4E		258,2	07.
FORM 4952AMT INVESTMENT INTEREST EXI	PENSE	STATEMENT	34
DESCRIPTION	CURRENT	CARRYOVEI	Ł
STANFORD GROUP WELLS FARGO BANK FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - EVERGREEN PRIVATE INVESTMENT FUNDS AMT INVESTMENT INTEREST CARRYOVER	27. 85,050. 8,031. 6,650.	42,2	203.
TOTALS TO FORM 4952AMT, LINES 1 AND 2	99,758.	42,2	
		——————————————————————————————————————	

FORM 4562 PART I - BUSINESS INCOME	STATEMENT 35
INCOME TYPE	AMOUNT
WAGES S CORPORATIONS	404,199. 3,828,342.
TOTAL BUSINESS INCOME USED IN FORM 4562, LINE 11	4,232,541.

<del></del>	····		-						
FORM	8621	DISTRIBUTIONS	OF STOCK	IN A	SECTION	1291	FUND	STATEMENT	36
1.	DATE STO	OCK PURCHASED						01/04/06	
2.	DATE STO	OCK DISPOSED OF	OR DISTRI	BUTED				01/01/07	
3.	EXCESS I	DISTRIBUTION ALL	OCATED TO	EACH	DAY IN	HOLDII	NG PERIOD		
4.	TOTAL AI	LLOCABLE TO EACH	TAX YEAR	IN H	OLDING P	ERIOD			
5.	TOTAL AI	LLOCABLE TO THE	CURRENT T	AX YE	AR AND				
	PRE-PI	FIC TAX YEARS, I	F DIFFERE	$\mathbf{NT}$					
6.	TOTAL TO	LINE 11B (LINE	4 OR 5)						
7.	TAX. TO	TAL TO LINE 11C	l •						
Я.	ROBETON	TAX CREDIT. TO	דיד מים זובים	NT: 111	)				

- 8. FOREIGN TAX CREDIT. TOTAL TO LINE 11D
- 9. NET TAX. TOTAL TO LINE 11E 10. INTEREST. TOTAL TO LINE 11F

FORM 6781 PART I - SECTION 1256 CONTRACTS MA	ARKED TO MARKET	STATEMENT 37
(A) IDENTIFICATION OF ACCOUNT	(B) (LOSS)	(C) GAIN
FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - EVERGREEN PRIVATE INVESTMENT FUNDS FROM K-1 - UNITED STATES NATURAL GAS FUND L.P. FROM K-1 - POWERSHARES DB COMMODITY INDEX	1,059.	577. 1,658.
TRACKING FROM K-1 - POWERSHARES DB G10 CURRENCY		965. 75 <b>4</b> .
TOTAL TO FORM 6781, LINE 1, COLUMNS B AND C	1,059.	3,954.

FORM 8582	OTHER PASS	IVE AC	PIVITIES	3 - W	ORKSHEET	3	STATE	MENT	38
	CURRE	ENT YEAR PRIOR YEAR			OVERALL	GAIN	OR I	Loss	
NAME OF ACTIVITY	NET INCOME NET LOSS LOSS G		GAIN		LOSS				
EVERGREEN PRIVATE INVESTMENTS FUNDS EVERGREEN PRIVATE	11,312	•	0.			11,31	2.		
INVESTMENT FUNDS	2,665	•	0.		<6,374.>			<3,5	709.:
TOTALS	13,977	•	0.		<6,374.>	11,31	2.	<3,7	709.
FORM 8582	SUMMAR	Y OF P	ASSIVE A	ACTIV	TTIES		STATE	MENT	39
R R E A NAME	FORM OR SCHEDULE GAI	n/Loss	PRIOR YEAR C	/O G	NET SAIN/LOSS	UNALLO LOSS		ALLO LOS	
- —— EVERGREEN PRIVAT INVESTMENTS FUND EVERGREEN PRIVAT	S	527.		<u> </u>	527	•	<del></del>		
INVESTMENTS FUND	s 1	0,785.			10,785	•			
EVERGREEN PRIVAT INVESTMENT FUNDS		19.			19	•			
EVERGREEN PRIVAT INVESTMENT FUNDS		2,646.	<6,3	74.>	<3,728	.>		3,	728.
ALIVED TILLET TOTAL				<del></del>					
	1	3,977.	<6,3	74.>	7,603	•		3,	728.
TOTALS PRIOR YEAR CARRYOV					-		COME		728. 646.

FORM 8582	OTHER		TIVE MINI		SHEET		STATEMEI	NT 40
		CURRENT	YEAR	PRIOR Y		OVERALL	GAIN O	R LOSS
NAME OF ACTIVITY	NET I	NCOME	NET LOSS	LOSS	AED.	GAIN	L(	oss
EVERGREEN PRIVATE INVESTMENTS FUNDS EVERGREEN PRIVATE	11	,496.	0.			11,49	6.	
INVESTMENT FUNDS	2	,665.	0.	<6,	332.>		<	3,667.
TOTALS	14	,161.	0.	<6,	332.>	11,49	6. <	3,667.
E A NAME	OR	GAIN/LC	PRIOR OSS YEAR C		et /Loss	UNALLO LOSS		LOWED OSS
		GAIN/LC						
EVERGREEN PRIVATE INVESTMENTS FUNDS EVERGREEN PRIVATE	3		27.		F 0 7			
		10,96	59.	1	527 0,969			
INVESTMENTS FUNDS EVERGREEN PRIVATE	5			1	0,969	•		
INVESTMENTS FUNDS	S EFORM 479	7	.9.			•		3,686.
INVESTMENTS FUNDS EVERGREEN PRIVATE INVESTMENT FUNDS EVERGREEN PRIVATE	S EFORM 479	2,64	.9. l6. <6,3	32.> <	19	· · ·>	<del></del>	3,686. 3,686.
INVESTMENTS FUNDS EVERGREEN PRIVATE INVESTMENT FUNDS EVERGREEN PRIVATE INVESTMENT FUNDS	S EFORM 479 ESCH E	2,64	.9. 46. <6,3 51. <6,3	32.>	0,969 19 3,686 7,829	· · >		

EXTENSION GRANTED TO 10/15/09 20 U.S. Individual Income Tax Return IRS Use Only - Do not write or staple in this space. For the year Jan. 1-Dec. 31, 2008, or other tax year beginning 2008, ending OMB No. 1545-0074 Label Your first name and initial Last name Your social security number (See 371 32 5211 SIMON A B E BERNSTEIN instructions If a joint return, spouse's first name and initial Last name Spouse's social security number on page 14.) 347 30 9749 SHIRLEY BERNSTEIN Use the IRS label. Home address (number and street). If you have a P.O. box, see page 14. Apt. no. You must enter Н Otherwise. ERE your SSN(s) above. 7020 LIONS HEAD LANE please print City, town or post office, state, and ZIP code. If you have a foreign address, see page 14. Checking a box below will not or type. change your tax or refund. BOCA RATON, FL 33496 Presidential You Spouse Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14) Single Head of household (with qualifying person). If the qualifying **Filing Status** 2 X Married filing jointly (even if only one had income) person is a child but not your dependent, enter this child's Married filing separately. Enter spouse's SSN above name here. Check only 5 Qualifying widow(er) with dependent child (see page 16) and full name here. one box. Boxes checke on 6a and 6b 6a X Yourself, If someone can claim you as a dependent, do not check box 6a **Exemptions** b X Spouse No of children (4) √ II quality ing child for child tax credit (see page 17) c Dependents; (2) Dependent's social lived with you relationship to did not live with you due to divorce (1) First name Last name r separation see page 18) Dependents on 6c not entered above If more than four dependents, see page 17. Add numbers on lines Total number of exemptions claimed... Wages, salaries, tips, etc. Attach Form(s) W-2 3,756,299. Income Taxable interest. Attach Schedule B if required 71,430. 8a Attach Form(s) Tax-exempt interest. Do not include on line 8a 8b W-2 here. Also Ordinary dividends. Attach Schedule B if required 57,364. attach Forms 9a W-2G and ħ 1099-R if tax Taxable refunds, credits, or offsets of state and local income taxes 10 10 was withheld. Alimony received \_\_\_\_\_ 11 11 Business income or (loss). Attach Schedule C or C-EZ 12 0. 12 If you did not Capital gain or (loss). Attach Schedule D if required. If not required, check here <3.000. 13 13 get a W-2. Other gains or (losses). Attach Form 4797 14 see page 21. 14 **b** Taxable amount 15b 15a IRA distributions | 15a | Enclose, but do 40,000. b Taxable amount 40,000. Pensions and annuities \_\_\_\_\_\_\_16a 16b 16a not attach, any 598,716. Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 17 payment. Also, please use Farm income or (loss). Attach Schedule F 18 18 Form 1040-V. Unemployment compensation 19 19 37,851. b Taxable amount (see page 26) 32,173. 20b Social security benefits | 20a | 20a Other Income. List type and amount (see page 28) 21 Add the amounts in the far right column for lines 7 through 21. This is your total income. 4,552,982. 22 23 Educator expenses (see page 28) Educator expenses (see page 28)
Certain business expenses of reservists, performing artists, and fee-basis government
officials. Attach Form 2106 or 2106-EZ Adjusted 24 24 Gross 25 Health savings account deduction. Attach Form 8889 25 Moving expenses. Attach Form 3903 Income 26 26 27 One-half of self-employment tax. Attach Schedule SE 27 Self-employed SEP, SIMPLE, and qualified plans 28 28 29 Self-employed health insurance deduction (see page 29) Penalty on early withdrawal of savings 31a Alimony paid **b** Recipient's SSN **▶** ; ; 31a 32 IRA deduction (see page 30) 33 Student loan interest deduction (see page 33) 33

34

35

Tuition and fees deduction. Attach Form 8917

Domestic production activities deduction. Attach Form 8903

Subtract line 36 from line 22. This is your adjusted gross income .......

Add lines 23 through 31a and 32 through 35

552,982.

37

Form 1040 (2008)		IMON & SHIKLEY BERNSTEIN		27-27TT		Page Z
Tax and	38	Amount from line 37 (adjusted gross income)			38	4,552,982.
Credits	39a	Check \( \int \) You were born before January 2, 1944, \( \sum \) Blind. \( \)	Total boxes	l l	lacerman post	
		if: X Spouse was born before January 2, 1944, Blind.	checked 🕨	- 39a 2	Total Control	
Standard Deduction for -	b	If your spouse itemizes on a separate return or you were a dual-status allen, see page 34 and	check here	➤ 39b		
People who	C	Check If standard deduction includes real estate taxes or disaster loss (see page	34)	➤ 39c	And a selection of the control of th	
checked any	40	Itemized deductions (from Schedule A) or your standard deduction (see left n			40	1,304,539.
box on line 39a, 39b, or	41		•		41	3,248,443.
39c OF who can be					41	3,240,443.
claimed as a	42	If line 38 is over \$119,975, or you provided housing to a Midwestern displaced				1 666
dependent.		Otherwise, multiply \$3,500 by the total number of exemptions claimed on line 6			42	4,666.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, e			43	3,243,777.
All others:	44	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972			44	1,104,719.
Single or	45	Alternative minimum tax. Attach Form 6251			45	0.
Married filing separately,	46	Add lines 44 and 45			46	1,104,719.
\$5,450	47	Foreign tax credit. Attach Form 1116 if required	47	886.	8 d. 18 13 100 8 d. 18 13 100 11 1 100	
Married filing	48	Credit for child and dependent care expenses. Attach Form 2441	<del></del>		Commence of the commence of th	
jointly or Qualifying	49	Credit for the elderly or the disabled. Attach Schedule R			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
widow(er), \$10,900						
I ' I	50	Education credits. Attach Form 8863				
Head of household,	51	Retirement savings contributions credit. Attach Form 8880			Providence of the second secon	
\$8,000	52	Child tax credit (see page 42). Attach Form 8901 if required	52		AND STATE OF THE S	
	53	Credits from Form: a 8396 b 8839 c 5695			mana, no monet de la cara en comanda de la caración comba de la co	
	54	Other credits from Form: a X 3800 b 8801 c	54			
	55	Add lines 47 through 54. These are your total credits			55	886.
	56	Subtract line 55 from line 46. If line 55 is more than line 46, enter -0-			56	1,103,833.
Other	57	Self-employment tax. Attach Schedule SE			57	
Taxes	58	Unreported social security and Medicare tax from Form: a 4137 b	7 gata		58	
Idaes					59	
	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 i			<del></del>	
	60	Additional taxes: a AEIC payments b Household employment taxe			60	1 100 000
	61	Add lines 56 through 60. This is your total tax			61	1,103,833.
<b>Payments</b>	62	Federal income tax withheld from Forms W-2 and 1099	62	246,927.		
	63	2008 estimated tax payments and amount applied from 2007 return	63	41,592.		
If you have	_ 64 a	Earned income credit (EIC)	64a		CONTROL OF THE PROPERTY OF THE	
a qualifying child, attach	b	Nontaxable combat pay election <b>64b</b>	Control of the Contro		Section of Late West	
Schedule EIC.	65	Excess social security and tier 1 RRTA tax withheld (see page 61)	65		A CONTRACTOR OF THE CONTRACTOR	
	66	Additional child tax credit. Attach Form 8812			-	
	67	Amount paid with request for extension to file (see page 61)	67		The second secon	
		Amount paid with request for extension to me (see page of)			20 00000 Vinco	
	68	Credits from Form: a 2439 b 4136 c 8801 d 8885	68			
		First-time homebuyer credit. Attach Form 5405			Charles (Fig. 10) Profit (Fig. 1) Carles (Fig.	
	70	Recovery rebate credit (see worksheet on pages 62 and 63)	70			
		Add lines 62 through 70. These are your total payments			71	288,519.
Refund	72	If line 71 is more than line 61, subtract line 61 from line 71. This is the amount	you overpaid		72	
Direct deposit?	73 a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check h	nere		73a	
See page 63 and fill in 73b,	<b>▶</b> b	Routing ► C Type: Checking Savings ► d Account	•		Section and the Control of Contro	
73c, and 73d, or Form 8888,	74	Amount of line 72 you want applied to your 2009 estimated tax	74			
Amount	75	Amount you owe. Subtract line 71 from line 61. For details on how to pay, see		<b>•</b>	75	832,958.
You Owe	76		76	17,644		
Third Part		Estimated tax penalty (see page 65) o you want to allow another person to discuss this return with the IRS (see page		es. Complete the t	\$ 0.70.703.0 MMOO. V   W	No
Designee	De De	Signee's Phone	LZLI	es. Complete the	Personal	Identification
		me FAREA 10. 10. 1 penalties of perjury, I declare that I have examined this return and accompanying schedules a	and statements and	to the best of my kno	number (	
Sign	and c	emplete. Declaration of preparer (other than taxpayer) is based on all information of which prep	arer has any knowle	dge.	-	· · · · ·
Here		Your signature Date Your occupation			Dayu	me phone number
Joint return? See page 15.		EXECUT				
Keep a copy for your		Spouse's signature. If a joint return, <b>b0th</b> must sign. Date Spouse's occu	pation			
records.		INSURA	NCE			
Paid	Prepa	rer's	Date	Check if self-	Preparer	s SSN or PTIN
Preparer's				employed	ll P(	0127193
Use Only		GOLDSTEIN LEWIN & CO.	L	EIN	59	
Use Only		Tiditio les	TH FLOOR	Phon		51)994-5050
810002 11-10-08	ploye	d) address	TH PHOOF	, , , , ,	(50	71/224-2020
13-10-08	and Z	BOCA RATON, FL 33486				16 545
		** INTEREST NOT INCLUDED				16,515.
		** PENALTY NOT INCLUDED				24,459.
						CUR 00069

Re	covery Rebate Credit Worksheet - Line 70 (Also used for 1040A, line 42 and 1040-EZ, line	<b>9)</b> <i>K</i>	eep for Your Records
В	efore you begin: See the instructions for line 70 on page 61 to find out if you can take this credit.		
	TIP If you received Notice 1378, have it available. The notice shows the amount of your economic stimulus payment, which you will need not have Notice 1378, you can find the amount of your economic stimulus payment on www.irs.gov.	to fill in lir	ne 28, on page 63. If you do
1.	Can you, or your spouse if filing a joint return, be claimed as a dependent on another person's return?  X No. Go to line 2. Yes. You cannot take the credit. Stop here.		
2.	Does your tax return include a valid social security number for you and, if filing a joint return, your spouse?  X Yes. Skip lines 3 and 4 and go to line 5.  No. Go to line 3.		
3	Are you filing a joint return for 2008?		
V.	Yes. Go to line 4. No. You cannot take the credit. Stop here.		
4	Were either you or your spouse a member of the U.S. Armed Forces at any time during 2008?		
•	Yes. Go to line 5. No. You cannot take the credit. Stop here.		
5.	Enter the amount from Form 1040, line 56	5.	1.103.833.
6.	Enter the amount from Form 1040, line 52		0.
7.	Add lines 5 and 6		1,103,833.
8.	Enter \$600 (\$1,200 if married filing jointly)		
9.	Enter the smaller of line 7 or line 8		1,200.
	Is the amount on line 9 at least \$300 (\$600 if married filing jointly)?		
10.	Yes. If you have at least one qualifying child for whom you entered a valid social security number* on Form 1040, line 6c, column (2), and checked column (4), or have at least one qualifying child with a valid social security number* for whom you completed Form 8901, go to line 11. Otherwise 11 through 21 and enter the amount from line 9 on line 22.	the box ir vise, skip	
	No. If line 7 is more than zero, go to line 11. Otherwise, skip line 11 and go to line 12.		
11.	Is your gross income** more than the amount shown below for your filing status?		
	Single or married filing separately - \$8,950     Head of household - \$11,500		
	Married filing jointly • \$17,900     Qualifying widow(er) - \$14,400		
٦٨.	No. Go to line 12. Yes. Skip lines 12 through 18 and go to line 19.	40	
	Enter the amount from Form 1040, line 20a		
	Enter the amount of any nontaxable veterans' disability or death benefits you received in 2008	13	
14.	Are you filing Form 8812?  Yes. Skip line 15. Enter on line 16 the amount from Form 8812, line 4a.  No. Go to line 15.		
4	•		
ıo.	Are you filling Form 2555 or 2555-EZ to exclude foreign earned income, or using one of the optional methods to figure your net earnings from self-employment on Schedule SE, or are you a church employee or member of the clergy?	<b>3</b>	
	Yes. Fill out the Earned Income Worksheet on page 8 of Pub, 972 and enter on line 16 the amount from line 8 of that worksheet.		
	No. Go to line 16.		
16.	Earned Income. If you did not already enter an amount on this line as instructed on line 14 or 15, complete Worksheet B on page 51 through line 4b. Enter the amount from Worksheet B, line 4b, (if you for your spouse, if filling iointly) had nontaxable combat pay, did not file Form 8812, and did not enter	46	
47	an amount on line 64b, add your (and your spouse's) nontaxable combat pay to the amount on this line	16 17.	
	Qualifying income. Add lines 12, 13, and 16 Is line 17 at least \$3,000?	''' –	
10.	No. Skip lines 19 through 21 and enter the amount from line 9 on line 22. Yes. Go to line 19.		
10	Enter \$300 (\$600 if married filling jointly)	10	
	Enter the larger of line 9 or line 19		
	Multiply \$300 by the number of qualifying children for whom you entered a valid social security number* on:		
	Form 1040, line 6c, column (2), and checked the box in column (4), or		
		21.	
22.	Form 8901, column (b)  Add lines 20 and 21	22.	1.200.
23.	Enter the amount from Form 1040, line 38	23.	4.552.982.
24.	Enter \$75,000 (\$150,000 if married filing jointly)	24.	150,000.
25.	Is the amount on line 23 more than the amount on line 24?	_	· ·
	No. Skip line 26. Enter the amount from line 22 on line 27 below. X Yes. Subtract line 24 from line 23	25.	4,402,982.
26.	Multiply line 25 by 5% (.05)	26.	220,149.
27.		27.	0.
28.	Subtract line 26 from line 22. If zero or less, enter -0  Enter the amount, if any, of the economic stimulus payment you received (before offset) as shown on Notice 1378 or www.irs.gov. if you received more than one payment, enter the total of all payments you received as shown on all Notices 1378 or on www.irs.gov. if filling a joint return, include your spouse's payment as shown on your spouse's Notice 1378 or on www.irs.gov. if you filed a joint return for 2007 and received an economic stimulus payment, you and your spouse are each treated as having received half of the payment		0.
29.	Recovery rebate credit. Subtract line 28 from line 27. If zero or less, enter -0 Enter the result here and, if more than zero, on Form 1040, line 70. If you entered an amount on line 13 on page 82, enter "VA" on the dotted line to the left of Form 1040, line 70. If you (or your spouse, if filling jointly)	-	
	had nontaxable combat pay, dld not file Form 8812, and did not enter an amount on line 64b, enter "NCP" to the left of Form 1040, line 70. If line 28 is more than line 27, you do not have to pay back the difference	29	0.

<sup>\*</sup> A valid social security number is not required for a qualifying child if you file a joint return AND either you or your spouse was a member of the U.S. Armed Forces at any time during 2008.

<sup>\*</sup>Your gross income includes the total of the following amounts; Form 1040, lines 7, 8a, 9a, 10, 11, 13 (if you were not required to file Schedule D), 15b, 16b, 19, 20b, and 21 (excluding any negative amounts); Schedule C, line 7; Schedule C-EZ, line 1; Schedule E, lines 3 and 4; Schedule F, line 11; Form 4835, line 7; Schedule K-1 (Form 1065), box 14, codes B and C; Schedule K-1 (Form 1065-B), box 9, code K-2; Schedule K-1 (Form 1120S), box 14, code B. But do not include on this line any amount for which you claimed the foreign earned income exclusion or the housing exclusion on Form 2655 or 2555-EZ.

Department of the Treasury Internal Revenue Service

# Underpayment of Estimated Tax by Individuals, Estates, and Trusts

> See separate instructions.

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

OMB No.1545-0140

2008

Attachment Sequence No. **06** 

Name(s) shown on tax return

SIMON & SHIRLEY BERNSTEIN

ldentifying number

371-32-5211

### Do You Have To File Form 2210?

Complete lines 1 through 7 below. Is line 7 less than \$1,000?	Yes	Do not file Form	1 <b>2210.</b> You do not	owe s	penalty.
↓ No					
Complete lines 8 and 9 below. Is line 6 equal to or more	Yes	You do not owe	a penalty. <b>Do not</b>	file Fo	rm 2210 (but if box
than line 9?		1	es, you must file pa		· ·
No					
<u> </u>	7 Yes ⊾	•			
You may owe a penalty. Does any box in Part II below apply?		You must file Fo	rm 2210. Does bo	х В, С,	or <b>D</b> in Part II apply?
No		No	Yes		t figure your penalty.
₩ No			YC	u mus	t figure your penaity.
Do not file Form 2210. You are not required to figure your	1	You are not regu	ired to figure your	penalt	ty because the IRS will
penalty because the IRS will figure it and send you a bill for any		figure it and send	d you a bill for any	unpaid	d amount. If you want to
unpaid amount. If you want to figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax					a worksheet and enter out file only page 1 of
return, but do not file Form 2210.		Form 2210.	our on your tex re	, tuiti, k	out the only page 1 of
Part Required Annual Payment					
1 Enter your 2008 tax after credits from Form 1040, line 56 (see Instruct	tions it not filing	Form 10/0\	[	1 1	1,103,833.
2 Other taxes, including self-employment tax (see page 2 of the instruction		·		2	1,105,055.
3 Refundable credits. Enter the total of your earned income credit, additi					
fuels, health coverage tax credit, refundable credit for prior year minim				338.	
rebate credit	· ·	= = = = = = = = = = = = = = = = = = = =	- 1	3 (	( . )
4 Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, you do	o not owe a pena	lty; do not file Form :		4	1,103,833.
5 Multiply line 4 by 90% (.90)			993,450.	A CONTROL OF THE CONTROL OF T	
6 Withholding taxes. Do not include estimated tax payments. (see page				6	246,927.
7 Subtract line 6 from line 4. If less than \$1,000, you do not owe a pena				7	856,906.
8 Maximum required annual payment based on prior year's tax (see pag		•		8	1,587,563. 993,450.
9 Required annual payment. Enter the smaller of line 5 or line 8  Next: Is line 9 more than line 6?				9	993,430.
No. You do not owe a penalty. Do not file Form 2210 unless box	F helow anniles				
X Yes. You may owe a penalty, but do not file Form 2210 unless of			ies.		
If box B, C, or D applies, you must figure your penalty and file		a 20,211 2pp			
<ul> <li>If only box A or E (or both) applies, file only page 1 of Form 22</li> </ul>		required to figure you	r penalty; the IRS		
will figure it and send you a bill for any unpaid amount. If you war			Part III or IV as a		
worksheet and enter your penalty on your tax return, but file only					
Part II Reasons for Filing. Check applicable boxes. If no			100 4 68	0010	
A You request a waiver (see page 2 of the instructions) of your enti-	ire penalty. You r	must check this box a	nd file page 1 of Fori	n 2210	,
but you are not required to figure your penalty.  B X You request a waiver (see page 2 of the instructions) of part of you	our nanalty. Vou	muet figure your nen	alty and waiver amo	int and	
file Form 2210.	our portaity. Tou	must ngure your pen	ally and waiver amor	ani anu	
C Your income varied during the year and your penalty is reduced or	or eliminated whe	en figured using the a	nnualized income in	nstallm	ent
method. You must figure the penalty using Schedule AI and file F		• •			
D Your penalty is lower when figured by treating the federal income		n your income as pai	d on the dates it was	actuall	у
withheld, instead of in equal amounts on the payment due dates.	-				
E You filed or are filing a joint return for either 2007 or 2008, but no				ove. Yo	u
must file page 1 of Form 2210, but you are not required to figure	your penalty (un	less box B, C, or D a	oplies).		

Part V Regular Method (See page 3 of the instructions if you are filing Form 1040NR or 1040NR-EZ.) Payment Due Dates Section A - Figure Your Underpayment (b) 6/15/08 (d) 1/15/09 (a) 4/15/08 (c) 9/15/08 18 Required installments. If box C in Part II applies, enter the amounts from Schedule Al. line 25. Otherwise, enter 18 248,363 248,363 248,363. 248,361. 25% (.25) of line 9, Form 2210, in each column 19 Estimated tax paid and tax withheld. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 18 for all payment periods, stop here; you do not owe a penalty. 61,732 61,732 103,324 61,731. Do not file Form 2210 unless you checked a box in Part II Complete lines 20 through 26 of one column before going to line 20 of the next column. 20 Enter the amount, if any, from line 26 in the previous 20 column 61,732 61,732 61,731. 21 Add lines 19 and 20 21 145,039 331,670 518,301. 22 Add the amounts on lines 24 and 25 in previous column 22 23 Subtract line 22 from line 21. If zero or less, enter -0-. 0 103,324 For column (a) only, enter the amount from line 19 23 24 If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0-83,307 269,938 24 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 145,039. 248,363 248,363. the next column. Otherwise, go to line 26 248,361. 25 26 Overpayment. If line 23 is more than line 18, subtract line 18 from line 23. Then go to line 20 of the next column 26 Section B - Figure the Penalty (Complete lines 27 through 34 of one column before going to the next column.) April 16, 2008 - June 30, 2008 4/15/08 6/15/08 Days: Days: 27 Number of days from the date shown above line Rate Period 1 27 to the date the amount on line 25 was paid or 6/30/08, whichever is earlier 27 Number of days 28 Underpayment on on line 27 28 July 1, 2008 - September 30, 2008 6/30/08 6/30/08 9/15/08 Davs: 29 Number of days from the date shown above line Rate Period 2 29 to the date the amount on line 25 was paid or SEE ATTACHED WORKSHEET 9/30/08, whichever is earlier 29 Number of days 30 Underpayment on on line 29 line 25 30 October 1, 2008 - December 31, 2008 9/30/08 9/30/08 9/30/08 Days: Days: Days: 31 Number of days from the date shown above line Rate Period 3 31 to the date the amount on line 25 was paid or 12/31/08, whichever is earlier 31 Number of days 32 Underpayment on on line 31 line 25 366 32 January 1, 2009 - April 15, 2009 12/31/08 12/31/08 12/31/08 1/15/09 Davs: 33 Number of days from the date shown above line Rate Period 4 33 to the date the amount on line 25 was paid or 4/15/09, whichever is earlier 33 Number of days 34 Underpayment on on line 33 × .05 line 25 365 34 35 Penalty. Add all amounts on lines 28, 30, 32, and 34 in all columns. Enter the total here and on Form 1040, line 76; Form 1040A, line 48; Form 1040NR, line 74; Form 1040NR-EZ, line 26; or Form 1041, line 26. Do not file Form 2210 unless you checked a box in Part II AMOUNT WATVED 6,746.▶ 35 17,644. TAX ELIGIBLE FOR WAIVER OF PENALTY

Form 2210 (2008)

## **UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s)				Identifying Numb	er
SIMON & SHI	RLEY BERNST	EIN		371-32-	5211
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Dally	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
		-0-			
04/15/08	248,363.	248,363.			
04/15/08	<61,732.	> 186,631.			
04/15/08	<41,592.	> 145,039.	61	.000163934	1,450
06/15/08	248,363.	393,402.			
06/15/08	<61,732.	> 331,670.	15	.000163934	816
06/30/08	0.	331,670.	77	.000136612	3,489
09/15/08	248,363.	580,033.			
09/15/08	<61,732.	> 518,301.	15	.000136612	1,062
09/30/08	0.	518,301.	92	.000163934	7,817
12/31/08	0.	518,301.	15	.000136986	1,065
01/15/09	248,361.	766,662.			
01/15/09	<61,731.	> 704,931.	90	.000136986	8,691
					· · · · =
enalty Due (Sum of Colur	mn F).				24,390

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

#### **SCHEDULES A&B** (Form 1040)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on Form 1040

# **Schedule A - Itemized Deductions**

➤ Attach to Form 1040.

(Schedule B is on page 2)

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

OMB No. 1545-0074

Your social security number

SIMON &	SHI	TRLEY BERNSTEIN		37	71	32 5211
Medical		Caution. Do not include expenses reimbursed or paid by others.	***********			
and	1	Medical and dental expenses (see page A-1)	1			
Dental	2	Enter amount from Form 1040, line 38 2				
Expenses	3	Multiply line 2 by 7.5% (.075)			ı	
Exponese	4	Subtract line 3 from line 1, If line 3 is more than line 1, enter -0			4	
Taxes You	5	State and local (check only one box):				
Paid		a Income taxes, or SEE STATEMENT 16	5	34,712	₊ ڍ	
(See		b X General sales taxes				
page A-2.)	6	Real estate taxes (see page A-5)	6	45,371	L .	
	7	Personal property taxes	7			
	8	Other taxes. List type and amount	tertate in c		$\neg$	
		··	- 0000 - 00000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 00000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 00000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 00000 - 0000 - 000			
			8		]	
	9	Add lines 5 through 8			9	80,083.
Interest	10	Home mortgage interest and points reported to you on Form 1098 STMT 13	10	67,530	٦٠)	
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-6 and show that person's name,	cereme .			
(See		identifying no., and address	1000			
page A-5.)			Vancour Comment			
Note.			11			
Personal interest is	12	Points not reported to you on Form 1098 STMT 11	12	1,78	4.	
not	13	Qualified mortgage insurance premiums (See page A-6)	13			
deductible.	14	Investment interest. Attach Form 4952 if required. (See page A-6.) STMT 14	14	6,59	5•	
	15				15	75,909 <u>.</u>
Gifts to	16	Add lines 10 through 14.  Gifts by cash or check SEE STATEMENT 12	16	192,47	7.	
Charity	17	Other than by cash or check. If any gift of \$250 or more, see page A-8.				
lf you made a		You must attach Form 8283 if over \$500	17			
gift and got a benefit for it,	18	Carryover from prior year	18			
see page A-7.	19	Add lines 16 through 18			19	192,477.
Casualty and						
Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See page A-8.)	Protestina.		20	
Job Expenses	21	Unreimbursed employee expenses - job travel, union dues, job education, etc.	S product models of the second models of the second models of the second models of the second models			
and Certain Miscellaneous		Attach Form 2106 or 2106-EZ if required. (See page A-9.)	**************************************			
Deductions	1					
			21			
		Tax preparation fees	22			
	23	Other expenses - investment, safe deposit box, etc. List type and amount				
(See page A-9.)	}	► SEE STATEMENT 10	And the second			
page Ars.)				9,32	6	
			23	9,32		
	24	Add lines 21 through 23		7,74	•	
	25	Enter amount from Form 1040, line 38 [25]4,552,982	26	91,06	Λ	
	26	Multiply line 25 by 2% (.02) Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-			27	0.
<u> </u>	27	Other - from list on page A-10. List type and amount		.,	<i></i>	<u></u>
Other Miscellaneous	28	FROM FORM 4684, SECTION B	1.0	000,000.		
Deductions			_ = _ `	200,0003		
					28	1,000,000.
Total	29	Is Form 1040, line 38, over \$159,950 (over \$79,975 if married filling separately)?				
Itemized	43	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.	J S⊓	rm⊤ 15 <b>&gt;</b>	29	1,304,539.
Deductions		X Yes. Your deduction may be limited. See page A-10 for the amount to enter.	1			
	30					
	JU	in you shout to itemize deductions even though they are less than your statedard deduction, the			-mai	The state of the s

Your social security number

#### SIMON & SHIRLEY BERNSTEIN

		Schedule B - Interest and Ordinary Dividends		Attachment Sequence No. <b>08</b>
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   SEE STATEMENT 18		71,430.
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 payer and enter the total interest shown on that form.			1	
	2	Add the amounts on line 1  Excludable interest on series EE and I U.S. savings bonds issued after 1989.	2	71,430.
	4	Attach Form 8815 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a	4	71,430.
Part II	No	te. If line 4 is over \$1,500, you must complete Part III.		Amount
Ordinary Dividends  Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's		SEE STATEMENT 19	5	57,364.
name as the payer and enter the ordinary dividends shown on that form.				
	6	Add the amounts on line 5. Enter the total here and on Form 1040, line 9a	6	57,364.
Dort III		te. If line 6 is over \$1,500, you must complete Part III.	ad = £	nien I I
Part III Foreign Accounts and Trusts	<u>acc</u> <b>7</b> a	u must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (b) he count; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.  At any time during 2008, did you have an interest in or a signature or other authority over a financial account in country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions ar requirements for Form TD F 90-22.1  If "Yes," enter the name of the foreign country	a foreign d filing	Yes No
-		During 2008, did you receive a distribution from, or were you the grantor of, or transferor to, a fore	an trust	7

If "Yes," you may have to file Form 3520. See page B-2

#### **SCHEDULE C** (Form 1040)

**Profit or Loss From Business** 

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B. ■ Attach to Form 1040, 1040NR, or 1041. ► See Instructions for Schedule C (Form 1040). OMB No. 1545-0074 Attachment Sequence No. 09

Department of the Treasury Internal Revenue Service (99) Name of proprietor Social security number (SSN) SIMON BERNSTEIN 371-32-5211 R Enter code from pages C-9, 10, & 11 Principal business or profession, including product or service (see page C-3) **▶** 524290 INSURANCE SALES Business name. If no separate business name, leave blank. D Employer ID number (EIN), if any Ε Business address (including suite or room no.) City, town or post office, state, and ZIP code (2) Accrual (3) Other (specify) > \_\_\_\_\_ Accounting method: (1) X Cash Did you "materially participate" in the operation of this business during 2008? If "No," see page C-4 for limit on losses Н If you started or acquired this business during 2008, check here Part I Income Gross receipts or sales. Caution. See page C-4 and check the box if: • This Income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, or 1 15,756,018. • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see page C-4 for limit on losses. Returns and allowances 15,756,018. 3 Subtract line 2 from line 1 Cost of goods sold (from line 42 on page 2) 4 15,756,018. Gross profit. Subtract line 4 from line 3 5 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-4) 15,756,018. Gross income. Add lines 5 and 6 **Expenses.** Enter expenses for business use of your home only on line 30. Part III Advertising Office expense 18 19 19 Car and truck expenses Pension and profit-sharing plans 9 20 Rent or lease (see page C-6): (see page C-5) 10 15,756,018. Commissions and fees 10 a Vehicles, machinery, and equipment 20a b Other business property ..... 11 Contract labor 20b (see page C-5) 11 21 Repairs and maintenance 21 12 22 Supplies (not included in Part III) 12 Depletion 13 Depreciation and section 179 23 Taxes and licenses expense deduction (not included in Travel, meals, and entertainment: a Travel 13 Part III) (see page C-5) 24a Employee benefit programs (other b Deductible meals and 24b than on line 19) 14 entertainment (see page C-7) Insurance (other than health) ..... 15 15 Utilities 25 Wages (less employment credits) 16 26 26 Interest: 16a Other expenses (from line 48 on Mortgage (paid to banks, etc.) 16b Other h page 2) 17 Legal and professional 17 15,756,018. Total expenses before expenses for business use of home. Add lines 8 through 27 28 Tentative profit or (loss). Subtract line 28 from line 7 29 29 Expenses for business use of your home. Attach Form 8829 30 30 Net profit or (loss). Subtract line 30 from line 29. 31 • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the 0. box on line 1, see page C-7). Estates and trusts, enter on Form 1041, line 3. 31 • If a loss, you must go to line 32. If you have a loss, check the box that describes your investment in this activity (see page C-8). • If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR. line 13 (if you checked the box on line 1, see the line 31 instructions on page C-7). Estates and trusts, enter 32a on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.

Business Name:

se se)
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0

#### SCHEDULE D (Form 1040)

Capital Gains and Losses

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

OMB No. 1545-0074

2008
Attachment
Sequence No. 12

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return ▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

Your social security number

371 32 5211 SIMON & SHIRLEY BERNSTEIN Part | Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Date (a) Description of property (C) Date sold (e) Cost or (f) Gain or (loss) (d) Sales price acquired (Mo., day, yr.) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) other basis 1 TRANSACTIONS W/STANFORD 507.571. GROUP (213) PER ATTACHED VARIOUS VARIOUS 503,389. <4,182.> TRANSACTIONS W/STANFORD GROUP (221) PER ATTACHED VARIOUS VARIOUS 227,012. 225,764. 1,248. TRANSACTIONS W/STANFORD GROUP (668) PER ATTACHED VARIOUS VARIOUS 648,669. 665,475. <16.806.> TRANSACTIONS W/STANFORD 349,992. GROUP (10376) PER ATTACHE 295,339. <54,653.> **VARIOUS** VARIOUS 2 Enter your short-term totals, if any, from Schedule D-1, line 2 2 3 Total short-term sales price amounts. з **1**1.674.409. Add lines 1 and 2 in column (d) 4 Short-term gain from Form 6252 and short-term gain or (loss) <856.> from Forms 4684, 6781, and 8824 SEE STATEMENT 20 4 5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 SEE STATEMENT 22 <117,580.> 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss 6 Carryover Worksheet in the instructions 6 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f) <192,829.> 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) Date sold (e) Cost or (f) Gain or (loss) (d) Sales price acquired (Mo., day, yr.) (Mo., day, yr.) other basis Subtract (e) from (d) 8 TRANSACTIONS W/STANFORD 9,702. GROUP (17) PER ATTACHED S VARIOUS VARIOUS 14,688. 4,986. TRANSACTIONS W/STANFORD 26,955 24 282. 2.673. GROUP (213) PER ATTACHED VARIOUS **VARIOUS** TRANSACTIONS W/STANFORD 56,311. 56,207. 104. GROUP (221) PER ATTACHED VARIOUS VARIOUS TRANSACTIONS W/STANFORD GROUP (668) PER ATTACHED VARIOUS VARIOUS 27,646 26,000. 1,646. 9 Enter your long-term totals, if any, from Schedule D-1, line 9 10 Total long-term sales price amounts. 125,600. 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 SEE STATEMENT 21 405. 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 SEE STATEMENT 23 213. 12 13 Capital gain distributions SEE STATEMENT 24 5,639. 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions 14

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

15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to

Schedule D (Form 1040) 2008

20,382.

Part III on page 2

Pa	rt III Summary	· · · · · · · · · · · · · · · · · · ·	
16	Combine lines 7 and 15 and enter the result	16	<172,447.
	<ul> <li>If line 16 is:</li> <li>A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>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.</li> </ul>		
17	Are lines 15 and 16 both gains?  Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.	And the state of t	
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the Instructions	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions	19  Salar Sa	
20	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 38 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.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:	Ext. mini the designation of the property of t	
•	<ul> <li>The loss on line 16 or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21 (	3,000.)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.	The second secon	ini Barren (h. 1900). Anton (h. 1900). Anton (h. 1900).
22	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 38 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR).  No. Complete the rest of Form 1040 or Form 1040NR.		

12

	e(s) shown on return ON & SHIRLEY BERNSTEIN	Your SSN	371-32-5211		
<b>Before you begin:</b> ✓ See the instructions for line 44 that begin on page 36 to see if you can use this worksheet to figure your tax.					
	$\checkmark$ If you do not have to file Schedule D and you received capital gain distributions, be	sure vou			
	checked the box on line 13 of Form 1040.				
1.	Enter the amount from Form 1040, line 43. However, if you are flling Form				
	2555 or 2555-EZ (relating to foreign earned income), enter the amount from				
	line 3 of the worksheet on page 37  Enter the amount from Form 1040, line 9b* 2. 10,892.	<u>•</u>	•		
2.	Enter the amount from Form 1040, line 9b* 2 10 , 892.				
- 2	Are you filing Schedule D2*				
	Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 is a loss, enter -0-				
	a loss, enter -0-				
	No. Enter the amount from Form 1040, line 13				
4.	Add lines 2 and 3 4. 10,892.				
5.	If you are claiming investment interest expense				
	on Form 4952, enter the amount from line 4g of that form. Otherwise, enter -0-				
•					
		<u>•</u>			
	Subtract line 6 from line 1. If zero or less, enter-0- 7. 3, 232, 885  Enter the smaller of:	<u>.</u>			
8.	• The amount on line 1, or				
	• \$32,550 if single or married filing separately,  8. 65,100				
	\$ 65,100 if married filing jointly or qualifying widow(er),	<del>·</del>			
	\$ 43,650 if head of household.				
9.	Is the amount on line 7 equal to or more than the amount on line 8?				
٠.	Yes. Skip lines 9 and 10; go to line 11 and check the "No" box.				
	No. Enter the amount from line 7				
10.	Subtract line 9 from line 8				
11.	Are the amounts on lines 6 and 10 the same?	_			
	Yes. Skip lines 11 through 14; go to line 15.				
	X No. Enter the smaller of line 1 or line 6	<u>•</u>			
12.	X No. Enter the smaller of line 1 or line 6       11.       10,892         Enter the amount from line 10 (if line 10 is blank, enter -0-)       12.       0         Subtract line 12 from line 11       13.       10,892	•			
13.	Subtract line 12 from line 11 13. 10,892	•			
	Multiply line 13 by 15% (.15)	14	1,634.		
15.	Figure the tax on the amount on line 7. Use the Tax Table or Tax Computation Worksheet, whichever		4 400 005		
	applies				
	Add lines 14 and 15	16	1,104,719.		
17.	Figure the tax on the amount on line 1. Use the Tax Table or Tax Computation Worksheet, whichever	<b>.</b>	1 106 007		
40	applies	1/	1,100,09/		
18. Tax on all taxable income. Enter the smaller of line 16 or line 17. Also include this amount on Form					
	1040, line 44. If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44.	18	1 104 719		
Instead, enter it on line 4 of the worksheet on page 37  * If you are filling Form 2555 or 2555-EZ, see the footnote in the worksheet on page 37 before completing this line.  18					
,, y	and and many , and bead of book by over the restriction the workshoot on page or bolore completing this line	•			

#### 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

EVERGREEN PRIVATE INVESTMENTS FUNDS - ROY   BERNSTEIN FAMILY INVESTMENTS LLLP - ROYAL   1 days at 1 days	S	IMON & SHIRLEY BERNSTEI						1-32-5211	
List the type and address of sport retail real estate property:	Ρ							onal property, use	_
EVERGREEN PRIVATE INVESTMENTS FUNDS - ROY	_							T T.	_
EVERGREEN PRIVATE INVESTMENTS FUNDS - ROY   14 days or   14 days or   14 days or   14 days or   16 days rotted at fair ment   14 days or   16 days rotted at fair ment   18 days or   18	_	List the type and address of each rental real estat	e prop	erty:				d Yes No	_
BERNSTEIN FAMILY INVESTMENTS LLIP - ROYAL   10% of the total days rented at fair rental value of the control	Α		~===					00	
BERNSTEIN FAMILY INVESTMENTS LLLP - ROYAL   14 days or - 10% of the total days rented at tair   B   BRINSTEIN FAMILY INVESTMENTS LLLP - ROYAL   14 days or - 10% of the total days rented at tair   B   C   Totals   (Add columns A, B, and C.)   A   B   C   (Add columns A, B, and C.)   3   Rens received   4   6   1   2   4   9   x   2   4   4   4   4   4   4   4   4   4		EVERGREEN PRIVATE INVE	STM	ENTS FUNDS			i pui pos	G A	
BERNSTETN FAMILY INVESTMENTS LILIP - ROYAL   See page F-5.)   C	В	DEDATABLE TATE TO ASSET TO TATE OF	T	NIEG TITE	= 14				
BERNSTEIN FAMILY INVESTMENTS LILLP - ROYAL   (See page E-3)   C	_	BERNSTEIN FAMILY INVES	TME	ила гппь – 1			d at fair	В	_
Properties	C	DEDNOMETH FAMILY THITE	יבואוידי	MTC T.T.T.D 1					
A B C   (Add columns A B, and C)   3   3   3   3   4   9   5   5   5   5   5   5   5   5   5	_		T LITE	MIS THHE		3ugo L 0.)			_
3 Ren's received	In	come:		Α Ι		С	(Add		
4 Royaltes received 4 6 . 1 . 2 . 4 9.    Sepenses: 5 Advertising 5	3	Rents received	3				— <u> </u>		-
Special State   Special Sta				6.	1.	2.		9	-
5 Advertising							Control Contro	<del>-</del>	_
6 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 Wanagement lees 11 12 Mortpage interest paid to banks, etc. (see page E-5) 12 3 Other interest 13 14 Repairs 14 15 Supplies 15 15 Supplies 15 16 Taxes 16 16 Uther (list) ► SEE STATEMENT 26 SEE STATEMENT 27 SEE STATEMENT 27 SEE STATEMENT 28 19 Add lines 5 through 18 10 Capproctation expense or depletion (see page E-5) 20 10 Total expenses. Add lines 19 and 20 11 Total expenses. Add lines 19 and 20 12 Income or (sas) from rental real estate or royalty properties. Subtract line 21 from line 3 (rans) or line 4 (royalties). If the result is a (bost), see page E-5 to find out if you must life form 6198. 22 12 Deductible rental real estate loss. Caution. Your rental real estate professionals must complete line 43 on page 2 14 Income. Add positive amounts shown on line 22. Do not include any losses 24 15 Losses. Add royalty losses from line 22 and rental real estate losses from 1625. Enter total lossee here 25 15 Cotal rental real estate and royalty lacome or (foss). Combine lines 24 and c5. Enter total lossee here 25 15 Cotal rental real estate and royalty lacome or (foss). Combine lines 22. Enter total lossee here 25 15 Cotal rental real estate than droyalty lacome or (foss). Combine lines 22. Enter total lossee here 25 15 Cotal rental real estate and royalty lacome or (foss). Combine lines 22. Enter total lossee here 25 15 Cotal rental real estate and royalty lacome or (foss). Combine lines 22. Enter total lossee here 25 15 Cotal rental real estate and royalty lacome or (foss). Combine lines 22. Enter total lossee here 25 15 Cotal rental real estate on page 2 do not apply to you, as oner the samount on Form 1040,		=	5				A STATE OF THE STATE OF T		
7 Cleaning and maintenance 7 8 8 9 1	6	Auto and travel (see page E-4)	6				A CONTRACTOR OF THE CONTRACTOR		
8 Commissions 8   9   Insurance 9   9   10   10   10   10   10   11   11			7				N. M. S. C.		
9 Insurance 9 Insurance 9 In Legal and other professional fees 10 In Management fees 11 In Insurance (see page F-5) Insurance			. 8						
10   Legal and other professional fees   10			9				AND LANGUAGE OF THE PARTY OF TH		
2   Mortgage Interest peld to banks, etc.   12   12   12   12   12   12   12   1			10				A CONTRACTOR OF THE CONTRACTOR		
See page E-5    12	11	Management fees	11				go bet her best officers		
3 Other interest   13   14	12	Mortgage interest paid to banks, etc.					A CONTRACTOR OF THE CONTRACTOR		
14   Repairs							12		
15   16   Taxes   16   17   18   18   17   18   18   19   19   19   19   19   19							of the management of the control of		
16   Taxes     16							A THE TAX AND		
17									
SEE STATEMENT 26 SEE STATEMENT 27 SEE STATEMENT 28  19 Add lines 5 through 18 10 Depreciation expense or depletion (see page E-5) 20 Depreciation expense or depletion (see page E-5) 21 Total expenses. Add lines 19 and 20 21 4 . 1. 1.  22 Income or (loss) from rental real estate 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 find out if you must file Form 6198.  23 Deductible rental real estate loss. Caution. Your 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  24 Income. Add positive amounts shown on line 22. Do not include any losses must complete line 43 on page 2  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. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040,									
SEE STATEMENT 26 SEE STATEMENT 27 SEE STATEMENT 28  19 Add lines 5 through 18.			17				v voltamento Carino v volta mento Carino v volta un securio di Carrio I voltano di Carrio I voltano		
SEE STATEMENT 27 SEE STATEMENT 28  19 Add lines 5 through 18	18						Control of		
SEE STATEMENT 28  19 Add lines 5 through 18. 19 4. 1. 1. 19 6. 20 Depreciation expense or depletion (see page E-5) 21 Total expenses. Add lines 19 and 20. 21 4. 1. 22 Income or (loss) from rental real estate 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 find out if you must file Form 6198. 22 2 2. 0. 1.  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 8592. Real estate professionals must complete line 43 on page 2 24 1 Income. Add positive amounts shown on line 22. Do not include any losses 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. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040,				4.			A DESCRIPTION OF THE PROPERTY		
19 Add lines 5 through 18. 19 4 1 1 1 19 6 .  20 Depreciation expense or depletion (see page E-5) 20 20 21 Total expenses. Add lines 19 and 20 21 4 1 1 1 1 1 1 22 21 Income or (loss) from rental real estate 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 find out if you must file Form 6198 22 2 2 0 1 1 2 2 2 2 2 2 2 3 3 2 2 3 3 2 2 3 3 2 2 3 3 2 2 3 3 3 2 2 3 3 3 2 2 3 3 3 2 3 3 2 3 3 3 2 3			18		т.	1	AND SECURITY OF THE SECURITY O		
Depreciation expense or depletion (see page E-5)  Total expenses. Add lines 19 and 20  Income or (loss) from rental real estate 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 find out if you must file Form 6198.  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 8562. Real estate professionals must complete line 43 on page 2  Income. Add positive amounts shown on line 22. Do not include any losses  Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here  If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040,		SEE STATEMENT ZO					STANDARD STA		
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21 Total expenses. Add lines 19 and 20 21 4. 1. 1. 22 Income or (loss) from rental real estate 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 find out if you must file Form 6198 22 2. 0. 1. 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 ( )( )( )( )24 Income. Add positive amounts shown on line 22. Do not include any losses 24 3. 25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here 25 ( )1 Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040,			<u> </u>	1.					÷
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must file Form 8582. Real estate professionals must complete line 43 on page 2 23 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		•							
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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.  If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040,				<u>K</u> )	(	)K		•	
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here.  If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040,		·			,		-	3	•
If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040,							25	<u> </u>	
	26								
ine 47. Of FOTIN TUAUNK, line 88. Ullierwise, liiciuue ulis altiouns ili ule total oli ine 43 oli oade 2							26	3	

Attachment Sequence No. 13 Schedule F (Form 1040), 2008 Name(s) shown on return. Do not enter name and social security number if shown on page 1. Your social security number 371-32-5211 SIMON & SHIRLEY BERNSTEIN Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1. Part I Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See page E-1. Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a X No passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see page E-7 before completing this section. (b) Enter P for (c) Check partnership; S if foreign for S corporation partnership (d) Employer (e) Check if 28 (a) Name identification number SEE STATEMENT 29 Α В C D Passive Income and Loss Nonpassive Income and Loss (i) Section 179 expense (f) Passive loss allowed (g) Passive income (h) Nonpassive loss (j) Nonpassive income (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 deduction from Form 4562 from Schedule K-1 A В C D 609,095. 29 a Totals 1,690. 8,691 Totals ..... 609,095. 30 Add columns (g) and (j) of line 29a 30 Add columns (f), (h), and (i) of line 29b 10,381. 31 31 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the 598,714. result here and include in the total on line 41 below Part III Income or Loss From Estates and Trusts (b) Employer 33 (a) Name identification number SEE STATEMENT 30 A В Passive Income and Loss Nonpassive Income and Loss (d) Passive income (e) Deduction or loss (f) Other income from (c) Passive deduction or loss allowed (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 Schedule K-1 A В 34a Totals ..... Totals ..... Add columns (d) and (f) of line 34a 35 35 Add columns (c) and (e) of line 34b 36 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below 37 Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder (d) Taxable income (net loss) from Schedules Q, (e) Income from (c) Excess inclusion from (b) Employer 38 (a) Name identification number Schedules Q. line 2c Schedules Q, line 3b line 1b Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below 39 Part V Summary \* ENTIRE DISPOSITION OF PASSIVE ACTIVITY Net farm rental income or (loss) from Form 4835. Also, complete line 42 below 40 598,716. 41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see page E-8) Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate

activities in which you materially participated under the passive activity loss rules

EVERGREEN PRIVATE INVESTMENTS FUNDS

I.D. NUMBER: 56-2114125

TYPE: PARTNERSHIP

#### ACTIVITY INFORMATION:

## EVERGREEN PRIVATE INVESTMENTS FUNDS

#### 100% DISPOSITION AT A NET LOSS

<4,598.> 109.
<90.>
0. <24.>
<403.>
<5,006.>

#### TAX PREFERENCE ITEMS:

DEPRECIATION ADJUSTM	ENT	12.
OTHER AMT PREFERENCE	ITEMS/ADJUSTMENTS	26.

#### OTHER K-1 INFORMATION:

INTEREST INCOME	829.
ORDINARY DIVIDENDS	144.
QUALIFIED DIVIDENDS	79.
TAX-EXEMPT INTEREST	81.
INVESTMENT INTEREST EXPENSE - SCHEDULE A	3,429.
CHARITABLE CONTRIBUTIONS	2.
DEDUCTIONS RELATED TO PORTFOLIO INCOME	4,185.
ROYALTY	6.
ROYALTY EXPENSES/DEPLETION	4.
CREDITS	4.
INVESTMENT INCOME	979.
INVESTMENT EXPENSE	4,189.
NONDEDUCTIBLE EXPENSES	6.

EVERGREEN PRIVATE INVESTMENT FUNDS

I.D. NUMBER: 52-2223144

TYPE: PARTNERSHIP

#### ACTIVITY INFORMATION:

EVERGREEN PRIVATE INVESTMENT FUNDS

100% DISPOSITION AT A NET LOSS

ORDINARY INCOME (LOSS)	<4,446.>
SEC 59(E)(2) -	0.
OTHER PORTFOLIO INCOME (LOSS)	761.
TOTAL NONPASSIVE INCOME (LOSS)	<3,685.>

#### TAX PREFERENCE ITEMS:

DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS	13. 87.
OTHER K-1 INFORMATION:	

INTEREST INCOME	644.
ORDINARY DIVIDENDS	344.
QUALIFIED DIVIDENDS	148.
NET SHORT-TERM CAPITAL GAIN (LOSS)	25,939.
INVESTMENT INCOME	988.
INVESTMENT EXPENSE	4,738.
UNRECAPTURED SECTION 1250 GAIN	15.
NONDEDUCTIBLE EXPENSES	1.

LIC HOLDINGS INC

I.D. NUMBER: 20-5290314 TYPE: S CORPORATION

ACTIVITY INFORMATION:

LIC HOLDINGS INC

TRADE OR BUSINESS - MATERIAL PARTICIPATION

ORDINARY INCOME (LOSS)

608,948.

TOTAL NONPASSIVE INCOME (LOSS)

608,948.

TAX PREFERENCE ITEMS:

DEPRECIATION ADJUSTMENT

3,176.

OTHER K-1 INFORMATION:

INTEREST INCOME CHARITABLE CONTRIBUTIONS INVESTMENT INCOME NONDEDUCTIBLE EXPENSES

6,230. 46,358. 5,350.

46,358.

POWEF	SHARES	DB	G10	CURRENCY
I.D.	NUMBER:	16	5-656	2496
TYPE:	PARTI	JERS	SHIP	

## ACTIVITY INFORMATION:

POWERSHARES DB G10 CURRENCY

100% DISPOSITION AT A NET GAIN

## OTHER K-1 INFORMATION:

INTEREST INCOME		342.
SECTION 1256 CONTR	RACTS AND STRADDLES	<11.>
DEDUCTIONS RELATED	TO PORTFOLIO INCOME	83.

828021

2008 Income from Passthrou	ighs	
BERNSTEIN FAMILY INVESTMENTS LLLP I.D. NUMBER: 26-2124343 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN FAMILY INVESTMENTS LLLP		
OTHER PASSIVE ACTIVITY		
OTHER PORTFOLIO INCOME (LOSS)	73.	
TOTAL NONPASSIVE INCOME (LOSS)	73.	
ORDINARY INCOME (LOSS) RENTAL REAL ESTATE INCOME (LOSS) OTHER RENTAL INCOME (LOSS) SEC 59(E)(2) -	<2,194.> 25. <20.> <22.>	
PASSIVE INCOME (LOSS) DISALLOWED LOSS FROM FORM 8582		<2,211.> 1,374.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		<837.>
	· —	
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS		64. 270.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS) NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) SECTION 1256 CONTRACTS AND STRADDLES INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME ROYALTY ROYALTY EXPENSES/DEPLETION INVESTMENT INCOME INVESTMENT EXPENSE UNRECAPTURED SECTION 1250 GAIN NONDEDUCTIBLE EXPENSES		319. 8,284. 972. 3,895. 837. <71,046.> 105. <1,055.> 1,568. 1,761. 1. 8,605. 1,762. 10.

2008 Income from	n Passtnrougns
BERNSTEIN FAMILY INVESTMENTS LLLP I.D. NUMBER: 26-2124343 TYPE: PARTNERSHIP	
ACTIVITY INFORMATION:	
BERNSTEIN FAMILY INVESTMENTS LLLP	
OTHER PASSIVE ACTIVITY	
OTHER PORTFOLIO INCOME (LOSS)	73.
TOTAL NONPASSIVE INCOME (LOSS)	73.
ORDINARY INCOME (LOSS) RENTAL REAL ESTATE INCOME (LOSS) OTHER RENTAL INCOME (LOSS) SEC 59(E)(2) -	<2,194.> 25. <21.> <22.>
PASSIVE INCOME (LOSS) DISALLOWED LOSS FROM FORM 8582	<2,212.> 1,375.
ALLOWABLE PASSIVE LOSS FROM FORM 8	582 <837.>
TAX PREFERENCE ITEMS:  DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENT OTHER K-1 INFORMATION:	65. 270.
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS) NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) SECTION 1256 CONTRACTS AND STRADDLES INVESTMENT INTEREST EXPENSE - SCHEDUL CHARITABLE CONTRIBUTIONS DEDUCTIONS RELATED TO PORTFOLIO INCOM ROYALTY ROYALTY ROYALTY EXPENSES/DEPLETION CREDITS INVESTMENT INCOME INVESTMENT INCOME INVESTMENT EXPENSE UNRECAPTURED SECTION 1250 GAIN NONDEDUCTIBLE EXPENSES	1.

2008 Income from Passthro	oughs	
BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN HOLDINGS LLC		
OTHER PASSIVE ACTIVITY		
ORDINARY INCOME (LOSS)	<21.>	
PASSIVE INCOME (LOSS) DISALLOWED LOSS FROM FORM 8582		<21.> 13.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		<8.>
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS)		3. 105. 10. 38. 8.
NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS)		<696.>
SECTION 1256 CONTRACTS AND STRADDLES		<10.>
INVESTMENT INTEREST EXPENSE - SCHEDULE A		16.
DEDUCTIONS RELATED TO PORTFOLIO INCOME INVESTMENT INCOME		17. 108.
		15

INVESTMENT EXPENSE

17.

2008 Income from Passthrou	ghs	
BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN HOLDINGS LLC		
OTHER PASSIVE ACTIVITY		
OTHER PORTFOLIO INCOME (LOSS)	1.	
TOTAL NONPASSIVE INCOME (LOSS)	1.	
ORDINARY INCOME (LOSS)	<22.>	
PASSIVE INCOME (LOSS) DISALLOWED LOSS FROM FORM 8582		<22.> 14.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		<8.>
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT		1.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS) NET SHORT-TERM CAPITAL GAIN (LOSS)		3. 105. 9. 38. 8. <696.>
NET LONG-TERM CAPITAL GAIN (LOSS) SECTION 1256 CONTRACTS AND STRADDLES INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME INVESTMENT INCOME INVESTMENT EXPENSE		1. <10.> 15. 18. 109.

TT/ SIMON L BERNSTEIN IRREV TR I.D. NUMBER: 51-6600239

TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

TT/ SIMON L BERNSTEIN IRREV TR

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

ORDINARY DIVIDENDS
DEDUCTIONS RELATED TO PORTFOLIO INCOME

14. 1,500.

ELIOT BERNSTEIN FAMILY TRUST I.D. NUMBER: 65-6477114

TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

ELIOT BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

ORDINARY DIVIDENDS
NET SHORT-TERM CAPITAL GAIN (LOSS)

1. <7.>

ELIOT BERNSTEIN FAMILY TRUST I.D. NUMBER: 65-6477114
TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

ELIOT BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

ORDINARY DIVIDENDS	1.
QUALIFIED DIVIDENDS	1.
NET SHORT-TERM CAPITAL GAIN (LOSS)	<7.>

JILL IANTONI FAMILY TRUST I.D. NUMBER: 65-6477115
TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

JILL IANTONI FAMILY TRUST

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

ORDINARY DIVIDENDS
NET SHORT-TERM CAPITAL GAIN (LOSS)

1. <7.>

# JILL IANTONI FAMILY TRUST I.D. NUMBER: 65-6477115 TYPE: ESTATE OR TRUST ACTIVITY INFORMATION: JILL IANTONI FAMILY TRUST OTHER PASSIVE ACTIVITY INVESTMENT INTEREST EXPENSE <1.> TOTAL NONPASSIVE INCOME (LOSS) <1.> OTHER K-1 INFORMATION:

ORDINARY DIVIDENDS

DEDUCTIONS RELATED TO PORTFOLIO INCOME

1.

LISA S FRIEDSTEIN FAMILY TRUST I.D. NUMBER: 65-6477116

TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

LISA S FRIEDSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

ORDINARY DIVIDENDS
NET SHORT-TERM CAPITAL GAIN (LOSS)

1. <7.>

828021

LISA S BERNSTEIN FAMILY TRUST I.D. NUMBER: 65-6477116

TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

LISA S BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

ORDINARY DIVIDENDS
NET SHORT-TERM CAPITAL GAIN (LOSS)

1. <7.>

# SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

## OTHER K-1 INFORMATION:

INTEREST INCOME	48,818.
ORDINARY DIVIDENDS	17,287.
QUALIFIED DIVIDENDS	2,190.
TAX-EXEMPT INTEREST	7,947.
SECTION 1231 GAIN (LOSS)	1,690.
NET SHORT-TERM CAPITAL GAIN (LOSS)	<117,580.>
NET LONG-TERM CAPITAL GAIN (LOSS)	213.
SECTION 1256 CONTRACTS AND STRADDLES	<2,141.>
INVESTMENT INTEREST EXPENSE - SCHEDULE A	6,595.
CHARITABLE CONTRIBUTIONS	6,233.
DEDUCTIONS RELATED TO PORTFOLIO INCOME	9,326.
ROYALTY	9.
ROYALTY EXPENSES/DEPLETION	6.
CREDITS	5.
UNRECAPTURED SECTION 1250 GAIN	36.
NONDEDUCTIBLE EXPENSES	5,360.
INVESTMENT INTEREST EXPENSE:	
TAINIE CHIMENIA TAICOME	65,755.
INVESTMENT INCOME INVESTMENT EXPENSE	12,486.
TINA PRIMERIA FYEFINDE	12,400.
TAX PREFERENCE ITEMS:	
DEPRECIATION ADJUSTMENT	3,331.
OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS	653.
Visition And April Division & American Control of Contr	033.

Department of the Treasury Internal Revenue Service (99)

Foreign Tax Credit
(Individual, Estate, or Trust)

Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Attachment Sequence No. **19** 

Nam	ie						10	dentifying numbe	er as shown on page	1 of your tax return
SIMON & SHIRLEY BERNSTEIN 371-32-5211										
					w. See Categories		ning on page 3	of the instruction	ns. Check only one	box on each
				-	fied in Part II below	<b>'-</b>				
-		tegory income		Section 901	***		e Lump	-sum distribution	1S	
b L	General ca	tegory income	e d∟_	」 Certain inco	me re-sourced by t	reaty				
t Re	esident of (name	of country)	► USA							
					oossession, use o			in Part II. If you	paid taxes to m	ore than one
		•			and line for each			rad Abassa		
F	art   Taxab	ne income c	or Loss From	Sources Out				<del> </del>		Total
						Foreign Count	B	SSESSION C	/Add c	ols. A, B, and C.)
g	Enter the na	me of the fo	reign country	orIIS	· · · · ·			<u>-</u>	Figures a National	1013. A, D, and 0.7
a					VARIOUS				Section of Administration of A	
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			pensation from a						Amende of the contract of the	
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			tructions)		The major and the control of the con				the delay control of the control of	
	ductions and le		on: See pages	13 and 14		Wind by (1) 8( /8) 1 (5 Yellon's AP 79 80 /89 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Particle Verger and Principles of Services and Services a	TATAL TANDAR OF THE PARTY SERVICES	The second secon	
2	Expenses defin	nitely related	to the income or	ı line 1a	Bights of the garden contribution of country and garden of contribution of the contrib				A state of the production of t	
	(attach stateme	∍nt)				6.	· · · · · · · · · · · · · · · · · · ·		Dispersion of the control of the con	
3			ctions not defini	-	1 044 7	22			And the state of t	
	Certain itemize				1,044,7	43.			ment of a del prime control to a del prime control to a deliber to	
b	Other deduction Add lines 3a an				1,044,7	23		<del></del>		
d			,)		10,0			<b></b>	Simple and the property of the	
e			, es		203451				and the second s	
f					.000				William St. De Continue of the	
g						15.	<del> </del>		Section of Administration of A	
4	Pro rata share					AND THE PROPERTY OF THE PROPER			And the second s	
а	Home mortgag	je interest (use	e worksheet on p	page 14			***************************************		yeller and a second and a secon	
	of the instruction	ons)				33.			AMERICAN STATEMENT OF THE STATEMENT OF T	
b	Other interest e	expense							Parameter defend of the control of t	
5	Losses from fo								and an administration of the control	
6	Add lines 2, 3g			4		54.		L	6	554.
	Subtract line 6 f				14, page 2		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		▶ 7  STATEME	9,471. NT 31
2010/2004	credit is claimed		raiu oi A	cciueu	Foreig	n taxes paid	or accrued	SEE	STATEME	M.T. 2.T
٦	for taxes		In forei	gn currency		n taxoo para	0. 000.000	In U.S. dolla	ırs	
	(you must check one)		III TOTO	girourionoj	1			m didi dono		(-) T-1-1 (
Country	(h) Pald	Taxes w	ithheld at sourc	e on:	(n) Other foreign	Taxes	withheld at sou	irce on:	(r) Other foreign	(s) Total foreign taxes paid or
ટ્રી ફ	(i) X Accrued				taxes paid or				taxes paid or	accrued (add cols.
	(j) Date paid or accrued	(k) Dividends	(I) Rents and royalties	(m) Interest	accrued	(0) Dividends	(p) Rents and royalties	(q) Interest	accrued	(o) through (r))
<u> </u>	2/31/08					390.			496.	886.
В										
C										
8	Add lines A thro	uah C. colum	n (s). Enter the t	otal here and or	n line 9, page 2				8	886.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **1116** (2008)

P	art III Figuring the Credit			
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued		and bene	
	for the category of income checked above Part I	9 886.		
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11 886.		
			10000000	
12	Reduction in foreign taxes	12		
				000
	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit		13	886.
14	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the	0 471		
	United States (before adjustments) for the category of income checked above Part I	9,471.		
			2010 W	
	Adjustments to line 14	15		
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income.  (If the result is zero or less, you have no foreign tax credit for the category of income	1 1		
	you checked above Part I. Skip lines 17 through 21. However, if you are filling more than one Form 1116, you must complete line 19.)			
	one Form 1116, you must complete line 19.)	9,471.		
17	Individuals; Enter the amount from Form 1040, line 41 (minus any amount on Form	ī I	120.10	
	8914, line 2). If you are a nonresident alien, enter the amount from Form 1040NR,		Crosses	
	line 38 (minus any amount on Form 8914, line 2). Estates and trusts: Enter your taxable	<b>i</b>	22222	
	income without the deduction for your exemption SEE STATEMENT 32		2000 Page 1	
	Caution: If you figured your tax using the lower rates on qualified dividends or capital ga			
	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"		18	.002921
19	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the ar	nount		
	from Form 1040NR, line 41.			
	Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 99	90-T,		
	lines 36 and 37		19	1,104,719.
	Caution: If you are completing line 19 for separate category e (lump-sum distributions),	· · · · · · · · · · · · · · · · · · ·		
	Multiply line 19 by line 18 (maximum amount of credit)		20	3,227.
21	Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 thr			
	amount on line 27. Otherwise, complete the appropriate line in Part IV	<u></u>	21	886.
· )	art IV Summary of Credits From Separate Parts III	<del></del>	1233 7222	
	Credit for taxes on passive category income			
23	Credit for taxes on general category income	23		
24	Credit for taxes on certain income re-sourced by treaty	24		
25	Credit for taxes on lump-sum distributions	25	2000 TOTAL CO.	
26	Add lines 22 through 25		26	
	Enter the smaller of line 19 or line 26		27	
	Reduction of credit for international boycott operations		28	
29	Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 4	•		000
	Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	<b>&gt;</b>	29	886.

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

# **General Business Credit**

➤ See instructions.

Attach to your tax return.



# SIMON & SHIRLEY BERNSTEIN

371-32-5211

Pa	Current Year Credit		
	portant: You may not be required to complete and file a separate credit form (shown in parentheses below) to claim dit. For details, see the instructions.	the	
1a	Investment credit (Form 3468, Part II only) (attach Form 3468)	1a	
b	Welfare-to-work credit (Form 8861)	1b	
С	Credit for increasing research activities (Form 6765)	1c	
	Low-income housing credit (Form 8586, Part I only) (enter EIN if claiming this credit from a pass-through		
	entity:)	1d	
е	Disabled access credit (Form 8826) (do not enter more than \$5,000)	1e	
f	Renewable electricity production credit (Form 8835, Part I only)	1f	
g	Indian employment credit (Form 8845)	1g	<del></del>
h	Orphan drug credit (Form 8820)	1h	
i	New markets credit (Form 8874) (enter EiN if claiming this credit from a pass-through	<del></del>	
•	entity:)	11	
i	Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	11	
•	Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming	<del>  "  </del>	
ĸ	• • • • • • • • • • • • • • • • • • • •	41.	
	this credit from a pass-through entity: )	1k	
- 1	Biodiesel and renewable diesel fuels credit (attach Form 8864)		
	Low sulfur diesel fuel production credit (Form 8896)	1m	·····-
n	Distilled spirits credit (Form 8906)	1n	
0	Nonconventional source fuel credit (Form 8907)	10	1.
р	Energy efficient home credit (Form 8908)	1p	
q	Energy efficient appliance credit (Form 8909)	1q	
r	Alternative motor vehicle credit (Form 8910) (enter EIN if claiming this credit from a pass-through		
	entity:)	1r	
\$	Alternative fuel vehicle refueling property credit (Form 8911)	1s	
t	Credits for affected Midwestern disaster area employers (Form 5884-A)	1t	
u	Mine rescue team training credit (Form 8923)	1u	
٧	Agricultural chemicals security credit (Form 8931)	1٧	
w	Credit for employer differential wage payments (Form 8932)	1w	
х	Carbon dioxide sequestration credit (Form 8933)	1x	
У	Credit for contributions to selected community development corporations (Form 8847)	10	
z	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1z	
_			
2	Add lines 1a through 1z	2	1.
-	And miles to through the	<del></del>	
3	Passive activity credits included on line 2 (see instructions)	3	1.
J	1 assive dutinty distants included of time 2 (see instituctions)	<del></del>	
4	Subtract line 3 from line 2	4	0.
4	Subtract line 3 from line 2	+++	<u> </u>
_	Describe and the smaller allowed for 0000 (one instructions)	_	0
5	Passive activity credits allowed for 2008 (see instructions)	5	0.
_		1 _ 1	
6	Carryforward of general business credit to 2008. See instructions for the schedule to attach	6	
7	Carryback of general business credit from 2009 (see instructions)	7	
			^
8	Current year credit. Add lines 4 through 7	8	0.
LHA	For Paperwork Reduction Act Notice, see instructions.		Form <b>3800</b> (2008)

Pa	rt II Allowable Credit		
9	Regular tax before credits:		
	• Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line 41		
	• Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the	Control of the contro	
	applicable line of your return	9	1,104,719.
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G,	Section 1	
	lines 1a and 1b, or the amount from the applicable line of your return		
	,	a chabababaca	
10	Alternative minimum tax:	2000 100 100 100 100 100 100 100 100 100	
	● Individuals. Enter the amount from Form 6251, line 36	San Carlotte (C)	
	Corporations. Enter the amount from Form 4626, line 14	10	
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56		
11	Add lines 9 and 10	11	1,104,719.
12 a	Foreign tax credit   12a   886.	2	
b	Personal credits from Form 1040, lines 48 through 54 (or Form	130 COLOS CON- porte de la composition della com	
	1040NR, lines 45 through 49)		
С	Credit from Form 8834 12c	Programma and	
	Non-business alternative motor vehicle credit (Form 8910, line 18)		
е	Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19) 12e		
f	Add lines 12a through 12e	12f	886.
13	Net income tax. Subtract line 12f from line 11. If zero, skip lines 14 through 17 and enter -0- on line 18a	13	1,103,833.
14	Net regular tax. Subtract line 12f from line 9. If zero or less, enter -0-		
15	Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions) 15 269,708.		
16	Tentative minimum tax:	Advanta, Sunharude / Course of the Course of the Course of the Course of	
	• Individuals. Enter the amount from Form 6251, line 34	Control Control	
	• Corporations. Enter the amount from Form 4626, line 12	And the second of the second o	
	• Estates and trusts. Enter the amount from Schedule I		
	(Form 1041), line 54	Control of the Contro	
17	Enter the greater of line 15 or line 16	17	269,708.
18 <i>a</i>	Subtract line 17 from line 13. If zero or less, enter 0	18a	834,125.
h	For a corporation electing to accelerate the research credit, enter the bonus depreciation amount		
	attributable to the research credit. (see instructions)	18b	
O	Add lines 18a and 18b	18c	834,125.
19 a	Enter the smaller of line 8 or line 18c	19a	0.
	Individuals, estates, and trusts: See the instructions for line 19a if claiming the research credit.	Annennanturalistan	
	C corporations: See the line 19a instructions if there has been an ownership change, acquisition,	Selection of the control of the cont	
	or reorganization.	de la martina substitution de la constitution de la	
b	Enter the smaller of line 8 or line 18a. If you made an entry on line 18b, go to line 19c; otherwise,	Philippin - Helphilippin - Helphilip	
	skip line 19c	19b	0.
C	Subtract line 19b from line 19a. This is the refundable amount for a corporation electing to accelerate	with Emprey of the Control of the Co	
	the research credit. Include this amount on line 32g of Form 1120 (or the applicable line of your return)	19c	

Form 3800 (2008)

Par	Allowable Credit (Continued)			
Note.	. If you are not filing Form 8844, skip lines 20 through 24 and enter -0- on line 25.			
20	Multiply line 16 by 75%	20		
<b>2</b> 1 I	Enter the greater of line 15 or line 20		21	<del></del>
	Subtract line 21 from line 13. If zero or less, enter 0-			
	Subtract line 19b from line 22. If zero or less, enter -0-			
<b>24</b> I	Enter the amount from Form 8844, line 10 or line 12	•••••	24	
	Empowerment zone and renewal community employment credit allowed. Enter th or line 24		granden start of the start of t	0.
26	Subtract line 15 from line 13. If zero or less, enter -0-			834,125.
	Add lines 19b and 25			
28	Subtract line 27 from line 26. if zero or less, enter :0-			834,125.
	Enter the investment credit from Form 3468, Part III, line 18 (attach Form 3468)		Section of the sectio	
b l	Enter the work opportunity credit from Form 5884, line 10 or		The state of the s	
ı	ine 12	29b	and with the state of the state	
	Enter the alcohol and cellulosic biofuel fuels credit from Form 6478, line 15		And Andrews Programmer State of the Control of the	
	or line 17	29c	gill y Changain an Airmánn agus agus agus agus agus agus agus agus	
d l	Enter the low-income housing credit from Form 8586, Part II, line 18		Control of the Contro	
(	or line 20	29d	The second of th	
	Enter the renewable electricity, refined coal, and Indian coal production		and supplementary of the control of	
•	credit from Form 8835, Part II, line 36 or line 38	29e	Company of the Compan	
	Enter the credit for employer social security and Medicare taxes		way from your or you have been a common or	
	paid on certain employee tips from Form 8846, line 12	29f	A CONTROL OF THE CONT	
•	Enter the qualified railroad track maintenance credit from Form		Control of the contro	
	8900, line 12		A mining rate and present of     A command or and final of	
	Add lines 29a through 29g			
	Enter the <b>smaller</b> of line 28 or line 30		31	0.
	Credit allowed for the current year. Add lines 27 and 31.		A contract of the contract of	
	Report the amount from line 32 (if smaller than the sum of lines 8, 24, and 30, see	instructions) as	Special Conference of Conferen	
	indicated below or on the applicable line of your return:		Section of the sectio	
	■ Individuals. Form 1040, line 54 or Form 1040NR, line 49		and the state of t	^
	Corporations. Form 1120, Schedule J, line 5c		32	0.
	● Fetates and truete Form 1041 Schedule Gilline 2c			

Form 3800 (2008)

Identifying number

	MON & SHIRLEY BERNSTEI	37	371-32-5211								
	CTION B - Business and Income-I										
W	Part Le Casualty or Theft Gain or Loss (Use a separate Part I for each casualty or theft.)  5 Description of properties (show type, location, and date acquired for each property). Use a separate line for each property lost or damaged from the same casualty or theft.										
			each property). Use a sepai EFT LOSS	rate I	Ine for each property lost or dam	aged from the same ca	asualty or t	theft.			
		TH.	PLT DOSS				<del> </del>				
	Property B										
	Property C										
	Property D	<del></del>			Prope	rtice					
		ŀ	Α		В	C					
46	Cost or adjusted basis of such arguerty	26	1,000,000	1 ·	,		-+				
	Cost or adjusted basis of each property  Insurance or other reimbursement	20	±,000,000	╧							
	(whether or not you filed a claim).	27									
	Note: If line 26 is more than line 27, skip	<b>L</b> 1		$\dashv$							
	line 28.										
28	Gain from casualty or theft. If line 27 is more						1				
	than line 26, enter the difference here and on line 35 or line 40, column (c), except as	CANADA (A Description of the control									
	provided in the instructions for line 39. Also,	Total Control of the		- 1							
	skip lines 29 through 33 for that column. See the instructions for line 4 if line 27 includes										
	insurance or other reimbursement you did not	Stormann and					İ				
	claim, or you received payment for your loss in a later tax year	28		١							
29	Fair market value before casualty or theft	29									
	Fair market value after casualty or theft	30									
	Subtract line 30 from line 29	31		寸							
32	Enter the smaller of line 26 or line 31	32	1,000,000	0.							
	Note: If the property was totally destroyed by casualty or lost from theft, enter on line 32 the amount from line 26. Subtract line 27 from line 32. If zero or less,		· · · · · · · · · · · · · · · · · · ·			2.00	T I				
	on line 32 the amount from line 26.	State of the state		-			Ì				
33	Subtract line 27 from line 32. If zero or less, enter -0-	33	1,000,000	ا. ٥							
34	Casualty or theft loss. Add the amounts on line 33	Enter	the total here and on lin	e 35	or line 40 (see instructions	3)	34	1,000,000.			
P	art II Summary of Gains and Lo	sses	(from separate Parts I)		(b) Losses from ca	asualties or thefts		(c) Gains from			
	(a) Identify converty or	ho#			(I) Trade, business, rental or royalty property	(ii) Income producing ar		casualties or thefts			
	(a) Identify casualty or i	erty	includible in income								
		ity or	Theft of Proper	rty	Held One Year or						
35	SEE SECTION B, PART I				( )	( 1,000,	0001				
					( )	(	)				
	Totals. Add the amounts on line 35			36	()	( 1,000,	1000				
37	Combine line 36, columns (b)(i) and (c). Enter the	net gai	n or (loss) here and on	For	m 4797, line 14. lf						
38	Form 4797 is not otherwise required, see instruction that the amount from line 36, column (b)(ii) here. Individual	ions	No amount from Income we		Individual A /Fat	rm 1040) line 29	37				
30	or Form 1040NB, Schedule A, line 16, and enter the amoun	it from bi	operty used as an employe	rio e	Schedule A (Form 1040), line 23,	, or Form 1040NR,	38	1,000,000.			
	Schedule A, line 11. Estates and trusts, partnerships, and	S corpora	heft of Property	, H	eld More Than On	e Year	30	1,000,0001			
90	Casualty or theft gains from Form 4797, line 32						39				
39 40	Casuary of their gains from Form 4797, line 52				[( )		1				
70	,				(	(	)				
41	Total losses. Add amounts on line 40, columns (b	)(i) and	(b)(ii) I .	41	(	(	)				
	Total gains. Add lines 39 and 40, column (c)	, (·/ unu	1"/\"/		1.2	1.	42	**************************************			
	Add amounts on line 41, columns (b)(i) and (b)(ii										
44	If the loss on line 43 is more than the gain on line	42.					Han in the				
a	Combine line 41, column (b)(i) and line 42, and el and S corporations, see the note below. All others	nter the	net gain or (loss) here.	Par	tnerships (except electing la	arge partnerships)					
	and S corporations, see the note below. All others required, see instructions	s, enter	inis amount on Form 47	797,	IIII 14. IT FORM 4/9/ IS NOT	LOLNETWISE	44a				
b	Enter the amount from line 41, column (b)(ii) here. Individua										
	or Form 1040NR, Schedule A, line 16, and enter the amount	nt from p	roperty used as an employe	e on	Schedule A (Form 1040), line 23,	, or Form 1040NR,	2 Alexandra (190 CA)				
	Schedule A, line 11. Estates and trusts, enter on the "Othe and S corporations, see the note below. Electing large part						44b				
4E	. ,										
70	45 If the loss on line 43 is less than or equal to the gain on line 42, combine lines 42 and 43 and enter here. Partnerships (except electing large partnerships), see the note below. All others, enter this amount on Form 4797, line 3										
	Note: Partnerships, enter the amount from h						The space of the state of the s				
	S corporations, enter the amount from	n line 4	4a or 44b on Form 1	120	S, Schedule K, line 10.		A ser region sport or makes A service garden services a service garden services a services				

# Form **4797**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

#### Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

1 Enter the gross proceeds from sales or exchanges reported to you for 2008 on Form(s) 1099-B or 1099-S

2008 Attachment Sequence No. 27

lentifying number

C T MONT	۲.	CUTDIDV	BERNSTETN

(or substitute statement) that you are including on line 2, 10, or 20

371-32-5211

2	(a)Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(6) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)				
	E STATEMENT 33						1,690				
				ļ	<u> </u>						
3	Gain, if any, from Form 4684, line			l	1	3					
4	Section 1231 gain from installmen	nt sales from Form	3252 line 26 or	37	•	4					
5	Section 1231 gain or (loss) from li										
6	Gain, if any, from line 32, from oth										
7							1,69				
•	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:  Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.										
	Individuals, partners, S corpora from line 7 on line 11 below and s 1231 losses, or they were recapt the Schedule D filed with your ret	section									
8	Nonrecaptured net section 1231	8									
9	Subtract line 8 from line 7. If zero	or less, enter -0 If	line 9 is zero, e	nter the gain from	line 7 on line 12 b	eiow. If					
	line 9 is more than zero, enter the					·					
	capital gain on the Schedule D file	ed with your return	(see instruction	ıs)		9					
Pa	rt II Ordinary Gains an	d Losses (see in	structions)	·							
10	Ordinary gains and losses not inc	luded on lines 11 ti	nrough 16 (inclu	ide property held	1 year or less):						
JI.	LL IANTONI FAMILY				T						
TR	UST										
11	Loss, if any, from line 7			<u> </u>		11					
12	Gain, if any, from line 7 or amoun	t from line 8, if appl	icable	•	**************************	12					
<ul><li>12 Gain, if any, from line 7 or amount from line 8, if applicable</li><li>13 Gain, if any, from line 31</li></ul>											
14	Net gain or (loss) from Form 4684	, lines 37 and 44a									
<ul> <li>Net gain or (loss) from Form 4684, lines 37 and 44a</li> <li>Ordinary gain from installment sales from Form 6252, line 25 or 36</li> </ul>											
10											

Combine lines 10 through 16

For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines

a If the loss on line 11 includes a loss from Form 4684, line 41, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. identify as from "Form 4797, line 18a."

See instructions

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on

LHA For Paperwork Reduction Act Notice, see separate instructions.

a and b below. For individual returns, complete lines a and b below:

Form 4797 (2008)

Form 1040, line 14

17

18

18a

18b

Pa	Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)								
19	(a) Description of section 1245, 1250, 1252, 1254, c		(b) Date acqui (mo., day, yr		(c) Date sold (mo., day, yr.)				
_ <u>A</u>									
_ <u>B</u>									
<u>C</u>									
_ <u>D</u>									
	These columns relate to the properties on lines 19A through 19D.	<b>•</b>	Property A	Property	В	Property	С	Property D	
20	Gross sales price (Note: See line 1 before completing.)	20							
21	Cost or other basis plus expense of sale	21							
22	Depreciation (or depletion) allowed or allowable	22							
23	Adjusted basis. Subtract line 22 from line 21	23							
24	Total gain. Subtract line 23 from line 20	24							
25	If section 1245 property:								
а	Depreciation allowed or allowable from line 22	25a							
b	Enter the smaller of line 24 or 25a	25b							
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.								
а	Additional depreciation after 1975 (see instructions)	26a		<del> </del>					
b	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b							
С	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c							
d	Additional depreciation after 1969 and before 1976	26d							
	Enter the smaller of line 26c or 26d	26e							
f	Section 291 amount (corporations only)	26f							
	Add lines 26b, 26e, and 26f	26g	·						
27 a	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership). Soil, water, and land clearing expenses	<b>2</b> 7a			;				
	Line 27a multiplied by applicable percentage	27b							
	Enter the smaller of line 24 or 27b	27c							
а	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs (see Instructions)	28a							
	Enter the smaller of line 24 or 28a	28b							
z <del>y</del> a	Applicable percentage of payments excluded from income under section 126 (see instructions)	29a							
b	Enter the smaller of line 24 or 29a (see instructions)	29b						•	
Su	mmary of Part III Gains. Complete property of	olumr	ns A through D through	line 29b before	going	j to line 30.			
30	Total gains for all properties. Add property columns	A thr	ough D, line 24				30		
31	Add property columns A through D, lines 25b, 26g,						31		
32	Subtract line 31 from line 30. Enter the portion from		-			*			
17V2	from other than casualty or theft on Form 4797, line int. IV Recapture Amounts Under Section	96	70 and 200E/b/(2)	Whon Busin	nacc	Hee Press	32	% orloss	
	(see instructions)	JIS T	1 8 and 260F(b)(2)	vviteri Dusi	Hess	ose props	ເບ່ວປ	70 OF LUSS	
<u></u>	(осо втанискова)					(a) Sectio	n	(b) Section 280F(b)(2)	
33	Section 179 expense deduction or depreciation allo	owable	e in prior vears		33				
34	·				34				
35	Recapture amount. Subtract line 34 from line 33. S				35				

Alternative Minimum Tax - Individuals

OMB No. 1545-0074 Attachment Sequence No. 32

Your social security number

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

► Attach to Form 1040 or Form 1040NR.

371 32 5211 SIMON & SHIRLEY BERNSTEIN Part Alternative Minimum Taxable Income 1 If filling Schedule A (Form 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 2), and go to line 2. Otherwise, 3,248,443. enter the amount from Form 1040, line 38 (minus any amount on Form 8914, line 2), and go to line 7. (If less than zero, enter as a negative amount.) 2 Medical and dental. Enter the Smaller of Schedule A (Form 1040), line 4, Or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-2 80,083. 3 Taxes from Schedule A (Form 1040), line 9 3 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions... 4 5 5 Miscellaneous deductions from Schedule A (Form 1040), line 27 6 If Form 1040, line 38, is over \$159,950 (over \$79,975 if married filing separately), enter the amount from line 11 <43,930.> of the Itemized Deductions Worksheet on page A-10 of the Instructions for Schedule A (Form 1040) 6 7 If claiming the standard deduction, enter any amount from Form 4684, line 18a, as a negative amount 7 8 Tax refund from Form 1040, line 10 or line 21 Investment interest expense (difference between regular tax and AMT) 9 Depletion (difference between regular tax and AMT) 10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount 11 772. Interest from specified private activity bonds exempt from the regular tax SEE STATEMENT 35 12 Qualified small business stock (7% of gain excluded under section 1202)\_\_\_\_\_ 13 13 Exercise of incentive stock options (excess of AMT income over regular tax income) 14 14 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 15 15 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 16 16 Disposition of property (difference between AMT and regular tax gain or loss) 17 17 3,176. Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) STMT 36 18 138. Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 34 19 20 Loss limitations (difference between AMT and regular tax income or loss) 20 21 Circulation costs (difference between regular tax and AMT) 22 Long-term contracts (difference between AMT and regular tax income) 22 23 Mining costs (difference between regular tax and AMT) 24 Research and experimental costs (difference between regular tax and AMT) 24 Income from certain installment sales before January 1, 1987 25 26 Intangible drilling costs preference 26 27 Other adjustments, including income-based related adjustments \_\_\_\_\_\_ 27 28 Alternative tax net operating loss deduction 28 29 Alternative minimum taxable income. Combine lines 1 through 28. (If married filing separately and line 29 is more than \$214,900, see instructions) 3,288,682. 29 Part | Alternative Minimum Tax (AMT) 30 Exemption. (If you were under age 24 at the end of 2008, see instructions.) IF your filing status is ... AND line 29 is not over THEN enter on line 30 Single or head of household \_\_\_\_\_\_ \$112,500 \_\_\_\_\_ \$46,200 Married filing jointly or qualifying widow(er) 150,000
Married filing separately 75,000 69.950 0. 30 34,975 If line 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 3,288,682. 34 and 36 and skip the rest of Part II 31 32 • If you are filing Form 2555 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 dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured 915,915. 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 filling separately), multiply line 31 by 26% (.26). Otherwise, multiply line 31 by 28% (.28) and subtract \$3,500 (\$1,750 if married filling separately) from the result. 33 Alternative minimum tax foreign tax credit (see instructions) 886. 33 34 Tentative minimum tax. Subtract line 33 from line 32 915 029. 35 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J 1,103,833. 35 36 AMT. Subtract line 35 from line 34. If zero or less, enter -0-. Enter here and on Form 1040, line 45 36

	art 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,				2 200 600
	line 3 of the worksheet in the instructions			37	3,288,682.
38	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax			Comment Section	
	Worksheet in the instructions for Form 1040, line 44, or the amount from			The second secon	
	line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for			To a subject our singles	
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if			STATE OF THE STATE	
	necessary) (see the instructions). If you are filling Form 2555 or 2555-EZ,	20	10,892.	A part of the control	
20	see instructions for the amount to enter	38	10,092.	Security of the control of the contr	
39	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,			Vicinity ( ) and ( ) y upon upon in many new analysis ( ) upon in the new promoted ( ) upon in y upon in the promoted ( ) upon in the promoted	
	see instructions for the amount to enter	39		A SECTION OF THE SECT	
40	If you did not complete a Schedule D Tax Worksheet for the regular tax or the	38		a photo de man repaire de la companya de la company	
70	AMT, enter the amount from line 38. Otherwise, add lines 38 and 39, and enter			Andrew Construction of the	
	the smaller of that result or the amount from line 10 of the Schedule D Tax			A Carlo Carl	
	Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555			CONTRACTOR OF THE CONTRACTOR O	
	or 2555-EZ, see instructions for the amount to enter	40	10,892.	annua ir fe bhabar i bar hanna annua ir c annua ir c a annua ir c a annua ir c annua ir	
41	Enter the <b>smaller</b> of line 37 or line 40	· · · · · · · · · · · · · · · · · · ·		41	10,892.
	Subtract line 41 from line 37			42	3,277,790.
	If line 42 is \$175,000 or less (\$87,500 or less if married filing separately), multiply li				
	Otherwise, multiply line 42 by 28% (.28) and subtract \$3,500 (\$1,750 if married filling	ng separ	ately) from		
	the result		<b>&gt;</b>	43	914,281.
44	Enter:			A CONTRACTOR OF THE CONTRACTOR	
	• \$65,100 if married filing jointly or qualifying widow(er),				
	• \$32,550 if single or married filling separately, or	44	65,100.	Manager Control of Con	
	• \$43,650 if head of household.			A COMPANY AND THE A COMPANY AND THE ADMINISTRATION OF A COMPANY AN	
45	Enter the amount from line 7 of the Qualified Dividends and Capital Gain			Europe Control	
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from			anna or a denda or	
	line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for			Capacita Control	
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If	_	2 222 005	Committee of the commit	
	you did not complete either worksheet for the regular tax, enter ·0-	45	3,232,885.	ATTO STATE OF THE PARTY OF THE	
46	Cubinat line 45 from line 44 lf zaro er lege enter 0	46	0.		
40	Subtract line 45 from line 44. If zero or less, enter -0-	46		A company of the comp	
47	Enter the smaller of line 37 or line 38	47	10,892.		
4,	Litter the smaller of line of of line od	<del>                                     </del>	10,002		
48	Enter the smaller of line 46 or line 47	48		property of the control of the contr	
49	Subtract line 48 from line 47	49	10,892.	The second secon	
50	Multiply line 49 by 15% (.15)			50	1,634.
	If line 39 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go	a to line	5.1	Company of the compan	
	If the 39 is zero of blank, skip lines 51 and 52 and go to line 55. Otherwise, go		J1.	description of the second of t	
51	Subtract line 47 from line 41	51		- Spring Andrews Communication	
52	Multiply line 51 by 25% (.25)		<b>&gt;</b>	52	<u> </u>
					015 015
53	Add lines 43, 50, and 52			53	915,915.
	(Charles 0.7 to \$4.75,000 cm loss (\$0.7500 cm loss (\$ cm and all \$0.00 cm loss (\$ cm a	i 07 !	.000/ /00)		
54	If line 37 is \$175,000 or less (\$87,500 or less if married filling separately), multiply I	-	• •		
	Otherwise, multiply line 37 by 28% (.28) and subtract \$3,500 (\$1,750 if married fili			[4	917,331.
	the result	•••••••		54	711,331.
55	Enter the smaller of line 53 or line 54 here and on line 32. If you are filing Form 25	55 or 25	55-EZ do not enter		
J	this amount on line 32. Instead, enter it on line 4 of the worksheet in the instruction			55	915,915.
_	and amount on the our medical of the rest and rest and restroited in the motification				Form <b>6251</b> /2008\

STRON & SHILLEY BERNSTEIN			ALTERNA'	ATIVE MINIMUM TAX RECONCILIATION REPORT	CONCILIATION REPO	31		
STEADY & SHIRLEY BERNSTEIN   Form & Adjustment   Form & Adjustme	Name(s							Social Security Number
Form   Description   Form 6251, Line 19   Form 6251, Line 20   Other Action   Form 6251, Line 19   Form 6251, Line 20   Other Action   Form 6251, Line 20   Other Action   Form 6251, Line 3   1.76	SIMO	& SHIRLEY						71-32-521
Name   Description   Intoine   Form @251, Line 19   Form @251, Line 20   Ourset	Form					Adjustment		
X1 - IC HOLDINGS INC	Name	Description	Income	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251 Other Adjustment
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* REGULAR INCOME  * REGULAR INCOME  * REGULAR INCOME  * AMT INCOME	4797	INVES	100 Carlo	The second secon	See A mineral control of the control	The second secon	Service of the control of the contro	
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Name	SIMO	& SHIRLEY						371-32-5211
	Form					Adjustment		
THE SERVICE   S	Name	Description	Іпсоте	3251, Line	T-	-	Form 6251, Line 20	Form 6251 Other Adjustment
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Name(s)						<u> </u>	Social Security Number
SIMON	V & SHIRLEY BERNSTEIN					, ,	371-32-5211
Form					Adjustment		
Name	Description	Income	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251 Other Adjustment
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Department of the Treasury Internal Revenue Service (99)

# ALTERNATIVE MINIMUM TAX

Foreign Tax Credit
(Individual, Estate, or Trust)
Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Nan	ne						10	lentifying numb	er as shown on page	1 of your tax return
SI	EMON & S	HIRLEY	BERNST	EIN				371-32-	5211	
					w. See Categories		inning on page 3	of the instructio	ns. Check only one	box on each
_				<u>.</u>	fied in Part II below	1.	ш.			
a [ b [		tegory income		Section 901	***	waa ka	e Lump	-sum distributio	ns	
ן מ	General ca	tegory income	• a	_ Certain inco	me re-sourced by t	reaty				
f R	tesident of (name	of country)	USA							
				untry or U.S. I	possession, use o	column A in P	art I and line A	in Part II. If voi	ı paid taxes to π	nore than one
					and line for eac				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
P	art I Taxab	le Income c	r Loss From	Sources Out	side the United	States (for C	ategory Check	ed Above)		
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E D	<ul> <li>Other interest a Losses from fo</li> </ul>								police control participation of the control p	
5 6	Add lines 2, 3g	~	***************************************	******	5	33.			6	533.
	Subtract line 6 f			ere and on line		334			▶ 7	9,492.
			Paid or A		, 17 F-9+					
1	Credit is claimed				Foreiç	n taxes paid	or accrued			
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بإ.	(j) Date paid or accrued	(k) Dividends	(I) Rents and royalties	(m) Interest	200,204	(0) Dividends	(p) Rents and royalties	(q) Interest		
_	12/31/08					390	) 		496.	886.
B C										
	Add lines A thro	uah C. colum	n (s) Enter the t	ntal here and o	n line 9 nage 2	1	1		L a	886.

P	art III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued				
	for the category of Income checked above Part I	9	886.		
10	Carryback or carryover (attach detailed computation)	10			
11	Add lines 9 and 10	11	886.		
12	Reduction in foreign taxes	12			
	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit			13	886.
14	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the				
	United States (before adjustments) for the category of Income checked above Part I	14	9,492.		
				200	
	Adjustments to line 14	15			
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.)	16	9,492.		
17	Individuals: Enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 2). If you are a nonresident allen, enter the amount from Form 1040NR, line 38 (minus any amount on Form 8914, line 2). Estates and trusts: Enter your taxable income without the deduction for your exemption  SEE STATEMENT 37	17	3,283,625.		
	Caution: If you figured your tax using the lower rates on qualified dividends or capital ga				
	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"			18	.002891
19	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the a from Form 1040NR, line 41.	mount			
	Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 9	90-T,			
	lines 36 and 37			19	915,915.
	Caution: If you are completing line 19 for separate category e (lump-sum distributions),				
	Multiply line 19 by line 18 (maximum amount of credit)			20	2,648.
21	Enter the $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 this				
in-x	amount on line 27. Otherwise, complete the appropriate line in Part IV		<u></u>	21	886.
******	art IV Summary of Credits From Separate Parts III	1		Tub stage	
	Credit for taxes on passive category income			000000	
23	Credit for taxes on general category income	23			
24	Credit for taxes on certain income re-sourced by treaty	24			
25	Credit for taxes on lump-sum distributions	[25]		CC	
20	Add lines 22 through 25			26 27	886.
2/	Enter the smaller of line 19 or line 26  Reduction of credit for international boycott operations			28	000.
	Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 4		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	26	<u> </u>
حع	Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a		_	29	886.
_	ז סיונו וסייסוארו, ווווס ידי, ו סיווו וסידיו, סטוושמעוני מ, ווווט במ, טו דטוווו ססט"ר, ווווט יוטמ			128	000.

Form 1116 (2008)

# **Investment Interest Expense Deduction**

2008

Attach to your tax return.

Attachment

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Identifying number

SIN	MON & SHIRLEY BERNSTEIN				371-32-5211
Pai	Total Investment Interest Expense				
1	Investment interest expense paid or accrued in 2008 (see instructions)	EE	STATEMENT 38	1	6,595.
2	Disallowed investment interest expense from 2007 Form 4952, line 7			2	1.
3	Total investment interest expense. Add lines 1 and 2			3	6,596.
Pa	Net Investment Income	1	I		
4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) STMT 39	<u>4a</u>	128,806.	Full design of the control of the co	
þ	Qualified dividends included on line 4a	4b	10,892.	The second secon	
С	Subtract line 4b from line 4a	 I		4c	117,914.
d	Net gain from the disposition of property held for investment	4d		Company or other particles of the particle	
е	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e		And the second s	
f	Subtract line 4e from line 4d			41	
g	Enter the amount from lines 4b and 4e that you elect to include in investment include instructions)			4g	
h	Investment income. Add lines 4c, 4f, and 4g			4h	117,914.
5	Investment expenses (see instructions)	EE	STATEMENT 40	5	4,750.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter 0			6	113,164.
Fa	THE INVESTIGATION THE PARTY EXPENSE DEGREEON			Τ	
7	Disallowed investment interest expense to be carried forward to 2009. Subtract If zero or less, enter -0-			7	0.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See in	nstruc	tions STMT 41	8	6,596.

## ALTERNATIVE MINIMUM TAX

OMB No. 1545-0191 4952 **Investment Interest Expense Deduction** Department of the Treasury Internal Revenue Service Attach to your tax return. Identifying number Name(s) shown on return 371-32-5211 SIMON & SHIRLEY BERNSTEIN Part I Total Investment Interest Expense Investment interest expense paid or accrued in 2008 (see instructions) SEE STATEMENT 42 6,595. 1. Disallowed investment interest expense from 2007 Form 4952, line 7 2 Total investment interest expense. Add lines 1 and 2 6,596. Part II Net Investment Income 4a Gross income from property held for investment (excluding any net 129,578. gain from the disposition of property held for investment) 4a 10,892. b Qualified dividends included on line 4a 118,686. c Subtract line 4b from line 4a d Net gain from the disposition of property held for investment e Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions) 4f f 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) 4g 118,686. h Investment income. Add lines 4c, 4f, and 4g 4,750. Investment expenses (see instructions) 5 Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-113,936. Part III Investment Interest Expense Deduction Disallowed investment interest expense to be carried forward to 2009. Subtract line 6 from line 3. If zero or less, enter -0-7 0. 6,596. Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions 6,596. REGULAR FORM 4952, LINE 8 6.596. LESS RECOMPUTED FORM 4952, LINE 8

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4952 (2008)

INTEREST ADJUSTMENT - FORM 6251, LINE 9

# Form **8621** (Rev. December 2004) Department of the Treasury Internal Revenue Service

# Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund See separate instructions.

OMB No. 1545-1002

Attachment Sequence No. 69

Name of shareho	lder	Identifying number (see page 2	of instructions)
SIMON BE	ERNSTEIN	371-32-5211	
Number, street, a	and room or suite no. (If a P.O. box, see page 2 of instructions.)  ONS HEAD LANE	Shareholder tax year: calendar year 2	008 or other tax year beginning ending
City or town, stat	e, and ZIP code or country	, and	orani g
BOCA RAT			
V	areholder filing the return; X Individual Corporation Partnersh	<del>`                                      </del>	Nongrantor Trust Estate
•	foreign investment company (PFIC) or qualified electing fund (QEF)	Employer identification number	r (if any)
	RE HOLDINGS LTD		
	MPUS REINSURANCE COMPANY		0000
•	umber, street, city or town, and country.)	Tax year of company or fund: ca	
	AND HOUSE, VICTORIA	tax year beginning	, and
	N HM 1 BD	ending	, .
	Elections (See instructions.)	- OFF O	
	tion To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as	•	=
	med Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QE	r, elect to recognize gain on the o	eemed sale
· · · · · · · · · · · · · · · · · · ·	y interest in the PFIC. <i>Enter gain or loss on line 10f of Part IV.</i> med Dividend Election. I, a shareholder on the first day of a PFIC's first tax year as	a OEE that is a controlled foreign o	corneration (CEC), elect to treet
	mount equal to my share of the post-1986 earnings and profits of the CFC as an exc		
	tion To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend		
	ings and profits of the QEF until this election is terminated. Complete lines 3a thro		
	e: If any portion of line 1a or line 2a of Part II is includible under section 551	=	•
	4(c) and 1294(f) and the related regulations for events that terminate this e		, 0,000,000,000,000,000,000
	tion To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC		e) applies, elect to treat
	n excess distribution the gain recognized on the deemed sale of my interest in the Pi	•	
	profits deemed distributed, on the last day of its last tax year as a PFIC under sectio		
	tion to Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mar	· · · -	
	ning of section 1296(e). Complete Part III.	•	
	ncome From a Qualified Electing Fund (QEF). All QEF shareh	olders complete lines 1a through:	2c. If you are making
	election D, also complete lines 3a through 4c. (See page 5 of instructions.)		
1 a Enter your	r pro rata share of the ordinary earnings of the QEF	1a	And the state of t
<b>b</b> Enter the p	portion of line 1a that is included in income under		Communication of the communica
section 55	51 or 951 or that may be excluded under section 1293(g)	1b	South of American Control of the Con
	ine 1b from line 1a. Enter this amount on your tax return as dividend income		1c
	· · · · · · · · · · · · · · · · · · ·	2a	And the state of t
	portion of line 2a that is included in Income under		Panel May and Art Mark 1 VI Say assure of Ar
		2b ]	American County
	ine 2b from line 2a. This amount is a net long-term capital gain. Enter this amount		
	of the Schedule D used for your income tax return. (See instructions.)		2c
	1c and 2c	I	3a
	total amount of cash and the fair market value of other property distributed	9h	contributed sections of a contributed section
	d distributed to you during the tax year of the QEF. (See instructions.)  portion of line 3a not already included in line 3b that is	3b	And Strategy - resignent And- symbol control (and and and and and and and and and and
	le to shares in the QEF that you disposed of, pledged,		e-principle or violation of the control of the cont
		30	And the state of programmers, and the state of the state
	3b and 3c		3d
e Subtract li	ine 3d from line 3a, and enter the difference (if zero or less, enter amount in bracket	3)	3e
	t: If line 3e is greater than zero, and no portion of line 1a or 2a is includible i		Control Contro
-	ction 551 or 951, you may make Election D with respect to the amount on		Application of configurations of the configuration
	<b>I</b>	4a	communicación de la commun
	total tax for the tax year determined without regard to		Angular and Angula
	· · · · · · · · · · · · · · · · · · ·	4b	Transpiration Annual Communication Communica
c Subtract I	ine 4b from line 4a. This is the deferred tax, the time for payment of which is		
extended	by making Election D. See instructions		4c
LHA For Pa 812611 04-25-08	aperwork Reduction Act Notice, see page 7 of separate instructions.		Form <b>8621</b> (Rev. 12-2004)

Part	(Rev. 12-2004)	ss) From Mark-	to-Market Flee	ction (See page 5 o	Finetructions \	<u></u>		rage £
	er the fair market value of				· · · · · · · · · · · · · · · · · · ·		<u>. T</u>	
	er your adjusted basis in t							
	ess. Subtract line 6 from					······		
	our tax return. If a loss, g					7	7	
8 Ente	er any unreversed inclusion	ons (as defined in sectio	n 1296(d)). See instr	uctions.			3	
	er the smaller of line 7 or						9	
Part		ns From and Dis eparate Part IV for				page 6 of	instructio	ons.)
	er your total distributions	from the section 1291 f	und during the curre	nt tax year with respec	t to the applicable stock			
	ling period of the stock b					1(	Da	
	er the total distributions (							
	uded in income under sec		-					
-	ceding the current tax yea	•					Ob	
	de line 10b by 3. (See ins					_	Oc	
	tiply line 10c by 125% (1						)d	
	tract line 10d from line 1						1	
	ro or less and you did no lived more than one distr							
	ribution on your income t	-	•				De	
	er gain or loss from the d						-	
	nplete line 11. If a loss, sh				and na gam,	1	Of	
	ch a statement for each o		•			2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
	lock of shares held. Alloc	·				A management of the control of the c		
	are allocated to days in e		• •	•		Sometiment of the control of th		
	er the total of the amount		that are allocable to	the current tax year ar	d tax years	Or make specified in the control of	100 000 000 000 000 000 000 000 000 000	
befo	ore the foreign corporatio	n became a PFIC (pre-P	FIC tax years). Enter	these amounts on you	ır İncome tax	0	PET PET PET	
retu	rn as other income					1	1b	
	er the aggregate increase							
	er than the current tax ye						1c	
	eign tax credit. (See instru						1d	
	tract line 11d from line 1					1	1e	
	ermine interest on each n er the aggregate amount			•		١.	ıf	
Part		Prior Year Section						
	Complete a sepa	arate column for each ou	utstanding election. C	omplete lines 9 and 1	O only if there is a partial	termination	of the sect	tion 1294 election.
4 T		(i)	(ii)	(lii)	(iv)	(v	}	(vi)
	ear of outstanding							
electi 2 Undi	on stributed earnings to							
	h the election relates							
WISIG	ii tije oleettori relates							
3 Defe	rred tax		•					
	st accrued on deferred							
tax (lir	ne 3) as of the filing date				_			
5 Even	t terminating election							
6 Earnir	ngs distributed or deemed							
	buted during the tax year					<u> </u>		
	rred tax due with this							
	n				ļ			
	ued interest due with			1				
	return							Secretary various base Harmon
	red tax outstanding after					Control of the contro		
	I termination of election					<del> </del>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	ination of election							
101111	manuff of Gigonoff	<u>.                                    </u>		<del></del>	<del></del>	L	For	<u> </u>

(Rev. May 2009) Department of the Treasury Internal Revenue Service

# **Work Opportunity Credit**

Attach to your tax return.

OMB No. 1545-0219

2008

Attachment Sequence No. **77** Name(s) shown on return ldentifying number

SI	MON & SHIRLEY BERNSTEIN		371-32-5211
1	Enter on the applicable line below the total qualified first- or second-year wages paid or incurred during the tax year, and multiply by the percentage shown, for services of employees who are certified (if required) as members of a targeted group.	The second of th	
а	Qualified first-year wages of employees who worked for you at least  120 hours but fewer than 400 hours x 25%	(.25) <b>1a</b>	
b	Qualified first-year wages of employees who worked for you at least 400 hours \$ x 40%	(.40) <b>1b</b>	
С	Qualified second-year wages of employees certified as long-term family assistance recipients x 50%	(.50) <b>1c</b>	
2	Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to salaries and wages	2	
3	Work opportunity credit from partnerships, S corporations, cooperatives, estates, and trusts STMT	43 <u>3</u>	4.
4	Add lines 2 and 3. Partnerships and S corporations, report this amount on Schedule K; all others, go to line 5	Continue of the second of the	4.
5	Work opportunity credit included on line 4 from passive activities (see instructions)	5	4.
6	Subtract line 5 from line 4	6	0.
7	Work opportunity credit allowed for 2008 from a passive activity (see instructions)	7	
8	Carryforward of any work opportunity credit that originated in a tax year that began after 2006 and carryforward from 2007 of the New York Liberty Zone business employee credit	The region of administration of the control of the	
9	Carryback of the work opportunity credit from 2009 (see instructions)	9	
10	Add lines 6 through 9. Cooperatives, estates, and trusts, continue on to line 11. All others, report this amount on Form 3800, line 29b	v same he der motern von der der motern von der der motern von der der der der der der der der der der	
11	Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see instructions)	An angular for the first of the	
12	Cooperatives, estates, and trusts, subtract line 11 from line 10. Report this amount on Form 3800, line 29b	August of State of St	
_			

For Paperwork Reduction Act Notice, see instructions.

Form **5884** (2008) (Rev. 5-2009)

# Gains and Losses From Section 1256 Contracts and Straddles

Attach to your tax return.

OMB No. 1545-0644

Internal Revenue Service Name(s) shown on tax return SIMON & SHIRLEY BERNSTEIN 371-32-5211 Check all applicable boxes A Mixed straddle election C Mixed straddle account election (see instructions). В Straddle-by-straddle identification election D Net section 1256 contracts loss election Part Section 1256 Contracts Marked to Market (a) Identification of account (b) (Loss) (c) Gain SEE STATEMENT 44 Add the amounts on line 1 in columns (b) and (c) \_\_\_\_\_\_\_\_ 2 <2,141.> 3 Net gain or (loss). Combine line 2, columns (b) and (c) Form 1099-B adjustments. See instructions and attach schedule 4 <2.141.>Combine lines 3 and 4 Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions. 6 If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be carried back. Enter the loss as a positive number 6 <2.141.>Combine lines 5 and 6 Short-term capital gain or (loss). Multiply line 7 by 40% (.40). Enter here and include on the appropriate line <856.> of Schedule D (see instructions) 8 Long-term capital gain or (loss). Multiply line 7 by 60% (.60). Enter here and include on the appropriate line of Schedule D (see instructions) <1,285.> Part II Gains and Losses From Straddles. Attach a separate schedule listing each straddle and its components. Section A - Losses From Straddles (b) Date entered Into o acquired (h) Recognized loss. (e) Cost or If column (e) is lf column (f) (g) Unrecognized (d) Gross (c) Date closed out or sold other basis more than (d), enter (a) Description of property gain on offsetting is more than (d). difference. plus expense positions enter difference. of sale Otherwise. Otherwise, enter -0-Mo, Day Yr. enter -0-10 11a Enter the short-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions) 11a b Enter the long-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions) Section B - Gains From Straddles (b) Date entered into or acquired (f) Gain, K column (d) (e) Cost or other basis Is more than (e), (a) Description of property (c) Date closed out or sold (d) Gross sales price plus expense of sale enter difference. Otherwise, enter -0-Mo. Day Yr. 12 13 a Enter the short-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D b Enter the long-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions) (c) Fair market value e) Unrecognized dain. If column (b) Date acquired (d) Cost or other basis (a) Description of property (c) is more than (d), enter on last business day of Mo. Dav difference. Otherwise, enter -0tax year 14

Department of the Treasury Internal Revenue Service (99)

# Passive Activity Loss Limitations ► See separate instructions. ► Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

Name(s) shown on return

Identifying number

SIMON & SHIRLEY BERNSTEIN			37	1-32-5211
Part 2008 Passive Activity Loss Caution: Complete Workshe	ets 1, 2, and 3 on p	age 2 before comple		
Rental Real Estate Activities With Active Participation (For the definition of	<del></del>			
Special Allowance for Rental Real Estate Activities on page 3 of the instruc-		,	01720101170	and the second control of the second control
1a Activities with net income (enter the amount from Worksheet 1,	,			AND THE STATE OF A STA
column (a))	1a		A manufacture of the control of the	
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b		A CONTROL OF THE CONT	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))			100 mm of 100 mm	
d Combine lines 1a, 1b, and 1c			1d	
Commercial Revitalization Deductions From Rental Real Estate Activities			200 C 200 C 20 C 20 C 20 C 20 C 20 C 20	Annual or of the control of the cont
2a Commercial revitalization deductions from Worksheet 2, column (a)	2a		Jr. 25 VANO 2014 V	The parties of the control of the co
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b		The second secon	
c Add lines 2a and 2b			2c	
All Other Passive Activities			Section Control Control	And the second of the second o
3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	1,690.	Overall Information (Control of Control of C	
b Activities with net loss (enter the amount from Worksheet 3, column (b))		<4,466.	AND THE PROPERTY OF THE PROPER	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))		<9.	A CONTRACT OF STREET	
d Combine lines 3a, 3b, and 3c			3d	<2,785.
4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses				
unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 85		-		
achadulae normally usad	,		4	<2,785.
If line 4 is a loss and:  ■ Line 1d is a loss, go to Part II.				<u> </u>
• Line 2c is a loss (and line 1d is zero or more), s	kin Bort II and so to	Dort III		
<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero)</li> </ul>			00 1E	
Caution: If your filling status is married filling separately and you lived with your	• • •	_		
Part II or Part III. Instead, go to line 15.	spouse at any time	duning the year, <b>do t</b>	IOL CO.	mpiete
Part II Special Allowance for Rental Real Estate Activitie	s With Active F	Particination		
Note: Enter all numbers in Part II as positive amounts. See page 8				· ·
<del></del>				1
5 Enter the smaller of the loss on line 1d or the loss on line 4		••••••	5	
6 Enter \$150,000. If married filing separately, see the instructions				Company of the compan
7 Enter modified adjusted gross income, but not less than zero (see the ins	u-) /			
Note: If line 7 is greater than or equal to line 6, skip lines 8 and	And the second of the second o			
9, enter -0- on line 10. Otherwise, go to line 8.	and the second s		In a control of the c	
8 Subtract line 7 from line 6	8		Control of the Control	The state of the s
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married fili			9	
10 Enter the smaller of line 5 or line 9			10	<u> </u>
If line 2c is a loss, go to Part III. Otherwise, go to line 15.	<u> </u>			
Part III Special Allowance for Commercial Revitalization				ie Activities
Note: Enter all numbers in Part III as positive amounts. See the exa			ions.	
11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing s			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 positive amount), line 11, or line	e 13		14	
Part IV Total Losses Allowed		***************************************		
15 Add the income, if any, on lines 1a and 3a and enter the total			15	1,690.
16 Total losses allowed from all passive activities for 2008. Add lines 10,	•			
to find out how to report the losses on your tax return	SEE STA	ATEMENT 49	16	1,690.

Form 8582 (2008) SIMON & SHIRLEY BERNSTEIN 371-32-5211 Page 2 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.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) Total. Enter on Form 8582, lines 1a, 1b. and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year Name of activity (c) Overall loss 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.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 3a, 1,690. <4,466.> <9. 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 and line number (c) Special column (c) Name of activity (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions) Total Worksheet 5 - Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
	SEE ATTACHED	STATEMENT F	OR WORKSHEET	5
Total	<b>&gt;</b>	2,785.	1.000000000	2,785.

<b>Worksheet 6 - Allowed Losses</b> (See instru	ctions.)							
Name of activity	Form or sch and line nu to be report (see instruc	mber ted on	(a) L	.oss	(b) Un	nallowed loss	(c) A	llowed loss
<del></del>							<del></del>	
	SEE ATT	ACHED	STATE	меми в	OR W	ORKSHEET	6	
	lown min	XCIIID	DITTI	TITALY I	OIC N	ORTHOLIDE	<u> </u>	
Total				9.		9.		
Total Worksheet 7 - Activities With Losses Ro	eported on T	wo or N	lore Forn	ns or Sch	edules			
Name of activity:	(a)	<u>.</u>	(b)	(c) Ra	tio	(d) Unallowed loss	(e)	Allowed loss
Form or schedule and line number to be reported on (see instructions):		A CONTROL OF THE CONT					A CONTROL OF THE CONT	
1a Net loss plus prior year unallowed loss from form or schedule		In the case of a set of the case of a set of the case of a set of the case of a set of the case of a set of the case of a set of the case of a set of the case of a set of the case of a set of the case of the ca				And the second s	A month for the state of the st	
b Net income from form or schedule		The second secon			The second of th	The property of the property o		
c Subtract line 1b from line 1a. If zero or less, ente	er-0 ►							
Form or schedule and line number to be reported on (see instructions):		A CONTROL OF THE PROPERTY OF T						
1a Net loss plus prior year unallowed loss from form or schedule		The other was a series of the						
b Net income from form or schedule		The second of th	Company of the company of the plant of the company	di per in viden anno ne per unitare e su cincinente di per in viden anno ne per unitare e su cincinente di per in viden anno cincinente di per un cincinente di per in vidente di per un considerativo di per in vidente di per in considerativo di per in cons	The second secon	The second secon	Security of the security of th	
c Subtract line 1b from line 1a. If zero or less, ente	er -0 <b>&gt;</b>							
Form or schedule and line number to be reported on (see instructions):		The control of the co						
1a Net loss plus prior year unallowed loss from form or schedule		A common person with a stage of the common person person of the common person of the common person of the common p					A CONTROL OF THE CONT	
b Net income from form or schedule		The second secon		Constitution of the consti	Maria Maria	the band opened becomes to be able to a security and the security of the secur	The second secon	
c Subtract line 1b from line 1a. If zero or less, enter		ACHED	STATE	MENT F	OR W	ORKSHEET	7	
	ERALL	+					+	
Total	<b>_</b>		4,466.	1.000	0000	2,77		1,690 orm <b>8582</b> (2008)
							Г	יוווו <b>טטטב (</b> בטטס,

# Form **8582-CR**

# **Passive Activity Credit Limitations**

► See separate instructions.

OMB No. 1545-1034

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

► Attach to Form 1040 or 1041.

SIMON & SHIRLEY BERNSTEIN

371-32-5211

ldentifying number

Par	Caution: If you have credits from a publicly	traded partnership, see Pul	olicly Traded Partnersh	ips (PTPs) on page	e 14 of	the instruction:	s.
	ts From Rental Real Estate Activities With Active Part ncome Housing Credits) (See Lines 1a through 1c on		itation Credits and				
1a	Credits from Worksheet 1, column (a)		1a		A CONTRACTOR OF THE CONTRACTOR		
b	Prior year unallowed credits from Worksheet 1, colum	n (b)	<u>1</u> b		A CONTRACTOR OF THE CONTRACTOR		
	Add lines 1a and 1b				10		
	e 1990 (or From Pass-Through Interests Acquired Bef			5511155			
			1 1		A STATE OF THE STA		
2a	Credits from Worksheet 2, column (a)		2a				
b	Prior year unallowed credits from Worksheet 2, colum	n (h)	2b				
	( NO) year unanowou oreans none workshoet 2, column	II (D)					
С	Add lines 2a and 2b				2c		
Low-l	ncome Housing Credits for Property Placed in Service	After 1989 (See Lines 3a thr	ough 3c on page 9.)		Property of the Control of the Contr		
3a	Credits from Worksheet 3, column (a)		3a		Andrew de l'arter		
b	Prior year unallowed credits from Worksheet 3, colum				additional of the control of the con		
C_	Add lines 3a and 3bher Passive Activity Credits (See Lines 4a through 4c	*******************************			3¢	1	
All Ot					The same / sind		
4a	Credits from Worksheet 4, column (a)		4a	5.	y pangyby y	1	
b	Prior year unallowed credits from Worksheet 4, colum				20 ALVEST AND A	I	_
<u> </u>	Add lines 4a and 4b				4c	ļ	5.
5	Add lines 1c, 2c, 3c, and 4c				5	<del></del>	5.
6	Enter the tax attributable to net passive income (see page 1)				6	<del></del>	0.
7	Subtract line 6 from line 5. If line 6 is more than or equ				7		5.
Note	<ul> <li>If your filing status is married filing separately ar do not complete Part II, III, or IV. Instead, go to</li> </ul>		se at any time during	i the year,		The second secon	
Pal	til Special Allowance for Rental R	eal Estate Activities	With Active Par	ticipation		The section of comments and a contract of the	222000000000000000000000000000000000000
<u> </u>	Note: Complete this part only if you have a	n amount on line 1c. Other	wise, go to Part III.	-			
8	Enter the smaller of line 1c or line 7				8		
9	Enter \$150,000. If married filing separately, see page	10	9				
10	Enter modified adjusted gross income, but not less that	an zero (see page 10).					
	If line 10 is equal to or more than line 9, skip lines 11				Angelomenta Annorma Seconda de Angelomenta Seconda de Angelomenta Seconda de Angelomenta Seconda de Angelomenta		
	through 15 and enter -0- on line 16		10				
11			11				
12	Multiply line 11 by 50% (.50). Do not enter more tha				The second secon		
	filing separately, see page 10		12				
13 a	Enter the amount, if any, from line 10 of Form 8582	13a	Official control and control of the		Company of the compan		
h	Enter the amount, if any, from line 14 of	100	Complete Approximation of the Comple				
-	Form 8582	13b	The contract of the contract o				
C	Add lines 13a and 13b		13c				
-	•••••						
14	Subtract line 13c from line 12		14				
15	Enter the tax attributable to the amount on line 14 (see	page 10)		************************	15		
	·						
16	Enter the smaller of line 8 or line 15				16	1	

	Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Acquired Before 1990)	Inter	ests
	Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.	г	····
17	Enter the amount from line 7	17	
18		18	
19	Enter the amount from line 16  Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V	19	
20		20	
21	Enter the smaller of line 2c or line 19  Enter \$250,000. If married filling separately, see page 13. (See page 13	20	
21	to find out if you can skip lines 21 through 26.)	Section of the sectio	
22	Enter modified adjusted gross income, but not less than zero. (See instr. for line 10 on page 10.)		
22		200 000 000 000	
00	If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	The state of the s	
23	Subtract line 22 from line 21 23	Section Control Contro	
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married		
	filing separately, see page 13 24	- control of the cont	
25a	Enter the amount, if any, from line 10 of	graver room to accom-	
_	Form 8582	Spring appropriate and appropr	
b	Enter the amount, if any, from line 14 of	under the account is to the bound of the county under the county of the county under the county of the county	
	Form 8582	and the second of the second o	
	Add lines 25a and 25b 25c	AND AND AND AND AND AND AND AND AND AND	
26	Subtract line 25c from line 24	200 (	
27	Enter the tax attributable to the amount on line 26 (see page 13)	And an advantage of a second o	
28	Enter the amount, if any, from line 18	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
29	Subtract line 28 from line 27	29	
30 Pa	Enter the smaller of line 20 or line 29  Int. IV Special Allowance for Low-Income Housing Credits for Property Placed in Service Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V.	30 After	1989
31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7	31	
32	Enter the amount from line 30	32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33	
34	Enter the smaller of line 3c or line 33	34	
35	Tax attributable to the remaining special allowance (see page 13)	35	-
36	Enter the smaller of line 34 or line 35	36	
Pε	Passive Activity Credit Allowed		
37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See page 13 to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than		
	one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) on page 14	37	<u> </u>
Pá	Int VI Election To Increase Basis of Credit Property		
38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you		
	elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the		
	property, check this box. See page 15		
39	Name of passive activity disposed of ▶		
40	Description of the credit property for which the election is being made		
,,,	Associated madilly used greatifithed requires a first bank associated as a first bank associated as a first bank associated as a first bank as		
41	Amount of unallowed credit that reduced your basis in the property > \$		Form <b>8582-CR</b> (2008)

## ALTERNATIVE MINIMUM TAX

Department of the Treasury Internal Revenue Service (99)

# **Passive Activity Loss Limitations**

See separate instructions.

Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

ldentifying number Name(s) shown on return SIMON & SHIRLEY BERNSTEIN 371-32-5211 Part 2008 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. column (a)) **b** Activities with net loss (enter the amount from Worksheet 1. column (b)) 1b c Prior years unallowed losses (enter the amount from Worksheet 1. column (c)) d Combine lines 1a, 1b, and 1c..... 1d Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) c Add lines 2a and 2b All Other Passive Activities 3a Activities with net income (enter the amount from Worksheet 3, 1,690. column (a)) **b** Activities with net loss (enter the amount from Worksheet 3, <4,253. column (b)) c Prior years unallowed losses (enter the amount from Worksheet 3. column (c)) <2,563.> d Combine lines 3a, 3b, and 3c 3dCombine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used <2.563.> 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 II 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. Enter the smaller of the loss on line 1d or the loss on line 4 Enter \$150,000. If married filing separately, see the instructions Enter modified adjusted gross income, but not less than zero (see the instr.) 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. Subtract line 7 from line 6 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see the instructions Enter the smaller of line 5 or line 9 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. 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 Reduce line 12 by the amount on line 10 13 14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 14 Part IV Total Losses Allowed Add the income, if any, on lines 1a and 3a and enter the total 1,690. 15 Total losses allowed from all passive activities for 2008. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return SEE STATEMENT 1.690. 16

ALTERNATIVE MINIMUM TAX 371-32~5211 Form 8582 (2008) SIMON & SHIRLEY BERNSTEIN 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.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) Total, Enter on Form 8582, lines 1a. 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (b) Prior year (a) Current year Name of activity (c) Overall loss deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) **Current year Prior years** Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 3a, 1,690. <4,253. 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 and line number (c) Special Name of activity (a) Loss (b) Ratio column (c) to be reported on allowance from column (a) (see instructions) Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions)

> STATEMENT FOR WORKSHEET 1.000000000 2,563.

2,563.

SEE ATTACHED

Form 8582 (2008)

Worksheet 6 - Allowed Losses (See instruc	tions.)						
Name of activity	Form or sche and line nun to be reporte (see instruct	nber ed on	(a) L	oss	(b) Un	allowed loss	(c) Allowed loss
	1						
Total		▶					
Worksheet 7 - Activities With Losses Re	ported on Tw	o or N	lore Forn	ns or Sch	edules	S (See instructio	ns.)
Name of activity:	(a)		(b)	(c) Ra	tio	(d) Unallowe loss	d (e) Allowed loss
Form or schedule and line number to be reported on (see instructions):		and the second s					
1a Net loss plus prior year unallowed loss from form or schedule		County of the second of the se					
b Net income from form or schedule		Per version y a visio fina e de la filia de la companya de la filia del filia de la filia de la filia de la filia del filia de la filia del filia de la filia de la filia de la filia del filia de la filia del filia de la filia del filia	An effect of the second of the	y den yeur et all de de de grande de de grande		Control of Control of	
c Subtract line 1b from line 1a. If zero or less, enter	r-0 <b>&gt;</b>						
Form or schedule and line number to be reported on (see instructions):		The second secon					
1a Net loss plus prior year unallowed loss from form or schedule		A STATE OF THE STA					
b Net income from form or schedule		A CONTROL OF THE PARTY OF THE P		A Marie Caralle	The state of the s		
c Subtract line 1b from line 1a. If zero or less, enter	r-0						
Form or schedule and line number to be reported on (see instructions):							
1a Net loss plus prior year unallowed loss from form or schedule							
b Net income from form or schedule							
c Subtract line 1b from line 1a. If zero or less, enter	SEE ATTA	CHED	STATE	MENT F	OR W	ORKSHEET	' 7
OV	ERALL			<del>.</del> .			
Total	<b>&gt;</b>	<u> </u>	4,253.	1.000	0000	2,56	3. 1,690 Form <b>8582</b> (2008

**Domestic Production Activities Deduction** 

OMB No. 1545-1984

Department of the Treasury Internal Revenue Service

► Attach to your tax return. ► See separate instructions.

Attachment Sequence No. **143** 

IVAIII	e(s) as snown on return			Tueriui	lying number
SI	MON & SHIRLEY BERNSTEIN			37	1-32-5211
1	Domestic production gross receipts (DPGR)			,	166.
	Allocable cost of goods sold. If you are using the small business simplified		***************************************		2001
_	overall method, skip lines 2 and 3	2		programme and the con-	
	Overall moniou, and lines 2 and 0	<del>  ~   -</del>		200 C C C C C C C C C C C C C C C C C C	
2	Enter deductions and losses allocable to DPGR (see instructions)	3	391.	an in mand Pall P	
	If you are using the small business simplified overall method, enter the amount	⊢∸┼		\$1,000,100,000,000,000,000,000,000,000,0	
4	of cost of goods sold and other deductions or losses you ratably apportion to				
	<del>-</del>	,		A STATE OF THE STA	
	DPGR. All others, skip line 4	4			
5	Add lines 2 through 4		,	5	391.
6	Subtract line 5 from line 1			6	<225.>
•	Subject and S non-mile 1		***************************************	And a second second	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
7	Qualified production activities income from estates, trusts, and certain partnershi	ne and 9	S cornorations (see	A company of the company	
•	instructions)			7	
	mistractions,				
	Add lines Count 7. Fatatas and twists, so to line 0, all others akin line 0 and so to	line 10		8	<225.>
	Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to			9	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
9	,				
10	Qualified production activities income. Estates and trusts, subtract line 9 from			10	0.
	from line 8. If zero or less, enter -0- here, skip lines 11 through 19, and enter -0- or	i line 20		10	V •
11	Income limitation (see instructions):			CONTRACTOR	
	• Individuals, estates, and trusts. Enter your adjusted gross income figured with		j	AND A COLUMN TO SERVICE AND A	
	domestic production activities deduction			Maria Cara Cara Cara Cara Cara Cara Cara	
	All others. Enter your taxable income figured without the domestic production			A CONTRACT OF STREET	
	activities deduction (tax-exempt organizations, see instructions)		)	11	
			_	Control of the Contro	<b>,</b>
12	Enter the smaller of line 10 or line 11. if zero or less, enter -0- here, skip lines 13 the	_		PARTIES CONTROL	
	and enter -0- on line 20			12	
40	F. J 007 - 4 Pa = 40			10	
13	Enter 6% of line 12			13	
				۱.,	
14	Form W-2 wages (see instructions)	.,	,	14	
		, .		1 00 100 to 1 1 1 1 1	
15	Form W-2 wages from estates, trusts, and certain partnerships and S corporation	ns (see ir	nstructions)	15	
16	Add lines 14 and 15. Estates and trusts, go to line 17, all others, skip line 17 and	go to lin	e าช	16	
17	Amount allocated to beneficiaries of the estate or trust (see instructions)			17	
				١	
18	Estates and trusts, subtract line 17 from line 16, all others, enter amount from line	e 16		18	
				l	
19	Form W-2 wage limitation. Enter 50% of line 18			19	
20	Enter the smaller of line 13 or line 19			20	0.
			•		
21	Domestic production activities deduction from cooperatives. Enter deduction fro	m Form	1099-PATR, box 6	21	
22	Expanded affiliated group allocation (see instructions)			22	
				And the second s	
23	Domestic production activities deduction. Combine lines 20 through 22 and e			Committee of the	_
	Form 1040, line 35; Form 1120, line 25; or the applicable line of your return			23	0.

# Qualified Production Activity Income Schedule

Name SIMON & SHIRLEY BERNSTEIN								identifying Number: 371-32-5211		
	Domestic Production		Directly Allocable Expenses	ocable ses		Interest E Ap	Interest Expense Allocation/ Apportionment	cation/ t	Total	Qualified
Description	Gross Receipts (DPGR)	DPGR Ratio	Costs of Goods Sold	Other Costs	Apportioned Expenses	Allocable Assets	Assets Ratio	Interest Expense	Qualified	Activity
EVERGREEN PRIVATE INVESTMENTS	. 49	.000004	.5₫.	16.	0				. 67	o
BERNSTEIN FAMILY INVESTMENTS L	98.	900000.	T	117.	222.				320	<222
BERNSTEIN HOLDINGS LLC	1.	booooo.	0	T.	3.				4.	<3.>
NON-QUALIFIED ACTIVITIES	16,386,970	<u> 199999</u>			0				-0	
TOTAL	1981,788,31		.55.	134.	225.				391.	
TOTAL FROM OUBLIFIED ACTIVITIES	166.	proce.	. 55.	134.	225.				391	<222>
X										
law my reference				,						
					-					
										:

Form 1116 U.S. and Form	reign Source Income Sumn	nary	
NAME			271 22 5211
SIMON & SHIRLEY BERNSTEIN			371-32-5211 FOREIGN
INCOME TYPE	TOTAL	U.S.	PASSIVE
Compensation	3,756,299.	3,756,299.	
Dividends/Distributions	57,364.	57,364.	
Interest	71,430.	71,430.	
Capital Gains	22,915.	22,915.	
Business/Profession	15,756,018.	15,756,018.	•
Rent/Royalty	9.		9.
State/Local Refunds	600 040	כמת ככם	C 200
Partnership/S Corporation	608,948.	602,668.	6,280.
Trust/Estate	70 170	60 127	2 726
Other Income	$\frac{72,173}{20,345,156}$	68,437. 20,335,131.	3,736. 10,025.
Gross Income	20,343,130.	20,333,131.	10,025.
Less;			
Section 911 Exclusion			
Capital Losses	25,915.	25,915.	
Capital Gains Tax Adjustment		····	
Fotal Income - Form 1116	20,319,241.	20,309,216.	10,025.
Deductions:			
Business/Profession Expenses	15,756,018.	15,756,018.	
Rent/Royalty Expenses	6.		6.
Partnership/S Corporation Losses	10,234.	10,234.	
Trust/Estate Losses	1.	1.	
Capital Losses			
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction			
Self-employment Health Insurance			
Keogh Contributions			
Alimony			
Forfeited Interest	-		
Foreign Housing Deduction			
Other Adjustments			
Capital Gains Tax Adjustment	15,766,259.	15,766,253.	6.
Total Deductions			
Adjusted Gross Income	4,552,982.	4,542,963.	10,019.
Less Itemized Deductions:	186,176.	186,176.	
Specifically Allocated Home Mortgage Interest	67,045.	67,012.	
	6,595.	6,595.	
Other interest Ratably Allocated	1,044,723.	1,044,208.	
Ratably Allocated  Total Adjustments to Adjusted Gross Income	1,304,539.	1,303,991.	548.
Taxable Income Before Exemptions	3,248,443.	3,238,972.	9,471.

# **Allocation of Itemized Deductions**

NAME

SIMON & SHIRLEY BE	RNSTEIN			3	71-32-5211
	Total Itemized	Itemized Deductions After Sec. 68		Form 1116	
	Deductions	Reduction	Specifically U.S.	Specifically Foreign	Ratable
Taxes	80,083.	77,461.			77,461.
Interest - Not Including Investment Interest	69,314.	67,045.	67,012.	33.	
Contributions	192,477.	186,176.	186,176.		
Miscellaneous Deductions Subject to 2%					
Other Miscellaneous Deductions - Not Including Gambling Losses	1,000,000.	967,262.			967,262.
Foreign Adjustment					Control of the contro
Total Itemized Deductions Subject to Sec. 68	1,341,874.	1,297,944.			
Add Itemized Deductions Not Subject to Sec. 68;				•	
Medical/Dental				·	
Investment Interest	6,595.	6,595.	6,595.		
Post Aug. 27 Contributions					
Gasualty Losses		* .			
Gambling Losses					
Foreign Adjustment					
Total Itemized Deductions	1,348,469.				The state of the s
Total Allowed on Schedule A		1,304,539.	259,783.	33.	1,044,723.

# Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

# SIMON & SHIRLEY BERNSTEIN

371-32-5211

# Foreign Income Category

# PASSIVE INCOME

	Foreign Income Category	į	PASSIVE INC	COME	
Regi	ılar	2005	2006	2007	2008
1.	Foreign tax paid/accrued	The second of th	An or the will find any board on your property of a country of	to an investment of specimen and promotion of specimens of the specimens o	886
	FTC carryback to 2008	So where control we say a say on a service of the control of the c			
	for amended returns	A company of the comp			
3.	Reduction allocated to excluded income	CONTRACTOR CONTRACTOR			
4.	Foreign tax available				886
- 5.	Maximum credit allowable				3,227
6.	Unused foreign tax ( + )				,
	or excess of limit ( - )			<2,379.>	<2,341
7.	Foreign tax carryback	The state of the s			
8.	Foreign tax carryforward	1111111111			
9.	Less treaty adjustment	And with the control of the control	Author Carlos of the Carlos of	A self-to destinate de la companya del companya de la companya del companya de la companya de la companya de la companya de la companya del companya	
	Foreign tax or excess limit remaining			<2,379.	<2,341
	Total foreign taxes from all available years to be carried to next y	ear	,,		
		2001	2002	2003	2004
1.	Foreign tax paid/accrued				
	FTC carryback to 2008				
	for amended returns				
3.	Reduction allocated to excluded income				
	Foreign tax available			AND AND AND AND AND AND AND AND AND AND	
	Maximum credit allowable				
	Unused foreign tax ( + )				
	or excess of limit ( - )				
7.	Foreign tax carryback				
	Foreign tax carryforward				
	Less treaty adjustment				
	Foreign tax or excess limit remaining				
		2000	1999		
1.	Foreign tax paid/accrued	Section of the sectio	s of justices and any one of the reservation and the reservation a		
2.	FTC carryback to 2008				
	for amended returns		Published to visit the property of the propert		
3.	Reduction allocated to excluded income				
	Foreign tax available		And the second s		
5.					
6.	Unused foreign tax ( + )				
	or excess of limit ( - )				
7.	Foreign tax carryback	N			
	Foreign tax carryforward				
	Less treaty adjustment	Appending to the control of the cont			
	Foreign tax or excess limit remaining	i i			

# Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

# SIMON & SHIRLEY BERNSTEIN

371-32-5211

## Foreign Income Category

# PASSIVE INCOME

	Foreign Income Category		PASSIVE IN	COME	
Alter	native Minimum Tax	2005	2006	2007	2008
1.	Foreign tax paid/accrued	Company of the Compan			886
	FTC carryback to 2008	A sign of the property of the sign of the	The state of the s		-
	for amended returns		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
3.	Reduction allocated to excluded income	2) - A - 1 - A - A - A - A - A - A - A - A	47 4 90 PM State Color of Colo		
4.	Foreign tax available		of a control water of the control water and		886
5.			F S S S S S S S S S S S S S S S S S S S	TANK TO THE TOTAL CONTROL OF THE TOTAL CONTROL OF THE TOTAL CONTROL OF THE TOTAL CONTROL OF THE TOTAL CONTROL OF THE TOTAL CONTROL OF THE TOTAL CONTROL OF T	2,648
6.	Unused foreign tax ( + )				
	or excess of Ilmit ( - )			<1,767.	> <1,762
7.	Foreign tax carryback				
8.	Foreign tax carryforward				
9.	Less treaty adjustment	Section in the contract of the		A MATERIA DE COMPANIO A CONTRA	
10.	Foreign tax or excess limit remaining			<1,767.	> <1,762
	Total foreign taxes from all available years to be carried to next year				
		2001	2002	2003	2004
	Foreign tax paid/accrued		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		A company of the comp
2.	FTC carryback to 2008		The second secon		The state of the s
	for amended returns				
	Reduction allocated to excluded income				
	Foreign tax available		The state of the s		a consumer consumer of the Con
5.	Maximum credit allowable		The state of the s		
6.	Unused foreign tax ( + )				
	or excess of limit ( - )			2 M 2 M 2 M 2 M 2 M 2 M 2 M 2 M 2 M 2 M	
	Foreign tax carryback				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Foreign tax carryforward				
	Less treaty adjustment				Advantagly on the advances of the control of the co
10.	Foreign tax or excess limit remaining				
	•	2000	1999		
	Foreign tax paid/accrued				
2.	FTC carryback to 2008				
	for amended returns				
3.	Reduction allocated to excluded income				
4.					
	Maximum credit allowable				
6.	Unused foreign tax ( + )				
	or excess of limit ( - )	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
7.	Foreign tax carryback	*			
8.	Foreign tax carryforward				
9.	Less treaty adjustment				
	Foreign tax or excess limit remaining	i	1	1	

Form 1116	Foreign Tax Preference Items	
SIMON & SHIRLEY BERNST	EIN	371-32-5211
	1,000,000.	
Total alternative minimum tax adjustments	1,000,000. 10,025. 20345471.	
	.000493	
Total foreign source deductions	493.	
Passive Income Section 901(j) income	<u>:</u>	493.

.794

67,530.

17,520.

11

12

13

See line 13 instructions

TABLE 1 (Keep for your records.) Qualified Loan Limit Part I 1 Enter the average balance of all your grandfathered debt. See line 1 instructions 2 Enter the average balance of all your home acquisition debt. See line 2 instructions 1,260,000. 2 3 Enter \$1,000,000 (\$500,000 if married filling separately) 1,000,000. 3 4 Enter the larger of the amount on line 1 or the amount on line 3 1,000,000. 4 5 Add the amounts on lines 1 and 2. Enter the total here 1,260,000. 5 1,000,000. 6 Enter the smaller of the amount on line 4 or the amount on line 5 6 Ō. 7 Enter \$100,000 (\$50,000 if married filing separately). See line 7 instructions for a limit that may apply 7 8 Add the amounts on lines 6 and 7. Enter the total. This is your qualified loan limit 8 000,000. Deductible Home Mortgage Interest Part II 9 Enter the total of the average balances of all mortgages on all qualified homes. See line 9 instructions 1,260,000. If line 8 is less than line 9, GO ON to line 10. • If line 8 is equal to or more than line 9, STOP HERE. All of your interest on all the mortgages included on line 9 is deductible as home mortgage interest on Schedule A (Form 1040). 10 Enter the total amount of interest that you paid. See line 10 instructions 10 85,050.

11 Divide the amount on line 8 by the amount on line 9. Enter the result as a decimal amount (rounded to three places)

mortgage interest. Enter this amount on Schedule A (Form 1040)

12 Multiply the amount on line 10 by the decimal amount on line 11. Enter the result. This is your deductible home

13 Subtract the amount on line 12 from the amount on line 10. Enter the result. This is not home mortgage interest.

FORM 1040	PENSIONS	AND ANNUITI	ES	STATEMENT	1
NATIONAL SERVICE ASSOC PENS	SION PLAN				
AMOUNT RECEIVED THIS YEAR NONTAXABLE AMOUNT CAPITAL GAIN DISTRIBUTION	REPORTED O	n sch d	40,000.		
				40,0	00.
TOTAL INCLUDED IN FORM 104	10, LINE 16	В		40,0	00.

FORM	1040	SOCIAL SECURITY BENEFITS WORKSHEET	STATEMENT	2
A	K ONLY ONE B SINGLE, HEA MARRIED FIL	AD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)		
	MARRIED FIL	ING COINTELLY AND LIVED WITH YOUR SPOUSE DURING 2008		
D.		ING SEPARATELY AND LIVED APART FROM YOUR SPOUSE		
1.	FORMS SSA-10	OTAL AMOUNT FROM BOX 5 OF ALL YOUR 199 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON		4
		JINE 20A	37,8	51.
2.	ENTER ONE HA	ALF OF LINE 1	18,9	26.
3.	ADD THE AMOU 15B, 16B, 17	UNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 14, 7 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT	4 534 0	1 17
4.	ENTER THE AM INCOME, FORE	AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099 MOUNT OF ANY EXCLUSIONS FROM FOREIGN EARNED EIGN HOUSING, INCOME FROM U.S. POSSESSIONS,	4,534,0	1/.
		ROM PUERTO RICO BY BONA FIDE RESIDENTS OF		
_		THAT YOU CLAIMED	4,552,9	12
6.	ADD THE AMOU	JNTS ON FORM 1040, LINES 23 THROUGH LINE 32, TE-IN ADJUSTMENTS YOU ENTERED ON THE DOTTED	4,552,9	43.
		D LINE 36		0.
		WE 6 FROM LINE 5	4,552,9	43.
8.	\$32	5,000 IF YOU CHECKED BOX A OR D, OR 2,000 IF YOU CHECKED BOX B, OR		
•	•	)- IF YOU CHECKED BOX C	32,0	00.
9.		TON LINE 8 LESS THAN THE AMOUNT ON LINE 7?  OP. NONE OF YOUR SOCIAL SECURITY BENEFITS ARE		
		TIER -0- ON FORM 1040, LINE 20B. IF YOU ARE		
		ING SEPARATELY AND YOU LIVED APART FROM YOUR		
	SPOUSE FOR A	ALL OF 2008, BE SURE YOU ENTERED 'D' TO THE		
		E WORD "BENEFITS" ON LINE 20A.		
4.0		STRACT LINE 8 FROM LINE 7	4,520,9	43.
TO.		) IF YOU CHECKED BOX A OR D, )O IF YOU CHECKED BOX B		
	\$-0-	IF YOU CHECKED BOX C	12,0	00.
11.		WE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0	4,508,9	
12.	ENTER THE SM	MALLER OF LINE 9 OR LINE 10	12,0	
		ALF OF LINE 12	6,0	
		MALLER OF LINE 2 OR LINE 13	6,0	
		NE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-	3,832,6	
		4 AND 15	3,838,6	
1/.	MODITEDI PID	NE 1 BY 85% (.85)	32,1	/3.
18.	TAXABLE BENE * ALSO ENTER	FITS. ENTER THE SMALLER OF LINE 16 OR LINE 17 R THIS AMOUNT ON FORM 1040, LINE 20B =	32,1	73.

ON FORM 1040, LINE 6D	BELOW FOR YOUR FILING STATUS?  NO. STOP. MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42.  YES. CONTINUE  MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D	FORI	4 1040 PERSONAL EXEMPTION WORKSHEET	STATEMENT	? 3
YES. CONTINUE 2. MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED 2. MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED 3. ENTER THE AMOUNT FROM FORM 1040, LINE 38 . 4,552,982. 4. ENTER THE AMOUNT FOR YOUR FILING STATUS . 239,950. SINGLE \$159,950 MARRIED FILING JOINTLY OR WIDOW(ER) \$239,950 MARRIED FILING SEPARATELY \$119,975 HEAD OF HOUSEHOLD \$199,950 5. SUBTRACT LINE 4 FROM LINE 3	YES. CONTINUE 2. MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D	1.	BELOW FOR YOUR FILING STATUS? NO. STOP. MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTI	ONS CLAIMED	IE 4
2. MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D	2. MULTIPLY \$3,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D			42.	
### AMOUNT FOR YOUR FILING STATUS . 239,950  **SINGLE \$159,950  **MARRIED FILING JOINTLY OR WIDOW(ER) \$239,950  **MARRIED FILING SEPARATELY \$119,975  **HEAD OF HOUSEHOLD \$1.99,950  5. SUBTRACT LINE 4 FROM LINE 3	### AMOUNT FOR YOUR FILING STATUS . 239,950.    SINGLE	2.	MULTIPLY \$3.500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED	)	
### AMOUNT FOR YOUR FILING STATUS . 239,950  **SINGLE \$159,950  **MARRIED FILING JOINTLY OR WIDOW(ER) \$239,950  **MARRIED FILING SEPARATELY \$119,975  **HEAD OF HOUSEHOLD \$1.99,950  5. SUBTRACT LINE 4 FROM LINE 3	### STREET HE AMOUNT FOR YOUR FILING STATUS	_	ON FORM 1040, LINE 6D	7.	,000.
5. SUBTRACT LINE 4 FROM LINE 3	5. SUBTRACT LINE 4 FROM LINE 3	3. 4.	SINGLE \$159,950  MARRIED FILING JOINTLY OR WIDOW(ER) \$239,950  MARRIED FILING SEPARATELY \$119,975	982. 950.	
0.0004 TO 1)	0.0004 TO 1)		SUBTRACT LINE 4 FROM LINE 3	32.	
FORM 1040  TAX-EXEMPT INTEREST  STATEMENT  AMOUNT  PERSHING LLC (17)  PERSHING LLC (10376)  FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  38	FORM 1040  TAX-EXEMPT INTEREST  AMOUNT  PERSHING LLC (17)  PERSHING LLC (10376)  FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC	3.	0.0004 TO 1)	566. •	
NAME OF PAYER  PERSHING LLC (17)  PERSHING LLC (10376)  FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC  38	NAME OF PAYER  PERSHING LLC (17)  PERSHING LLC (10376)  FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC	10.	SUBTRACT LINE 9 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.		· · ·
PERSHING LLC (17) PERSHING LLC (10376) PERSHING LLC (10376) FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC 38	PERSHING LLC (17) PERSHING LLC (10376) PERSHING LLC (10376) FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC	FORI	M 1040 TAX-EXEMPT INTEREST	STATEMEN'	Г 4
PERSHING LLC (10376)       2,174         FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS       81         FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP       3,895         FROM K-1 - BERNSTEIN HOLDINGS LLC       38         FROM K-1 - BERNSTEIN HOLDINGS LLC       38         FROM K-1 - BERNSTEIN HOLDINGS LLC       38	PERSHING LLC (10376)  FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC	IMAN	E OF PAYER	AMOUN	ľ
PERSHING LLC (10376)       2,174         FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS       81         FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP       3,895         FROM K-1 - BERNSTEIN HOLDINGS LLC       38         FROM K-1 - BERNSTEIN HOLDINGS LLC       38         FROM K-1 - BERNSTEIN HOLDINGS LLC       38	PERSHING LLC (10376)  FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC	PER	SHING LLC (17)	3	.087
FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC  38	FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 3,8  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 3,8  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC	PER.	SHING LLC (10376)		,174
FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP  FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC  38	FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 3,8 FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC			າ	
FROM K-1 - BERNSTEIN HOLDINGS LLC  FROM K-1 - BERNSTEIN HOLDINGS LLC  38	FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC				-
		FROI	M K-1 - BERNSTEIN HOLDINGS LLC	-	38
TOTAL TO FORM 1040, LINE 8B 13,208	TOTAL TO FORM 1040, LINE 8B	FROI	M K-1 - BERNSTEIN HOLDINGS LLC		38
		TOT	AL TO FORM 1040, LINE 8B	13	,208

FORM 1040	WAGES RECE	VED AND TAX	KES WITHHE	LD	STAT	EMENT	5
T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICA TAX	
T ARBITRAGE INTERNATIONAL HOLDINGS	3756299.	246,927.			6,324	. 5446	56.
TOTALS	3756299.	246,927.			6,324	5446	56.
FORM 1040	QUZ	ALIFIED DIV	IDENDS		TATS	EMENT	6
NAME OF PAYER				DINARY VIDENDS		ALIFIEI VIDENDS	
PERSHING LLC (17) PERSHING LLC (213) PERSHING LLC (221) PERSHING LLC (668) PERSHING LLC (10376)				1,170. 2,833. 6,202. 11,855. 997.		1,08 2,72 1,45 2,51	26. 50.
FROM K-1 - EVERGREEN INVESTMENTS FUNDS FROM K-1 - EVERGREEN		STMENT		144.			79.
FUNDS FROM K-1 - BERNSTEIN LLLP				344. 8,284.			48. 72.
FROM K-1 - BERNSTEIN LLLP FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - ELIOT BER	HOLDINGS LLC			8,285. 105. 105. 1.			71. 10. 9.
TOTAL INCLUDED IN FO	RM 1040, LINE	9в				10,8	92.
FORM 1040	LAT	E PAYMENT I	NTEREST		STAT	EMENT	7
DESCRIPTION	DATE	TUUOMA	BALANCE	RATE	DAYS	INTER	EST
TAX DUE DATE FILED	04/15/09 10/15/09	815,314.	815,31 831,82		183	16,5	15.
TOTAL LATE PAYMENT I	NTEREST					16,5	 15.

FORM 1040	LATE PA	STAT	EMENT 8		
DESCRIPTION	DATE	TRUOMA	BALANCE	MONTHS	PENALTY
TAX DUE DATE FILED	04/15/09 10/15/09	815,314.	815,314.	6	24,459.
TOTAL LATE PAYMENT PENALTY	Ž.				24,459.

FORM 2210/2210-F STATEMENT FOR WAIVER OF PENALTY

STATEMENT

9

TAXPAYER DID NOT HAVE ACCESS TO FUNDS DUE TO THEFT LOSS.

SCHEDULE A MISCELLANEOUS I	EDUCTIONS SU	BJECT TO FLO	OR.	STATEMENT	10	
DESCRIPTION				AMOUNT		
FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - POWERSHARES DB G10 CURRENCY FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - TT/ SIMON L BERNSTEIN IRREV TR FROM K-1 - JILL IANTONI FAMILY TRUST				4,185 83 1,761 1,761 17 18 1,500		
TOTAL TO SCHEDULE A, LINE 23			=	9,3	26.	
SCHEDULE A POINTS NOT	REPORTED ON	FORM 1098		STATEMENT	11	
DESCRIPTION	DATE RE- FINANCED	TOTAL POINTS	AMORT. PERIOD /MOS.	AMORTIZAT THIS YEA		
WELLS FARGO	01/01/01	26,759.	180	1,7	84.	
TOTAL TO SCHEDULE A, LINE 12				1,7	84.	
SCHEDULE A CAS	SH CONTRIBUTI	ONS		STATEMENT	12	
DESCRIPTION	AMOUNT 100% LIMIT	AMOU 50% LI		AMOUNT	1	
VARIOUS ORGANIZED CHARITIES		18	6,244.			
FROM K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS FROM K-1 - LIC HOLDINGS INC FROM K-1 - BERNSTEIN FAMILY			2. 6,230.			
INVESTMENTS LLLP			1.			
SUBTOTALS		19	2,477.			
TOTAL TO SCHEDULE A, LINE 16				192,4	77.	

SCHEDULE A	MORTGAGE INTEREST AND POINTS REPORTED ON FORM 1098	STATEMENT	13
DESCRIPTION		AMOUNT	
HOME MORTGAGE INTERE	ST	67,5	30.
TOTAL TO SCHEDULE A,	LINE 10	67,5	30.
SCHEDULE A	INVESTMENT INTEREST	STATEMENT	14
DESCRIPTION		AMOUNT	
FROM K-1 - EVERGREEN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN	FAMILY INVESTMENTS LLLP FAMILY INVESTMENTS LLLP HOLDINGS LLC	3,4 1,5 1,5	68.
TOTAL TO SCHEDULE A,	LINE 14	6,5	95

<ol> <li>ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28</li></ol>	•
TO TREAT AS QUALIFIED CONTRIBUTIONS FOR RELIEF EFFORTS IN A MIDWESTERN DISASTER AREA	. 1,006,595.
IF YES, SUBTRACT LINE 2 FROM LINE 1	•
LINE 29.  IF YES, SUBTRACT LINE 6 FROM LINE 5 4,393,032  8. MULTIPLY LINE 7 BY 3% (.03)	. 131,791. . 87,861.
12. TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 11 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 29	1,304,539.
SCHEDULE A STATE AND LOCAL GENERAL SALES TAXES	STATEMENT 16
DESCRIPTION	AMOUNT
STATE SALES TAX LOCAL SALES TAX SALES TAX PAID ON SPECIFIED ITEMS	1,784. 148. 32,780.
	34,712.

SCI	IEDULE A GENERAL SALES TAX DEDUCTION WORKSHEET	STATEMENT	17
1	ENTER YOUR STATE GENERAL SALES TAXES FROM THE APPLICABLE TABLE. FLORIDA	1,7	84.
	IF, FOR ALL OF 2008, YOU LIVED ONLY IN CONNECTICUT, THE DISTRICT OF COLUMBIA, INDIANA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, NEW JERSEY, RHODE ISLAND, OR WEST VIRGINIA, SKIP LINES 2 THROUGH 5, ENTER -0- ON LINE 6, AND GO TO LINE 7.		
2	OTHERWISE, GO TO LINE 2. DID YOU LIVE IN ALASKA, ARIZONA, ARKANSAS, CALIFORNIA (LOS ANGELES COUNTY ONLY), COLORADO, GEORGIA, ILLINOIS, LOUISIANA, MISSOURI, NEW YORK STATE, NORTH CAROLINA, SOUTH CAROLINA, TENNESSEE, UTAH, OR		
2	VIRGINIA IN 2008?  IF NO, ENTER -0  IF YES, ENTER YOUR LOCAL GENERAL SALES  TAXES FROM THE APPLICABLE TABLE.  0.		
3	DID YOUR LOCALITY IMPOSE A LOCAL GENERAL SALES TAX IN 2008? RESIDENTS OF CALIFORNIA AND NEVADA SEE INSTRUCTIONS. IF NO, SKIP LINES 3 THROUGH 5, ENTER -0- ON LINE 6 AND GO TO LINE 7.		
4	IF YES, ENTER YOUR LOCAL GENERAL SALES  TAX RATE, BUT OMIT PERCENTAGES5000  BOCA RATON  DID YOU ENTER -0- ON LINE 2 ABOVE?  IF NO, SKIP LINES 4 AND 5 AND GO TO LINE 6.  IF YES, ENTER YOUR STATE GENERAL SALES		
5	TAX RATE, BUT OMIT PERCENTAGES. 6.0000 DIVIDE LINE 3 BY LINE 4. ENTER THE RESULT AS A DECIMAL (ROUNDED TO AT LEAST THREE PLACES)0830		
6	DID YOU ENTER -0- ON LINE 2 ABOVE? IF NO, MULTIPLY LINE 2 BY LINE 3. IF YES, MULTIPLY LINE 1 BY LINE 5.	:	148.
6A	ADD LINE 1 AND LINE 6.	1,:	932.
	PART-YEAR DAYS RATE. MULTIPLY LINE 6A BY LINE 6B.	1.00	0000 932.
7	ENTER YOUR GENERAL SALES TAXES PAID ON SPECIFIED ITEMS, IF ANY.	32,	780
8	DEDUCTION FOR GENERAL SALES TAXES. ADD LINES 6C AND 7. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 5 AND CHECK BOX "B" ON THAT LINE.	34,	712

SCHEDULE 1	B INTEREST INCOME		STATEMENT	18
NAME OF PA	AYER		AMOUNT	
LEGACY BAI	 NK OF FLORIDA	'	2,2	78.
PERSHING I				66.
PERSHING I			3	80.
PERSHING 1	· · · · ·		1,2	
	INTERNATIONAL BANK LTD (494		1,3	
	INTERNATIONAL BANK LTD (839(		16,9	
	BANK (315)			67. 06.
	BANK (945) - EVERGREEN PRIVATE INVESTMENTS FUNDS			29.
	- EVERGREEN PRIVATE INVESTMENTS FUNDS			44.
	- LIC HOLDINGS INC		46,3	
	- POWERSHARES DB G10 CURRENCY			42.
	- BERNSTEIN FAMILY INVESTMENTS LLLP			19.
	- BERNSTEIN FAMILY INVESTMENTS LLLP		3	20.
	- BERNSTEIN HOLDINGS LLC			3.
FROM K-1	- BERNSTEIN HOLDINGS LLC			3.
TOTAL TO	SCHEDULE B, LINE 1		71,4	30.
SCHEDULE :	B DIVIDEND INCOME		STATEMENT	19
NAME OF P	AYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS	
DERCHING	LLC (11036)	17,020.	<del>, -</del>	
PERSHING		1,170.	1,0	88.
PERSHING		2,833.		26.
PERSHING		6,202.	1,4	50.
PERSHING	· · · · · · · · · · · · · · · · · · ·	11,855.		16.
	LLC (10376)	997.	9	22.
	- EVERGREEN PRIVATE INVESTMENTS FUNDS	144.	1	79.
	- EVERGREEN PRIVATE INVESTMENT FUNDS	344. 8,284.		48.
	- BERNSTEIN FAMILY INVESTMENTS LLLP - BERNSTEIN FAMILY INVESTMENTS LLLP	8,285.		71.
	- BERNSTEIN HOLDINGS LLC	105.	,	10.
	- BERNSTEIN HOLDINGS LLC	105.		9.
	- TT/ SIMON L BERNSTEIN IRREV TR	14.		
	- ELIOT BERNSTEIN FAMILY TRUST	1.		
	- ELIOT BERNSTEIN FAMILY TRUST	1.		1.
FROM K-1				
FROM K-1 FROM K-1	- JILL IANTONI FAMILY TRUST	1.		
FROM K-1 FROM K-1 FROM K-1	- JILL IANTONI FAMILY TRUST - JILL IANTONI FAMILY TRUST	1.		
FROM K-1 FROM K-1 FROM K-1 FROM K-1	- JILL IANTONI FAMILY TRUST - JILL IANTONI FAMILY TRUST - LISA S FRIEDSTEIN FAMILY TRUST	1. 1.		
FROM K-1 FROM K-1 FROM K-1 FROM K-1 FROM K-1	- JILL IANTONI FAMILY TRUST - JILL IANTONI FAMILY TRUST	1.		

***************************************	<del></del>		
SCHEDULE D	NET SHORT-TERM GAIN OR LOS FORMS 6252, 4684, 6781 ANI		STATEMENT 20
DESCRIPTION OF PROPERT	Y		GAIN OR LOSS
FORM 6781, PART I	<del></del>		<856.>
TOTAL TO SCHEDULE D, P	<856.>		
	ET LONG-TERM GAIN OR LOSS FE 797, 2439, 6252, 4684, 6781		STATEMENT 21
DESCRIPTION OF PROPERT	Ϋ́Υ	GAIN OR LOSS	28% GAIN
FORM 6781, PART I FORM 4797	_	<1,285.> 1,690.	
TOTAL TO SCHEDULE D, F	ART II, LINE 11	405.	
SCHEDULE D PARTN	NET SHORT-TERM GAIN OR LOS IERSHIPS, S CORPORATIONS, ANI		STATEMENT 22
DESCRIPTION OF ACTIVIT	Y		GAIN OR LOSS
EVERGREEN PRIVATE INVESTEENSTEIN FAMILY INVESTEENSTEIN FAMILY INVESTEENSTEIN HOLDINGS LLOUBERNSTEIN HOLDINGS LLOUBERNSTEIN FAMILY ELIOT BERNSTEIN FAMILY THE LISA S FRIEDSTEIN FAMILY LISA S BERNSTEIN FAMILY	STMENTS LLLP STMENTS LLLP STMENTS LLLP STMENTS TRUST STRUST STRUST STRUST STRUST STRUST		25,939. <71,046.> <71,046.> <696.> <696.> <7.> <7.> <7.> <7.> <7.> <7.>
TOTAL TO SCHEDULE D, I	PART I, LINE 5		<117,580.>

SCHEDULE D NET LONG-TERM GAIN OR LOSS PARTNERSHIPS, S CORPORATIONS, AND		STATEMENT 23
DESCRIPTION OF ACTIVITY	GAIN OR LOSS	28% GAIN
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC BERNSTEIN HOLDINGS LLC	105. 106. 1. 1.	
TOTAL TO SCHEDULE D, PART II, LINE 12	213.	
SCHEDULE D CAPITAL GAIN DISTRIBUTION	រន	STATEMENT 24
NAME OF PAYER	TOTAL CAPITAL GAII	n 28% gain
PERSHING LLC (17)	5,639	•
TOTALS TO SCHEDULE D, LINE 13	5,639	•

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT	25
2. ENTER T 3. COMBINE	HE AMOUNT FROM FORM 1040, LINE 41	r. 3,0 . 3,251,4	00. 43.
6. ENTER T LINE 15	HE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT HE GAIN, IF ANY, FROM SCHEDULE D,	2.	
8. SHORT-T	ES 4 AND 6		
10. ENTER T LINE 7 11. SUBTRAC ENTER - 12. ADD LIN 13. LONG-TE	HE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT HE GAIN, IF ANY, FROM SCHEDULE D,  I LINE 5 FROM LINE 4. IF ZERO OR LESS,  O		
SCHEDULE E	OTHER EXPENSES	STATEMENT	26
EVERGREEN P	RIVATE INVESTMENTS FUNDS - ROYALTY	AMOUNT	
ROYALTY INC	OME DEDUCTION - EVERGREEN PRIVATE FUNDS		4.
TOTAL TO SO	HEDULE E, PAGE 1, LINE 18		4.
SCHEDULE E	OTHER EXPENSES	STATEMENT	27
BERNSTEIN F	AMILY INVESTMENTS LLLP - ROYALTY		
DESCRIPTION		AMOUNT	
ROYALTY INC	OME DEDUCTION - BERNSTEIN FAMILY LLLP		1.
TOTAL TO SO	HEDULE E, PAGE 1, LINE 18		1.

SCHEDULE E OTHER EXPE	INSES	STA	TEMENT	28
BERNSTEIN FAMILY INVESTMENTS LLLP - ROYALTY	7			
DESCRIPTION			AMOUNT	
ROYALTY INCOME DEDUCTION - BERNSTEIN FAMILY INVESTMENTS LLLP	?			1.
TOTAL TO SCHEDULE E, PAGE 1, LINE 18		<u></u>		1.
				<del></del>
SCHEDULE E INCOME OR (LOSS) FROM PARTNE	ERSHIPS AND S C	ORPS STA	ATEMENT	29
NAME				
ANY NOT X EMPLOYER AT IF PASSIVE PASSIV ID NO. RISK FRN CODE LOSS INCOME		SEC. 179 DEDUCTION	NONPASS INCOM	
P EVERGREEN PRIVATE INVESTMENTS FUNDS 56-2114125 P * SEC 59(E)(2)	0. 4,982.			
56-2114125 P * EVERGREEN PRIVATE INVESTMENT FUNDS	24.			
52-2223144 P * LIC HOLDINGS INC	3,685.			
20-5290314 S POWERSHARES DB G10 CURRENCY 16-6562496 P * 0.			608,9	48.
BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 837.				73.
BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 837. BERNSTEIN HOLDINGS LLC 32-0234597 P 8.				73.
BERNSTEIN HOLDINGS LLC 32-0234597 P 8.				1.
TOTALS TO SCH. E, LN. 29 1,690.	8,691.		609,0	105

<sup>\*</sup> ENTIRE DISPOSITION OF PASSIVE ACTIVITY

SCHEDULE E	INCOME OR (	(LOSS) FROM I	ESTATES AND	TRUSTS ST	ATEMENT 30
NAME	EMPLOYER ID NO.	PASSIVE LOSS	PASSIVE INCOME	NONPASSIVE LOSS	NONPASSIVE INCOME
TT/ SIMON L BERNSTEIN IRREV TR	51-6600239	0.			
ELIOT BERNSTEIN FAMILY TRUST	65-6477114	0.			
ELIOT BERNSTEIN FAMILY TRUST	65-6477114	0.			
JILL IANTONI FAMILY TRUST	65-6477115	0.			
JILL IANTONI FAMILY TRUST	65-6477115	0.			
INVESTMENT INTEREST EXPENSE LISA S FRIEDSTEIN	65-6477115 65-6477116			1.	
FAMILY TRUST LISA S BERNSTEIN	65-6477116	0.			
FAMILY TRUST		0.		<del></del>	
TOTALS TO SCHEDULE	E, LINE 34	0.		1.	

<sup>\*</sup> ENTIRE DISPOSITION OF PASSIVE ACTIVITY

FORM 1116	SUMMARY OF FO	REIGN TAXES	PAID OR ACCRUI	ED STA	TEMENT 31
PASSIVE INCOME					
NAME OF COUNTRY IM	POSING TAX				
DATE PAID ACCRUED	AMT/FOREIGN CURRENCY	DIVIDENDS	AMOUNT IN U.S RENT/ROYALTY		OTHER
VARIOUS 12/31/08	0.	390.			
VARIOUS	0.				60.
VARIOUS	0.				190.
VARIOUS	0.				122.
VARIOUS	0.				122.
VARIOUS	0.				1.
VARIOUS	0.				1.
		390.			496.
TOTAL TO FORM 1116	, PART II, LIN	IE 8			886.
PRIOR YEAR TAXES P.		RRENT YEAR: FOREIGN AMT	CONV. RATE	U.S. AMT	
2007 2006 2005 2004 2003					

TOTAL PRIOR YEAR TAXES PAID IN THE CURRENT YEAR

FORM	1 1116	<b>V</b>		E CAPITAL GA			STATEMENT	32
1	ENTER THE AMO IF YOU ARE A AMOUNT FROM F	NONRESIDENT	r ALIEN,	ENTER THE			3,248,	443.
2	ENTER WORLDWI	DE 28% GAI	1S					
3	MULTIPLY LINE	2 BY 0.200	0 0					
4	ENTER WORLDWI	DE 25% GAII	ns					
5	MULTIPLY LINE	4 BY 0.28	57					
6	ENTER WORLDWI QUALIFIED DIV		NS AND			10,892.		
7	MULTIPLY LINE	6 BY 0.57	1 <b>4</b>			6,224.		
8	ENTER WORLDWI QUALIFIED DIV		S AND					
9	ADD LINES 3,	5, 7, AND	8				6,	224.
10	SUBTRACT LINE RESULT HERE A					=	3,242,	219.
FORM	4 4797 ———————————————————————————————————	PRO	PERTY HEI	LD MORE THA	N ONE YEAR		STATEMENT	33
DESC	CRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BAS		
INVE	STEIN FAMILY ESTMENTS LLLP STEIN FAMILY							837.
INVE BERN	ESTMENTS LLLP ISTEIN DINGS LLC						·	837. 8.
BERN	NSTEIN DINGS LLC							8.
m0m2	AL TO 4797, PA	OT T.TME	2				1	690.

BERNSTEIN FAMILY FORM 4797 INVESTMENTS LLLP 837. 837.  BERNSTEIN FAMILY SCH E INVESTMENTS LLLP 837. 837.  BERNSTEIN FAMILY FORM 4797 INVESTMENTS LLLP 837. 837.  BERNSTEIN FAMILY SCH E INVESTMENTS LLLP 837. 837.  BERNSTEIN FAMILY SCH E INVESTMENTS LLLP 837. 837.  BERNSTEIN HOLDINGS LLC FORM 4797 8. 8.  BERNSTEIN HOLDINGS LLC SCH E 8. 8.  BERNSTEIN HOLDINGS LLC FORM 4797 8. 8.  BERNSTEIN HOLDINGS LLC SCH E 8. 8.  BERNSTEIN H	FORM 6251	PASSI	7E ACTIVITIES	·	STATEMENT	34
BERNSTEIN FAMILY FORM 4797 INVESTMENTS LLLP 837. 837. 837.  BERNSTEIN FAMILY SCH E  INVESTMENTS LLLP 837. 837. 837.  BERNSTEIN FAMILY FORM 4797 INVESTMENTS LLLP 837. 837. 837.  BERNSTEIN FAMILY SCH E  INVESTMENTS LLLP 837. 837. 837.  BERNSTEIN FAMILY SCH E  INVESTMENTS LLLP 837. 837. 837.  BERNSTEIN FAMILY SCH E  INVESTMENTS LLLP 8837. 837. 837.  BERNSTEIN HOLDINGS LLC FORM 4797 8. 8. 8.  BERNSTEIN HOLDINGS LLC FORM 4797 8. 8. 8.  BERNSTEIN HOLDINGS LLC FORM 4797 8. 8. 8.  BERNSTEIN HOLDINGS LLC SCH E 8. 8. 8.  FROM 100% DISPOSITION 138.  TOTAL TO FORM 6251, LINE 19 138.  DESCRIPTION AMOUNT  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 229.  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 228.  PERSHING LLC (10376) 130.  TOTAL TO FORM 6251, LINE 12 772.  FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 34.  DESCRIPTION AMOUNT  FROM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 34.  DESCRIPTION AMOUNT  FROM 6-251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 34.  DESCRIPTION AMOUNT  DESCRIPTION AMOUNT  FROM K-1 - LIC HOLDINGS INC 3,176			NET INCOM	E (LOSS)		
INVESTMENTS LLLP SCH E  INVESTMENTS LLLP SCH E  INVESTMENTS LLLP BERNSTEIN FAMILY SCH E  INVESTMENTS LLLP BERNSTEIN FAMILY BERNSTEIN FAMILY BERNSTEIN FAMILY SCH E  S37. 837.  838.  8.  8.  8.  8.  8.  8.  8.  8.	NAME OF ACTIVITY	FORM	AMT	REGULAR	ADJUSTMEN	T
BERNSTEIN FAMILY SCH E         <837.>         <837.>         837.>         837.>         837.>         837.>         837.         837.         837.         837.         837.         837.>         837.         837.         837.         837.         837.         837.	BERNSTEIN FAMILY	FORM 4797				
INVESTMENTS LLLP		ರಂಭ ಕ	837.	837.		
### BERNSTEIN FAMILY		SCR B	<837.>	<837.>		
INVESTMENTS LLLP 837. 837.  BERNSTEIN FAMILY SCH E  INVESTMENTS LLLP (837.> 637.>  BERNSTEIN HOLDINGS LLC FORM 4797 8. 8. 8.  BERNSTEIN HOLDINGS LLC SCH E (8.> 68.> 68.>  FROM 100% DISPOSITION 138.  TOTAL TO FORM 6251, LINE 19 138.  DESCRIPTION AMOUNT  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 229  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 228  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 228  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP 228  TOTAL TO FORM 6251, LINE 12 772  FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 3.  DESCRIPTION AMOUNT  FROM K-1 - LIC HOLDINGS INC 3,176		FORM 4797	\057 <b>.</b> >	<b>1037.</b>		
Note	INVESTMENTS LLLP		837.	837.		
BERNSTEIN HOLDINGS LLC FORM 4797 8. 8.> BERNSTEIN HOLDINGS LLC SCH E	BERNSTEIN FAMILY	SCH E				
BERNSTEIN HOLDINGS LLC SCH E       <8.>       <8.>         BERNSTEIN HOLDINGS LLC FORM 4797       8.       8.         BERNSTEIN HOLDINGS LLC SCH E       <8.>       <8.>         FROM 100% DISPOSITION       138.         TOTAL TO FORM 6251, LINE 19       138.         FORM 6251       INTEREST FROM SPECIFIED PRIVATE ACTIVITY BONDS STATEMENT 39.         DESCRIPTION       AMOUNT         FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP       229.         FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP       228.         PERSHING LLC (17)       185.         PERSHING LLC (10376)       130.         TOTAL TO FORM 6251, LINE 12       772.         FORM 6251       DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36.         DESCRIPTION       AMOUNT         FROM K-1 - LIC HOLDINGS INC       3,176	INVESTMENTS LLLP		<837.>	<837.>		
### BERNSTEIN HOLDINGS LLC FORM 4797	BERNSTEIN HOLDINGS LLC	FORM 4797				
BERNSTEIN HOLDINGS LLC SCH E			<8.>	<8.>		
FROM 100% DISPOSITION  TOTAL TO FORM 6251, LINE 19  FORM 6251 INTEREST FROM SPECIFIED PRIVATE ACTIVITY BONDS STATEMENT 35  DESCRIPTION  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP PERSHING LLC (17) PERSHING LLC (17) 185. TOTAL TO FORM 6251, LINE 12  FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  AMOUNT  FROM K-1 - LIC HOLDINGS INC  3,176						
TOTAL TO FORM 6251, LINE 19  FORM 6251 INTEREST FROM SPECIFIED PRIVATE ACTIVITY BONDS STATEMENT 35  DESCRIPTION AMOUNT  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP PERSHING LLC (17) PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  AMOUNT  FROM K-1 - LIC HOLDINGS INC  3,176		SCH E	<8.>	<8.>		
FORM 6251 INTEREST FROM SPECIFIED PRIVATE ACTIVITY BONDS STATEMENT 35  DESCRIPTION AMOUNT  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP PERSHING LLC (17) PERSHING LLC (17) PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION AMOUNT  FROM K-1 - LIC HOLDINGS INC 3,176	FROM 100% DISPOSITION			_	1	.38
DESCRIPTION  FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP PERSHING LLC (17) PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251  DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 30  DESCRIPTION  AMOUNT  FROM K-1 - LIC HOLDINGS INC  3,176	TOTAL TO FORM 6251, LI	NE 19			1	.38
FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP PERSHING LLC (17) PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251  DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  AMOUNT  FROM K-1 - LIC HOLDINGS INC  3,176	FORM 6251 INTER	EST FROM SPECII	FIED PRIVATE A	CTIVITY BONDS	STATEMENT	3.5
FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP PERSHING LLC (17) PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251  DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  AMOUNT  FROM K-1 - LIC HOLDINGS INC  3,176						
FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP PERSHING LLC (17) PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251  DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  FROM K-1 - LIC HOLDINGS INC  3,176	DESCRIPTION				AMOUNT	
PERSHING LLC (17) PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251  DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  FROM K-1 - LIC HOLDINGS INC  3,176	FROM K-1 - BERNSTEIN F.	AMILY INVESTME	NTS LLLP		2	29.
PERSHING LLC (10376)  TOTAL TO FORM 6251, LINE 12  FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  FROM K-1 - LIC HOLDINGS INC  3,176	FROM K-1 - BERNSTEIN F.	AMILY INVESTME	NTS LLLP		2	228.
TOTAL TO FORM 6251, LINE 12  FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION  FROM K-1 - LIC HOLDINGS INC  3,176	PERSHING LLC (17)				1	.85
FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 36  DESCRIPTION FROM K-1 - LIC HOLDINGS INC  3,176	PERSHING LLC (10376)				1	.30
DESCRIPTION AMOUNT FROM K-1 - LIC HOLDINGS INC 3,176	TOTAL TO FORM 6251, LI	NE 12		•	7	772
DESCRIPTION AMOUNT FROM K-1 - LIC HOLDINGS INC 3,176				•		
FROM K-1 - LIC HOLDINGS INC 3,176	FORM 6251 DEPRECIAT	ION ON ASSETS	PLACED IN SERV	ICE AFTER 1986	STATEMENT	3
FROM K-1 - LIC HOLDINGS INC 3,176	DESCRIPTION				AMOUNT	
		aa				
TOTAL TO FORM 6251, LINE 18 3,176	FROM K-1 - LIC HOLDING	S INC			3,1 ————	.76
	TOTAL TO FORM 6251, LI	NE 18			3,1	L76

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FORI	I 1116 ALTERNATIVE MINIMUM TAX FOREIG WORLDWIDE CAPITAL GA WORKSHEET FOR LINE	INS	STATEMENT	37
1	ENTER THE AMOUNT FROM FORM 6251, LINE 29		3,288,6	82.
2	ENTER WORLDWIDE 25% GAINS			
3	MULTIPLY LINE 2 BY 0.1071			
4	ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS	10,892.		
5	MULTIPLY LINE 4 BY 0.4643	5,057.		
б	ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS			
7	ADD LINES 3, 5, AND 6		5,0	57.
8	SUBTRACT LINE 7 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116 AMT, LINE 17		3,283,6	25.
FORI	I 4952 INVESTMENT INTEREST E	XPENSE	STATEMENT	38
DES	RIPTION	CURRENT	CARRYOVER	
FROI FROI FROI FROI	K-1 - EVERGREEN PRIVATE INVESTMENTS FUNDS K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP K-1 - BERNSTEIN HOLDINGS LLC K-1 - BERNSTEIN HOLDINGS LLC K-1 - JILL IANTONI FAMILY TRUST	3,429. 1,568. 1,567. 16. 15.		1.
TOT	ALS TO FORM 4952, LINES 1 AND 2	6,595.		1.
				39
FORI	1 4952 INCOME FROM PROPERTY HELD F	OR INVESTMENT	STATEMENT	
	I 4952 INCOME FROM PROPERTY HELD F	OR INVESTMENT	STATEMENT AMOUNT	

SIMON & SHIRLEY BERNST	EIN				371-32-5211
BERNSTEIN FAMILY INVESTMERNSTEIN FAMILY INVESTMERNSTEIN HOLDINGS LLC				•	1. 1. 1.
TOTAL TO FORM 4952, LINE	E 4A				128,806.
FORM 4952	IN	VESTMENT EXI	PENSES	ST	ATEMENT 40
DESCRIPTION					AMOUNT
EVERGREEN PRIVATE INVEST BERNSTEIN FAMILY INVEST BERNSTEIN FAMILY INVEST FROM - EVERGREEN PRIVATE FROM - EVERGREEN PRIVATE FROM - BERNSTEIN FAMILY FROM - BERNSTEIN FAMILY	MENTS LLLP MENTS LLLP E INVESTME INVESTMEN	- ROYALTY - ROYALTY NTS FUNDS NT FUNDS TS LLLP	<b>T</b>		4. 1. 4. 4,738. 1.
TOTAL TO FORM 4952, LINE	₹ 5				4,750.
FORM 4952 INVESTMENT NAME	T INTERES FORM OR SCHEDULE		EDUCTION SUM INVESTMENT INTEREST EXPENSE C/O	DISALLOWED INVESTMENT INTEREST	INVESTMENT INTEREST
FROM K-1 - EVERGREEN P FROM K-1 - BERNSTEIN F FROM K-1 - BERNSTEIN F FROM K-1 - BERNSTEIN H FROM K-1 - BERNSTEIN H FROM K-1 - JILL IANTON TOTALS	SCH A SCH A SCH A	3,429. 1,568. 1,567. 16. 15. 0.	0. 0. 0. 0. 1.		3,429. 1,568. 1,567. 16. 15. 1.
FORM 4952AMT	INVESTM	ENT INTERES	r expense	ST	ATEMENT 42
DESCRIPTION			CURR	ENT C	ARRYOVER
FROM K-1 - EVERGREEN PRIFROM K-1 - BERNSTEIN FAIFROM K-1 - BERNSTEIN HOLFROM K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BERNSTEIN K-1 - BER	MILY INVES MILY INVES LDINGS LLC	TMENTS LLLP TMENTS LLLP		3,429. 1,568. 1,567. 16. 15.	

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SIMON & SHIRLEY BERN	ISTEIN					3	71-32-5	211	
FROM K-1 - JILL IANTON	II FAMILY TR	UST						1.	
TOTALS TO FORM 4952AMT	, LINES 1 A	ND 2			6,595.			1.	
FORM 5884	FLOWTHROUG	H WORK OPPOR	TUNITY	CREDI	TS	STA	PEMENT	43	
NAME OF ACTIVITY							AMOUNT		
EVERGREEN PRIVATE INVE	ESTMENTS FUN	DS						4.	
TOTAL TO FORM 5884, LI	INE 3							4.	
FORM 6781 PART I	- SECTION 1	256 CONTRACT	S MARK	ED TO	MARKET	STA	TEMENT	44	
(A) IDENTIFICATION OF	ACCOUNT		_	(B) (L	oss)	(C	) GAIN		
FROM K-1 - POWERSHARES DB G10 CURRENCY FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC 10.									
TOTAL TO FORM 6781, LI	INE 1, COLUM	INS B AND C	==		2,141.				
FORM 8582	OTHER PASSIV	E ACTIVITIES	- WOR	KSHEET	3	STA	TEMENT	<u>4</u> 5	
	CURRENT	YEAR	PRIOR		OVERAI	L GA	IN OR I	oss	
NAME OF ACTIVITY	NET INCOME	NET LOSS	UNALL LOS		GAIN	1	LOSS	<del></del>	
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY	837.	<2,211.>					<1,3	374.>	
INVESTMENTS LLLP	837.	<2,212.>					<1,3	375.>	
BERNSTEIN HOLDINGS LLC	8.	<21.>				<:			
BERNSTEIN HOLDINGS LLC	8.	<22.>					<	<14.>	
JILL IANTONI FAMILY TRUST	0.	0.		<9.>				<9.>	
TOTALS	1,690.	<4,466.>		<9.>			<2,7	785.>	

FORM 8582	ALLOCAT	ION OF UNA	LLOWED LOSS	SES - WORKSH	EET 5 STA	PEMENT 46
NAME OF ACTIVIT	Y		FORM OR SCHEDULE	ross	RATIO	UNALLOWED LOSS
BERNSTEIN FAMIL BERNSTEIN FAMIL BERNSTEIN HOLDI BERNSTEIN HOLDI JILL IANTONI FA	Y INVESTME NGS LLC NGS LLC		SCH E SCH E SCH E SCH E FORM 4797	1,374. 1,375. 13. 14. 9.	.493357271 .493716338 .004667864 .005026930 .003231597	1,374. 1,375. 13. 14.
TOTALS				2,785.	1.000000000	2,785.
FORM 8582		ALLOWED L	OSSES - WOF	RKSHEET 6	STA	rement 47
NAME OF ACTIVIT	Y		FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
JILL IANTONI FA	— MILY TRUST		FORM 4797	9.	9.	P
TOTALS			·	9.	9.	
FORM 8582				PORTED ON 2 JLES - WORKS		TEMENT 48
GROUP NO. NAME	FORM OR SCHEDULE NET LOSS	FORM OR SCHEDULE NET GAIN	OVERALL LOSS	RATIO	UNALLOWED LOSS	ALLOWED LOSS
1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	0.	837.	0.	.00000000	0.	0.
INVESTMENTS	2,211.	0.	2,211.	1.000000000	1,374.	837.
			2,211.	1.00000000	1,374.	837.
2 BERNSTEIN FAMILY INVESTMENTS 2 BERNSTEIN	0.	837.	0.	.000000000	0.	0.
FAMILY INVESTMENTS	2,212.	0.	2,212.	1.00000000	1,375.	837.

837.	1,375.	1.000000000	2,212.	- Palana-pa			
						BERNSTEIN	3
0.	0.	.000000000	0.	8.	0.	HOLDINGS LLC	
						BERNSTEIN	3
8.	13.	1.000000000	21.	0.	21.	HOLDINGS LLC	
8.	13.	1.00000000	21	_			
8.	13.	1.00000000	<b>4</b> ±•				
						4 BERNSTEIN	4
0.	0.	.000000000	0.	8.	0.	HOLDINGS LLC	
						4 BERNSTEIN	4
8.	14.	1.000000000	22.	0.	22.	HOLDINGS LLC	
8.	14.	1.00000000	22	_			
<b>ō</b> •	14.	T.00000000	44.				

R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP		837.		837.		
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY		<2,211.>		<2,211.	> 1,374.	837.
INVESTMENTS LLLP BERNSTEIN FAMILY		837.		837.		
INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC	FORM 4797	<2,212.> 8.		<2,212.	> 1,375.	837.
BERNSTEIN HOLDINGS LLC	SCH E	<21.>		<21.	> 13.	8.
BERNSTEIN HOLDINGS LLC	FORM 4797	8.		8.		
BERNSTEIN HOLDINGS LLC JILL IANTONI	SCH E FORM 4797	<22.>	-	<22.	> 14.	8.
FAMILY TRUST		0.	<9.	> <9.	> 9.	
TOTALS		<2,776.>	<9 <b>.</b>	> <2,785.	> 2,785.	1,690.
PRIOR YEAR CARRYOVI	ERS ALLOWE	D DUE TO C	URRENT YE	AR NET ACTI	VITY INCOME	
TOTAL TO FORM 8582	, LINE 16				•	1,690.

FORM 8582~CR	OTHER PASSI	IVE ACTIVI ORKSHEET 4	TY CREDITS	STA	ATEMENT	50
NAME OF ACTIVITY	FORM	CURREN YEAR CRED	T UNA	R YEAR LLOWED EDITS (	TOTAL CREDITS	
EVERGREEN PRIVATE INVESTMENTS FUNDS BERNSTEIN FAMILY INVESTMENTS LLLP	FORM 5884 FORM 8907		4. 1.			4.
TOTALS			5.			5.
NAME OF ACTIVITY		FORM	CREDITS	RATIO	UNALLOW CREDIT	
EVERGREEN PRIVATE INVESTEIN FAMILY INVESTEIN			4. 1.	.800000000 .20000000	CREDIT	4.
TOTALS	TWENTS HITTE	ORM 8907		1.00000000		5.
FORM 8582-CR	ALLOWED (	CREDITS -	WORKSHEET	9 ST.	ATEMENT	52
NAME OF ACTIVITY		FORM	CREDITS	UNALLOWED CREDITS	ALLOWE CREDIT	
····						
EVERGREEN PRIVATE INVESTEIN FAMILY INVEST	ESTMENTS FUNDS STMENTS LLLP	FORM 5884 FORM 8907				

FORM 8582	ОТНЕ		ATIVE MININ ACTIVITIES	NUM TAX 5 - WORKSHEI		ATEMENT 53
		CURRENT	YEAR	PRIOR YEAR UNALLOWED	OVERALL GA	AIN OR LOSS
NAME OF ACTIVITY	NET	INCOME	NET LOSS	LOSS	GAIN	LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY	***************************************	837.	<2,106.>	·		<1,269.>
INVESTMENTS LLLP BERNSTEIN HOLDING	<b>3</b> 8	837.	<2,105.>	•		<1,268.>
LLC		8.	<21.>	•		<13.>
BERNSTEIN HOLDING	ತಾರ	8.	<21.>	>		<13.>
TOTALS		1,690.	<4,253.>	<b>-</b>	_	<2,563.>
	-					
FORM 8582			ATIVE MINI			ATEMENT 54
	ALLOCATI	ON OF UN	ALLOWED LOS	SSES - WORKS	SHEET 5	
NAME OF ACTIVITY			FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY			SCH E	1,269.	.495122903	1,269.
INVESTMENTS LLLP BERNSTEIN HOLDING BERNSTEIN HOLDING			SCH E SCH E SCH E		.494732735 .005072181 .005072181	1,268. 13. 13.
TOTALS				2,563.	1.00000000	2,563.
				-		
FORM 8582		TIES WIT		MUM TAX EPORTED ON : DULES - WORI	2 OR	ATEMENT 55
GROUP	FORM OR SCHEDULE NET LOSS	FORM OR SCHEDULE NET GAIN		RATIO	UNALLOWED LOSS	ALLOWED LOSS
1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	0.	837				. 0.
INVESTMENTS	2,106.	0	2,106	. 1.0000000	00 1,269	. 837.

	_	2,106.	1.00000000	1,269.	837.
0	025	0	00000000	•	0
υ.	83/.	0.	.000000000	U •	0.
2,105.	0.	2,105.	1.000000000	1,268.	837.
	_	2,105.	1.00000000	1,268.	837.
0.	8.	0.	.000000000	0.	0.
21.	0.	21.	1.000000000	13.	8.
	_	21.	1.00000000	13.	8.
۸	0	0	00000000	0	0.
0.	0.	0.	•00000000	0.	0.
21.	0.	21.	1.000000000	13.	8.
	_	21.	1.00000000	13.	8.
	0. 21.	2,105. 0	0.       837.       0.         2,105.       0.       2,105.         0.       8.       0.         21.       0.       21.         0.       8.       0.         21.       0.       21.         0.       21.       0.         21.       0.       21.	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

F(	DRM 8582AMT	SUMMAR	CY OF PASSI	IVE ACTIVI	TIES - AMT	STAT	EMENT 56
R E	NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
_	BERNSTEIN FAMILY INVESTMENTS LLLP		837.		837.		
	BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY		<2,106.	>	<2,106.	> 1,269.	837.
	INVESTMENTS LLLP BERNSTEIN FAMILY	SCH E	837.		837.	1 060	025
	INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC	FORM 4797	<2,105.; 7 8.	>	<2,105.> 8.	> 1,268.	837.
	BERNSTEIN HOLDINGS LLC	SCH E	<21.	>	<21.	> 13.	8.
	BERNSTEIN HOLDINGS LLC	FORM 4797	8.		8.		

SIMON & SHIRLEY BERNSTEIN			371	-32-5211
BERNSTEIN SCH E HOLDINGS LLC	<21.>	<21.>	13.	8.
TOTALS	<2,563.>	<2,563.>	2,563.	1,690.
PRIOR YEAR CARRYOVERS ALLOWED	D DUE TO CURRENT YEAR	NET ACTIVI	TY INCOME	
TOTAL TO FORM 8582AMT. LINE	16			1.690.

<b>± 1040</b>	EX	TENSION GRANTED TO 10/15/ J.S. Individual Income Tax Return	<sup>′¹⁰</sup> 2009	(99) IRS Use	Only - Do not write	e orsta	ple in this space.
Label		year Jan. 1-Dec. 31, 2009, or other tax year beginning	, 2009, en	nding	, 20		OMB No. 1545-0074
(See L	You	Your first name and initial Last name SIMON BERNSTEIN					social security number
instructions	1 S.	IMON		3	71 32 5211		
on page 14.)	Ifa	a joint return, spouse's first name and initial Last name					use's social security number
Use the IRS	SHIRLEY BERNSTEIN					3	47 30 9749
label. Otherwise, please print	7020 LIONS HEAD LANE			Apt. no.		You <b>mus</b> tenter your SSN(s) above.▲	
	<b>=  </b>	, town or post office, state, and ZIP code. If you have a foreign ac	ldress, see page 14.			Che	cking a box below will not
Presidential		OCA RATON, FL 33496				chan	nge your tax or refund.
Election Camp	aign 🕨	Check here if you, or your spouse if filing join	intly, want \$3 to go t	to this fund (see pa	ge 14) 🕨		You Spouse
Filing Status	3 1	Single	4				erson). If the qualifying
·	2	Married filing jointly (even if only one had income			d but not your o	depend	dent, enter this child's
Check only	3	Married filing separately. Enter spouse's SSN abo	ive	name here. 🕨			
one box.		and full name here. 🕨	5				child (see page 16)
Exemptions		X Yourself. If someone can claim you as a dependent				ر	Boxes checked 2
Exemplions	b_	X Spouse				ز	No. of children on 6c who:
		Dependents: (2)	Dependent's social	(3) Dependent's relationship to	3 (4) V (1 ing.c	qualify- alld for ax credit	<ul><li>lived with you</li></ul>
	_	(1) First name Last name	security number	you	child ta (see pa	ax cregit age 17)	<ul> <li>did not live with you due to divorce</li> </ul>
	_						or separation (see page 18)
If more than four			i i				
dependents, see page 17 and	_		: ;		-		Dependents on 6c not entered above
check here			: :				Add numbers
	ď	Total number of exemptions claimed					on lines 2
Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2				7	
	8a	Taxable interest. Attach Schedule B if required	*****************	***************************************		3a	258,203.
Attach Form(s) W-2 here. Also	b	Tax-exempt interest. Do not include on line 8a		8b   14	233.		
attach Forms	9a	Ordinary dividends. Attach Schedule B if required			9	a	26,099.
W-2G and	b	Qualified dividends (see page 22)		9b   21	.,158.		
1099-R if tax was withheld.	10	Taxable refunds, credits, or offsets of state and local in	ncome taxes			10	
nay minimora.	11	Alimony received				11	
Marian allal mark	12	Business income or (loss). Attach Schedule C or C-EZ				12	0.
If you did not get a W-2,	13	Capital gain or (loss). Attach Schedule D if required. If	not required, check he	ere		13	<3,000.>
see page 22.	14	Other gains or (losses). Attach Form 4797		14	<del></del>		
· -	15a	IRA distributions   15a		Taxable amount		5b	
Enclose, but do	16a			Taxable amount		6b	0.
not attach, any payment. Also,	17	Rental real estate, royalties, partnerships, S corporation				17	<855,124.>
please use	18	Farm Income or (loss). Attach Schedule F Unemployment compensation in excess of \$2,400 per recipient				18	
Form 1040-V.	19	Unemployment compensation in excess of \$2,400 per recipient (see page 27)			·	19	
	20a	Social security benefits   20a		Taxable amount (see		0b	0.
	21	Other income. List type and amount (see page 29) SEE STATEMENT 1		<u> </u>		21	1,014.
	22	Add the amounts in the far right column for lines 7 thr	ough 21. This is your t	total income		22	<572,808.>
	23			23	10000000000000000000000000000000000000		
Adjusted	24	Educator expenses (see page 29) Certain business expenses of reservists, performing artists, and officials. Attach Form 2106 or 2106-EZ	d fee-basis government	24	Control and American Control Control and Control and Control and Control and Control and Control and Control and Control and	0.000 non	
Gross	25	Health savings account deduction. Attach Form 8889	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	25	0.7 mm/s 20 mm	COMPANY OF THE PROPERTY OF T	
Income	26	Moving expenses. Attach Form 3903		26	Samuel Sa	00.00.10 PAGE 10.10	
	27	One-half of self-employment tax. Attach Schedule SE		27	Section of the sectio		
	28	Self-employed SEP, SIMPLE, and qualified plans		28	E	Page 1	
	29	Self-employed health insurance deduction (see page 3		29	Company of the Compan	AND THE RESERVE OF THE PARTY OF	
	30	Penalty on early withdrawal of savings		30	control of control of		
	31a	Alimony paid b Recipient's SSN ▶	:	31a	and the second s	Agenta and	
	32	IRA deduction (see page 31)		32	Projection of Control	Tourism to the control of the contro	
	33	Student loan interest deduction (see page 34)		33	1 march		
	34	Tuition and fees deduction. Attach Form 8917		34			
	35	Domestic production activities deduction. Attach Form		35			
		com production activities activities in talkett ( off)				2000 A 100 B	

Subtract line 36 from line 22. This is your adjusted gross income

36 Add lines 23 through 31a and 32 through 35

36

37

Form 1040 (2009)	S	IMON & SHIRLEY BERNSTEIN	371-32-5211	Page 2
Tax and	38	Amount from line 37 (adjusted gross income)		38 <572,808.
Credits	39a	Check \[ \begin{aligned} \begi	Total boxes	2000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Standard		if: Spouse was born before January 2, 1945, Blind.	checked ▶ 39a 2	The control of the co
Deduction for -	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and of	heck here > 39b	Control of the Contro
People who check any		Itemized deductions (from Schedule A) or your standard deduction (see left ma If you are increasing your standard deduction by certain real estate taxes, new motor vehicle to disaster loss, attach Schedule L and check here (see page 35)		40a 148,175.
box on line 39a, 39b, or	þ	disaster loss, attach Schedule L and check here (see page 35)	xes, or a net → 40b	
40b <b>0</b> f who can be	41			41 <720,983.
claimed as a dependent.	42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a	Midwestern displaced Individual,	mail (1) Similar or my
Gopenadin.		multiply \$3,650 by the number on line 6d. Otherwise, see page 37		42 7,300.
1 1	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, er	nter -0-	
All others:	44	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972		44 0.
Single or	45	Alternative minimum tax. Attach Form 6251	187419417817877944184178417844184418441844184	45 0.
Married filing separately.	46	Add lines 44 and 45	.,	46 0.
\$5,700	47	Foreign tax credit. Attach Form 1116 if required	47	The sea page age of the bid great of the
Married filing Jointly or	48	Credit for child and dependent care expenses. Attach Form 2441		for promote forms of the control of
Qualifying widow(er),	49	Education credits from Form 8863, line 29	49	Service Control of the
\$11,400	50	Retirement savings contributions credit. Attach Form 8880	50	which has been proposed and the control of the cont
Head of	51	Child tax credit (see page 42)	51	and the continued of th
household, \$8,350	52	Credits from Form: a 8396 b 8839 c 5695	52	The second secon
1	53	Other credits from Form: a X 3800 b 8801 c	53	The state of the s
	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 0.
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		
	59	Additional taxes: a AEIC payments b Household employment taxe		59
	60	Add lines 55 through 59. This is your total tax		60 0.
Payments	61	Federal income tax withheld from Forms W-2 and 1099		1 A Company of the Co
•	62	2009 estimated tax payments and amount applied from 2008 return		Grant weather that the control of th
	63	Making work pay and government retiree credits. Attach Schedule M		The page of the County of the
If you have	- 64 a	Earned income credit (EIC)		The state of the s
a qualifying child, attach	- t	Nontaxable combat pay election 64b	200	Section 1 - Sectio
Schedule EIC.		Additional child tax credit. Attach Form 8812	65	Secretary of the secret
	66	Refundable education credit from Form 8863, line 16		
	67	First-time homebuyer credit. Attach Form 5405		And Andread Section of the sect
	68	Amount paid with request for extension to file (see page 72)		Control Confidence on common     Control Confidence on common     Control Confidence on common     Control Confidence on common     Control Confidence     Control Confidence     Control Confidence     Control Confidence     Control Confidence     Control Confidence     Control
	69	Excess social security and tier 1 RRTA tax withheld (see page 72)	69	The state of the s
		Credits from Form: a 2439 b 4136 c 8801 d 8885	70	Principles of the Control of the Con
	71			71
Refund	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount y		72 0.
Direct deposit?		Amount of line 72 you want refunded to you. If Form 8888 is attached, check he		73a
See page 73 and fill in 73b,	<b>&gt;</b> t	Routing ► c Type: Checking Savings ► d Account		The second secon
73c, and 73d, or Form 8888.		Amount of line 72 you want applied to your 2010 estimated tax	74   0	The control of the co
Amount	75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see p	page 74	75 0.
You Owe	76	Estimated tax penalty (see page 74)	76	
<b>Third Part</b>	y [	o you want to allow another person to discuss this return with the IRS (see page	75)? X Yes. Complete the	following. No
Designee	De ma	signee's ►GERALD R. LEWIN Phone Do.	► (561) 994-505¢	0 Personal identification ► 5050
Sign	Unde and c	r penalities of perjury, I declare that I have examined this return and accompanying schedules ar omplete, Declaration of preparer (other than taxpayer) is based on all information of which prepa	nd statements, and to the best of my kno arer has any knowledge.	owledge and belief, they are true, correct,
Here		Your signature Date Your occupation		Daytime phone number
Joint return? See page 15.		EXECUT	IVE	
Keep a copy for your		Spouse's signature. If a joint return, both must sign. Date Spouse's occup	ation	
records.		INSURAL	NCE	The second of th
Paid	Prepa	rens	Date Check if self-	Preparer's SSN or PTIN
Preparer's	signa		employed	P00127193
Use Only	Firm'	name (or CBIZ GOLDSTEIN LEWIN	EIN	34 1900735
040003		if self-em-d), address,	TH FLOOR Phor	<sup>19 no.</sup> (561) 994-5050
910002 10-20-09		BOCA RATON, FL 33486		

#### SCHEDULE A (Form 1040)

Department of the Treasury internal Revenue Service (99 Names) shown on Form 1040

#### **Itemized Deductions**

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

OMB No. 1545-0074

2009
Attachment
Sequence No. 07

SIMON & SHIRLEY BERNSTEIN 371 32 5211 Caution. Do not include expenses reimbursed or paid by others. Medical Medical and dental expenses (See page A-1.)  $\_\_SEE\_STATEMENT\_10$ 8.201. and 1 1 **Dental** 2 **Expenses** 0 3 Multiply line 2 by 7.5% (.075) 8,201. Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-.... 4 **Taxes You** State and local (check only one box): Paid a L\_\_\_ Income taxes, or b General sales taxes (See page A-2.) 40,982 Real estate taxes (See page A-5.) New motor vehicle taxes from line 11 of the worksheet on page 2. Skip this line if you checked box 5b Other taxes. List type and amount 40,982. Add lines 5 through 8 Interest 73,993 Home mortgage interest and points reported to you on Form 1098 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you be just the home You Paid from whom you bought the home, see page A-7 and show that person's name, (See identifying no., and address page A-6.) Note. 11 Persona! Points not reported to you on Form 1098 STMT 7 12 1,784. interest is Qualified mortgage insurance premiums (See page A-7.) 13 not deductible. 4,777 Investment interest. Attach Form 4952 if required. (See page A-8.) STMT 14 80,554. Add lines 10 through 14 15 Gifts by cash or check SEE STATEMENT Gifts to 23*.*453. 16 Charity 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 5,625. 17 gift and got a benefit for it. Carryover from prior year 18 see page A-8. 0. Add lines 16 through 18 19 Casualty and Theft Losses Casualty or theft loss(es). Attach Form 4684. (See page A-10.) Job Expenses Unreimbursed employee expenses - job travel, union dues, job education, etc. and Certain Attach Form 2106 or 2106-EZ if required. (See page A-10.) Miscellaneous **Deductions** Tax preparation fees 22 Other expenses - investment, safe deposit box, etc. List type and amount (See page A-10.) 18,437. 18,437. Add lines 21 through 23 24 24 Ο. Multiply line 25 by 2% (.02) 27 18,437. Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-Other - from list on page A-11. List type and amount Other Miscellaneous ▶FROM K-1 - BERNSTEIN FAMILY INVESTMENTS Deductions 1. 28 Total Is Form 1040, line 38, over \$166,800 (over \$83,400 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 40a. 148,175.  $oldsymbol{\perp}$  Yes. Your deduction may be limited. See page A-11 for the amount to enter. If you elect to itemize deductions even though they are less than your standard deduction, check here

Worksheet for Line 7 -	Before you begin: You cannot take this deduction if the amount or (\$260,000 if married filing jointly).	n Form 1040, line 38, is equal to	or greater than \$135,000
New motor vehicle	✓ See the instructions for line 7 on page A-6.		
taxes	1 Enter the state or local sales or excise taxes you paid in 2009	Control of the Contro	Element of the Control of the Contro
	for the purchase of any new motor vehicle(s) after February 16,	of Charge of death in case of the Charge of the Charge of the Charge of the Charge of the Charge of the Charge of the Charge of the Charge of the Charge of the Cha	Some registration of the Control of
	2009 (see page A-6)	1	Field Strategy Control of the Contro
Use this			in mind between a beam in a second of the control o
worksheet to figure the	2 Enter the purchase price (before taxes) of the new motor vehicle(s)	2	State of the Control
amount to			Beautiful printer and 1 % 1. The control of the con
enter on	3 Is the amount on line 2 more than \$49,500?		Power of the Control
line 7.	No. Enter the amount from line 1.		Significant Control of
	Yes. Figure the portion of the tax from line 1		Section 2 courses to September 1997.  Section 2 courses to September 1997.  Section 2 courses to September 1997.  Section 3 courses to September 1997.  Section 3 courses to September 1997.  Section 3 courses to September 1997.  Section 3 courses to September 1997.  Section 3 courses to September 1997.
(Keep a copy	that is attributable to the first \$49,500		3
for your	of the purchase price of each new motor	(Management)	Secretary of the Secret
records.)	vehicle and enter it here (see page A-6).	A Company of the Comp	Constitution of the Consti
		CONTROL OF CONTROL OF	
	4 Enter the amount from Form 1040, line 38	2	Sen in Programment of the Control of
		Pour de Manager de Company de Com	
	5 Enter the total of any	Control of Control of	Controlled Controlled
	• Amounts from Form 2555, lines 45 and 50;	Production Operational visit Control Control	STRONG CHARGE & F. C.
	Form 2555 EZ, line 18; and Form 4563, line 15,	5	Section 1 Section 2 Sectio
	and	A D GOOD TO A STANDARD OF THE	Section 4 to the section of the sect
	• Exclusion of income from Puerto Rico	and the control of the country of th	and the Spiritual Marcel State.  See Spiritual State S
	O Add Barry Arms 5	And the second s	Published And And And And And And And And And An
	6 Add lines 4 and 5	6	California California
	7. Fatou \$105,000 (\$050,000 is magical filling initially)	_	Security of the Control of the Contr
	7 Enter \$125,000 (\$250,000 if married filling jointly)	7	Sea of victorial control of the cont
	8 Is the amount on line 6 more than the amount on line 7?	Man is dependent and distinct in the control of the	Secretary American Confederate
	No. Enter the amount from line 3 above on Schedule A,	School Control	di con productiva
	line 7. <b>Do not</b> complete the rest of this worksheet.	And the second s	Control Colombia Control  The Colombia Colombia  Colombia  Colombia Colombia  Co
	Van Culphyrat line 7 form line 0	8	Transact Application processing for relative resources and processing relative relative relative relative relative relative relative relative and the relative relative relative relative relative relative relative relative relative and relative relativ
	Tes. Subtract line / from line 6		and an office of the second se
	9 Divide the amount on line 8 by \$10,000. Enter the result as a	en upd gefann of de fallen y di gefan gefann of de fallen gefann og de gefan en gefannske gefann og de gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske gefannske	Statement was the rest for indi- tion of the rest of t
	decimal (rounded to at least three places). If the result is 1.000	See See See See See See See See See See	and private properties of the
	or more, enter 1.000	9	
	- maray areas 11000	<u>. ~</u>	Section Control Contro
	10 Multiply line 3 by line 9		10
	The manage of the second secon		
	11 Deduction for new motor vehicle taxes. Subtract line 10 from line	3. Enter the result here	
	and on Schedule A, line 7		11
			Schedule A (Form 1040) 2009

NAME	ONT P (177)					ons Work	· · · · · · · · · · · · · · · · · · ·	1 20 5044
STW	UN & SH.	IRLEY BER	NSTEIN					1-32-5211
							AGI 50% of AGI	<572,808. 0.
							3370 SI AGI	<u> </u>
Year		100% Limit	50% Limit	30% Limit	Appreciated Property 30% Limit	Appreciated Property 20% Limit	Total Contributions Allowed	Total Contributions Carryover
2004	Contributions							
	Allowed NOL Absorb. Lost							
2005	Contributions							
	Allowed NOL Absorb. Carryover			***				
2006	Contributions							
Less:	Allowed NOL Absorb.						-	<u> </u>  -
Less	NOL Abs. CRP Carryover CRP C/O							
2007	Contributions							
	Allowed NOL Absorb.							
Less:	NOL Abs. CRP Carryover							
	CRP C/O							
2008	Contributions							
	Allowed							]
	NOL Absorb. NOL Abs. CRP							
Less	Carryover							
			00 077	ي .	i			
	Contributions		29,077.	1.				
Less:	Allowed NOL Absorb.	0.	0.	0.	0.	0.		-
Less:	NOL Abs. CRP		20 077	7				20.070
	Carryover		29,077.	1.				29,078.

Charitable contributions to Schedule A, Line 19

912191 05-28-09

29,078.

AME SIMON & SHIRLEY BERNSTEIN  % Contributions		371-32-5211
	0.	
. 50% of AGI 2. Contributions qualifying for 50% limit		
3. Allowable 50% contributions	······	0.
% Contributions		
Remaining 50% limit (Line 1 - Line 3)		
i. Less capital gain property - special 30% limits	•	
6. Balance of 50% of AGI	0.	
7. 30% of AGI	1	
3. Contributions qualifying for 30% limit	1.	
Allowable 30% contributions (lesser of Line 6, 7 or 8)		0.
% Special Contributions		
). 30% of AGI		
. Contributions qualifying for 30% special limit	۸	
2. Remaining 50% limit (line 1 less lines 3 and 9)	0.	
3. Allowable 30% special contribution (lesser of Line 10, 11 or 12)		0.
% Contributions		
l. 20% of AGI		
5. 30% of AGI		
6. Allowed 30% regular contributions		
I Line 45 lensitive 40	0.	
7. Line 15 less line 16 3. Allowed 30% special contributions	•	
0. Line 15 less line 18	0.	
). Remaining 50% limit (line 1 less the sum of lines 3, 9, and 13)	0.	
. Contributions subject to the 20% limitation		
2. Allowable 20% contributions (lesser of Line 14, 17, 19, 20 or 21)		0.
	_	
1% and 100% Conservation Real Property Contributions  3. Remaining 50% limit (line 1 less the sum of lines 3, 9, 13 and 22)		
l. Conservation real property contribution subject to 50% limit		
- Conservation rear property contribution subject to contribution subject to		
5. Allowable 50% conservation real property contribution (lesser of Line 23 or 24)		0
6. Remaining 100% of AGI		
7. Conservation real property contribution subject to 100% limit	·	
3. Allowable 100% conservation real property contribution (lesser of Line 26 or 27)		0.
Total 2009 contributions allowed on Schedule A		
). Total prior year carryovers allowed on Schedule A		
	_	
Total charitable contributions to Schedule A, Line 19		

#### **SCHEDULE B**

(Form 1040A or 1040)

► Attach to Form 1040A or 1040.

See instructions.

**Interest and Ordinary Dividends** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return SIMON & SHIRLEY BERNSTEIN 371 32 5211 1 List name of payer. If any interest is from a selier-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 258,203. SEE STATEMENT 11 Note. If you received a Form 1099-INT. Form 1099-OID. 1 or substitute statement from a brokerage firm. list the firm's name as the paver and enter the total interest shown on that form. 2 Add the amounts on line 1 2 258,203. Excludable interest on series EE and I U.S. savings bonds issued after 1989. Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a 258,203. 4 Note. If line 4 is over \$1,500, you must complete Part III. Amount Part II List name of payer Ordinary PERSHING LLC (11036) 162. Dividends FROM K-1 BERNSTEIN FAMILY INVESTMENTS LLLP 12,827. FROM K-1 BERNSTEIN FAMILY INVESTMENTS LLLP 12,827. BERNSTEIN HOLDINGS LLC FROM K-1 134. BERNSTEIN HOLDINGS LLC 135. FROM K-1 Note: If you TT/ SIMON L BERNSTEIN IRREV TR FROM K-1 6. received a Form ELIOT BERNSTEIN FAMILY TRUST FROM K-1 1. 1099-DIV or substitute FROM K-1 ELIOT BERNSTEIN FAMILY TRUST \_ 1. statement from FROM K-1 JILL IANTONI FAMILY TRUST 1. a brokerage firm, 2. K-1 JILL IANTONI FAMILY TRUST list the firm's FROM 5 name as the FROM K-1 S FRIEDSTEIN FAMILY LISA TRUST 2. payer and enter the ordinary dividends shown FROM K-1 LISA S FRIEDSTEIN FAMILY on that form. 26,099. Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a Note. If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign Yes Νø **Foreign** account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. At any time during 2009, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing Accounts and requirements for Form TD F 90-22.1 X **Trusts** If "Yes," enter the name of the foreign country During 2009, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? 927501 10-20-09 X If "Yes," you may have to file Form 3520. See page B-2

#### **SCHEDULE C** (Form 1040)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.

Attach to Form 1040, 1040NR, or 1041.

See Instructions for Schedule C (Form 1040).

Name	of proprietor		· ·		So	clal securit	ty number (SSN)
SI	MON BERNSTEIN					371	-32-5211
A INS	Principal business or profession, includi SURANCE SALES	ng product or service (se	e page C-2)		В	nter code fro	om pages C-9,10, & 11  524290
C	Business name. If no separate business	name, leave blank.			D	Employer I	ID number (EIN), if any
E	Business address (including suite or roo City, town or post office, state, and ZIP of						
F	Accounting method: (1) X Cas	h (2) Accrual	(3) Othe	r (specify) 🕨			
G	Did you "materially participate" in the ope	eration of this business d	uring 2009? If "N	o," see page C-3 for limit on losses			X Yes No
Н	If you started or acquired this business of	during 2009, check here					▶ □
Pai	nt Income	- ·					
1	Gross receipts or sales. Caution. See pa	ge C-4 and check the box	x if:				
	• This income was reported to you on Fo on that form was checked, or	-		,	<b>▶</b> □	1	718,375.
	● You are a member of a qualified joint vincome not subject to self-employment t	venture reporting only rer ax. Also see page C-3 for	ntal real estate r limit on losses.	J			
2	Returns and allowances		*****************	***************************************		2	
3				***************************************		3	718,375.
4	Cost of goods sold (from line 42 on page	e 2)				4	
5	Gross profit. Subtract line 4 from line 3					5	718,375.
6	Other income, including federal and state	e gasoline or fuel tax cred	lit or refund (see	page C-4)		6	
7	Gross income, Add lines 5 and 6		*********	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7	718,375.
Pa	rt II Expenses. Enter expense	s for business use of	your home <b>onl</b> y	y on line 30.			
8	Advertising	8	18	Office expense		18	
9	Car and truck expenses		19	Pension and profit-sharing plans		19	
	(see page C-4)	9	20	Rent or lease (see page C-6):			
10	Commissions and fees	10 718,3	375. a	Vehicles, machinery, and equipment		20a	
11	Contract labor		b	Other business property		20b	
	(see page C-4)	11	21	Repairs and maintenance		21	
12	Depletion	12	22	Supplies (not included in Part III)		22	
13	Depreciation and section 179		23	Taxes and licenses		23	
	expense deduction (not included in		24	Travel, meals, and entertainment:		200 Marie 100 Ma	***
	Part III) (see page C-5)	13	a	Travel		24a	
14	Employee benefit programs (other		b	Deductible meals and			
	than on line 19)			entertainment (see page C-6)	,,,,,,,,,,,,	24b	
15	Insurance (other than health)	15	25	Utilities		25	
16	Interest:	Section 1 and the section of the sec	26	Wages (less employment credits)		26	
а	Mortgage (paid to banks, etc.)	16a	27	Other expenses (from line 48 on			
b	Other	16b		page 2)		27	
17	Legal and professional						
	services	17				School Section Co.	740 255
28	Total expenses before expenses for bus					28	718,375.
29	Tentative profit or (loss). Subtract line 23					29	0.
30	Expenses for business use of your home Net profit or (loss). Subtract line 30 from					30	<del></del>
31	<ul> <li>If a profit, enter on both Form 1040, I</li> </ul>		iling 9 or on G	arm 1040ND line 19 (if you shooked th	, )		
	box on line 1, see page C-7). Estates and			onn 1040NR, tille 13 (li you checked th	e	31	0.
	<ul> <li>If a loss, you must go to line 32.</li> </ul>	i ausis, ealei on roim i	041, IIII 3.		ſ	31	<u> </u>
32	If you have a loss, check the box that de	eerihae vour investment	in this activity (co	na naga (°-7)	<i>)</i>		
0 <b>Z</b>	<ul> <li>If you checked 32a, enter the loss on I</li> </ul>				)		
	line 13 (if you checked the box on line 1 on Form 1041, line 3.				}	32a [ 32b [	All investment is at risk.  Some investment is not at risk.
	<ul> <li>If you checked 32b, you must attach if</li> </ul>	Form 6198, Your loss ma	v be limited.		J		

# Schedule C - Two-Year Comparison Worksheet

Business Name:

Description	Tax Year 2008	Tax Year 2009	Increase (Decrease)
INCOME		VS earlin destri a curried P o com de judested bladet das thus facilité année en Geril de l VS earlin destricte de la comment de	A profit of the first form of the control of the co
GROSS INCOME	15,756,018.	718,375.	<15,037,643
EXPENSES			
COMMISSIONS AND FEES TOTAL EXPENSES	15,756,018. 15,756,018.	718,375. 718,375.	<15,037,643 <15,037,643
NET PROFIT OR (LOSS)	0.	0.	0
		:	

#### **SCHEDULE D** (Form 1040)

Department of the Treasury Internal Revenue Service (99) 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.

OMB No. 1545-0074

SI: <b>Pa</b>	MON & SHIRLEY BERNSTEIN    Short-Term Capital Gains and L	oecoc - Acco	te Hold On	Vor	or Loss		371	32 5211
Pa	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(C) Date sol (Mo., day, y	d	(d) Sales price	(e) Cost o		(f) Gain or (loss) Subtract (e) from (d)
1		(Heli day) yiiy						
		1						
-								
-					· · · · · · · · · · · · · · · · · · ·			
				-				·
	Enter your short-term totals, if any, from Sched	ule D-1 line 2		2				
3	Total short-term sales price amounts.  Add lines 1 and 2 in column (d)			3			A SECTION OF THE SECT	
1	Short-term gain from Form 6252 and short-term from Forms 4684, 6781, and 8824	ı gain or (loss)		MEN'	r 12	,	4	<270.
5	Net short-term gain or (loss) from partnerships, from Schedule(s) K-1	S corporations, e	states, and tru E STATE	sts MEN'	г 14		_5_	27,080.
6	Short-term capital loss carryover. Enter the amo		•	-			6	( 169,447.)
7 D-	Net short-term capital gain or (loss). Combin	e lines 1 through (	6 in column (f)	ro Th	an One Vear		7	<142,637.
IS C	(a) Description of property (Example: 100 sh, XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sol (Mo., day, y	d	(d) Sales price	(e) Cost other basi		(f) Gain or (loss) Subtract (e) from (d)
В					,			<del>- · · · · · · · · · · · · · · · · · · ·</del>
_	Catalogue Landau Atalogue Catalogue	D.1 line 0						····
9 10	Enter your long-term totals, if any, from Schedule  Total long-term sales price amounts.  Add lines 8 and 9 in column (d)			9				
11	Gain from Form 4797, Part I; long-term gain from long-term gain or (loss) from Forms 4684, 6781,	r Forms 2439 and	6252; and		T 13	120000000000000000000000000000000000000	11	<53.
12							12	<11,695.
13	Capital gain distributions		,		• • • • • • • • • • • • • • • • • • • •		13	
14		_				,	14	( )
15	Net long-term capital gain or (loss). Combine Part III on page 2	lines 8 through 14	i in column (f).	Then	go to		15	<11,748.

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

Schedule D (Form 1040) 2009

16	Combine lines 7 and 15 and enter the result	16	<154,385.
	If line 16 is:	The second secon	
	<ul> <li>A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> </ul>	The second secon	
	• A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.	and a first of a single and a first of a single and a first of a single and a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single a single and a single and a single and a single a single and a single and a single a single and a single a single a single a single a single a single a single a single a single a single a single a single a single a single a single	
	<ul> <li>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.</li> </ul>	The second of th	
17	Are lines 15 and 16 both gains?	Control of the contro	
	Yes. Go to line 18.	The second secon	
	No. Skip lines 18 through 21, and go to line 22.	In the desiration of the part	
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18	
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 <b>both</b> zero or blank?	Section 20 April 19 A	
	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	our Park Spanner Shakes Shak	
	1040 (or in the Instructions for Form 1040NR). <b>Do not</b> complete lines 21 and 22 below.	Control of the second of the s	
	No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the	And the second of the second o	
	Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.	The special content is a ground in a content of the	
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:	See A service de de della consideration de la consideration del la consideration de la	
	The loss on line 16 or     SEE STATEMENT 16	21 (	3,000•)
	• (\$3,000), or if married filing separately, (\$1,500)	Section 1 - Control of the Control o	
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.	The second secon	
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?	and a second of the depth of the analysis of the second of	
	Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete	The second secon	A CONTROL OF THE PARTY OF THE P
	the Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the Instructions	A CONTROL OF THE PROPERTY OF T	and plant to be an extended than 1 of 4 shows made an extended to the control of
	for Form 1040 (or in the Instructions for Form 1040NR).		
	No. Complete the rest of Form 1040 or Form 1040NR.	Of control or control of the control	

### 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.

OMB No. 1545-0074

Your social security number

Name(s) shown on return

➤ See Instructions for Schedule E (Form 1040).

S:	IMON & SHIRLEY BERNSTEI	N					37:	1-32	-521	L1
P	art I Income or Loss From Renta	al Re	eal Estate and Ro	yalties N	ote. If you a	ire in the business of ren	ting perso	nal prop	erty, use	)
	Schedule C or C-EZ (see page E-3). If you			ental income	or loss from	Form 4835 on page 2, I	ine 40.			
1	List the type and address of each rental real estat	e prop	erty:		2 Forea	ch rental real estate pro	erty listed		Yes	No
A						e 1, did you or your fami				
	BERNSTEIN FAMILY INVES	TME	NTS LLLP -	ROYAL		the tax year for persona	d purpose:	s ,	A	
В						ore than the greater of: days or				
	BERNSTEIN FAMILY INVES	TME	NTS LLLP -	ROYAL		% of the total days rente	d at fair	l l	в	
С						ntal value?		Γ		
					(See p	page E-3)			c	
n	come:			Prope	ties			Tota		
			Α	В		C	(Add o	columns	A, B, an	d C.)
3	Rents received	3					3			
4	Royaltles received	4	16.		17.		4			33.
	(penses:						Section 1			
5	Advertising	5								
6	Auto and travel (see page E-4)	6					The state of the s			
	Cleaning and maintenance	7					or security delices to the control of the control o			
8	Commissions	8					STATE OF THE STATE			
9	Insurance	ø					Control of the Contro			
tO	Legal and other professional fees	10				·	Sec. 5 Security of the Con-			
11	Management fees	11					Section 2015 Control of the Control			
12	Mortgage interest paid to banks, etc.									
	(see page E-5)	12					12			
13	Other interest	13			·		Sign Control of Contro			
	Repairs	14					Construction of the constr			
	Supplies	15								
	Taxes	16								
	Utilities	17					10000000000000000000000000000000000000			
	Other (list)						Section of the Artist			
	SEE STATEMENT 17		4.							
	SEE STATEMENT 18				5.					
		18								
							The state of the s			
						* · · · · · · · · · · · · · · · · · · ·	A.C			
19	Add lines 5 through 18	19	4.		5.		19			9.
	Depreciation expense or depletion (see page E-5)	20					20			
21	Total expenses. Add lines 19 and 20	21	4.		5.	•				
22	Income or (loss) from rental real estate						Section 2000 Control C			
	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									
	find out if you must file Form 6198	22	12.		12.					
							and the same of th			
23	Deductible rental real estate loss. <b>Caution.</b> Your rental real estate loss on line 22 may						Top a service of the			
	be limited. See page E-5 to find out if you									
	must file Form 8582. Real estate professionals						Sec 2002			
	must complete line 43 on page 2	23	k ,	k	)	ć	200 V A WAR TO THE TO T			
24	Income. Add positive amounts shown on line 22. I		include any losses	••		1	24			24.
	Losses. Add royalty losses from line 22 and rental			Enter total los	ses here		25 (			)
	Total rental real estate and royalty income or (los				•••					•
	If Parts II, III, IV, and line 40 on page 2 do not apply	-								
	line 17, or Form 1040NR, line 18. Otherwise, include	le this	amount in the total on line	e 41 on page :	2		26			24.

Attachment Sequence No. 13 Schedule E (Form 1040) 2009 Name(s) shown on return. Do not enter name and social security number if shown on page 1. Your social security number 371-32-5211 SIMON & SHIRLEY BERNSTEIN Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1. Income or Loss From Partnerships and S Corporations Note, If you report a loss from an at-risk activity for which

any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See page E-1. 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a Yes X No. passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see page E-7 before completing this section. (b)<sub>Enter</sub> P<sub>for</sub> partnership; S for S corporation (C) Check if foreign partnership (d) Employer (e) Check if 28 (a) Name identification number Α SEE STATEMENT 19 В C D Passive Income and Loss Nonpassive Income and Loss (f) Passive loss allowed (g) Passive income (h) Nonpassive loss (i) Section 179 expense (i) Nonpassive income (attach Form 8582 if required) from Schedule K-1 deduction from Form 4562 from Schedule K-1 from Schedule K-1 Α В C D 627. 29a 352. 855,422. b  $6\overline{27}$ 30 Add columns (g) and (j) of line 29a 30 ...... Add columns (f), (h), and (i) of line 29b 855 77431 31 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below <855,147.> Part III Income or Loss From Estates and Trusts (b) Employer (a) Name identification number

33 SEE STATEMENT 20 A В Passive Income and Loss Nonpassive Income and Loss

	(c) Passive deduct (attach Form 8	ion or loss allowed 582 if required)	(d) Passive income (e) Deduction or loss from Schedule K-1			(f) Other income from Schedule K-1	
Α							
В							
34a	Totals			For any and the second of the			
b	Totals			1.	and the second second second second second second second second second second second		
35	Add columns (d) and (f) of	35					
36	Add columns (c) and (e) of	36	( 1.	, )			
37	Total estate and trust inco	37	<1.	. >			

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

(d) Taxable Income (net loss) from Schedules Q, line 1b (c) Excess inclusion from (b) Employer (e) Income from 38 (a) Name identification number Schedules Q, line 2c Schédules Q, line 3b 39

Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below Part V | Summary

	RAV VANDAGAN		
40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income of (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	<855,124.
12	Reconcillation of farming and fishing income. Enter your gross farming and fishing income		

reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see page E-8) 42 43 Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules 43

Schedule E (Form 1040) 2009

LIC HOLDINGS INC

I.D. NUMBER: 20-5290314 TYPE: S CORPORATION

ACTIVITY INFORMATION:

LIC HOLDINGS INC

TRADE OR BUSINESS - MATERIAL PARTICIPATION

ORDINARY INCOME (LOSS)

<855,422.>

TOTAL NONPASSIVE INCOME (LOSS)

<855,422.>

OTHER K-1 INFORMATION:

INTEREST INCOME CHARITABLE CONTRIBUTIONS INVESTMENT INCOME

NONDEDUCTIBLE EXPENSES

219,775. 2,096.

219,775.

5,016.

310.	
310.	
<3,709.> 95. 179. 112. <129.>	
	<3,452.> <1,374.> 4,652.
	<174.>
	335. <8.> 721. 1,269.
	17,484. 12,827. 10,473. 7,000. 174. 13,406. <5,791.> <334.> 2,365. 3.

INVESTMENT EXPENSE	5,975.
UNRECAPTURED SECTION 1250 GAIN	1.
NONDEDUCTIBLE EXPENSES	2.

2009 Income from Passtl	nroughs	
BERNSTEIN FAMILY INVESTMENTS LLLP I.D. NUMBER: 26-2124343 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN FAMILY INVESTMENTS LLLP		
OTHER PASSIVE ACTIVITY		
OTHER PORTFOLIO INCOME (LOSS)	311.	
TOTAL NONPASSIVE INCOME (LOSS)	311.	
ORDINARY INCOME (LOSS) RENTAL REAL ESTATE INCOME (LOSS) OTHER RENTAL INCOME (LOSS) SEC 59(E)(2) -	<3,709.> 95. 179. 112. <129.>	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582	· · · · · · · · · · · · · · · · · · ·	<3,452.> <1,375.> 4,653.
ALLOWABLE PASSIVE LOSS FROM FORM 8582	<del>-</del>	<174.>
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT ADJUSTED GAIN OR LOSS OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS UNRECAPTURED SECTION 1250 ADJUSTMENT AMT PAL CARRYOVER - SCHEDULE E		335. <8.> 120. 602. 1,268.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS) NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) SECTION 1256 CONTRACTS AND STRADDLES INVESTMENT INTEREST EXPENSE - SCHEDULE A CHARITABLE CONTRIBUTIONS DEDUCTIONS RELATED TO PORTFOLIO INCOME ROYALTY		17,485. 12,827. 10,473. 7,001. 174. 13,406. <5,790.> <334.> 2,365. 4. 5,971. 17.
ROYALTY EXPENSES/DEPLETION CANCELLATION OF DEBT		5. 507.

CREDITS	1.
INVESTMENT INCOME	30,329.
INVESTMENT EXPENSE	5,975.
UNRECAPTURED SECTION 1250 GAIN	2.
NONDEDUCTIBLE EXPENSES	2.

2009 Income from Passthroughs BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP ACTIVITY INFORMATION: BERNSTEIN HOLDINGS LLC OTHER PASSIVE ACTIVITY OTHER PORTFOLIO INCOME (LOSS) 3. 3. TOTAL NONPASSIVE INCOME (LOSS) ORDINARY INCOME (LOSS) <36.> RENTAL REAL ESTATE INCOME (LOSS) 1. OTHER RENTAL INCOME (LOSS) 2. 1. SEC 59(E)(2) -<1.> <33.> PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER <13.> DISALLOWED LOSS FROM FORM 8582 44. ALLOWABLE PASSIVE LOSS FROM FORM 8582 <2.> TAX PREFERENCE ITEMS: DEPRECIATION ADJUSTMENT 3. OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS 1. AMT PAL CARRYOVER - SCHEDULE E 13. OTHER K-1 INFORMATION: INTEREST INCOME 176. 134. ORDINARY DIVIDENDS **OUALIFIED DIVIDENDS** 103. TAX-EXEMPT INTEREST 115. SECTION 1231 GAIN (LOSS)

NET SHORT-TERM CAPITAL GAIN (LOSS)

SECTION 1256 CONTRACTS AND STRADDLES

INVESTMENT INTEREST EXPENSE - SCHEDULE A

DEDUCTIONS RELATED TO PORTFOLIO INCOME

NET LONG-TERM CAPITAL GAIN (LOSS)

INVESTMENT INCOME

SE EARNINGS

INVESTMENT EXPENSE

131.

<3.>

23.

59.

59.

310.

<36.>

<57.>

2009 Income from Passthroughs	
BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP	
ACTIVITY INFORMATION:	
BERNSTEIN HOLDINGS LLC	
OTHER PASSIVE ACTIVITY	
OTHER PORTFOLIO INCOME (LOSS)	3.
TOTAL NONPASSIVE INCOME (LOSS)	3.
ORDINARY INCOME (LOSS) RENTAL REAL ESTATE INCOME (LOSS) OTHER RENTAL INCOME (LOSS)	<37.> 1. 2. 1.
SEC 59(E)(2) -	<2.>
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582	<35.> <14.> 47.
ALLOWABLE PASSIVE LOSS FROM FORM 8582	<2.>
TAX PREFERENCE ITEMS:	
DEPRECIATION ADJUSTMENT ADJUSTED GAIN OR LOSS OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER - SCHEDULE E	4. 8. 2. 13.
OTHER K-1 INFORMATION:	
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS) NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) SECTION 1256 CONTRACTS AND STRADDLES INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME INVESTMENT INCOME INVESTMENT EXPENSE	175. 135. 103. 114. 2. 132. <56.> <4.> 24. 58. 310. 58.

TT/ SIMON L BERNSTEIN IRREV TR

I.D. NUMBER: 51-6600239 TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

TT/ SIMON L BERNSTEIN IRREV TR

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

INTEREST INCOME ORDINARY DIVIDENDS DEDUCTIONS RELATED TO PORTFOLIO INCOME 6,375.

1.

6.

ELIOT BERNSTEIN FAMILY TRUST I.D. NUMBER: 65-6477114

TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

ELIOT BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

#### OTHER K-1 INFORMATION:

INTEREST INCOME	2.
ORDINARY DIVIDENDS	1.
QUALIFIED DIVIDENDS	1.
NET SHORT-TERM CAPITAL GAIN (LOSS)	1.
NET LONG-TERM CAPITAL GAIN (LOSS)	<1.>
DEDUCTIONS RELATED TO PORTFOLIO INCOME	1.

ELIOT BERNSTEIN FAMILY TRUST I.D. NUMBER: 65-6477114 TYPE: ESTATE OR TRUST	
ACTIVITY INFORMATION:	
ELIOT BERNSTEIN FAMILY TRUST	
OTHER PASSIVE ACTIVITY	
TAX PREFERENCE ITEMS:	
BENEFICIARYS AMT ADJUSTMENT	1.
OTHER K-1 INFORMATION:	
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST	2. 1. 1.
NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS)	2. <1.>

DEDUCTIONS RELATED TO PORTFOLIO INCOME

<1.>

1.

JILL	IANTONI	FAMI	$\mathbf{L}\mathbf{Y}$	TRUST
I.D.	NUMBER:	65-6	477	115
TYPE:	ESTATE	OR	TRU	ST

#### ACTIVITY INFORMATION:

JILL IANTONI FAMILY TRUST

OTHER PASSIVE ACTIVITY

#### OTHER K-1 INFORMATION:

INTEREST INCOME	1.
ORDINARY DIVIDENDS	1.
QUALIFIED DIVIDENDS	1.
NET SHORT-TERM CAPITAL GAIN (LOSS)	1.

#### 2009 Income from Passthroughs JILL IANTONI FAMILY TRUST I.D. NUMBER: 65-6477115 TYPE: ESTATE OR TRUST ACTIVITY INFORMATION: JILL IANTONI FAMILY TRUST OTHER PASSIVE ACTIVITY INVESTMENT INTEREST EXPENSE <1.> TOTAL NONPASSIVE INCOME (LOSS) <1.> OTHER K-1 INFORMATION: INTEREST INCOME 2. ORDINARY DIVIDENDS 2. QUALIFIED DIVIDENDS 1. TAX-EXEMPT INTEREST 1. NET SHORT-TERM CAPITAL GAIN (LOSS) 1. NET LONG-TERM CAPITAL GAIN (LOSS) <1.>

DEDUCTIONS RELATED TO PORTFOLIO INCOME

1.

LISA S FRIEDSTEIN FAMILY TRUST I.D. NUMBER: 65-6477116

TYPE: ESTATE OR TRUST

#### ACTIVITY INFORMATION:

LISA S FRIEDSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

#### OTHER K-1 INFORMATION:

INTEREST INCOME	2.
ORDINARY DIVIDENDS	2.
QUALIFIED DIVIDENDS	1.
TAX-EXEMPT INTEREST	1.
NET SHORT-TERM CAPITAL GAIN (LOSS)	<1.>
NET LONG-TERM CAPITAL GAIN (LOSS)	2.
DEDUCTIONS RELATED TO PORTFOLIO INCOME	1.

LISA S FRIEDSTEIN FAMILY I.D. NUMBER: 65-6477116 TYPE: ESTATE OR TRUST	TRUST
ACTIVITY INFORMATION:	
LISA S FRIEDSTEIN FAMILY	TRUST
OTHER PASSIVE ACTIVITY	
OTHER K-1 INFORMATION:	

INTEREST INCOME	2.
ORDINARY DIVIDENDS	1.
QUALIFIED DIVIDENDS	1.
NET SHORT-TERM CAPITAL GAIN (LOSS)	1.

### SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

#### OTHER K-1 INFORMATION:

INTEREST INCOME	255,107.
ORDINARY DIVIDENDS	25,937.
QUALIFIED DIVIDENDS	21,158.
TAX-EXEMPT INTEREST	14,233.
SECTION 1231 GAIN (LOSS)	352.
NET SHORT-TERM CAPITAL GAIN (LOSS)	27,080.
NET LONG-TERM CAPITAL GAIN (LOSS)	<11,695.>
SECTION 1256 CONTRACTS AND STRADDLES	<675.>
INVESTMENT INTEREST EXPENSE - SCHEDULE A	4,777.
CHARITABLE CONTRIBUTIONS	2,103.
DEDUCTIONS RELATED TO PORTFOLIO INCOME	18,438.
ROYALTY	33.
ROYALTY EXPENSES/DEPLETION	9.
CANCELLATION OF DEBT	1,014.
CREDITS	1.
UNRECAPTURED SECTION 1250 GAIN	3.
NONDEDUCTIBLE EXPENSES	5,020.
SE EARNINGS	<36.>
INVESTMENT INTEREST EXPENSE:	
INVESTMENT INCOME	281,051.
INVESTMENT EXPENSE	12,067.
	,_,
TAX PREFERENCE ITEMS:	
DEPRECIATION ADJUSTMENT	677.
ADJUSTED GAIN OR LOSS	<8.>
BENEFICIARYS AMT ADJUSTMENT	1.
OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS	844.
AMT PAL CARRYOVER - SCHEDULE E	2,563.
UNRECAPTURED SECTION 1250 ADJUSTMENT	602.
OMFREST TOWN DROTTOM TOOK WINDODIMENT	002.

#### Foreign Tax Credit

(Individual, Estate, or Trust)

Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Name Identifying number as shown on page 1 of your tax return SIMON & SHIRLEY BERNSTEIN 371-32-5211 Use a separate Form 1116 for each category of income listed below. See Categories of Income beginning on page 3 of the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. Passive category income Section 901(i) income Lump-sum distributions General category income Certain income re-sourced by treaty f Resident of (name of country) > UNITED STATES Note; If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession. Taxable Income or Loss From Sources Outside the United States (for Category Checked Above) Foreign Country or U.S. Possession Total Α В С (Add cols. A, B, and C.) Enter the name of the foreign country or U.S. WARIOUS possession ..... 1a Gross income from sources within country shown above and of the type checked above: 5,866. 5.866. 1a b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) Deductions and losses (Caution: See pages 13 and 14 of the instructions): Expenses definitely related to the income on the ja (attach statement) SEE STATEMENT 22 2,608 Pro rata share of other deductions not definitely related: a Certain itemized deductions or standard deduction 67,621. b Other deductions (attach statement) 67,621. Add lines 3a and 3b 5,866. Gross foreign source income Gross income from all sources 1,024,879. .005724 Divide line 3d by line 3e 387. Multiply line 3c by line 3f Pro rata share of interest expense: a Home mortgage interest (use worksheet on page 14 434 of the instructions) Other interest expense Losses from foreign sources 3,429. Add lines 2, 3g, 4a, 4b, and 5 3,429. 7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 7 Part II Foreign Taxes Paid or Accrued SEE STATEMENT Credit is claimed Foreign taxes paid or accrued for taxes In foreign currency In U.S. dollars (you must check one) (r) Other (s) Total foreign (n) Other Taxes withheld at source on: Taxes withheld at source on: (h) \_\_Paid foreign taxes paid or foreign taxes paid or (i) X Accrue taxes paid or accrued (add cols. (o) through (r)) accrued accrued (j) Date paid or accrued (a) Dividends (D) Rents and royalties (q) Interest (k) Dividends (I) Rents and royalties (m) Interest 222. 222.

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 1116 (2009)

222.

c

3(0/0=0	Figuring the Credit			
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued		200	
	for the category of income checked above Part I	9 222.		
10	Carryback or carryover (attach detailed computation)	10	Property of the control of the contr	
11	Add lines 9 and 10	222.		
12	Reduction in foreign taxes	12		
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit		13	222.
	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the			
		2,437	20.00	
15	Adjustments to line 14	<2,437		
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21. However, if you are filing more than	16	Service of the servic	
17	Individuals: Enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 6). If you are a nonresident alien, enter the amount from Form 1040NR, line 38 (minus any amount on Form 8914, line 6). Estates and trusts: Enter your taxable income without the deduction for your exemption	17	Control of the contro	
	Caution: If you figured your tax using the lower rates on qualified dividends or capital ga		]	
18	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"		18	
19	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the art from Form 1040NR, line 41.	nount		
	Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 99	0-T,		
	lines 36 and 37	**************************************	19	]
	Caution: If you are completing line 19 for separate category e (lump-sum distributions), s	ee pg. 19 of the instructions.		
	Multiply line 19 by line 18 (maximum amount of credit)		20	
21	Enter the $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 three $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 three $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 three $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 three $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 three $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 three $$ smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 three $$ smaller of line $$ smaller of $$ smaller of line $$ smaller of line $$ smaller of line $$ smaller of line $$ smaller of line $$ smaller of line $$ smaller of $$ smaller of line $$ smaller of line $$ smaller of line $$ small			
	amount on line 27. Otherwise, complete the appropriate line in Part IV	<b>&gt;</b>	21	0.
	art IV Summary of Credits From Separate Parts III	·		
	Credit for taxes on passive category income			
	Credit for taxes on general category income		22002	
	Credit for taxes on certain Income re-sourced by treaty		5000	
	Credit for taxes on lump-sum distributions			
	Add lines 22 through 25			
	Enter the smaller of line 19 or line 26			
	Reduction of credit for international boycott operations		28	
29	Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 47	•		
	Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	<u></u>	29	0.

Form **1116** (2009)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

**General Business Credit** 

➤ See instructions. Attach to your tax return. OMB No. 1545-0895

#### SIMON & SHIRLEY BERNSTEIN

371-32-5211

Par	Current Year Credit		
	ortant: You may not be required to complete and file a separate credit form (shown in parentheses below) to cla t. For details, see the instructions.	aim the	
1a	nvestment credit (Form 3468, Part II only) (attach Form 3468)	1a	
	Velfare to work credit (only from partnerships, S corporations, estates, and trusts)		
	Credit for increasing research activities (Form 6765). (Individuals: see instructions)		
	ow-income housing credit (Form 8586, Part I only) (enter EIN if claiming this credit from a pass-through		
	ontity:)	1d	
e L	Disabled access credit (Form 8826) (do not enter more than \$5,000)	1e	
	Renewable electricity production credit (Form 8835)		
	ndian employment credit (Form 8845)		
	Orphan drug credit (Form 8820)		
	New markets credit (Form 8874) (enter EIN if claiming this credit from a pass-through		
	ontity:	1i	
i	Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	1ì	
	Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming	····   -' <del>'</del>	
	his credit from a pass-through entity: ))	1k	
	Biodiesel and renewable diesel fuels credit (attach Form 8864)		
	ow sulfur diesel fuel production credit (Form 8896)		
	Distilled spirits credit (Form 8906)		1.
U 1	Nonconventional source fuel credit (Form 8907)	10	
p E	Energy efficient home credit (Form 8908)	1p	<del></del>
	Energy efficient appliance credit (Form 8909)	1q	
	Alternative motor vehicle credit (Form 8910) (enter EIN if claiming this credit from a pass-through		
	entity:)		
	Alternative fuel vehicle refueling property credit (Form 8911)		
	Credits for affected Midwestern disaster area employers (Form 5884-A)		
u M	Mine rescue team training credit (Form 8923)	, 1u	
v /	Agricultural chemicals security credit (Form 8931)	1v	
w (	Credit for employer differential wage payments (Form 8932)	1w	
х (	Carbon dioxide sequestration credit (Form 8933)	1x	
	Qualified plug-in electric drive motor vehicle credit (Form 8936)		
	Qualified plug-in electric vehicle credit (Form 8834, Part I only)	1z	
aa (	Credit for contributions to selected community development corporations (only from partnerships		
	and S corporations)		
bb (	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb	
2 /	Add lines 1a through 1bb	2	1
3 F	Passive activity credits included on line 2 (see instructions)	3	1
4 5	Subtract line 3 from line 2	4	0
5 F	Passive activity credits allowed for 2009 (see instructions)	5	0
6 (	Carryforward of general business credit to 2009. See instructions for the schedule to attach	6	
7 (	Carryback of general business credit from 2010 (see instructions)	7	
			0
8 (	Current year credit. Add lines 4 through 7 For Paperwork Reduction Act Notice, see instructions.	8	

914401 01-20-10

30

CUR 00194

Part II Allowable Credit		
9 Regular tax before credits:	de constant de la con	
• Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line	41	
<ul> <li>Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the</li> </ul>	The authors of great of AT Committee of the Committee of	_
applicable line of your return	9	0.
<ul> <li>Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule</li> </ul>		
lines 1a and 1b, or the amount from the applicable line of your return	Specimin & School of The Control of	
	Source conditions and section of the	
10 Alternative minimum tax:	Smith of the Control	
● individuals. Enter the amount from Form 6251, line 36	y common particular common com	
Corporations. Enter the amount from Form 4626, line 14	} 10	
<ul> <li>Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56</li> </ul>	The county of a planty or any and a planty of a planty or any and a planty or any any and a planty or any any any any any any any any any any	
	The control following or or of the control following or of	
11 Add lines 9 and 10	11	
	methy data of displayed, and so good of the state of the state of the state of the state of the state of the state of the state of the state of the	
12a Foreign tax credit	12a	
b Credits from Form 1040, lines 48 through 52 (or Form 1040NR, lines 45	Emmily Committee on Call Parties of American Call Call Parties of Call Call Call Call Call Call Call Cal	
through 48); Form 8859, line 11; Form 8834, lines 22 and 29; Form 8910,	Ballion Chan Park Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Chan Ballion Chan Ballion Chan Chan Ballion Cha	
line 21; Form 8911, line 23; Form 8936, line 14; and Schedule R, line 24	· · · · · · · · · · · · · · · · · · ·	
c Add lines 12a and 12b	12c	
<ul> <li>Net income tax. Subtract line 12c from line 11. If zero, skip lines 14 through 1</li> <li>Net regular tax. Subtract line 12c from line 9. If zero or less, enter 0.</li> </ul>	- Industry Configuration Configuration (Inc.) The Configuration Configur	
17 Net regular tax. Cabillate into 120 non-into 5. il 2010 of 1000, officer o	Manufacture and of special spe	
15 Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions	15 Facility of the control of the co	
	Company And Market Annual Company And Annual Company And Annual Company And Annual Company And Annual Company A	
16 Tentative minimum tax:	Control of the Audit of the Control	
● Individuals. Enter the amount from Form 6251, line 34		
Corporations. Enter the amount from Form 4626, line 12	0 • hamself to be a control of the c	
<ul> <li>Estates and trusts. Enter the amount from Schedule I</li> </ul>	pages detailed for the continue of the continu	
(Form 1041), line 54	Proceedings of the Control of the Co	0
17 Enter the greater of line 15 or line 16		0.
18a Subtract line 17 from line 13. If zero or less, enter -0-	18a	0.
b For a corporation electing to accelerate the research credit, enter the bonus of		
attributable to the research credit. (see instructions)		
c Add lines 18a and 18b	18c	
19a Enter the smaller of line 8 or line 18c	19a	0.
C corporations: See the line 19a instructions if there has been an ownership	change, acquisition,	
or reorganization.	See and the second of the seco	
b Enter the smaller of line 8 or line 18a. If you made an entry on line 18b, go to	line 19c; otherwise,	
skip line 19c	401	0.
c Subtract line 19b from line 19a. This is the refundable amount for a corporation		
the research credit. Include this amount on line 32g of Form 1120 (or the app	licable line of your return)19c	

Form **3800** (2009)

#### Part II Allowable Credit (Continued)

Not	e. If you are not filing Form 8844, skip lines 20 through 24 and enter -0- on line 25.			
	Multiply line 16 by 75%		20	
21	Enter the greater of line 15 or line 20		21	
22	Subtract line 21 from line 13. If zero or less, enter -0-	·	22	
23	Subtract line 19b from line 22. If zero or less, enter -0-			<u></u>
24	Enter the amount from Form 8844, line 10 or line 12			
25	Empowerment zone and renewal community employment credit allowed. Enter the si		Processing on the comment of the com	
	or line 24			0.
26	Subtract line 15 from line 13. If zero or less, enter -0-		26	0.
27	Add lines 19b and 25			
28	Subtract line 27 from line 26. If zero or less, enter -0-			0.
29 a	Enter the investment credit from Form 3468, Part III, line 19 (attach Form 3468)	29a	Bings of pages to the A of a first former for a page from the A of a first contract of a first the A of a first former for a page from the A of a first former for a page for the a first former for a first former for a first contract of a first former for a first contract of a first former former for a first contract of a first former f	
b	Enter the work opportunity credit from Form 5884, line 10 or		Control of the Contro	
	line 12	29b	or in course of the comment of the course of	
C	Enter the alcohol and cellulosic biofuel fuels credit from Form 6478, line 14		challed and an indicated an indicated and an indicated and an indicated an indicated and an indicated an indicated an indicated and an indicated an in	
	or line 16	29c	All the second of the second o	
d	Enter the low-income housing credit from Form 8586, Part II, line 18		Share was designed as the con- pression of the contract of the con- tract of the contract of the con- tract of the contract of the con- pression of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract of the contract of the con- tract	
	or line 20	29d	Beginning and the control of the con	
е	Enter the applicable part of the amount of the renewable electricity, refined coal,		Commission Date Project Only Commission Date Project Only Commission Commission Commission Commission Commission Commission Commission Commission Commission Commission Commission Commission Commission Commission Commission Commissi	
	and Indian coal production credit from Form 8835, Part II, line 36 or line 38	29e	mill, have been a second of the control of the cont	
f	Enter the credit for employer social security and Medicare taxes		Great and the control of the control	
	paid on certain employee tips from Form 8846, line 12	29f	Control of the Contro	
9	Enter the qualified railroad track maintenance credit from Form		The state of the s	
	8900, line 12	29g	The state of the s	
30	Add lines 29a through 29g	******	30	
31	Enter the smaller of line 28 or line 30	***********************	31	0.
32	Credit allowed for the current year. Add lines 27 and 31.		Big of the control of	
	Report the amount from line 32 (if smaller than the sum of lines 8, 24, and 30, see ins	structions) as	Processing Control of	
	indicated below or on the applicable line of your return:		Comment of processing of the comment	
	◆ Individuals. Form 1040, line 53 or Form 1040NR, line 49		Bill have in the individual of the st. Space companies on the final of the state o	
	◆ Corporations. Form 1120, Schedule J, line 5c		32	0.
	• Estates and trusts. Form 1041, Schedule G, line 2c			

Form **3800** (2009)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

#### Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

Attach to your tax return.

See separate instructions.

► Attach to your tax return.

SI	MON & SHIRLEY BERNS	STEIN						371-32-5211
	nter the gross proceeds from sales o							
(0	or substitute statement) that you are in rt I Sales or Exchanges	ncluding on line :	2, 10, or 20				1	
Pa	rt I Sales or Exchanges	of Property	Used in a Tr	ade or Busine	ss and Involu	ntary Cor	versi	ons From
	Other Than Casualt	y or Ineπ-ivid	ost Property	Held More In				· · · · · · · · · · · · · · · · · · ·
	(a) Description	(b) Date acquired	(C) Date sold	(d) Gross sales	(e) Depreciation allowed or	(f) Cost or basis, plu		(g) Gain or (loss)
	of property	(mo., day, yr.)	(mo., day, yr.)	price	allowable since	improvement expense of	sand	Subtract (f) from the sum of (d) and (e)
2	O O O O O O O O O O O O O O O O O O O				acquisition	expense of	Sale	
SE	E STATEMENT 23							352
		<u> </u>						
			<u> </u>					
							,	
3	Gain, if any, from Form 4684, line 43	3					3	<del></del>
4	Section 1231 gain from installment	sales from Form	6252, line 26 or	37	.,		4	
5	Section 1231 gain or (loss) from like	-kind exchanges	from Form 882	4			5	
6	Gain, if any, from line 32, from other						6	2.50
7	Combine lines 2 through 6. Enter th						_7	352
	Partnerships (except electing larginstructions for Form 1065, Schedubelow.	ge partnerships) ile K, line 10, or F	and S corpora form 1120S, Sch	<b>tions.</b> Report the g nedule K, line 9. Sk	gain or (loss) follow kip lines 8, 9, 11, a	ing the nd 12	Big and the big before the big befor	
	Individuals, partners, S corporation from line 7 on line 11 below and skill 1231 losses, or they were recapture the Schedule D filed with your return	p lines 8 and 9. If ed in an earlier ye	f line 7 is a gain ear, enter the ga	and you did not ha in from line 7 as a	ave any prior year	section	Company of the Compan	
8	8 Nonrecaptured net section 1231 losses from prior years (see instructions)						В	
9	Subtract line 8 from line 7. If zero or							<del></del>
	line 9 is more than zero, enter the a		-	-				
	capital gain on the Schedule D filed			_		-	9	
- Da	rt II Ordinary Gains and			,		150,000		
1.9	Ordinary Gams and	LUSSES (See In	istructions)					
10	Ordinary gains and losses not inclu	ded on lines 11 t	hrough 16 (inclu	ide property held <sup>-</sup>	year or less):			
JI:	LL IANTONI FAMILY							
ITR	UST						·	0
11	Loss, if any, from line 7		************************				11	
12	Gain, if any, from line 7 or amount f	rom iine 8, if appl	licable				12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, I	ines 35 and 42a					14	<del></del>
15	Ordinary gain from installment sales	s from Form 6252	2, line 25 or 36				15	
16	Ordinary gain or (loss) from like-kind						16	
17	Combine lines 10 through 16						17	•
18	For all except individual returns, en	ter the amount fr	om line 17 on th	e appropriate line	of your return and	skip lines	200	
	a and b below. For individual return				,	•	designation are under the control of	
а	If the loss on line 11 includes a loss	•			nart of the lose he	re Enter		
u	the part of the loss from income-pro							
	from property used as an employee				•			
							18a	A CONTRACTOR OF THE PROPERTY O
b								
-	Form 1040 line 14	•	,					

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2009)

19 (a) Description of section 1245, 1250, 1252, 1254,	or 1 <b>25</b> 5	property:			(b) Date acquired (mo., day, yr.)	d T	(c) Date sold (mo., day, yr.)
Α							
В	•						
С							
D							
These columns relate to the properties on						_	
lines 19A through 19D.	<b>&gt;</b>	Property A	Property	в	Property C	1	Property D
Gross sales price (Note: See line 1 before completing.)	20		<del></del>				
21 Cost or other basis plus expense of sale	21				· · · · · · · · · · · · · · · · · · ·	_	
2 Depreciation (or depletion) allowed or allowable	22						
23 Adjusted basis. Subtract line 22 from line 21	23						
24 Total gain. Subtract line 23 from line 20	24						
5 If section 1245 property:	<del>  -  </del>						
a Depreciation allowed or allowable from line 22	25a						
b Enter the smaller of line 24 or 25a	25b		<del></del>			-	
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.	200						
a Additional depreciation after 1975 (see instructions) $\dots$	26a						
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b			·	······································	_	
c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f	26g						
17 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).							
a Soil, water, and land clearing expenses      b Line 27a multiplied by applicable percentage	27a						
	27b		į				
c Enter the smaller of line 24 or 27b	27c						<del></del>
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a						
b Enter the smaller of line 24 or 28a	28b						
<ul> <li>29 If section 1255 property:</li> <li>a Applicable percentage of payments excluded from income under section 126 (see instructions)</li> </ul>	29a						
b Enter the smaller of line 24 or 29a (see instructions)	29b						
		A.I	P. COLL C.			•	
Summary of Part III Gains. Complete property	columns	A through D through	n line 29b before	going	to line 30.		
Total gains for all properties. Add property column	s A throu	ıgh D, <b>li</b> ne 24	1470.01010101010101000			30	
Add property columns A through D, lines 25b, 26g		-				31	
Subtract line 31 from line 30. Enter the portion from		•	•		•	_	
from other than casualty or theft on Form 4797, lin Part V Recapture Amounts Under Secti	e ថ ons 17	9 and 280F(b)(2	) When Busi	ness	Use Drops to	32   50%	6 or Less
(see instructions)							
					(a) Section 179		(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation all	owable i	n prior years		33			
Recomputed depreciation (see instructions)				34			•
35 Recapture amount. Subtract line 34 from line 33. S				35			

Department of the Treasury Internal Revenue Service

#### Alternative Minimum Tax - Individuals

Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

Attachment Sequence No. 32 Name(s) shown on Form 1040 or Form 1040NR Your social security number SIMON & SHIRLEY BERNSTEIN 371 32 5211 Part | Alternative Minimum Taxable Income 1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 6), and go to line 2. Otherwise, <720,983.> enter the amount from Form 1040, line 38 (minus any amount on Form 8914, line 6), and go to line 7. (If less than zero, enter as a negative amount.) 2 Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, Or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-2 3 Taxes from Schedule A (Form 1040), lines 5, 6, and 8 40,982. 3 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions... 4 5 Miscellaneous deductions from Schedule A (Form 1040), line 27 18,437. 5 6 If Form 1040, line 38, is over \$166,800 (over \$83,400 if married filing separately), enter the amount from line 11 of the Itemized Deductions Worksheet on page A-11 of the instructions for Schedule A (Form 1040) 7 If filling Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 20 from that schedule 7 Tax refund from Form 1040, line 10 or line 21 8 Investment interest expense (difference between regular tax and AMT) 9 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 Alternative tax net operating loss deduction \_\_\_\_\_ 12 Interest from specified private activity bonds exempt from the regular tax SEE STATEMENT 25 601. 13 Qualified small business stock (7% of gain excluded under section 1202)\_\_\_\_\_ Exercise of incentive stock options (excess of AMT income over regular tax income) 15 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 17 17 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 Ō. 20 Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 24 20 21 Loss limitations (difference between AMT and regular tax income or loss) 21 22 Circulation costs (difference between regular tax and AMT) 23 Long-term contracts (difference between AMT and regular tax income) 23 24 Mining costs (difference between regular tax and AMT) 24 25 Research and experimental costs (difference between regular tax and AMT) 25 26 Income from certain installment sales before January 1, 1987 26 27 Intangible drilling costs preference 27 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 <660,962.> 29 is more than \$216,900, see instructions.) 29 Part | Alternative Minimum Tax (AMT) Exemption. (If you were under age 24 at the end of 2009, see instructions.) AND line 29 is not over ... IF your filing status is THEN enter on line 30 Single or head of household ..... ..... \$112,500 ..... \$46,700 Married filing jointly or qualifying widow(er) 150,000
Married filing separately 75,000 70,950 70,950. 30 35,475 If line 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 34 and 36 and skip the rest of Part II 0. 31 32 • If you are filing Form 2555 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 dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured 0. 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 filling separately) from the result. 33 Alternative minimum tax foreign tax credit (see instructions) 34 Tentative minimum tax. Subtract line 33 from line 32 0. 34 35 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J 35 Ō. 36 AMT. Subtract line 35 from line 34. If zero or less, enter -0-. Enter here and on Form 1040, line 45 36

油基	art 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,			
	line 3 of the worksheet in the instructions		37	<del> </del>
38	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax		Control of the contro	
	Worksheet in the instructions for Form 1040, line 44, or the amount from		And a contract of the Contract	
	line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for		at the control of the	
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if		Description of the control of the co	
	necessary) (see the instructions). If you are filing Form 2555 or 2555-EZ,		gar A Notice in the Notice in	
	see instructions for the amount to enter	38	Ethnod Christian C. Aven S.  2. 1 Special Christian Christian Christian  2. 1 Special Christian Christian Christian  2. 1 Special Christian Christian  2. 1 Special Christian Christian  2. 1 Special Christian Christian  2. 2 Special Christian Christian  2. 2 Special Chri	
39	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the		A CONTRACT OF THE STATE OF THE	
	AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ,		The second secon	
	see instructions for the amount to enter	39	Control of the contro	
40	If you did not complete a Schedule D Tax Worksheet for the regular tax or the		Comment of the Commen	
	AMT, enter the amount from line 38. Otherwise, add lines 38 and 39, and enter		Burning Controllation of the c	
	the smaller of that result or the amount from line 10 of the Schedule D Tax		Control Contro	
	Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555		Comment of the Commen	
	or 2555-EZ, see instructions for the amount to enter	40	Service of the servic	
	Enter the smaller of line 37 or line 40		41	
	Subtract line 41 from line 37		42	
43	If line 42 is \$175,000 or less (\$87,500 or less if married filing separately), multiply I			
	Otherwise, multiply line 42 by 28% (.28) and subtract \$3,500 (\$1,750 if married fili	- , -,		
	the result		• 43	
44	Enter:	1 1	Section Section of the Control of th	
	• \$67,900 if married filing jointly or qualifying widow(er),		Section Control Contro	
	• \$33,950 if single or married filing separately, or	44	Section Control Contro	
	• \$45,500 if head of household.		is an experience of the Conference of the Confer	
45	Enter the amount from line 7 of the Qualified Dividends and Capital Gain		Go and the specific of the specified of	
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from	1 1	Service of the servic	
	line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for		SE SAMPLE SELECTION CONTROL CO	
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If	1	Grant and a special property of the control of the	
	you did not complete either worksheet for the regular tax, enter -0-	45	An of the contract of the cont	
			The second secon	
46	Subtract line 45 from line 44. If zero or less, enter -0-	46	And continues of c	
			And the second of the second o	
47	Enter the smaller of line 37 or line 38	47	Disconnection a seek region 2 in proper particular particular particular particular proper particular particul	
			The second of th	
48	Enter the smaller of line 46 or line 47	48	Comment of the commen	
	0.11 18 40 ( 1) 47	40	Comment of the Commen	
49	Subtract line 48 from line 47	49	(in the production of a produc	
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50	Multiply line 49 by 15% (.15)	***************************************	> 50	
	If line 39 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go	o to line 51.	St. An and a state of the state	
	Dulchung time 47 forms the 44	51	Open Security Accessed in the Control of the Contro	
51	Subtract line 47 from line 41	ווסון	San de plantante, que primo valore, de projector financia en contrato a de projector financia en contrato a de projector financia de projector de projector de de projector de projector de projector de projector de projector de de projector de projector de projector de projector de projector de de projector de projec	
E0	Multiply line E1 by 950/ (QE)		F0	
52	Multiply line 51 by 25% (.25)	***************************************	• 52	
<b>5</b> 0	Add lines 40 CO and EQ		53	
53	Add lines 43, 50, and 52	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
<b>E</b> 4	If line 37 is \$175,000 or less (\$87,500 or less if married filing separately), multiply	line 27 by 26% ( 26)		
J4	Otherwise, multiply line 37 by 28% (.28) and subtract \$3,500 (\$1,750 if married file			
			54	
	the result			
GE.	Enter the smaller of line 53 or line 54 here and on line 32. If you are filling Form 25	555 or 2555.E7 do not o	nter	
J	this amount on line 32. Instead, enter it on line 4 of the worksheet in the instruction			
_	The amount of the observat, enter it of the 40 the worksheet in the histricia	×10 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		m <b>6251</b> (2009)
			101	(2000)

## Form 6251 - AMT Charitable Contributions Worksheet

AGi <572,808.> 50% of AGI <286,404.>

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Charita	ble contribu	tions adjustment	to Form 6251, line 27					

		ALTERNA	ATIVE MINIMUM TAX RECONCILIATION REPORT	ECONCILIATION REPO	RT		
Name(s)							Social Security Number
SIMON	N & SHIRLEY BERNSTEIN						371-32-5211
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
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		ALTERNA	ATIVE MINIMUM TAX RECONCILIATION REPORT	CONCILIA I DIN NELOI	Ī		
Name(s)							Social Security Number
SIMON	N & SHIRLEY BERNSTEIN						371-32-5211
T E					Adjustment		
Name	Description	Income	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251, Line 21	Form 6251 Other Adjustment
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		ALTERNA	ATIVE MINIMUM TAX RECONCILIATION REPORT	CONCILIATION REPOR	3T		
Name(s)							Social Security Number
SIMON	I & SHIRLEY BERNSTEIN						371-32-5211
For					Adjustment		
Name	Description	Іпсоте	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251, Line 21	Form 6251 Other Adjustment
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#### ALTERNATIVE MINIMUM TAX **Foreign Tax Credit**

OMB No. 1545-0121

(Individual, Estate, or Trust)

Attach to Form 1040, 1040NR, 1041, or 990-T. Department of the Treasury Internal Revenue Service (99) Name identifying number as shown on page 1 of your tax return SIMON & SHIRLEY BERNSTEIN 371-32-5211 Use a separate Form 1116 for each category of income listed below. See Categories of Income beginning on page 3 of the Instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. X Passive category income Section 901(i) income e Lump-sum distributions General category income Certain income re-sourced by treaty f Resident of (name of country) > UNITED STATES Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession. Taxable Income or Loss From Sources Outside the United States (for Category Checked Above) Foreign Country or U.S. Possession Total Α В (Add cols. A, B, and C.) Enter the name of the foreign country or U.S. VARIOUS possession Gross income from sources within country shown above and of the type checked above: 5,866 5,866. 1a b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) \_\_\_\_\_ > Deductions and losses (Caution: See pages 13 and 14 of the instructions): Expenses definitely related to the income on line 1a 2,608. (attach statement) Pro rata share of other deductions not definitely related: 8,202. a Certain itemized deductions or standard deduction Other deductions (attach statement) 8,202. c Add lines 3a and 3b Gross foreign source income 5,866. 1,024,879. Gross income from all sources .005724 Divide line 3d by line 3e Multiply line 3c by line 3f Pro rata share of interest expense: a Home mortgage interest (use worksheet on page 14 434. of the instructions) **b** Other interest expense Losses from foreign sources 3,089 Add lines 2, 3g, 4a, 4b, and 5 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 Part II Foreign Taxes Paid or Accrued Credit is claimed Foreign taxes paid or accrued for taxes In foreign currency In U.S. dollars (you must check one) (r) Other (n) Other (s) Total foreign taxes paid or

Taxes withheld at source on; Taxes withheld at source on: (h) Paid foreign foreign taxes paid or taxes paid or accrued (add cols. (i) X Accrue accrued accrued (o) through (r)) (k) Dividends (j) Date paid or accrued (0) Dividends (p) Rents and royalties (m) Interest (q) Interest

В С 8 Add lines A through C, column (s). Enter the total here and on line 9, page 2

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 1116 (2009)

222.

222.

222.

Pa	irtill Figuring the Credit			
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued	-	270(77)	
	for the category of income checked above Part I	9 222.	200 / C	
10	Carryback or carryover (attach detailed computation)	10	200000	
11	Add lines 9 and 10	11 222.	2000000	
12	Reduction in foreign taxes	12	##1 V W W	
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit		13	222.
	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the			
	United States (before adjustments) for the category of income checked above Part I	2,777.		
			2000	
		<2,777.	>	
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income.			
	(If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21. However, if you are filing more than			
	one Form 1116, you must complete line 19.)	16		
	Individuals: Enter the amount from Form 1040, line 41 (minus any amount on Form	•		
17	8914, line 6). If you are a nonresident alien, enter the amount from Form 1040NR.			
	line 38 (minus any amount on Form 8914, line 6). Estates and trusts: Enter your taxable			
	income without the deduction for your exemption	17	100 A 100 A	
	Caution: If you figured your tax using the lower rates on qualified dividends or capital gain			
18	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"		18	
	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the am		П	
	from Form 1040NR, line 41.			
	Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990	)-T,		
	lines 36 and 37	•	19	
	Caution: If you are completing line 19 for separate category e (lump-sum distributions), se			
20	Multiply line 19 by line 18 (maximum amount of credit)		20	
	Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 thro		П	
	amount on line 27. Otherwise, complete the appropriate line in Part IV	<b>&gt;</b>	21	0.
P	art IV Summary of Credits From Separate Parts III			
22	Credit for taxes on passive category income	22		
	Credit for taxes on general category income			
	Credit for taxes on certain income re-sourced by treaty		20079	
25	Credit for taxes on lump-sum distributions	25		
26	Add lines 22 through 25	*************	26	
	Enter the smaller of line 19 or line 26		27	0.
	Reduction of credit for international boycott operations		28	
	Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 47			
	Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	<b>_</b>	29	0.

Form **1116** (2009)

# 4952

Department of the Treasury Internal Revenue Service

# **Investment Interest Expense Deduction**

Attach to your tax return.

OMB No. 1545-0191

Identifying number

Name(s) shown on return

SI	MON & SHIRLEY BERNSTEIN		371-32-5211
Pa	Total Investment Interest Expense		
1	Investment interest expense paid or accrued in 2009 (see instructions) SEE STATEMENT 27	1	4,778.
2	Disallowed investment interest expense from 2008 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	4,778.
Pa	TIII Net Investment Income	1.5000000	
4a b	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)  STMT 28 4a 284,335  Qualified dividends included on line 4a 4b 21,158	Para A version no Anna A version no Property of the Control Anna A version no Anna A version no Anna A version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no A version no a version no a version no A version no a version no a version no A version no a version no a version no a version no a version no a version no a version no a version no a version no a version no a version no a version no a version no a version	
¢	Subtract line 4b from line 4a	4c	263,177.
d	Net gain from the disposition of property held for investment 4d		
е	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	The state of the s	The state of the s
f	Subtract line 4e from line 4d	4f	
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)	4g	]
h	Investment income. Add lines 4c, 4f, and 4g	4h	263,177.
5	Investment expenses (see instructions) SEE STATEMENT 29	5	18,447.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6	244,730.
Pa	Investment Interest Expense Deduction		
7	Disallowed investment interest expense to be carried forward to 2010. Subtract line 6 from line 3.  If zero or less, enter -0-	7	0.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	4,778.

Form **4952** 

Department of the Treasury Internal Revenue Service (99)

## **Investment Interest Expense Deduction**

Attach to your tax return.

OMB No. 1545-0191 2009

Attachment Sequence No. 51

Interna	Hevenue Service (99)		Sequence No. 51
Nam	e(s) shown on return		Identifying number
SI	MON & SHIRLEY BERNSTEIN	Ì	371-32-5211
Pai	rt Total Investment Interest Expense		
1	Investment interest expense paid or accrued in 2009 (see instructions) SEE STATEMENT 31	1	4,778.
2	Disallowed investment interest expense from 2008 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	4,778.
Pa	Till Net Investment Income		
4a b	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)  4a 284,936.  Qualified dividends included on line 4a 4b 21,158.		
С	Subtract line 4b from line 4a	4c	263,778.
d	Net gain from the disposition of property held for investment 4d	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	odes and a second
е	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)  4e	Security of the security of th	And And And And And And And And And And
f	Subtract line 4e from line 4d	4f	
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)	4g	
h	Investment income. Add lines 4c, 4f, and 4g	4h	263,778.
5	Investment expenses (see instructions)	5	10.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6	263,768.
FO	investment interest expense beduction	Γ	
7	Disallowed investment interest expense to be carried forward to 2010. Subtract line 6 from line 3.  If zero or less, enter -0-	7	0.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	4,778.
	REGULAR FORM 4952, LINE 8 LESS RECOMPUTED FORM 4952, LINE 8 INTEREST ADJUSTMENT - FORM 6251, LINE 9		4,778. 4,778.

### Form **8621**

(Rev. December 2004) Department of the Treasury Internal Revenue Service

# Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund

OMB No. 1545-1002

Attachment

nternal Revenue Service 5ee separate instruction	JII8	Sequence No. 07
Name of shareholder	Identifying number (see page	2 of instructions)
SIMON BERNSTEIN	371-32-5211	
Number, street, and room or suite no. (If a P.O. box, see page 2 of instructions.)		2009 or other tax year beginning
7020 LIONS HEAD LANE		nd ending ,
City or town, state, and ZIP code or country	, , ,	ite orioning ,
BOCA RATON, FL 33496		
Check type of shareholder filing the return: 🔼 Individual 🔃 Corporation 🔛 Partne	ership S Corporation	Nongrantor Trust Estate
Name of passive foreign investment company (PFIC) or qualified electing fund (QEF)	Employer identification numb	ber (if any)
HELICON RE HOLDINGS LTD		
C/O OLYMPUS REINSURANCE COMPANY		
Address (Enter number, street, city or town, and country.)	Tax year of company or fund:	calendar year 2009 or other
CUMBERLAND HOUSE, VICTORIA	tax year beginning	, and
HAMILTON HM 1 BD	ending	, .
Part   Elections (See Instructions.)	0 055 0 4	
A Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC		
B Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a	UEF, elect to recognize gain on the	deemed sale
of my interest in the PFIC. Enter gain or loss on line 10f of Part IV.  C Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year	on a OFF that is a controlled foreign	a comparation (OFO), class to tunat
Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year an amount equal to my share of the post-1986 earnings and profits of the CFC as an	=	• • •
D Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to exte		
earnings and profits of the QEF until this election is terminated. Complete lines 3a t		
Note: If any portion of line 1a or line 2a of Part II is includible under section 5		
1294(c) and 1294(f) and the related regulations for events that terminate thi		5 5,550,500,500,500
E Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former P		9(e) applies, elect to treat
as an excess distribution the gain recognized on the deemed sale of my interest in the		• • • • •
and profits deemed distributed, on the last day of its last tax year as a PFIC under sec		_
F Election to Mark-to-Market PFIC Stock. i, a shareholder of a PFIC, elect to mark-to-ri	market the PFIC stock that is market	table within the
meaning of section 1296(e). Complete Part III.		
Part II Income From a Qualified Electing Fund (QEF). All QEF sha	reholders complete lines 1a through	h 2c. If you are making
Election D, also complete lines 3a through 4c. (See page 5 of instructions.)		Limited
1 a Enter your pro rata share of the ordinary earnings of the QEF	1a	State State
b Enter the portion of line 1a that is included in income under		Control Contro
section 551 or 951 or that may be excluded under section 1293(g)	1b	Section Control Contro
c Subtract line 1b from line 1a. Enter this amount on your tax return as dividend income	1 1	. 1c
2 a Enter your pro rata share of the total net capital gain of the QEF	2a	Effective designs, could be a server of the
b Enter the portion of line 2a that is included in income under	106	and in Section 2 and American Control of the Control of the Contr
section 551 or 951 or that may be excluded under section 1293(g)  c Subtract line 2b from line 2a. This amount is a net long-term capital gain. Enter this amount		Service and Servic
in Part II of the Schedule D used for your income tax return. (See instructions.)		20
3 a Add lines 1c and 2c		
b Enter the total amount of cash and the fair market value of other property distributed		Special Control of Con
or deemed distributed to you during the tax year of the QEF. (See instructions.)	3b	State Assessment of the first of the control of the
c Enter the portion of line 3a not already included in line 3b that is		and the second of the second o
attributable to shares in the QEF that you disposed of, pledged,		The control of the co
or otherwise transferred during the tax year	3c	Sign of the grant
d Add lines 3b and 3c		3d
e Subtract line 3d from line 3a, and enter the difference (if zero or less, enter amount in brack	kets)	3e
Important: If line 3e is greater than zero, and no portion of line 1a or 2a is includib	,	Control of the contro
under section 551 or 951, you may make Election D with respect to the amount		The specific of the specific o
4 a Enter the total tax for the tax year (See instructions.)	4a	approximation of deficient of the control of the co
b Enter the total tax for the tax year determined without regard to		The companion of control of the cont
the amount entered on line 3e	4b	graves with the first of the fi
c Subtract line 4b from line 4a. This is the deferred tax, the time for payment of which is		
extended by making Election D. See instructions		.   4c

LHA 912611 04-24-09

Form 8621 (Rev. 12-2004)

8 Accrued interest due with
this return
9 Deferred tax outstanding after
partial termination of election ....
10 Interest accrued after partial
termination of election .....

# Form **6781**Department of the Treasury Internal Revenue Service Name(s) shown on tax return

Gains and Losses From Section 1256 Contracts and Straddles

Attach to your tax return.

2009
Attachment

Mame(s) shown on tax return													Ide	nunying	number
SIMON & SHIR	LEY	<u>′</u> В	ER	NSTE	ľN									371	-32-5211
Check all applicable box			_	Mixed st				_			Mixed strac				
(see instructions).  Part Section 1		B L	ntra			ddle identification	n elect	tion		) <u> </u>	Net section	1256 c	ontrac	ts loss	s election
AND THE CONTROL OF TH						***************************************					1				<del></del>
			(a)	I Identifica	ation of a	account					(b) (	Loss)			(c) Gain
1 SEE STATE	MEN	1 <u>T</u>	32	ı					***************************************						
Add the	- 12	4 5	t.	(1-)							/		75.)	<del></del>	
<ul><li>2 Add the amounts or</li><li>3 Net gain or (loss). C</li></ul>	1 line ombi	ni F il odi	COIL	a (d) enmit	and (c) .		••••••			. 2	<u> </u>		3	<b></b>	<675 <b>.</b> :
4 Form 1099-B adjust	ment ment	ne s	ne z od ir	, columns etruction	s (D) and e and at	r(C) tach schadula			•••••				4	<b></b>	7073.
5 Combine lines 3 and													5		<675.
Note: If line 5 shows													(4 /AND ) 1844 5 1 (4 /AND ) 1844 5 1 (4 /AND ) 1844		
instructions.			, -	,		ga v.,	. , . , .		inpo ai		poraliono, o				
6 If you have a net se	ction	125	i6 cc	ontracts k	ss and	checked box D a	bove,	enter :	the am	ount of	loss to be				
carried back. Enter													6		
7 Combine lines 5 and	d6												7	<u> </u>	<675 <b>.</b> :
8 Short-term capital													_		<270.
of Schedule D (see													_8_	<del>                                     </del>	<470 •
9 Long-term capital of Schedule D (see													9		<405.
Part II Gains and														nts.	12054
Section A - Losse	s Fr	om	Str							J			•		
	ente	(b) Dai	nto or			(e) Cost of		,	(f) Loss						ecognizad loss.
(a) Description of property (a) Description of property (c) Date closed out or sold			(d) Gross other basic sales price plus expens of sale		sis more than (d), enter nse difference. Otherwise,		(g) Unrecognized gain on offsetting		if column (f) Is more than (g),						
		. عماد					se,	positions		enter difference, Otherwise, enter -0-					
40	IVIO,	. Day	Yr.					<u> </u>	enter -	0-	<u> </u>		<u> </u>		· · · · · · · · · · · · · · · · · · ·
10		┼	$\vdash$	ł											
	+	$\vdash$	╁					<u> </u>			<u> </u>				
		1	┢	1											
11a Enter the short-term	n po	rtion	of lo	osses fror	n line 10	), column (h), her	e and	includ	e on th	ne appre	priate line of	f			
Schedule D (see in	struc	tion	s)					•••••		· · · · · · · · · · · · · · · · · · ·			11a	(	)
<b>b</b> Enter the long-term				sses from	ı line 10,	, column (h), here	and i	nclude	on th	e appro	priate line of				
Schedule D (see in													11b	<u> </u>	)
Section B - Gains	Fro	m s	Stra		Date entered				<del></del>				ı	# O	
(a) Description o	f prop	ertv		Into	o or acquired Date closed		alas pric	e e			Cost or other bas			s	ain. If column (d) more than (e),
(-,				``	out or sold . Day Yr.					plu	is expense of sal	е			ter difference. erwise, enter -0-
40				INO	. Day 11.										
12						•									
13 a Enter the short-term											•••		13a		
<b>b</b> Enter the long-term p													13b		
Part III Unrecogn	ııze	a G	aını	s From	Positi	ons Held on					ar. Memo Er market value				<del> </del>
	(a) D	escrip	otion .c	of property			Mo.	Date acq	uired Yr.	on last i	ousiness day of	(d) Cost as	or other adjusted		(e) Unrecognized gain. If column (c) is more than (d), enter
14							1710.	Day	, '' <i>'</i>	<u> </u>	tax year				difference. Otherwise, enter -0-
14							<del> </del>	+-		<del>                                     </del>					
							$\vdash$	1				<b></b>			

# Form **8582**

Department of the Treasury Internal Revenue Service (99)

## **Passive Activity Loss Limitations**

See separate instructions.Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2009
Attachment

Name(s) shown on return

Identifying number

SIL	MON & SHIRLEY BERNSTEIN			37	1-32-5211
Pai	2009 Passive Activity Loss Caution: Complete Worksheets 1,	2, and 3	on page 2 before comple	ting Pa	art I.
	al Real Estate Activities With Active Participation (For the definition of active				And the control of th
Spec	ial Allowance for Rental Real Estate Activities on page 3 of the instructions.)	•			A particular of the first of the control of the con
1a	Activities with net income (enter the amount from Worksheet 1,				The state of the s
	column (a))	1a			Characteristics and the second control of th
	Activities with net loss (enter the amount from Worksheet 1,				Actions a materials a smaller of the principles of the state of the principles of the state of the principles of the state of the principles of the state of the principles of the state of the principles of the state of the principles of the state of the principles
	column (b))	1b			Principle 2 and principle and an extra an extra and a state of the first desirable and a state of a state of the first desirable and a state of the first de
	Prior years unallowed losses (enter the amount from Worksheet				
	1, column (c))	10			
d	Combine lines 1a, 1b, and 1c			1d	
	mercial Revitalization Deductions From Rental Real Estate Activities	1 1		e con ord	A country of the coun
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a			And compared to the second of
b	Prior year unallowed commercial revitalization deductions from			20/00/2000	A SECTION OF THE PROPERTY OF T
	Worksheet 2, column (b)	2b			As the SUA believe of the Colombia and t
<u> </u>	Add lines 2a and 2b	********		2c	
All O	ther Passive Activities				The bush of the second of the
3a	Activities with net income (enter the amount from Worksheet 3,		250		The state of the s
	column (a))	3a	352.	Aurora 20 4 5 7	I disease should be an annual sease and an annual sease and an annual disease being the full grant sease and a sea
b	Activities with net loss (enter the amount from Worksheet 3,		C 050		The state of the s
	column (b))	3b	<6,972.	>====	weight of an abstract of an access of the second of the se
C	Prior years unallowed losses (enter the amount from Worksheet 3,		0 505		Less has necessariant de la finit unit industrial properties de la contraction de la commence de la contraction de la co
	column (c))		<2,785.	2-14-14-1 2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
d	Combine lines 3a, 3b, and 3c			3d	<9,405.
	Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are al				
	unallowed losses entered on line 1c, 2b, or 3c. <b>Do not</b> complete Form 8582. Rej	ort the	losses on the forms and		.0.405
	schedules normally used		14+7*1>>1(1+11+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+	4	<9,405.
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.				
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Par</li> </ul>		-		
_	Line 3d is a loss (and lines 1d and 2c are zero or more)  Line 3d is a loss (and lines 1d and 2c are zero or more)				
	ttion: If your filing status is married filing separately and you lived with your spous If or Part III. Instead, go to line 15.	e at any	time during the year,do n	ot con	nplete
	Till Special Allowance for Rental Real Estate Activities Wit	h Anti	vo Darticination		
EG	Note: Enter all numbers in Part II as positive amounts. See page 8 of the i		•		
5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4			5	
	Enter \$150,000. If married filing separately, see the instructions			3	and the second of 1 to 10 to 1
	Enter modified adjusted gross income, but not less than zero (see the instr.)				Management of the Control of the Con
•	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.	100 PM 2 PM 2 PM 2 PM 2 PM 2 PM 2 PM 2 PM			Man and the second of the seco
	On the transit Brown To force the Co	8			Silver St. St. Commercial Commerc
	Subtract line 7 from line 5 Multiply line 8 by 50% (.5). <b>Do not</b> enter more than \$25,000. If married filing sepa		see the instructions	9	4 1000000000000000000000000000000000000
	Enter the <b>smaller</b> of line 5 or line 9		,,,,,,	10	
10	If line 2c is a loss, go to Part III. Otherwise, go to line 15.				<u> </u>
Pa	Table Special Allowance for Commercial Revitalization Dedu	ctions	From Rental Real	Estat	e Activities
277 (200) 20	Note: Enter all numbers in Part III as positive amounts. See the example f				
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separat	elv. see	instructions	11	
12	Enter the loss from line 4	12			
	>				
	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13			13	
	rt IV Total Losses Allowed				
15	Add the income, if any, on lines 1a and 3a and enter the total			15	352.
	Total losses allowed from all passive activities for 2009. Add lines 10, 14, an				
	·		<b>СФАФЕМЕМФ 37</b>	40	352

Worksheet 1 - For Form 8582, Lines 1	a, 1b, and 1c (Se	e instruc	ctions.)						
Name of activity	Current year			Prior ye	ars	Overall gain or loss			
raine of detaily	(a) Net income (line 1a)		let loss ie 1b)	(c) Unallo loss (line		(d) Gain	(e) Loss		
					D. 200 0200	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Total. Enter on Form 8582, lines 1a, 1b, and 1c					Company of the compan				
Worksheet 2 - For Form 8582, Lines 2			.)			T			
Name of activity	(a) Current deductions (li		unallo	(b) Prior y wed deducti	ear ions (line 2b)	(c	Overall loss		
· · · · · · · · · · · · · · · · · · ·	<del></del>					<u> </u>			
		-							
Total. Enter on Form 8582, lines 2a						The property of the property o			
and 2b► Worksheet 3 - For Form 8582, Lines 3	a. 3b. and 3c (Se	e instruc	etions )			3047 & 7147 AV 11. 300 FAR AND WALLEST WALL			
	Currer		Scionoly	Prior ye	ears	Overal	l gain or loss		
Name of activity	(a) Net income (line 3a)		let loss ne 3b)	(c) Unallowed loss (line 3c)		(d) Gain	(e) Loss		
	SEE ATTAC	यम् ।	ር ጥአምፑM	ביאייי ביר	R WORKS	र्यक्रकम् १	2		
Total. Enter on Form 8582, lines 3a,	DEE ATTAC	11111	DIVIDIO	TIVI I O	IC WOLLICE	)IITOTO T			
	352.	<	6,972.	<2.	785.		Annual Antido de Antido Destruto de Antido de		
3b, and 3c ► Worksheet 4 - Use this worksheet if a	n amount is sho	own or	Form 8	582, line 1	0 or 14 (Se	e instruction	ns.)		
	Form or schedule			<u> </u>	·				
Name of activity	and line number to be reported on (see instructions)	(a)	Loss	(b) Ra		(c) Special allowance	(d) Subtract column (c) from column (a)		
					<del></del>				
	l .								
Total Worksheet 5 - Allocation of Unallowe	d Losses (See ins	tructions	s.)						
	Form or sche		•	٠					
Name of activity	and line nur to be reporte (see instruct	ed on	(a) l	_oss	(b) Ratio		(c) Unallowed loss		
					05				
	SEE ATTA	CHED	STATE	MENT F	OR WORI	KSHEET	5		
Total		▶		9,405.	1.000	000000	9,405.		

Worksheet 6 - Allowed Losses (See instruction	ons.)						
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) l	(a) Loss		allowed loss	(c) Allowed loss	
	SEE ATTACHE		MENTIL E	10 TO 107	ODVCHEEM		
	SEE ALIACHE.	DIATE	TITETAT. L	OK W	OKKSHEET	6	
Total	•		9.		9.		
Total Worksheet 7 - Activities With Losses Rep	orted on Two or	More Forr	ns or Sch	edules	(See instruction	ns.)	
Name of activity:	(a)	(b)	(c) Ra		(d) Unallower		
Form or schedule and line number to be reported on (see instructions):				A glass of the second of the s			
1a Net loss plus prior year unallowed loss from form or schedule	The state of the s			A property of the control of the con			
b Net income from form or schedule	And the second of the second o	And the second s	The state of the s	And the second s			
c Subtract line 1b from line 1a. If zero or less, enter 0	<b>&gt;</b>						
Form or schedule and line number to be reported on (see instructions):				Programme of the control of the cont			
1a Net loss plus prior year unallowed loss from form or schedule	A service of the control of the cont						
b Net income from form or schedule	And the second s		The second secon				
c Subtract line 1b from line 1a. If zero or less, enter-0	o <b>▶</b>						
Form or schedule and line number to be reported on (see instructions):							
1a Net loss plus prior year unallowed loss from form or schedule	The second of th						
b Net income from form or schedule	The control of the co	The second part of the content of the second part o					
	SEE ATTACHE	D STATE	MENT F	OR W	ORKSHEET	7	
c Subtract line 1b from line 1a. If zero or less, enter -	RALL		<del> </del>	·			
Total	<b>•</b>	9,748.	1.000	0000	9,39	6. 352.	
		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			5,55	Form <b>8582</b> (2009)	

#### Form **8582-CR**

(Rev. December 2009) Department of the Treasury Internal Revenue Service Name(s) shown on return

## **Passive Activity Credit Limitations**

► See separate Instructions.

OMB No. 1545-1034

Attachment Sequence No. **89** 

► Attach to Form 1040 or 1041.

Identifying number

SIN	MON & SHIRLEY BERNSTEIN				371	-32-5211
Pai	t 📗 Passive Activity Credits	****				
	Caution: If you have credits from a publicly	traded partnership, see Pub	licly Traded Partnerships (PTP	s) on page 14	of the insti	ructions.
<u> </u>	P. D. I.B. I.F. (A. A. U.Jat., Med. A. D., D. al	singles (Other Then Debahl)	lk-11- O-adita and	7/00 s/ ss 5/00 s 5/2 1 ss	the second of th	
	ts From Rental Real Estate Activities With Active Parti ncome Housing Credits) (See Lines 1a through 1c on p		nation Greens and	Name of the state		
LOW-I	income nousing credits) (366 times 18 timough 10 on p	raye 3.)	1 1	Description of the second of t	Wild A Wall of The Control of The Co	
1a	Credits from Worksheet 1, column (a)		1a	Prince As 60 Company of the Company of the Company Company of the Company of the Company of the Company Company of the Company	William Co.	
				The state of the s	The state of the s	
b	Prior year unallowed credits from Worksheet 1, column	n (b)	16	20 m / 20	FOLLOW DON'T FOLLOW DON'T FO	
_	•	, , , , , , , , , , , , , , , , , , , ,				
c	Add lines 1a and 1b			1	c	
	bilitation Credits From Rental Real Estate Activities as				INTERNATION OF THE PROPERTY OF	
	e 1990 (or From Pass-Through Interests Acquired Bef			0.1 min 10 min 1	71.47(11) 	
			1 1	Prince of	n n n nadar nara tura tura nara tura tura nara tura tura nara tura tura nara tura tura	
2a	Credits from Worksheet 2, column (a)		2a	The second secon	The state of the s	
	Sidulo II official Control of Light Cont			Page 1		
b	Prior year unallowed credits from Worksheet 2, colum	n (h)	2b	000 000 000 000 000 000 000 000	Bridge Co.	
S	Thor year unanowed creates from workshoot 2, solution		Betty	\$ 1 V/A	DECEMBER OF THE STATE OF THE ST	
_	Add lines 2a and 2b			5	c c	
	Income Housing Credits for Property Placed in Service			35.0y		
LUW-	integrale Housing Greats for Property Fraces in Service	HILE 1808 (Dec Ellies of III)	ough oo on page o.)	6.770 6.770 8.770		
_	Cradity from Manufahant C. aghuma (a)		00	Charles on the Charles of the Charle	Developed and the second and the sec	
3a	Credits from Worksheet 3, column (a)	n /h)	3a	new and	AND AND AND AND AND AND AND AND AND AND	
b	Prior year unanowed credits from worksheet 5, column	ıı ( <b>u</b> )	30		BC	
All O	Add lines 3a and 3b	on nage 10 \		Service Control of the	)C	
				1.	Heigh hours	
	Credits from Worksheet 4, column (a)	- /h\	48	5.	4-11-14-1	
b	Prior year unallowed credits from Worksheet 4, column	n (0)	4b	2278	7074072	6.
C	Add lines 4a and 4b			1	kc	6.
5	Add lines 1c, 2c, 3c, and 4c				5	0.
6	Enter the tax attributable to net passive income (see pa				6	6.
7	Subtract line 6 from line 5. If line 6 is more than or equ				7	0.
Note	e: If your filing status is married filing separately at do not complete Part II, III, or IV. Instead, go to		ise at any time during the ye	ar,		
			Mills Astine Deutisine			
Рα	rt II Special Allowance for Rental R	eal Estate Activities	with Active Participa	ition		
	Note: Complete this part only if you have a					<del> </del>
8	Enter the smaller of line 1c or line 7				8	
9	Enter \$150,000. If married filing separately, see page		9	1000	Phil 2 CO 2 Dec constant of minds and phil 2 CO 2 control of the C	
10	Enter modified adjusted gross income, but not less the	an zero (see page 10).		200		
	If line 10 is equal to or more than line 9, skip lines 11			1		
	through 15 and enter -0- on line 16		[I	Dr. dead Dr. dead Dr. dead Dr. dead	0 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
11			11	0.000 0.000 0.000 0.000 0.000 0.000 0.000	TO THE PARTY OF TH	
12	Multiply line 11 by 50% (.50). Do not enter more that				unth applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique unthe third and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until and applique until applique until and applique until ap	
	filing separately, see page 10		12	200 A	man of a discount of the control of	
13a	Enter the amount, if any, from line 10 of		Organic Control Contro	00000000 00000000 00000000000000000000	Proceedings manufactured by a manufactured by a	
	Form 8582	13a	** Year in your was finded in your and the second of the s		10 10 10 10 10 10 10 10 10 10 10 10 10 1	
b	Enter the amount, if any, from line 14 of		one consecution for image (over a consecution of the consecution of th	\$6.000 0.000 0.000 0.000 0.000 0.000 0.000	The state of the s	
	Form 8582	13b	Company of the Compan	000000 000000 000000 000000 000000	manufacture of the control of the co	
c	Add lines 13a and 13b		13c		to 0000 com	
					and the control of th	
14	Subtract line 13c from line 12		14		Section of the sectio	
15	Enter the tax attributable to the amount on line 14 (se			,,	15	
	·					
16	Enter the smaller of line 8 or line 15				16	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **8582-CR** (Rev. 12-2009)

Form 8582-CR (Rev. 12-2009) SIMON & SHIRLEY BERNSTEIN 371-32-5211 Page 2 Part III Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990) Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV. 17 Enter the amount from line 16 18 18 19 Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V 19 Enter the smaller of line 2c or line 19 20 20 Enter \$250,000. If married filing separately, see page 13. (See page 13 to find out if you can skip lines 21 through 26.) Enter modified adjusted gross income, but not less than zero. (See instr. for line 10 on page 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30 22 Subtract line 22 from line 21 23 Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 13 25a Enter the amount, If any, from line 10 of Form 8582 b Enter the amount, if any, from line 14 of Form 8582 **25**b c Add lines 25a and 25b 25c Subtract line 25c from line 24 26 Enter the tax attributable to the amount on line 26 (see page 13) 27 Enter the amount, if any, from line 18 28 Subtract line 28 from line 27 29 Enter the smaller of line 20 or line 29 Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989 Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V. If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7 31 Enter the amount from line 30 32 Subtract line 32 from line 31. If zero, enter -0- here and on line 36 33 Enter the smaller of line 3c or line 33 Tax attributable to the remaining special allowance (see page 13) 35 Enter the smaller of line 34 or line 35 Part V Passive Activity Credit Allowed

37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See page 13 to find out how to report the allowed credit on		
	your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than		
	one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) on page 14	37	0,

#### Part VI Election To Increase Basis of Credit Property

38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the property, check this box. See page 15
39	Name of passive activity disposed of
40	Description of the credit property for which the election is being made
41	Amount of unallowed credit that reduced your basis in the property > \$

Form 8582-CR (Rev. 12-2009)

### ALTERNATIVE MINIMUM TAX

# **Passive Activity Loss Limitations**

See separate instructions.

OMB No. 1545-1008

Identifying number

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

▶ Attach to Form 1040 or Form 1041.

SIMON & SHIRLEY BERNSTEIN		371-32-5211		
Part   2009 Passive Activity Loss Caution: Complete Works	sheets 1, 2, and 3 on p	age 2 before comple	ting Pa	art 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 instr				The state of the s
1a Activities with net income (enter the amount from Worksheet 1,				and displayed and it is a formatty that was the same property of the same and the s
column (a))	1a	<u> </u>		Control of the second of the s
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b		2	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))			Company of the Compan	
d Combine lines 1a, 1b, and 1c			_1d	
Commercial Revitalization Deductions From Rental Real Estate Activities				Linguis of the second has prime and in the second s
2a Commercial revitalization deductions from Worksheet 2, column (a)	2a			A contract to dissent or experience of the contract of the con
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)			0-	
c Add lines 2a and 2b		<u></u>	2c	The second secon
All Other Passive Activities				entiremental of the high period of period of the high period of the hi
3a Activities with net income (enter the amount from Worksheet 3,	ا مما	352.		And the second product of a first and a county and making of the first and a county of the second product of t
column (a))	3a	334.		A STATE OF THE PROPERTY OF THE
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	<6,060.	<b>&gt;</b>	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	<2,563.	100000 10000 1000 1000 1000 1000 1000	
d Combine lines 3a, 3b, and 3c			3d	<8,271.
4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all loss				,
unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form				
schedules normally used	·		4	<8,271.
If line 4 is a loss and: • Line 1d is a loss, go to Part II.	***************************		<u> </u>	10,7=1=1
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 ze			ne 15.	
Caution: If your filing status is married filing separately and you lived with you	•••	-		
Part II or Part III. Instead, go to line 15.	,	<b>J</b> , , , , , , , , , , , , , , , , , , ,		1
Part II Special Allowance for Rental Real Estate Activit		•		
Note: Enter all numbers in Part II as positive amounts. See page				Y
5 Enter the smaller of the loss on line 1d or the loss on line 4		•••••	5	
6 Enter \$150,000. If married filing separately, see the instructions				A STATE OF THE STA
7 Enter modified adjusted gross income, but not less than zero (see the i	instr.) <b>7</b>		Newson and a	Section 2. The section of the sectio
Note: If line 7 is greater than or equal to line 6, skip lines 8 and	The Basic Annual Control of the Cont			
9, enter -0- on line 10. Otherwise, go to line 8.	portional and the second of th			and plant referred it programs to general referred and the control of the control
8 Subtract line 7 from line 6				Company of the Control of the Contro
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married	filing separately, see t	he instructions	9	
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 Revitalizatio				te Activities
Note: Enter all numbers in Part III as positive amounts. See the	example for Part II on p	page 8 of the instruct	ions.	
11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing	g separately, 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 positive amount), line 11, or			14	
Part IV Total Losses Allowed				
15 Add the income, if any, on lines 1a and 3a and enter the total			15	352.
16 Total losses allowed from all passive activities for 2009. Add lines 1				
to find out how to report the losses on your tax return	SEE STA	ATEMENT 44	16	1 352.

Caution: The worksheets must be filed with your to Worksheet 1 - For Form 8582, Lines 1					····				
Worksheet 1 - For Form 6562, Lines 13			ons.)	<u> </u>					
Name of activity	Currer			Prior ye			Overall	gain or lo	SS
	(a) Net income (line 1a)	(b) Ne (line		(c) Unallo loss (line	wed 1c)	(	d) Gain	(€	) Loss
									···
			<u> </u>		Total State of State	wanin			
Total. Enter on Form 8582, lines 1a,  1b, and 1c  Worksheet 2 - For Form 8582, Lines 2	a and the continue				and industry of the control of the c	10.000	And the second s	an un de partir de la Contra del Contra de la Contra del Contra de la Contra del Contra de la Contra de la Contra de la Contra de la Contra de la Contra del Contra de la Contra de la Contra de la Contra del Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra de la Contra	A CONTROL OF THE PROPERTY OF T
	(a) Current	•		(b) Prior y	leat				
Name of activity	deductions (li		unallo	wed deduct	ons (line :	2b)	(c)	Overall I	oss
	<u> </u>		-						
							A A 100 / A A A 100 /		
Total. Enter on Form 8582, lines 2a and 2b							nannanan in cumahad ya Milini Yi.	Section (According to the lateral or administration of the lateral or administration or administration of the lateral or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or administration or ad	
worksheet 3 - For Form 8582, Lines 3	a, 3b, and 3c (Se	e instruct	ons.)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6): A.A. A.W. A.W. A.W. A.W.	***************************************
	Curre			Prior ye	ears		Overall	gain or lo	oss
Name of activity	(a) Net income	(b) Ne	t loss	(c) Unalle	owed		(d) Gain	1 ,	·) Loop
	(line 3a)	(line	3b)	loss (lin	∋ 3c)		(u) Gain	,,	e) Loss
Total Enter on Form 9500 lines 20	SEE ATTA	CHED	STATE	WENT F	OR WO	RK	SHEET	3	And the second s
Total. Enter on Form 8582, lines 3a, 3b, and 3c	352.	<6	,060.	> <2,	563.				
Worksheet 4 - Use this worksheet if a		own on	Form 8	582, line 1	0 or 14	(See	instructions	3.)	
	Form or schedule and line number					(*	e) Special	(d)	Subtract
Name of activity	to be reported on	(a) L	.oss	(b) Ratio			llowance		lumn (c) column (a)
	(see instructions)								
								-	
Total	<b>&gt;</b>								
Worksheet 5 - Allocation of Unallowe	d Losses (See ins	tructions.)			,				
	Form or sch								
Name of activity	to be reporte	ed on	(a)	Loss	(b	) Ra	tio	(c) Unall	owed loss
	(see instruct	uons)							
			<del>-</del>						
	<u> </u>	A	A		0.5		~	-	
	SEE ATTA	CHED	STATI	MENT F	OK WC	KK	SHEET!	5	
Total		▶		8,271.	1.00	00	00000		8,271.

Worksheet 6 - Allowed Losses (See instru	ctions.)							
Name of activity	Form or scl and line nu to be repor (see Instruc	ımber ted on	(a) L	.oss	(b) Un	allowed loss	(c) A	llowed loss
						-		·
Total Worksheet 7 - Activities With Losses R	eported on T	wo or N	Nore Forn	ns or Sch	edules	(See instruction	ns.)	
Name of activity:	(a)		(b)	(c) Ra		(d) Unailowed	4	Allowed loss
Form or schedule and line number to be reported on (see instructions):							The second secon	
1a Net loss plus prior year unallowed loss from form or schedule		Services and the services of t			y ji new yegigini wa ningini ya n		And the second s	
b Net income from form or schedule		The state of the s			Company of the compan		According to the control of the cont	
c Subtract line 1b from line 1a. If zero or less, ente	or -0 ▶						y 21221121 - F.W. FLOTO	
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule		I have been a second of the se			S B A SPAN A PARAMETER OF THE PARAMETER			
b Net income from form or schedule		The control of the co					A CONTROL OF THE PARTY OF THE P	e et a sero como appressión visiones y branche (1871), ma es en esta de la sero della s
c Subtract line 1b from line 1a. If zero or less, enter	er -0 <b>&gt;</b>							
Form or schedule and line number to be reported on (see instructions):		d come a react processor and a react process						
1a Net loss plus prior year unallowed loss from form or schedule								
b Net income from form or schedule	SEE Amm	ACHED	STATE	MENT ፑ	OR W	ORKSHEET	The second secon	
c Subtract line 1b from line 1a. If zero or less, ente					J1. 44	ىك اشار شار 1.1 كى د د د د د د د د د د د د د د د د د د	1	
	ERALL							
Total	<b>&gt;</b>		8,623.	1.000	0000	8,27	1.	352.

**Domestic Production Activities Deduction** 

OMB No. 1545-1984

Department of the Treasury Internal Revenue Service

Name(s) as shown on return

➤ Attach to your tax return. ➤ See separate instructions.

Attachment Sequence No. 143

Identifying number

SI	MON & SHIRLEY BERNSTEIN			371~:	32-5211
1	Domestic production gross receipts (DPGP)			1	1,680.
	Domestic production gross receipts (DPGR)  Allocable cost of goods sold. If you are using the small business simplified				1,000.
2	overall method, skip lines 2 and 3	2	2.		
3	Enter deductions and losses allocable to DPGR (see			SALVANIA SALVANIA SALVANIA SALVANIA SALVANIA SALVANIA SALVANIA SALVANIA	
٠	instructions)	3	1,686.	Section of the sectio	
1	If you are using the small business simplified overall method, enter the amount	-3-	1,0001		
7	of cost of goods sold and other deductions or losses you ratably apportion to			200 200 200 200 200 200 200 200 200 200	
	DPGR. All others, skip line 4	4		Control of the contro	
5	Add lines 2 through 4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5	1,688.
6	Subtract line 5 from line 1			6	<8.>
				The second secon	
7	Qualified production activities income from estates, trusts, and certain partnershi	ps and S co	rporations (see	The second secon	
	instructions)		,	7	
8	Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to	line 10		8	<8.>
	Amount allocated to beneficiaries of the estate or trust (see instructions)			9	
10	Qualified production activities income. Estates and trusts, subtract line 9 from				
	from line 8. If zero or less, enter -0- here, skip lines 11 through 19, and enter -0- or	•	•	10	0.
				Company of Service Company of Com	
11	Income limitation (see instructions):		_	200 (200 (200 (200 (200 (200 (200 (200	
	<ul> <li>Individuals, estates, and trusts. Enter your adjusted gross income figured with</li> </ul>		]	Control des Carres	
	domestic production activities deduction			The second second of the second second of the second secon	
	All others. Enter your taxable income figured without the domestic production activities deduction (fax exempt examples income significant actions).			11	
	activities deduction (tax-exempt organizations, see instructions)	• • • • • • • • • • • • • • • • • • • •		11	
		1.40		20 20 20 20 20 20 20 20 20 20 20 20 20 2	
12	Enter the smaller of line 10 or line 11. If zero or less, enter ·0· here, skip lines 13 th	•			
	and enter -0- on line 20		•••••••	12	
13	Enter 6% of line 12			13	
14	Form W-2 wages (see instructions)			14	
		• • • • • • • • • • • • • • • • • • • •		200 Table 201 F	
15	Form W-2 wages from estates, trusts, and certain partnerships and S corporation	ns (see instru	ections)	15	
		(			
16	Add lines 14 and 15. Estates and trusts, go to line 17, all others, skip line 17 and	go to line 18		16	
17	Amount allocated to beneficiaries of the estate or trust (see instructions)			17	
18	Estates and trusts, subtract line 17 from line 16, all others, enter amount from line	9 16		18	
19	Form W-2 wage limitation. Enter 50% of line 18		,	19	
20	Enter the smaller of line 13 or line 19			20	0.
				100 mm	- · · · - · · · · · · · · · · · · · · ·
21	Domestic production activities deduction from cooperatives. Enter deduction from	m Form 1099	PATR, box 6	21	
22	Expanded affiliated group allocation (see instructions)			22	
				The second secon	
23	Domestic production activities deduction. Combine lines 20 through 22 and er			Section of the sectio	0
9109	Form 1040, line 35; Form 1120, line 25; or the applicable line of your return			23	U •
12-01	11 LHA For Paperwork Reduction Act Notice, see separate instructions	5.			Form <b>8903</b> (2009)

# Qualified Production Activity Income Schedule

Name SIMON & SHIRLEY BERNSTEIN			:		Ė			identifying Number: 371-32-5211		
	Domestic Production		Directly Allocable Expenses	liocable ses		Interest E Ap	Interest Expense Allocation/ Apportionment	ocation/ t	- <del> </del>	Qualified
Description	Gross Receipts (DPGR)	DPGR Ratio	Costs of Goods Sold	Other Costs	Apportioned Expenses	Allocable Assets	Assets Ratio	Interest Expense	Qualified Expenses	Activity Income
G.E.T. PAWENTY VILLY INTERNATION OF THE PROPERTY OF THE PROPER	832.	495238	121	1,132,	0				840,	82
BERNSTEIN FAMILY INVESTMENTS LLLP	832.	495238	121	1,132.	0				840.	\$ 8 2
BERNSTEIN HOLDINGS LLC	00	.004762		π.	0.				12,	<.4×
BERNSTEIN HOLDINGS LLC	8	.004763	1.	3.	0				4.	4
ELIOT BERNSTEIN FAMILY TRUST	0.		0	0.	0				'n	<b>-</b>
JILL IANTONI FAMILY TRUST	0		F 0	0.	0				ัก	<b>5</b>
JILL IANTONI FAMILY TRUST	9		0	- n	0				'n	- I
LISA S FRIEDSTEIN FAMILY TRUST	<b>-</b> 0		• •	n	0				ò	ם
LISA S FRIEDSTEIN FAMILY TRUST	0		O	<b>!</b> o	0				'n	5
NON-OUALIFIED ACTIVITIES	0				°0				n	
TOTAL	1,680		244.	2,278.	O.				'969'T	
										þ
TOTAL FROM QUALIFIED ACTIVITIES	1,680.	1	244.	2,278	٥.				T,000,	<u> </u>
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and the second s										1
						•				
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### Form **8283**

(Rev. December 2006)

Department of the Treasury Internal Revenue Service

## **Noncash Charitable Contributions**

► Attach to your tax return if you claimed a total deduction of over \$500 for all contributed property.

► See separate instructions.

OMB. No. 1545-0908

Attachment Sequence No. 155

Name(s) shown on your income tax return

ldentifying number

### SIMON & SHIRLEY BERNSTEIN

371-32-5211

Section A. Donated Property of \$5,000 or Less and Certain Publicly Traded Securities - List in this section only items (or groups of similar items) for which you claimed a deduction of \$5,000 or less. Also, list certain publicly traded securities even if the deduction is more than \$5,000 (see instructions).

Note. Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

Part	Information on D	onated Property - If	you need more space, att	tach a statement,				
1		(a) Name and donee org			(For a donated vehicle	, enter the year	donated property , make, model, condition 1098-C if required.)	n, and mileage,
A	VIETNAM VE 8605 CAMER		F AMERICA SILVER SPRIN	IG, MD 2091(	CLOTHING,	MISC	HOUSEHOLI	) ITEMS
В	VIETNAM VE 8605 CAMER		F AMERICA SILVER SPRIN	IG, MD 2091(	CLOTHING			
C	VIETNAM VE 8605 CAMER		F AMERICA SILVER SPRIN	IG, MD 2091	CLOTHING			
D								
E								
Note, If	the amount you claime	d as a deduction for	an item is \$500 or less, y	ou do not have to compl	ete columns (d), (e), a			
	(c)Date of the contribution	(d) Date acquired by donor (mo., yr.)	(e)How acquired by donor	(f) Donor's cost or adjusted basis	(g) Fair market value (see instructions)	(h) Metho	od used to determine the market value	e fair
Α.	06/01/09	VAR.	PURCHASE	6,000.			SHOP VAI	
B	09/10/09	VAR.	PURCHASE	8,500.	2,125.			
C	12/16/09	VAR.	PURCHASE	8,000.	2,000.			
	12/10/09	VAI.	FUNCTIABLE	0,000.	2,000	TULTET	SHOP VAI	JUE
D E				<u> </u>				
	<u> </u>	<u>.</u>		<del></del>			-	***
Part			Property - Complete lines					I. Complete
	lines 3a through 3	3c if conditions were	placed on a contribution	listed in Part I; also attac	h the required stateme	ent (see instru	uctions).	
2 a	Enter the letter from P	art I that identifies th	ne property for which you	nave less than an entire i	Interest -			
			,, attach a separate statem	=			<b>*</b>	
b			ne property listed in Part I:		<b>.</b>			
	rotal attrought diagniba	ab a double on the	to proporty notice in race i.	(2) For any prior tax ye	ars -		<del></del> ·	
C	Name and address of	each organization to	which any such contribut			different fron	n the	
·	donee organization ab	=	million any saon contains	aon nao mago ma prior	jour (complete city ii	uniorone non	11 (110	
	Name of charitable organiz							
	Address (number, street, a	nd room or sulte no.)						
	City or town, state, and Zil	P code						<u></u>
d	For tangible property,	enter the place wher	re the property is located o	or kept ►				
e	Name of any person, o	other than the don <del>c</del> e	organization, having actu	al possession of the pro	perty ►			[ V., [ 11-
3 a	Is there a restriction, e	ither temporary or n	permanent, on the donee's	right to use or dispose	of the donated propert	tv?		Yes No
b			nee organization or anothe	· ·		v		
U		•	draising) the right to the in		•			Proceedings of the control of the co
			ig the right to vote donate					Sharp and the second of the se
			ig the right to vote donate: lesignate the person havin	·				And Annual Community of the Community of
	1 t0	•		•				
c	le there a restriction li	miting the donated n	property for a particular us					
<u>C</u>	I O THOIR OF LEGITION IN	mang me denated p	noporty for a particular us					1

Form 1116 U.S. and F	oreign S	Source Income Summa	ry	
NAME SIMON & SHIRLEY BERNSTEIN				371-32-5211
INCOME TYPE		TOTAL	U.S.	FOREIGN PASSIVE
Compensation Dividends/Distributions Interest Capital Gains Business/Profession Rent/Royalty State/Local Refunds		26,099. 258,203. 27,432. 718,375. 33.	26,099. 258,203. 27,432. 718,375.	33.
Partnership/S Corporation SEE STATEMEN Trust/Estate	т 45	<6,310.>	<12,143.>	5,833.
Other Income Gross Income		1,014. 1,024,846.	1,014.	5,866.
Less:				
Section 911 Exclusion Capital Losses Capital Gains Tax Adjustment		30,432.	30,432.	
Total Income - Form 1116		994,414.	988,548.	5,866.
Deductions: Business/Profession Expenses Rent/Royalty Expenses Partnership/S Corporation Losses Trust/Estate Losses		711,790. 9. 855,422. 1.	709,191. 855,422. 1.	2,599. 9.
Capital Losses Non-capital Losses Individual Retirement Account Moving Expenses Self-employment Tax Deduction Self-employment Health Insurance				
Keogh Contributions Alimony Forfeited Interest Foreign Housing Deduction Other Adjustments				
Capital Gains Tax Adjustment Total Deductions		1,567,222.	1,564,614.	2,608.
Adjusted Gross Income		<u>&lt;572,808.</u> >	<576,066 <b>.</b> >	3,258.
Less Itemized Deductions:  Specifically Allocated  Home Mortgage Interest		75,777.	75,343.	434.
Other Interest Ratably Allocated		4,777. 67,621.	4,777. 67,234.	387.
Total Adjustments to Adjusted Gross Income		148,175.	147,354.	821.
Taxable Income Before Exemptions		<720,983.>	<u>&lt;723,420.</u> >	2,437.

### Form 1116

### Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

### SIMON & SHIRLEY BERNSTEIN

371-32-5211

### Foreign Income Category

### PASSIVE INCOME

gn tax paid/accrued carryback to 2009 mended returns ction allocated to ded income						222.
nended returns ction allocated to					A control of the cont	
ction allocated to	Service of Page 1 and 18 year of process of the page 2 of		STATE OF THE PROPERTY OF THE P			
		C. S.	STATE OF THE PROPERTY OF THE P			
ded income	The second secon			The second secon	196 1 5 fb Dames and the Section of Committee	
			The state of the s			
gn tax available						222.
mum credit allowable		ationical and recently upon	3477-1378-1378-1378-1378-1378-1378-1378-13		Part of the second seco	0.
ed foreign tax ( + )						
cess of limit ( - )					<2,341.>	222.
gn tax carryback				THE THE USE OF THE THE THE THE THE THE THE THE THE THE	222.	222.
gn tax carryforward						
treaty adjustment			L. V. S. LE VAN CETTE DAY MANUEL PROMILED AND A CAN ALL SELECTION OF CAN		The Control of the Co	
on tax or excess						
g o. o/10000	l				<2,119.>	
t	reaty adjustment n tax or excess	reaty adjustment	reaty adjustment ntax or excess	reaty adjustment ntax or excess	reaty adjustment ntax or excess	reaty adjustment n tax or excess

		1999	2000	2001	2002	2003
1.	Foreign tax paid/accrued					
2.	FTC carryback to 2009					
	for amended returns	The Art of the Council State C	The second of th	A CONTROL OF THE PROPERTY OF T	The second secon	and all extensions are related to the second
3.	Reduction allocated to					
	excluded income					
4.	Foreign tax available			TO PROPERTY OF THE PROPERTY OF	The second secon	are challenged in the last and the state of
5.	Maximum credit allowable					
6.	Unused foreign tax ( + )					
	or excess of limit ( - )					
7.	Foreign tax carryback	The second secon		Service of the servic		
8.	Foreign tax carryforward					
9.	Less treaty adjustment					
10.	Foreign tax or excess					
	limit remaining					

### Form 1116

### Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

# SIMON & SHIRLEY BERNSTEIN

371-32-5211

### Foreign income Category

## PASSIVE INCOME

AMT		2004	2005	2006	2007	2008	2009
1.	Foreign tax paid/accrued	And the state of t	A CONTROL OF THE PROPERTY OF T	The state of the s		And the second of the second o	222.
2.	FTC carryback to 2009		or as more than a supplying the state of the supplying the			Account to the contract of the	
	for amended returns		e digital region in announced to the				
3.	Reduction allocated to			48-49-133-17-17-17-17-17-17-17-17-17-17-17-17-17-		The property of the property o	
	excluded income				AND AND AND AND AND AND AND AND AND AND	Signs of Profile Commercial Comme	
4.	Foreign tax available	committee of the defeate agent countries before the expension of the process of the countries of the countri	Vannuda (1 u) 2 a u) 2 a u u u u u u u u u u u u u u u u u u	A 7 1 mgs / taganing against a reference or a man of a reference or a reference o	is lifter of Marking Long Procession of Common		222.
5.	Maximum credit allowable	eri i fizifa mile ta fucir reme eristrument schools, bis co.o.				And the second s	0.
6.	Unused foreign tax ( + )						
	or excess of limit ( - )					<1,762.>	222.
7.	Foreign tax carryback		A CONTROL OF THE PROPERTY OF T		A PART OF THE PART	222.	222.
8.	Foreign tax carryforward						
9.	Less treaty adjustment		VI 1.7 pp. 100 cm com com com com com com com com com	I hay 18 as yet and y which y which had belt if both it may not the work of more of the second of th		The Andready of Andready of The Control of The Cont	
10.	Foreign tax or excess	-					
	limit remaining					<1,540.>	
	Total foreign taxes from all	available years to be ca	arried to next year				

		1999	2000	2001	2002	2003
1.	Foreign tax paid/accrued	A popular processor program of the p	The parameters are a few indexes against a few indexes and indexes and indexes are a real or a r	La Company A de Co	To the control who has a state of the control of th	
2.	FTC carryback to 2009			The second secon	TO VALUE OR SERVICE AND TO THE RESERVE OF THE RESER	
	for amended returns					The second secon
3.	Reduction allocated to		Annual control class a segment that it is the personal control			
	excluded income		The second secon			See the second s
4.	Foreign tax available					
5.	Maximum credit allowable	Application for the first of th	A CONTROL OF THE PROPERTY OF T	The property of the control of the c		Control of the Contro
6.	Unused foreign tax ( + )					
	or excess of limit ( - )					_
7.	Foreign tax carryback		A CONTROL OF THE PROPERTY OF T	I de company de la company de		The state of the s
8.	Foreign tax carryforward					
9.	Less treaty adjustment		CONT. ACCORDANCE AND			AND AND AND AND AND AND AND AND AND AND
10.	Foreign tax or excess					
	limit remaining					

Form 1116	Foreign Tax Preference Items	
NAME SIMON & SHIRLEY BERI	ISTEIN	371-32-5211
Alternative minimum tax deductions allocation	<u> </u>	0.0
	8,2	0.
Total alternative minimum tax adjustmen	8 , 2	02.
Total foreign source income Total gross income	5,866. 1,024,879.	
	ncome	724
Total foreign source deductions		47.
Fatal daductions allocated to foreign incomes	alanas	
otal deductions allocated to foreign income General limitation income	UIASS.	

Form 1116	Pro Rata Share of All	ocated Losses		
NAME SIMON & SHIRLEY BERNSTE	IN		3	71-32-5211
Allocation of Losses from Other Categories				
INCOME CLASSIFICATION	INCOME	LOSS	ALLOCATED LOSS	LOSS NOT ALLOCATED
Passive income Income re-sourced by treaty	2,437.			
General Ilmitation income Totais	2,437.			
Allocation of U.S. Losses	<del></del>			•
INCOME CLASSIFICATION	REMAINING INCOME	U.S. LOSS	ALLOCATED LOSS	LOSS NOT ALLOCATED
Passive income Income re-sourced by treaty General limitation income	2,437.	723,420.	2,437.	720,983
Totals	2,437.	723,420.	2,437.	720,983
Recapture of Prior Year Overall Foreign Loss				
INCOME CLASSIFICATION	REMAINING INCOME	OVERALL PRIOR YEAR LOSS	RECAPTURED LOSS	LOSS NOT RECAPTURED
Passive income Income re-sourced by treaty General limitation income Totals				
Recapture percentage				
Recapture of Separate Limitation Loss Accounts				
INCOME CLASSIFICATION	REMAINING INCOME	PRIOR YEAR LOSS	RECHARACTERIZED LOSS	LOSS NOT RECHARACTERIZED
Passive income Income re-sourced by treaty General limitation income Totals				
Recapture of Overall Domestic Loss				
INCOME CLASSIFICATION	REMAINING INCOME	PRIOR YEAR LOSS	RECAPTURED LOSS	LOSS NOT RECAPTURED
Passive income Income re-sourced by treaty General limitation income Totals				
Adjustments to Form 1116, Line 14				<del></del>
OTHER CATEGORIES	U.S. PRIOR YEA LOSSES OVERALL	AR RECAPTURE OF LOSS ACCOUNT	DOMESTIC S RECAPTURE	FORM 1116, LINE 15
Passive Re-sourced by treaty General limitation	<2,437.>			<2,437

Form 1116	Alte	ernative Min Pro Rata S	imum Tax I hare of Allo	Foreign Tax Credit ocated Losses		
AME	v nankiomiarki				ى 2 -	71-32-5211
SIMON & SHIRLE Allocation of Losses from Other					<u> </u>	71-32-3211
MICOLITOR OF ECOLOGIC HOIR CHIN					ALLOCATED	LOSS NOT
NCOME CLASSIFICATION			COME	LOSS	LOSS	ALLOCATED
assive income			2,777.			
ncome re-sourced by treaty						
General limitation income Totals			2,777.	-		
Totals		<del>-</del>				
Allocation of U.S. Losses						
NCOME CLASSIFICATION			IAINING COME	U.S. LOSS	ALLOCATED LOSS	LOSS NOT ALLOCATED
Passive income			2,777.	663,739.	2,777.	660,962
ncome re-sourced by treaty			_,,,,,	•••,	-,	•
General limitation income						
Totals			2,777.	663,739.	2,777.	660,962
Recapture of Prior Year Overa	uli Foreign Loss					
recapture of the feat event	itt i orongii Eoou	BEN	AINING	OVERALL PRIOR YEAR	RECAPTURED	LOSS NOT
INCOME CLASSIFICATION			COME	LOSS	LOSS	RECAPTURED
Passive income						
Income re-sourced by treaty						
General limitation income Totals				<del></del>		
ι σιαιδ					<del>, , , , , , , , , , , , , , , , , , , </del>	
Recapture percentage						
Recapture of Separate Limita	tion Lace Accounts			·	<del>,</del>	
necapture of Ocharate Limita	HON COS ROCCANO	BE/	//AINING	PRIOR YEAR	RECHARACTERIZED	LOSS NOT
INCOME CLASSIFICATION			ICOME	LOSS	LOSS	RECHARACTERIZED
Passive income						
Income re-sourced by treaty						
General limitation income						
Totals						<u> </u>
Recapture of Overall Domest	ic Loss					
INCOME OF ACCIDIOATION			MAINING ICOME	PRIOR YEAR LOSS	RECAPTURED LOSS	LOSS NOT RECAPTURED
INCOME CLASSIFICATION		H'		LUUU		TEOM TOHED
Passive income Income re-sourced by treaty						
General limitation income						
Totals						
Adjustments to Form 1116, L	ine 14					
		U.S.	PRIOR YEA	AR RECAPTURE OF	DOMESTIC	FORM 1116,
INC. CLASSIFICATION	OTHER CATEGORIES	LOSSES	OVERALL	LOSS ACCOUNT	S RECAPTURE	LINE 15
Passive		<2,777.	>			<2,777
Re-sourced by treaty						
General limitation						

	IABLE 1 (Keep for your records.)		
P	Partill Qualified Loan Limit		
4	Enter the guarage halance of all your grandfathared daht. Con line 1 instructions		
١	Enter the average balance of all your grandfathered debt. See line 1 instructions	<del>-                                    </del>	<del></del>
	Enter the average balance of all your home acquisition debt. See line 2 instructions	2	
3	Enter \$1,000,000 (\$500,000 if married filing separately)	3	
4	Enter the larger of the amount on line 1 or the amount on line 3	4	
5	Add the amounts on lines 1 and 2. Enter the total here	5	
	Enter the smaller of the amount on line 4 or the amount on line 5	6	
7	Enter \$100,000 (\$50,000 if married filing separately) or your limited amount. See line 7 instructions for a limit that may apply	7	100,000.
	Add the amounts on lines 6 and 7. Enter the total. This is your qualified loan limit	8	100,000.
	Part II Deductible Home Mortgage Interest		
9	Enter the total of the average balances of all mortgages on all qualified homes. See line 9 instructions	9	
	• If line 8 is less than line 9, go on to line 10.	<del></del>	
	<ul> <li>If line 8 is equal to or more than line 9, stop here. All of your interest on all the mortgages included on line 9 is deductible</li> </ul>	1	
	as home mortgage interest on Schedule A (Form 1040).		
10	Enter the total amount of interest that you paid. See line 10 instructions	10	
	Divide the amount on line 8 by the amount on line 9. Enter the result as a decimal amount (rounded to three places)	11	X
12	Multiply the amount on line 10 by the decimal amount on line 11. Enter the result. This is your deductible home		
	mortgage interest. Enter this amount on Schedule A (Form 1040)	12	
13	Subtract the amount on line 12 from the amount on line 10. Enter the result. This is not home mortgage interest.	]	
	See line 13 instructions	13	

# Schedule A - Net Operating Loss (NOL)

2009

Name	е		Social Security Number
SII	MON & SHIRLEY BERNSTEIN		371-32-5211
1	Enter the amount from your 2009 Form 1040, line 41, or Form 1040NR, line 38, minus any amount		,
	on Form 8914, line 6. Estates and trusts, enter taxable income increased by the total of the charitable		
	deduction, income distribution deduction, and exemption amount	1	<720,983.>
2	Nonbusiness capital losses before limitation. Enter as a positive number 2 154,737.		
3	Nonbusiness capital gains (without regard to any section 1202 exclusion) 3		
4	If line 2 is more than line 3, enter the difference; otherwise, enter 0. 4 154, 737.		
5	If line 3 is more than line 2, enter the difference;		
	otherwise, enter-0- 5 0 • Standard Control of the c		
6	Nonbusiness deductions (see instructions) 6 148,175.		
7	Nonbusiness income other than capital gains		
	(see instructions) 7 285,966.		
8	Add lines 5 and 7 8 285,966.		
9	If line 6 is more than line 8, enter the difference; otherwise, enter -0-	9	0.
10	If line 8 is more than line 6, enter the difference;	// / / / / / / / / / / / / / / / / / /	
	otherwise, enter -0 But do not enter more		
	than line 5		
11	Business capital losses before limitation. Enter as a positive number 11		
12	Business capital gains (without regard to any		
	section 1202 exclusion) 12 352.	I More by Adv Sm	
13	Add lines 10 and 12 352.		
14	Subtract line 13 from line 11. If zero or less, enter -0-		
15	Add lines 4 and 14		
16	Enter the loss, if any, from line 16 of Schedule D (Form 1040). (Estates		
	and trusts, enter the loss, if any, from line 15, column (3), of Schedule D	100000000000000000000000000000000000000	
	(Form 1041).) Enter as a positive number. If you do not have a loss on		
	that line (and do not have a section 1202 exclusion), skip lines 16 through		
	21 and enter on line 22 the amount from line 15 154,385.	200 TO THE	
17	Section 1202 exclusion. Enter as a positive number  Subtract line 17 from line 16. If zero or less, enter -0-  18 154,385.	17	
18	Subtract line 17 from line 16. If zero or less, enter 0-		
19	Enter the loss, if any, from line 21 of Schedule D (Form 1040). (Estates and		
	trusts, enter the loss, if any, from line 16 of Schedule D (Form 1041).) Enter		
	as a positive number 3,000.		
20	If line 18 is more than line 19, enter the difference; otherwise, enter 0- 20 151,385.		
21	If line 19 is more than line 18, enter the difference; otherwise, enter -0-	21	0.
22	Subtract line 20 from line 15. If zero or less, enter -0-	22	3,352.
23	Domestic production activities deduction from Form 1040, line 35 (or included on Form 1041, line 15a)	23	
24	NOL deduction for losses from other years. Enter as a positive number	24	
25	NOL. Combine lines 1, 9, 17, and 21 through 24. If the result is less than zero, this is your		
	current year NOL. If the result is zero or more, you do not have an NOL	25	<717,631.>

	as shown on return  N & SHIRLEY BERNSTEIN		<u> </u>	Social Security Number 371–32–5211
1. Los	s for the current year			728,283.
<b>2.</b> Pers	sonal exemptions		7,300.	
<b>3.</b> Net	operating loss deduction	.,		
	ess of nonbusiness deductions over business income:			
(A)	AMT nonbusiness itemized deductions and adjustments	88,756.		
(B) (C)				
(D)		206 567		
(E)	Difference (line 4(A) less 4(D)) not less than zero		0.	
•	usted deduction for business ital loss .	ı		
(A) (B)	Business capital loss Line 4(D) minus 4(A), not less than zero.  Do not enter more than line 4(C) 0	CONTROL OF THE PROPERTY OF THE		
(C)	Business capital gains (without regard to any section 1202 exclusion) 352			
(D)	Total (line 5(B) plus 5(C))	352.		
(E)	Difference (line 5(A) less 5(D)) not less than zero		0.	
<b>6.</b> Exc	ess of nonbusiness capital loss over nonbusiness capital gain		3,352.	
7. Adj	usted section 1202 exclusion			
8. Tot	al adjustment and preference items (Form 6251)		60,021.	
<b>9.</b> Dor	mestic production activities deduction			The state of the s
10. Tot	al (line 2 + 3 + 4(E) + 5(E) + 6 + 7 + 8 + 9)			70,673.
11 Cur	rent year alternative tay net operating loss - (line 1 less line 10)			657,610.

NOL				Detail I	Detail NOL Carryover/Carryback Worksheet	arryback Worksh	eet				2009
Name(s) S I MON	s) N & SHIRLEY	BERNSTEIN								Social Se 371-3	Social Security Number 371-32-5211
Year Carried From	noun	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	717,631.					A STATE OF CANADA TO THE CANAD	Control of the Contro	The control of the co	Services of building of the Services of the Se	Special and the second	The second of th
pages control and control schale for pages of the control schale for pages of pages of pages of pages of pages of pages of pages of pages of pages of page					And a second control of the control	The second secon	Company and the second of the		Personnel on the Personnel of the Person	Principles of the company of the com	Can change of the change of th
Special Analysis of the Continue of the Contin				And of the part of	Production Control Con	of the control of the	The second of th	A Community of the Comm	AND CHARLES THE REAL PROPERTY OF STATE	part of the area o	The state of the s
And the second s	Company and the company of the compa			The second secon	And of the second secon	A service of the control of the cont			processing the control of the contro	A color for a colo	S. y Charles, James Peley.  On Community of Charles, Community of
See that of a first of the second desired in	The state of the s			The second of th	The second secon	Federal Control of Security and Control of Security an	The second secon	The second secon	Country (Country) (Country	processor of control of the control	Sure at 1 at 1 at 1 at 1 at 1 at 1 at 1 at
The second secon		The second secon		And the second s	The second secon	The day of several party of the control of the cont	The second secon	The second secon		grant Control of the	
The second secon	Commission 2 and the commission of the commissio	The second secon					And the second s	The second secon	price 2 and price con of business of the price control of the price cont	and fight in Spring and a sprin	The state of the s
The state of the s	Comments of the comments of th	Control of the contro			And the second of the second o	A control of the cont	A control of the cont	The second secon	and the second s	A married of the following of the control of the co	and definition to apply and a second of the control
Totals Total	als 717,631.  Total amount available for carryover		717,631.						:		
	Less total amounts used Less total amounts expired	_	0. 0. 717 631								
099911 07	Remaining carryover										

922211 04-24-09

AMT NOL	IOL			Det	Detail AMT NOL Carryover Worksheet	yover Worksheet					2009
Name(s) SIMON	N & SHIRLEY	BERNSTEIN			·					Social Se 371-3	Social Security Number 371-32-5211
Year Carried From	Amou		Amount Used in								
2009	657,610.				The property of the property o		per l'en autre de control de l'en autre de l			Part on the first production of the control of the	ET 10 million visit o 1 millio
The second secon			For the control of th		The second secon	Special and a service of the service	A grant on grant or strong	The second of th	Service of the control of the contro	September 1997 of September 19	Grand better the control of the cont
The second secon		And the second s		Service of the control of the contro	The second secon		Fig. 19 where the property of the Common and the Co	The second of th		The control of the co	The state of the s
Des granden version from the control of the control		See that the second sec			And the state of t			The second secon	grant and processing and control of the control of		If a late of a control of the contro
PROPERTY AND THE PARTY AND THE		And the second s		And the second s	And the Control of th		Service of the Control of the Contro		or the ball of the control of the co	The state of the s	And the Committee of th
yes under jed god en de de de de de de de de de de de de de			The second secon	The second secon	Comment of the commen	grant of the Author of the Aut	The control of the co	The second secon	And the second s	And the second of the second o	James of the second sec
The American State of the American State of	The control of the co				And the second s	per l'avantire d'avantire la proposition de  la proposition de la proposition de la proposition de la proposition de la proposition de la proposition del la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la proposition de la	photographic action produced in the control of the	The second of a proper second of		programme and a shall be considered as a shall	STATE OF THE PROPERTY OF THE P
	(1) 66, 1 60(1) 60 cm	The second secon	The second secon	A street of the	And the second of the second o	The state of the s	and a second control of the control	Control of the contro	Service and an artifact of the control of the contr		
Totals   Totals   Compared to the compared to	als   007 / 010    Total amount available for carryover Less total amounts expired  Remaining carryover		657,610. 0. 0. 657,610.								
916721 04	04-24-09										

916721 04-24-09

### Election to Carryback Net Operating Loss

Simon & Shirley Bernstein 7020 Lions Head Lane Boca Raton, FL 33496

Taxpayer Identification Number: 371-32-5211

For the Year Ending December 31, 2009

Simon & Shirley Bernstein hereby Elects to apply Sec. 172(b)(1)(H) under Revenue Procedure 2009-52 to carryback any NOL incurred for the tax year ended December 31, 2009. The taxpayer is not a TARP recipient nor, in 2008 or 2009, an affiliate of a TARP recipient. The NOL carryback period selected is 3 preceding years.

FORM 1040	MISCELLANEOUS INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
CANCELLATION OF DEBT - BERN INVESTMENTS LLLP CANCELLATION OF DEBT - BERN		507.
INVESTMENTS LLLP		507.
TOTAL TO FORM 1040, LINE 21	L	1,014.

FORM 1040	PENSIONS AND ANNUITIE	ES STATEMEN	т 2
NATIONAL SERVICE ASSOC PEN	ISION PLAN		
AMOUNT RECEIVED THIS YEAR NONTAXABLE AMOUNT (ROLLOW CAPITAL GAIN DISTRIBUTION	/ER 〉	275,182. 275,182.	
			0.
NATIONAL SERVICE ASSOC PEN	NSION PLAN		
AMOUNT RECEIVED THIS YEAR NONTAXABLE AMOUNT (ROLLOW CAPITAL GAIN DISTRIBUTION	/ER)	315,995. 315,995.	
			0.
TOTAL INCLUDED IN FORM 10	040, LINE 16B		

FORM	1040 SOCIAL SECURITY BENEFITS WORKSHEET	STATEMENT 3
CHEC	K ONLY ONE BOX:	
	SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)	
	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	44 040
	FORM 1040, LINE 20A	41,849.
2.	ENTER ONE HALF OF LINE 1	20,925.
	ADD THE AMOUNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 14, 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	<558,575.>
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	<537.650.>
	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	
	SUBTRACT LINE 6 FROM LINE 5	<537,650·>
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?	52,000.
	[X] 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.	^
1.0	[ ] YES. SUBTRACT LINE 8 FROM LINE 7	0.
10.	\$12,000 IF YOU CHECKED BOX B	
	\$-0- IF YOU CHECKED BOX C	
11.	SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0	
12.	ENTER THE SMALLER OF LINE 9 OR LINE 10	
	ENTER ONE HALF OF LINE 12	
	ENTER THE SMALLER OF LINE 2 OR LINE 13	
	MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-ADD LINES 14 AND 15	
	ADD LINES 14 AND 15	
<b>-</b> / •	TOTALLE BINE I DI COC (100) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
18.	TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17 * ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B	0.

FORM 1040	TAX-EXEMPT INTEREST		STATEMENT	4
NAME OF PAYER			AMOUNT	
TAX EXEMPT INTEREST TAX EXEMPT INTEREST FROM K-1 - BERNSTEIN HOLDING FROM K-1 - BERNSTEIN HOLDING FROM K-1 - ELIOT BERNSTEIN F FROM K-1 - JILL IANTONI FAM FROM K-1 - LISA S FRIEDSTEIN TOTAL TO FORM 1040, LINE 8B	SS LLC FAMILY TRUST TLY TRUST			)1. L5. L4. 1. 1.
FORM 1040	QUALIFIED DIVIDENDS		STATEMENT	5
NAME OF PAYER		ORDINARY DIVIDENDS	QUALIFIEI DIVIDENDS	
FROM K-1 - BERNSTEIN FAMILY LLLP FROM K-1 - BERNSTEIN FAMILY		12,827.	10,4	73.
LLLP FROM K-1 - BERNSTEIN HOLDING FROM K-1 - BERNSTEIN HOLDING FROM K-1 - ELIOT BERNSTEIN F FROM K-1 - ELIOT BERNSTEIN F FROM K-1 - JILL IANTONI FAMI FROM K-1 - JILL IANTONI FAMI FROM K-1 - LISA S FRIEDSTEIN TRUST FROM K-1 - LISA S FRIEDSTEIN TRUST TRUST TOTAL INCLUDED IN FORM 1040	GS LLC GS LLC FAMILY TRUST FAMILY TRUST ILY TRUST ILY TRUST ILY TRUST N FAMILY	12,827. 134. 135. 1. 1. 2.		03. 03. 1. 1. 1.
SCHEDULE A MISCELLANI	EOUS DEDUCTIONS SUBJECT	TO FLOOR	STATEMENT	6
DESCRIPTION			AMOUNT	
WACHOVIA BANK  FROM K-1 - BERNSTEIN FAMILY  FROM K-1 - BERNSTEIN FAMILY  FROM K-1 - BERNSTEIN HOLDING  FROM K-1 - BERNSTEIN HOLDING  FROM K-1 - TT/ SIMON L BERNS	INVESTMENTS LLLP GS LLC GS LLC			70. 59. 58.

SIMON & SHIRLEY BERNSTEIN				371-32-52	211
FROM K-1 - ELIOT BERNSTEIN FAMILY FROM K-1 - ELIOT BERNSTEIN FAMILY FROM K-1 - JILL IANTONI FAMILY TR FROM K-1 - LISA S FRIEDSTEIN FAMI	TRUST UST				1. 1. 1.
TOTAL TO SCHEDULE A, LINE 23			=	18,4	37.
SCHEDULE A POINTS NOT	REPORTED ON I	FORM 1098		STATEMENT	7
DESCRIPTION	DATE RE- FINANCED	TOTAL POINTS	AMORT. PERIOD /MOS.	AMORTIZAT THIS YEAI	
WELLS FARGO	01/01/01	26,759.	180	1,7	84.
TOTAL TO SCHEDULE A, LINE 12		,		1,7	84.
SCHEDULE A CAS	H CONTRIBUTION	<b>1</b> S		STATEMENT	8
DESCRIPTION		AMOUI 50% LII		AMOUNT 30% LIMIT	
VARIOUS ORGANIZED CHARITIES FROM K-1 - LIC HOLDINGS INC FROM K-1 - BERNSTEIN FAMILY INVES FROM K-1 - BERNSTEIN FAMILY INVES FROM K-1 - BERNSTEIN FAMILY INVES	TMENTS LLLP		1,350. 2,096. 3. 3.		1.
SUBTOTALS		2	3,452.		1.
TOTAL TO SCHEDULE A, LINE 16			:	23,4	53.
SCHEDULE A INVE	STMENT INTERE;	ST		STATEMENT	9
DESCRIPTION				AMOUNT	
FROM K-1 - BERNSTEIN FAMILY INVES FROM K-1 - BERNSTEIN FAMILY INVES FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC	TMENTS LLLP				
TOTAL TO SCHEDULE A, LINE 14			•	4,7	77.

SCHEDULE A MEDICAL AND DENTAL EXPENSES	STATEMENT 10
DESCRIPTION	TRUOMA
MEDICARE PREMIUMS WITHHELD MEDICARE PREMIUMS WITHHELD	4,501. 3,700.
TOTAL TO SCHEDULE A, LINE 1	8,201.
SCHEDULE B INTEREST INCOME	STATEMENT 11
NAME OF PAYER	AMOUNT
LEGACY BANK OF FLORIDA LYDIAN BANK & TRUST OPPENHEIMER (3474) WACHOVIA BANK (315) WACHOVIA BANK (945) FROM K-1 - LIC HOLDINGS INC FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - BERNSTEIN HOLDINGS LLC FROM K-1 - TT/ SIMON L BERNSTEIN IRREV TR FROM K-1 - ELIOT BERNSTEIN FAMILY TRUST FROM K-1 - ELIOT BERNSTEIN FAMILY TRUST FROM K-1 - JILL IANTONI FAMILY TRUST FROM K-1 - JILL IANTONI FAMILY TRUST FROM K-1 - LISA S FRIEDSTEIN FAMILY TRUST FROM K-1 - LISA S FRIEDSTEIN FAMILY TRUST FROM K-1 - LISA S FRIEDSTEIN FAMILY TRUST	1,615. 1,200. 238. 26. 17. 219,775. 17,484. 17,485. 176. 175. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
SCHEDULE D NET SHORT-TERM GAIN OR LOSS FROM FORMS 6252, 4684, 6781 AND 8824	STATEMENT 12
DESCRIPTION OF PROPERTY	GAIN OR LOSS
FORM 6781, PART I	<270.:
TOTAL TO SCHEDULE D, PART I, LINE 4	<270.:

SCHEDULE D	NET LONG-TERM GAIN OR LO 4797, 2439, 6252, 4684,		STATEMENT 13
DESCRIPTION OF P	ROPERTY	GAIN OR LOSS	28% GAIN
FORM 6781, PART FORM 4797	I	<405.> 352.	
TOTAL TO SCHEDUL	E D, PART II, LINE 11	<53.>	
SCHEDULE D	NET SHORT-TERM GAIN OF PARTNERSHIPS, S CORPORATIONS		STATEMENT 14
DESCRIPTION OF A	CTIVITY		GAIN OR LOSS
	GS LLC FAMILY TRUST FAMILY TRUST ILY TRUST ILY TRUST IN FAMILY TRUST		13,406. 13,406. 131. 132. 1. 2. 1. 1.
TOTAL TO SCHEDUL	E D, PART I, LINE 5		27,080.
SCHEDULE D	NET LONG-TERM GAIN OF PARTNERSHIPS, S CORPORATIONS		STATEMENT 15
DESCRIPTION OF A	CTIVITY	GAIN OR LOSS	28% GAIN
BERNSTEIN FAMILY BERNSTEIN HOLDIN BERNSTEIN HOLDIN ELIOT BERNSTEIN ELIOT BERNSTEIN JILL IANTONI FAM LISA S FRIEDSTEI	IGS LLC FAMILY TRUST FAMILY TRUST IILY TRUST IN FAMILY TRUST	<5,791. <5,790. <57. <56. <1. <1. <1.	> > > > >
TOTAL TO SCHEDUL	E D, PART II, LINE 12	<11,695.	>

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 16
2. DID YOU FILE F X NO. ENTER -0 YES. ENTER T 3. SUBTRACT LINE 4. ENTER THE LOSS 5. COMBINE LINES		<720,983.> JNT. 3,000.
8. ENTER THE GAIN LINE 15 9. ADD LINES 6 AN 10. SHORT-TERM CAP	FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT, IF ANY, FROM SCHEDULE D,  D 8	
12. ENTER THE GAIN LINE 7  13. SUBTRACT LINE ENTER -0  14. ADD LINES 12 A 15. LONG-TERM CAPI	FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT, IF ANY, FROM SCHEDULE D,  7 FROM LINE 6. IF ZERO OR LESS,  ND 13	
SCHEDULE E	OTHER EXPENSES	STATEMENT 17
BERNSTEIN FAMILY I	NVESTMENTS LLLP - ROYALTY	
DESCRIPTION		AMOUNT
ROYALTY INCOME DEL INVESTMENTS LLLP	OUCTION - BERNSTEIN FAMILY	4.
TOTAL TO SCHEDULE	E, PAGE 1, LINE 18	4.

SCHEDULE E			OTI	IER EXPENS	ES	STA	ATEMENT	18
BERNSTEIN	FAMILY IN	VESTME	NTS LLLP -	ROYALTY				
DESCRIPTIO	N						AMOUNT	
ROYALTY IN		CTION	- BERNSTEIN	T FAMILY				5.
TOTAL TO S	CHEDULE E	, PAGE	1, LINE 18	3				5.
SCHEDULE E	INCO	ME OR	(LOSS) FROM	1 PARTNERS	HIPS AND S C	ORPS ST	ATEMENT	19
NAME								
EMPLOYER ID NO.	ANY NOT X AT IF RISK FRN	CODE	PASSIVE LOSS	PASSIVE INCOME	NONPASSIVE LOSS	SEC. 179 DEDUCTION	NONPASS INCOM	
		P			0.			
LIC HOLDIN 20-5290314	<u>.</u>	S			855,422.			
BERNSTEIN 26-2124343 BERNSTEIN	}	P	174.				3	10.
26-2124343 BERNSTEIN	}	P	174.				3	11.
32-0234597 BERNSTEIN	•	P	2.					3.
DUVNOTULI	CONTRACTOR OF THE STATE OF THE	LILIK.						
32-0234597		P	2.		•			3.

SCHEDULE E	INCOME OR	(LOSS) FROM	ESTATES AN	D TRUSTS S	TATEMENT 20
NAME	EMPLOYER ID NO.	PASSIVE LOSS	PASSIV INCOME		NONPASSIVE INCOME
TT/ SIMON L BERNSTEIN IRREV TR	51-6600239	0.			
ELIOT BERNSTEIN FAMILY TRUST	65-6477114	0.			
ELIOT BERNSTEIN FAMILY TRUST	65-6477114	0.			
JILL IANTONI FAMILY TRUST	65-6477115	0.			
JILL IANTONI FAMILY TRUST	65-6477115	0.			
INVESTMENT INTEREST EXPENSE	65-6477115			1.	
LISA S FRIEDSTEIN FAMILY TRUST	65-6477116	0.			
LISA S FRIEDSTEIN FAMILY TRUST	65-6477116	0.			
TOTALS TO SCHEDULE	E, LINE 34	0.		1.	

FORM 1116	SUMMARY OF FO	REIGN TAXES	S PAID OR ACCRU	JED STA	TEMENT 21
PASSIVE INCOME					
NAME OF COUNTRY IM	POSING TAX				
DATE PAID ACCRUED	AMT/FOREIGN CURRENCY		AMOUNT IN U.S RENT/ROYALTY		OTHER
VARIOUS					
VARIOUS	0.				110.
VARIOUS	0.				110.
VARIOUS	0.				1.
VARIOUS	0.				1.
					222.
TOTAL TO FORM 1116	, PART II, LIN	1E 8			222.
PRIOR YEAR TAXES P		RRENT YEAR: FOREIGN AMT	CONV. RATE	U.S. AMT	
2008 2007 2006 2005 2004	_				
TOTAL PRIOR YEAR T	AXES PAID IN T	THE CURRENT	YEAR		

	**************************************						
FORM 1116 EX	PENSES DIR	ECTLY AI	LOCABLE TO	FOREIGN I	NCOME S	PATEMENT	22
DESCRIPTION				COUNTRY		AMOUNT	
BERNSTEIN FAMILY I BERNSTEIN FAMILY I BERNSTEIN FAMILY I BERNSTEIN FAMILY I	NVESTMENTS NVESTMENTS	LLLP LLLP	VARION VARION VARION VARION	JS JS			30. 69. 4.
TOTAL TO FORM 1116	, PART I,	LINE 2				2,6	08.
FORM 4797	PROP	ERTY HEI	D MORE THAI	N ONE YEAR	. S	PATEMENT	23
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOS	ន
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP							74. 74.
BERNSTEIN HOLDINGS LLC BERNSTEIN HOLDINGS LLC							2.
TOTAL TO 4797, PAR	T I, LINE	2				3	52.
FORM 6251		PASSI	IVE ACTIVIT	IES	S'	PATEMENT	24
			NET I	NCOME (LOS	S)		
NAME OF ACTIVITY	FO	RM	AMT	REGU	LAR	ADJUSTMEN	T
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY	FORM SCH E		17	4.	174.	1	
INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP	FORM		<17		<174.>		
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN HOLDINGS BERNSTEIN HOLDINGS BERNSTEIN HOLDINGS BERNSTEIN HOLDINGS	LLC SCH E	4797 4797	<17 <sub>-</sub>		<174.> 2. <2.> 2. <2.> 2.		
TOTAL TO FORM 6251	, LINE 20						

FORM 6251	INTEREST FROM SPECIFIED PRIVATE	ACTIVITY BONDS	STATEMENT	25
DESCRIPTION			AMOUNT	
FROM K-1 - BE	RNSTEIN FAMILY INVESTMENTS LLLP		6	01.
TOTAL TO FORM	6251, LINE 13		6	01.
FORM 1116 AMT	U.S. LOSSES ALLOCATED TO FORM 111	6 ALT MIN TAX	STATEMENT	26
ALTERNATIVE M	INIMUM TAXABLE INCOME		<660,9	62.>
PASSIVE AL	TERNATIVE MINIMUM TAXABLE INC	2,777.	2,7	77.
TOTAL U.S. LO	SSES ALLOCATED TO FORM 1116 ALT MIN	TAX	663,7	39.
FORM 4952	INVESTMENT INTEREST EXP	ENSE	STATEMENT	27
DESCRIPTION		CURRENT	CARRYOVEF	 l
FROM K-1 - BE FROM K-1 - BE FROM K-1 - BE	RNSTEIN FAMILY INVESTMENTS LLLP RNSTEIN FAMILY INVESTMENTS LLLP RNSTEIN HOLDINGS LLC RNSTEIN HOLDINGS LLC LL IANTONI FAMILY TRUST	2,365. 2,365. 23. 24. 1.		
TOTALS TO FOR	M 4952, LINES 1 AND 2	4,778.		<del></del>
FORM 4952	INCOME FROM PROPERTY HELD FOR	INVESTMENT	STATEMENT	28
DESCRIPTION			AMOUNT	
			258,2 26,0	
TOTAL TO FORM	4952, LINE 4A		284,3	35.
			<del></del>	

FORM 4952	IN	VESTMENT EXI	PENSES	S	STATEMENT	29
DESCRIPTION					AMOUNT	
BERNSTEIN FAMILY INVESTI BERNSTEIN FAMILY INVESTI SCHEDULE A DEDUCTIONS				_	18,4	4. 5. 38.
TOTAL TO FORM 4952, LINI	<b>Ξ</b> 5				18,4	47.
FORM 4952 INVESTME	NT INTERES	I EXPENSE DI	EDUCTION SUM	MARY S	STATEMENT	30
NAME	FORM OR SCHEDULE	INVESTMENT INTEREST EXPENSE	INVESTMENT INTEREST EXPENSE C/O	INTEREST	NT INVESTM	ENT ST
FROM K-1 - BERNSTEIN F FROM K-1 - BERNSTEIN F FROM K-1 - BERNSTEIN H FROM K-1 - BERNSTEIN H FROM K-1 - JILL IANTON	SCH A	2,365. 2,365. 23. 24. 1.	0. 0. 0. 0.	( (		365. 365. 23. 24.
TOTALS		4,778.	0.	(	3. 4,7	78.
FORM 4952AMT	INVESTM	ENT INTERES	r expense	S	STATEMENT	31
DESCRIPTION			CURR	ENT	CARRYOVEF	<b>?</b>
FROM K-1 - BERNSTEIN FAI FROM K-1 - BERNSTEIN FAI FROM K-1 - BERNSTEIN HOT FROM K-1 - BERNSTEIN HOT FROM K-1 - JILL IANTONI	MILY INVES' LDINGS LLC LDINGS LLC	IMENTS LLLP		2,365. 2,365. 23. 24. 1.		
TOTALS TO FORM 4952AMT,	LINES 1 A	ND 2		4,778.		

<del></del>				_	
FORM 6781 PART	I - SECTION 1	256 CONTRACT	S MARKED TO	MARKET STA	PEMENT 32
(A) IDENTIFICATION O	F ACCOUNT		(B) (I	oss) (c	) GAIN
FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN	FAMILY INVEST HOLDINGS LLC			334. 334. 3. 4.	
TOTAL TO FORM 6781,	LINE 1, COLUM	NS B AND C		675.	
FORM 8582	OTHER PASSIV	E ACTIVITIES	G - WORKSHEET	r 3 sta	rement 33
	CURRENT	YEAR	PRIOR YEAR UNALLOWED	OVERALL GA	IN OR LOSS
NAME OF ACTIVITY	NET INCOME	NET LOSS	LOSS	GAIN	LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY	174.	<3,452.>	<1,374.>	>	<4,652.>
INVESTMENTS LLLP BERNSTEIN HOLDINGS	174.	<3,452.>	<1,375.	>	<4,653.>
LLC BERNSTEIN HOLDINGS	2.	<33.>	<13.	>	<44.>
LLC	2.	<35.>	<14.>	>	<47.>
JILL IANTONI FAMILY TRUST	0.	0.	<9.	>	<9 <b>.</b> >
TOTALS	352.	<6,972.>	<2,785.	· ·	<9,405.>
FORM 8582 AL	LOCATION OF U	NALLOWED LOS	SSES - WORKSI	HEET 5 STA	TEMENT 34
		FORM			
NAME OF ACTIVITY		OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
BERNSTEIN FAMILY INV BERNSTEIN FAMILY INV BERNSTEIN HOLDINGS L BERNSTEIN HOLDINGS L JILL IANTONI FAMILY	LC LC		4,652. 4,653. 44. 47. 9.	.494630516 .494736842 .004678363 .004997342	44. 47.
TOTALS			9,405.	1.00000000	9,405.

FORM 8582		ALLOWED LO	SSES - WOR	RKSHEET 6	STA	rement 35
NAME OF ACTIVIT	У		FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
JILL IANTONI FA	- MILY TRUST		FORM 4797	9.	9.	\ <u></u>
TOTALS				9.	9.	
FORM 8582		ITIES WITH ERENT FORMS		PORTED ON 2 ( JLES - WORKS)		PEMENT 36
GROUP NO. NAME	FORM OR SCHEDULE NET LOSS	FORM OR SCHEDULE NET GAIN	OVERALL LOSS	RATIO	UNALLOWED LOSS	ALLOWED LOSS
1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	0.	174.	0.	.000000000	0.	0.
INVESTMENTS	4,826.	0.	4,826.	1.000000000	4,652.	174.
			4,826.	1.000000000	4,652.	174.
2 BERNSTEIN FAMILY INVESTMENTS 2 BERNSTEIN FAMILY	0.	174.	0.	.000000000	0.	0.
INVESTMENTS	4,827.	0.	4,827.	1.000000000	4,653.	174.
			4,827.	1.000000000	4,653.	174.
3 BERNSTEIN HOLDINGS LLC 3 BERNSTEIN	0.	2.	0.	.000000000	0.	0.
HOLDINGS LLC	46.	0.	46.	1.00000000	44.	2.
			46.	1.00000000	44.	2.
4 BERNSTEIN HOLDINGS LLC 4 BERNSTEIN	0.	2.	0.	.000000000	0.	0.
HOLDINGS LLC	49.	0.	49.	1.000000000	47.	2.
			49.	1.00000000	47.	2.

	SUM	MARY OF F	PASSIVE ACT	CVITIES	STA	rement 37
R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR S YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY		174.		174.		
INVESTMENTS LLLP BERNSTEIN FAMILY			> <1,374.:	> <4,826.>	4,652.	174.
INVESTMENTS LLLP BERNSTEIN FAMILY	SCH E	174.		174.	4 (5)	174
INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC	FORM 4797	•	·	> <4,827.> 2.	4,003.	174.
BERNSTEIN HOLDINGS LLC BERNSTEIN	SCH E FORM 4797	<33.			44.	2.
HOLDINGS LLC BERNSTEIN	SCH E	2.		2.		
HOLDINGS LLC JILL IANTONI FAMILY TRUST	FORM 4797	<35. 0.				2.
TOTALS				> <9,405.>		352.
PRIOR YEAR CARRYOV	ERS ALLOWI	DUE TO	CURRENT YE.	AR NET ACTIV	TITY INCOM	E
TOTAL TO FORM 8582	, LINE 16	•				
						352.
FORM 8582-CR	OTI		VE ACTIVITY RKSHEET 4	CREDITS	STA	352. TEMENT 38
FORM 8582-CR NAME OF ACTIVITY	OTI	• OW		PRIOR YE UNALLOW	EAR VED	
NAME OF ACTIVITY BERNSTEIN FAMILY	FC	FORM SORM 8907	CURRENT	PRIOR YE UNALLOW	EAR VED IS C	TEMENT 38 TOTAL REDITS
<u></u>	FC C2	FORM S	CURRENT	PRIOR YE UNALLOW S CREDIT	EAR VED	TEMENT 38 TOTAL REDITS

FORM 8582-CR	ALLOCATIO	ON OF UNA	LLOWED CRED	ITS - WORKSH	IEET 8 STA	ATEMENT 39
NAME OF ACTIVITY			FORM	CREDITS	RATIO	UNALLOWED CREDITS
BERNSTEIN FAMILY	INVESTMEN	ITS LLLP	FORM 8907	1.	.166666667	1.
BERNSTEIN FAMILY	TNVESTMEN	መደ ቤቤቤዎ	CARRYOVER FORM 8907	4. 1.	.6666666666666666666666666666666666666	4. 1.
	T14 4 710 T11-		Total ope,			<del></del>
TOTALS				6. 1 	1.000000000	6.
FORM 8582-CR		ALLOWED	CREDITS -	WORKSHEET 9	STA	ATEMENT 40
NAME OF ACTIVITY			FORM	CREDITS	UNALLOWED CREDITS	ALLOWED CREDITS
BERNSTEIN FAMILY	INVESTMEN	TS LLLP	FORM 8907		1.	0.
BERNSTEIN FAMILY	TNVESTMEN	ITS LLLP	CARRYOVER FORM 8907		4. 1.	0.
TOTALS				6.	6.	0.
FORM 8582	OTHE		ATIVE MINIM ACTIVITIES	IUM TAX S - WORKSHEE!		ATEMENT 41
		CURRENT	YEAR	PRIOR YEAR UNALLOWED	OVERALL G	AIN OR LOSS
NAME OF ACTIVITY	NET	INCOME	NET LOSS	LOSS	GAIN	LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY	•	174.	<3,005.>	<1,269.	>	<4,100.
INVESTMENTS LLLP	1	174.	<3,005.>	<1,268.	>	<4,099.
	GS	2.	<29.>	<13.:	>	<40.
BERNSTEIN HOLDIN LLC		2.				
BERNSTEIN HOLDIN LLC BERNSTEIN HOLDIN LLC	GS	2.	<21.>	<13.	>	<32.

FORM 8582	ALLOCAT:		TIVE MINIMULLOWED LOSS	UM TAX SES - WORKSHI		ATEMENT 42
NAME OF ACTIVITY	Ž	;	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
BERNSTEIN FAMILY INVESTMENTS LLLI BERNSTEIN FAMILY INVESTMENTS LLLI BERNSTEIN HOLDII BERNSTEIN HOLDII	SCH E SCH E SCH E SCH E		4,099. 40.	.495707895 .495586991 .004836175 .003868939	4,100. 4,099. 40. 32.	
TOTALS			-	8,271. 1	.000000000	8,271.
FORM 8582	ACTIV	ITIES WITH	TIVE MINIM LOSSES REI S OR SCHEDI	PORTED ON 2		ATEMENT 43
GROUP NO. NAME	FORM OR SCHEDULE NET LOSS	FORM OR SCHEDULE NET GAIN	OVERALL LOSS	RATIO	UNALLOWED LOSS	ALLOWED LOSS
1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	0.	174.			0	
INVESTMENTS	4,274.	0.	4,274.	1.00000000	4,100	. 174
			4,274.	1.000000000	4,100	. 174
2 BERNSTEIN FAMILY INVESTMENTS 2 BERNSTEIN	0.	174.	0.	.000000000	0	. 0
FAMILY INVESTMENTS	4,273.	0.	4,273.	1.000000000	4,099	. 174.
			4,273.	1.00000000	4,099	. 174
3 BERNSTEIN HOLDINGS LLC 3 BERNSTEIN	0.	2.	0.	.000000000	0	. 0
HOLDINGS LLC	42.	0.	42.	1.000000000	40	. 2
			42.	1.00000000	40	. 2
4 BERNSTEIN HOLDINGS LLC	0.	2.	0.	.000000000	0	. 0.

SIMON	ራ	SHIRLEY	BERNSTEIN
DITION	OX.		

371-32-5211

4 BERNSTEIN HOLDINGS LLC	34.	0.	34. 1.(	00000000	32.	2.
			34. 1.0	00000000	32.	2.
FORM 8582AMT	SUMMAR	Y OF PASSIVE	E ACTIVIT	IES - AMT	STAT	EMENT 44
R R E A NAME	FORM OR SCHEDULE	e Gain/Loss ye	PRIOR EAR C/O (		UNALLOWED LOSS	ALLOWED LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP	SCH E FORM 4797	174. <3,005.> 174.	<1,269.>	174. <4,274.> 174.	4,100.	174.
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC BERNSTEIN	FORM 4797 SCH E	2.		<4,273.>	·	174.
HOLDINGS LLC BERNSTEIN HOLDINGS LLC BERNSTEIN HOLDINGS LLC	FORM 4797 SCH E	<29.> 2. <21.>	<13.> <13.>	<42.> 2. <34.>		2.
TOTALS	=	<5,708.>	<2,563.>	<8,271.>	8,271.	352.
PRIOR YEAR CARRYOVE TOTAL TO FORM 8582A			RENT YEAI	R NET ACTIV	'ITY INCOME	352.
FORM 1116	FOREIGN PA	INCOME ARTNERSHIP/S	SUMMARY 5-CORPORA	rion income		EMENT 45
DESCRIPTION					A	MOUNT
					<u></u>	
BERNSTEIN FAMILY IN BERNSTEIN FAMILY IN BERNSTEIN HOLDINGS BERNSTEIN HOLDINGS	VESTMENTS LLC					2,431. 2,431. 485. 486.

#### DECEASED

E 104	U EX.	J.S. Individual Income Tax Return	:'' <b>:</b> '2010	(99) IRS Use Only - De	not write	or staple in this space,
Name,		e year Jan. 1-Dec. 31, 2010, or other tax year beginning	, 2010,	ending ,20		OMB No. 1545-0074
Address,	R — You	ur first name and initial	Last name			Your social security number
and SSN		IMON	BERNSTEI			371 32 5211
	ıı a	joint return, spouse's first name and initial		DEC. 12/09/10	)	Spouse's social security number
		HIRLEY	BERNSTEI			347 30 9749
See	<b></b>	me address (number and street). If you have a P.C	). box, see instructions.	Apt	.no.	Make sure the SSN(s) above
separate instructions.		020 LIONS HEAD LANE				▲ and on line 6c are correct.
	L City	town or post office, state, and ZIP code.				Checking a box below will not
Presidential   Election Camp		OCA RATON, FL 33496	ag jointhy want \$2 to ge	An Alata & cont		change your tax or refund.
		Check here if you, or your spouse if filing Single				You Spouse ing person). If the qualifying
Filing Statu	IC .	<ul> <li>Single</li> <li>Married filing jointly (even if only one had in</li> </ul>	•			ependent, enter this child's
	3	Married filing separately. Enter spouse's SS		name here.	A your ut	ppendent, enter ans child s
Check only one box.	-	and full name here.	5	_	ith dener	udent child
	6a	X Yourself. If someone can claim you as a de				) Boxes checked )
Exemptions		X Spouse			*********	on 6a and 6b
		Dependents:	(2) Dependent's social	(3) Dependent's	(4)√ if	on 6c who:
		(1) First name Last name	security number	relationship to you	under ag qualifying tax cre	le 17 • lived with you
	_		; :		iaxer	you due to divorce or separation (see Instructions)
If more than four	. <del>-</del>		. : :		$\top$	
dependents, see instructions and	_					Dependents on 6c not entered above
check here			: :			Add numbers
	ď	Total number of exemptions claimed				on lines
Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2	14>	***************************************		135,000.
Attach Form(s)	8a		******		88	51,050.
W-2 here. Also	b	Tax-exempt interest. Do not include on line 8a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	86   19,05	0.	
attach Forms	9a	Ordinary dividends. Attach Schedule B if required	d		98	27,083.
W-2G and 1099-R if tax	b	Qualified dividends	••••••	96 21,03	3.	CONTO TOTAL CONTO
was withheld.	10	Taxable refunds, credits, or offsets of state and I				
	11	Alimony received		***************************************	11	
If you did not	12	Business income or (loss). Attach Schedule C or	C-EZ			
get a W-2,	13	Capital gain or (loss). Attach Schedule D if require			13	<del></del>
see page 20.	14	Other gains or (losses). Attach Form 4797			14	·
Enclose, but do	15a	IRA distributions 15a		b Taxable amount		
not attach, any		Pensions and annuities 16a		b Taxable amount	16	
payment. Also,	17	Rental real estate, royalties, partnerships, S corp	orations, trusts, etc. Attact	n Schedule E	17	<u> </u>
piease use Form 1040-V.	18 19	1 /				
	20a	Unemployment compensation  Social security benefits   20a	40,636.	h Tayahla amayınt	19	
	20a 21	Other income. List type and amount	40,030.	b Taxable amount	20	b 34,541.
	£1	Cities income. List type and amount			2-	The state of the s
	22	Combine the amounts in the far right column for	lines 7 through 21. This is	vour total income	22	
	23			23	Charles and the state of the st	470,070
Adjusted	24	Educator expenses Certain business expenses of reservists, performing artis officials. Attach Form 2106 or 2106-EZ	ts, and fee-basis government	24		ADMONANTA ADMONANTA
Gross	25	Health savings account deduction. Attach Form 8	3889	25		Rich (Mark of Mark of
Income	26		***************************************	26	The second secon	And the second of the second o
	27	One-half of self-employment tax. Attach Schedul	e SE	27		Ag to read to the control of the con
	28	Self-employed SEP, SIMPLE, and qualified plans		28		ammodels.  ammodels.
	29	Self-employed health insurance deduction		29		CA CONTROL OF THE CON
	30	Penalty on early withdrawal of savings	***************************************	30		The control of the co
	31a	Alimony paid b Recipient's SSN ▶	:	31a		To application of the control of the
	32	IRA deduction		32		The state of the s
	33	Student loan interest deduction		33	2	20 habon ye, abore namadoni abon
	34	Tuition and fees. Attach Form 8917	***************************************	34	100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	On Andrews On And
	35	Domestic production activities deduction. Attach	Form 8903			Or or Special Control
010001	36	Add lines 23 through 31a and 32 through 35 $\dots$			36	
010001 01-27-11	37	Subtract line 36 from line 22. This is your adjust	ted gross income		37	478,076.

Form 1040 (2010)	S	IMON & SHIRLEY BERNSTEIN	371-32-5211		Page 2
Tax and		Amount from line 37 (adjusted gross income)		38	478,076.
Credits		Check \[ \bigcelow{X} \] You were born before January 2, 1946, \[ \bigcelow{\text{Blind.}} \]			
		if: X Spouse was born before January 2, 1946, Blind.			
	h	If your spouse itemizes on a separate return or you were a dual-status alien, ch		2000 00 00 00 00 00 00 00 00 00 00 00 00	
	40	Itemized deductions (from Schedule A) or your standard deduction (see instra		40	141,146.
	41	Subtract line 40 from line 38		41	336,930.
	42	Exemptions. Multiply \$3,650 by the number on line 6d		42	7,300.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, a	enter =N-	43	329,630.
	44	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972	miles b	44	82,773.
	45	Alternative minimum tax. Attach Form 6251		45	02,773.
	46	Add lines 44 and 45		46	82,773.
	47	Foreign tax credit. Attach Form 1116 if required			04,773.
	48	Credit for child and dependent care expenses. Attach Form 2441			
	49			A STATE OF THE STA	
		Education credits from Form 8863, line 23		AR AV (000 / ) / (000	
	50	Retirement savings contributions credit. Attach Form 8880			
	51	Child tax credit (see instructions)	51	dispersion of the second	
	52	Residential energy credits. Attach Form 5695			
	53	Other credits from Form: a 3800 b 8801 c	53	Service and the service and th	104
	54	Add lines 47 through 53. These are your total credits		54	124.
Other w	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	<b>&gt;</b>	55	82,649.
Other Taxes	56	Self-employment tax. Attach Schedule SE	T. 0040	56	
Idaes	57	Unreported social security and Medicare tax from Form: a 4137 b		57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329		58	
	59		405, line 16	59	00.540
	60	Add lines 55 through 59. This is your total tax		60	82,649.
Payments		Federal income tax withheld from Forms W-2 and 1099			
	62	2010 estimated tax payments and amount applied from 2009 return		Commence of the commence of th	
Francis	63	Making work pay credit. Attach Schedule M			
If you have		ı Earned income credit (EIC)	64a		
chlid, attach Schedule EIC.		Nontaxable combat pay election	- Vindo de Contraction Contrac	Total Marie State of the	
Gorieddie Elo.	65	Additional child tax credit. Attach Form 8812		SUPPLIES OF THE SECOND	
	66	American opportunity credit from Form 8863, line 14		Action and the control of the contro	
	67	First-time homebuyer credit from Form 5405, line 10		man and an analysis of the control o	
	68	Amount paid with request for extension to file		200 A 100 F 10 F 10 F 10 F 10 F 10 F 10 F	
	69	Excess social security and tier 1 RRTA tax withheld	69	2000-1000-1000-1000-1000-1000-1000-1000	
	70	Credit for federal tax on fuels. Attach Form 4136	70		
		Credits from Form: a 2439 b 8839 c 8801 d 8885	71		
	72	Add lines 61, 62, 63, 64a, and 65 through 71. These are your total payments		72	99,987.
Refund	73			73	17,338.
Direct deposit?		Amount of line 73 you want refunded to you. If Form 8888 is attached, check t	nere	74a	17,338.
See		Routing			
Instructions.	75	Amount of line 73 you want applied to your 2011 estimated tax	75	Action of the control	
Amount	76	Amount you owe. Subtract line 72 from line 60. For details on how to pay, see	instructions	76	
You Owe	77	Estimated tax penalty (see instructions)	. 77		
Third Party		Do you want to allow another person to discuss this return with the IRS (see inst	ructions)? X Yes. Complete b	elow.	No No
Designee	n.	rsignee's ► GERALD R. LEWIN Phone no.	COULT 234-3036	numbe	(PIN) 50505
Sign	and o	or penalties of perjury, I declare that I have examined this return and accompanying schedules a complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer.	and statements, and to the best of my kno parer has any knowledge.	wiedge a	nd belief, they are true, correct,
Here Joint return?		Aour signature H.T.T.T.N.G. AS SOKATIVO 報酬G SEO C Porticon patter	on .	Day	time phone number
See page 12.		EXECUT			
Keep a copy for your	•	Spouse's signature, if a joint return, both must sign. Date Spouse's occur	•		
records.		INSURA	NCE	Victoria de la composición del composición de la composición de la composición de la composición de la composición del composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la c	to common many distributions from the common to the common
	Prir	it/Type preparer's name Preparer's signature	Date Check	lif P	PTIN
Paid			self-employed		***
		RALD R. LEWIN			01266202
Use Only	Firm	n's name ► CBIZ GOLDSTEIN LEWIN	Firm's EIN		1900735
040002		1675 N. MILITARY TRAIL, FIFTH	FLOOR Phone no. (	561)	994-5050
010002 12-22-10	Firm	n's address ► BOCA RATON, FL 33486			

#### SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on Form 1040

#### **Itemized Deductions**

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

OMB No. 1545-0074

2010
Attachment
Sequence No. 07

SIMON & SHIRLEY BERNSTEIN 371 32 5211 Medical Caution. Do not include expenses reimbursed or paid by others. Medical and dental expenses (see instructions) SEE STATEMENT 10 and 62,544. 1 Dental Enter amount from Form 1040, line 38 **Expenses** Multiply line 2 by 7.5% (.075) 35,856. 3 26,688. Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-... Taxes You State and local (check only one box): Paid SEE STATEMENT 11 a locome taxes, or 1,895. b X General sales taxes Real estate taxes (see instructions) 17,861 New motor vehicle taxes from line 11 of the worksheet on page 2 (for certain vehicles purchased in 2009). Skip this line if you checked box 5b Other taxes. List type and amount Add lines 5 through 8 19,756. Interest 60,943. Home mortgage interest and points reported to you on Form 1098 Home mortgage interest and points reported to you on Form 1098. If paid to the person You Paid from whom you bought the home, see instructions and show that person's name, identifying no., and address Note. Your mortgage 1,784. Points not reported to you on Form 1098. See instructions for special rules STMT 7 12 interest deduction may Mortgage insurance premiums (see instructions) 13 be limited (see 54. Investment interest. Attach Form 4952 if required. (See instructions.) STMT 14 instructions). 62.781. Add lines 10 through 14. 15 STMT 8 Gifts to 2.843. Gifts by cash or check. If you made any gift of \$250 or more, see instructions 16 Charity Other than by cash or check. If any gift of \$250 or more, see instructions. If you made a You must attach Form 8283 if over \$500 17 gift and got a 29,078. 18 Carryover from prior year benefit for it. 31,921. see instructions. 19 Add lines 16 through 18 19 Casualty and **Theft Losses** Casualty or theft loss(es). Attach Form 4684. (See instructions.) Job Expenses Unreimbursed employee expenses - job travel, union dues, job education, etc. and Certain Attach Form 2106 or 2106-EZ if required. (See instructions.) Miscellaneous **Deductions** 21 Tax preparation fees 22 Other expenses - investment, safe deposit box, etc. List type and amount SEE STATEMENT 6 137 Add lines 21 through 23 137. 24 Enter amount from Form 1040, line 38 \_\_\_\_\_\_\_25 Multiply line 25 by 2% (.02) 9.562 0. Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-27 Other Other - from list in instructions. List type and amount Miscellaneous Deductions Total Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, Itemized 141,146. line 40 **Deductions** If you elect to itemize deductions even though they are less than your standard deduction, check here LHA 019501 12-21-10 For Paperwork Reduction Act Notice, see Form 1040 instructions. Schedule A (Form 1040) 2010

Worksheet for Line 7 -	<b>Before you begin:</b> You cannot take this deduction if the amount on Form 1040, line 38, is equal to (\$260,000 if married filing jointly).	o or greater than \$135,000
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 2010 for the purchase of any new motor vehicle(s) after February 16, 2009, and before January 1, 2010 (see instructions)  1	Figure 2 per methods of the control
Use this worksheet to figure the amount to	2 Enter the purchase price (before taxes) of the new motor vehicle(s)	According to the control of the cont
enter on line 7.	3 Is the amount on line 2 more than \$49,500?  No. Enter the amount from line 1.  Yes. Figure the portion of the tax from line 1	Wilder West Andread Comments of the Comments o
(Attach to Form 1040.)	that is attributable to the first \$49,500 of the purchase price of each new motor vehicle and enter it here (see instructions).	. S
	4 Enter the amount from Form 1040, line 38	Contraction from Section 1.  Subject Contraction 1.  S
	<ul> <li>5 Enter the total of any -</li> <li>● Amounts from Form 2555, lines 45 and 50;</li> <li>Form 2555-EZ, line 18; and Form 4563, line 15, and</li> </ul>	The second secon
	Exclusion of income from Puerto Rico     Add lines 4 and 5     6	Section 2 and 1 an
	7 Enter \$125,000 (\$250,000 if married filing jointly) 7	The second secon
	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	
	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	We offer an extraction of the control of the contro
	10 Multiply line 3 by line 9	10
	11 Deduction for new motor vehicle taxes. Subtract line 10 from line 3. Enter the result here and on Schedule A, line 7	11
		Schedule A (Form 1040) 2010

#### **SCHEDULE B**

(Form 1040A or 1040)
Department of the Treasury
Internal Revenue Service
Name(s) shown on return

### **Interest and Ordinary Dividends**

Attach to Form 1040A or 1040.

See instructions.

2010 Attachment Sequence No. 08

SIMON & SHIRLEY BERNSTEIN 371 32 5211 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 SEE STATEMENT 13 51.050. 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 payer and enter the total interest shown on that form. 51,050. 2 Add the amounts on line 1 2 Excludable interest on series EE and I U.S. savings bonds issued after 1989. 3 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a 51,050. 4 Note. If line 4 is over \$1,500, you must complete Part III. Amount Part II List name of payer **Ordinary** BERNSTEIN FAMILY INVESTMENTS LLLP FROM K-1 -13,398. Dividends FROM K-1 BERNSTEIN FAMILY INVESTMENTS LLLP 13,398. FROM K-1 -BERNSTEIN HOLDINGS LLC <del>139.</del> FROM K-1 BERNSTEIN HOLDINGS LLC 139. FROM K-1 ELIOT BERNSTEIN FAMILY TRUST 1. Note: If you FROM K-1 ELIOT BERNSTEIN FAMILY TRUST received a Form JILL IANTONI FAMILY TRUST FROM K-1 1099-DIV or IANTONI FAMILY TRUST substitute FROM K-1 JILL 2. statement from FROM K-1 LISA S FRIEDSTEIN FAMILY TRUST 1. a brokerage firm, list the firm's S FRIEDSTEIN FAMILY TRUST LISA 5 name as the payer and enter thé ordinary dividends shown on that form. Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a 27,083. Note. If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign Yes Nο Foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. Accounts At any time during 2010, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing and Х requirements for Form TD F 90-22.1 **Trusts** b If "Yes," enter the name of the foreign country ▶ 8 During 2010, dld you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See page B-2 X

#### SCHEDULE C (Form 1040) Department of the Treasury

Internal Revenue Service (99)

**Profit or Loss From Business** 

(Sole Proprietorship)

Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.

Attach to Form 1040, 1040NR, or 1041.

See Instructions for Schedule C (Form 1040).

OMB No. 1545-0074

2010

Attachment
Sequence No. 09

Name of proprietor Social security number (SSN) SIMON BERNSTEIN 371-32-5211 A Principal business or profession, including product or service (see instructions) B Enter code from pages C-9, 10, & 11 INSURANCE SALES **▶** 524290 Business name. If no separate business name, leave blank. D Employer ID number (EIN), If any Ε Business address (including suite or room no.) City, town or post office, state, and ZIP code (2) \_\_\_\_ Accrual (3) \_\_\_\_ Other (specify) ▶ \_\_\_\_\_\_ (1) X Cash F Accounting method: Did you "materially participate" in the operation of this business during 2010? If "No," see instructions for limit on losses

X Yes G Н If you started or acquired this business during 2010, check here Part I Gross receipts or sales. Caution. See instructions and check the box if: • This Income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, or 87,667. • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see Instructions for limit on losses. 2 Returns and allowances 3 Subtract line 2 from line 1 87,667. Cost of goods sold (from line 42 on page 2) 4 5 Gross profit, Subtract line 4 from line 3 87,667. Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) ĥ ĥ Gross income. Add lines 5 and 6 87,667. Expenses. Enter expenses for business use of your home only on line 30. Part II 18 Advertising 8 Office expense 9 Car and truck expenses 19 Pension and profit-sharing plans \_\_\_\_\_ 19 20 (see instructions) 9 Rent or lease (see instructions): Commissions and fees 10 87.667. 10 a Vehicles, machinery, and equipment 20a 11 Contract labor Other business property 20h (see instructions) 11 21 Repairs and maintenance 21 12 Supplies (not included in Part III) 12 Depletion 22 13 Depreciation and section 179 23 Taxes and licenses 23 expense deduction (not included in 24 Travel, meals, and entertainment: Part III) (see instructions) a Travel 13 24a 14 Employee benefit programs (other b Deductible meals and entertainment (see instructions) than on line 19) 14 24b 15 15 Insurance (other than health) ..... 25 Utilities 25 16 Interest: Wages (less employment credits) 26 a Mortgage (paid to banks, etc.) 16a 27 Other expenses (from line 48 on page 2) \_\_\_\_\_ **b** Other 16b 27 Legal and professional 17 17 Total expenses before expenses for business use of home. Add lines 8 through 27 28 87.667. 28 Tentative profit or (loss). Subtract line 28 from line 7 29 29 0. Expenses for business use of your home. Attach Form 8829 30 30 Net profit or (loss). Subtract line 30 from line 29. 31 • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the 0. box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR. line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, 32a 32b • If you checked 32b, you must attach Form 6198. Your loss may be limited.

Business Name:

Description	Tax Year 2009	Tax Year 2010	Increase (Decrease)
INCOME			
GROSS INCOME	718,375.	87,667.	-630,708
EXPENSES			
COMMISSIONS AND FEES TOTAL EXPENSES	718,375. 718,375.	87,667. 87,667.	-630,708. -630,708.
NET PROFIT OR (LOSS)	0.	0.	0.
	·		
·			
		;	
	+		
·			

#### SCHEDULE D (Form 1040)

Department of the Treasury Internal Revenue Service (99) 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.

OMB No. 1545-0074
2010
Attachment

Your social security number

SIMON & SHIRLEY BERNSTEIN

371 32 5211

	MON & SHIRLEY BERNSTEIN	*	H.I.I.A	- 37			371	32 5211
16	Short-Term Capital Gains and L	OSSES - ASSET			ir or Less	1		
	(a) Description of property (Example: 100 sh, XYZ Co.)	acquired (Mo., day, yr.)	(C) Date sok (Mo., day, yr		(d) Sales price	(e) Cos other ba		(f) Gain or (loss) Subtract (e) from (d)
						+		
		+						
	Enter your short-term totals, if any, from Schedu	ule D-1, line 2		2		Contract of the Contract of th		
	Total short-term sales price amounts.							
	Add lines 1 and 2 in column (d)			3		The state of the s	A CONTROL OF THE PARTY OF THE P	
	Short-term gain from Form 6252 and short-term	gain or (loss)						
	from Forms 4684, 6781, and 8824						. 4	
	Net short-term gain or (loss) from partnerships,				n 15			A 54
	from Schedule(s) K-1						. 5	-2,71
	Short-term capital loss carryover. Enter the amo		_					( 142,63
	Carryover Worksheet in the instructions						. 6	( 142,03
	Net short-term capital gain or (loss). Combine	e lines 1 through 6	S in column (f)				.   7	-145,34
	Net short-term capital gain or (loss). Combine int II Long-Term Capital Gains and Lo	osses - Asset	s Held Mo	e Th	an One Year		<del></del>	
	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(C) Date solo (Mo., day, yı	l .)	(d) Sales price	(e) Cos other b		(f) Gain or (loss) Subtract (e) from (c
•								
		<u> </u>						
					·			l
						Security and the second of the		
	Enter your long-term totals, if any, from Schedule Total long-term sales price amounts.	e D-1, line 9		9		Applicate Section Control of Application Cont	200 - 100 -	1AMM
	Add lines 8 and 9 in column (d)			10		The second secon		
	Gain from Form 4797, Part I; long-term gain from			10 [		and the second and a second second and the second s		
	long-term gain or (loss) from Forms 4684, 6781,			MEN'	г 14		11	
	Net long-term gain or (loss) from partnerships, S				• • • • • • • • • • • • • • • • • • • •		`   <del>' ' '</del>	
	from Schedule(s) K·1				r 16		12	-110,71
	Capital gain distributions							
	Long-term capital loss carryover. Enter the amou							
						,,	. 14	( 11,74
	Net long-term capital gain or (loss). Combine I	_	***	,	•			
	Part III on page 2						. 15	-122,45

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2010

Pa	rt III Summary		
16	Combine lines 7 and 15 and enter the result	16	-267,806.
	<ul> <li>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.</li> <li>If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> </ul>		
	• If line 16 is 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.	Control of the contro	
17	Are lines 15 and 16 both gains?  Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.	A common to the	
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18	
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?  Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040, line 44 (or in the Instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below.		
	No. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.	And the second s	
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:	And a state of the	
	<ul> <li>The loss on line 16 or</li> <li>\$\(\\$3,000\), or if married filing separately, (\\$1,500)</li> </ul>	21	( 3,000.)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.	Service 1 or spanned for the service s	
22	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 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040, line 44 (or in the Instructions for Form 1040NR, line 42).  No. Complete the rest of Form 1040 or Form 1040NR.		
		40 (0,000 000 000 000 000 000 000 000 000	

	e(s) shown on return ON & SHIRLEY BERNSTEIN	Your SSN	371-32-5211
Befo	ore you begin:   See the instructions for line 44 on page 35 to see if you can use this worksheet to fig	ure your tax	ζ.
	√ If you do not have to file Schedule D and you received capital gain distributions, be s		
	checked the box on line 13 of Form 1040.	,	
1.	Enter the amount from Form 1040, line 43. However, if you are filing Form		
	2555 or 2555-EZ (relating to foreign earned income), enter the amount from		
	line 3 of the worksheet on page 36	<u>•</u>	
2.	Enter the amount from Form 1040, line 9b* 2 21 , 033.		
3,	Are you filing Schedule D?*		İ
	Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 is		
	blank or a loss, enter -0-		
	No. Enter the amount from Form 1040, line 13		
4.	Add lines 2 and 3 4. 21,033.		
5.	If filing Form 4952 (used to figure investment		
	interest expense deduction), enter any amount		
	from line 4g of that form. Otherwise, enter -0 5.  Subtract line 5 from line 4. If zero or less, enter -0 6.  Subtract line 6 from line 1. If zero or less, enter -0 7.		
6.	Subtract line 5 from line 4. If zero or less, enter -0-	<u>.</u>	
ł .		<u>•</u>	
8.	Enter:		
	\$ 34,000 if single or married filing separately, \$ 68,000 if married filing jointly or qualifying widow(er),  8. 68,000		
		<u>•</u>	
_	\$ 45,550 if head of household.		
	Enter the smaller of line 1 or line 8 9. 68,000		
10.	Enter the smaller of line 7 or line 9  10. 68,000  Subtract line 10 from line 9. This amount is taxed at 0%  11. 0		
11,	Constitution to morning of this amount to accord at the		
12.			
13.	Enter the amount from line 11 13. 0 Subtract line 13 from line 12 14. 21,033	<u>•</u>	
14.	Subtract line 13 from line 12 14. 21, U33	<u>.</u>	3,155.
	Multiply line 14 by 15% (.15)	15	3,133.
16.	Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet	40	79,618.
47			A A
	Add lines 15 and 16  Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to	'/	02,775.
10.	figure this tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet	10	86,559.
10	Tax on all taxable income. Enter the smaller of line 17 or line 18. Also include this amount on Form	10	00,000+
10.	1040, line 44. If you are filling Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44.		
	Instead, enter it on line 4 of the worksheet on page 36	10	82,773.
	motoda, onto it on the element of the page of	13,	02,770
* If y	ou are filing Form 2555 or 2555-EZ, see the footnote in the worksheet on page 36 before completing this line.		

#### 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

Your social security number

Name(s) shown on return

_	IMON & SHIRLEY BERNSTEI							-32-52	
P	art I Income or Loss From Renta							al property, use	e
	Schedule C or C-EZ (see page E-3). If you			ental income (	or loss from	Form 4835 on page 2,	line 40.		
1	List the type and address of each rental real estat	e prop	erty:		2 For ea	ch rental real estate proj	perty listed	Yes	No No
A					on line	e 1, did you or your fami	ly use it		
	BERNSTEIN FAMILY INVES	TME	NTS LLLP - 1	ROYAL		the tax year for person	al purposes	A	
В						ore than the greater of:			
	BERNSTEIN FAMILY INVES	TME	NTS LLLP - 1	ROYAL		days or		В	ŀ
						% of the total days rente tal value?	eu at fair		
٠						age E-4)		c	
	<u></u>			Proper			<del>                                     </del>	Totals	
In	come:		Α Τ	В		С	on bbA)	olumns A, B, an	nd C.)
۰	Porto received	,	^				<del>                                     </del>	7,0,10,0,0,0,0	
	Rents received	3	22.		23.		3		<u> </u>
	Royalties received	4	24.		۷3.		4		45.
	rpenses:	_					Property of the Control of the Contr		
	Advertising	5				<del></del>	Spring many view, a grant of the company of the com		
	Auto and travel (see page E-5)	6							
	Cleaning and maintenance	7					And the second s		
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10					And A Marriage with a second of the second o		
11	Management fees	11					3 / 68/0/2 (00 0 		
12	Mortgage interest paid to banks, etc.					•			
	(see page E-5)	12					12		
13	Other interest	13					English State		
	Repairs	14					Street Street Control of the Control		
	Supplies	15							
	Taxes	16		· ·					
	Utilities	17	·						
	Other (list)	<u>''</u>							
,,,	Cition (libit)								
	<del></del>								
	-	18					de Arma arma a		
_									
	Add lines 5 through 18	19					19		
	Depreciation expense or depletion (see page E-5)	20					20		
21	Total expenses. Add lines 19 and 20	21					200 AND AND AND AND AND AND AND AND AND AND		
22	Income or (loss) from rental real estate						Control Contro		
	or royalty properties. Subtract line 21						CONTROL OF THE CONTRO		
	from line 3 (rents) or line 4 (royalties).						St. Commission and the state of		
	If the result is a (loss), see page E-6 to								
	find out if you must file Form 6198	22	22.		23.				
	Destruction and a sector less than the sector less than								
23	Deductible rental real estate loss. Caution.								
	Your rental real estate loss on line 22 may be limited. See page E-6 to find out if you								
	must file Form 8582. Real estate professionals								
	must complete line 43 on page 2	23	k /	t	ì	(			
24	Income. Add positive amounts shown on line 22.		n	1		·	24		45.
	Losses. Add royalty losses from line 22 and rental			nter total loss	ses here	·····	25 (		<del>~~•</del>
	Total rental real estate and royalty income or (los					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del>   </del>		
	If Parts II, III, IV, and line 40 on page 2 do not apply								
	line 17, or Form 1040NR, line 18. Otherwise, include						26		45.

Schedule E (Form 1040) 2010 Attachment Sequence No. 13 Name(s) shown on return. Do not enter name and social security number if shown on page 1. Your social security number SIMON & SHIRLEY BERNSTEIN 371-32-5211 Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1, Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See page E-2. Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a 27 passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? Yes X No. If you answered "Yes," see page E-7 before completing this section. (b)Enter Pfor (c) Check partnership; S if foreign partnership (e) Check if any amount is not at risk (d) Employer 28 identification number partnership SEE STATEMENT 18 Α В C D Passive Income and Loss Nonpassive Income and Loss (f) Passive loss allowed (h) Nonpassive loss (g) Passive income (i) Section 179 expense (j) Nonpassive income (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 deduction from Form 4562 from Schedule K-1 Α В C D 200 Totals \_\_\_\_\_ 206,261. Totals ..... b 206,261. 30 Add columns (g) and (j) of line 29a Add columns (f), (h), and (i) of line 29b 31 31 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the 206.261. result here and include in the total on line 41 below Part III Income or Loss From Estates and Trusts (b) Employer 33 (a) Name identification number SEE STATEMENT Α В Passive Income and Loss Nonpassive Income and Loss (d) Passive income (c) Passive deduction or loss allowed (e) Deduction or loss (f) Other income from (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 Schedule K-1 Α В 34a Totals ..... Add columns (d) and (f) of line 34a 35 35 Add columns (c) and (e) of line 34b 36 36 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below 37 Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder (d) Taxable income (net loss) from Schedules Q, line 1b (b) Employer (c) Excess inclusion from (e) Income from 38 (a) Name identification number Schedules Q, line 2c Schedules Q, line 3b Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below 39 Part V Summary Net farm rental income or (loss) from Form 4835. Also, complete line 42 below 40 206,306. 41 41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NB, line 18. Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see page E-8) 42

43

43

Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate

activities in which you materially participated under the passive activity loss rules

LIC HOLDINGS INC

I.D. NUMBER: 20-5290314 TYPE: S CORPORATION

ACTIVITY INFORMATION:

LIC HOLDINGS INC

TRADE OR BUSINESS - MATERIAL PARTICIPATION

ORDINARY INCOME (LOSS)

206,254.

TOTAL NONPASSIVE INCOME (LOSS)

206,254.

OTHER K-1 INFORMATION:

INTEREST INCOME
CHARITABLE CONTRIBUTIONS
INVESTMENT INCOME
NONDEDUCTIBLE EXPENSES

14,751.

2,343.

14,751.

5,748.

2010 Income from Passth	roughs	
BERNSTEIN FAMILY INVESTMENTS LLLP I.D. NUMBER: 26-2124343 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN FAMILY INVESTMENTS LLLP		
OTHER PASSIVE ACTIVITY		
OTHER PORTFOLIO INCOME (LOSS)	3.	
TOTAL NONPASSIVE INCOME (LOSS)	3.	
RENTAL REAL ESTATE INCOME (LOSS)  K-1 PASS THRU SEC 59(E)(2) - MINING EXPLORATION	2. -619. -525. -269.	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582		-1,411. -4,652. 6,063.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		0.
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER - SCHEDULE E		415. 1,120. 4,100.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME ROYALTY INVESTMENT INCOME INVESTMENT EXPENSE NONDEDUCTIBLE EXPENSES		17,630. 13,398. 10,411. 9,433. -1,342. -54,802. 27. 6. 22. 31,052. 6. 66.

2010 Income from Passthro	oughs	
BERNSTEIN FAMILY INVESTMENTS LLLP I.D. NUMBER: 26-2124343 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN FAMILY INVESTMENTS LLLP		
OTHER PASSIVE ACTIVITY		
OTHER PORTFOLIO INCOME (LOSS)	4.	
TOTAL NONPASSIVE INCOME (LOSS)	4.	
RENTAL REAL ESTATE INCOME (LOSS)	3. -618. -525.	
SEC 59(E)(2) -	-270.	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582		-1,410. -4,653. 6,063.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		0.
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT ADJUSTED GAIN OR LOSS OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER - SCHEDULE E		415. -1. 1,121. 4,099.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) SECTION 1256 CONTRACTS AND STRADDLES INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME ROYALTY INVESTMENT INCOME		17,631. 13,398. 10,412. 9,432. -1,342. -54,802. 1. 26. 6. 23. 31,055.
INVESTMENT EXPENSE		51,055.

2010 Income from Passthr	oughs	
BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN HOLDINGS LLC		
OTHER PASSIVE ACTIVITY		
SEC 59(E)(2) -	-6. -2.	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582		-8. -44. 52.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		0.
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER - SCHEDULE E		4. 2. 40.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) DEDUCTIONS RELATED TO PORTFOLIO INCOME INVESTMENT INCOME INVESTMENT EXPENSE		173. 139. 102. 93. -13. -537. 61. 312. 61.

2010 Income from Passth	roughs	
BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP		<del>- (</del>
ACTIVITY INFORMATION:		
BERNSTEIN HOLDINGS LLC		
OTHER PASSIVE ACTIVITY		
SEC 59(E)(2) ~	-7. -3.	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582		-10. -47. 57.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		0.
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER SCHEDULE E		4. 3. 32.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME INVESTMENT INCOME INVESTMENT EXPENSE NONDEDUCTIBLE EXPENSES		172. 139. 102. 92. -13. -537. 1. 60. 311. 60.

TT/ SIMON L BERNSTEIN IRREV TR

I.D. NUMBER: 51-6600239 TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

TT/ SIMON L BERNSTEIN IRREV TR

OTHER PASSIVE ACTIVITY

ELIOI	BERNSTEIN	FAMILY	TRUST
I.D.	NUMBER: 65-	6477114	1
TYPE:	ESTATE OR	TRUST	

#### ACTIVITY INFORMATION:

ELIOT BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

INTEREST INCOME	2.
ORDINARY DIVIDENDS	1.
QUALIFIED DIVIDENDS	1.
NET LONG-TERM CAPITAL GAIN (LOSS)	-5.
DEDUCTIONS RELATED TO PORTFOLIO INCOME	1.

ELIOI	BERNSTEIN	FAMILY	TRUST
I.D.	NUMBER: 65-	-6477114	Į.
TYPE:	ESTATE OF	RTRUST	

#### ACTIVITY INFORMATION:

ELIOT BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

INTEREST INCOME	2.
ORDINARY DIVIDENDS	2.
QUALIFIED DIVIDENDS	1.
NET LONG-TERM CAPITAL GAIN (LOSS)	-6.
DEDUCTIONS RELATED TO PORTFOLIO INCOME	1.

JILL	IANTONI	FAMI	$\mathbf{L}\mathbf{Y}$	TRUST
I.D.	NUMBER:	65-6	477	115
TYPE:	ESTATE	OR	TRU	ST

#### ACTIVITY INFORMATION:

JILL IANTONI FAMILY TRUST

OTHER PASSIVE ACTIVITY

INTEREST INCOME	1.
ORDINARY DIVIDENDS	1.
QUALIFIED DIVIDENDS	1.
NET LONG-TERM CAPITAL GAIN (LOSS)	-5.

2010 1100110 110111 1 1100111 0 11	J. 1.0
JILL IANTONI FAMILY TRUST I.D. NUMBER: 65-6477115 TYPE: ESTATE OR TRUST	
ACTIVITY INFORMATION:	•
JILL IANTONI FAMILY TRUST	
OTHER PASSIVE ACTIVITY	
OTHER K-1 INFORMATION:	
INTEREST INCOME ORDINARY DIVIDENDS	2. 2.

NET SHORT-TERM CAPITAL GAIN (LOSS)

DEDUCTIONS RELATED TO PORTFOLIO INCOME

NET LONG-TERM CAPITAL GAIN (LOSS)

-1.

-6.

1.

LISA	S FRIEDSTEIN FAMILY	TRUST
I.D.	NUMBER: 65-6477116	
TYPE:	ESTATE OR TRUST	

#### ACTIVITY INFORMATION:

LISA S FRIEDSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

INTEREST INCOME	2.
ORDINARY DIVIDENDS	1.
QUALIFIED DIVIDENDS	1.
NET LONG-TERM CAPITAL GAIN (LOSS)	-5.

LISA S FRIEDSTEIN FAMILY TRUST I.D. NUMBER: 65-6477116 TYPE: ESTATE OR TRUST	
ACTIVITY INFORMATION:	
LISA S FRIEDSTEIN FAMILY TRUST	
OTHER PASSIVE ACTIVITY	
OTHER K-1 INFORMATION:	
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS NET LONG-TERM CAPITAL GAIN (LOSS) DEDUCTIONS RELATED TO PORTFOLIO INCOME	2 2 1 -6
DEDOCTIONS VEHICLED TO EQUIDATE INCOME	7

### SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

INTEREST INCOME	50,368.
ORDINARY DIVIDENDS	27,083.
QUALIFIED DIVIDENDS	21,033.
TAX-EXEMPT INTEREST	19,050.
NET SHORT-TERM CAPITAL GAIN (LOSS)	-2,711.
NET LONG-TERM CAPITAL GAIN (LOSS)	-110,711.
SECTION 1256 CONTRACTS AND STRADDLES	1.
INVESTMENT INTEREST EXPENSE - SCHEDULE A	54.
CHARITABLE CONTRIBUTIONS .	2,343.
DEDUCTIONS RELATED TO PORTFOLIO INCOME	137.
ROYALTY	45.
NONDEDUCTIBLE EXPENSES	5,882.
INVESTMENT INTEREST EXPENSE:	·
TATTICOMY TATOONE	<b>MH</b> 464
INVESTMENT INCOME	77,481.
INVESTMENT EXPENSE	133.
TAX PREFERENCE ITEMS:	
DEPRECIATION ADJUSTMENT	838.
ADJUSTED GAIN OR LOSS	-1.
OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS	2,246.
AMT PAL CARRYOVER - SCHEDULE E	8,271.
	0,2111

## **Foreign Tax Credit**

(Individual, Estate, or Trust)

Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Name Identifying number as shown on page 1 of your tax return

SI	MON & SHIRLEY BERNSTEIN				371-32-	5211		
Use	a separate Form 1116 for each category of Income listed belo	w. See Categories	of Income in th	e instructions. C	heck only one bo	x on eac	h Form 1	116. Report all
-	ounts in U.S. dollars except where specified in Part II below.							
г	Passive category income c Section 901			e Lump	o-sum distribution	าร		
b L	General category income d Certain inco	me re-sourced by t	reaty					
6 D.	esident of (name of country)   UNITED STATE	1 <u>C</u>			<del></del>	<del> </del>		
	esident of (name of country) ONTIBE STATE		rolumn 4 in P	ert Land line A	in Part II If you	noid to	vae tome	ore than one
	eign country or U.S. possession, use a separate column				in r are m. n you	r para ta	ACS faile	
P	Taxable Income or Loss From Sources Outs	side the United	States (for C	ategory Chec	ked Above)			
		F	Foreign Cour	try or U.S. Po	ssession			Total
		A		В	С		(Add o	ols. A, B, and C.)
g	Enter the name of the foreign country or U.S.						Control of the contro	
	possession	VARIOUS					A second or a seco	
la	Gross income from sources within country shown above	A CONTROL OF THE CONT	0.00 0 (1.0 / 1.0 ) (2.0 / 0.0 ) (3.0 / 0.0 ) (4.0 / 0.0				100 100 100 100 100 100 100 100 100 100	
	and of the type checked above:	by containing a state analysis and finding analysis and the containing	A CONTROL OF THE PROPERTY OF T				AND THE COLUMN TO THE COLUMN T	
		3,4	33.				1a	3,433.
b	Check if line 1a is compensation for personal services as	A service of the serv	100 000 000 000 000 000 000 000 000 000		The control of the co			
	an employee, your total compensation from all sources is	STATE OF THE STATE	And the section of th			Andrew Control	Control of the contro	
	\$250,000 or more, and you used an alternative basis to	This is not a first to assess the first to the district of the side of the sid				Annual Comment of the	Consult Involves  Consult Invo	
	determine its source (see instructions)	And the second s	The second secon			AND THE PROPERTY OF THE PROPER		
Dec	ductions and losses (Caution: See instructions):	The second secon	2 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 (	100 000 000 000 000 000 000 000 000 000	The second secon		A STATE OF THE STA	
2	Expenses definitely related to the income on line 1a (attach statement) SEE STATEMENT 21	6	42.				Surface vo was black to	
3	Pro rata share of other deductions <b>not definitely related:</b>	U	44.	The second secon			AND THE PROPERTY OF THE PROPER	
	Certain itemized deductions or standard deduction	46,4	44.			**************************************	03.00 VA	
b							2 100 100 100 100 100 100 100 100 100 10	
	Add lines 3a and 3b	46,4	44.	• ,			2000 000 000 000 000 000 000 000 000 00	
d		3,4					Company of the compan	
е		568,7						
f	Divide line 3d by line 3e	.006					( ) 1 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	
g		2	80.	-0			Some and the second sec	
4	Pro rata share of interest expense:	An institute of the second sec		ard a lag go go go an appropriate of the control of		A A CANA	And Andrew Street	
а	Home mortgage interest (use worksheet on page 14 of the instructions)							
h	Other interest expense	-			<u> </u>			
5	Losses from foreign sources				<u> </u>			
6	Add lines 2, 3g, 4a, 4b, and 5	9	22.				6	922.
	Subtract line 6 from line 1a. Enter the result here and on line	14, page 2				►	7	2,511.
33W K 733	artill Foreign Taxes Paid or Accrued			· · · · · · · · · · · · · · · · · · ·	SEE	STA	TEME	NT 20
۱	credit is claimed for taxes	Foreig	n taxes paid	or accrued	In II C. dN-			
	(you must In foreign currency	<u></u>			In U.S. dolla			
ബ.	check one) (h) X Paid Taxes withheld at source on:	(n) Other	Taxe	s withheld at sou	irce on:		Other eign	(s) Total foreign taxes paid or
≍ı	(i) Accrued	foreign taxes paid or	1 40.10				paid or	accrued (add cols.
	(j) Date paid (k) Dividends (l) Rents and (m) Interest royalities	accrued	(0) Dividends	(p) Rents and royalties	(q) Interest	acc	rued	(o) through (r))
_				,			124.	124.
A B C								
				<u></u>				
8	Add lines A through C, column (s). Enter the total here and	on line 9, page 2					. ▶ 8	124.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2010)

Part III Figuring the Credit				
9 Enter the amount from line 8. These are your total foreign taxes paid or accrued			Ann a coar	
for the category of income checked above Part I	. 9	124.		
10 Carryback or carryover (attach detailed computation)	. 10		Service of the control of the contro	
<b>11</b> Add lines 9 and 10	. 11	124.		
12 Reduction in foreign taxes	. 12		And the second s	
13 Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit			13	124.
14 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the				
United States (before adjustments) for the category of income checked above Part I	. 14	2,511.	- O man of a first or	
15 Adjustments to line 14	15		200 000 000 000 000 000 000 000 000 000	
16 Combine the amounts on lines 14 and 15. This is your net foreign source taxable income.			d do do do do do do do do do do do do do	
(If the result is zero or less, you have no foreign tax credit for the category of income				
you checked above Part I. Skip lines 17 through 21. However, if you are filing more than				
one Form 1116, you must complete line 19.)	. 16	2,511.	1000 A AND 1	
17 Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39.				
Estates and trusts: Enter your taxable income without the deduction for your	$\langle \mid \mid \mid$	204 010	A CONTRACTOR OF THE CONTRACTOR	
exemption SEE STATEMENT 22	4 [17]	324,912.		
Caution: If you figured your tax using the lower rates on qualified dividends or capital	-			0.07700
18 Divide line 16 by line 17. If line 16 is more than line 17, enter "1"			18	.007728
19 Individuals; Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the				
line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total		•		00 772
lines 36 and 37			19	82,773.
Caution: If you are completing line 19 for separate category e (lump-sum distributions,			_	640.
20 Multiply line 19 by line 18 (maximum amount of credit)			20	040.
21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 amount on line 27. Otherwise, complete the appropriate line in Part IV	-			124.
amount on line 27. Otherwise, complete the appropriate line in Part IV  Part IV  Summary of Credits From Separate Parts III	····		21	124+
22 Credit for taxes on passive category income	22		5 5 CONT. CONT. CONT. CO.	
23 Credit for taxes on general category income			100 V 600 V 100 V	
24 Credit for taxes on certain income re-sourced by treaty				
25 Credit for taxes on lump-sum distributions		·	CONTROL OF THE STATE OF THE STA	
26 Add lines 22 through 25			26	
27 Enter the smaller of line 19 or line 26			27	124.
28 Reduction of credit for international boycott operations			28	
29 Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line				
Form 1040NR, line 45, Form 1041, Schedule G, line 2a; or Form 990-T, line 40a		<b>&gt;</b>	29	124.

Form **1116** (2010)

Department of the Treasury

#### Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return. ► See separate instructions.

Internal Revenue Service Name(s) shown on return SIMON & SHIRLEY BERNSTEIN 371-32-5211 1 Enter the gross proceeds from sales or exchanges reported to you for 2010 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Part I Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) (a) Description (C) Date sold (d) Gross sales (b) Date acquired allowed or allowable since basis, plus Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) improvements and sum of (d) and (e) acquisition expense of sale BERNSTEIN FAMILY PALINVESTMENTS LLLP 0 . BERNSTEIN FAMILY PALINVESTMENTS LLLP 0. Gain, if any, from Form 4684, line 42 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 Individuals, partners, S corporation shareholders, and all others, If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. Nonrecaptured net section 1231 losses from prior years (see instructions) R Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions) Partell Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): JILL IANTONI FAMILY PAITRUST 11 Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 Net gain or (loss) from Form 4684, lines 34 and 41a 14 15 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 Combine lines 10 through 16 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below: a If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss

For Paperwork Reduction Act Notice, see separate instructions.

from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on

Form 4797 (2010)

Form 1040, line 14

18a

18b

Part III	Gain From	Disposition	of Property	<b>Under Sections</b>	1245, 1250,	1252,	1254,	, and 1255 (see instructions	3)
----------	-----------	-------------	-------------	-----------------------	-------------	-------	-------	------------------------------	----

19 ——	(a) Description of section 1245, 1250, 1252, 1254, o	or 125	5 property:			(b) Date acquir (mo., day, yr.	ed )	(c) Date sold (mo., day, yr.)
<u>A</u>								
<u>B</u>			· · · · · · · · · · · · · · · · · · ·					
<u> </u>								
<u>D</u>								
	These columns relate to the properties on lines 19A through 19D.	<b>•</b>	Property A	Property !	В	Property	С	Property D
20	Gross sales price (Note: See line 1 before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23				•		
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							-
а	Additional depreciation after 1975 (see instructions)	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	<b>2</b> 6b						
С	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976	<b>26</b> d						
	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
	Add lines 26b, 26e, and 26f	<b>2</b> 6g						
27	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).	07-						
	Soil, water, and land clearing expenses Line 27a multiplied by applicable percentage	27a 27b						
		27c		<del> </del>				
	Enter the smaller of line 24 or 27b	2/6						
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a						
b	Enter the smaller of line 24 or 28a	28b						
29 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126 (see instructions)	29a						
<u> </u>	Enter the smaller of line 24 or 29a (see instructions)	29b						
Sur	nmary of Part III Gains. Complete property c	olumn	s A through D through	ine 29b before	aoina	to line 30.		
30	Total gains for all properties. Add property columns	A thro	ough D, line 24		•••••	***************************************	30	
31	Add property columns A through D, lines 25b, 26g,						31	
32	Subtract line 31 from line 30. Enter the portion from		•					
Da	from other than casualty or theft on Form 4797, line rt V Recapture Amounts Under Section	ne 1	70 and 200E(h)(2)	Whon Bucir		Use Drene t	32	/ or Loop
Га	(see instructions)	113	19 and 2001(b)(2)	Wilen Dusii	1699	Ose Drops t	0 30	% Of Less
	(add maridian)			,		(a) Section 179	1	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allo	wable	in prior years		33			
34				1	34			
35	Recapture amount, Subtract line 34 from line 33. Se				35			

Form 6251

**Alternative Minimum Tax - Individuals** 

2010 Attachment 33

Department of the Treasury Internal Revenue Service (99)

▶ Attach to Form 1040 or Form 1040NR.

Na	me(s) shown on Form 1040 or Form 1040NR	Yai	ır social security number
s:	IMON & SHIRLEY BERNSTEIN		371 32 5211
P	art 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 6. (If less than zero, enter as a negative amount.)	1	336,930.
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, Or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	11,952.
3	Taxes from Schedule A (Form 1040), lines 5, 6, and 8	3	19,756.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6	If filling Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 17 from that schedule	6	
7	Tax refund from Form 1040, line 10 or line 21	7	
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Alternative tax net operating loss deduction	11	-333,355.
12	Alternative tax net operating loss deduction  Interest from specified private activity bonds exempt from the regular tax  SEE STATEMENT 23	12	1,756.
13	Qualified small business stock (7% of gain excluded under section 1202)	13	
	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
	Disposition of property (difference between AMT and regular tax gain or loss)	17	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
	Passive activities (difference between AMT and regular tax income or loss)	19	0.
	Loss limitations (difference between AMT and regular tax income or loss)	20	
	Circulation costs (difference between regular tax and AMT)	21	
	Long-term contracts (difference between AMT and regular tax income)	22	
	Mining costs (difference between regular tax and AMT)	23	
	Research and experimental costs (difference between regular tax and AMT)	24	
	Income from certain installment sales before January 1, 1987	25	
	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
	Alternative minimum taxable income. Combine lines 1 through 27. (If married filling separately and line		
	28 is more than \$219,900, see instructions.)	28	37,039.
P	art II Alternative Minimum Tax (AMT)		
29	Exemption. (If you were under age 24 at the end of 2010, see instructions.)	The second secon	
	IF your filing status is AND line 28 is not over THEN enter on line 29		
	Single or head of household \$112,500 \$47,450		
	Married filing jointly or qualifying widow(er)       150,000       72,450         Married filing separately       75,000       36,225	29	<u>72,450.</u>
	If line 28 is over the amount shown above for your filing status, see instructions.		
30	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	0.
31	■ If you are filing Form 2555 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 dividends		
	on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured	31	0.
	for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 54 here.  • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing 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.	200 CO CO CO CO CO CO CO CO CO CO CO CO CO	
32	Alternative minimum tax foreign tax credit (see Instructions)	32	
33	Tentative minimum tax. Subtract line 32 from line 31	33	0.
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47).		
	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	82,649.
<u>35</u>	AMT. Subtract line 34 from line 33. If zero or less, enter -0 Enter here and on Form 1040, line 45	35	0.
L	A For Paperwork Reduction Act Notice, see your tax return instructions.		Form <b>6251</b> (2010)

	arging Tax Computation Using Waximum Capital Gains Rates	<u> </u>			
36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ,	enter th	e amount from		
	line 3 of the worksheet in the instructions			36	
37	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			The second secon	
	line 13 of the Schedule D Tax Worksheet in 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, see instructions for				
	the amount to enter	37		200 A CONTROL OF CONTR	
38	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,				
	see instructions for the amount to enter	38			
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the				
	AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter			A ANTONIO CONTROL OF THE PARTY	
	the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax			Ships a manager warm	
	Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555			Congression Short I	
	or 2555-EZ, see instructions for the amount to enter				
40	Enter the smaller of line 36 or line 39			40	
41	Subtract line 40 from line 36			41	
42	If line 41 is $$175,000$ or less ( $$87,500$ or less if married filing separately), multiply	line 41 b	y 26% (.26).		
	Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married fil	ing sepa	rately) from		
	the result			42	
43	Enter:			Continue y area	
	• \$68,000 if married filing jointly or qualifying widow(er),			To administration of the property of the prope	
	• \$34,000 if single or married filing separately, or	43		200 000 000 000 000 000 000 000 000 000	
	• \$45,550 if head of household.			200 - 100 -	
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain			The second secon	
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from				
	line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D			100 mm (00 mm (00 mm))	
	(Form 1040), whichever applies (as figured for the regular tax). If you did not			San Parket States	
	complete either worksheet for the regular tax, enter-0-	44			
				200 000 000 000 000 000 000 000 000 000	
45	Subtract line 44 from line 43. If zero or less, enter -0-	45		And the second	
46	Enter the smaller of line 36 or line 37	46			
				Control of the Contro	
47	Enter the smaller of line 45 or line 46	47		A CONTRACTOR OF THE PARTY OF TH	
				2000 100 000 000 000 000 000 000 000 000	
48	Subtract line 47 from line 46	48		Committee Commit	
	•				
49	Multiply line 48 by 15% (.15)		<b>&gt;</b>	49	
	If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, g	o to line	50.		
50	Subtract line 46 from line 40	50			
51	Multiply line 50 by 25% (.25)		<b>&gt;</b>	51	
					- <del></del>
52	Add lines 42, 49, and 51			52	
			• • • • • • • • • • • • • • • • • • • •		
53	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply	line 36 b	y 26% (.26).		
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married fil		• • •		
	the result		• •	53	
54	Enter the smaller of line 52 or line 53 here and on line 31. If you are filling Form 25	555 or 25	55-EZ, do not enter		
-	this amount on line 31. Instead, enter it on line 4 of the worksheet in the instruction		•	54	
					Form <b>6251</b> (2010)

# Form 1116

Department of the Treasury Internal Revenue Service (99

### ALTERNATIVE MINIMUM TAX

### Foreign Tax Credit

(Individual, Estate, or Trust)
➤ Attach to Form 1040, 1040NR, 1041, or 990-T.

2010
Attachment

Name Identifying number as shown on page 1 of your tax return SIMON & SHIRLEY BERNSTEIN 371-32-5211 Use a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. a X Passive category income Section 901(i) income Lump-sum distributions General category income Certain income re-sourced by treaty f Resident of (name of country) > UNITED STATES Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes tomore than one foreign country or U.S. possession, use a separate column and line for each country or possession. Taxable Income or Loss From Sources Outside the United States (for Category Checked Above) Foreign Country or U.S. Possession Total Α В С (Add cols. A, B, and C.) Enter the name of the foreign country or U.S. VARIOUS possession 1a Gross income from sources within country shown above and of the type checked above: 3,433 3,433. b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) Deductions and losses (Caution: See instructions): Expenses definitely related to the income on line 1a 642 (attach statement) Pro rata share of other deductions not definitely related; 14,736 a Certain itemized deductions or standard deduction b Other deductions (attach statement) c Add lines 3a and 3b 14,736. 3,433. Gross foreign source income 568,794. Gross income from all sources .006036 Divide line 3d by line 3e 89. Multiply line 3c by line 3f Pro rata share of interest expense: a Home mortgage interest (use worksheet on page 14 of the instructions) **b** Other interest expense Losses from foreign sources Add lines 2, 3g, 4a, 4b, and 5 ĥ 731. 7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 Part II Foreign Taxes Paid or Accrued Credit is claimed Foreign taxes paid or accrued for taxes In foreign currency In U.S. dollars (you must check one) (n) Other (r) Other (s) Total foreign Taxes withheld at source on: Taxes withheld at source on: (h) X Paid foreian foreign taxes paid or taxes paid or accrued (add cols. (i) Accrue taxes paid or (o) through (r)) accrued accrued (j) Date paid or accrued (k) Dividends (I) Rents and royalties (m) Interest (0) Dividends (q) Interest 124 124. В c 8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 124. Form 1116 (2010) SIMON & SHIRLEY BERNSTEIN 371-32-5211 Page 2 Part III Figuring the Credit 9 Enter the amount from line 8. These are your total foreign taxes paid or accrued 124. for the category of income checked above Part I 10 Carryback or carryover (attach detailed computation) 10 11 Add lines 9 and 10 124. 11 12 Reduction in foreign taxes 13 Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit 124. 14 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I 2,702. 14 15 Adjustments to line 14 15 ...... 16 Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.) 2,702. 17 Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your 37,039. exemption Gaution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions. 18 Divide line 16 by line 17. If line 16 is more than line 17, enter "1" .072950 18 19 Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 19 Caution: If you are completing line 19 for separate category e (lump-sum distributions), see instructions. 20 Multiply line 19 by line 18 (maximum amount of credit) 20 21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filling, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV 0. Summary of Credits From Separate Parts III 22 Credit for taxes on passive category income 23 Credit for taxes on general category income 23 24 Credit for taxes on certain income re-sourced by treaty 24 25 Credit for taxes on lump-sum distributions \_\_\_\_\_\_\_25

26 Add lines 22 through 25 27 Enter the smaller of line 19 or line 26

28 Reduction of credit for international boycott operations

Subtract line 28 from line 27. This is your foreign tax credit. Enter here and on Form 1040, line 47:

Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a

Form 1116 (2010)

27

0.

0.

# Form 4952

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

### **Investment Interest Expense Deduction**

Attach to your tax return.

OMB No. 1545-0191

Attachment Sequence No. **51** Identifying number

4g

SIMON & SHIRLEY BERNSTEIN 371-32-5211 Part I **Total Investment Interest Expense** Investment interest expense paid or accrued in 2010 (see instructions) SEE STATEMENT 24 54. Disallowed investment interest expense from 2009 Form 4952, line 7 Total investment interest expense. Add lines 1 and 2 54. Part II Net Investment Income 4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) STMT 25 78,183. 4a Qualified dividends included on line 4a 21,033. 4b Subtract line 4b from line 4a 57,150. d Net gain from the disposition of property held for investment 4d e Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions) Subtract line 4e from line 4d 4f

5	Investment expenses (see instructions)	5	
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6	57,15
Pa	rt III Investment Interest Expense Deduction	,	

7	Disallowed investment interest expense to be carried forward to 2011. Subtract line 6 from line 3.		
	If zero or less, enter -0-	7	0.
	STEMP 26		F.4
<u> </u>	Investment interest expense deduction. Enter the smaller of line 3 or 6, See instructions	8	54.

Enter the amount from lines 4b and 4e that you elect to include in investment income

(see instructions)

h Investment income. Add lines 4c, 4f, and 4g

57,150.

**Investment Interest Expense Deduction** 

2010

Department of the Treasury Internal Revenue Service (99)

Attach to your tax return.

Internal Revenue Service (99) Attach to your tax	k return.		ŝ	equence No. 51
Name(s) shown on return			Iden	lifying number
SIMON & SHIRLEY BERNSTEIN			371	L-32-5211
Part Total Investment Interest Expense				
1 Investment interest expense pald or accrued in 2010 (see instructions)	SEE STA	ATEMENT 27	1	54.
2 Disallowed investment interest expense from 2009 Form 4952, line 7	(1+()+(+)+(+)+(+)+(+)+(+)+(+)+(+)+(+)+(+		2	·· ··
3 Total investment interest expense. Add lines 1 and 2			3	54.
Part II Net Investment Income				
4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	79,939.		
b Qualified dividends included on line 4a	4b	21,033.	Control of the Contro	
c Subtract line 4b from line 4a			4c	58,906.
d Net gain from the disposition of property held for investment			A Control of Control o	
e Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e		And the second of the second o	
f Subtract line 4e from line 4d			4f	
g Enter the amount from lines 4b and 4e that you elect to include in investme (see instructions)			4g	
h Investment income. Add lines 4c, 4f, and 4g			4h	58,906.
5 Investment expenses (see instructions)			5	•
6 Net investment income. Subtract line 5 from line 4h. If zero or less, enter-	0		6	58,906.
INVOSTRICIT INCOCAT EXPENSE DEGLECTION				
7 Disallowed investment interest expense to be carried forward to 2011. Subtif zero or less, enter ·0·			7	0.
8 Investment interest expense deduction. Enter the smaller of line 3 or 6. S	See instructions.		8	54.
REGULAR FORM 4952, LINE (LESS RECOMPUTED FORM 4952	2, LINE 8			54. 54.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4952** (2010)

INTEREST ADJUSTMENT - FORM 6251, LINE 9

# Form **6781**Department of the Treasury

### Gains and Losses From Section 1256 Contracts and Straddles

Attach to your tax return.

2010 Attachment

Name(s) shown on tax return SIMON & SHIRLEY BERNSTEIN 371-32-5211 Check all applicable boxes A Mixed straddle election С Mixed straddle account election (see instructions). Straddle-by-straddle identification election Net section 1256 contracts loss election Part Section 1256 Contracts Marked to Market (a) Identification of account (b) (Loss) (c) Gain FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP Net gain or (loss). Combine line 2, columns (b) and (c) 1. Form 1099-B adjustments. See instructions and attach schedule 4 Combine lines 3 and 4 5 Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions. If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be carried back. Enter the loss as a positive number Combine lines 5 and 6 1. 7 Short-term capital gain or (loss). Multiply line 7 by 40% (.40), Enter here and include on the appropriate line of Schedule D (see instructions) Long-term capital gain or (loss). Multiply line 7 by 60% (.60). Enter here and include on the appropriate line of Schedule D (see instructions) Part I Gains and Losses From Straddles. Attach a separate schedule listing each straddle and its components. Section A - Losses From Straddles (b) Date entered Into or acculred (f) Loss. (h) Recognized loss. (e) Cost or If column (e) is If column (f) (g) Unrecognized (c) Date closed out or sold (d) Gross other basis more than (d), enter (a) Description of property gain on offsetting is more than (g), sales price plus expense difference. enter difference. positions of sale Otherwise. Otherwise, enter -0-Mo. Day Yr. enter -0-10 11a Enter the short-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions) 11a b Enter the long-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions) 11b Section B - Gains From Straddles (b) Date entered into or acquired (f) Gain. If column (d) (e) Cost or other basis is more than (e), (a) Description of property (d) Gross sales price (c) Date closed plus expense of sale enter difference Otherwise, enter -0-Mo. Day Yr. 12 13 a Enter the short-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D b Enter the long-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D 13b Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions) (b) Date acquired (c) Fair market value (e) Unrecognized gain. If column (c) is more than (d), enter (d) Cost or other basis as adjusted (a) Description of property on last business day of Mo. tax year

# **Passive Activity Loss Limitations**

See separate instructions.Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2010

Attachment
Seguence No. 88

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Identifying number

	MON & SHIRLEY BERNSTEIN		371-32-5211		
Pa	nt 2010 Passive Activity Loss Caution: Complete Worksheets 1, 2	, and 3 on	page 2 before comple	ting Pa	art I.
Ren	tal Real Estate Activities With Active Participation (For the definition of active p	articipation	1, 500		Company of the Compan
Spe	cial Allowance for Rental Real Estate Activities on page 3 of the instructions.)	·			The second secon
1a	Activities with net income (enter the amount from Worksheet 1,	اندا		The Asset of the	
	column (a))	1a			And the second and in the Control of Second and the Control of Second
b	Activities with net loss (enter the amount from Worksheet 1, column (b))	1b			Control of the Control of Control of the Control of Con
c	Prior years unallowed losses (enter the amount from Worksheet				Additional to the second of deposition in the results of the second of t
	1, column (c))	1c			The part of the pa
<u>d</u>	Combine lines 1a, 1b, and 1c		*******************************	1d	·
	nmercial Revitalization Deductions From Rental Real Estate Activities				A CONTROL OF THE CONT
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a			MET and hardware delivery and the company of the co
b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b			
С	Add lines 2a and 2b			2c	Transport of Committee of Commi
	Other Passive Activities	*************			June 1, 4 is 3 or 7 version and contract year that the contract and co
30	Activities with not income (enter the amount from Workshoot 2				Control of the Contro
Sa	Activities with net income (enter the amount from Worksheet 3, column (a))	3a			
h	Activities with net loss (enter the amount from Worksheet 3,				And the second s
IJ	column (b))	3b	-2,841.		Last hand of the control of the cont
_	Prior years unallowed losses (enter the amount from Worksheet 3,		<u> </u>		The state of the s
·	column (c))	3c	-9,405.		Wight to the property of the p
_ d	Combine lines 3a, 3b, and 3c			3d	-12,246.
4	Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allo	wed, inclu	ding any prior year		
	unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Rep	ort the loss	ses on the forms and		
	schedules normally used			4	-12,246.
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.				
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Part</li> </ul>	II and go t	to Part III.		
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more)</li> </ul>			ne 15.	
Ça	ution: If your filing status is married filing separately and you lived with your spouse				plete
	t II or Part III. Instead, go to line 15.				·
Pa	Special Allowance for Rental Real Estate Activities With Note: Enter all numbers in Part II as positive amounts. See page 9 of the in		•		
5				5	
6	Enter \$150,000. If married filing separately, see the instructions	6		•	
7	Enter modified adjusted gross income, but not less than zero (see the instr.)				An index of the Control of the Contr
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and	A CONTROL OF THE CONT			
	9, enter -0- on line 10. Otherwise, go to line 8.		A CASA COMMISSION CONTRACTOR CONT		A TOPPOST CONTROL OF THE PROPERTY OF THE PROPE
8	Subtract line 7 from line 6	8			
9	Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separ		the instructions	9	
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.				
Pε	rt III Special Allowance for Commercial Revitalization Deduc	tions Fr	om Rental Real I	stat	e Activities
	Note: Enter all numbers in Part III as positive amounts. See the example for	r Part II on	page 9 of the instructi	ons.	
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separate	ly, see inst	ructions	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 positive amount), line 11, or line 13			14	
Pa	rt V Total Losses Allowed				
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 2010. Add lines 10, 14, and	l 15. See th	ne instructions		
	to find out how to report the losses on your tax return	ए८ उन	ATEMENT 32	16	0.

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.) Current vear Overall gain or loss Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) Total, Enter on Form 8582, lines 1a, 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year Name of activity (c) Overall loss 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.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 3a, -2.841.-9,405. Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.) Form or schedule (d) Subtract and line number (c) Special Name of activity (a) Loss (b) Ratio column (c) to be reported on allowance from column (a) (see instructions) Total Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions) SEE ATTACHED STATEMENT FOR WORKSHEET 5 1.0000000000 12,246. Total

Worksheet 6 - Allowed Losses (See ins	structions.)	_						
Name of activity	Form or sch and line nu to be report (see instruc	mber ed on	(a) L	_oss	(b) Un	allowed loss	(c) Allowed	loss
			_					
<u> </u>								
<u> </u>			<del> </del>				·	
	SEE Δυσ2	CHED	CT ATT	ים יויואים אי	OP W	ORKSHEET	6	
	D111 11111	1CIIID	OIMIE	TATATA T.	OIC M	OKKSHEET	U	
Total		▶		118.		118.		
Total Worksheet 7 - Activities With Losses	Reported on Tv	vo or N	lore Forn	ns or Sch	edules	See instruction	ns.)	-
Name of activity:	(a)		(b)	(c) Ra		(d) Unallowed		ed loss
Form or schedule and line number to be reported on (see instructions):		man organic Land Landon Communication Commun						
1a Net loss plus prior year unallowed loss from form or schedule		And the second s	The second secon	The property of the property o				Service of the servic
b Net income from form or schedule			A CONTRACTOR OF THE PROPERTY O	The property of the property o			Service of the servic	
c Subtract line 1b from line 1a. If zero or less, e	enter -0-							
Form or schedule and line number to be reported on (see instructions):		The second secon	A company of the comp		And the second s			
1a Net loss plus prior year unallowed loss from form or schedule		And the second control of the second control	AND THE PROPERTY OF THE PROPER		A COLUMN AND AND AND AND AND AND AND AND AND AN			
b Net income from form or schedule				The second secon	And the second of the second o		And the second s	And the second s
c Subtract line 1b from line 1a. If zero or less, e	enter -0							
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule							Total and Aller	
b Net income from form or schedule		And the second s					Amount to the second of the se	
c Subtract line 1b from line 1a. If zero or less, e		CHED	STATE	MENT F	OR W	ORKSHEET	7	
	OVERALL	<del> </del>						
Total	<b>&gt;</b>	1	2,128.	1.000	0000	12,12	в.	
. 2000						·	Form 858	<b>2</b> (2010)

### Form **8582-CR**

(Rev. December 2009)
Department of the Treasury
Internal Revenue Service
Name(s) shown on return

# **Passive Activity Credit Limitations**

► See separate instructions.

► Attach to Form 1040 or 1041.

OMB No. 1545-1034

Attachment Sequence No. 89

SIMON & SHIRLEY BERNSTEIN

Identifying number

	MON & SHIRLEY BERNSTEIN					371-32-5211
Pa	nt Passive Activity Credits					<del>.</del> .
	Caution: If you have credits from a publicly	traded partnership, see Pul	licly Traded Partnership	s (PTPs) on page	14 01	f the instructions.
Credi	ts From Rental Real Estate Activities With Active Par	icination (Other Then Behahii	Itation Cradita and			
Low-	Income Housing Credits) (See Lines 1a through 1c on	nage 9.)	nation Greats and			
			1 1			
1a	Credits from Worksheet 1, column (a)	.,	1a			
				-		
b	Prior year unallowed credits from Worksheet 1, colum	ın (b)	1b			
					***************************************	
<u> </u>	Add lines 1a and 1b	······································		*************************	1c	
Reha	bilitation Credits From Rental Real Estate Activities a	nd Low-Income Housing Cred	its for Property Placed in	Service		
Befor	e 1990 (or From Pass-Through Interests Acquired Be	fore 1990) (See Lines 2a throu	ı <b>gh 2c</b> on page 9.)			
			1 1			
2a	Credits from Worksheet 2, column (a)	***************************************	2a			
b	Prior year unallowed credits from Worksheet 2, colum	n (b)	2b			
				············		
c	Add lines 2a and 2b				2c	
Low-	Income Housing Credits for Property Placed in Servic	After 1989 (See Lines 3a thr	ough 3c on page 9.1			
		,				
За	Credits from Worksheet 3, column (a)		3a			
b	Prior year unallowed credits from Worksheet 3, colum	n (b)	3b	·		
c					Зс	
All O	Add lines 3a and 3b her Passive Activity Credits (See Lines 4a through 4c	on page 10.)			UU	
4a	Credits from Worksheet 4, column (a)					
b	Prior year unallowed credits from Worksheet 4, colum	n (h)	4h	6.		
c	Add lines 4a and 4b				4c	6.
5	Add lines 1c, 2c, 3c, and 4c				5	6.
6	Enter the tax attributable to net passive income (see p	ane 10)	****************************		6	0.
7	Subtract line 6 from line 5. If line 6 is more than or equ	ial to line 5, enter -0- and see r	ane 10		7	6
Note	: If your filing status is married filing separately a	nd you lived with your spou	eo at any time during th	ne veer	<u>,</u>	
	do not complete Part II, III, or IV. Instead, go to	line 37.	se at any time during ti	ie year,		Design and the second s
Pai	till Special Allowance for Rental R	eal Estate Activities	With Active Parti	cination		
	Note: Complete this part only if you have a	n amount on line 1c. Other	vise. ao to Part III.	orpation		
8	Enter the smaller of line 1c or line 7			·	8	
9	Enter \$150,000. If married filing separately, see page	10	l a l	***************************************		
10	Enter modified adjusted gross income, but not less the	in zero (see page 10).	·····   • -			
	If line 10 is equal to or more than line 9, skip lines 11	(				
	through 15 and enter -0- on line 16		10			
11	O LI IP JOS II O					
12	Multiply line 11 by 50% (.50). Do not enter more tha		·····   · · · · · · · · · · · · · · · ·			
	filing separately, see page 10		10			
13 a	Enter the amount, if any, from line 10 of		12			
100	Form 8582	13a	General and Annual Control of the Co			
b	Enter the amount, if any, from line 14 of	10a	Constitution of the consti			
D.	Form 8582	4016	control of control of the control of		7 japan 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
С	Add lines 13a and 13b	100	State Company of the			
U	The mind for any for		13c			
1.7	Subtract line 13c from line 12					
14 15	Enter the tax attributable to the amount on line 14 (see	naga 10)	14			
15	Enter the tax attributable to the afficult of the 14 (see	paye 10}	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		15	
16	Enter the smaller of line 8 or line 15				16	
	wie diriging of the Cold this to			1	III I	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **8582-CR** (Rev. 12-2009)

Form 8582-CR (Rev. 12-2009) SIMON & SHIRLEY BERNSTEIN 371-32-5211 Page 2 Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990) Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV. Enter the amount from line 7 Enter the amount from line 16 18 Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V 19 19 Enter the smaller of line 2c or line 19 20 20 Enter \$250,000. If married filing separately, see page 13. (See page 13 to find out if you can skip lines 21 through 26.) Enter modified adjusted gross income, but not less than zero. (See instr. for line 10 on page 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30 Subtract line 22 from line 21 23 Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 13 25a Enter the amount, if any, from line 10 of Form 8582 b Enter the amount, if any, from line 14 of c Add lines 25a and 25b Subtract line 25c from line 24 Enter the tax attributable to the amount on line 26 (see page 13) 27 Enter the amount, if any, from line 18 28 28 Subtract line 28 from line 27 29 29 Enter the smaller of line 20 or line 29. Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989 Note: Complete this part only if you have an amount on line 3c, Otherwise, go to Part V. If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7 31 31 Enter the amount from line 30 Subtract line 32 from line 31. If zero, enter -0- here and on line 36 33 33 Enter the smaller of line 3c or line 33 34 Tax attributable to the remaining special allowance (see page 13) 35 35 Enter the smaller of line 34 or line 35 Part V Passive Activity Credit Allowed Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See page 13 to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) on page 14 Part VI Election To Increase Basis of Credit Property If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the property, check this box. See page 15 Name of passive activity disposed of

Form 8582-CR (Rev. 12-2009)

Description of the credit property for which the election is being made

### ALTERNATIVE MINIMUM TAX

## **Passive Activity Loss Limitations**

► See separate instructions. Department of the Treasury

OMB No. 1545-1008

internal Revenue Service (99) Attach to Form 1040 or Form 1041. Name(s) shown on return

Attachment Sequence No. 88

Identifying number

	MON & SHIRLEY BERNSTEIN		371-32-5211		
Pε	rt 2010 Passive Activity Loss Caution: Complete Worksheets 1, 2,	and 3	on page 2 before comple	ting P	art I.
Ren	tal Real Estate Activities With Active Participation (For the definition of active pa	rticipa	ation, see		
Spe	cial Allowance for Rental Real Estate Activities on page 3 of the instructions.)			100	A CONTRACTOR OF THE PROPERTY O
1a	Activities with net income (enter the amount from Worksheet 1,	a_ l			om illigi. Santamone ellas ella Link santon dinopolis innellas.
	column (a))	1a			AND THE PROPERTY OF THE PROPER
b	Activities with net loss (enter the amount from Worksheet 1, column (b))	1b			
С	Prior years unallowed losses (enter the amount from Worksheet				The second secon
	1, column (c))	1c			And the part of th
	Combine lines 1a, 1b, and 1c			1d	
	nmercial Revitalization Deductions From Rental Real Estate Activities				A CONTRACT OF THE PROPERTY OF
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a		MAIL CORP. 777	A TAN DE CONTRACTOR DE CONTRAC
b	Prior year unallowed commercial revitalization deductions from			277 0220 2	Company of the Compan
		2b		Supplied States of the Control of th	The second of th
	Add lines 2a and 2b	.,		2c	The second secon
За	Activities with net income (enter the amount from Worksheet 3,	ا ۔			Committee personal and the first term of the committee of
	column (a))	3a			A CONTROL OF THE PARTY OF THE P
b	Activities with net loss (enter the amount from Worksheet 3,		-1,514.		A CONTROL OF THE PROPERTY OF T
	· · · · · · · · · · · · · · · · · · ·	3b			Control of the Contro
С	Prior years unallowed losses (enter the amount from Worksheet 3,		-8,271.		A control of the cont
-1		3с			-9,785.
4	Combine lines 3a, 3b, and 3c  Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allow	ved in	acluding any prior year	3d	-9,765.
-	unallowed losses entered on line 1c, 2b, or 3c. <b>Do not</b> complete Form 8582. Repoi				
	schedules normally used				-9,785.
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.			4	5,705.
	Line 2c is a loss (and line 1d is zero or more), skip Part II  Line 2c is a loss (and line 1d is zero or more), skip Part II  Line 3c is a loss (and line 1d is zero or more), skip Part II	l and i	ao to Part III		
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more),</li> </ul>			15 a	
Ca	ution: If your filing status is married filing separately and you lived with your spouse a				nlete
	t II or Part III. Instead, go to line 15.		unio dannig ma younido in		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pa	rtal   Special Allowance for Rental Real Estate Activities With	Acti	ve Participation		
h	Note: Enter all numbers in Part II as positive amounts. See page 9 of the ins	tructio	ons for an example.		
5	Enter the smaller of the loss on line 1d or the loss on line 4			5	
6	Enter \$150,000. If married filing separately, see the instructions	6	***************************************		
7	Enter modified adjusted gross income, but not less than zero (see the instr.)	7			
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and	ANTO MACCOUNTY CONTRACTOR OF THE CONTRACTOR OF T			
	9, enter -0- on line 10. Otherwise, go to line 8.			A CONTRACTOR OF THE PROPERTY O	
8	Subtract line 7 from line 6	8			
9	Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separa	tely, s	see the instructions	9	
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.				
Pa	rt III Special Allowance for Commercial Revitalization Deduct				e Activities
	Note: Enter all numbers in Part III as positive amounts. See the example for	Part II	on page 9 of the instructi	ons.	
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately			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 positive amount), line 11, or line 13			14	
14.5	rt IV Total Losses Allowed				
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 2010. Add lines 10, 14, and				_
	to find out how to report the losses on your tax return SI	<u> </u>	STATEMENT 40	16	0.

ALTERNATIVE MINIMUM TAX Form 8582 (2010) SIMON & SHIRLEY BERNSTEIN 371-32-5211 Page 2 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.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) Total. Enter on Form 8582, lines 1a, 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year Name of activity (c) Overall loss 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.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET Total, Enter on Form 8582, lines 3a, -1,514.-8.271.3b, 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 and line number (c) Special Name of activity column (c) (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions) Total Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (b) Ratio (a) Loss (c) Unallowed loss to be reported on (see instructions)

Total

STATEMENT FOR WORKSHEET

1.0000000000

9,785.

SEE ATTACHED

Worksheet 6 - Allowed Losses (See instruc	tions.)				_			
Name of activity	Form or sch and line nu to be report (see instruc	mber ed on	(a) L	Loss	(b) Un	nailowed loss	(0	c) Allowed loss
			<u></u>					· · · · · · · · · · · · · · · · · · ·
	SEE ATTA	CHED	STATE	MENT F	OR W	ORKSHEET	6	
Total				77.		77.		
Worksheet 7 - Activities With Losses Re	ported on Tv	vo or N	lore Forn	ns or Sch	edules	See instruction	ns.)	
Name of activity:	(a)		(b)	(c) Ra	tio	(d) Unallowe loss	d	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):		A VANISH CAN SERVICE OF SPRING AND AND AND AND AND AND AND AND AND AND		Section 1 and 1 an				
1a Net loss plus prior year unallowed loss from form or schedule		Annual Control of Cont			And the second of the second o		200 00 00 00 00 00 00 00 00 00 00 00 00	
b Net income from form or schedule								
c Subtract line 1b from line 1a. If zero or less, ente	r-0 ▶							
Form or schedule and line number to be reported on (see instructions):		A continue of the continue of						
1a Net loss plus prior year unallowed loss from form or schedule		A CONTROL OF THE PROPERTY OF T			and the second s			
b Net income from form or schedule				The Art Springer County of the	The second secon		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
c Subtract line 1b from line 1a. If zero or less, ente	r-0							
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule		Amenanda como 1 000 de la como de			Commence of the commence of th			
b Net income from form or schedule	SEE ልጥጥ2	(CHED	ርጥልጥፑ	MENT F	OR M	ORKSHEET	7	
c Subtract line 1b from line 1a. If zero or less, ente	r -0 🕨		DIVID	THE P	OT/ AA	OMMONTELL		
OV.	ERALL		9,708.	1.000	0000	9,70	8.	

(Rev. December 2010) Department of the Treasury Internal Revenus Service

### **Domestic Production Activities Deduction**

➤ Attach to your tax return. ➤ See separate instructions.

OMB No. 1545-1984

Attachment Sequence No. **143** 

Name(s) as shown on return

Identifying number

SIN	MON & SHIRLEY BERNSTEIN			37	1-32-5211
	Note. Do not complete column (a), unless you have oil-related production activities.		(a)	•	(b)
	Enter amounts for all activities in column (b), including oil-related production activities.	Oil-re	lated production	activities	All activities
1	Domestic production gross receipts (DPGR)	1			9,747.
2	Allocable cost of goods sold. If you are using the small business simplified				
	overall method, skip lines 2 and 3	2			33.
3	Enter deductions and losses allocable to DPGR (see instructions)	3			9,714.
4	If you are using the small business simplified overall method, enter the amount				
	of cost of goods sold and other deductions or losses you ratably apportion to				
	DPGR. All others, skip line 4	4			
5	Add lines 2 through 4	5			9,747.
6	Subtract line 5 from line 1	6			0.
7	Qualified production activities income from estates, trusts, and certain partnerships	Table particular of the control of t			
	and S corporations (see instructions)	7			
8	Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to				
	line 10	8			
9	Amount allocated to beneficiaries of the estate or trust (see instructions)	9			
	Oil-related qualified production activities income. Estates and trusts, subtract	٣			
	line 9, column (a), from line 8, column (a), all others, enter amount from line 8,				
	column (a). If zero or less, enter -0- here	10a			A page (PMA) in the CMMON Common of the Comm
b	Qualified production activities income. Estates and trusts, subtract line 9, column	700			100 1 100 100 100 100 100 100 100 100 1
	(b), from line 8, column (b), all others, enter amount from line 8, column (b). If zero or				
	less, enter -0- here, skip lines 11 through 21, and enter -0- on line 22	10b			0.
11	income limitation (see instructions):	100	33.		
• •	<ul> <li>Individuals, estates, and trusts. Enter your adjusted gross income figured without the</li> </ul>	he	,	Secretary of American Control of the	
	domestic production activities deduction		Ì		
	All others. Enter your taxable income figured without the domestic production	• • • • • • • • • • • • • • • • • • • •			
	activities deduction (tax-exempt organizations, see instructions)			11	
12	Enter the smaller of line 10b or line 11. If zero or less, enter -0· here, skip lines 13 throu				
	and enter -0- on line 22			12	
13	Enter 9% of line 12	•••••		13	
<b>1</b> 4a	Enter the smaller of line 10a or line 12	149		Dispersion of the control of the con	
b	Reduction for oil-related qualified production activities income. Multiply line 14a by 3%			14b	10 pg - 10 pg
15	Subtract line 14b from line 13				
16	Form W-2 wages (see instructions)				<del></del>
17	Form W-2 wages from estates, trusts, and certain partnerships and S corporations (se		•••••		
	instructions)	_			
18	Add lines 16 and 17. Estates and trusts, go to line 19, all others, skip line 19 and go to	line 2	 N	18	
19	Amount allocated to beneficiaries of the estate or trust (see instructions)				
20	Estates and trusts, subtract line 19 from line 18, all others, enter amount from line 18		***************************************	20	
21	Form W-2 wage limitation. Enter 50% of line 20				
22	Enter the smaller of line 15 or line 21				0.
23	Domestic production activities deduction from cooperatives. Enter deduction from For				
-	1099-PATR, box 6			23	
24	Expanded affiliated group allocation (see instructions)				
25	Domestic production activities deduction. Combine lines 22 through 24 and enter the			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Form 1040 line 25: Form 1120 line 25: outline applicable line of community			25	0.
LHA	For Paperwork Reduction Act Notice, see separate instructions.				Form <b>8903</b> (Rev. 12-2010)

# Qualified Production Activity Income Schedule

Name SIMON & SHIRLEY BERNSTEIN

Identifying Number. 371-32-5211

	Domestic Production		Directly Allocable Expenses	locable ses		Interest E Ap	Interest Expense Allocation/ Apportionment	cation/ t	Total	Qualified
Description	Gross Receipts (DPGR)	DPGR Ratio	Costs of Goods Sold	Other Costs	Apportioned Expenses	Allocable Assets	Assets Ratio	Interest Expense	Qualified Expenses	Activity Income
NSTEIN FAMILY INVESTMENTS LLLP	4,826.		1,705	2,028.	5,500.				, 233,	-4,407
BERNSTEIN FAMILY INVESTMENTS LLLP	4,827,	1	1,705,	2,028,	105'5				9,234.	-4,407,
NSTEIN HOLDINGS LLC	47.	KIIOOO.	16.	20.	F 9				7.7	, ć
BERNSTEIN HOLDINGS LLC	47.	errooo.	17.	20.	<b>f</b> 9				₹\$	4.
-QUALIFIED ACTIVITIES	.608,885	.975234			<b>.</b> ⁰				ີ ດ	
J.Y.	.393,556.	T.	3,443.	4,096.	EI0'II				·244'8I	
TOTAL FROM OURLIFIED ACTIVITIES	.747,8	.024766	3,443.	4,096,	11,013				9,747.	0
*										
Verified to the first of the fi										
								į		
	_					_				

Form 1116 U.S. and Foreign Soc	urce Income Summai	ry	
NAME SIMON & SHIRLEY BERNSTEIN	· · ·		371-32-5211
			FOREIGN
INCOME TYPE	TOTAL	U.S.	PASSIVE
Compensation	135,000.	135,000.	
Dividends/Distributions Interest	27,083.	27,083.	
	51,050.	51,050.	
Capital Gains Business/Profession	1. 87,667.	1. 87,667.	
Rent/Royalty	45.	01,001.	45.
State/Local Refunds	45•		40.
Partnership/S Corporation SEE STATEMENT 41	206,266.	202,878.	3,388.
Trust/Estate	200,200	202,070.	3,300.
Other Income	61,637.	61,637.	
Gross Income	568,749.	565,316.	3,433.
	300,743.	303,310.	3, ±33.
Less:			
Section 911 Exclusion			
Capital Losses Capital Gains Tax Adjustment	3,001.	3,001.	
Total Income - Form 1116	565,748.	562,315.	3,433.
Business/Profession Expenses Rent/Royalty Expenses Partnership/S Corporation Losses Trust/Estate Losses Capital Losses Non-capital Losses Individual Retirement Account Moving Expenses Self-employment Tax Deduction Self-employment Health Insurance Keogh Contributions Alimony Forfeited Interest Foreign Housing Deduction Other Adjustments	87,672.	87,030.	642.
Capital Gains Tax Adjustment			
Total Deductions	87,672.	87,030.	642.
Adjusted Gross Income	478,076.	475,285.	2,791.
Less Itemized Deductions: Specifically Allocated Home Mortgage Interest Other Interest	31,921. 62,727. 54.	31,921. 62,727. 54.	
Ratably Allocated	46,444.	46,164.	280.
Total Adjustments to Adjusted Gross Income	141,146.	140,866.	280.

### **Allocation of Itemized Deductions**

NAME

### SIMON & SHIRLEY BERNSTEIN

371-32-5211

	Total Itemized	Itemized Deductions After Sec. 68		Form 1116	
•	Deductions	Reduction	Specifically U.S.	Specifically Foreign	Ratable
Taxes	19,756.				19,756.
Interest - Not Including Investment Interest	62,727.		62,727.		
Contributions Miscellaneous Deductions Subject to 2%	31,921.		31,921.		
Other Miscellaneous Deductions - Not Including Gambling Losses					
Foreign Adjustment	,				
Total Itemized Deductions Subject to Sec. 68	114,404.				
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental	26,688.				26,688.
Investment Interest	54.		54.		
Casualty Losses					
Gambling Losses					
Foreign Adjustment		The state of the s			
Total Itemized Deductions	141,146.		And the common of a family for a figure of more desired as a second as a family of the common of the		A property of the control of the con
Total Allowed on Schedule A			94,702.		46,444.

### Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

### SIMON & SHIRLEY BERNSTEIN

371-32-5211

### Foreign Income Category

### PASSIVE INCOME

Regu	lar	2005	2006	2007	2008	2009	2010
1.	Foreign tax paid/accrued			The second second of the second secon		And the second s	124.
2.	FTC carryback to 2010	(1) Street Stree	A Committee of the Comm	NY TANÀNA MANAGEMBER NA SANTANA MANAGEMBER N		Service and Colon Land processed gifth Land as \$15000. To \$2.5 performance and the colon land of the colon land processed gifth Land gifth Land processed gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth Land gifth	
	for amended returns			photo in a remaining parties and it is any continued to applicate the first of the continued to the continue		And it is required to the comment of	
3.	Reduction allocated to		A CONTROL OF THE PARTY OF THE P			A CONTROL OF THE PROPERTY OF T	
	excluded income		phonographic production of the control of the contr			And the second s	
4.	Foreign tax available	577 E. L. P. L. L. L. L. L. L. L. L. L. L. L. L. L.	DEFICION CONTROL OF THE PROPERTY OF THE PROPER		20,749-2074 12-11-10-2074 12-11-11-11-11-11-11-11-11-11-11-11-11-1	The section of the se	124.
5.	Maximum credit allowable			The state of the s			640.
6.	Unused foreign tax (+)						
	or excess of limit ( - )						-516.
7.	Foreign tax carryback		Constitution of the Consti	en Service (Service ) Annual (Service ) and the service (Service ) and the	The second secon		
8.	Foreign tax carryforward						
9.	Less treaty adjustment		A TORREST AND A SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF THE SECURITY OF T	A STATE OF THE STA			
10.	Foreign tax or excess					CONTROL CONTRO	
	limit remaining						-516.
	Total foreign taxes from all	available years to be ca	rried to next year			·	

		2000	2001	2002	2003	2004
1.	Foreign tax paid/accrued	(Control of control find a characteristic of their product of				The second secon
2.	FTC carryback to 2010		And the second of the second o			
	for amended returns				Constitution of the second sec	
3.	Reduction allocated to				right in further for the other of the first in the other of the other of the other of the other of the other of the other of the other of the other of the other of the other of the other of the other of the other of the other of the other of the other other of the other of the other o	
	excluded income					Annual Control of the
4.	Foreign tax available			Control of the Contro		The state of the s
5.	Maximum credit allowable					and the sign can again the entertainty and the state of t
6.	Unused foreign tax ( + )					
	or excess of limit ( - )					
7.	Foreign tax carryback	Mark Language for other parties and the first and the second of the seco	The second secon			
8.	Foreign tax carryforward					231 000 (1300)
9.	Less treaty adjustment		9, 50 (1) (40) 5 (40) 1 (40) 4			Application of the control of the co
10.	Foreign tax or excess					
	ilmit remaining					

### Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

### SIMON & SHIRLEY BERNSTEIN

371-32-5211

### Foreign Income Category

### PASSIVE INCOME

AMT		2005	2006	2007	2008	2009	2010
1.	Foreign tax paid/accrued	produce and the second production of the secon	20 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2		A STATE OF THE STA	The second secon	124.
2.	FTC carryback to 2010			The second secon		Common co	
	for amended returns		The state of the s		The state of the s		
3.	Reduction allocated to				irekoa II ezaro di norazoa		
	excluded income		The second secon		The state of the s	Supply against a second of the	
4,	Foreign tax available		or in court to collect a collect red allow beauty in a service of the collect red and the collect red allowed and		STANDARD AND AND AND AND AND AND AND AND AND AN	The second secon	124.
5.	Maximum credit allowable				Victoria de la companya del companya del companya de la companya del la companya de la companya	A brokeling to deline a primarie gramma per a come a come de la come de la come d	0.
6.	Unused foreign tax ( + )						
	or excess of limit ( - )						124.
7.	Foreign tax carryback				party frames serving per require to the control of		
8.	Foreign tax carryforward						
9.	Less treaty adjustment			And designed traperty of the mean designed of the mean of the contract of the			
10.	Foreign tax or excess						
	limit remaining						124.
	Total foreign taxes from all	available years to be ca	rried to next year				124.

		2000	2001	2002	2003	2004
1.	Foreign tax paid/accrued	Service Seas / American was a common of the		Approximation in the analysis and approximate the approximation of the a		
2.	FTC carryback to 2010			de la companya del companya de la companya del companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya del company	eroppy of the Sector (Brown	The second of th
	for amended returns		and the principle of the second secon	And design the second s		
3.	Reduction allocated to	s da si principi di si si si si si si si si si si si si si			miner, moder representations of the contraction of	Approximately and a proper speciment of the annual or the second or the second of the
	excluded income	Service and the service of the servi				
4.	Foreign tax available		About the first of a part of the part of t			The second secon
5.	Maximum credit allowable		TO AMOUNT OF THE PARTY OF THE P	CONTROL OF THE PROPERTY OF THE		
6.	Unused foreign tax ( + )					<u></u>
	or excess of limit ( - )					
7.	Foreign tax carryback	Section 1 and 1 an			en vala omnover en risano e ran stata dan valanda Pala ju Pala salar da Pala juga da pala da p	
8.	Foreign tax carryforward					
9.	Less treaty adjustment	The second secon		To condition of other discussions of the condition of the	And contains a maniform of the stage of the contains and	
10.	Foreign tax or excess					
	limit remaining					

Form 1116	Foreign Tax Preference Items		
NAME SIMON & SHIRLEY BERNSTEIN			371-32-5211
Alternative minimum tax deductions allocation:			
Itemized deductions		14,736.	
Other deductions not directly allocated		0.	
Total alternative minimum tax adjustments		14,736.	
Total foreign source income	3,433.		
Total alternative minimum tax adjustments Total foreign source income Total gross income	568,794.		
Ratio of foreign source income to gross income		.006036	
Total foreign source deductions		89.	
Fotal deductions allocated to foreign income class;			
v .			
			89
	•••••••••••••••••••••••••••••••••••••••		

Social Security Number 371-32-5211

1. Enter as positive number your AMT NOL deduction. 2. Enter alternative minimum taxable income without the NOL. 3.70,394. 3. Enter as a positive number any gain excluded on the sale or exchange of qualified small business stock. 5. Enter any amount of any domestic production activities deduction 6. Enter any amount of any domestic production activities deduction 7. Enter any adjustments to adjusted gross income. 8. Enter any adjustments to adjusted gross income. 8. Enter any adjustments to termized deductions from line 27 below. 9. Modified alternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.) 9. Modified alternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.) 11. AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.) 12. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.) 13. Enter medical expenses from NOL Carryover Worksheet, line 13.) 14. Multiply line 12 by 2.5% (.025). 15. Enter the lasser of line 13 or line 4.  16. Enter your motor vehicle taxas eduction from Schedule A (Form 1040), line 7. 17. Refigure your motor vehicle taxas deduction using line 12 above as your adjusted gross income. 18. Subtract line 17 from line 18.  20. Refigured qualified mortgage insurance premiums from Schedule A, line 13. 20. Refigured qualified mortgage insurance premiums. 21. Subtract line 20 from line 19. 22. Enter charitable contributions deduction using line 12 above as your AGI. 23. Refigure the charitable contributions deduction from Schedule A, line 13. 24. Subtract line 23 from line 2.  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 21.	USE	YOUR 2010 FORM 1040 TO COMPLETE THIS WORKSHEET:		
2. Enter a ternative minimum taxable income without the NOL. 3. Enter as a positive number any net capital loss deduction on line 13 form 1040. 4. Enter as a positive number any gein excluded on the sale or exchange of qualified small business stock 5. Enter any amount of any domestic production activities deduction 6. Enter any adjustment for AMT depletion 7. Enter any adjustments to adjusted gross income. 8. Enter any adjustments to itemized deduction from line 27 below. 9. Modified afternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.) 10. Alternative taxable income Combine lines 2 through 8 and enter the result (but not less than zero.) 13. AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.) 13. ADJUSTMENTS TO ITEMIZED DEDUCTIONS (Individuals Only). 14. MANTION Carryover Worksheet, line 13.) 15. Enter medical expenses from NOL Carryover Worksheet, line 13.) 16. Enter your motor vehicle taxes eduction from Schedule A (Form 1040), line 7. 17. Refigure your motor vehicle taxes deduction from Schedule A (Form 1040), line 7. 17. Refigure your motor vehicle taxes deduction from Schedule A, line 13. 18. ADJUSTMENT TO OUALIFIED MORTGAGE INSURANCE PREMIUMS: 19. Qualified mortgage insurance premiums from Schedule A, line 13. 20. Refigured qualified mortgage insurance premiums. 21. Subtract line 17 from line 16. 22. Enter charitable contributions deduction using line 12 above as your AGI. 23. Befigure the charitable contributions deduction using line 12 above as your AGI. 24. Subtract line 29 from line 22. 25. Enter the casualty and theft losses from Form 4684, line 21. 26. Enter casualty and theft losses from Form 6884, line 21. 26. Enter casualty and theft losses from Form 6884, line 21.				657,610.
3. Enter as a positive number any net capital loss deduction on line 13 Form 1040. 4. Enter as a positive number any gain excluded on the sale or exchange of qualified small business stock 5. Enter any amount of any domestic production activities deduction 6. Enter any adjustments to adjusted gross income. 7. Enter any adjustments to tember deductions from line 27 below. 9. Modified alternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.) 9. Modified alternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.) 10. Alternative laxable income limitation. Enter 90% of line 9. 11. ANT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.) 12. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.) 13. Enter model adoptives from NOL Carryover Worksheet, line 13.) 14. Multiply line 12 by 2.5% (.025). 15. Enter the lesser of line 13 or line 14. 16. ADJUSTMENT TO MOTOR VEHICLE TAXES: 16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7. 17. Refigured your motor vehicle taxes deduction using line 12 above as your adjusted gross income. 18. Subtract line 17 from line 16. 18. Subtract line 17 from line 19. 18. Subtract line 20 from line 19. 19. Qualified mortgage insurance premiums from Schedule A, line 13. 20. Refigured qualified mortgage insurance premiums. 21. Subtract line 20 from line 19. 22. Enter chariable contributions deduction from the AMT Contribution Worksheet. 23. Refigure the chariable contributions deduction using line 12 above as your AGI. 24. Subtract line 23 from line 22. 25. Enter the casualty and theft losses from Form 4684, line 21. 26. Enter casualty and theft losses from Form 4684, line 18.	2.	Enter alternative minimum taxable income without the NOL.	370,394.	A CONTRACT OF THE PROPERTY OF
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business stock  5. Enter any amount of any domestic production activities deduction  6. Enter any adjustment for AMT depletion  7. Enter any adjustments to adjusted gross income.  8. Enter any adjustments to ternized deductions from line 27 below.  9. Modified atternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.)  10. Alternative taxable income limitation. Enter 90% of line 9.  11. AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.).  12. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.)  ADJUSTMENTS TO ITEMIZED DEDUCTIONS (Individuals Only).  12. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.)  13. Enter medical expenses from NOL Carryover Worksheet, line 17.  14. Multiply line 12 by 2.5% (.025).  15. Enter the lesser of line 13 or line 14.  12. 027.  ADJUSTMENT TO MOTOR VEHICLE TAXES:  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CASIALTY AND THEFT LOSSES:  22. Enter chariable contributions deduction using line 12 above as your AGI.  23. Refigure the chariable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASIALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 21.	4.		The state of the s	The property of the property o
5. Enter any amount of any domestic production activities deduction 6. Enter adjustment for AMT depletion 7. Enter any adjustments to itemized deductions from line 27 below. 9. Modified alternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.) 1. Alternative taxable income limitation. Enter 90% of line 9. 1. AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.) 1. AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.) 1. AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.) 1. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.) 1. ADJUSTMENTS TO ITEMIZED DEDUCTIONS (individuals Only). 1. Modified adjusted gross income (from NOL Carryover Worksheet, line 17. 1. Enter medical expenses from NOL Carryover Worksheet, line 17. 1. Enter medical expenses from NOL Carryover Worksheet, line 17. 1. Enter the lesser of line 13 or line 14. 1. 12,027. 1. Enter the lesser of line 13 or line 14. 1. 12,027. 1. Enter the lesser of line 17 or motor vehicle taxes deduction from Schedule A (Form 1040), line 7. 1. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income. 1. Subtract line 17 from line 18. 1. ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS: 1. Subtract line 20 from line 19. 1. Subtract line 20 from line 19. 1. Subtract line 20 from line 19. 1. ADJUSTMENT TO CHARITABLE CONTRIBUTIONS: 2. Enter charitable contributions deduction from the AMT Contribution Worksheet. 2. Subtract line 23 from line 22. 2. Enter charitable contributions deduction using line 12 above as your AGI. 2. Subtract line 23 from line 22. 2. Enter charitable contributions deduction using line 12 above as your AGI. 2. Subtract line 23 from line 22. 2. Enter casualty and theft losses from Form 4684, line 21. 2. Enter casualty and theft losses from Form 4684, line 18.			Section Control of the Control of th	Go has a region to a give the region of a record or a record or a record of the record
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9. Modified alternative taxable income. Combine lines 2 through 8 and enter the result (but not less than zero.) 385,421.  10. Alternative taxable income limitation. Enter 90% of line 9. 31, AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.) 310,731.  ADJUSTMENTS TO ITEMIZED DEDUCTIONS (Individuals Only).  21. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.) 481,076.  ADJUSTMENT TO MEDICAL EXPENSES:  13. Enter medical expenses from NOL Carryover Worksheet, line 17. 26,463.  14. Multiply line 12 by 2.5% (.025). 15. Enter the lesser of line 13 or line 14. 27. ADJUSTMENT TO MOTOR VEHICLE TAXES: 16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7. 17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income. 18. Subtract line 17 from line 16. ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS: 19. Qualified mortgage insurance premiums from Schedule A, line 13. 20. Refigured qualified mortgage insurance premiums from Schedule A, line 13. 21. Subtract line 20 from line 19. 22. Enter charitable contributions deduction trom the AMT Contribution Worksheet. 23. Refigure the charitable contributions deduction using line 12 above as your AGI. 24. Subtract line 23 from line 22. 25. Enter casualty and theft losses from Form 4684, line 21. 26. Enter casualty and theft losses from Form 4684, line 18.	8.	Enter any adjustments to itemized deductions from line 27 below.	12,027.	The A marked and a compared with the second of the second
(but not less than zero.)  10. Alternative taxable income limitation. Enter 90% of line 9.  11. AMT NOL carryover to 2011. Subtract line 10 from line 1 and enter the result (but not less than zero.)  ADJUSTMENTS TO ITEMIZED DEDUCTIONS (individuals Only).  12. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.)  ADJUSTMENT TO MEDICAL EXPENSES:  13. Enter medical expenses from NOL Carryover Worksheet, line 17.  14. Multiply line 12 by 2.5% (.025).  15. Enter the lesser of line 13 or line 14.  ADJUSTMENT TO MOTOR VEHICLE TAXES:  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction using line 12 above as your AGI.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 25 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 21.			The second secon	2011 101 101 101 101 101 101 101 101 101
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ADJUSTMENTS TO ITEMIZED DEDUCTIONS (Individuals Only).  12. Modified adjusted gross income (from NOL Carryover Worksheet, line 13.)  ADJUSTMENT TO MEDICAL EXPENSES:  13. Enter medical expenses from NOL Carryover Worksheet, line 17.  14. Multiply line 12 by 2.5% (.025).  15. Enter the lesser of line 13 or line 14.  ADJUSTMENT TO MOTOR VEHICLE TAXES:  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.			s (traine and Landens and an annual and a survey of the second of the se	
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ADJUSTMENT TO MEDICAL EXPENSES:  13. Enter medical expenses from NOL Carryover Worksheet, line 17.  14. Multiply line 12 by 2.5% (.025).  15. Enter the lesser of line 13 or line 14.  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	ADJ			
ADJUSTMENT TO MEDICAL EXPENSES:  13. Enter medical expenses from NOL Carryover Worksheet, line 17.  14. Multiply line 12 by 2.5% (.025).  15. Enter the lesser of line 13 or line 14.  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	12.	Modified adjusted gross income (from NOL Carryover Worksheet, line 13.)		481,076.
14. Multiply line 12 by 2.5% (.025).  15. Enter the lesser of line 13 or line 14.  ADJUSTMENT TO MOTOR VEHICLE TAXES:  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.				
14. Multiply line 12 by 2.5% (.025).  15. Enter the lesser of line 13 or line 14.  ADJUSTMENT TO MOTOR VEHICLE TAXES:  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	13.	Enter medical expenses from NOL Carryover Worksheet, line 17.	26,463.	And the second s
15. Enter the lesser of line 13 or line 14.  ADJUSTMENT TO MOTOR VEHICLE TAXES:  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.				A part of the second se
ADJUSTMENT TO MOTOR VEHICLE TAXES:  16. Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.  17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	15.	Enter the lesser of line 13 or line 14.	The state of the s	12,027.
17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.				·
17. Refigure your motor vehicle taxes deduction using line 12 above as your adjusted gross income.  18. Subtract line 17 from line 16.  ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	16.	Enter your motor vehicle taxes deduction from Schedule A (Form 1040), line 7.	District Control of the Control of t	
ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.				A STATE OF THE PROPERTY OF THE
ADJUSTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:  19. Qualified mortgage insurance premiums from Schedule A, line 13.  20. Refigured qualified mortgage insurance premiums.  21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	18.	Subtract line 17 from line 16.	A company of the comp	
20. Refigured qualified mortgage insurance premiums. 21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.				
20. Refigured qualified mortgage insurance premiums. 21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	19.	Qualified mortgage insurance premiums from Schedule A, line 13.	A district of the control of the con	
21. Subtract line 20 from line 19.  ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	20.	Refigured qualified mortgage insurance premiums.	Project Control	A CONTRACTOR OF THE PROPERTY O
ADJUSTMENT TO CHARITABLE CONTRIBUTIONS:  22. Enter charitable contributions deduction from the AMT Contribution Worksheet.  23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.				
23. Refigure the charitable contributions deduction using line 12 above as your AGI.  24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.			-	···
24. Subtract line 23 from line 22.  ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	22.	Enter charitable contributions deduction from the AMT Contribution Worksheet.	31,921.	
ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	23.	Refigure the charitable contributions deduction using line 12 above as your AGI.	31,921.	
ADJUSTMENT TO CASUALTY AND THEFT LOSSES:  25. Enter the casualty and theft losses from Form 4684, line 21.  26. Enter casualty and theft losses from Form 4684, line 18.	24.	Subtract line 23 from line 22.		
26. Enter casualty and theft losses from Form 4684, line 18.				
26. Enter casualty and theft losses from Form 4684, line 18.	25.	Enter the casualty and theft losses from Form 4684, line 21.	A Company of the Comp	
27 Multiply line 12 by 10% (10)	26.	Enter casualty and theft losses from Form 4684, line 18.	Signature of the control of the cont	
21. Wildiply line 12 by 10/6 (.10).	27.	Multiply line 12 by 10% (.10).	opinion favored Signature A district Signature A di	
28. Subtract line 27 from line 26 (but not less than zero.)	28.	Subtract line 27 from line 26 (but not less than zero.)	Separation of the control of the con	
29. Subtract line 28 from line 25.	29.	Subtract line 28 from line 25.		
TOTAL ADJUSTMENT:	TOT	AL ADJUSTMENT;		
30. Combine lines 15, 18, 21, 24, and 26. Enter the amount from this line on line 7 above.	30.	Combine lines 15, 18, 21, 24, and 26. Enter the amount from this line on line 7 above.	The property of the property o	12,027.

AMT NOL	NOIL			Deta	Detail AMT NOL Carr	Carryover Worksheet					2010
Name(s)	S) & SHIRLEY	BERNSTEIN								Social S 371-	Social Security Number 371-32-5211
Year Carried From	Amount Available for Carryover	Amount Used in 2010	Amount Used in								
2009	657,610.	346,879.	The second secon		And the second s		The state of the s	An extra discount of the control of	Company of the compan		
For American and A		The second secon	The second secon	The second secon	And the second property of the second propert	Figure 1. The second se	The state of the s	The second secon	When the search of the search	Control Contro	The state of the first country of the property
The second secon		Comments and comments and comments are comments and comments and comments are comments and comme	The state of the s	Service of the control of the contro	The second secon	The second secon	grant of the control	General Control of Con	The second secon	Search Assessment of the Control of	
And the second s				The second of th	The second secon					Control of the contro	
Comment of the American Commen		And the second s	And the second s	Section 1. A control of the control	The state of the s	Programme of the control of the cont		The state of the s	And a state of the	Control of the Contro	A CONTROL OF THE CONT
Control of the Contro		The second secon		member 20 miles for the control of t	The second secon	The state of the s	The control of the co	And the second s	Section and the control of the contr		
The second secon				The second secon		The second secon	The state of the s				
			A country of management of the country of the count	The second secon	A second of the control of the contr	A command of the comm	Secretary of the control of the cont	End Limit A Mark Blood 1 and the control of the con	The state of the control of the cont		The second secon
Totals Totals Less Re	al amount avai s total amount s total amount emaining carry	arryover	657,610. 346,879. 0.							-	

016721 05-01-10

FOR	M 1040 SOCIAL SECURITY BENEFITS WORKSHEET	STATEMENT	
A	CK ONLY ONE BOX: SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER) MARRIED FILING JOINTLY		
	• MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE AT ANY TIME DURING 2010		
D	• MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE FOR ALL OF 2010		
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	40,63	36.
	ENTER ONE HALF OF LINE 1	20,33	L8.
٥.	15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT		
4.	INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099 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	462,58	35.
_	PUERTO RICO THAT YOU CLAIMED	400.0	
	ADD LINES 2, 3, AND 4	482,90	03.
	LINE NEXT TO LINE 36		0.
	SUBTRACT LINE 6 FROM LINE 5	482,90	03.
_	\$-0- IF YOU CHECKED BOX C	32,00	00.
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 2010, BE SURE YOU ENTERED 'D' TO THE		
	RIGHT OF THE WORD "BENEFITS" ON LINE 20A.		
10.	[X] YES. SUBTRACT LINE 8 FROM LINE 7	450,90	03.
	\$-0- IF YOU CHECKED BOX C	12,00	00.
	SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0	438,90	
	ENTER THE SMALLER OF LINE 9 OR LINE 10	12,00	
	ENTER ONE HALF OF LINE 12	6,00	00.
	ENTER THE SMALLER OF LINE 2 OR LINE 13	6,00	
	MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-		
	ADD LINES 14 AND 15	379,00	
Τ/•	MULTIPLY LINE 1 BY 85% (.85)	34,5	41.
18.	TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17 * ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B	34,54	41.

FORM 1040	IRA	DISTRIBUT	ONS		STATE	MENT	_2
NAME OF PAYER				ROSS TRIBUTION	TAXABL	E AMOU	TNT
OPPENHEIMER & CO INC OPPENHEIMER & CO INC			<del></del>	13,581. 13,515.		13,58 13,51	
TOTAL TO FORM 1040, L	INE 15		<u></u>	27,096.		27,09	6.
FORM 1040	TAX-	EXEMPT INTE	EREST		STATE	MENT	3
NAME OF PAYER					AM	OUNT	
FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN	FAMILY INVEST HOLDINGS LLC						
TOTAL TO FORM 1040, L	INE 8B					19,0	50.
TOTAL TO PORT 1040, L							
	WAGES RECEI	VED AND TAX	KES WITHH	ELD	STATE	MENT	4
FORM 1040		VED AND TAX FEDERAL TAX WITHHELD	STATE TAX	CITY SDI D TAX W/H		MENT MEDICZ	ARE
FORM 1040 T S EMPLOYER'S NAME	WAGES RECEI	FEDERAL TAX	STATE TAX	CITY SDI	FICA	MEDICA TAX	ARE
FORM 1040  T S EMPLOYER'S NAME T ARBITRAGE INTERNATIONAL	WAGES RECEI  AMOUNT PAID	FEDERAL TAX	STATE TAX	CITY SDI	FICA TAX	MEDICATAL	58.
FORM 1040  T S EMPLOYER'S NAME - T ARBITRAGE INTERNATIONAL MANAGEMENT	AMOUNT PAID  135,000.	FEDERAL TAX	STATE TAX WITHHEL	CITY SDI	FICA TAX 6,622.	1,9!	ARE
FORM 1040  T S EMPLOYER'S NAME T ARBITRAGE INTERNATIONAL MANAGEMENT  TOTALS	AMOUNT PAID  135,000.	FEDERAL TAX WITHHELD	STATE TAX WITHHEL	CITY SDI	FICA TAX 6,622. 6,622. STATE	1,9!	58. 58.
FORM 1040  T S EMPLOYER'S NAME T ARBITRAGE INTERNATIONAL MANAGEMENT TOTALS  FORM 1040	AMOUNT PAID  135,000.  135,000.  QUA	FEDERAL TAX WITHHELD  ALIFIED DIV	STATE TAX WITHHEL	CITY SDI D TAX W/H	FICA TAX  6,622.  6,622.  STATE QUA DIV	MEDICATAL  1,99	58. 58.

56

SIMON & SHIRLEY BERNSTEIN				371-32-5	211
FROM K-1 - BERNSTEIN HOLDINGS LLOFROM K-1 - ELIOT BERNSTEIN FAMILY FROM K-1 - ELIOT BERNSTEIN FAMILY THE FROM K-1 - JILL IANTONI FAMILY THE FROM K-1 - LISA S FRIEDSTEIN FAMILY THE FROM K-1 - LISA S FRIEDSTEIN FAMILY THE FROM K-1 - LISA S FRIEDSTEIN FAMILY THE FROM K-1 - LISA S FRIEDSTEIN FAMILY THE FROM K-1 - LISA S FRIEDSTEIN FAMILY TRUST	TRUST TRUST RUST RUST LLY		139. 1. 2. 1. 2.	21,0	02. 1. 1. 1. 1. 1.
SCHEDULE A MISCELLANEOUS I	DEDUCTIONS S	UBJECT TO FLO	OR	STATEMENT	<del></del>
DESCRIPTION				AMOUNT	
FROM K-1 - BERNSTEIN FAMILY INVESTED FROM K-1 - BERNSTEIN FAMILY INVESTEOM K-1 - BERNSTEIN HOLDINGS LLCFROM K-1 - BERNSTEIN HOLDINGS LLCFROM K-1 - ELIOT BERNSTEIN FAMILY FROM K-1 - ELIOT BERNSTEIN FAMILY FROM K-1 - JILL IANTONI FAMILY THE FROM K-1 - LISA S FRIEDSTEIN FAMILY	STMENTS LLLP C C Y TRUST Y TRUST RUST		-		6. 61. 60. 1. 1.
TOTAL TO SCHEDULE A, LINE 23			:	1	37.
SCHEDULE A POINTS NOT	reported o	N FORM 1098		STATEMENT	7
DESCRIPTION	DATE RE- FINANCED	TOTAL POINTS	AMORT. PERIOD /MOS.	AMORTIZAT THIS YEA	
WELLS FARGO	01/01/01	26,759.	180	1,7	84.
TOTAL TO SCHEDULE A, LINE 12				1,7	84.

SCHEDULE A	CASH CONTRIBUTIONS		STATEMENT	8
DESCRIPTION		AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	
VARIOUS ORGANIZED CHARITIES FROM K-1 - LIC HOLDINGS INC		500. 2,343.		
SUBTOTALS	<del>-</del>	2,843.	<del></del>	
TOTAL TO SCHEDULE A, LINE 1	6		2,8	43.
SCHEDULE A	INVESTMENT INTEREST		STATEMENT	9
DESCRIPTION			AMOUNT	
FROM K-1 - BERNSTEIN FAMILY FROM K-1 - BERNSTEIN FAMILY FROM K-1 - BERNSTEIN HOLDIN	INVESTMENTS LLLP			27. 26.
TOTAL TO SCHEDULE A, LINE 1	4			54.
SCHEDULE A ME	DICAL AND DENTAL EXPEN	SES	STATEMENT	10
DESCRIPTION			AMOUNT	
MEDICAL INSURANCE PREMIUMS DOCTORS, DENTISTS, ETC. PRESCRIPTION MEDICINES AND LODGING TRANSPORTATION MEDICARE PREMIUMS WITHHELD MEDICARE PREMIUMS WITHHELD	DRUGS		1 8,1 18,9 25,0 5,1 4,2	75. 00. 18. 43.
TOTAL TO SCHEDULE A, LINE 1			62,5	44.

SCHEDULE A	STATE AND LOCAL GENERAL SALES TAXES	STATEMENT 11
DESCRIPTION		AMOUNT
STATE SALES TAX LOCAL SALES TAX		1,750. 145.
TOTAL TO SCHEDULE A	LINE 5	1,895.

SCHEDULE A	GENERAL SALES TAX DEDUCTION WO	RKSHEET	STATEMENT	12
	UR STATE GENERAL SALES TAXES FROM THE LE TABLE.		1,7	50.
IF, FOR	ALL OF 2010, YOU LIVED ONLY IN CONNECTICE			
	RICT OF COLUMBIA, INDIANA, KENTUCKY, MAII , MASSACHUSETTS, MICHIGAN, NEW JERSEY,	NE,		
RHODE IS	LAND, OR WEST VIRGINIA, SKIP LINES 2			
	5, ENTER -0- ON LINE 6, AND GO TO LINE 7 E, GO TO LINE 2.	•		
2 DID YOU	LIVE IN ALASKA, ARIZONA, ARKANSAS,			
	IA (LOS ANGELES COUNTY ONLY), , GEORGIA, ILLINOIS, LOUISIANA,			
	, NEW YORK STATE, NORTH CAROLINA,			
SOUTH CA	ROLINA, TENNESSEE, UTAH, OR			
	IN 2010? NTER -0			
IF YES,	ENTER YOUR LOCAL GENERAL SALES			
	OM THE APPLICABLE TABLE.	0.		
	LOCALITY IMPOSE A LOCAL GENERAL X IN 2010? RESIDENTS OF			
	IA AND NEVADA SEE INSTRUCTIONS.			
	KIP LINES 3 THROUGH 5, ENTER INE 6 AND GO TO LINE 7.			
IF YES,	ENTER YOUR LOCAL GENERAL SALES			
TAX RATE BOCA RAT	, BUT OMIT PERCENTAGES.	.5000		
	ON ENTER -0- ON LINE 2 ABOVE?			
IF NO, S	KIP LINES 4 AND 5 AND GO TO LINE 6.			
-	ENTER YOUR STATE GENERAL SALES , BUT OMIT PERCENTAGES.	6.0000		
	INE 3 BY LINE 4. ENTER THE RESULT AS	0.0000		
	L (ROUNDED TO AT LEAST THREE PLACES). ENTER -0- ON LINE 2 ABOVE?	.0830		
	ULTIPLY LINE 2 BY LINE 3.			
IF YES,	MULTIPLY LINE 1 BY LINE 5.		1	45.
6A ADD LINE	1 AND LINE 6.		1,8	95.
6B PART-YEA	R DAYS RATE.		1.000	000
6C MULTIPLY	LINE 6A BY LINE 6B.	·	1,8	95.
7 ENTER YO	UR GENERAL SALES TAXES PAID ON SPECIFIED	ITEMS,		
8 DEDUCTIO	N FOR GENERAL SALES TAXES. ADD LINES 6C	AND 7.		
ENTER TH	E RESULT HERE AND ON SCHEDULE A, LINE 5 3			. O. =
ROYR.	ON THAT LINE.		1,8	95.

SCHEDULE B	INTEREST INCOME		STATEMENT	13
NAME OF PAYER			AMOUNT	
FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - ELIOT BEN FROM K-1 - ELIOT BEN FROM K-1 - JILL IANN FROM K-1 - JILL IANN FROM K-1 - LISA S FO	INGS INC N FAMILY INVESTMENTS LLLP N FAMILY INVESTMENTS LLLP N HOLDINGS LLC N HOLDINGS LLC RNSTEIN FAMILY TRUST RNSTEIN FAMILY TRUST TONI FAMILY TRUST TONI FAMILY TRUST RIEDSTEIN FAMILY TRUST RIEDSTEIN FAMILY TRUST		14,75 17,63 17,63	30. 31. 73. 72. 2. 2. 2. 2.
SCHEDULE D	NET LONG-TERM GAIN OR LOSS FRO 4797, 2439, 6252, 4684, 6781		STATEMENT	14
DESCRIPTION OF PROP	ERTY	GAIN OR LOSS	28% GAII	.1
FORM 6781, PART I	Maria and Maria	1.		<u> </u>
TOTAL TO SCHEDULE D	, PART II, LINE 11	1.		<del></del>
SCHEDULE D	NET SHORT-TERM GAIN OR LOSS RTNERSHIPS, S CORPORATIONS, AND		STATEMENT	<u>15</u>
DESCRIPTION OF ACTIV	VITY		GAIN OR LO	 oss
BERNSTEIN FAMILY IN			-1,3° -1,3°	
BERNSTEIN FAMILY IN BERNSTEIN HOLDINGS I BERNSTEIN HOLDINGS I JILL IANTONI FAMILY	LLC LLC			13. 13. -1.

SCHEDULE D NET LONG-TERM GAIN OR LOSS PARTNERSHIPS, S CORPORATIONS, AND	·	STATEMENT 16
DESCRIPTION OF ACTIVITY	GAIN OR LOSS	28% GAIN
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC BERNSTEIN HOLDINGS LLC ELIOT BERNSTEIN FAMILY TRUST ELIOT BERNSTEIN FAMILY TRUST JILL IANTONI FAMILY TRUST JILL IANTONI FAMILY TRUST LISA S FRIEDSTEIN FAMILY TRUST LISA S FRIEDSTEIN FAMILY TRUST	-54,802. -54,802. -537. -537. -5. -6. -5.	
TOTAL TO SCHEDULE D, PART II, LINE 12	-110,711.	

SCHEDULE D CAPITAL LOSS CARRYOVER	STATEMENT 17
1. ENTER THE AMOUNT FROM FORM 1040, LINE 41	MOUNT. 3,000. 339,930.
5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AN 6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15	145,348.
7. ADD LINES 4 AND 6	3,000.
SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-	142,348.
9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE A 10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7	AMOUNT. 122,458.
ENTER -0	· · · · · 122,458.
SCHEDULE E INCOME OR (LOSS) FROM PARTNERSHIPS AND S CORE	PS STATEMENT 18
SCHEDULE E INCOME OR (LOSS) FROM PARTNERSHIPS AND S CORE	PS STATEMENT 18
NAME  ANY  NOT X  EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SI	PS STATEMENT 18 EC. 179 NONPASSIVE EDUCTION INCOME
NAME ANY NOT X EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SI	EC. 179 NONPASSIVE
NAME  ANY NOT X  EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SI ID NO. RISK FRN CODE LOSS INCOME LOSS DI  P  LIC HOLDINGS INC 20-5290314  S	EC. 179 NONPASSIVE
NAME  ANY NOT X  EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SI ID NO. RISK FRN CODE LOSS INCOME LOSS DI  P 0.  LIC HOLDINGS INC 20-5290314 S BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P	EC. 179 NONPASSIVE EDUCTION INCOME
NAME  ANY NOT X  EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SE ID NO. RISK FRN CODE LOSS INCOME LOSS DE O.  LIC HOLDINGS INC 20-5290314 S BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P	EC. 179 NONPASSIVE EDUCTION INCOME  206,254.
NAME  ANY NOT X  EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SI ID NO. RISK FRN CODE LOSS INCOME LOSS DI  P 0.  LIC HOLDINGS INC 20-5290314 S  BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P  BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P  BERNSTEIN HOLDINGS LLC 32-0234597 P 0.	EC. 179 NONPASSIVE EDUCTION INCOME  206,254.
NAME  ANY NOT X  EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SE ID NO. RISK FRN CODE LOSS INCOME LOSS DE OCCUPANT DE COMPANY DE COMPAN	EC. 179 NONPASSIVE EDUCTION INCOME  206,254.

SCHEDULE E	INCOME OR	(LOSS) FROM	ESTATES AND	TRUSTS ST	PATEMENT 19
NAME	EMPLOYER ID NO.	PASSIVE LOSS	PASSIVE INCOME	NONPASSIVE LOSS	NONPASSIVE INCOME
TT/ SIMON L BERNSTEIN IRREV	51-6600239				
TR		0.	•		
ELIOT BERNSTEIN FAMILY TRUST	65-6477114	0.	<b>1</b>		
ELIOT BERNSTEIN FAMILY TRUST	65-6477114	0.	•		
JILL IANTONI FAMILY TRUST	65-6477115	0.			
JILL IANTONI FAMILY TRUST	65-6477115				
LISA S FRIEDSTEIN	65-6477116				
FAMILY TRUST LISA S FRIEDSTEIN	65-6477116	0.	•		
FAMILY TRUST	05 0477110	0.	•		
TOTALS TO SCHEDULE	E, LINE 34	0.			·

FORM 1116	SUMMARY OF FOR	REIGN TAXES	PAID OR ACCRU	JED STA	ATEMENT 20
PASSIVE INCOME	IMDOCING TAY				
NAME OF COUNTRY	IMPOSING TAX				
DATE PAID ACCRUI	AMT/FOREIGN CURRENCY	DIVIDENDS	AMOUNT IN U.S RENT/ROYALTY		OTHER
VARIOUS					
VARIOUS	0.				61.
VARIOUS	0.				62.
VARIOUS	0.				1.
					124.
TOTAL TO FORM 11:	l6, PART II, LIN	<b>E</b> 8			124.
PRIOR YEAR TAXES		RENT YEAR: OREIGN AMT	CONV. RATE	U.S. AMT	
2009 2008 2007 2006 2005					
TOTAL PRIOR YEAR	TAXES PAID IN T	HE CURRENT	YEAR		
FORM 1116	EXPENSES DIRECTL	Y ALLOCABLE	TO FOREIGN IN	NCOME ST.	ATEMENT 21
DESCRIPTION	-		COUNTRY		AMOUNT
BERNSTEIN FAMILY BERNSTEIN FAMILY			ARIOUS ARIOUS		320. 322.
TOTAL TO FORM 11	16, PART I, LINE	2			642.

FORI	WORLDWIDE CAPITAL GAINS WORKSHEET FOR LINE 17	STATEMENT 22
1	ENTER THE AMOUNT FROM FORM 1040, LINE 41. IF YOU ARE A NONRESIDENT ALIEN, ENTER THE AMOUNT FROM FORM 1040NR, LINE 38	336,930.
2	ENTER WORLDWIDE 28% GAINS	
3	MULTIPLY LINE 2 BY 0.2000	
4	ENTER WORLDWIDE 25% GAINS	
5	MULTIPLY LINE 4 BY 0.2857	
6	ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS 21,03	3.
7	MULTIPLY LINE 6 BY 0.5714 12,01	8.
8	ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS	
9	ADD LINES 3, 5, 7, AND 8	12,018.
10	SUBTRACT LINE 9 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116, LINE 17	324,912.
FORI	4 6251 INTEREST FROM SPECIFIED PRIVATE ACTIVITY BOND	S STATEMENT 23
DES	CRIPTION	AMOUNT
	M K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP M K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP	878. 878.
тота	AL TO FORM 6251, LINE 12	1,756

FORM 4952	INVESTM	ENT INTEREST	EXPENSE		STATEMENT	24
DESCRIPTION			CURF	ENT	CARRYOVER	
FROM K-1 - BERNSTEIN FAMILIER FROM K-1 - BERNSTEIN HOLD	MILY INVEST			27. 26. 1.		
TOTALS TO FORM 4952, LIN	NES 1 AND 2	2		54.		
FORM 4952 INCO	DME FROM PI	ROPERTY HELD	FOR INVEST	MENT	STATEMENT	25
DESCRIPTION					AMOUNT	
INTEREST INCOME DIVIDEND INCOME BERNSTEIN FAMILY INVESTMENSTEIN FAMILY	MENTS LLLP MENTS LLLP			_	51,0 27,0	
TOTAL TO FORM 4952, LINI	E 4A			=	78,1	.83.
FORM 4952 INVESTMEN	NT INTERES	r expense de	EDUCTION SUN	MARY	STATEMENT	26
NAME	FORM OR SCHEDULE	INVESTMENT INTEREST EXPENSE	INVESTMENT INTEREST EXPENSE C/O	DISALLOW INVESTME INTERES EXPENSE	ENT INVESTA ST INTERE	ENT ST
FROM K-1 - BERNSTEIN F FROM K-1 - BERNSTEIN F FROM K-1 - BERNSTEIN H	SCH A	27. 26. 1.	0 .	•	0. 0. 0.	27. 26. 1.
TOTALS		54.	0	•	0.	54.

FORM 4952AMT	INVESTM	ENT INTEREST	EXPENSE	STA	TEMENT 27
DESCRIPTION			CURRE	NT CA	ARRYOVER
FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN FROM K-1 - BERNSTEIN	FAMILY INVES	TMENTS LLLP		27. 26. 1.	
TOTALS TO FORM 4952A	MT, LINES 1 A	ND 2		54.	
FORM 8582	OTHER PASSIV	E ACTIVITIES	S - WORKSHEET	'3 STA	ATEMENT 28
	CURRENT	YEAR	PRIOR YEAR UNALLOWED	OVERALL GA	AIN OR LOSS
NAME OF ACTIVITY	NET INCOME	NET LOSS	LOSS	GAIN	LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP	0.	-1,412.	-4,652.		-6,064.
BERNSTEIN FAMILY INVESTMENTS LLLP	0.	-1,411.	-4,653.		-6,064.
BERNSTEIN HOLDINGS LLC	0.	-8.	-44.		-52.
BERNSTEIN HOLDINGS	0.	-10.	-47.		-57.
JILL IANTONI FAMILY TRUST	0.	0.	-9.		-9.
TOTALS	0.	-2,841.	-9,405.		-12,246.
FORM 8582 AL	LOCATION OF U	NALLOWED LOS	SSES - WORKS	EET 5 ST.	ATEMENT 29
NAME OF ACTIVITY		FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
BERNSTEIN FAMILY INV BERNSTEIN FAMILY INV BERNSTEIN HOLDINGS L BERNSTEIN HOLDINGS L JILL IANTONI FAMILY	ESTMENTS LLLF .LC .LC	SCH E	6,064. 6,064. 52. 57.	.49518210 .49518210 .00424628 .00465458 .00073493	0 6,064. 0 6,064. 5 52. 1 57.
TOTALS			12,246.	1.00000000	0 12,246.

FORM 8582		ALLOWED LO	DSSES - WOF	RKSHEET 6	STAT	EMENT 30
NAME OF ACTIVIT	Ϋ́		FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
BERNSTEIN HOLDI BERNSTEIN HOLDI JILL IANTONI FA	NGS LLC		SCH E SCH E FORM 4797	52. 57. 9.	52. 57. 9.	
TOTALS				118.	118.	
GROUP NO. NAME	FORM OR SCHEDULE NET LOSS	FORM OR SCHEDULE NET GAIN	OVERALL LOSS	RATIO	UNALLOWED LOSS	ALLOWED LOSS
	FORM OR	FORM OR SCHEDULE	OVERALL	JLES - WORKSI	UNALLOWED	
1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	1.		1.	.000164908	1.	
INVESTMENTS	6,063.			.999835092	6,063.	,
			6.064.	1.000000000	6,064.	
			0,001		.,	
2 BERNSTEIN FAMILY INVESTMENTS 2 BERNSTEIN	1.		1.	.000164908	1.	
FAMILY INVESTMENTS	1. 6,063.		1.		ŕ	

R R E NAME  BERNSTEIN FAMILY	FORM OR SCHEDULE						
		GAIN/LOS	PRIOR S YEAR C/O	NET GAIN/LOSS	UNALLOWE:	O ALLOW LOSS	
INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN		-1	•	-1.	1	•	
		-1,411	4,652.	-6,063.	6,063	•	
		-1		-1.	1		
	VESTMENTS LLLP RNSTEIN SCH E LDINGS LLC RNSTEIN SCH E	-1,410	·	•	6,063 52		
HOLDINGS LLC BERNSTEIN HOLDINGS LLC		-8 -10		-52. -57.	52 57		
JILL IANTONI FAMILY TRUST	FORM 4797	0	9.	-9 <b>.</b>	9	•	
POTALS	•	-2,841	-9,405.	-12,246.	12,246	•	
FORM 8582-CR			VE ACTIVITY RKSHEET 4	CREDITS	ST	ATEMENT	3
NAME OF ACTIVITY		FORM	CURRENT YEAR CREDIT	PRIOR Y UNALLO S CREDI	WED	TOTAL CREDITS	
BERNSTEIN FAMILY		RM 8907			1.		1
BERNSTEIN FAMILY INVESTMENTS LLLP		RRYOVER RM 8907			4. 1.		4 1
TOTALS		•			6.		6

FORM 8582-CR	ALLOCATIO	N OF UNA	LLOWED CREI	OITS - WORKS	HEET 8 ST	ATEMENT	34
NAME OF ACTIVITY			FORM	CREDITS	RATIO	UNALLOW CREDIT	
BERNSTEIN FAMILY	INVESTMEN	TS LLLP	FORM 8907	1.	.166666667	·	1.
BERNSTEIN FAMILY	INVESTMEN	MS LLLP	CARRYOVER FORM 8907	4. 1.	.666666667		4. 1.
TOTALS				6.	1.000000000		6.
FORM 8582-CR		ALLOWED	CREDITS -	WORKSHEET 9	) ST.	ATEMENT	35
NAME OF ACTIVITY			FORM	CREDITS	UNALLOWED CREDITS	ALLOWE CREDIT	
BERNSTEIN FAMILY	INVESTMEN	ITS LLLP	FORM 8907				0.
BERNSTEIN FAMILY	INVESTMEN	ITS LLLP	CARRYOVEF FORM 8907				0.
TOTALS				6 (	. 6.		0.
FORM 8582	ОТНЕБ		ATIVE MINING ACTIVITIES	MUM TAX S - WORKSHEI		ATEMENT	36
		CURRENT	' YEAR	PRIOR YEAR UNALLOWED	OVERALL G	AIN OR L	oss
NAME OF ACTIVITY	NET	INCOME	NET LOSS	LOSS	GAIN	Loss	,
BERNSTEIN FAMILY INVESTMENTS LLLP		0.	-755.	-4,100	•	-4,8	55.
BERNSTEIN FAMILY INVESTMENTS LLLP		0.	-754.	-4,099	•	-4,8	53.
BERNSTEIN HOLDING LLC BERNSTEIN HOLDING		0.	-2.	-40	•	_	42.
LLC	J.	0.	-3.	-32	•		35
TOTALS		0.	-1,514.	-8,271	•	-9,7	85.
					= =====		

71

FORM 8582	ALLOCAT		TIVE MINIMULLOWED LOSS			ATEMENT 37
NAME OF ACTIVIT	Ϋ́		FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
BERNSTEIN FAMIL INVESTMENTS LLL BERNSTEIN FAMIL INVESTMENTS LLL BERNSTEIN HOLDI BERNSTEIN HOLDI TOTALS	P Y P NGS LLC		SCH E SCH E SCH E SCH E	4,855. 4,853. 42. 35. 9,785.	.496167603 .495963209 .004292284 .003576904	4,855. 4,853. 42. 35. 9,785.
FORM 8582			TIVE MINIM OSSES - WO		ST	ATEMENT 38
NAME OF ACTIVIT	'Y		FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
BERNSTEIN HOLDI BERNSTEIN HOLDI			SCH E SCH E	<b>4</b> 2 35		
TOTALS				77	77.	
FORM 8582		ITIES WITH	TIVE MINIM LOSSES RE S OR SCHED	PORTED ON	2 OR	ATEMENT 39
GROUP NO. NAME	SCHEDULE NET LOSS	SCHEDULE NET GAIN	OVERALL LOSS	RATIO	UNALLOWED LOSS	ALLOWED LOSS
1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY INVESTMENTS	1. 4,854.		1. 4,854.	.0002059		
			4,855.	1.0000000	00 4,855	•
2 BERNSTEIN FAMILY INVESTMENTS	1.		1.	.0002060	58 1	

2 BERNSTEIN FAMILY INVESTMENTS

4,852.

4,852. .999793942 4,852.

4,853. 1.000000000 4,853.

FORM 8582AMT	SUMMAR	RY OF PASS	IVE ACTIVI	ries - Amt	STAT	EMENT	40
R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOW:	
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY		-1. -754.	-4,100.	-1.	1.		
INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY		-1.	·	-1.	1.		
INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC BERNSTEIN	SCH E	-753. -2.	-4,099. -40.	-4,852. -42.	4,852. 42.		
HOLDINGS LLC		-3. -1,514.	-32. -8,271.		9,785.		
PRIOR YEAR CARRYOVE			CURRENT YE	AR NET ACTI	VITY INCOME		
FORM 1116				ME SUMMARY ATION INCOM		EMENT	4:
DESCRIPTION					A	MOUNT	
BERNSTEIN FAMILY II BERNSTEIN FAMILY II BERNSTEIN HOLDINGS BERNSTEIN HOLDINGS	NVESTMENTS LLC						
TOTAL FOREIGN PART	NERSHIP/S-	-CORPORATI	ON INCOME			3,3	88

FORM 1116  U.S. AND FOREIGN SOURCE INCOMTOTAL PARTNERSHIP/S-CORPORATION		STATEMENT	42
DESCRIPTION	INCOME	LOSS	
LIC HOLDINGS INC BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP	206,254. 5. 7.		
TOTAL PARTNERSHIP/S-CORPORATION INCOME/LOSS	206,266.		

DECEASED

1040 EXTENSION GRANTED TO 10 /04,5 2011

OMB No. 1545-0074	IRS Use Only - Do not write or staple in this space

<u> </u>				<u> </u>	NVIB ING. 154	15-0074 "	0 030 0	only Don	or mine	or otap	o in this space.	
		011, or other tax year beginning			011, ending			, 20			separate inst	
Your first name and	initial			DEC. 09/12/1	2)						ocial security nu	
SIMON BERNSTEIN f a joint return, spouse's first name and initial Last name										37	1 32 5	211_
If a joint return, spo	use's	first name and initial	Last name							Spous	e's social securi	ty number
•		nd street). If you have a P.O.	box, see instructi	ons.				Apt. n	0.		ake sure the SSI	
		HEAD LANE									nd on line 6c are	
**		, and ZIP code. If you have a foreig	gn address, also com	plete spaces below.							tential Election C chere if you, or y	
BOCA RATO	)N ,	FL 33496								if fillin this ໃນ	t here if you, or y g jointly, want \$3 ind. Checking a l	to go to box below
Foreign country nan	ne		Foreigi	n province/county			Foreig	gn postal	code	will no	ot change your te	ex or refund,
												Spouse
Filing Status		X Single			4						rson). If the g	
9	2	Married filing jointly (e	-	,				but not	your de	epende	ent, enter this	child's
Check only	3	Married filing separate	-	SSN above		name her						
one box.		and full name here.			5	Qualifying	) widov	v(er) with	ı deper	ident o	hild Boxes checked	
Exemptions		X Yourself. If someone	•		-						on 6a and 6b	_1_
	þ_					(3) Depe			(4)√if	ilia J	No. of children on 6c who:	
	C	Dependents:		(2) Dependent's social security number		relation	ship to		under aq qualifying tax cre	je 17 forchild	lived with your live or a second control	
	-	(1) First name	Last name			yo	ou		tax cre	edit	<ul> <li>did not live v you due to dive or separation</li> </ul>	orce vitn
											(see Instruction	s)
If more than four dependents, see				i i							Dependents on	6c
instructions and				1 1					<u> </u>		not entered abo	
check here 🕨 🔔	ᆜ ຺			i :					J		Add numbers on lines	
	<u>d</u>	Total number of exemption								······	on lines above	
Income	7	Wages, salaries, tips, etc. A									FO	450
	8a	Taxable interest. Attach So	hedule B if requir	ed				620	. Ba		58,	450.
Attach Form(s)	b	Tax-exempt interest. Do no	ot include on line	8a	<u>8D</u>	1	45	,6∠0			10	247
W-2 here. Also attach Forms W-2G and 1099-R if tax	9a		Schedule B if req	uired		1	1 2	202	. 98	0.400	18,	347.
	b				<u>9b</u>	<u> </u>	т э	, 292	ar year to be			
	10	Taxable refunds, credits, or								<del></del>		
was withheld.	11	Alimony received										
	12	Business income or (loss).									- 22	0.000.
If you did not	13	Capital gain or (loss). Attac							13		<3,	, 000.
get a W-2,	14	Other gains or (losses). Att										
see instructions.	15a				D Taxa	able amoun	II	· · · · · · · · · · · · · · · · · · ·	. 15 16		3	599.
	16a	•••				able amoun						, 526 · ·
Enclose, but do	17	Rental real estate, royalties		corporations, trusts, etc. A	mach Sche	eaule E		******	18		<b>~40</b> ,	, 320
not attach, any	18	, ,							_			
payment. Also, please use	19	Unemployment compensat		24,368.	I in Town	able amour				-	20	713.
Form 1040-V.	20a 21	- "		24,500.	J w lake	avie amout	ıı		20	_	20	, , , , ,
	22	Other income. List type and Combine the amounts in the		a for lines 7 through 21. Th	nie ie uour	total innor	ma		2		69	,583.
		Educator evapages	_		93	lotal Incol					- 05	, 505 •
Adjusted	23 24	Educator expenses Certain business expenses of re	eservists, performing	artists, and fee-basis governm	ent	<del> </del>						
Gross	25	officials. Attach Form 2106 or 2 Health savings account dec				<u> </u>			-			
Income	26	Moving expenses. Attach F				<u> </u>						
	27	Deductible part of self-emp				-						
	28	Self-employed SEP, SIMPL	•							27.0		
	29	Self-employed health insur							100000000	200 AND 100 AN		
	30	Penalty on early withdrawa						<u> </u>				
	31a					+						
	32											
	32 33	IRA deduction Student loan interest deduction			····   —				-			
	34	Tuition and fees. Attach Fo			····							
	35	Domestic production activi							0.000			
	36	Add lines 23 through 35			,			_	3	6		
110001 11-07-11	37	Subtract line 36 from line 2							► 3	_	69	,583.
(1-07-11	10	Capitact ing 50 itom lille 2	illio la your al	ajaatok givoo illoulilo								,

Form 1040 (2011)	Ö	THON DEVNOTETM		3/I-3Z-	<u> </u>		Page 4
Tax and	38	Amount from line 37 (adjusted gross income)				38	69,583.
Credits	39a	Check \[ \int \] You were born before January 2, 1					
Standard		if: Spouse was born before January 2			1		
Deduction for - People who	b	If your spouse itemizes on a separate return or you we	ere a dual-status alien, c	heck here > 3!	9b 📖 🖺		
check any box on line	40	Itemized deductions (from Schedule A) or your stand	lard deduction (see left	margin)		40	68,587.
39a or 39b or who can be	41	Subtract line 40 from line 38				41	996.
claimed as a	42	Exemptions. Multiply \$3,700 by the number on line 60	d		Г	42	3,700.
dependent.	43	Taxable income. Subtract line 42 from line 41. If line				43	0.
	44			962 election		44	0.
	45	Alternative minimum tax. Attach Form 6251				45	0.
All others:	46	Add lines 44 and 45				46	0.
Single or Married filing	47	Foreign tax credit. Attach Form 1116 if required			50		
separately,	48	Credit for child and dependent care expenses. Attach F		' <del>                                    </del>		and have be	
\$5,800 Married filing	49	Education credits from Form 8863, line 23					
jointly or	50	Retirement savings contributions credit. Attach Form 8			130		
Qualifying widow(er),					200 mm		
\$11,600	51	Child tax credit (see instructions)	,				
Head of household,	52	Residential energy credits. Attach Form 5695	nd a	52	77 77 77 78 78	de agranda de la companya de la comp	
\$8,500	53				26	4	
	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 lin				55	0.
Other	56	Self-employment tax. Attach Schedule SE			·····	56	
Taxes	57	Unreported social security and Medicare tax from Form			P-	57	
		Additional tax on IRAs, other qualified retirement plans			-	58	
		Household employment taxes from Schedule H				59a	
	b	First-time homebuyer credit repayment. Attach Form 5	5405 if required			59b	
	60	Other taxes. Enter code(s) from instructions				60	
	61	Add lines 55 through 60. This is your total tax	************************	***************************************		61	0.
<b>Payments</b>	62	Federal income tax withheld from Forms W-2 and 109	9	62	360.		STATEMENT 5
	63	2011 estimated tax payments and amount applied from	m 2010 return	63		0000 000 1 000 1 0000 000 1 000 1 0000 000	
If you have	_ 64 a	Earned income credit (EIC)		64a	200		
child, attach	t	Nontaxable combat pay election 64b		Ch. b. y Andrew C. b. Pale Ch. Ch. Ch. Ch. Ch. Ch. Ch. Ch. Ch. Ch.			
Schedule ElC.				65			
	66	American opportunity credit from Form 8863, line 14		66			
	67	First-time homebuyer credit from Form 5405, line 10		<del></del>		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	68	Amount paid with request for extension to file		<del></del>	-		
	69	Excess social security and tier 1 RRTA tax withheld					
		Credit for federal tax on fuels. Attach Form 4136					
	71	Credits from Form: a 2439 b 8839 c	8801 d 8885	71			
		Add lines 62, 63, 64a, and 65 through 71. These are y	•	···		72	360.
Refund		If line 72 is more than line 61, subtract line 61 from lin		nt vou overpaid		73	360.
		Amount of line 73 you want refunded to you. If Form			<b>&gt;</b>	74a	360.
Direct deposit? See		Routing   Dec Type: Checking C	Soulage d Account			Luce services	
instructions.		Amount of line 73 you want applied to your 2012 esti		75			
Amount	76	Amount you owe. Subtract line 72 from line 61. For de		<del></del>		76	
You Owe	77	m ()   1   1   1   1   1   1   1   1   1		1 1			
Third Part		to you want to allow another person to discuss this retu			Complete belo	11 <i>1.</i> /	No
Designee	_	signee's EGERALD R. LEWIN	Phon	(561) 99	4-5050	Persona	Identification > 50505
Sign	TIE	Under penalties of perjury, I declare that I have examined this retr correct, and complete. Declaration of preparer (other than taxpay	urn and accompanying sche	edules and statements, and to	the best of my l	knowled	ge and bellef, they are true,
Here		correct, and complete. Declaration of preparer (other than taxpay)  Your signature   Date	er) is based on all information.  Your occupa		(nowledge,	1 Dayt	lme phone number
Joint return?			EXECU				
See instructions. Keep a copy		Spouse's signature. If a joint return, <b>both</b> must sign. Date	Spouse's oc			If the	IRS sent you an Identity
for your records.		,				Prote	ection PIN,
	Dete	t/Type preparer's name Preparer's sign	nature	Date C	heck		r it here
Paid	. 181	1 1 Spaint a digit			elf-employed		
	CIE.	RALD R. LEWIN				Б	01266202
Use Only		rand R. LEWIN 's name > CBIZ GOLDSTEIN LEWI	N	<u> </u>	<b>_</b>		1900735
OSC OINY	- Irn	1675 N. MILITARY TR		FLOOR	Phone no. (5		994-5050
110002	el	1675 N. MILITARI IX 's address ►BOCA RATON, FL 334		THOOK	Phone no.\ 3	<u> </u>	234-2020
11-07-11	rur.	CARCILLOS & DOCK LIVION ' LIN 274					1750

### **SCHEDULE A** (Form 1040)

### **Itemized Deductions**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040

➤ Attach to Form 1040.

► See Instructions for Schedule A (Form 1040).

SIMON BE	RNS	STEIN		373	L 32 5211
Medical		Caution. Do not include expenses reimbursed or paid by others.		•	
and	1	Medical and dental expenses (see instructions) SEE STATEMENT 10	1	4,724	,
Dental	2	Enter amount from Form 1040, line 38	Britis da Britis da Britis da		]
Expenses	3	Multiply line 2 by 7.5% (.075)	3	5,219	
_	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 Income taxes, or	5	856	<u>.</u>
		<b>b</b> $X$ General sales taxes $\int$	1		
	6	Real estate taxes (see instructions)	6	43,851	<u>.</u>
	7	Personal property taxes	7		
	8	Other taxes. List type and amount			
			8		
	9	Add lines 5 through 8		9	
Interest	10	Home mortgage interest and points reported to you on Form 1098	10	16,872	•
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 instructions and show that person's name,			
		identifying no., and address	1 / A 1 / A		
			**************************************		
Note.			11		<u> </u>
Your mortgage interest	12	Points not reported to you on Form 1098. See instructions for special rules	12	1,784	STMT 7
deduction may	13	Mortgage insurance premiums (see instructions)	13		_
be limited (see instructions).	14	Investment interest. Attach Form 4952 if required. (See instructions.) STMT 9	14	22	
,	15	Add lines 10 through 14		1	
Gifts to	16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	862	STMT 8
Charity	17	Other than by cash or check. If any gift of \$250 or more, see instructions.			
If you made a gift and got a		You must attach Form 8283 if over \$500	17		_
benefit for it.	18	Carryover from prior year			
see instructions.	- 19	Add lines 16 through 18		19	862.
Casualty and Theft Losses				_	_
	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	Sections	2	0
Job Expenses and Certain	21	Unreimbursed employee expenses - job travel, union dues, job education, etc.	TY 5 mg		
Miscellaneous		Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶	Section 1		
Deductions					
		Tours and the first	21		-
		Tax preparation fees  Other expenses - investment, safe deposit box, etc. List type and amount ▶	22		
	23	SEE STATEMENT 6	50 - 5 - 60 H		
		DDD DIVIDUOI O	PANA PANA PANA PANA PANA PANA PANA PANA		
			23	5,732	
	24	Add lines 21 through 23	24	5,732	<del>]</del>
	25	Enter amount from Form 1040, line 38 [25] 69 , 583	24	3,702	Ä
	26	Multiply line 25 by 2% (.02)	26	1,392	
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-			
Other	28	Other - from list in instructions. List type and amount			., .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Miscellaneous	20	other - from list at histractione. Else type and amount		2	Miller of Committee of Committe
Deductions					or and a second
					Sidera Si
				2	8
Total	29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amou	ınt on		<u> </u>
Itemized		line 40		ہ ا	68,587.
<b>Deductions</b>	30	If you elect to itemize deductions even though they are less than your standard dec			
	~ <b>~</b>	check here		<b>&gt;</b>	
LHA 119501 11-0	3-11			Schedule	A (Form 1040) 2011

### **SCHEDULE B**

(Form 1040A or 1040)

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

## **Interest and Ordinary Dividends**

 OMB No. 1545-0074

2011

Attachment
Sequence No. 08

Your social security number

SIMON BER	RNSTEIN	371	32 52	211	<b>-</b>
Part I	1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the		Amou		
Interest	property as a personal residence, see instructions and list this interest first. Also, show that	Γ			
	buyer's social security number and address ▶				
	LEGACY BANK OF FLORIDA	Γ			
	LYDIAN BANK & TRUST				
	OPPENHEIMER (3474)				
Note. If you	FROM K-1 - LIC HOLDINGS INC	<b> </b>	37	. 34	7.
received a Form	FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP	r	20	. 88	35.
1099-INT, Form 1099-OID,	FROM K-1 - BERNSTEIN HOLDINGS LLC	1		20	5.
or substitute	FROM K-1 - ELIOT BERNSTEIN FAMILY TRUST	'			5.
statement from	TOOM IS 4 TITE TAXONATE MAASTESS MOSTOR	F			4.
a brokerage firm, list the firm's	FROM K-1 - LISA S FRIEDSTEIN FAMILY TRUST	-			4.
name as the	FROM K-1 - BISA'S FRIEDSTEIN FAMILY TRUST	-			2.
payer and enter the total interest		ŀ	<del></del>		$\frac{2}{1}$ .
shown on that		-			
form.	FROM K-1 - LISA S FRIEDSTEIN FAMILY TRUST	-			2.
		Ļ			
	SUBTOTAL FOR LINE 1	Ļ	58		55.
	TAX-EXEMPT INTEREST SEE STATEMENT 12				<5.
	2 Add the amounts on line 1	2	58	, 45	50.
	3 Excludable interest on series EE and I U.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	58	, 45	50.
	Note. If line 4 is over \$1,500, you must complete Part III.	$\neg$	Amo	unt	
Part II	5 List name of payer ▶				
Ordinary	FROM K-1 - BERNSTEIN FAMILY INVESTMENTS LLLP	Ī	18	, 15	52.
Dividends	FROM K-1 - BERNSTEIN HOLDINGS LLC				34.
	FROM K-1 - ELIOT BERNSTEIN FAMILY TRUST	ľ		,	3.
	FROM K-1 - JILL IANTONI FAMILY TRUST	ŀ			4.
	FROM K-1 - LISA S FRIEDSTEIN FAMILY TRUST	r			4.
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	18	<u>, 34</u>	47.
	Note. If line 6 is over \$1,500, you must complete Part III.				
Part III	You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a	ι foreig	ın J	,	Na
Foreign	account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.		1	'es	No
Accounts	7a At any time during 2011, did you have a financial interest in or signature authority over a financial ac	count	(such		
<u>a</u> nd	as a bank account, securities account, or brokerage account) located in a foreign country? See insti				X
Trusts	If "Yes," are you required to file Form TD F 90-22.1 to report that financial interest or signature author		1751		
	Form TD F 90-22.1 and its instructions for filing requirements and exceptions to those requirements				
	b If you are required to file Form TD F 90-22.1, enter the name of the foreign country where the financial		nunt		
	· · · · · · · · · · · · · · · · · · ·	ui aucc	Jujii		
	is located   Buring 2011, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign	n tu sat			
127501 11-02-11	If "Yes." you may have to file Form 3520. See instructions	กแนรเ	r inter	77.72.72	X
11-02-11	H 156. YOU HERY HOYE TO HIG FORTH OUZO, OCC HERTIOUDHE			1	

## **Interest and Dividend Summary**

Payer	Interest	Ordinary	Qualified	Capital Gain
T dyor	,,,,d,det	Dividends	Dividends	Distributions
LEGACY BANK OF FLORIDA				
LYDIAN BANK & TRUST				
OPPENHEIMER (3474)				
FROM K-1 - LIC HOLDINGS				
INC	37,347.			
FROM K-1 - BERNSTEIN				
FAMILY INVESTMENTS LLLP	20,885.	18,152.	13,155.	
FROM K-1 - BERNSTEIN				
HOLDINGS LLC	205.	184.	129.	
FROM K-1 - ELIOT				
BERNSTEIN FAMILY TRUST	5.	3.	3.	
FROM K-1 - JILL IANTONI				
FAMILY TRUST	4.	4.	2.	
FROM K-1 - LISA S				
FRIEDSTEIN FAMILY TRUST	4.	4.	3.	
TAX EXEMPT INTEREST	,			
FROM K-1 - BERNSTEIN				
FAMILY INVESTMENTS LLLP				
FROM K-1 - BERNSTEIN				
HOLDINGS LLC				
FROM K-1 - ELIOT				
BERNSTEIN FAMILY TRUST				
FROM K-1 - ELIOT				
BERNSTEIN FAMILY TRUST				
FROM K-1 - JILL IANTONI				
FAMILY TRUST				

TOTALS: 58,450. 18,347. 13,292.

CUR 00332

40013501

## **Interest and Dividend Summary**

Payer	Interest	Ordinary Dividends	Qualified Dividends	Capital Gain Distributions
ROM K-1 - JILL IANTONI				
FAMILY TRUST				
FROM K-1 - LISA S				
FRIEDSTEIN FAMILY TRUST				
FROM K-1 - LISA S				
FRIEDSTEIN FAMILY TRUST				
				1
10191 1-07-11 TOTALS:	52 450	18,347.	13,292	_

#### SCHEDULE C (Form 1040) Department of the Treasury

Internal Revenue Service (99)

**Profit or Loss From Business** 

(Sole Proprietorship)

For information on Schedule C and its instructions, go to www.irs.gov/schedulec

Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

Social security number (SSN) Name of proprieto SIMON BERNSTEIN (DEC. 09/12/12) 371-32-5211 R Enter code from Instructions Principal business or profession, including product or service (see instructions) 524290 INSURANCE SALES Business name. If no separate business name, leave blank. E Business address (including suite or room no.) City, town or post office, state, and ZIP code (1) X Cash (2) Accrual (3) Other (specify) F Accounting method: Did you "materially participate" in the operation of this business during 2011? If "No," see instructions for limit on losses X Yes No G If you started or acquired this business during 2011, check here Н Yes X No Did you make any payments in 2011 that would require you to file Form(s) 1099? (see instructions) If "Yes," did you or will you file all required Forms 1099? Part I Income 1 a Merchant card and third party payments. For 2011, enter -0-101,771. b Gross receipts or sales not entered on line 1a (see instructions) c Income reported to you on Form W-2 if the "Statutory Employee" box on that form was checked. Caution. See instr. before completing this line 101,771. d Total gross receipts. Add lines 1a through 1c Returns and allowances plus any other adjustments (see instructions) 2 101.771. 3 Subtract line 2 from line 1d 4 Cost of goods sold (from line 42) Gross profit. Subtract line 4 from line 3 5 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) 7 101.771. Gross income. Add lines 5 and 6 ..... Part II Expenses Enter expenses for business use of your home only on line 30. 18 Advertising \_\_\_\_\_ 8 Office expense 19 Car and truck expenses Pension and profit-sharing plans Rent or lease (see instructions): (see instructions) 9 20 101,771. 10 Commissions and fees 10 a Vehicles, machinery, and equipment 20a Contract labor (see instructions) ..... 11 b Other business property \_\_\_\_\_\_ 11 21 12 21 Repairs and maintenance 12 Depletion Supplies (not included in Part III) 13 Depreciation and section 179 22 expense deduction (not included in 23 Taxes and licenses Part III) (see instructions) 13 Travel, meals, and entertainment: Employee benefit programs (other a Travel 24a 14 **b** Deductible meals and than on line 19) 15 24b entertainment (see instructions) 15 Insurance (other than health) 16 Utilities Interest: Wages (less employment credits) 26 16a a Mortgage (paid to banks, etc.) 27 a Other expenses (from line 48) 27a h Other 17 b Reserved for future use \_\_\_\_\_ 27b 17 Legal and professional services 101.771. 28 Total expenses before expenses for business use of home. Add lines 8 through 27a 28 Tentative profit or (loss). Subtract line 28 from line 7 29 Expenses for business use of your home. Attach Form 8829. Do not report such expenses elsewhere 30 31 Net profit or (loss), Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. 0. 31 If you entered an amount on line 1c, see instr. Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. If you have a loss, check the box that describes your investment in this activity (see instructions). • if you checked 32a, enter the loss on both Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. 32a If you entered an amount on line 1c, see the instructions for line 31. Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited. Schedule C (Form 1040) 2011 LHA For Paperwork Reduction Act Notice, see separate instructions.

Business Name:

Description	Tax Year 2010	Tax Year 2011	Increase (Decrease)
INCOME		- Name	100 100 100 100 A/A/A 110 A/A 1/A 1/A 1/A 1/A 1/A 1/A 1/A 1/A 1/A
GROSS INCOME	87,667.	101,771.	14,104
EXPENSES			
COMMISSIONS AND FEES TOTAL EXPENSES	87,667. 87,667.	101,771. 101,771.	14,104 14,104
NET PROFIT OR (LOSS)	0.	0.	0
			,
	!		

#### **SCHEDULE D** (Form 1040)

**Capital Gains and Losses** 

➤ Attach to Form 1040 or Form 1040NR. ➤ See Instructions for Schedule D (Form 1040). ▶ Use Form 8949 to list your transactions for lines 1, 2, 3, 8, 9, and 10.

OMB No. 1545-0074

Your social security number

Department of the Treasury Internal Revenue Service (99)

SIMON BERNSTEIN

371 32 5211

SIMON BERNSTEIN				<u> </u>	1
Part Short-Term Capital Gains and Lo	sses - Assets He	ld One Year or Less	•		
Complete Form 8949 before completing line 1, 2, or 3. This form may be easier to complete if you round off cents to whole dollars.	(e) Sales price from Form(s) 8949, line 2, column (e)	(f) Cost or other basis from Form(s) 8949, line 2, column (t)	(g) Adjustments gain or loss from Form(s) 8949, line 2, column (g		(h) Gain or (loss) Combine columns (e), (f), and (g)
Short-term totals from all Forms 8949 with     box A checked in Part I		(			
2 Short-term totals from all Forms 8949 with					
box B checked in Part I		(			
3 Short-term totals from all Forms 8949 with		1	***************************************		
box C checked in Part I		1			
Short-term gain from Form 6252 and short-term ga     Net short-term gain or (loss) from partnerships, S     from Schedule(s) K-1	corporations, estates,	and trusts		4	<1,147.
	ot if any from line 9 of	fyour Capital Lore			<u> </u>
				6	142,348.
Carryover Worksheet in the instructions	ince 1 through 6 in cal	lump (h). If you have any k	anaterm		1 12/0100
capital gains or losses, go to Part II below. Other				7	<143,495.
Part II Long-Term Capital Gains and Los Complete Form 8949 before completing line 8, 9, or 10. This form may be easier to complete if you round off	(e) Sales price from Form(s) 8949, line 4,	(f) Cost or other basis from Form(s) 8949,	(g) Adjustments gain or loss from Form(s) 8949,		(h) Gain or (loss) Combine columns (e),
cents to whole dollars.	column (e)	line 4, column (f)	line 4, column (g	)	(f), and (g)
Long-term totals from all Forms 8949 with     box A checked in Part II		( )			
9 Long-term totals from all Forms 8949 with					
box B checked in Part II		( )			
10 Long-term totals from all Forms 8949 with					
box C checked in Part II		( )			
11 Gain from Form 4797, Part I; long-term gain from from Forms 4684, 6781, and 8824	Forms 2439 and 6252 SEE S1	; and long-term gain or (lo FATEMENT 13	ss)	11	10.
12 Net long-term gain or (loss) from partnerships, S o	SEE ST	LATEMENT TO	(s) K-1	12	20,637.
<ul><li>Net long-term gain or (loss) from partnerships, S of</li><li>Capital gain distributions</li></ul>	SEE States,	TATEMENT 15 and trusts from Schedule		12	20,637.
<ul> <li>Net long-term gain or (loss) from partnerships, S of</li> <li>Capital gain distributions</li> <li>Long-term capital loss carryover, Enter the amour</li> </ul>	SEE States, a corporations, estates, a corporations, estates, and the corporations are states.	TATEMENT 15 and trusts from Schedule of your Capital Loss Car	yover	13	
<ul> <li>Net long-term gain or (loss) from partnerships, S of</li> <li>Capital gain distributions</li> <li>Long-term capital loss carryover. Enter the amount worksheet in the instructions</li> </ul>	SEE States, a corporations, estates, a corporations, estates, and the corporations are states.	TATEMENT 15 and trusts from Schedule of your Capital Loss Cari	yover		
<ul> <li>Net long-term gain or (loss) from partnerships, S of</li> <li>Capital gain distributions</li> <li>Long-term capital loss carryover, Enter the amour</li> </ul>	SEE Storporations, estates, and the states, and the states, and the states are states. The states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states are states as a state of the states are states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the states are states as a state of the state of the states are states as a state of the s	and trusts from Schedule of your Capital Loss Cari	yover	13	20,637. ( 122,458. <101,811.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2011

Pa	rt III Summary	1	
16	Combine lines 7 and 15 and enter the result	16	<245,306.
	<ul> <li>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.</li> <li>If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> </ul>	And the second s	
	<ul> <li>If line 16 is 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.</li> </ul>	The second of th	
17	Are lines 15 and 16 both gains?  Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.	And the second s	
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions	19	
20	Are lines 18 and 19 both zero or blank?  Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below.  No. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Schedule D Tax Worksheet in 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:	comment of policy in the comment of policy in	·
	The loss on line 16 or  (\$3,000), or if married filing separately, (\$1,500)  SEE STATEMENT 16	21 (	3,000•)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.	The second secon	
22	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 41. Then complete the  Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44  (or in the instructions for Form 1040NR, line 42).  No. Complete the rest of Form 1040 or Form 1040NR.		

40013501

#### SCHEDULE E

(Form 1040)

Department of the Treasury Internal Revenue Service (99)

## **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 separate instructions.

OMB No. 1545-0074

Attachment Sequence No. 13

Name(s) shown on return					Your social security number							
SI	MON BERNSTEIN							37	1-3	32-52	211	
	Did you make any payments in 2011 that would require you to file Form(s) 1099?	see instr	uctions	s)							X N	<u> </u>
	If "Yes," did you or will you file all required Forms 1099?			-,						Yes	☐ Ne	3
	art I Income or Loss From Rental Real Estate and Ro	yalties	Not	<b>e. If</b> you	are in the	ousiness o	f rent	ting perso	nal p	roperty, i	JS6	_
La, Fried	Schedule C or C-EZ (see instructions). If you are an individual, report farr	n rental i	ncome	or loss	from F <b>orm</b>	<b>4835</b> on p	age 2	2, line 40.				
Cau	ition. For each rental property listed on line 1, check the box in the last column only	if you ov	vned th	nat prope	rty as a me	ember of a	qual	ified joint	ventu	re (QJV)		
repo	orting income not subject to self-employment tax.											
可	Physical address of each property-street, city, state, ZIP	Type-fro	m list	2 For	each renta	real		Fair Rei	ıtal	Person	al QJ	v
		belo	W	esta ren	ite propert ort the nun	/ listed, aber of		Days		Use Da	ys	
A	BERNSTEIN FAMILY INVESTMENTS LLLP -	6		l dav	s rented at	fair rental	Α					
В				Vait per	ie and day: sonal use.	3 With See	В					
С				inst	ructions.		С					
Ty	pe of Property:											
1	Single Family Residence 3 Vacation/Short-Term Rental 5 Land		7 8	Self-Rent	al							
2	Multi-Family Residence 4 Commercial 6 Royalti	es	8 (	Other (de	scribe)							
Inc	come:					Prop	erti	es				
				Α			В			С		
	Merchant card and third party payments. For 2011, enter -0-				0.						<del>.,</del>	
-	Payments not reported to you on line 3a				36.							
	Total not including amounts on line 3a that are not income (see instructions)	. 4		<i></i>	36.							
Ex	penses:											
	Advertising											_
	Auto and travel (see instructions)											
	Cleaning and maintenance											_
	Commissions											_
	Insurance											
	Legal and other professional fees										· · · · · · · · · · · · · · · · · ·	
11	Management fees	. 11	L									
	Mortgage interest paid to banks, etc. (see instructions)											
	Other interest											_
	Repairs								<u> </u>			
	Supplies								<u> </u>			
	Taxes								<u> </u>			
	Utilities								_			_
	Depreciation expense or depletion											
	Other (list)	. 19							ļ			
	Total expenses. Add lines 5 through 19	. 20							├─	<del></del>		
21	Subtract line 20 from line 4. If result is a (loss), see instructions to find out if you	21			36.							
00	must file Form 6198  Deductible rental real estate loss after limitation, if any, on Form 8582	·   <del></del>		· · · · · · · · · · · · · · · · · · ·	50.				├			
22		22	,		,	ſ		١	,			١
20.	(see instructions) a Total of all amounts reported on line 3a for all rental properties	•	1		23a	(			\			
	b Total of all amounts reported on line 3a for all remain properties											
								36.				
	d Total of all amounts reported on line 4 for all royalty properties e Total of all amounts reported on line 12 for all properties				'			501				
	f Total of all amounts reported on line 18 for all properties				004							
	g Total of all amounts reported on line 20 for all properties					-						#
	and the second s							24			36	· .
	Losses. Add royalty losses from line 21 and rental real estate losses from line 22.							·	r	···········		_
	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. E							·   —	Î			
	on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Fo						-	-				
	amount in the total on line 41 on nego 0		• "		•	•		00	l		2.6	-

	iule E (Form 1040)  2011 (s) shown on return. Do not enter name and social securit	v number it showr	on page 1.				Attacrim	ent Sequen			rity number
Training of the first of the fi							Your social security number				
SIMON BERNSTEIN									3	71-32-	-5211
Caut	ion. The IRS compares amounts reported on you	ır tax return wit	th amounts sh	own o <mark>n Schedule(s)</mark> k	<b>ζ-1.</b>						
Pa	rt II Income or Loss From Par	tnerships :	and S Co	rporations Not	e. If you	u rep	ort a loss	from an	at-risk	activity fo	r which
****	any amount is not at risk, you mu	st check colu	mn (e) on lin	e 28 and attach <b>Fo</b>	rm 619	98. S	ee instruc	tions.			
27	Are you reporting any loss not allowed in a price										
	passive activity (if that loss was not reported o	-			-					Yes	X No
	If you answered "Yes," see instructions before			od partitoromp oxponi				*********			110
	n you answered Tes, see mad dedone belove	bomploting and	OUUUIL		(b) <sub>Enter</sub>	, Pior	(C) Check	10	i) Empl	lover	(e) Check If
28	(a)	Name			partnersh	hip; S	(C) Check If foreign partnership			number	(e) Check If any amount is not at risk
	SEE STATEMENT 17				ioi a corpe	orauon	pararoromp				
<u> </u>	SEE STATEMENT IV				<del>-</del>						
В					<del> </del>						
C					<b>-</b>						
D				···	J						į.
	Passive Income and L					<u> </u>	assive Inc				
	(f) Passive loss allowed		ve income	(h) Nonpassive los		(i) Se	ction 179 e on from Fo	xpense		j) Nonpassiv	
	(attach Form 8582 if required)	from Sch	eauje K-1	from Schedule K-	-ı ue	suugi	OH HOIH FO	1111 4002		from Scheo	Iule K- I
_A_											
В											
С											
D				·							
29a	Totals	ev v			of of season one seem			The state of the s			
b	Totals 10	A seal of the seal		28,5	52.					12 or 18 or	A STATE OF THE STA
30	Add columns (g) and (j) of line 29a								30		
31									31	( 2:	8,562.)
32	Total partnership and S corporation income	•									· · · · · · · · · · · · · · · · · · ·
	result here and include in the total on line 41 b								32	<2	8,562.>
Da	rt III Income or Loss From Esta	tes and T	rusts						-		
H. Th.	113.12.1.12									( <b>b)</b> Em	ınlovor
33		(a	) Name								on number
Α	SEE STATEMENT 18	·									
- <u>^</u>								<del> </del>	-		
	Paesiva Inc	ome and Los	<u></u>				Nonns	esive Ir		and Loss	
	(c) Passive deduction or loss allowed			ssive income	/e	) Dec	uction or ic			(f) Other inco	
	(attach Form 8582 if required)			Schedule K-1			Schedule K			Schedul	e K-1
						-			<del> </del>		
A			<u> </u>						├		
В											<del></del>
34a	Totals								Lunion		
b	Totals								OF.		
35	Add columns (d) and (f) of line 34a								35	1	
36	Add columns (c) and (e) of line 34b		-100 F-1						36	1	,
37	Total estate and trust income or (loss). Com	ume imes 35 an	iu so. Enter th	e result here and incit	ude III Th	10 10 ld	a on line 47	Dec	37	Uplder.	4
Pa	risiv income or Loss From Rea			I (e) Eyress inclusion	from L	<del>74\ Τ</del> 2	vable inco	ne (net	uuai		- 1
38	(a) Name	( <b>b</b> ) Em <sub>l</sub> identificatio		(c) Excess inclusion Schedules Q, line (see instructions	2c	oss)	ixable incor from <b>Sch</b> e	dules Q,		(e) Incom Schedules	
		·······································		(see instructions	3)		line 1b		1000000000	-	
				L							
39	Combine columns (d) and (e) only. Enter the	esult here and	include in the	total on line 41 below	*******	• • • • • • •	,		39		
Pa	art:V Summary										
40	Net farm rental income or (loss) from Form 4								40		X FX 2
41	Total income or (loss). Combine lines 26, 32, 37,				, or Form	1040	NR, Ilne 18	<u> </u>	41	<2	8,526.>
42	Reconciliation of farming and fishing incom-			t to the second		Suffer Code Code			0.1223		
	reported on Form 4835, line 7; Schedule K-1 (	Form 1065), bo	ox 14, code B;	Schedule K-1					200000000000000000000000000000000000000		
	(Form 1120S), box 17, code U; and Schedule	K-1 (Form 104	1), line 14, co	de F (see instructions)	42						
43	Reconciliation for real estate professionals.	If you were a real	estate professio	nal (see Instructions),				umum processo.	The second second		
	enter the net income or (loss) you reported anywhere o	on Form 1040 or F	orm 1040NR from	m all rental real estate	The second secon						
	activities in which you materially participated under th				43				Carrier and		
_	· · · · · · · · · · · · · · · · · · ·			·					Sc	hedule E (Fo	rm 1040) 201

LIC HOLDINGS INC

I.D. NUMBER: 20-5290314 TYPE: S CORPORATION

ACTIVITY INFORMATION:

LIC HOLDINGS INC

TRADE OR BUSINESS - MATERIAL PARTICIPATION

ORDINARY INCOME (LOSS)

<28,552.>

TOTAL NONPASSIVE INCOME (LOSS)

<28,552.>

OTHER K-1 INFORMATION:

INTEREST INCOME
CHARITABLE CONTRIBUTIONS
INVESTMENT INCOME
NONDEDUCTIBLE EXPENSES

37,347.

862.

37,347.

7,104.

2011 Income from Passthro	ughs	
BERNSTEIN FAMILY INVESTMENTS LLLP I.D. NUMBER: 26-2124343 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN FAMILY INVESTMENTS LLLP		
OTHER PASSIVE ACTIVITY		
RENTAL REAL ESTATE INCOME (LOSS)	<2.><1,500.>	
K-1 PASS THRU SEC 59(E)(2) - MINING EXPLORATION	0. <99.>	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582		<1,601.> <6,063.> 7,654.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		<10.>
TAX PREFERENCE ITEMS:		
DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER - SCHEDULE E		251. 1,043. 4,854.
OTHER K-1 INFORMATION:		
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS) NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS)		20,885. 18,152. 13,155. 25,527. 10. <1,134.> 20,425.
INVESTMENT INTEREST EXPENSE - SCHEDULE A DEDUCTIONS RELATED TO PORTFOLIO INCOME ROYALTY INVESTMENT INCOME INVESTMENT EXPENSE		22. 354. 36. 39,073. 354.

NONDEDUCTIBLE EXPENSES

## 2011 Income from Passthroughs BERNSTEIN FAMILY INVESTMENTS LLLP I.D. NUMBER: 26-2124343 TYPE: PARTNERSHIP ACTIVITY INFORMATION: BERNSTEIN FAMILY INVESTMENTS LLLP OTHER PASSIVE ACTIVITY 0. SEC 59(E)(2) -PASSIVE INCOME (LOSS) 0. PASSIVE ACTIVITY LOSS CARRYOVER <6,063.> DISALLOWED LOSS FROM FORM 8582 6,063. ALLOWABLE PASSIVE LOSS FROM FORM 8582 0.

TAX PREFERENCE ITEMS:

AMT PAL CARRYOVER - SCHEDULE E

4,852.

2011 Income from Passthroughs	
BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP	
ACTIVITY INFORMATION:	
BERNSTEIN HOLDINGS LLC	
OTHER PASSIVE ACTIVITY	
	L5.> <1.>
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582	<16.> <52.> 68.
ALLOWABLE PASSIVE LOSS FROM FORM 8582	0.
TAX PREFERENCE ITEMS:	
DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER - SCHEDULE E	2. 11. 42.
OTHER K-1 INFORMATION:	
INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) DEDUCTIONS RELATED TO PORTFOLIO INCOME INVESTMENT INCOME INVESTMENT EXPENSE	205. 184. 129. 83. <11.> 200. 3. 389.

2011 Income from Passthroug	ghs	
BERNSTEIN HOLDINGS LLC I.D. NUMBER: 32-0234597 TYPE: PARTNERSHIP		
ACTIVITY INFORMATION:		
BERNSTEIN HOLDINGS LLC		
OTHER PASSIVE ACTIVITY		
SEC 59(E)(2) -	0.	
PASSIVE INCOME (LOSS) PASSIVE ACTIVITY LOSS CARRYOVER DISALLOWED LOSS FROM FORM 8582		0. <57.> 57.
ALLOWABLE PASSIVE LOSS FROM FORM 8582		0.

TAX PREFERENCE ITEMS:

AMT PAL CARRYOVER - SCHEDULE E

35.

TT/ SIMON L BERNSTEIN IRREV TR

I.D. NUMBER: 51-6600239 TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

TT/ SIMON L BERNSTEIN IRREV TR

OTHER PASSIVE ACTIVITY

OTHER K-1 INFORMATION:

DEDUCTIONS RELATED TO PORTFOLIO INCOME

5,375.

ELIOT BERNSTEIN FAMILY TRUST I.D. NUMBER: 65-6477114 TYPE: ESTATE OR TRUST

### ACTIVITY INFORMATION:

ELIOT BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

#### OTHER K-1 INFORMATION:

INTEREST INCOME	5.
ORDINARY DIVIDENDS	3.
QUALIFIED DIVIDENDS	3.
TAX-EXEMPT INTEREST	4.
NET SHORT-TERM CAPITAL GAIN (LOSS)	<1.>
NET LONG-TERM CAPITAL GAIN (LOSS)	4.

40013501

ELIOT BERNSTEIN FAMILY TRUST

I.D. NUMBER: 65-6477114 TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

ELIOT BERNSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

$\mathtt{JILL}$	IANTONI	FAMI	LΥ	TRUST
I.D.	NUMBER:	65-6	477	115
TYPE:	ESTATE	OR	TRU	ST

#### ACTIVITY INFORMATION:

JILL IANTONI FAMILY TRUST

OTHER PASSIVE ACTIVITY

### OTHER K-1 INFORMATION:

INTEREST INCOME	4.
ORDINARY DIVIDENDS	4.
QUALIFIED DIVIDENDS	2.
TAX-EXEMPT INTEREST	2.
NET SHORT-TERM CAPITAL GAIN (LOSS)	<1.>
NET LONG-TERM CAPITAL GAIN (LOSS)	4.

JILL IANTONI FAMILY TRUST I.D. NUMBER: 65-6477115 TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

JILL IANTONI FAMILY TRUST

OTHER PASSIVE ACTIVITY

LISA	S FRIEDSTEIN FAMILY	TRUST
I.D.	NUMBER: 65-6477116	
TYPE:	ESTATE OR TRUST	

### ACTIVITY INFORMATION:

LISA S FRIEDSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

#### OTHER K-1 INFORMATION:

INTEREST INCOME	4.
ORDINARY DIVIDENDS	4.
QUALIFIED DIVIDENDS	3 .
TAX-EXEMPT INTEREST	4.
NET LONG-TERM CAPITAL GAIN (LOSS)	4.

LISA S FRIEDSTEIN FAMILY TRUST

I.D. NUMBER: 65-6477116 TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

LISA S FRIEDSTEIN FAMILY TRUST

OTHER PASSIVE ACTIVITY

## SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

### OTHER K-1 INFORMATION:

INTEREST INCOME ORDINARY DIVIDENDS QUALIFIED DIVIDENDS TAX-EXEMPT INTEREST SECTION 1231 GAIN (LOSS) NET SHORT-TERM CAPITAL GAIN (LOSS) NET LONG-TERM CAPITAL GAIN (LOSS) INVESTMENT INTEREST EXPENSE - SCHEDULE A CHARITABLE CONTRIBUTIONS DEDUCTIONS RELATED TO PORTFOLIO INCOME ROYALTY NONDEDUCTIBLE EXPENSES	58,450. 18,347. 13,292. 25,620. 10. <1,147.> 20,637. 22. 862. 5,732. 36. 7,108.
INVESTMENT INTEREST EXPENSE:	
INVESTMENT INCOME INVESTMENT EXPENSE	76,809. 357.
TAX PREFERENCE ITEMS:	
DEPRECIATION ADJUSTMENT OTHER AMT PREFERENCE ITEMS/ADJUSTMENTS AMT PAL CARRYOVER - SCHEDULE E	253. 1,054. 9,783.

Department of the Treasury Internal Revenue Service (99)

Foreign Tax Credit
(Individual, Estate, or Trust)
Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Nar	ne	<u>,                                      </u>	·						ldentifying numl	er as shown on page	1 of your tax return
g i	MON BER	NCTETN							371-32-	5211	
_			category of inc	ome listed belo	w. See Categories	of Inco	me in the	instructions.		ox on each Form 1	116. Report all
	ounts in U.S. dolla				ood Gatogonia	01 11100	,	men denomer	oneen only one s	ox on oddin onin i	Troi Noportan
a	X Passive ca	tegory income	e c	Section 901	(j) income			e Lum	p-sum distribution	ons	
b	General ca	tegory income	e d 🗔	Certain inco	me re-sourced by t	reaty					
	Resident of (name										
No	te; if you paid ta	exes to only o	one foreign cou	untry or U.S. p	oossession, use o and line for each	olumi	n A in Pa	rt I and line A	A in Part II. If yo	u paid taxes tone	ore than one
	<u> </u>				side the United				ked Ahova)	<del></del>	
6.201	art Taxac	ne income c	JI LUSS PTUITE	3001 CES OUT				ry or U.S. Po		1	Total
					Α '	oi eig	ii Couiii	<u>ну от О.Э. Р.</u> В	C	(Add o	cols. A, B, and C.)
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	and of the type	checked abov	/e:							The second secon	
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b	Check if line 1a	•	-			PARTY IN THE TOTAL	Townships Is also as an	The first fi	The second secon		
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		-	tructions)							The control of the co	
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3			ctions <b>not defini</b>	•					der vertrag in der der der der der der der der der der		
8			or standard dedu		49,0	<u>47.</u>		49,047	•	Angelmente his angelmente his angelmente his angelmente his	
k			tement)		40.0	17		40 047		Postument of the control of the cont	
C					49,0	$\frac{47.}{18.}$		49,047 280		Continues of the Contin	
(			es		223,5		2	$\frac{260}{23,563}$		The state of the s	
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ç						4.	-	61	•	Control of the Contro	
4	Pro rata share				Selection of the select		Section and a se	Food day of a week food or 1999 and	The second secon	Company of the Compan	
ε	Home mortgag	je interest (use	e worksheet on p	age 14						To the second of	
	of the instructi	,								Section of the sectio	
							<u> </u>			Secretary Control of C	
5	Losses from fo				<del> </del>	4.		61	+	6	65.
<u>-6</u>	Add lines 2, 3g Subtract line 6 f			ere and on line	15. page 2	- T +	<u> </u>	0.1	•	► 7	233.
			Paid or A		10, pags 2				SEI		
T	Credit is claimed				Foreig	n tax	es paid e	or accrued			
ı	for taxes (you must		In forei	gn currency					In U.S. dol	lars	
₹	check one)	_			(n) Other		<b></b>			(r) Other	(s)Total foreign
Country	(h) X Pald	l axes w	ithheld at source	e on:	foreign taxes paid or		Taxes	withheld at so	ource on:	foreign taxes paid or	taxes paid or accrued (add cols.
이	(i) Accrued	<del></del>	(I) Rents and	(m) Interest	accrued	(0) [	Dividends	(p) Rents and royalties	d (Q) Interest	accrued	(o) through (r))
+	(j) Date paid or accrued	(k) Dividends	(I) Rents and royalties	(III) ittralagr	<del>                                     </del>	(0)	A VIGORIGA	''' royalties	(A) mirespec	1.	1.
A B		ļ						·	<del>                                     </del>	<del>                                     </del>	1.
<u>ड</u> ो		,									
8	Add lines A thr	ough C, colun	nn (s). Enter the	total here and	on line 9, page 2				-		2.
LH	A For Paperv	vork Reduc	tion Act Notic	e, see instru	ctions.						Form <b>1116</b> (2011)

P	art III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued				
	for the category of income checked above Part I	. 9	2.		
10	Carryback or carryover (attach detailed computation)	. 10			
11	Add lines 9 and 10	. 11	2.	per y y y y y y y y y y y y y y y y y y y	
12	Reduction in foreign taxes	. 12			
13	Taxes reclassified under high tax kickout	13		Same way	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	14	2.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the			Tarania Tarania	
	United States (before adjustments) for the category of income checked above Part I	. 15	233.		
16	Adjustments to line 15	16			
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income.				
	(If the result is zero or less, you have no foreign tax credit for the category of income				
	you checked above Part I. Skip lines 18 through 22. However, if you are filing more than			Lead of the	
	one Form 1116, you must complete line 20.)	. 17	233.	100 100 100 100 100 100 100 100 100 100	
18	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39.				
	Estates and trusts: Enter your taxable income without the deduction for your				
	exemption	. 18	996.		
	Gaution: If you figured your tax using the lower rates on qualified dividends or capital g				
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	.233936
20	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the	amount from Fo	orm 1040NR,		
	line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of	•			
	lines 36 and 37			20	
	Caution: If you are completing line 20 for separate category e (lump-sum distributions,				
	Multiply line 20 by line 19 (maximum amount of credit)			21	
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 to				
	amount on line 28. Otherwise, complete the appropriate line in Part IV			22	0.
	art IV Summary of Credits From Separate Parts III			up.ozer	
	Credit for taxes on passive category income				
	Credit for taxes on general category income				
	Credit for taxes on certain income re-sourced by treaty				
	Credit for taxes on lump-sum distributions			-200000	
27	Add lines 23 through 26			27	
28	Enter the smaller of line 20 or line 27			28	0.
	Reduction of credit for international boycott operations			29	<del></del>
30	Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	-			0.
_	Torni Todorn, ilite 40, Fortil Tod I, donedule d, line 2a, Ol Fortil 890-1, line 40a		·····	30	Form 1116 (2011)
					1 01111 ( 110 ( 20 1 1)

111511 12-19-11

Department of the Treasu Internal Revenue Service Name(s) shown on return

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

Attach to your tax return.

See separate instructions.

OMB No. 1545-0184

SIMON BERNSTEIN						:	371-32-5211
1 Enter the gross proceeds from sale							
(or substitute statement) that you	are including on line :	2, 10, or 20	····		<u></u> 1 1	Щ_	
Part Sales or Exchange Other Than Casu							ons From
- Cirici Mair Gasa	larty or Thore in	Г	T	(e) Depreciation	(f) Cost or a		(a) Oala an (lasa)
(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	allowed or allowable since	basis, plu improvements	s	(g) Gain or (loss) Subtract (f) from the
2	(110.1, 110.3, 11.3	(mot) day) yny	pitas	acquisition	expense of		sum of (d) and (e)
BERNSTEIN FAMILY							
INVESTMENTS LLLP					<u> </u>		10.
BERNSTEIN FAMILY							
PAIINVESTMENTS LLLP							0.
3 Gain, if any, from Form 4684, lir	ne 39	1		<u> </u>		3	
4 Section 1231 gain from installm	ent sales from Form	6252, line 26 or	.37	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4	· · · · · ·
5 Section 1231 gain or (loss) from						5	·
6 Gain, if any, from line 32, from o						6	
7 Combine lines 2 through 6. Ent						7	10.
Partnerships (except electing instructions for Form 1065, Schbelow.	large partnerships)	and S corpora	tions. Report the g	gain or (loss) foliov	ving the		
Individuals, partners, S corpo from line 7 on line 11 below and 1231 losses, or they were recap the Schedule D filed with your r	f skip lines 8 and 9. I stured in an earlier ye	f line 7 is a gain ear, enter the ga	and you did not ha in from line 7 as a	ave any prior year	section		
8 Nonrecaptured net section 123	1 losses from prior y	ears (see instruc	ctions)			8	
9 Subtract line 8 from line 7. If ze							
line 9 is more than zero, enter t			<del>-</del>				
capital gain on the Schedule D	filed with your return	(see instruction	ns)		•••••	9	
Part II Ordinary Gains a	 I <b>nd Losses</b> (see in	structions)	•				
99.0000.017.00.00.01.00.00.01			ide property bald :	1			
10 Ordinary gains and losses not i		niougii 16 (incid I	T Troperty neighbors	year or less):	T		
PAITRUST	<u>.                                      </u>				<del> </del>		0.
PAITRUST					<del> </del>		U.
44 1 16 10 7	l	ļ.		<u>.l</u>	<u> </u>		
11 Loss, if any, from line 7	ant from line O if som			• • • • • • • • • • • • • • • • • • • •		11	
12 Gain, if any, from line 7 or amou						12	
13 Gain, if any, from line 31		*****************				13	
14 Net gain or (loss) from Form 46			***************************************			14	
15 Ordinary gain from installment :						15	
16 Ordinary gain or (loss) from like						16 17	
<ul><li>17 Combine lines 10 through 16</li><li>18 For all except individual returns</li></ul>	ontor the apparent fr	om line 17 on th	o appropriate line	of your return one	Lakin lines	* * * * *	
18 For all except individual returns a and b below. For individual re	•		• • •	or your return and	i skih iilies		
	, ,						
a If the loss on line 11 includes a							
the part of the loss from incom-			•	•			
from property used as an empl See instructions	-	•	-	•		100	
	an line 17 evaluding t					18a	
b Redetermine the gain or (loss) of Form 1040, line 14	_					18b	
LHA For Paperwork Reduction A					******************	IOD	Form <b>4797</b> (2011

	n 4797 (2011) SIMON BERNSTEIN			4050 4054				2-5211 Page 2
Pa	rt III Gain From Disposition of Proper	ty Un	der Sections 1245	, 1250, 1252	2, 12	54, and 1255	(see	instructions)
19	(a) Description of section 1245, 1250, 1252, 1254, o	or 1255	property:			(b) Date acquir (mo., day, yr.		(c) Date sold (mo., day, yr.)
Α	<u> </u>							
В								
C								
D								
	These columns relate to the properties on lines 19A through 19D.	•	Property A	Property I	3	Property	c	Property D
20	Gross sales price (Note: See line 1 before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24		****				*
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975 (see instructions)	26a						
b	Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a (see instructions)	26b						
	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c			····			
d	Additional depreciation after 1969 and before 1976	26d						
е	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g						
	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).							
	Soil, water, and land clearing expenses	27a			i			
	Line 27a multiplied by applicable percentage	27b				· · · · · · · · · · · · · · · · ·		
	Enter the smaller of line 24 or 27b	27c						
а	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a						
	Enter the smaller of line 24 or 28a	28b						
29 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126 (see instructions)	29a						
	Enter the smaller of line 24 or 29a (see instructions)	29b				·		
Sui	mmary of Part III Gains. Complete property of	columns	s A through D through li	ne 29b before	going	to line 30.		
30	Total gains for all properties. Add property columns	A thro	ugh D, line 24	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			30	
31	Add property columns A through D, lines 25b, 26g,	27c, 2	8b, and 29b. Enter here	and on line 13	3		31	
32	Subtract line 31 from line 30. Enter the portion from		•			•		
Pa	from other than casualty or theft on Form 4797, line  Int V Recapture Amounts Under Section	ons 17	79 and 280F(b)(2) \	When Busin	1688	Use Drops t	32 0.50°	% orless
	(see instructions)				.000	000 Б. оро .	0 00	,
						(a) Section 179	1	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allo	owable	in prior years		33			
34	Recomputed depreciation (see instructions)				34			
35	Recapture amount. Subtract line 34 from line 33. S				35			

**6251** 

#### Alternative Minimum Tax - Individuals

2011

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR Your social security number SIMON BERNSTEIN 371 32 5211 Part | Alternative Minimum Taxable Income 1 If filling Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the 996. amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.) 1 2 Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-2 44,707. 3 Taxes from Schedule A (Form 1040), line 9 3 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line 4 4,340. 5 Miscellaneous deductions from Schedule A (Form 1040), line 27 5 6 Skip this line. It is reserved for future use 6 Tax refund from Form 1040, line 10 or line 21 7 Investment interest expense (difference between regular tax and AMT) 8 Depletion (difference between regular tax and AMT) 9 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount 10 11 Alternative tax net operating loss deduction <45,039.> 11 Interest from specified private activity bonds exempt from the regular tax 12 Qualified small business stock (7% of gain excluded under section 1202)\_\_\_\_\_ 13 13 14 Exercise of incentive stock options (excess of AMT income over regular tax income) 14 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 15 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 16 Disposition of property (difference between AMT and regular tax gain or loss) 17 17 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 18 Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 20 0. 19 Loss limitations (difference between AMT and regular tax income or loss) 20 21 Circulation costs (difference between regular tax and AMT) 21 22 Long-term contracts (difference between AMT and regular tax income) 23 Mining costs (difference between regular tax and AMT) 23 24 Research and experimental costs (difference between regular tax and AMT) 24 25 Income from certain installment sales before January 1, 1987 25 26 Intangible drilling costs preference 27 27 Other adjustments, including income-based related adjustments 28 Alternative minimum taxable income. Combine lines 1 through 27. (if married filling separately and line 28 is more than \$223,900, see instructions.) 5,004. Part | Alternative Minimum Tax (AMT) Exemption. (If you were under age 24 at the end of 2011, see instructions.) IF your filing status is ... AND line 28 is not over THEN enter on line 29 Single or head of household \$112,500 \$48,450 74.450 48,450. 29 37.225 If line 28 is over the amount shown above for your filing status, see instructions. 30 Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34 0. 30 31 • If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured 0. 31 for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 54 here. All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing 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. 32 Alternative minimum tax foreign tax credit (see instructions) 32 33 Tentative minimum tax. Subtract line 32 from line 31 <u>o.</u> 33 34 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). 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 O. 35 AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45 35

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Form 6251 (2011)

For Paperwork Reduction Act Notice, see your tax return instructions.

### Part III Tax Computation Using Maximum Capital Gains Rates Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in the instructions. 36 Enter the amount from Form 6251, line 30. If you are filling Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for this line 36 37 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 in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter 37 38 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, see instructions for the amount to enter 38 39 If you did not complete a Schedule D Tax Worksheet for the regular tax or the 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 40 Enter the smaller of line 36 or line 39 41 Subtract line 40 from line 36 42 If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result \_\_\_\_\_ 42 43 Enter: \$69,000 if married filing jointly or qualifying widow(er), • \$34,500 if single or married filling separately, or 43 • \$46,250 if head of household. 44 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 in 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 45 Subtract line 44 from line 43. If zero or less, enter -0-45 46 Enter the smaller of line 36 or line 37 47 Enter the smaller of line 45 or line 46 47 48 Subtract line 47 from line 46 49 Multiply line 48 by 15% (.15) If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50. 50 Subtract line 46 from line 40 \_\_\_\_\_\_ 50 51 Multiply line 50 by 25% (.25) **52** Add lines 42, 49, and 51 53 If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26), Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result \_\_\_\_\_ 53 54 Enter the smaller of line 52 or line 53 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31

Form 6251 (2011)

		ALTERNA	NATIVE MINIMUM TAX RECONCILIATION REPORT	CONCILIATION REPO	RT		
Name(s)							Social Security Number
SIMON	BERNSTEIN						371-32-5211
Form					Adjustment		
Name	Description	Income	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251 Other Adjustment
4797	BERNSTEIN FAMILY INVES FMENTS LLIP * REGULAR INCOME						
The part of the pa	PAL CARRYOVER AMT PAL CARRYOVER * AMT NET INCOME						
X	KI- BERNSTEIN FAMILY INVES	The second secon	The state of the s	Control of the contro	A TOTAL OF THE STATE OF THE STA	The state of the s	
	* REGULAR INCOME PAL CARRYOVER	< 10.5 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 < 0.0 <	The state of the s		* P 9 P 9 P 9 P 9 P 9 P 9 P 9 P 9 P 9 P		
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Company of the Compan	PAL DISALLOWED AMT PAL DISALLOWED	<7.654. 5,151.		The state of the s	<7,654. 5,151.		
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Total Control of the	** TOTAL ADJ & PREF **				0		
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# Form 1116

Department of the Treasury Internal Revenue Service (99

# ALTERNATIVE MINIMUM TAX Foreign Tax Credit

(Individual, Estate, or Trust)

Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Attachment 10

Name Identifying number as shown on page 1 of your tax return SIMON BERNSTEIN 371-32-5211 Use a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 1116, Report all amounts in U.S. dollars except where specified in Part II below. a X Passive category income Section 901(j) income Lump-sum distributions General category income Certain income re-sourced by treaty f Resident of (name of country) ▶ UNITED STATES Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession, Taxable Income or Loss From Sources Outside the United States (for Category Checked Above) Foreign Country or U.S. Possession Total Α (Add cols. A, B, and C.) OTHER Enter the name of the foreign country or U.S. COUNTRIES VARIOUS possession ..... 1a Gross income from sources within country shown above and of the type checked above: 18 280 298. 1a b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) Deductions and losses (Caution: See instructions): Expenses definitely related to the income on line 1a (attach statement) Pro rata share of other deductions not definitely related: a Certain itemized deductions or standard deduction Other deductions (attach statement) Add lines 3a and 3b 18 280 Gross foreign source income 223,563. 223,563. Gross income from all sources .000081 .001252 Divide line 3d by line 3e Multiply line 3c by line 3f Pro rata share of interest expense: a Home mortgage interest (use worksheet on page 14 of the instructions) Other interest expense Losses from foreign sources Add lines 2, 3g, 4a, 4b, and 5 6 7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 298. Part Foreign Taxes Paid or Accrued Credit is claimed Foreign taxes paid or accrued for taxes In foreign currency In U.S. dollars (you must check one) (r) Other (n) Other (s)Total foreign Taxes withheld at source on: Taxes withheld at source on: (h) X Paid foreign taxes paid or foreign accrued (add cols. taxes paid or taxes paid or (i) Accrue (o) through (r)) accrued accrued (j) Date pald (k) Dividends (0) Dividends (m) Interest (q) Interest B 1. C 8 Add lines A through C, column (s). Enter the total here and on line 9, page 2

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Form 1116 (2011)

LHA For Paperwork Reduction Act Notice, see instructions.

Pa	ittill Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes pald or accrued				
	for the category of income checked above Part I	9	2.		
10	Carryback or carryover (attach detailed computation) SEE STATEMENT 21	10	124.		
			400		
11	Add lines 9 and 10	11	126.	70.00	
		1 1			
12	Reduction in foreign taxes	12			
13	Taxes reclassified under high tax kickout	13			
	Complete lines 44, 40, and 40. This is the total appropriate fewerer to smaller few availables				126.
	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit			14	140.
	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the	45	298.		
	United States (before adjustments) for the category of income checked above Part I	15	230.		
40	Adjustments to line 15	16			
	Adjustments to line 15  Combine the amounts on lines 15 and 16. This is your net foreign source taxable income.	16			
	(If the result is zero or less, you have no foreign tax credit for the category of income			110000	
	you checked above Part I. Skip lines 18 through 22. However, if you are filling more than			phi mili	
	one Form 1116, you must complete line 20.)	17	298.		
	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39.	''	2501		
10	Estates and trusts: Enter your taxable income without the deduction for your			The second secon	
	exemption	18	5,004.		
	Caution: If you figured your tax using the lower rates on qualified dividends or capital ga		•	baracata	
	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	.059552
	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the a			-	
	line 42. Estates and trusts; Enter the amount from Form 1041, Schedule G, line 1a, or the total of				
	lines 36 and 37		•	20	
	Caution: If you are completing line 20 for separate category e (lump-sum distributions),				
	Multiply line 20 by line 19 (maximum amount of credit)			21	
	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filling, skip lines 23 the				
	amount on line 28. Otherwise, complete the appropriate line in Part IV		<b>&gt;</b>	22	0.
	art IV Summary of Credits From Separate Parts III				
23	Credit for taxes on passive category income	23		- 100 person 100 perso	
24	Credit for taxes on general category income	24		220000000	
25	Credit for taxes on certain income re-sourced by treaty	25			
	Credit for taxes on lump-sum distributions				
	Add lines 23 through 26			27	
	Enter the smaller of line 20 or line 27			28	
	Reduction of credit for international boycott operations		******************************	29	
	Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 4				
	Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a		<b>&gt;</b>	30	0 .

Form **1116** (2011)

# Form **4952**

# **Investment Interest Expense Deduction**

Department of the Treasur Internal Revenue Service

Attach to your tax return. Identifying number Name(s) shown on return 371-32-5211 SIMON BERNSTEIN **Total Investment Interest Expense** Investment interest expense paid or accrued in 2011 (see instructions) SEE STATEMENT 22 22. Disallowed investment interest expense from 2010 Form 4952, line 7 22. 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 gain from the disposition of property held for investment) STMT 23 76,833. 4a 13,292. Qualified dividends included on line 4a 63,541. c Subtract line 4b from line 4a d Net gain from the disposition of property held for investment 4d Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions) f Subtract line 4e from line 4d Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions) 4g 63,541. h Investment income. Add lines 4c, 4f, and 4g Investment expenses (see instructions) SEE STATEMENT 24 4,340. Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-59,201. Part II Investment Interest Expense Deduction Disallowed investment interest expense to be carried forward to 2012. Subtract line 6 from line 3. 0. If zero or less, enter -0-

For Paperwork Reduction Act Notice, see separate instructions.

Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions.

Form **4952** (2011)

22.

#### ALTERNATIVE MINIMUM TAX

Form **4952** OMB No. 1545-0191 **Investment Interest Expense Deduction** Department of the Treasury Internal Revenue Service Attach to your tax return. Identifying number Name(s) shown on return 371-32-5211 SIMON BERNSTEIN **Total Investment Interest Expense** Part I Investment interest expense paid or accrued in 2011 (see instructions) SEE STATEMENT 26 22. Disallowed investment interest expense from 2010 Form 4952, line 7 22. Total investment interest expense. Add lines 1 and 2 Net Investment Income 4a Gross income from property held for investment (excluding any net 76,833. 4a gain from the disposition of property held for investment) 13,292. b Qualified dividends included on line 4a 63,541. c Subtract line 4b from line 4a ..... d Net gain from the disposition of property held for investment e Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions) 4f f Subtract line 4e from line 4d Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions) 63,541. h Investment income. Add lines 4c, 4f, and 4g Investment expenses (see instructions) Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-63,541. Part III Investment Interest Expense Deduction Disallowed investment interest expense to be carried forward to 2012. Subtract line 6 from line 3. 0. If zero or less, enter -0-7 Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions....... 22. 22. REGULAR FORM 4952, LINE 8 22. LESS RECOMPUTED FORM 4952, LINE 8

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4952 (2011)

INTEREST ADJUSTMENT - FORM 6251, LINE 8

# 5582 Eor.

Department of the Treasury

**Passive Activity Loss Limitations** 

➤ See separate instructions.

➤ Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2011

Attachment Sequence No. 88

Internal Revenue Service (99)

Name(s) shown on return

Identifying number

SIM	ON BERNSTEIN			<u>37</u> :	<u>1-32-5211</u>	
Part 2011 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 before completing Part I.						
Renta	al Real Estate Activities With Active Participation (For the definition of active p				Y PAR AND MAY SEE A SEE	
	ial Allowance for Rental Real Estate Activities in the instructions.)	·				
	Activities with net income (enter the amount from Worksheet 1, column (a))	1a				
	Activities with net loss (enter the amount from Worksheet 1, column (b))	1b		Transmission and the second se		
c F	Prior years unallowed losses (enter the amount from Worksheet I, column (c))	1c		Figure 2 Property Communication of the Communicatio		
	Combine lines 1a, 1b, and 1c	· · · · · · · · · · · · · · · · · · ·		1d		
Comr	nercial Revitalization Deductions From Rental Real Estate Activities		1	Contractor of the	Annual control of the	
2a (	Commercial revitalization deductions from Worksheet 2, column (a)	2a			AND THE PROPERTY OF THE PROPER	
	Prior year unallowed commercial revitalization deductions from  Norksheet 2, column (b)	2b				
<u>c</u> /	Add lines 2a and 2b		,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2c		
All Ot	ther Passive Activities	TAN OFFICE STATES	According to the control of the cont			
	Activities with net income (enter the amount from Worksheet 3, column (a))	3a	11.			
	Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	<1,617.	Avenue 41 for	ing nyaéta na mahana antah ng baga Manasa sa mahang pangan ang manasa Manasa Manasa kan manasa mahana ang	
(	Prior years unallowed losses (enter the amount from Worksheet 3, column (c))		<12,246.	***************************************	12.050	
	Combine lines 3a, 3b, and 3c			3d	<13,852.	
	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include the					
	osses are allowed, including any prior year unailowed losses entered on line 1c,		40.000			
t	the forms and schedules normally used	4	<13,852.			
Ì	f line 4 is a loss and: ● Line 1d is a loss, go to Part II.					
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Par</li> </ul>	t II and	l go to Part III.			
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more</li> </ul>	e), skip	Parts II and III and go to li	т <del>о</del> 15.		
	tion: If your filing status is married filing separately and you lived with your spous	e at ang	y time during the year, <sub>do n</sub>	ot con	nplete	
	Il or Part III. Instead, go to line 15.					
Par	Special Allowance for Rental Real Estate Activities With Note: Enter all numbers in Part II as positive amounts. See instructions for					
5 I	Enter the smaller of the loss on line 1d or the loss on line 4	.,		5		
6 I	Enter \$150,000. If married filing separately, see instructions	۱ ـ		Control Control Control	go cope receives processing and the control of the control of the cope of the	
7 I	Enter modified adjusted gross income, but not less than zero (see instructions)	7		property of the control of the contr		
ı	Note: If line 7 is greater than or equal to line 6, skip lines 8 and			Constitution of the Consti		
9	9, enter -0- on line 10. Otherwise, go to line 8.	Honor School				
8 9	Subtract line 7 from line 6	8				
9 1	Multiply line 8 by 50% (.5). <b>Do not</b> enter more than \$25,000. If married filing sepa	arately,	see instructions	9		
10 I	Enter the <b>smaller</b> of line 5 or line 9			10		
1	If line 2c is a loss, go to Part III. Otherwise, go to line 15.					
Par	III Special Allowance for Commercial Revitalization Dedu	ction	s From Rental Real	Estal	te Activities	
	Note: Enter all numbers in Part III as positive amounts. See the example for	or Part	II in the instructions.			
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separate	ely, se	instructions	11		
12 Enter the loss from line 4						
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					
Par	t IV Total Losses Allowed					

15

16

SEE STATEMENT

Add the income, if any, on lines 1a and 3a and enter the total

16 Total losses allowed from all passive activities for 2011. Add lines 10, 14, and 15. See instructions

to find out how to report the losses on your tax return

LHA 119761 12-12-11 For Paperwork Reduction Act Notice, see instructions.

11.

11.

OIII 0002 (2011) BIII BIIII BIIII							Lugoz
Caution: The worksheets must be filed with your to							
Worksheet 1 - For Form 8582, Lines 1	a, 1b, and 1c (Se	ee instru	ictions.)				
Name of activity	Currer	ıt year		Prior yea	ars	Overall g	ain or loss
Haine of activity	(a) Net income (line 1a)		et loss e 1b)	(c) Unallo loss (line		(d) Gain	(e) Loss
							-
···					Prog 2/200		Zivoto uno saro 60 maio finata un son (res arvesas
Total. Enter on Form 8582, lines 1a,					product on superior of the product o		A COMMENT OF THE PROPERTY OF T
1b, and 1c Worksheet 2 - For Form 8582, Lines 2	a and 2h (Saa in	otruotio	na )		Selfend Spar anny chandre for part transport or participated of participated on a design country or after after a few design of a		
worksheet 2 - For Form 6562, Lines 2	(a) Current		118.)	(b) Prior y	205	1	
Name of activity	deductions (li		unallo	wed deducti		(c) (	Overall loss
					•		
Total. Enter on Form 8582, lines 2a						The proof of the Art has a series of a control of the control of t	The second secon
and 2b	<u></u>		Ц				190 00 00 00 00 00 00 00 00 00 00 00 00 0
Worksheet 3 - For Form 8582, Lines 3	<b>a, 3b, and 3c</b> (Se	ee instru	uctions.)	1	<del>1</del>		
	Currer	nt year		Prior ye	ars	Overall (	gain or loss
Name of activity	(a) Net income	(b) Ne	et loss	(c) Unallo	wed		T
	(line 3a)		e 3b)	loss (line		(d) Gain	(e) Loss
· · · · · · · · · · · · · · · · · · ·							
						· · · · · · · · · · · · · · · · · · ·	
	SEE ATTAC	HED S	TATEM	ENT FO	R WORK	SHEET 3	
Total. Enter on Form 8582, lines 3a,			C1 17	1 10	0.4.0		
3b, and 3c	11.			<12, 500 line 4			
Worksheet 4 - Use this worksheet if a		own on	Form 8	582, line 1	U or 14 (S	<u>ee instructi</u>	ons.)
	Form or schedule and line number					(a) Chaolal	(d) Subtract
Name of activity	to be reported on	(a) l	Loss	(b) Rat	וא ו	(c) Special ailowance	column (c)
	(see instructions)						from column (a)
			٠				
						•	
Total	<b>&gt;</b>			<u> </u>			
Worksheet 5 - Allocation of Unallowe	<b>d Losses</b> (See in	<u>istructio</u>	ns.)				
	Form or sch				i		
Name of activity	and line nur to be reporte		(a) l	Loss	(b) R	atio	(c) Unallowed loss
	(see instruct						
	•	+					
	-	<del></del>					
						<del></del>	
	SEE ATTA	CHED	STATE	MENT F	OR WOR	KSHEET	5
	•			<del></del>			
Total		<b>▶</b> Ì	1	3.852.	1.000	aaaaaal	13.852.

<u> Worksheet 6 - Allowed Losses (See</u>	instructions.)							
Name of activity	Form or sch and line nu to be repor (see instruc	mber ted on	(a) L	058	(b) Una	llowed loss	(c) Allov	ved loss
	SEE ATTA	ACHED	STATE	мемт в	OR WO	RKSHEET	6	<del></del>
Total	<b>.</b>			454	•	4.0.4		
Total Worksheet 7 - Activities With Loss	es Reported on T	wo or N	lore Forn	ns or Sch	edules	(See instruct	ions.)	
Name of activity:	(a)		(b)	(c) Rat		(d) Unallowed loss		owed loss
Form or schedule and line number to be reported on (see instructions):		The second secon						
1a Net loss plus prior year unallowed loss from form or schedule	<b>&gt;</b>	and the field of the control of the						
b Net income from form or schedule	<b>▶</b>	guest of cattered on the cattered on the cattered of the cattered on the catte	Text years created has even economically and the seconomical and t	Control of Action 2014 (1994) Action 1994 (1994) Ac				
c Subtract line 1b from line 1a. If zero or less	s, enter -0 🕨	<u> </u>						
Form or schedule and line number to be reported on (see instructions):		and J To de demonstration of the control of the con						
1a Net loss plus prior year unallowed loss from form or schedule	<b>&gt;</b>	and Have in a first to be set to be			a graph was man and a property of a property			
b Net income from form or schedule	<b>&gt;</b>	A Company of the Comp	The contract of the contract o					
c Subtract line 1b from line 1a. If zero or less	s, enter -0 ►							
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule		The special property of the sp		A Part of the Control				
b Net income from form or schedule	<b>&gt;</b>	The Administration of the Control of					And the second s	
Chickwort line the form line to if your subsection		ACHED	STATE	MENT F	OR WC	RKSHEET	7	
c Subtract line 1b from line 1a. If zero or less	s, enter -0							
Total		1	3,728.	1.000	0000	13,71	3.	10.
		<del></del>						<b>8582</b> (2011)

# Form **8582-CR** (Rev. January 2012)

# **Passive Activity Credit Limitations**

See separate instructions.

OMB No. 1545-1034

Attachment Sequence No. 89

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

► Attach to Form 1040 or 1041.

Identifying number

SIN	MON BERNSTEIN				371-32-5211
Pai	Passive Activity Credits				
	Caution: If you have credits from a publicly traded partnership, see Public	oly Traded Partne	erships (PTPs) in t	he instr	uctions.
Credi	ts From Rental Real Estate Activities With Active Participation (Other Than Rehabilita	tion Credits and			
Low-l	ncome Housing Credits) (See Lines 1a through 1c in the instructions.)				
4.	Credits from Worksheet 1, column (a)	1a			
1a	Gredits from Worksheet 1, column (a)	14		STATE OF THE STATE	
b	Prior year unallowed credits from Worksheet 1, column (b)	1b		Service of the servic	
.,	The year analowed election from the first type of the first type o	10			
c	Add lines 1a and 1b			1c	
Reha	bilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits	for Property Place	ed in Service	00 1 10 00 00 00 00 00 00 00 00 00 00 00	
Befor	e 1990 (or From Pass-Through Interests Acquired Before 1990) (See Lines 2a through	2c in the instruction	ons.)	A contract of the	
		1 1		Prince Condition (Condition)	
2a	Credits from Worksheet 2, column (a)	2a		1.0	
b	Prior year unallowed credits from Worksheet 2, column (b)	2b		2000 00 00 00 00 00 00 00 00 00 00 00 00	
c	Add lines 2a and 2b	,		2c	
Low-	Income Housing Credits for Property Placed in Service After 1989 (See Lines 3a throu	<b>gh 3c</b> in the instruc	ctions.)	Spring and a sprin	
				And the second s	
За	Credits from Worksheet 3, column (a)				
b	Prior year unallowed credits from Worksheet 3, column (b)			989 T TOO S. D.C.	
C	Add lines 3a and 3b		3c		
	•			2000 00 00 00 00 00 00 00 00 00 00 00 00	
4a	Credits from Worksheet 4, column (a) Prior year unallowed credits from Worksheet 4, column (b)	4a	6.	Security and Secur	
b					6.
	Add lines 4a and 4b			4c 5	6.
5	Add lines 1c, 2c, 3c, and 4c  Enter the tax attributable to net passive income (see instructions)			6	0.
6 7	Subtract line 6 from line 5. If line 6 is more than or equal to line 5, enter -0- and see ins			7	6.
	: If your filing status is married filing separately and you lived with your spouse				
Note	do not complete Part II, III, or IV. Instead, go to line 37.	at any time dam	ng the year,	Charagement cannot character the control of the con	
Pa	TIII Special Allowance for Rental Real Estate Activities V	ith Active P	articipation	w . A. Wally & . Very	
60 da	Note: Complete this part only if you have an amount on line 1c. Otherwi				
8	Enter the smaller of line 1c or line 7			8	
9	Enter \$150,000. If married filing separately, see instructions	9		A CONTRACTOR OF THE PARTY OF TH	
10	Enter modified adjusted gross income, but not less than zero (see instructions).			The commence of the commence o	
	If line 10 is equal to or more than line 9, skip lines 11			P VALUE OF STREET	
	through 15 and enter -0- on line 16	10		have an experience of the control of	
11	Subtract line 10 from line 9	11			
12	Multiply line 11 by 50% (.50). Do not enter more than \$25,000. If married				
	filing separately, see instructions	12			
13a	· · · · · · · · · · · · · · · · · · ·	Windows Date of the companies of a companies of the companies of a companies of the companies of the companies of companies of the companies of the companies of the companies of the companies of the companies of the companies of the companies of the com			
	Form 8582 13a	The second secon			
b	Enter the amount, if any, from line 14 of	Selection of the select		TO A SOUTH OF THE STATE OF THE	
	Form 8582 13b	A STATE OF THE STA		To the second se	
C	Add lines 13a and 13b	13c			
	Cubicast line 10e from line 10				
14	Subtract line 13c from line 12  Enter the tax attributable to the amount on line 14 (see instructions)			15	
15	LINES HIS IGA AND DUTADIS TO THE ANDMILL OF RIFE 14 (SEC 1115) HOUSE IS			1 10	

Form **8582-CR** (Rev. 01-2012)

Pa	Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through In Acquired Before 1990)	nter	ests
	Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.		
45	Enter the amount from line 7	17	
17		18	
18	Enter the amount from line 16  Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V	19	
19		20	
20	Enter the smaller of line 2c or line 19  Enter \$250,000. If married filing separately, see instructions to find	20	
21			
~~	out if you can skip lines 21 through 26	000 / 100	
22	22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	Policy of Trans	
~~	Subtract line 21 from line 21  23		
23	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married		
24	filling separately, see instructions	7.1 v 98.17	
oe.	Enter the amount, if any, from line 10 of		
208	Form 8582	A CONTRACTOR OF THE CONTRACTOR	
h	Enter the amount, if any, from line 14 of	Principal de la constant de la const	
a	Form 8582 25b	H- N-2-2-4-4	
_	Add lines 25a and 25b 25c	TO THE TOTAL PROPERTY OF THE TOTAL PROPERTY	
	Subtract line 25c from line 24 26		
26	Enter the tax attributable to the amount on line 26 (see instructions)		
27 28	Enter the amount, if any, from line 18		
29	Subtract line 28 from line 27	29	
Pa	Enter the smaller of line 20 or line 29	fter	1989
31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7	31	
32	Enter the amount from line 30	32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33	
34	Enter the smaller of line 3c or line 33	34	·
35	Tax attributable to the remaining special allowance (see instructions)	35	
36	Enter the smaller of line 34 or line 35	36	
	rt V Passive Activity Credit Allowed		
37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See instructions to find out how to report the allowed credit on		
	your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one		•
_	activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) in the instructions.	37	0.
Pa	rtVI Election To Increase Basis of Credit Property		
38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you		
••	elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the		
	property, check this box. See instructions		▶ □
39	Name of passive activity disposed of ▶		
40	Description of the credit property for which the election is being made		
41	Amount of unallowed credit that reduced your basis in the property > \$		<u> </u>
÷		Forn	n <b>8582-CR</b> (Rev. 01-2012)

40013501

#### ALTERNATIVE MINIMUM TAX

# Form **8582**

Department of the Treasury Internal Revenue Service (99)

# **Passive Activity Loss Limitations**

See separate instructions.Attach to Form 1040 or Form 1041.

OMB No. 1545-1008
2011
Attachment

Name(s) shown on return

Identifying number

SI	MON BERNSTEIN	371-32-5211			
Pa	2011 Passive Activity Loss Caution: Complete Worksheets 1,	2, and 3	before completing Part I.		
Ren	tal Real Estate Activities With Active Participation (For the definition of active	oarticipa	ition, see	Contract of	A STATE OF THE STA
Spe	cial Allowance for Rental Real Estate Activities in the instructions.)				A service of the control of the cont
1a	Activities with net income (enter the amount from Worksheet 1, column (a))	1a		arave	
b	Activities with net loss (enter the amount from Worksheet 1, column (b))	1b			
С	Prior years unallowed losses (enter the amount from Worksheet  1, column (c))	1c			
d	Combine lines 1a, 1b, and 1c	·		1d	
	nmercial Revitalization Deductions From Rental Real Estate Activities				The second secon
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a			A supplement of the second of the Second of
b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b			
С	Add lines 2a and 2b			2c	
	Other Passive Activities				
3a	Activities with net income (enter the amount from Worksheet 3,				
Ou	column (a))	3a	11.		
b	Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	<310.		
	Prior years unallowed losses (enter the amount from Worksheet 3,			Er orange of the second of the	
·	column (c))	3с	<9,785.	>	Company of the Compan
	Combine lines 3a, 3b, and 3c			3d	<10,084.
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include t		-		
	losses are allowed, including any prior year unallowed losses entered on line 1c,				
	the forms and schedules normally used	4	<10,084.		
	if line 4 is a loss and: • Line 1d is a loss, go to Part II.				
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Par</li> </ul>				
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more</li> </ul>	Parts II and III and go to li	ne 15.		
	ution: If your filing status is married filing separately and you lived with your spous t II or Part III. Instead, go to line 15.	e at any	time during the year, <sub>do n</sub>	ot con	nplet <del>e</del>
	rt   Special Allowance for Rental Real Estate Activities Wit	h Acti	ve Participation		
	Note: Enter all numbers in Part II as positive amounts. See instructions for				
5	Enter the smaller of the loss on line 1d or the loss on line 4			5	
6	Enter \$150,000. If married filing separately, see instructions				A GO CONTROL OF THE PROPERTY O
7	Enter modified adjusted gross income, but not less than zero (see instructions)			100 100 100 100	
-	Note: If line 7 is greater than or equal to line 6, skip lines 8 and			200000000000000000000000000000000000000	
	9, enter -0- on line 10. Otherwise, go to line 8.	A CONTROL OF THE CONT			
8	Subtract line 7 from line 6	8		To the second se	
9	Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing sepa	arately, s	see instructions	9	
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.			·	<u>'</u>
Pa	rt III Special Allowance for Commercial Revitalization Dedu	ctions	From Rental Real	Estat	te Activities
200,000,000	Note: Enter all numbers in Part III as positive amounts. See the example for				
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separat	ely, see	instructions	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 positive amount), line 11, or line 13			14	
Pá	rt V Total Losses Allowed				
15	Add the income, if any, on lines 1a and 3a and enter the total		*****	15	11.
16 Total losses allowed from all passive activities for 2011. Add lines 10, 14, and 15. See instructions					
to find out how to report the losses on your tax return SEE STATEMENT 39.					11.
LH/	119761 12-12-11 For Paperwork Reduction Act Notice, see instructions.				Form 8582 (2011)

TOTAL COST (50 L)							
Caution: The worksheets must be filed with your							
Worksheet 1 - For Form 8582, Lines 1	1		ctions.)	i			
Name of activity	Currer			Prior ye		Overail	gain or loss
	(a) Net income (line 1a)	(b) Ne (line		(c) Unallo loss (line		(d) Gain	(e) Loss
					9.5.		
Total. Enter on Form 8582, lines 1a, 1b, and 1c	Do and Ob (Occident	_11!	\		Section 2 of the section of the sect		
Worksheet 2 - For Form 8582, Lines 2	(a) Current		1S.}	(b) Prior y	oar	T	
Name of activity	deductions (li		unailo	wed deducti		) (c)	Overall loss
Total. Enter on Form 8582, lines 2a		<del></del>	+			2 / Model N. A.) or prints, a control NAS or many prints.	
and 2b			<u> </u>			C Find State and the second st	
Worksheet 3 - For Form 8582, Lines 3	1		ictions.)	<u> </u>			
N of achietes	Curre	nt year		Prior ye	ars	Overall	gain or loss
Name of activity	(a) Net income (line 3a)	(b) Ne (line		(c) Unallo		(d) Gain	(e) Loss
				-			
	SEE ATTA	CHED	STATE	MENT F	OR WOR	KSHEET	3
Total. Enter on Form 8582, lines 3a, 3b, and 3c	11.		<310.	> <9,	785.		
Worksheet 4 - Use this worksheet if a	an amount is sh			-		ee instruc	tions.)
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) L	.oss	(b) Ra	tio	(c) Special allowance	(d) Subtract column (c) from column (a)
					-		
Total	<b>&gt;</b>						
Worksheet 5 - Allocation of Unallowe	ed Losses (See in	<u>nstructio</u>	ns.)		i		
Name of activity	Form or sch and line nu to be report (see instruc	mber ed on	(a)	a) Loss (b) Ratio		latio	(c) Unallowed loss
					<u> </u>		
							· · · · · · · · · · · · · · · · · · ·
	SEE ATTA	CHED	STATE	EMENT F	OR WOR	KSHEET	5
Total	,	▶	1	10,084.	1.000	000000	10,084

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Worksheet 6 - Allowed Losses (See ins	tructions.)					3,2	OZ JZII Tayes
Name of activity	Form or sch and line nu to be report (see instruc	mber ted on	(a) L	.oss	(b) Un	allowed loss	(c) Allowed loss
			_				
	SEE ATT	ACHED	STATE	MENT F	OR W	ORKSHEET	6
Total		<b>&gt;</b> _		80.		80.	
Worksheet 7 - Activities With Losses F	Reported on T	wo or N	Nore Forn	ns or Sch	edules		
Name of activity:	(a)		(b)	(c) Ra	tio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):							
1a Net loss plus prior year unallowed loss from form or schedule		The second secon			A CONTRACT OF THE PROPERTY OF		
b Net income from form or schedule		The second secon	The second secon		And the second of the second o	the foreignment of the control of th	
c Subtract line 1b from line 1a. If zero or less, en	er-0 ►					de A Australia de compressión de com	
Form or schedule and line number to be reported on (see instructions):		The same of the sa			A CONTRACTOR OF THE CONTRACTOR	The second secon	
1a Net loss plus prior year unallowed loss from form or schedule		The state of the s			A CONTRACTOR OF THE STATE OF TH		
b Net income from form or schedule		Sin A mark distingtuished under a con- part of the control of the control of the con- dition of the control of the control of the con- dition of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the control of the con- trol of the control of the con- trol of the control of the con- trol of the control of the con- trol of the control of the		The second secon	A felian is halfmand of hammad and the control of t	The company of the co	
c Subtract line 1b from line 1a. If zero or less, en	ter -0 ▶				~~~~		
Form or schedule and line number to be reported on (see instructions):							
1a Net loss plus prior year unallowed loss from form or schedule		The appropriate of the property of the propert		The second secon			
b Net income from form or schedule	CIDE ACC	ACILITA	CMART	ALEXAGO T	OD V	ORKSHEET	7
c Subtract line 1b from line 1a. If zero or less, en	_	1	STATE	MITEMIT. T	OK W	OKVOUEET.	1
	VERALL		0 014	1 000		10.00	4 10
Total	<u></u>	1 1	0,014.	1.000	0000	10,00	4. 10. Form <b>8582</b> (2011)

Department of the Treasury Internal Revenue Service

# **Domestic Production Activities Deduction**

➤ Attach to your tax return. ➤ See separate instructions.

OMB No. 1545-1984

Attachment Sequence No. **143** 

Name(s) as shown on return

Identifying number

SI	MON BERNSTEIN			37	1-32-5211
	Note. Do not complete column (a), unless you have oil-related production activities.		(a)		(b)
	Enter amounts for all activities in column (b), including oil-related production activities.	Oil-rel	ated production activ	vities	All activities
1	Domestic production gross receipts (DPGR)	1	!	5.	4,414.
2	Allocable cost of goods sold. If you are using the small business simplified				
	overall method, skip lines 2 and 3	2			2,178. 2,357.
3	Enter deductions and losses allocable to DPGR (see instructions)	3		5.	2,357.
4	If you are using the small business simplified overall method, enter the amount				
	of cost of goods sold and other deductions or losses you ratably apportion to				
	DPGR. All others, skip line 4	4			
5	Add lines 2 through 4	5		5.	4,535.
6	Subtract line 5 from line 1	6		0.	<121.
7	Qualified production activities income from estates, trusts, and certain partnerships				
	and S corporations (see instructions)	7			1
8	Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to				
	line 10	8			<121.3
9	Amount allocated to beneficiaries of the estate or trust (see instructions)	9			
10a	Oil-related qualified production activities income. Estates and trusts, subtract				adjulging such glass or American Angles and American review only the other production of the other and and and and angles and a second of the other production of the other pr
	line 9, column (a), from line 8, column (a), all others, enter amount from line 8,				A CONTROL OF THE PARTY OF THE P
	column (a). If zero or less, enter -0- here	10a		0.	The second secon
b	Qualified production activities income. Estates and trusts, subtract line 9, column				
	(b), from line 8, column (b), all others, enter amount from line 8, column (b). If zero or				
	less, enter -0- here, skip lines 11 through 21, and enter -0- on line 22	10b			0.
11	Income limitation (see instructions):				
	• Individuals, estates, and trusts. Enter your adjusted gross income figured without the	ne	٦		
	domestic production activities deduction				
	All others. Enter your taxable income figured without the domestic production		}		
	activities deduction (tax-exempt organizations, see instructions)			11	
12	Enter the smaller of line 10b or line 11. If zero or less, enter -0- here, skip lines 13 through				
	and enter -0- on line 22			12	
13	Enter 9% of line 12			13	
14a	Enter the smaller of line 10a or line 12				
b				14b	
15	Subtract line 14b from line 13			15	
16	Form W-2 wages (see instructions)	,,,,,,,,,,	,	16	
17	Form W-2 wages from estates, trusts, and certain partnerships and S corporations (see	e			
	instructions)			17	
18	Add lines 16 and 17. Estates and trusts, go to line 19, all others, skip line 19 and go to			18	
19	Amount allocated to beneficiaries of the estate or trust (see instructions)			19	
20	Estates and trusts, subtract line 19 from line 18, all others, enter amount from line 18			20	
21	Form W-2 wage limitation. Enter 50% of line 20			21	
22	Enter the smaller of line 15 or line 21	.,.,,.,.	**********	22	0.
23	Domestic production activities deduction from cooperatives. Enter deduction from Form				
	1099-PATR, box 6			23	
24	Expanded affiliated group allocation (see instructions)			24	
25	Domestic production activities deduction. Combine lines 22 through 24 and enter the	ne resi	ult here and on	Sandaran (Pro-	
	Form 1040, line 35; Form 1120, line 25; or the applicable line of your return			25	0.
1 111	For Panerwork Reduction Act Notice see senarate instructions				Form <b>8903</b> (Rev. 12-2010)

Form **8903** (Rev. 12-2010)

# Qualified Production Activity Income Schedule

Name SIMON BERNSTEIN

Identifying Number: 371-32-5211

Description	Domestic		Directly A	locable		1040404		/cottoo		
Description	Production		Expenses	Ses		Api	interest Experise Anocarion Apportionment	t t	·	Qualified
	Gross Receipts (DPGR)	DPGR Ratio	Costs of Goods Sold	Other	Apportioned Expenses	Allocable Assets	Assets Ratio	Interest Expense	Total Qualified Expenses	Production Activity Income
BERNSTEIN FAMILY INVESTMENTS LILP	<b>D</b>		0	636.	0				0	þ
BERNSTEIN FAMILY INVESTMENTS LLLP	4,368,		2,160.	1,672.	06	1,124,048		297.	4,219.	149,
BERNSTEIN HOLDINGS LLC	.5	1	o	9	O				rs .	· n
BERNSTEIN HOLDINGS LLC	38.	.000263	21.	-/.I	0	13,191,	T	3.	185	0
ELIOT BERNSTEIN FAMILY TRUST	T	.00000	0	0	O				0	3.
JILL IANTONI FAMILY TRUST	0		1.	0	O				0.	0
TANTONI FAMILY TRUST	H		0	T	O				T	b
LISA S FRIEDSTEIN FAMILY TRUST	F		0	0	b				0	H
NON-OUALIFIED ACTIVITIES	138,823,	58I696.			D				0	
TOTAL	143,237.		2,182.	2,332.	90	1,137,239.		300.	4,263,	
						Щ				7
TOTAL FROM QUALIFIED ACTIVITIES	4,414.	030816	2,182.	2,332.	90	1,137,239.	7	300.	4,555	777>
	•									
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										•
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						-				
									E	
										٠

# Form **8948** (Rev. December 2011)

# **Preparer Explanation for Not Filing Electronically**

OMB No. 1545-2200

Department of the Treasury Internal Revenue Service ► Attach to taxpayer's Form 1040, 1040A, 1040EZ, or Form 1041.

Attachment Sequence No. **173** 

Name(s) on tax return
SIMON BERNSTEIN

Taxpayer's identifying number

371-32-5211

Three ou the follo	ut of four taxpayers now use IRS e-file. Go wing:	to <sub>www.irs.gov/efile</sub> for details on usin	g IRS e-file. The benefits of electronic filing include
	r refunds accurate returns	Secure transmissions     Easier filing method	E-payment options     Receipt acknowledged
Check the	e applicable box to indicate the reason this r	eturn is not being filed electronically. Do	not check more than one box.
1 X	Taxpayer chose to file this return on pape	or.	
2	The preparer received a waiver from the re	equirement to electronically file the tax re	turn.
	Waiver Reference Number	Approval Letter Date	·
3 🗆	The preparer is a member of a recognized	d religious group that is conscientiously o	pposed to filing electronically.
4	This return was rejected by IRS e-file and	the reject condition could not be resolve	d.
	Reject code:	Number of attempts to resolve reject:	
5 🗀	The preparer's e-file software package do attached to this return.	es not support Form	or Schedule
a L	The preparer is ineligible to file electronical and work abroad.  The preparer is ineligible to participate in II  Other: Describe below the circumstances t	RS e-file.	eign preparers without social security numbers who live s return electronically.
			• • • • • • • • • • • • • • • • • • • •

#### Opt-Out

My tax return preparer GERALD	R. LEWIN	·		has informed me that the tax return
preparer may be required to electronic	cally file my 2011 individual income tax return	FORM	1040	if the tax return preparer files it with
the IRS on my behalf (e.g., submits it	by mail to the IRS). I understand that electronic	: filing may	provide a	number of benefits to taxpayers, including
an acknowledgement that the IRS rec	eived the returns, a reduced chance of errors i	n processi	ng the retu	ims, and faster refunds. I do not want to have
my return electronically filed, and I ch	oose to file my return on paper forms. I will mai	or otherw	ise submit	my paper return to the IRS myself. My
preparer will not file or otherwise mail	or submit my paper return to the IRS.			
Taxpayer's signature				Date
raxpayer s signature	SIMON BERNSTEIN (DEC. (	19/12/	12)	Duto
Chaupala alamatura	DIMON DERMOTERN (DEC. (	)	12/	Date
Spouse's signature				

Form 1116	U.S. and Foreign So	urce Income Summar	у	
NAME			- · · · · · · · · · · · · · · · · · · ·	274 22 5244
SIMON BERNSTEIN				371-32-5211
INCOME TYPE		TOTAL	U.S.	FOREIGN PASSIVE
Compensation		TOTAL	0.0.	IMDDIVE
Dividends/Distributions		18,347.	18,347.	
Interest		58,450.	58,450.	
Capital Gains		20,647.	20,647.	
Business/Profession		101,771.	101,771.	
Rent/Royalty		36.	•	36
State/Local Refunds				
Partnership/S Corporation	SEE STATEMENT 40		<261.>	261
Trust/Estate	SEE STATEMENT 41		<1.>	1
Other Income	•	24,312.	24,312.	
Gross Income	• •	223,563.	223,265.	298.
Less:				
Section 911 Exclusion		23,647.	23,647.	
Capital Losses Capital Gains Tax Adjustment	•	23,047.	23,047.	
Total Income - Form 1116	-	199,916.	199,618.	298.
Total income - Form 1110	•		199,010.	2200
Deductions:				
Business/Profession Expenses		101,771.	101,771.	
Rent/Royalty Expenses		•		
Partnership/S Corporation Losses		28,562.	28,562.	
Trust/Estate Losses				
Capital Losses				
Non-capital Losses				
Individual Retirement Account				
Moving Expenses				
Self-employment Tax Deduction				
Self-employment Health Insurance				
Keogh Contributions				
Alimony				
Forfeited Interest				
Foreign Housing Deduction				
Other Adjustments				
Capital Gains Tax Adjustment Total Deductions	•	130,333.	130,333.	
	•	69,583.	69,285.	298
Adjusted Gross Income	•	0,500.		290
Less Itemized Deductions:		0.00	0.00	•
Specifically Allocated		862.	862.	
Home Mortgage Interest		18,656.	18,656.	
Other Interest		22. 49,047.	22. 48,982.	CE
Ratably Allocated  Total Adjustments to Adjusted Gross Inc.	oma .	68,587.	68,522.	65 65
Total Adjustments to Adjusted Gross Inco	יוופ -			
Taxable Income Before Exemptions		996.	763.	233

# Form 1116

# **Allocation of Itemized Deductions**

NAME

	Total	Itemized Deductions		Form 1116	
	ltemized Deductions	After Sec. 68 Reduction	Specifically U.S.	Specifically Foreign	Ratable
Taxes	44,707.				44,707.
Interest - Not Including Investment Interest	18,656.		18,656.		
Contributions	862.		862.		
Miscellaneous Deductions Subject to 2%	4,340.				4,340.
Other Miscellaneous Deductions - Not Including Gambling Losses					
Foreign Adjustment					Nac pales and market to all the same and the
Total Itemized Deductions Subject to Sec. 68	68,565.	Specification of the second state of the secon			
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental					
Investment Interest	22.		22.		
Casualty Losses					
Gambling Losses					
Foreign Adjustment					Markan real CIARATA College of the C
Total Itemized Deductions	68,587.				
Total Allowed on Schedule A			19,540.		49,047.

Form	11	16
		าก

## Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

### SIMON BERNSTEIN

371-32-5211

#### Foreign Income Category

# PASSIVE INCOME

Regu	ar	2006	2007	2008	2009	2010	2011
1.	Foreign tax paid/accrued				CTV V A 1 - 2 - Profession 1 - 1 - 1 - 2 - 2 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4		2.
2.	FTC carryback to 2011	A service of the serv			- Maria on Transport and American	A CONTRACTOR OF THE PROPERTY O	
	for amended returns	The state of the s		And the second of the second o			
3.	Reduction allocated to	izaga serian perek anasaha. Kasimatan ili aka Mada kata					
	excluded income	U.V. I de l'année de la company de la compan	The state of the s				
4.	Foreign tax available					And the second s	2.
5.	Maximum credit allowable	With the control of t	LUCASIA MENUNCIA PROPERTIES AND AND AND AND AND AND AND AND AND AND		2700 0000000000000000000000000000000000		0.
6.	Unused foreign tax ( + )						
	or excess of limit ( - )					<516.>	2.
7.	Foreign tax carryback	En	A portion of the following of the control of the co		A TOTAL COMMENT OF THE STATE OF	2.	2.
8.	Foreign tax carryforward						
9.	Less treaty adjustment	The first of the second of the				The second secon	
10.	Foreign tax or excess						
	limit remaining					<514.>	
	Total foreign taxes from all	available years to be ca	arried to next year	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,		

		2001	2002	2003	2004	2005
1.	Foreign tax paid/accrued					
2.	FTC carryback to 2011					7 to 1 miles and 1
	for amended returns			Van Viljan Amini V pajan Amini Pamini I kuma alika ali		
3.	Reduction allocated to	The second section of the second seco				
	excluded income		de la Marca de Constanto de la constanto de la constanto de la constanto de la constanto de la constanto de la	- 3 - 7 - 2 - 2 - 7 - 7 - 7 - 7 - 7 - 7 - 7		
4.	Foreign tax available					
5.	Maximum credit allowable					The second secon
6.	Unused foreign tax ( + )					
	or excess of limit ( - )					
7.	Foreign tax carryback	A STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF T				
8.	Foreign tax carryforward					
9.	Less treaty adjustment				The Article of Venezia and Seminor as a series of a Charles of the Article of the	
10.	Foreign tax or excess					
	limit remaining					

Form	1	1	1	ĥ

# Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

# SIMON BERNSTEIN

371-32-5211

#### Foreign Income Category

AMT		2006	2007	2008	2009	2010	2011
1.	Foreign tax paid/accrued				The second secon	A STATE OF THE STA	2.
2.	FTC carryback to 2011	A CONTROL OF THE CONT	The second secon		- produced and complete description of the control		
	for amended returns			C 2 is 2 years of the control of the	And the second s		
3.	Reduction allocated to		COMMANDE A PROPERTY OF THE PRO			The second secon	
	excluded income	We have a second product of the second secon		The state of the s	STATE OF THE PROPERTY OF THE P	An other part (pull) - An of the set requested in the following the set of th	
4,	Foreign tax available	A CAMPAGNA CONTRACTOR OF THE C	The second specific and the se	Print of the Committee	The Control of the Co	Control Contro	2.
5.	Maximum credit allowable	A FEAT WE AN AREA IN SECTION AND AREA IN SECTI	The control of the co	THE RESERVE OF THE PROPERTY OF	** Transport of the second of	And the second of the second o	0.
6.	Unused foreign tax ( + )						
	or excess of limit ( - )					124.	2.
7.	Foreign tax carryback	The state of the s	and of the first o	AT 1 Year 1946 Affairs As harder the property of the property	Was 1 being 1 street control of the second o		
8.	Foreign tax carryforward						
9.	Less treaty adjustment	The state of the s	The second secon	Committee of the Commit		The state of the s	
10.	Foreign tax or excess						
	limit remaining					124.	2.
	Total foreign taxes from all	available years to be ca	arried to next year	*****			126.

		2001	2002	2003	2004	2005
1.	Foreign tax paid/accrued					Company of the Compan
2.	FTC carryback to 2011			The second of th		more than the second of the se
	for amended returns	And a first hard on management and a second of the second	23 Card State of	The second secon		
3.	Reduction allocated to	The second secon	MANUAL CONTROL OF THE PROPERTY	The second secon		The second secon
	excluded income			The control of the co		The second of th
4.	Foreign tax available				Section 1 and 1 an	Charles of the control of the contro
5.	Maximum credit allowable			The second secon	(Figure before modes and very lot of a sur-figure benefity of a sur-figure benefity) and the sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefity of a sur-figure benefit o	
6.	Unused foreign tax ( + )					
	or excess of limit ( - )					
7.	Foreign tax carryback		Control of the State of the Sta	The second secon		
8.	Foreign tax carryforward					
9.	Less treaty adjustment			The first was despited and the control of the contr		Comment of Comment of
10.	Foreign tax or excess					
	limit remaining					

# **Worksheet for Alternative Tax NOL Carryover**

Name(s) as shown on return
SIMON BERNSTEIN

Social Security Number 371-32-5211

USE	YOUR 2011 FORM 1040 TO COMPLETE THIS WORKSHEET:		
1.	Enter as positive number your AMT NOL deduction.	A STATE OF THE STA	310,731.
2.	Enter alternative minimum taxable income without the NOL.	50,043.	The state of the s
3.	Enter as a positive number any net capital loss deduction on line 13 Form 1040.	3,000.	A service of the control of the cont
4.	Enter as a positive number any gain excluded on the sale or exchange of qualified small		
	business stock		Sign Production and the Control and the Control and American Ameri
5.	Enter any amount of any domestic production activities deduction		
6.	Enter adjustment for AMT depletion		Note, 1, 2 of 1 feet with a Control of Control of London on the Control
7.	Enter any adjustments to adjusted gross income.		And of the recorded for detecting a finding of the recorded and the record
8.	Enter any adjustments to itemized deductions from line 25 below.		The second secon
9.	Modified alternative taxable income. Combine lines 2 through 8 and enter the result	A second residence of the control of	
	(but not less than zero.)	Control Contro	53,043.
10.	Alternative taxable income limitation. Enter 90% of line 9.	Annual Control of Section (Control of Section Control 47,739.	
<b>1</b> 1.	AMT NOL carryover to 2012. Subtract line 10 from line 1 and enter the result	Part 4 couldn't Man author control Astall die sur der man der der medigen in unit gib 1 in an der man der der medigen zu der der medigen in der der medigen der der der der der der der der der der	
	(but not less than zero.)		262,992.
	USTMENTS TO ITEMIZED DEDUCTIONS (Individuals Only).		
12.	Modified adjusted gross income (from NOL Carryover Worksheet, line 13.)	The first is the first and the	72,583.
	USTMENT TO MEDICAL EXPENSES:		
13.	Enter medical expenses from NOL Carryover Worksheet, line 17.	0.	The second of th
14.	Multiply line 12 by 2.5% (.025).	1,815.	
15.	Enter the lesser of line 13 or line 14.	A CONTROL OF THE PARTY OF THE P	0.
ADJ	USTMENT TO QUALIFIED MORTGAGE INSURANCE PREMIUMS:		
16.	Qualified mortgage insurance premiums from Schedule A, line 13.		And the second of the second o
17.	Refigured qualified mortgage insurance premiums.		
18.	Subtract line 17 from line 16.		
	USTMENT TO CHARITABLE CONTRIBUTIONS:		
19.	Enter charitable contributions deduction from the AMT Contribution Worksheet.	862.	
20.	Refigure the charitable contributions deduction using line 12 above as your AGI.	862.	
21.	Subtract line 20 from line 19.	The first between 1 and the property of the pr	
ADJ	USTMENT TO CASUALTY AND THEFT LOSSES:		
22.	Enter casualty and theft losses from Form 4684, line 18.		
23.	Multiply line 12 by 10% (.10).		A principal transport of principal transport
24.	Subtract line 23 from line 22 (but not less than zero.)	Service of the servic	
TOT	AL ADJUSTMENT:		
25.	Combine lines 15, 18, 21, and 24. Enter the amount from this line on line 8 above.	A Contract of the Contract of	

SIMON BERNSTEIN  Year  Carried From  Amount Available  From  Carried From  Amount Available  From  Carried From  C	Amount									
Amount Available for Carryover 657,610.	Amount								Social Se 371-	ul Security Number 32-5211
• Programme Control of the Control o	Used in 2010	Amount Used in 2011	Amount Used in							
	346,879.	47,739.								
The control of the co		The second secon			A CONTRACT OF THE CONTRACT OF	A control of the cont				per la como de la como
Section of the control of the contro										
Section of the control of the contro									The second secon	
The second secon										
And the state of t									Bergin of the control	Property of the property of th
_	Annual Control	The state of the s	A CONTROL OF THE CONT	THE CONTROL OF THE CO		ment of the control o	ANALY STATE OF THE	months of the control	STATE OF THE STATE	
	Property of the control of the contr	A control of the cont	A CANADA A C			************	The second secon			
	The Court of the C	The control of the co	The state of the s	Total Control			The second secon			
				The state of the s			The second secon	1	Service of Service of	
	A CONTRACTOR OF THE CONTRACTOR			A CONTROL OF THE CONT	The second secon	A CONTRACTOR OF THE CONTRACTOR	A CONTROL OF THE CONT	ACT OF THE STATE O	The state of the s	Service Control of Con
			Services of the services of th		2		Section   Sect			With Part of the Control of the Cont
								Control of the contro	The second secon	TO THE DESIGNATION OF THE PROPERTY OF THE PROP
				And the second s	A control of the cont					
	The second of th		The second secon	The state of the s	Experience of the control of the con	The second secon	The second secon	The second secon	The College of the Co	
A CONTRACTOR OF THE PARTY OF TH	010 210	77 720	A CONTROL OF THE CONT		A CONTROL OF THE CONT	And the second of the second o	The second secon	Service of the Control of the Contro	www.cas.cas.cas.cas.cas.cas.cas.cas.cas.cas	
Totals 037, 010.	6/0	610								
Less total amounts used		394,618.								
Less total amounts expired Remaining carryover		0. 262,992.								
116721 05-01-11		-111								

FORM 1040	PENSIONS AND ANNUITIES		STATEMENT	1
JOHN HANCOCK LIFE INS CO				
AMOUNT RECEIVED THIS YEAR NONTAXABLE AMOUNT CAPITAL GAIN DISTRIBUTION		3,599.		
	-		3,59	99.
TOTAL INCLUDED IN FORM 10	40, LINE 16B	_	3,5	99.

FORM 1040 SOCIAL SECURITY BENEFITS WORKSHEET	STATEMENT 2
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 2011  D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPORT ALL OF 2011	OUSE
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	24,368.
2. ENTER ONE HALF OF LINE 1	4,
15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NO' INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB 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	86,674.
LINE NEXT TO LINE 36	0. 86,674.
\$-0- IF YOU CHECKED BOX C	E
[X] YES. SUBTRACT LINE 8 FROM LINE 7	61,674.
\$-0- IF YOU CHECKED BOX C	52,674. 9,000. 4,500. 4,500. 3R -0- 44,773. 49,273.
18. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE * ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B	20,713.

FORM 1040	TAX-EXEMPT INTER	EST	STATEMENT	3
NAME OF PAYER			TRUOMA	
FROM K-1 - BERNSTEIN FROM K-1 - ELIOT BEN FROM K-1 - ELIOT BEN FROM K-1 - JILL IAN FROM K-1 - JILL IAN FROM K-1 - LISA S F	RNSTEIN FAMILY TRUST RNSTEIN FAMILY TRUST FONI FAMILY TRUST		17,01 8,50 8	
TOTAL TO FORM 1040,	LINE 8B		25,62	20.
FORM 1040	QUALIFIED DIVID	ENDS	STATEMENT	4
NAME OF PAYER		ORDINARY DIVIDENDS	QUALIFIEI DIVIDENDS	
LLLP FROM K-1 - BERNSTEI	RNSTEIN FAMILY TRUST FONI FAMILY TRUST	18,152. 184. 3. 4.	13,1 <u>!</u>	55. 29. 3. 2.
TOTAL INCLUDED IN F	ORM 1040, LINE 9B		13,29	92.
FORM 1040	FEDERAL INCOME TAX	WITHHELD	STATEMENT	5
T S DESCRIPTION			AMOUNT	
T JOHN HANCOCK LIFE	INS CO		3	60.
TOTAL TO FORM 1040,	TIME 60		3.	60.

SCHEDULE A MISC	CELLANEOUS DI	EDUCTIONS ST	JBJECT TO F	LOOR	STATEMENT	6
DESCRIPTION					AMOUNT	
FROM K-1 - BERNSTEIN F		TMENTS LLLP		_	3!	54.
FROM K-1 - BERNSTEIN H FROM K-1 - TT/ SIMON I		IRREV TR			5,3	3. 75.
TOTAL TO SCHEDULE A, I	LINE 23			=	5,7	32.
SCHEDULE A	POINTS NOT	REPORTED O	N FORM 1098	3	STATEMENT	7
DESCRIPTION		DATE RE- FINANCED	TOTAL POINTS	AMORT. PERIOD /MOS.	AMORTIZAT	
WELLS FARGO		01/01/01	26,75	59. 180	1,7	84.
TOTAL TO SCHEDULE A, I	LINE 12				1,7	84.
TOTAL TO SCHEDULE A, I		H CONTRIBUT	ions		1,7	84.
		H CONTRIBUT	A	MOUNT LIMIT		8
SCHEDULE A	CAS	H CONTRIBUT	A		STATEMENT	8
SCHEDULE A  DESCRIPTION	CAS	H CONTRIBUT	A	LIMIT	STATEMENT	8
SCHEDULE A  DESCRIPTION  FROM K-1 - LIC HOLDING	CASI GS INC	H CONTRIBUT	A	862.	STATEMENT  AMOUNT 30% LIMIT	8
SCHEDULE A  DESCRIPTION  FROM K-1 - LIC HOLDING SUBTOTALS	CASI GS INC LINE 16	H CONTRIBUT	A1 50%	862.	STATEMENT  AMOUNT 30% LIMIT	8
SCHEDULE A  DESCRIPTION  FROM K-1 - LIC HOLDING SUBTOTALS  TOTAL TO SCHEDULE A, I	CASI GS INC LINE 16		A1 50%	862.	STATEMENT  AMOUNT 30% LIMIT	8
SCHEDULE A  DESCRIPTION  FROM K-1 - LIC HOLDING SUBTOTALS  TOTAL TO SCHEDULE A, I	CASI GS INC LINE 16	STMENT INTE	Al 50%	862.	STATEMENT  AMOUNT 30% LIMIT  8  STATEMENT  AMOUNT	8

SCHEDULE A	MEDICAL AND DENTAL EXPENSES	STATEMENT 10
DESCRIPTION		AMOUNT
MEDICARE PREMIUMS WITH	HHELD	4,724.
TOTAL TO SCHEDULE A, I	LINE 1	4,724.

SCH	EDULE A GENERAL SALES TAX DEDUCTION WORKSHEET	STATEMENT	11
	ENTER YOUR STATE GENERAL SALES TAXES FROM THE APPLICABLE TABLE. FLORIDA	8	356.
	IF, FOR ALL OF 2011, YOU LIVED ONLY IN CONNECTICUT, THE DISTRICT OF COLUMBIA, INDIANA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, NEW JERSEY, RHODE ISLAND, OR WEST VIRGINIA, SKIP LINES 2		
	THROUGH 5, ENTER -0- ON LINE 6, AND GO TO LINE 7. OTHERWISE, GO TO LINE 2.		
2	DID YOU LIVE IN ALASKA, ARIZONA, ARKANSAS, CALIFORNIA (LOS ANGELES COUNTY ONLY), COLORADO, GEORGIA, ILLINOIS, LOUISIANA, MISSOURI, NEW YORK STATE, NORTH CAROLINA,		
	SOUTH CAROLINA, TENNESSEE, UTAH, OR VIRGINIA IN 2011?		
	IF NO, ENTER -0  IF YES, ENTER YOUR LOCAL GENERAL SALES  TAXES FROM THE APPLICABLE TABLE.  0.		
3	DID YOUR LOCALITY IMPOSE A LOCAL GENERAL SALES TAX IN 2011? RESIDENTS OF CALIFORNIA AND NEVADA SEE INSTRUCTIONS. IF NO, SKIP LINES 3 THROUGH 5, ENTER		
	-0- ON LINE 6 AND GO TO LINE 7. IF YES, ENTER YOUR LOCAL GENERAL SALES TAX RATE, BUT OMIT PERCENTAGES. BOCA RATON		
4	DID YOU ENTER -0- ON LINE 2 ABOVE? IF NO, SKIP LINES 4 AND 5 AND GO TO LINE 6. IF YES, ENTER YOUR STATE GENERAL SALES		
5	TAX RATE, BUT OMIT PERCENTAGES. 6.0000 DIVIDE LINE 3 BY LINE 4. ENTER THE RESULT AS		
6	A DECIMAL (ROUNDED TO AT LEAST THREE PLACES)0000 DID YOU ENTER -0- ON LINE 2 ABOVE? IF NO, MULTIPLY LINE 2 BY LINE 3.		
	IF YES, MULTIPLY LINE 1 BY LINE 5.		0 .
6 <b>A</b>	ADD LINE 1 AND LINE 6.		356
	PART-YEAR DAYS RATE. MULTIPLY LINE 6A BY LINE 6B.	1.000	000 856
7	ENTER YOUR GENERAL SALES TAXES PAID ON SPECIFIED ITEMS, IF ANY.		
8	DEDUCTION FOR GENERAL SALES TAXES. ADD LINES 6C AND 7. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 5 AND CHECK BOX "B" ON THAT LINE.		856

			<del></del>
SCHEDULE B	TAX-EXEMPT INTE	REST	STATEMENT 1
NAME OF PAYER			AMOUNT
FROM K-1 - JILL IA	ERNSTEIN FAMILY TRUST NTONI FAMILY TRUST FRIEDSTEIN FAMILY TRUST		2 1 2
TOTAL TAX-EXEMPT I	NTEREST TO SCHEDULE B, LINE	1	5
SCHEDULE D	NET LONG-TERM GAIN OR LO 4797, 2439, 6252, 4684,		STATEMENT 1
DESCRIPTION OF PRO	PERTY	GAIN OR LOSS	28% GAIN
FORM 4797	<del></del>	10.	
TOTAL TO SCHEDULE	D, PART II, LINE 11	10.	
SCHEDULE D	NET SHORT-TERM GAIN C ARTNERSHIPS, S CORPORATIONS		STATEMENT 1
DESCRIPTION OF ACT	IVITY		GAIN OR LOS
BERNSTEIN FAMILY I BERNSTEIN HOLDINGS ELIOT BERNSTEIN FA JILL IANTONI FAMIL	LLC MILY TRUST		<1,134 <11 <1 <1
TOTAL TO SCHEDULE	D, PART I, LINE 5		<1,147
SCHEDULE D	NET LONG-TERM GAIN OF ARTNERSHIPS, S CORPORATIONS		STATEMENT 1
DESCRIPTION OF ACT	IVITY	GAIN OR LOS	S 28% GAIN
BERNSTEIN FAMILY I BERNSTEIN HOLDINGS ELIOT BERNSTEIN FA JILL IANTONI FAMIL LISA S FRIEDSTEIN	LLC MILY TRUST Y TRUST	20,425 200 4 4	•
TOTAL TO SCHEDULE	D, PART II, LINE 12	20,637	•

371-32-5211

2. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT. 3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0	SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 16
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15	2. ENTER 3. COMBIN	THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT LINES 1 AND 2. IF ZERO OR LESS, ENTER $-0-$	JNT. 3,000. 3,996.
7. ADD LINES 4 AND 6	6. ENTER	THE GAIN, IF ANY, FROM SCHEDULE D,	NT . 143,495.
SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0	7. ADD LI	NES 4 AND 6	3,000.
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7	•		140,495.
SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0 101,811.  SCHEDULE E INCOME OR (LOSS) FROM PARTNERSHIPS AND S CORPS STATEMENT 17  NAME  ANY NOT X EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SEC. 179 NONPASSIVE ID NO. RISK FRN CODE LOSS INCOME LOSS DEDUCTION INCOME  P 0.  LIC HOLDINGS INC 20-5290314 S 28,552.  BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 10. BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 0. BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 0. BERNSTEIN HOLDINGS LLC 32-0234597 P 0. BERNSTEIN HOLDINGS LLC 32-0234597 P 0.	10. ENTER LINE 7 11. SUBTRA ENTER 12. ADD LI	THE GAIN, IF ANY, FROM SCHEDULE D,  CT LINE 5 FROM LINE 4. IF ZERO OR LESS,  -0	UNT. 101,811.
NAME  ANY NOT X  EMPLOYER AT IF PASSIVE PASSIVE NONPASSIVE SEC. 179 NONPASSIVE ID NO. RISK FRN CODE LOSS INCOME LOSS DEDUCTION INCOME  P 0.  LIC HOLDINGS INC 20-5290314 S  BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 10.  BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 0.  BERNSTEIN HOLDINGS LLC 32-0234597 P 0.  BERNSTEIN HOLDINGS LLC 32-0234597 P 0.			101,811.
EMPLOYER AT IF PASSIVE DEDUCTION INCOME  ID NO. RISK FRN CODE LOSS INCOME LOSS DEDUCTION INCOME  P O.  LIC HOLDINGS INC 20-5290314 S 28,552.  BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 10.  BERNSTEIN FAMILY INVESTMENTS LLLP 26-2124343 P 0.  BERNSTEIN HOLDINGS LLC 32-0234597 P 0.  BERNSTEIN HOLDINGS LLC 32-0234597 P 0.	NAME		
LIC HOLDINGS INC  20-5290314		AT IF PASSIVE PASSIVE NONPASSIVE SEC.	
TOTALS TO SCH. E, LN. 29 10. 28,552.	20-5290314 BERNSTEIN 26-2124343 BERNSTEIN 26-2124343 BERNSTEIN 32-0234597 BERNSTEIN	GS INC  S 28,552.  FAMILY INVESTMENTS LLLP P 10.  FAMILY INVESTMENTS LLLP P 0.  HOLDINGS LLC P 0.  HOLDINGS LLC	
	TOTALS TO	SCH. E, LN. 29 10. 28,552.	

371-32-5211

SCHEDULE E	INCOME OR	(LOSS) FROM	ESTATES AND	TRUSTS ST	ATEMENT 18
NAME	EMPLOYER ID NO.	PASSIVE LOSS	PASSIVE INCOME	NONPASSIVE LOSS	NONPASSIVE INCOME
TT/ SIMON L BERNSTEIN IRREV TR	51-6600239	0.			
ELIOT BERNSTEIN FAMILY TRUST	65-6477114	0.			
ELIOT BERNSTEIN FAMILY TRUST JILL IANTONI	65-6477114 65-6477115	0 .	•		
FAMILY TRUST JILL IANTONI FAMILY TRUST	65-6477115	0.			
LISA S FRIEDSTEIN FAMILY TRUST	65-6477116	. 0.			
LISA S FRIEDSTEIN FAMILY TRUST	65-6477116	0	•		
TOTALS TO SCHEDULE	E, LINE 34	0 .	•		

FORM 1116 ;	SUMMARY OF FORE	IGN TAXES	PAID OR	ACCRUED	STATEMENT	19
PASSIVE INCOME						
NAME OF COUNTRY IMPO	OSING TAX					
DATE PAID ACCRUED	AMT/FOREIGN — CURRENCY D	IVIDENDS			LARS OTHER	<u> </u>
OTHER COUNTRIES	0.					1.
VARIOUS						
VARIOUS	0.					1.
						2.
TOTAL TO FORM 1116,	PART II, LINE	8				2.
PRIOR YEAR TAXES PA		NT YEAR: EIGN AMT	CONV. R	ATE U.S.	AMT	
2010 2009 2008 2007 2006						
TOTAL PRIOR YEAR TA	XES PAID IN THE	CURRENT	YEAR			
FORM 6251	PAS	SSIVE ACTI	VITIES		STATEMENT	2
		NE	T INCOME	(LOSS)		
NAME OF ACTIVITY	FORM	AMT	···	REGULAR	ADJUSTME	T
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP	FORM 4797 SCH E		10.	10	 ). ).>	
TOTAL TO FORM 6251,	LINE 19					

	IIMUM TAX FOREIGN YOVER/CARRYBACK	TAX CREDIT	STATEMENT	21
PASSIVE INCOME				
YEAR OF CREDIT	TOTAL FOREIGN TAXES PAID	FOREIGN TAX CR CLAIMED	BALANCE AVAILABLE	
2010 ALT. MIN. TAX CREDIT 2009 ALT. MIN. TAX CREDIT 2008 ALT. MIN. TAX CREDIT 2007 ALT. MIN. TAX CREDIT 2006 ALT. MIN. TAX CREDIT 2005 ALT. MIN. TAX CREDIT 2004 ALT. MIN. TAX CREDIT 2003 ALT. MIN. TAX CREDIT 2002 ALT. MIN. TAX CREDIT 2001 ALT. MIN. TAX CREDIT 2001 ALT. MIN. TAX CREDIT 2001 ALT. MIN. TAX CREDIT FOREIGN TAX CR CARRYBACK TO 2011	124. 222. 886. 911. 1,006. 105. 273. 40. 0.	0. 0. 886. 911. 1,006. 105. 0. 40. 0.	1	24. 0. 0. 0. 0. 0. 0.
TOTAL TO FORM 1116 (AMT), PART II	II, LINE 10		1	24.
FORM 4952 INVESTM	MENT INTEREST EXP	ENSE	STATEMENT	22
DESCRIPTION		CURRENT	CARRYOVER	
FROM K-1 - BERNSTEIN FAMILY INVES	TMENTS LLLP	22.		·
TOTALS TO FORM 4952, LINES 1 AND	2	22.		
FORM 4952 INCOME FROM E	PROPERTY HELD FOR	INVESTMENT	STATEMENT	23
DESCRIPTION			AMOUNT	
INTEREST INCOME			58,4	50.
DIVIDEND INCOME BERNSTEIN FAMILY INVESTMENTS LLLE	P - ROYALTY		18,3	

FORM 4952	IN	VESTMENT EXP	ENSES	STA	ATEMENT	24
DESCRIPTION					AMOUNT	
SCHEDULE A DEDUCTIONS	5				4,34	0.
TOTAL TO FORM 4952, I	INE 5				4,34	0.
FORM 4952 INVEST	MENT INTERES	T EXPENSE DE	DUCTION SUMM	IARY STA	ATEMENT	25
NAME	FORM OR SCHEDULE	INVESTMENT INTEREST EXPENSE	INVESTMENT INTEREST EXPENSE C/O	DISALLOWED INVESTMENT INTEREST EXPENSE	ALLOWED INVESTME INTERES EXPENSE	NT T
FROM K-1 - BERNSTEIN	F SCH A	22.	0.	0.	2	2.
TOTALS		22.	0.	0.	2	2.
FORM 4952AMT	INVESTM	ENT INTEREST	EXPENSE	ST	ATEMENT	26 —
FORM 4952AMT DESCRIPTION	INVESTM	ENT INTEREST	CURRI		ARRYOVER	26 ——
						26 
DESCRIPTION	FAMILY INVES	TMENTS LLLP		ENT C		26 
DESCRIPTION FROM K-1 - BERNSTEIN	FAMILY INVES	TMENTS LLLP		22.		
DESCRIPTION FROM K-1 - BERNSTEIN	FAMILY INVES	TMENTS LLLP ND 2	CURRI	22. 22.		26
DESCRIPTION FROM K-1 - BERNSTEIN TOTALS TO FORM 4952AM	FAMILY INVES MT, LINES 1 A	TMENTS LLLP ND 2 E ACTIVITIES	CURRI  CURRI  WORKSHEET	22. 22.	ARRYOVER ATEMENT	27
DESCRIPTION  FROM K-1 - BERNSTEIN  TOTALS TO FORM 4952AM	FAMILY INVES MT, LINES 1 A OTHER PASSIV	TMENTS LLLP ND 2 E ACTIVITIES	CURRI	22. 22.	ARRYOVER ATEMENT	27
DESCRIPTION  FROM K-1 - BERNSTEIN  TOTALS TO FORM 4952AM  FORM 8582  NAME OF ACTIVITY  BERNSTEIN FAMILY INVESTMENTS LLLP	FAMILY INVES  OTHER PASSIV	TMENTS LLLP  ND 2  E ACTIVITIES  YEAR	CURRI  CURRI  CURRI  PRIOR YEAR  UNALLOWED  LOSS	22. 22. COVERALL GAIN	ARRYOVER ATEMENT AIN OR LC	27 DSS
DESCRIPTION  FROM K-1 - BERNSTEIN  TOTALS TO FORM 4952AN  FORM 8582  NAME OF ACTIVITY  BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP	FAMILY INVES  MT, LINES 1 A  OTHER PASSIV  CURRENT  NET INCOME	TMENTS LLLP  ND 2  E ACTIVITIES  YEAR  NET LOSS	CURRI  CURRI  CURRI  PRIOR YEAR  UNALLOWED  LOSS	22. 22. C 3 ST. OVERALL G. GAIN	ATEMENT AIN OR LO	27 DSS
DESCRIPTION  FROM K-1 - BERNSTEIN  TOTALS TO FORM 4952AM  FORM 8582  NAME OF ACTIVITY  BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC	FAMILY INVES  MT, LINES 1 A  OTHER PASSIV  CURRENT  NET INCOME	TMENTS LLLP  ND 2  E ACTIVITIES  YEAR  NET LOSS  <1,601.>	PRIOR YEAR UNALLOWED LOSS  <6,064.3	22. 22. COVERALL G. GAIN	ATEMENT AIN OR LO LOSS <7,65 <6,06	27 DSS
DESCRIPTION  FROM K-1 - BERNSTEIN  TOTALS TO FORM 4952AM  FORM 8582  NAME OF ACTIVITY  BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC BERNSTEIN HOLDINGS LLC	FAMILY INVES  OTHER PASSIV  CURRENT  NET INCOME  11.  0.	TMENTS LLLP  ND 2  E ACTIVITIES  YEAR  NET LOSS  <1,601.>	PRIOR YEAR UNALLOWED LOSS  <6,064.3	22. 22. COVERALL G. GAIN	ARRYOVER  ATEMENT  LOSS  <7,65 <6,06	27 DSS 54.:
DESCRIPTION  FROM K-1 - BERNSTEIN  TOTALS TO FORM 4952AM  FORM 8582  NAME OF ACTIVITY  BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC BERNSTEIN HOLDINGS	FAMILY INVES  AT, LINES 1 A  OTHER PASSIV  CURRENT  NET INCOME  11.  0.  0.	TMENTS LLLP  ND 2  E ACTIVITIES  YEAR  NET LOSS  <1,601.> 0. <16.>	CURRE  CURRE  PRIOR YEAR  UNALLOWED  LOSS  <6,064.3  <52.3	22. 22. COVERALL G. GAIN	ARRYOVER  ATEMENT  AIN OR LO  LOSS  <7,65  <6,06  <6	27 DSS 54.3

FORM 8582	ALLOCAT	ON OF UNA	LLOWED LOSS	ES - WORKSH	EET 5 STAT	TEMENT 28
NAME OF ACTIVIT	Y		FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
BERNSTEIN FAMIL	- Y INVESTMEN	TOTO T.T.T.D	SCH E	7,654.	.552555588	7,654.
BERNSTEIN FAMIL BERNSTEIN FAMIL			SCH E	6,064.	.437770719	6,064
BERNSTEIN HOLDI			SCH E	68.	.004909038	68
BERNSTEIN HOLDI			SCH E FORM 4797	57. 9.	.004114929	57 9
JILL IANTONI FA	MILY TRUST		FURM 4/9/	<b></b>	.000049720	<i>3</i> ·
POTALS				13,852.	1.00000000	13,852
FORM 8582		ALLOWED L	OSSES - WOF	RKSHEET 6	STA'	rement 29
			FORM			
			OR		UNALLOWED	ALLOWED
NAME OF ACTIVIT	Ϋ́		SCHEDULE	LOSS	LOSS	LOSS
BERNSTEIN HOLDI	 NGS LLC		SCH E	68.	68.	
BERNSTEIN HOLDI			SCH E	57.	57.	
JILL IANTONI FA	MILY TRUST		FORM 4797	7 9.	9.	
<b>TOTALS</b>				134.	134.	
						<del></del>
GROUP		· · · · · · · ·	LOSSES REI S OR SCHEDT OVERALL LOSS	PORTED ON 2 JLES - WORKS RATIO		TEMENT 30  ALLOWED  LOSS
1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	1.	11.				
INVESTMENTS	7,664.		7,664.	1.000000000	7,654.	10
			7,664.	1.000000000	7,654.	10
2 BERNSTEIN FAMILY INVESTMENTS 2 BERNSTEIN	1.		1.	.000164908	1.	
FAMILY INVESTMENTS	6,063.		6,063.	.999835092	6,063.	
			6,064.	1.000000000	6,064.	
			62		CATEMENT(S) <sup>C</sup>	IID-00204

FORM 8582	SUI	MMARY OF	PASSIVE ACT	IVITIES	STA	TEMENT	31
R R E A NAME	FORM OR SCHEDULE	GAIN/LOS	PRIOR S YEAR C/O	NET GAIN/LOSS	UNALLOWEI LOSS	) ALLOW LOSS	
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY		11			7.654		10
INVESTMENTS LLLP BERNSTEIN FAMILY INVESTMENTS LLLP		•	-	<pre>&gt; &lt;7,664.3 &gt; &lt;1.3</pre>			10
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN			·	> <6,063.	-		
HOLDINGS LLC BERNSTEIN HOLDINGS LLC	SCH E	<16 0	·> <52.	<68.3 <57.3			
JILL IANTONI FAMILY TRUST	FORM 479			> <9.:			
TOTALS		<1,606	.> <12,246.	> <13,852.	> 13.852	•	10
PRIOR YEAR CARRYOV	ERS ALLOW	ED DUE TO	CURRENT YE	AR NET ACTI	VITY INCOM	ME	1
TOTAL TO FORM 8582	, LINE 16						11
FORM 8582-CR	От	UTD DACCT	VE ACTIVITY	CPRDITE	STA	ATEMENT	
IOM 0302-CK			RKSHEET 4	CREDITO	~	AT EMENT	3
NAME OF ACTIVITY		FROM		PRIOR Y	EAR WED	TOTAL	3
NAME OF ACTIVITY	CA	FROM FORM RRYOVER	RKSHEET 4 CURRENT	PRIOR Y	EAR WED IS (	TOTAL	1
NAME OF ACTIVITY BERNSTEIN FAMILY	CA CA	FROM FORM	RKSHEET 4 CURRENT	PRIOR Y	EAR WED IS (	TOTAL	

FORM 8582-CR	ALLOCATION OF UNA	ALLOWED CRED	OITS - WORKSH	EET 8 STA	ATEMENT 33
NAME OF ACTIVITY		FORM REPORTED ON	CREDITS	RATIO	UNALLOWED CREDITS
	INVESTMENTS LLLP	LINE 33 FORM 3800, LINE 33	1. 4.	.166666667	1.
BERNSTEIN FAMILY TOTALS	INVESTMENTS LLLP	FORM 3800, LINE 33	1. 6. 1	.166666666	1.
IOIADO					
FORM 8582-CR	ALLOWE	D CREDITS -	WORKSHEET 9	STA	ATEMENT 34
NAME OF ACTIVITY		FORM REPORTED ON	CREDITS	UNALLOWED CREDITS	ALLOWED CREDITS
BERNSTEIN FAMILY	INVESTMENTS LLLP	FORM 3800, LINE 33 FORM 3800,	1.	1.	0.
BERNSTEIN FAMILY	INVESTMENTS LLLP	LINE 33	4.	4. 1.	0.
TOTALS			6.	6.	0.
FORM 8582	ALTERI OTHER PASSIVI	NATIVE MINIME ACTIVITIES			ATEMENT 35
	CURREN	r year	PRIOR YEAR UNALLOWED	OVERALL G	AIN OR LOSS
NAME OF ACTIVITY	NET INCOME	NET LOSS	LOSS	GAIN	LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY	11.	<307.>	<4,855.>	<b>&gt;</b>	<5,151.
INVESTMENTS LLLP		0.	<4,853.>		<4,853.
		<3.>	<42.>	>	<45.
BERNSTEIN HOLDING LLC BERNSTEIN HOLDING LLC	0. GS 0.	0.	<35.>	>	<35.

	ALLOCAT:	ALTERNAT ON OF UNAL	IVE MINIMU LOWED LOSS			ATEMENT	36
					<u> </u>		
			FORM OR			UNALLOWE	תי
NAME OF ACTIVIT	У	s	CHEDULE	LOSS	RATIO	LOSS	יבו
BERNSTEIN FAMIL	_ v	_				<del></del>	
INVESTMENTS LLL		,	CII II	5,151.	.510809203	5,15	1.
BERNSTEIN FAMIL		S	CH E				
INVESTMENTS LLL		c	CH E	4,853. 45.	.481257438 .004462515	4,85	) J .   5 .
BERNSTEIN HOLDI: BERNSTEIN HOLDI:			CH E	35.	.003470844		35.
TOTALS			<u></u>	10,084.	1.000000000	10,08	4.
FORM 8582			IVE MINIMU		ST	ATEMENT	37
		ALLOWED LC	SSES - WOF	KSHEET 6			
			FORM				
			OR	TOGG	UNALLOWED LOSS	ALLOWED LOSS	)
NAME OF ACTIVIT	<u>Y</u>		SCHEDULE	LOSS			
BERNSTEIN HOLDI BERNSTEIN HOLDI			SCH E SCH E	45 35			
TOTALS				80	. 80.	-	
·							
FORM 8582			TIVE MINIMU			ATEMENT	38
FORM 8582		ALTERNATITIES WITH ERENT FORMS	LOSSES REI	PORTED ON	2 OR	ATEMENT	38
FORM 8582	MORE DIFF	ITIES WITH ERENT FORMS	LOSSES REI	PORTED ON	2 OR	ATEMENT	38
GROUP	MORE DIFF	ITIES WITH	LOSSES REI	PORTED ON	2 OR		ED
GROUP NO. NAME BERNSTEIN	MORE DIFF	ITIES WITH ERENT FORMS FORM OR SCHEDULE	LOSSES REI S OR SCHEDU OVERALL	PORTED ON S JLES - WORI	2 OR KSHEET 7 UNALLOWED	ALLOWE	ED
GROUP NO. NAME  1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN	MORE DIFF	ITIES WITH ERENT FORMS FORM OR SCHEDULE	LOSSES REI S OR SCHEDU OVERALL	PORTED ON S JLES - WORI	2 OR KSHEET 7 UNALLOWED	ALLOWE	ED
GROUP NO. NAME  1 BERNSTEIN FAMILY INVESTMENTS	MORE DIFF	ITIES WITH ERENT FORMS  FORM OR SCHEDULE NET GAIN	LOSSES REI ON SCHEDU  OVERALL LOSS	PORTED ON S JLES - WORI	2 OR KSHEET 7  UNALLOWED LOSS	ALLOWE LOSS	ED S
GROUP NO. NAME  1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	FORM OR SCHEDULE NET LOSS	ITIES WITH ERENT FORMS  FORM OR SCHEDULE NET GAIN	OVERALL LOSS	PORTED ON DILES - WORLD	2 OR KSHEET 7  UNALLOWED LOSS	ALLOWE LOSS	ED S
GROUP NO. NAME  1 BERNSTEIN FAMILY INVESTMENTS 1 BERNSTEIN FAMILY	FORM OR SCHEDULE NET LOSS	ITIES WITH ERENT FORMS  FORM OR SCHEDULE NET GAIN	OVERALL LOSS	PORTED ON DILES - WORLD RATIO	2 OR KSHEET 7  UNALLOWED LOSS	ALLOWE LOSS	ED

2 BERNSTEIN FAMILY INVESTMENTS

4,852.

 4,852.
 .999793942
 4,852.

 4,853.
 1.000000000
 4,853.

FORM 8582AMT	SUMMAR	Y OF PASSI	VE ACTIVIT	IES - AMT	STAT	EMENT 39
R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
BERNSTEIN FAMILY INVESTMENTS LLLP		11.	<1.>	10.		
BERNSTEIN FAMILY INVESTMENTS LLLP BERNSTEIN FAMILY			<4,854.>	<5,161.>	5,151.	10.
INVESTMENTS LLLP BERNSTEIN FAMILY		0.	<1.>	<1.> <4,852.>	·	
INVESTMENTS LLLP BERNSTEIN HOLDINGS LLC	SCH E	<3.>	-	·		
BERNSTEIN HOLDINGS LLC	SCH E	0.	<35.>	<35.>	35.	
TOTALS		<299.>	<9,785.>	<10,084.>	10,084.	10.
PRIOR YEAR CARRYOV	ERS ALLOWI	ED DUE TO	URRENT YEA	R NET ACTIV	VITY INCOME	1.
TOTAL TO FORM 8582.	AMT, LINE	16				11.
FORM 1116	•	FOREIGN SO		ME SUMMARY ATION INCOM		PEMENT 40
DESCRIPTION					ž	TUUOMA
BERNSTEIN HOLDINGS BERNSTEIN FAMILY I		5 LLLP				18. 243.

<u> </u>	<del></del>		F. 12. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
FORM 1116	U.S. AND FOREIGN SOURCE INCOM FOREIGN TRUST/ESTATE		STATEMENT	41
DESCRIPTION			AMOUNT	
JILL IANTONI	FAMILY TRUST			1.
TOTAL FOREIGN	TRUST/ESTATE INCOME			1.
FORM 1116	U.S. AND FOREIGN SOURCE INCOM TOTAL PARTNERSHIP/S-CORPORATION		STATEMENT	42
DESCRIPTION		INCOME	LOSS	·······
DEDCKELLECT		INCOME	поээ	
LIC HOLDINGS BERNSTEIN FAM		INCOME		52.: 10.: