

# 2009 TAX RETURN FILING INSTRUCTIONS

U.S. INDIVIDUAL INCOME TAX RETURN

FOR THE YEAR ENDING  
DECEMBER 31, 2009

Prepared for	CHRISTOPHER J & MARY P CHRISTIE [REDACTED] MENDHAM, NJ 07945
Prepared by	HAL MODEL CPA PA
Amount of tax	Total tax \$ 147,118 Less: payments and credits \$ 160,062 Plus: interest and penalties \$ 0 OVERPAYMENT \$ 12,944
Overpayment	Miscellaneous Donations \$ 0 Credited to your estimated tax \$ 12,944 Refunded to you \$ 0
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING AND THE PRACTITIONER PIN PROGRAM HAS BEEN ELECTED. TO HAVE IT TRANSMITTED ELECTRONICALLY, SIGN AND RETURN FORM 8879 TO OUR OFFICE. WE WILL THEN SUBMIT YOUR ELECTRONIC RETURN TO THE IRS.
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	

# 2010 ESTIMATED TAX FILING INSTRUCTIONS

U.S. ESTIMATED INDIVIDUAL INCOME TAX

FOR THE YEAR ENDING

DECEMBER 31, 2010

Prepared for	CHRISTOPHER J & MARY P CHRISTIE [REDACTED] MENDHAM, NJ 07945																											
Prepared by	HAL MODEL, CPA PA																											
Amount of tax	<table><tr><td>Total Estimated Tax</td><td>\$</td><td>29,944</td></tr><tr><td>Less credit from prior year</td><td>\$</td><td>12,944</td></tr><tr><td>Less amount already paid on 2010 estimate</td><td>\$</td><td>0</td></tr><tr><td>Balance due</td><td>\$</td><td>17,000</td></tr></table> <p>Payable in full or in installments as follows:</p> <table><thead><tr><th>Installment</th><th>Amount</th><th>Due Date</th></tr></thead><tbody><tr><td>No. 1</td><td>\$ 0</td><td>NO PAYMENT REQUIRED</td></tr><tr><td>No. 2</td><td>\$ 5,000</td><td>JUNE 15, 2010</td></tr><tr><td>No. 3</td><td>\$ 6,000</td><td>SEPTEMBER 15, 2010</td></tr><tr><td>No. 4</td><td>\$ 6,000</td><td>JANUARY 18, 2011</td></tr></tbody></table>	Total Estimated Tax	\$	29,944	Less credit from prior year	\$	12,944	Less amount already paid on 2010 estimate	\$	0	Balance due	\$	17,000	Installment	Amount	Due Date	No. 1	\$ 0	NO PAYMENT REQUIRED	No. 2	\$ 5,000	JUNE 15, 2010	No. 3	\$ 6,000	SEPTEMBER 15, 2010	No. 4	\$ 6,000	JANUARY 18, 2011
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No. 4	\$ 6,000	JANUARY 18, 2011																										
Make check payable to	UNITED STATES TREASURY																											
Mail voucher and check (if applicable) to	INTERNAL REVENUE SERVICE CENTER P.O. BOX 37007 HARTFORD, CT 06176-0007																											
Special Instructions	INCLUDE YOUR SOCIAL SECURITY NUMBER AND THE WORDS "2010 FORM 1040-ES" ON YOUR CHECK.  VOUCHERS NEED NOT BE SIGNED.																											

### IRS e-file Signature Authorization

# 2009

▶ Do not send to the IRS. This is not a tax return.  
▶ Keep this form for your records. See instructions.

Declaration Control Number (DCN) ▶ [REDACTED]

Taxpayer's name

**CHRISTOPHER J CHRISTIE**

Social security number

[REDACTED]

Spouse's name

**MARY P CHRISTIE**

Spouse's social security number

[REDACTED]

#### Part I Tax Return Information - Tax Year Ending December 31, 2009 (Whole Dollars Only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	544,047.
2	Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11)	2	147,118.
3	Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7)	3	124,267.
4	Refund (Form 1040, line 73a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 13a)	4	0.
5	Amount you owe (Form 1040, line 75; Form 1040A, line 48; Form 1040EZ, line 13)	5	

#### Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2009, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). In order for me to initiate future payments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize HAL MODEL CPA PA ERO firm name to enter or generate my PIN [REDACTED] as my signature on my tax year 2009 electronically filed income tax return. Enter five numbers, but do not enter all zeros

I will enter my PIN as my signature on my tax year 2009 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ \_\_\_\_\_ Date ▶ 09/07/2010

Spouse's PIN: check one box only

I authorize HAL MODEL CPA PA ERO firm name to enter or generate my PIN [REDACTED] as my signature on my tax year 2009 electronically filed income tax return. Enter five number, but do not enter all zeros

I will enter my PIN as my signature on my tax year 2009 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ \_\_\_\_\_ Date ▶ 09/07/2010

### Practitioner PIN Method Returns Only - continue below

#### Part III Certification and Authentication - Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. [REDACTED] do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2009 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Publication 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**ERO Must Retain This Form - See Instructions  
Do Not Submit This Form to the IRS Unless Requested To Do So**

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**Tax Year 2009 e-file Jurat/Disclosure  
for Form 1040, 1040A, or 1040EZ  
using Practitioner PIN method  
(with or without Electronic Funds Withdrawal)**

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**ERO Declaration**

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

**ERO Signature**

I am signing this Tax Return by entering my PIN below.

ERO's PIN

  
(enter EFIN plus 5 self-selected numerics)

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**Taxpayer Declarations**

**Perjury Statement**

Under penalties of perjury, I declare that I have examined this return, including any accompanying statements and schedules and, to the best of my knowledge and belief, it is true, correct, and complete.

**Consent to Disclosure**

I consent to allow my Intermediate Service Provider, transmitter, or Electronic Return Originator (ERO) to send my return/form to IRS and to receive the following information from IRS: 1) acknowledgment of receipt or reason for rejection of transmission; 2) refund offset; 3) reason for any delay in processing the return or refund; and, 4) date of any refund.

I am signing this Tax Return and Electronic Funds Withdrawal Consent, if applicable, by entering my Self-Select PIN below.

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Taxpayer's PIN:



Date 09072010

Spouse's PIN:



▼ DETACH HERE ▼

Form **4868**  
Department of the Treasury  
Internal Revenue Service (99)

### Application for Automatic Extension of Time To File U.S. Individual Income Tax Return

For calendar year 2009, or other tax year beginning 2009, ending

1019

# 2009

Part I Identification	Part II Individual Income Tax
<p><b>1</b> Your name(s) CHRISTOPHER J CHRISTIE MARY P CHRISTIE [REDACTED] MENDHAM, NJ 07945</p>	<p><b>4</b> Estimate of total tax liability for 2009 ... \$ <u>160,062.</u>  <b>5</b> Total 2009 payments ... <u>154,562.</u>  <b>6</b> Balance due. Subtract line 5 from line 4 ... <u>5,500.</u>  <b>7</b> Amount you are paying ▶ <u>5,500.</u></p>
<p><b>2</b> Your social security number [REDACTED]</p> <p><b>3</b> Spouse's social security number [REDACTED]</p>	<p><b>8</b> Check here if you are "out of the country" and a U.S. citizen or resident ▶ <input type="checkbox"/>  <b>9</b> Check here if you file Form 1040NR or 1040NR-EZ and did not receive wages as an employee subject to U.S. income tax withholding ▶ <input type="checkbox"/></p>

[REDACTED] A0 CHRI

2010 Estimated Tax Worksheet

Keep for Your Records

1 Adjusted gross income you expect in 2010 (see instructions)		1	
2 • If you plan to itemize deductions, enter the estimated total of your itemized deductions. • If you do not plan to itemize deductions, enter your standard deduction from page 2.	}	2	
3 Subtract line 2 from line 1		3	
4 Exemptions. Multiply \$3,650 by the number of personal exemptions.		4	
5 Subtract line 4 from line 3		5	
6 Tax. Figure your tax on the amount on line 5 by using the 2010 Tax Rate Schedules on page 8. Caution: If you will have qualified dividends or a net capital gain, or expect to exclude or deduct foreign earned income or housing, see chapter 2 of Pub. 505 to figure the tax		6	
7 Alternative minimum tax from Form 6251 or the Alternative Minimum Tax Worksheet in the Form 1040A instructions		7	
8 Add lines 6 and 7. Add to this amount any other taxes you expect to include in the total on Form 1040, line 44, or Form 1040A, line 28		8	
9 Credits (see instructions). Do not include any income tax withholding on this line		9	
10 Subtract line 9 from line 8. If zero or less, enter -0-		10	
11 Self-employment tax. Estimate of 2010 net earnings from self-employment \$ _____; if \$106,800 or less, multiply the amount by 15.3%; if more than \$106,800, multiply the amount by 2.9%, add \$13,243.20 to the result, and enter the total. Caution: If you also have wages subject to social security tax or the 6.2% portion of tier 1 Railroad Retirement tax, see chapter 2 of Pub. 505 to figure the amount to enter		11	
12 Other taxes (see instructions)		12	
13a Add lines 10 through 12		13a	
b Earned income credit, additional child tax credit, making work pay credit, refundable education credit, and refundable credits from Forms 4136, 5405, 8801, and 8885		13b	
c Total 2010 estimated tax. Subtract line 13b from line 13a. If zero or less, enter -0-	▶	13c	
14a Multiply line 13c by 90% (66 2/3% for farmers and fishermen)		14a	
b Enter the tax shown on your 2009 tax return. Enter 110% of that amount if you are not a farmer or fisherman and the adjusted gross income shown on that return is more than \$150,000 or, if married filing separately for 2010, more than \$75,000		14b	
c Required annual payment to avoid a penalty. Enter the smaller of line 14a or 14b Caution: Generally, if you do not prepay (through income tax withholding and estimated tax payments) at least the amount on line 14c, you may owe a penalty for not paying enough estimated tax. To avoid a penalty, make sure your estimate on line 13c is as accurate as possible. Even if you pay the required annual payment, you may still owe tax when you file your return. If you prefer, you can pay the amount shown on line 13c. For details, see chapter 2 of Pub. 505.	▶	14c	
15 Income tax withheld and estimated to be withheld during 2010 (including income tax withholding on pensions, annuities, certain deferred income, etc.)		15	
16a Subtract line 15 from line 14c Is the result zero or less? <input type="checkbox"/> Yes. Stop here. You are not required to make estimated tax payments. <input type="checkbox"/> No. Go to line 16b.	ADJUSTED TO:	16a	37,600.
b Subtract line 15 from line 13c Is the result less than \$1,000? <input type="checkbox"/> Yes. Stop here. You are not required to make estimated tax payments. <input type="checkbox"/> No. Go to line 17 to figure your required payment.		16b	
17 If the first payment you are required to make is due April 15, 2010, enter 1/4 of line 16a (minus any 2009 overpayment that you are applying to this installment) here, and on your estimated tax payment voucher(s) if you are paying by check or money order. (Note: Household employers, see instructions.)		17	

OVERPAYMENT APPLIED

12,944.

CUT HERE

Form 1040-ES  
Department of the Treasury  
Internal Revenue Service

# 2010 Estimated Tax

Payment Voucher **1**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2010 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due April 15, 2010

Amount of estimated tax you are paying by check or money order.

\$

Print or type	Your first name and initial <b>CHRISTOPHER J</b>	Your last name <b>CHRISTIE</b>	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial <b>MARY P</b>	Spouse's last name <b>CHRISTIE</b>	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) [REDACTED]		
City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.) <b>MENDHAM, NJ 07945</b>			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 8.

CUT HERE

Form 1040-ES  
Department of the Treasury  
Internal Revenue Service

# 2010 Estimated Tax

Payment Voucher **2**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2010 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due June 15, 2010

Amount of estimated tax you are paying by check or money order.

\$ 5,000.

Print or type	Your first name and initial <b>CHRISTOPHER J</b>	Your last name <b>CHRISTIE</b>	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial <b>MARY P</b>	Spouse's last name <b>CHRISTIE</b>	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) [REDACTED]		
City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.)			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 8.

CUT HERE

CUT HERE

Form 1040-ES  
Department of the Treasury  
Internal Revenue Service

# 2010 Estimated Tax

Payment Voucher **3**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2010 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due Sept. 15, 2010

Amount of estimated tax you are paying by check or money order.

\$ 6,000.

Print or type	Your first name and initial <b>CHRISTOPHER J</b>	Your last name <b>CHRISTIE</b>	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial <b>MARY P</b>	Spouse's last name <b>CHRISTIE</b>	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) [REDACTED]		
City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.) <b>MENDHAM, NJ 07945</b>			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 8.

CUT HERE

Form 1040-ES  
Department of the Treasury  
Internal Revenue Service

# 2010 Estimated Tax

Payment Voucher **4**

OMB No. 1545-0074

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2010 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due Jan. 18, 2011

Amount of estimated tax you are paying by check or money order.

\$ 6,000.

Print or type	Your first name and initial <b>CHRISTOPHER J</b>	Your last name <b>CHRISTIE</b>	Your social security number [REDACTED]
	If joint payment, complete for spouse		
	Spouse's first name and initial <b>MARY P</b>	Spouse's last name <b>CHRISTIE</b>	Spouse's social security number [REDACTED]
	Address (number, street, and apt. no.) [REDACTED]		
City, state, and ZIP code. (If a foreign address, enter city, province or state, postal code, and country.) <b>MENDHAM, NJ 07945</b>			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 8.

CUT HERE



**Label** (See instructions on page 14.) Use the IRS label. Otherwise, please print or type.

**Label HERE**

For the year Jan. 1-Dec. 31, 2009, or other tax year beginning 2009, ending 20

OMB No. 1545-0074

Your first name and initial: CHRISTOPHER J Last name: CHRISTIE Your social security number: [REDACTED]

If a joint return, spouse's first name and initial: MARY P Last name: CHRISTIE Spouse's social security number: [REDACTED]

Home address (number and street). If you have a P.O. box, see page 14. Apt. no. You must enter your SSN(s) above.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 14. MENDHAM, NJ 07945

Checking a box below will not change your tax or refund.

**Election Campaign** Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14)  You  Spouse

**Filing Status**

1  Single

2  Married filing jointly (even if only one had income)

3  Married filing separately. Enter spouse's SSN above and full name here.

4  Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.

5  Qualifying widow(er) with dependent child (see page 16)

**Exemptions**

6a  Yourself. If someone can claim you as a dependent, do not check box 6a

b  Spouse

Boxes checked on 6a and 6b: 2

c **Dependents:**

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) If qualifying child for child tax credit (see page 17)
ANDREW	CHRISTIE	[REDACTED]	CHILD	X
SARAH	CHRISTIE	[REDACTED]	CHILD	X
PATRICK	CHRISTIE	[REDACTED]	CHILD	X
BRIDGET	CHRISTIE	[REDACTED]	CHILD	X

No. of children on 6c who:  
 • lived with you: 4  
 • did not live with you due to divorce or separation (see page 16):

Dependents on 6c not entered above: Add numbers on lines above: 6

**Income**

7 Wages, salaries, tips, etc. Attach Form(s) W-2: 7 517,240.

8a Taxable interest. Attach Schedule B if required: 8a 9,666.

b Tax-exempt interest. Do not include on line 8a: 8b 8,145.

9a Ordinary dividends. Attach Schedule B if required: 9a 5,261.

b Qualified dividends (see page 22): 9b 2,618.

10 Taxable refunds, credits, or offsets of state and local income taxes: STMT 3 STMT 5 10 0.

11 Alimony received: 11

12 Business income or (loss). Attach Schedule C or C-EZ: 12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here : 13 -3,000.

14 Other gains or (losses). Attach Form 4797: 14 9,151.

15a IRA distributions: 15a 15b Taxable amount

16a Pensions and annuities: 16a 142,035. 16b Taxable amount: 16b 0.

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E: 17 5,271.

18 Farm income or (loss). Attach Schedule F: 18

19 Unemployment compensation in excess of \$2,400 per recipient (see page 27): 19

20a Social security benefits: 20a 20b Taxable amount (see page 27)

21 Other income. List type and amount (see page 29): SEE STATEMENT 1 21 458.

22 Add the amounts in the far right column for lines 7 through 21. This is your total income: 22 544,047.

**Adjusted Gross Income**

23 Educator expenses (see page 29): 23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ: 24

25 Health savings account deduction. Attach Form 8889: 25

26 Moving expenses. Attach Form 3903: 26

27 One-half of self-employment tax. Attach Schedule SE: 27

28 Self-employed SEP, SIMPLE, and qualified plans: 28

29 Self-employed health insurance deduction (see page 30): 29

30 Penalty on early withdrawal of savings: 30

31a Alimony paid b Recipient's SSN: 31a

32 IRA deduction (see page 31): 32

33 Student loan interest deduction (see page 34): 33

34 Tuition and fees deduction. Attach Form 8917: 34

35 Domestic production activities deduction. Attach Form 8903: 35

36 Add lines 23 through 31a and 32 through 35: 36

37 Subtract line 36 from line 22. This is your adjusted gross income: 37 544,047.

Tax and Credits

38 Amount from line 37 (adjusted gross income) 38 544,047.

39a Check ( ) You were born before January 2, 1945, ( ) Blind. Total boxes checked ( ) 39a ( ) Spouse was born before January 2, 1945, ( ) Blind. ( ) 39b

Standard Deduction for: People who check any box on line 39a, 39b, or 40b of who can be claimed as a dependent

b If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here ( ) 39b

40a Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40a 106,569.

b If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) ( ) 40b

41 Subtract line 40a from line 38 41 437,478.

42 Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37 42 14,598.

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 422,880.

44 Tax. Check if any tax is from: a ( ) Form(s) 8814 b ( ) Form 4972 44 117,847.

45 Alternative minimum tax. Attach Form 6251 45 23,561.

46 Add lines 44 and 45 46 141,408.

47 Foreign tax credit. Attach Form 1116 if required 47 319.

48 Credit for child and dependent care expenses. Attach Form 2441 48

49 Education credits from Form 8863, line 29 49

50 Retirement savings contributions credit. Attach Form 8880 50

51 Child tax credit (see page 42) 51

52 Credits from Form: a ( ) 8396 b ( ) 8839 c ( ) 5695 52

53 Other credits from Form: a (X) 3800 b ( ) 8801 c ( ) 53

54 Add lines 47 through 53. These are your total credits 54 319.

55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- 55 141,089.

Other Taxes

56 Self-employment tax. Attach Schedule SE 56

57 Unreported social security and Medicare tax from Form: a ( ) 4137 b ( ) 8919 57

58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 58

59 Additional taxes: a ( ) AEIC payments b (X) Household employment taxes. Attach Schedule H 59 6,029.

60 Add lines 55 through 59. This is your total tax 60 147,118.

Payments

61 Federal income tax withheld from Forms W-2 and 1099 61 124,267.

62 2009 estimated tax payments and amount applied from 2008 return 62 30,295.

63 Making work pay and government retiree credits. Attach Schedule M 63

64a Earned income credit (EIC) 64a

b Nontaxable combat pay election ( ) 64b

65 Additional child tax credit. Attach Form 8812 65

66 Refundable education credit from Form 8863, line 16 66

67 First-time homebuyer credit. Attach Form 5405 67

68 Amount paid with request for extension to file (see page 72) 68 5,500.

69 Excess social security and tier 1 RRTA tax withheld (see page 72) 69

70 Credits from Form: a ( ) 2439 b ( ) 4136 c ( ) 8801 d ( ) 8885 70

71 Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments 71 160,062.

72 If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid 72 12,944.

73a Amount of line 72 you want refunded to you. If Form 8888 is attached, check here ( ) 73a

b Routing number ( ) c Type: ( ) Checking ( ) Savings d Account number ( ) 74 12,944.

74 Amount of line 72 you want applied to your 2010 estimated tax 74 12,944.

75 Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74 75

76 Estimated tax penalty (see page 74) 76

Refund

Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888.

Amount You Owe

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 75)? (X) Yes. Complete the following. ( ) No

Designee's name: HAL MODEL CPA Phone no: Personal identification number (PIN):

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature: [Signature] Date: Your occupation: ATTORNEY Daytime phone number: Spouse's signature: [Signature] Date: Spouse's occupation: SALES

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 9/10/2010 Check if self-employed: ( ) Preparer's SSN or PTIN: [Redacted]

Firm's name (if yours if self-employed), address, and ZIP code: HAL MODEL CPA PA EIN: [Redacted] Phone no: [Redacted]

## Child Tax Credit Worksheet (keep for your records)

Name(s): First

**CHRISTOPHER J & MARY P**

Last

**CHRISTIE**

Your SSN

██████████

**Part 1**

1. Number of qualifying children: 4 X \$1,000. Enter the result: 4,000.
2. Enter the amount from Form 1040, line 38, Form 1040A, line 22, or Form 1040NR, line 36. 2 544,047.
3. 1040 filers: Enter the total of any-
  - Exclusion of income from Puerto Rico, and
  - Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15.
 1040A and 1040NR filers: Enter -0-. 3 0.
4. Add lines 2 and 3. Enter the total. 4 544,047.
5. Enter the amount shown below for your filing status.
  - Married filing jointly - \$110,000
  - Single, head of household, or qualifying widow(er) - \$75,000
  - Married filing separately - \$55,0005 110,000.
6. Is the amount on line 4 more than the amount on line 5?
  - No. Leave line 6 blank. Enter -0- on line 7.
  - Yes. Subtract line 5 from line 4. 6 435,000.  
If the result is not a multiple of \$1,000, increase it to the next multiple of \$1,000 (for example, increase \$425 to \$1,000, increase \$1,025 to \$2,000, etc).
7. Multiply the amount on line 6 by 5% (.05). Enter the result. 7 21,750.
8. Is the amount on line 1 more than the amount on line 7?
  - No.  STOP  
You cannot take the child tax credit on Form 1040, line 52, Form 1040A, line 33, or Form 1040NR, line 47.
  - Yes. Subtract line 7 from line 1. Enter the result. 8

**Part 2**

9. Enter the amount from Form 1040, line 46, Form 1040A, line 28, or Form 1040NR, line 43. 9
10. 1040 filers: Enter the total of the amounts from lines 47 through 50.\*  
1040A filers: Enter the total of the amounts from lines 29 through 32.  
1040NR filers: Enter the total of the amounts from lines 44 through 46.\* 10
11. Are you claiming any of the following credits?
  - Residential energy efficient property credit, Form 5695, Part II.
  - Adoption credit, Form 8839 • Mortgage interest credit, Form 8396
  - District of Columbia first-time homebuyer credit, Form 8859 No. Enter the amount from line 10. 11  
 Yes. Complete the Line 11 Worksheet to figure the amount to enter here.
12. Subtract line 11 from line 9. Enter the result. 12
13. Is the amount on line 8 of this worksheet more than the amount on line 12?
  - No. Enter the amount from line 8.
  - Yes. Enter the amount from line 12. 13 This is your child tax credit.

\* Also include amounts from:  
 Form 5695, line 11  
 Form 8834, line 22  
 Form 8910, line 21  
 Form 8936, line 14  
 Schedule R, line 24

**SCHEDULE A  
(Form 1040)**

**Itemized Deductions**

OMB No. 1545-0074

**2009**

Attachment  
Sequence No. 07

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

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

Your social security number

**CHRISTOPHER J & MARY P CHRISTIE**

[REDACTED]

**Medical and Dental Expenses**

Caution. Do not include expenses reimbursed or paid by others.

1	Medical and dental expenses (See page A-1.)	1	
2	Enter amount from Form 1040, line 38	2	
3	Multiply line 2 by 7.5% (.075)	3	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	

**Taxes You Paid**

(See page A-2.)

5	State and local (check only one box): a <input checked="" type="checkbox"/> Income taxes, or b <input type="checkbox"/> General sales taxes	5	SEE STATEMENT 9	48,125.
6	Real estate taxes (See page A-5.)	6		36,866.
7	New motor vehicle taxes from line 11 of the worksheet on page 2. Skip this line if you checked box 5b	7		
8	Other taxes. List type and amount ▶	8		
9	Add lines 5 through 8	9		84,991.

**Interest You Paid**

(See page A-6.)

Note. Personal interest is not deductible.

10	Home mortgage interest and points reported to you on Form 1098	10		4,243.
11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-7 and show that person's name, identifying no., and address	11		
12	Points not reported to you on Form 1098	12		
13	Qualified mortgage insurance premiums (See page A-7.)	13		
14	Investment interest. Attach Form 4952 if required. (See page A-8.)	14	STMT 11	626.
15	Add lines 10 through 14	15		4,869.

**Gifts to Charity**

If you made a gift and got a benefit for it, see page A-8.

16	Gifts by cash or check	16	SEE STATEMENT 10	20,480.
17	Other than by cash or check. If any gift of \$250 or more, see page A-8. You must attach Form 8283 if over \$500	17	SEE STATEMENT 12	1.
18	Carryover from prior year	18		
19	Add lines 16 through 18	19		20,481.

**Casualty and Theft Losses**

20	Casualty or theft loss(es). Attach Form 4684. (See page A-10.)	20		
----	--	----	--	--

**Job Expenses and Certain Miscellaneous Deductions**

(See page A-10.)

21	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-10.)	21		
22	Tax preparation fees	22		
23	Other expenses - investment, safe deposit box, etc. List type and amount ▶ FROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	23		8,748.
24	Add lines 21 through 23	24		8,748.
25	Enter amount from Form 1040, line 38	25	544,047.	
26	Multiply line 25 by 2% (.02)	26		10,881.
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27		0.

**Other Miscellaneous Deductions**

28	Other - from list on page A-11. List type and amount	28		
----	--	----	--	--

**Total Itemized Deductions**

29	Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)? <input type="checkbox"/> 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 40a. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See page A-11 for the amount to enter.	29	STMT 13 ▶	106,569.
----	--	----	-----------	----------

30 If you elect to itemize deductions even though they are less than your standard deduction, check here

**Worksheet Before you begin:**  You cannot take this deduction if the amount on Form 1040, line 38, is equal to or greater than \$135,000 (\$260,000 if married filing jointly).

**New motor vehicle taxes**  See the instructions for line 7 on page A-6.

Use this worksheet to figure the amount to enter on line 7.

(Keep a copy for your records.)

<p><b>1</b> Enter the state or local sales or excise taxes you paid in 2009 for the purchase of any new motor vehicle(s) after February 16, 2009 (see page A-6) .....</p>	<b>1</b>	
<p><b>2</b> Enter the purchase price (before taxes) of the new motor vehicle(s) .....</p>	<b>2</b>	
<p><b>3</b> Is the amount on line 2 more than \$49,500?  <input type="checkbox"/> <b>No.</b> Enter the amount from line 1.  <input type="checkbox"/> <b>Yes.</b> Figure the portion of the tax from line 1 that is attributable to the first \$49,500 of the purchase price of each new motor vehicle and enter it here (see page A-6).</p>		<b>3</b>
<p><b>4</b> Enter the amount from Form 1040, line 38 .....</p>	<b>4</b>	
<p><b>5</b> Enter the total of any -  <ul style="list-style-type: none"> <li>• Amounts from Form 2555, lines 45 and 50, Form 2555-EZ, line 18; and Form 4563, line 15, and</li> <li>• Exclusion of income from Puerto Rico</li> </ul> </p>	<b>5</b>	
<p><b>6</b> Add lines 4 and 5 .....</p>	<b>6</b>	
<p><b>7</b> Enter \$125,000 (\$250,000 if married filing jointly) .....</p>	<b>7</b>	
<p><b>8</b> Is the amount on line 6 more than the amount on line 7?  <input type="checkbox"/> <b>No.</b> Enter the amount from line 3 above on Schedule A, line 7. Do not complete the rest of this worksheet.  <input type="checkbox"/> <b>Yes.</b> Subtract line 7 from line 6 .....</p>	<b>8</b>	
<p><b>9</b> 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 .....</p>	<b>9</b>	
<p><b>10</b> Multiply line 3 by line 9 .....</p>		<b>10</b>
<p><b>11</b> Deduction for new motor vehicle taxes. Subtract line 10 from line 3. Enter the result here and on Schedule A, line 7 .....</p>		<b>11</b>

**SCHEDULE B**  
(Form 1040A or 1040)

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

**Interest and Ordinary Dividends**

▶ Attach to Form 1040A or 1040.

▶ See instructions.

OMB No. 1545-0074

**2009**  
Attachment  
Sequence No. **08**

Your social security number

**CHRISTOPHER J & MARY P CHRISTIE**

**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 ▶

GOLDMAN SACHS

MICHELE BROWN ID

PEAPACK

FROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC

FROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC

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.

Amount

37.

2,207.

23.

6,969.

430.

2 Add the amounts on line 1

9,666.

3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815

4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶

9,666.

Note: If line 4 is over \$1,500, you must complete Part III.

**Part II  
Ordinary  
Dividends**

5 List name of payer ▶

GOLDMAN SACHS

GOLDMAN SACHS

FROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC

FROM K-1 - CANTOR FITZGERALD LP

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

Amount

1,311.

25.

3,840.

85.

6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶

5,261.

Note: If line 6 is over \$1,500, you must complete Part III.

**Part III  
Foreign  
Accounts  
and  
Trusts**

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

7a 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 requirements for Form TD F 90-22.1

Yes No

b If "Yes," enter the name of the foreign country ▶

X

8 During 2009, did 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

927501  
10-20-09

**SCHEDULE D  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**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

**2009**  
Attachment  
Sequence No. 12

Name(s) shown on return

Your social security number

**CHRISTOPHER J & MARY P CHRISTIE**

**Part I Short-Term Capital Gains and Losses - Assets Held One Year 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)
1					
2	Enter your short-term totals, if any, from Schedule D-1, line 2		2		
3	Total short-term sales price amounts. Add lines 1 and 2 in column (d)		3		
4	Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824		4		-1,401.
5	Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1		5		14,534.
6	Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss Carryover Worksheet in the instructions		6		(9,308.)
7	Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)		7		3,825.

**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 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)
8 820 BEAVER VALLEY II FUNDING CORP-PRIN		06/01/09	820.	820.	0.
9	Enter your long-term totals, if any, from Schedule D-1, line 9		9		
10	Total long-term sales price amounts. Add lines 8 and 9 in column (d)		10	820.	
11	Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824		11		-2,065.
12	Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1		12		-12,855.
13	Capital gain distributions		13		
14	Long-term capital loss carryover. Enter the amount, if any, from line 15 of your Capital Loss Carryover Worksheet in the instructions		14		(74,837.)
15	Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on page 2		15		-89,757.

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

Schedule D (Form 1040) 2009

**Part III Summary**

<p><b>16</b> Combine lines 7 and 15 and enter the result</p> <p>If line 16 is:</p> <ul style="list-style-type: none"> <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> <p><b>17</b> Are lines 15 and 16 both gains?  <input type="checkbox"/> Yes. Go to line 18.  <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p> <p><b>18</b> Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions</p> <p><b>19</b> Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions</p> <p><b>20</b> Are lines 18 and 19 both zero or blank?  <input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below.  <input type="checkbox"/> 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.</p> <p><b>21</b> If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:</p> <ul style="list-style-type: none"> <li>• The loss on line 16 or</li> <li>• (\$3,000), or if married filing separately, (\$1,500)</li> </ul> <p>Note. When figuring which amount is smaller, treat both amounts as positive numbers.</p> <p><b>22</b> Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?  <input checked="" type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the instructions for Form 1040 (or in the Instructions for Form 1040NR).  <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.</p>	<p><b>16</b></p> <p><b>18</b></p> <p><b>19</b></p> <p><b>21</b></p>	<p>85,932.</p> <p></p> <p></p> <p></p> <p>3,000.</p>
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Qualified Dividends and Capital Gain Tax Worksheet - Line 44

Keep for Your Records

Name(s) shown on return

CHRISTOPHER J & MARY P CHRISTIE

Your SSN



**Before you begin:** ✓ See the instructions for line 44 that begin on page 37 to see if you can use this worksheet to figure your tax.  
 ✓ If you do not have to file Schedule D and you received capital gain distributions, be sure you 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 38	1.	<u>422,880.</u>	
2. Enter the amount from Form 1040, line 9b*	2.	<u>2,618.</u>	
3. Are you filing Schedule D?*			
<input checked="" type="checkbox"/> <b>Yes.</b> Enter the <b>smaller</b> of line 15 or 16 of Schedule D. If either line 15 or line 16 is a loss, enter -0-	3.		}
<input type="checkbox"/> <b>No.</b> Enter the amount from Form 1040, line 13			
4. Add lines 2 and 3	4.	<u>2,618.</u>	
5. If you are claiming investment interest expense on Form 4952, enter the amount from line 4g of that form. Otherwise, enter -0-	5.	<u>0.</u>	
6. Subtract line 5 from line 4. If zero or less, enter -0-	6.	<u>2,618.</u>	
7. Subtract line 6 from line 1. If zero or less, enter -0-	7.	<u>420,262.</u>	
8. Enter the <b>smaller</b> of:			
• The amount on line 1, or	8.		}
• \$ 33,950 if single or married filing separately,			
\$ 67,900 if married filing jointly or qualifying widow(er), \$ 45,500 if head of household.		<u>67,900.</u>	
9. Is the amount on line 7 equal to or more than the amount on line 8?			
<input checked="" type="checkbox"/> <b>Yes.</b> Skip lines 9 and 10; go to line 11 and check the "No" box.	9.		
<input type="checkbox"/> <b>No.</b> Enter the amount from line 7			
10. Subtract line 9 from line 8	10.		
11. Are the amounts on lines 6 and 10 the same?			
<input type="checkbox"/> <b>Yes.</b> Skip lines 11 through 14; go to line 15.			
<input checked="" type="checkbox"/> <b>No.</b> Enter the <b>smaller</b> of line 1 or line 6	11.	<u>2,618.</u>	
12. Enter the amount from line 10 (if line 10 is blank, enter -0-)	12.	<u>0.</u>	
13. Subtract line 12 from line 11	13.	<u>2,618.</u>	
14. Multiply line 13 by 15% (.15)	14.	<u>393.</u>	
15. Figure the tax on the amount on line 7. Use the Tax Table or Tax Computation Worksheet, whichever applies	15.	<u>117,454.</u>	
16. Add lines 14 and 15	16.	<u>117,847.</u>	
17. Figure the tax on the amount on line 1. Use the Tax Table or Tax Computation Worksheet, whichever applies	17.	<u>118,370.</u>	
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. Instead, enter it on line 4 of the worksheet on page 38	18.	<u>117,847.</u>	

\* If you are filing Form 2555 or 2555-EZ, see the footnote in the worksheet on page 38 before completing this line.

**SCHEDULE E**  
**(Form 1040)**

**Supplemental Income and Loss**

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

OMB No. 1545-0074

**2009**

Attachment  
Sequence No. **13**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or Form 1041. ▶ See Instructions for Schedule E (Form 1040).

Name(s) shown on return

Your social security number

**CHRISTOPHER J & MARY P CHRISTIE**

**Part I** **Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-3). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and address of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:	Yes	No
A	MCNEIL PPC INC - ROYALTIES				
B					
C	GOLDMAN SACHS HEDGE FUND PARTNERS, LLC -		<ul style="list-style-type: none"> <li>• 14 days or</li> <li>• 10% of the total days rented at fair rental value?</li> </ul> (See page E-3)		X

Income:		Properties			Totals (Add columns A, B, and C.)
		A	B	C	
3	Rents received				3
4	Royalties received	17,662.		22.	4 17,684.
<b>Expenses:</b>					
5	Advertising				
6	Auto and travel (see page E-4)				
7	Cleaning and maintenance				
8	Commissions				
9	Insurance				
10	Legal and other professional fees				
11	Management fees				
12	Mortgage interest paid to banks, etc. (see page E-5)				12
13	Other interest				
14	Repairs				
15	Supplies				
16	Taxes				
17	Utilities				
18	Other (list) ▶				
19	Add lines 5 through 18				19
20	Depreciation expense or depletion (see page E-5)				20
21	Total expenses. Add lines 19 and 20				21
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	17,662.	0.	22.	22
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 17,684.
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here				25 ( )
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, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2				26 17,684.

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

CHRISTOPHER J & MARY P CHRISTIE

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II 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 passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? Yes No

Table with 5 columns: (a) Name, (b) Enter P for partnership, S for S corporation, (c) Check if foreign partnership, (d) Employer identification number, (e) Check if any amount is not at risk. Rows include GOLDMAN SACHS HEDGE FUND PARTNERS, LLC, INVESTMENT INTEREST EXPENSE, SEC 59(E)(2), and CANTOR FITZGERALD LP.

Summary table for Part II with columns for Passive Income and Loss and Nonpassive Income and Loss. Includes rows for Totals and final totals for lines 30, 31, and 32.

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name, (b) Employer identification number. Rows A and B.

Summary table for Part III with columns for Passive Income and Loss and Nonpassive Income and Loss. Includes rows for Totals and final totals for lines 35, 36, and 37.

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

Table with 5 columns: (a) Name, (b) Employer identification number, (c) Excess inclusion from Schedules Q, line 2c, (d) Taxable income (net loss) from Schedules Q, line 1b, (e) Income from Schedules Q, line 3b. Includes a summary row for line 39.

Part V Summary

Summary table for Part V with 2 columns: Description, Amount. Includes rows for Net farm rental income, Total income or (loss), Reconciliation of farming and fishing income, and Reconciliation for real estate professionals.

SCHEDULE E

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2009

Name CHRISTOPHER J & MARY P CHRISTIE  
 Passthrough GOLDMAN SACHS HEDGE FUND PARTNERS, LLC - GOLDMAN SACHS HE  
 PARTNERSHIP ID [REDACTED]

SSN/EIN [REDACTED]

JOINT

NONPASSIVE SCHEDULE E, PAGE 2	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
Ordinary business income (loss)	11,208.							
Rental real estate income (loss)	-23.							
Other net rental income (loss)	-16.							
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Net income (loss)	-11,247.							-11,247.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	-3,302.							-3,302.
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition	37.							37.
SCHEDULE D								
Net short-term cap. gain (loss)	14,534.							14,534.
Net long-term cap. gain (loss)	-12,855.							-12,855.
Section 1256 contracts & straddles	-3,503.							-3,503.
FORM 4952								
Investment interest expense Sch. A	626.							626.
Other net investment income	-7,935.							-7,935.
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income	8,748.							8,748.
Other								

SCHEDULE E

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2009

Name CHRISTOPHER J & MARY P CHRISTIE  
Passthrough GOLDMAN SACHS HEDGE FUND PARTNERS, LLC - GOLDMAN SACHS HE ID [REDACTED]  
 PARTNERSHIP

SSN/EIN [REDACTED]  
 JOINT

	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>NONPASSIVE INTEREST AND DIVIDENDS</b>								
Interest income	6,969.							6,969.
Interest from U.S. bonds	430.							430.
Ordinary dividends	3,840.							3,840.
Qualified dividends	1,552.							1,552.
Tax exempt interest income	20.							20.
FORM 6251								
Depreciation adjustment after 12/31/86								
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other	45.							45.
<b>MISCELLANEOUS</b>								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties	22.							22.
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt	458.							458.
Medical insurance	1040.							1040.
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits	10.							10.
Casualty and theft loss								

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2009

SCHEDULE E  
 Name MARY P CHRISTIE  
 Passthrough CANTOR FITZGERALD LP - CANTOR FITZGERALD LP  
 PARTNERSHIP

ID [REDACTED]

SSN/EIN [REDACTED]  
 SPOUSE

	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>OTHER PASSIVE</b>								
<b>SCHEDULE E, PAGE 2</b>								
Ordinary business income (loss)	2,136.							
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Net income (loss)	2,136.							2,136.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	2,136.							2,136.
<b>FORM 4797</b>								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
<b>SCHEDULE D</b>								
Net short-term cap gain (loss)								
Net long-term cap gain (loss)								
Section 1256 contracts & straddles								
<b>FORM 4952</b>								
Investment interest expense - Sch. A								
Other net investment income								
<b>ITEMIZED DEDUCTIONS</b>								
Charitable contributions	26.							26.
Deductions related to portfolio income								
Other	9.							9.

SCHEDULE E

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2009

Name MARY P CHRISTIE  
 Passthrough CANTOR FITZGERALD LP - CANTOR FITZGERALD LP ID [REDACTED]  
 PARTNERSHIP

SSN/EIN [REDACTED]  
 SPOUSE

OTHER PASSIVE INTEREST AND DIVIDENDS	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
Interest income								
Interest from U.S. bonds								
Ordinary dividends	85.							85.
Qualified dividends	85.							85.
Tax exempt interest income								
FORM 6251								85.
Depreciation adjustment after 12/31/86								
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
<b>MISCELLANEOUS</b>								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								

Schedule E  
 CHRISTOPHER J & MARY P CHRISTIE  
 PASSTHROUGH RECAP - BASIC INFORMATION  
 2009

SP J/E	Entity No.	Act. No.	Name	1/1/6	2/2/7	3/3/8	5/4/1	6/6/5a/2a	7/6/7	8/7/3	9a/8a/4a	4/7/7			
SP	2	1	GOLDMAN SACHS HEDGE FUND PARTNE	Ordinary income (Loss)	Rental Real Estate Inc. (Loss)	Other Rental Income (Loss)	Passive Activity Loss C/O	AMT Passive Activity Loss C/O	Interest	US Treasury Bond Interest	Dividends	Royalties	Short-Term Capital Gain (Loss)	Net Long-Term Capital Gain (Loss)	Guaranteed Payments to Partner
		2	CANTOR FITZGERALD LP	-11,208.	-23.	-16.			6,969.	430.	3,940.	22.	14,534.	-1,2855.	
				2,136.							85.				
Totals				-9,072.	-23.	-16.			6,969.	430.	3,925.	22.	14,534.	-1,2855.	

SP J/E	Entity No.	Act. No.	Name	10/9/7	11/10/7	13/12/7	12/11/7	13/12/7	13/12/7	13/12/7	13/12/7	20/17/14	13/7/7	14/7/7	17/15/12	*/7/12	*/7/12	
		1		Ordinary Gain (Loss)	Other Income	Charitable Contributions 50%	Section 179 Expense	Reductions Related to Portfolio Income (2%)	Other Deductions	Investment Int. Expense (Schedule A)	Investment Int. Expense (Schedule E)	Investment Income	SE Health Insurance Premium	Wages for More Than 2% Shareholders	Net SE Earnings	AMT Dep. Adj. on Post 86 Property	Minimum Tax	Exclusion Items
		1		37.	9,151.			9,748.	50.	626.	3,388.	3,326.						
		2				25.						85.						
Totals				37.	9,151.	25.		9,748.	50.	626.	3,388.	3,411.						

No specific Schedule K-1 line reference for these amounts.



**Schedule E**  
**CHRISTOPHER J & MARY P CHRISTIE**  
**PASSTHROUGH RECAP - ADDITIONAL INCOME, DEDUCTIONS, AND PRIOR YEAR CARRYOVERS**  
**2009**

Line Reference (1065/1205/1041)	17/15*	15/13/13	15/13/13	*7/10	*7/11	18/16/14	18/16/14	18/16/14	18/16/14	* * *	* * *	* * *	* * *	* * *	* * *	
Entity No.	AMT Adj. Gain or Loss	Low Income Housing Cr Pre 08	Low Income Housing Cr Post 07	Estate Tax Deduction	Excess Deductions on Termination	Tax-exempt Interest Income	Other Tax-exempt Income	Non-deductible Expenses	Section 1231 PAL Carryover	AMT Section 1231 PAL Carryover	ST Capital PAL C/O	AMT ST Capital PAL C/O	LT Capital PAL C/O	AMT LT Capital PAL C/O	Form 4799 Ordinary PAL C/O	AMT 4797 Ordinary PAL C/O
1						20.	1.	2.								
Totals						20.	1.	2.								

Schedule K-1  
 Line Reference: (1095/1205/1041)

Entity No.	Act. No.	Section 179 Carryover	Charitable Contributions 30% Regular	Charitable Contributions 30% Special	Charitable Contributions 20%	Keogh Payments	SEP Payments	IRA Contributions	Other Portfolio Income (Loss)	Other Nonportfolio Income	Unrecaptured Section 1250 Gain	Investment Expenses	Investment Interest Expense C/O (Sch. E)	Nonpassive Depreciation and Amortization	Deductions Related to Portfolio Income (not 2%)	Medical Payments for 2% Owner
1	2															
1	1		1.						136.		11.	8,748.				
2	2															
Totals			1.						136.		11.	8,748.				

Component of: Form 4562, Schedule A, Lines 16 & 17  
 Form 1040, Line 28  
 Form 1040, Line 28  
 Form 1040, Line 32  
 Schedule E, Page 2, Various  
 Schedule E, Page 2, Various  
 Schedule D, Line 19  
 Form 4952, Line 5  
 Form 4952, Line 2  
 Schedule E, Line 33  
 Schedule A, Line 28  
 Schedule A, Line 1

No specific Schedule K-1 line reference for these amounts.

Schedule E  
 CHRISTOPHER J & MARY P CHRISTIE  
 PASSTHROUGH RECAP - ADDITIONAL INFORMATION AND PRIOR YEAR AT-RISK CARRYOVERS  
 2009

Entity No.	Act. No.	Net LT Capital Gain (Loss) 28%	Form 4684 Casualty or Theft Gain (Loss)	Federal Income Tax Withheld	State Income Tax Withheld	Estimated Tax Paid by a Trust	Qualified Rehabilitation Expenditures Credit	Alcohol Fuel Credit	Non-conventional Fuel Credit	Patrons Credit	Welfare to Work Credit	Work Opportunity Credit	Form 6251 Depreciation (Not Oil and Gas)	Form 6251 Interest Deduction Adjustments	Form 6251 Incentive Stock Options	Form 6251 PASSIVE ACTIVITIES	Form 6251 Tax-exempt Interest P.A. Bonds
	2																
Totals																	

Component of: Schedule D, Section B  
 Line 18  
 Form 4684, Section B  
 Form 1040, Line 61  
 Schedule A, Line 5  
 Form 1040, Line 62  
 Form 3468, Line 10  
 Form 6478, Line 7  
 Form 8907, Line 12  
 Form 5884, Line 3  
 Form 8861, Line 3  
 Form 5884, Line 3  
 Form 6251, Line 10  
 Form 6251, Line 9  
 Form 6251, Line 15  
 Form 6251, Line 20  
 Form 6251, Line 13

Entity No.	Act. No.	Schedule E At-Risk Carryover	AMT Schedule E At-Risk Carryover	ST At-Risk Carryover	ST-AMT At-Risk Carryover	LT At-Risk Carryover	AMT LT At-Risk Carryover	Sec. 1231 At-Risk Carryover	AMT Sec. 1231 At-Risk Carryover	4797-Ord. At-Risk Carryover	AMT 4797-Ord. At-Risk Carryover	Other At-Risk Carryovers	AMT Other At-Risk Carryovers
Totals													
Component of: Form 6198, Line 1													
Form 6198, 6198 AMT, Line 1													
Form 6198, 6198 AMT, Line 2a													
Form 6198, 6198 AMT, Line 2a													
Form 6198, 6198 AMT, Line 2a													
Form 6198, 6198 AMT, Line 2a													
Form 6198, 6198 AMT, Line 2b													
Form 6198, 6198 AMT, Various													
Form 6198, 6198 AMT, Various													

925073 1-07 09 No specific Schedule K-1 line reference for these amounts.

**Schedule E**  
**CHRISTOPHER J & MARY P CHRISTIE**  
**PASSTHROUGH RECAP - ADDITIONAL INFORMATION AND PRIOR YEAR BASIS CARRYOVERS**  
 2009

Entity No.	Act. No.	Qualified Dividends	Sec. 1256 Contracts & Straddles	Dependent Care Benefits	Qualified Production Activities Income	Employer's W-2 Wages	Undistributed Capital Gains	Empowerment Zone Credit	Credit for Increasing Research Activities	New Markets Credit	Credit for SS & Medicare Taxes	Recapture of Low-income Housing Credit	Royalty/Depletion Expenses
1	1	1,552.	-3,503.										
2	2	85.											
Totals		1,637.	-3,503.										

Entity No.	Act. No.	Schedule E Basis Carryover	AMT Schedule E Basis Carryover	SI Basis Carryover	AMT Basis Carryover	LT Basis Carryover	AMT LT Basis Carryover	Sec. 1231 Basis Carryover	AMT Sec. 1231 Basis Carryover	4797-Ord. Basis Carryover	AMT 4797-Ord. Basis Carryover	Other Basis Carryovers	AMT Other Basis Carryovers
Totals													

225076 11-07-05 No specific Schedule K-1 line reference for these amounts.

Schedule E - Two-Year Comparison Worksheet

2009

Property Name:

MCNEIL PPC INC - ROYALTIES

Description	Tax Year 2008	Tax Year 2009	Increase (Decrease)
INCOME			
ROYALTIES RECEIVED	4,212.	17,662.	13,450.
INCOME OR (LOSS)	4,212.	17,662.	13,450.

Schedule E - Two-Year Comparison Worksheet

2009

Property Name:

Description	Tax Year 2008	Tax Year 2009	Increase (Decrease)
INCOME			
ROYALTIES RECEIVED	16,712.	0.	-16,712.
INCOME OR (LOSS)	16,712.	0.	-16,712.

**Foreign Tax Credit**

(Individual, Estate, or Trust)

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

**2009**

Attachment Sequence No. **19**

Department of the Treasury  
Internal Revenue Service (99)

Name

Identifying number as shown on page 1 of your tax return

**CHRISTOPHER J & MARY P CHRISTIE**

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.

- a  Passive category income
- b  General category income
- c  Section 901(j) income
- d  Certain income re-sourced by treaty
- e  Lump-sum distributions

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.

**Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)**

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession ▶ <b>VARIOUS</b>				
1a Gross income from sources within country shown above and of the type checked above:				
	3,178.			3,178.
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) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See pages 13 and 14 of the instructions):</b>				
2 Expenses definitely related to the income on line 1a (attach statement) <b>SEE STATEMENT 20</b>	987.			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	82,069.			
b Other deductions (attach statement)				
c Add lines 3a and 3b	82,069.			
d Gross foreign source income	3,178.			
e Gross income from all sources	596,985.			
f Divide line 3d by line 3e	.005323			
g Multiply line 3c by line 3f	437.			
4 Pro rata share of interest expense:				
a Home mortgage interest (use worksheet on page 14 of the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	1,424.			1,424.
7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 ▶				1,754.

**Part II Foreign Taxes Paid or Accrued**

**SEE STATEMENT 19**

Country	Foreign taxes paid or accrued										
	In foreign currency				In U.S. dollars						
	Taxes withheld at source on:				(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))	
(h) <input type="checkbox"/> Paid	(i) <input checked="" type="checkbox"/> Accrued	(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties		(m) Interest	(o) Dividends	(p) Rents and royalties			(q) Interest
A										319.	319.
B											
C											

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶ **8 319.**

LHA For Paperwork Reduction Act Notice, see separate instructions.

**Part 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	319.	
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11	319.	
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		319.
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	1,754.	
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.)	16	1,754.	
17	<b>Individuals:</b> 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). <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption <b>SEE STATEMENT 21</b>	17	435,982.	
18	<i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i> Divide line 16 by line 17. If line 16 is more than line 17, enter "1"	18		.004023
19	<b>Individuals:</b> Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 41. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 <i>Caution: If you are completing line 19 for separate category (lump-sum distributions), see pg. 19 of the instructions.</i>	19		117,847.
20	Multiply line 19 by line 18 (maximum amount of credit)	20		474.
21	Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV	21		319.

**Part IV Summary of Credits From Separate Parts III**

22	Credit for taxes on passive category income	22		
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	26		
27	Enter the smaller of line 19 or line 26	27		319.
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 47; Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	29		319.

# Child and Dependent Care Expenses

**2009**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

▶ See separate instructions.

Attachment  
Sequence No. **21**

Name(s) shown on return

Your social security number

**CHRISTOPHER J & MARY P CHRISTIE**

**Part I** Persons or Organizations Who Provided the Care - You must complete this part.  
(If you have more than two care providers, see the instructions.)

1	(a) Care provider's name	(b) Address (number, street, apt. no., city, state, and ZIP code)	(c) Identifying number (SSN or EIN)	(d) Amount paid
	DEBORAH RISKA	MENDHAM, NJ 07945	[REDACTED]	23,760.

Did you receive dependent care benefits?	No	Complete only Part II below.
	Yes	Complete Part III on page 2 next.

**Caution.** If the care was provided in your home, you may owe employment taxes. If you do, you cannot file Form 1040A. For details, see the instructions for Form 1040, line 59, or Form 1040NR, line 56.

**Part II** Credit for Child and Dependent Care Expenses

2 Information about your qualifying person(s). If you have more than two qualifying persons, see the instructions.

First	(a) Qualifying person's name Last	(b) Qualifying person's social security number	(c) Qualified expenses you incurred and paid in 2009 for the person listed in column (a)
SEE STATEMENT 22			

3 Add the amounts in column (c) of line 2. Do not enter more than \$3,000 for one qualifying person or \$6,000 for two or more persons. If you completed Part III, enter the amount from line 34	3	6,000.																																																														
4 Enter your earned income. See instructions	4																																																															
5 If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions); all others, enter the amount from line 4	5	517,240.																																																														
6 Enter the smallest of line 3, 4, or 5	6																																																															
7 Enter the amount from Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 36	7	544,047.																																																														
8 Enter on line 8 the decimal amount shown below that applies to the amount on line 7	8	x .20																																																														
<table border="0"> <tr> <td colspan="3">If line 7 is:</td> <td colspan="3">If line 7 is:</td> </tr> <tr> <td>Over</td> <td>But not over</td> <td>Decimal amount is</td> <td>Over</td> <td>But not over</td> <td>Decimal amount is</td> </tr> <tr> <td>\$0</td> <td>15,000</td> <td>.35</td> <td>\$29,000</td> <td>31,000</td> <td>.27</td> </tr> <tr> <td>15,000</td> <td>17,000</td> <td>.34</td> <td>31,000</td> <td>33,000</td> <td>.26</td> </tr> <tr> <td>17,000</td> <td>19,000</td> <td>.33</td> <td>33,000</td> <td>35,000</td> <td>.25</td> </tr> <tr> <td>19,000</td> <td>21,000</td> <td>.32</td> <td>35,000</td> <td>37,000</td> <td>.24</td> </tr> <tr> <td>21,000</td> <td>23,000</td> <td>.31</td> <td>37,000</td> <td>39,000</td> <td>.23</td> </tr> <tr> <td>23,000</td> <td>25,000</td> <td>.30</td> <td>39,000</td> <td>41,000</td> <td>.22</td> </tr> <tr> <td>25,000</td> <td>27,000</td> <td>.29</td> <td>41,000</td> <td>43,000</td> <td>.21</td> </tr> <tr> <td>27,000</td> <td>29,000</td> <td>.28</td> <td>43,000</td> <td>No limit</td> <td>.20</td> </tr> </table>			If line 7 is:			If line 7 is:			Over	But not over	Decimal amount is	Over	But not over	Decimal amount is	\$0	15,000	.35	\$29,000	31,000	.27	15,000	17,000	.34	31,000	33,000	.26	17,000	19,000	.33	33,000	35,000	.25	19,000	21,000	.32	35,000	37,000	.24	21,000	23,000	.31	37,000	39,000	.23	23,000	25,000	.30	39,000	41,000	.22	25,000	27,000	.29	41,000	43,000	.21	27,000	29,000	.28	43,000	No limit	.20		
If line 7 is:			If line 7 is:																																																													
Over	But not over	Decimal amount is	Over	But not over	Decimal amount is																																																											
\$0	15,000	.35	\$29,000	31,000	.27																																																											
15,000	17,000	.34	31,000	33,000	.26																																																											
17,000	19,000	.33	33,000	35,000	.25																																																											
19,000	21,000	.32	35,000	37,000	.24																																																											
21,000	23,000	.31	37,000	39,000	.23																																																											
23,000	25,000	.30	39,000	41,000	.22																																																											
25,000	27,000	.29	41,000	43,000	.21																																																											
27,000	29,000	.28	43,000	No limit	.20																																																											
9 Multiply line 6 by the decimal amount on line 8. If you paid 2008 expenses in 2009, see the instructions	9																																																															
10 Enter the amount from Form 1040, line 46; Form 1040A, line 28; or Form 1040NR, line 43	10	141,408.																																																														
11 Enter the amount from Form 1040, line 47; or Form 1040NR, line 44. Form 1040A filers, enter -0-	11	319.																																																														
12 Subtract line 11 from line 10. If zero or less, stop. You cannot take the credit	12	141,089.																																																														
13 Credit for child and dependent care expenses. Enter the smaller of line 9 or line 12 here and on Form 1040, line 48; Form 1040A, line 29; or Form 1040NR, line 45	13	0.																																																														



**Part III Dependent Care Benefits**

14	Enter the total amount of dependent care benefits you received in 2009. Amounts you received as an employee should be shown in box 10 of your Form(s) W-2. Do not include amounts reported as wages in box 1 of Form(s) W-2. If you were self-employed or a partner, include amounts you received under a dependent care assistance program from your sole proprietorship or partnership			14
15	Enter the amount, if any, you carried over from 2008 and used in 2009 during the grace period. See instructions			15
16	Enter the amount, if any, you forfeited or carried forward to 2010. See instructions			16 ( )
17	Combine lines 14 through 16. See instructions			17
18	Enter the total amount of qualified expenses incurred in 2009 for the care of the qualifying person(s)	18		
19	Enter the smaller of line 17 or 18	19		
20	Enter your earned income. See instructions	20		
21	Enter the amount shown below that applies to you. <ul style="list-style-type: none"> <li>• If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions for line 5).</li> <li>• If married filing separately, see the instructions.</li> <li>• All others, enter the amount from line 20.</li> </ul>	21		
22	Enter the smallest of line 19, 20, or 21	22		
23	Enter \$5,000 (\$2,500 if married filing separately and you were required to enter your spouse's earned income on line 21)	23		
24	Are you filing Form 1040A? <ul style="list-style-type: none"> <li><input type="checkbox"/> Yes. Skip lines 24 through 27 and go to line 28.</li> <li><input type="checkbox"/> No. Enter the amount from line 14 that you received from your sole proprietorship or partnership. If you did not receive any such amounts, enter -0-</li> </ul>			24
25	Subtract line 24 from line 17	25		
26	Enter the smaller of line 22 or 23	26		
27	Deductible benefits. Enter the smallest of line 22, 23, or 24. Also, include this amount on the appropriate line(s) of your return. See instructions			27
28	Excluded benefits. Form 1040 and 1040NR filers: Subtract line 27 from line 26. If zero or less, enter -0-. Form 1040A filers: Enter the smaller of line 22 or line 23			28
29	Taxable benefits. Form 1040 and 1040NR filers: Subtract line 28 from line 25. If zero or less, enter -0-. Also, include this amount on Form 1040, line 7; or Form 1040NR, line 8. On the dotted line next to Form 1040, line 7; or Form 1040NR, line 8, enter "DCB." Form 1040A filers: Subtract line 28 from line 17. Also, include this amount on Form 1040A, line 7. In the space to the left of line 7, enter "DCB"			29

To claim the child and dependent care credit, complete lines 30 through 34 below.

30	Enter \$3,000 (\$6,000 if two or more qualifying persons)			30
31	Form 1040 and 1040NR filers: Add lines 27 and 28. Form 1040A filers: Enter the amount from line 28			31
32	Subtract line 31 from line 30. If zero or less, stop. You cannot take the credit. Exception. If you paid 2008 expenses in 2009, see the instructions for line 9			32
33	Complete line 2 on page 1 of this form. Do not include in column (c) any benefits shown on line 31 above. Then, add the amounts in column (c) and enter the total here			33
34	Enter the smaller of line 32 or 33. Also, enter this amount on line 3 on page 1 of this form and complete lines 4 through 13			34

**General Business Credit**

▶ See instructions.  
▶ Attach to your tax return.

**CHRISTOPHER J & MARY P CHRISTIE**

Identifying number

**Part I Current Year Credit**

**Important:** You may not be required to complete and file a separate credit form (shown in parentheses below) to claim the credit. For details, see the instructions.

<b>1a</b> Investment credit (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>	
<b>b</b> Welfare-to-work credit (only from partnerships, S corporations, estates, and trusts)	<b>1b</b>	
<b>c</b> Credit for increasing research activities (Form 6765). (Individuals: see instructions)	<b>1c</b>	
<b>d</b> Low-income housing credit (Form 8586, Part I only) (enter EIN if claiming this credit from a pass-through entity: _____)	<b>1d</b>	
<b>e</b> Disabled access credit (Form 8826) (do not enter more than \$5,000)	<b>1e</b>	
<b>f</b> Renewable electricity production credit (Form 8835)	<b>1f</b>	
<b>g</b> Indian employment credit (Form 8845)	<b>1g</b>	
<b>h</b> Orphan drug credit (Form 8820)	<b>1h</b>	
<b>i</b> New markets credit (Form 8874) (enter EIN if claiming this credit from a pass-through entity: _____)	<b>1i</b>	
<b>j</b> Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	<b>1j</b>	
<b>k</b> Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming this credit from a pass-through entity: _____)	<b>1k</b>	
<b>l</b> Biodiesel and renewable diesel fuels credit (attach Form 8864)	<b>1l</b>	
<b>m</b> Low sulfur diesel fuel production credit (Form 8896)	<b>1m</b>	
<b>n</b> Distilled spirits credit (Form 8906)	<b>1n</b>	
<b>o</b> Nonconventional source fuel credit (Form 8907)	<b>1o</b>	
<b>p</b> Energy efficient home credit (Form 8908)	<b>1p</b>	
<b>q</b> Energy efficient appliance credit (Form 8909)	<b>1q</b>	
<b>r</b> Alternative motor vehicle credit (Form 8910) (enter EIN if claiming this credit from a pass-through entity: _____)	<b>1r</b>	
<b>s</b> Alternative fuel vehicle refueling property credit (Form 8911)	<b>1s</b>	
<b>t</b> Credits for affected Midwestern disaster area employers (Form 5884-A)	<b>1t</b>	
<b>u</b> Mine rescue team training credit (Form 8923)	<b>1u</b>	
<b>v</b> Agricultural chemicals security credit (Form 8931)	<b>1v</b>	
<b>w</b> Credit for employer differential wage payments (Form 8932)	<b>1w</b>	
<b>x</b> Carbon dioxide sequestration credit (Form 8933)	<b>1x</b>	
<b>y</b> Qualified plug-in electric drive motor vehicle credit (Form 8936)	<b>1y</b>	
<b>z</b> Qualified plug-in electric vehicle credit (Form 8834, Part I only)	<b>1z</b>	
<b>aa</b> Credit for contributions to selected community development corporations (only from partnerships and S corporations)	<b>1aa</b>	
<b>bb</b> General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	<b>1bb</b>	5.
<b>2</b> Add lines 1a through 1bb	<b>2</b>	5.
<b>3</b> Passive activity credits included on line 2 (see instructions)	<b>3</b>	
<b>4</b> Subtract line 3 from line 2	<b>4</b>	5.
<b>5</b> Passive activity credits allowed for 2009 (see instructions)	<b>5</b>	
<b>6</b> Carryforward of general business credit to 2009. See instructions for the schedule to attach <b>STMT 23</b>	<b>6</b>	34.
<b>7</b> Carryback of general business credit from 2010 (see instructions)	<b>7</b>	
<b>8</b> Current year credit. Add lines 4 through 7	<b>8</b>	39.

LHA For Paperwork Reduction Act Notice, see instructions.

**Part II Allowable Credit**

<b>9 Regular tax before credits:</b> <ul style="list-style-type: none"> <li>• Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line 41 .....</li> <li>• Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the applicable line of your return .....</li> <li>• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return .....</li> </ul>		<b>9</b>	<b>117,847.</b>
<b>10 Alternative minimum tax:</b> <ul style="list-style-type: none"> <li>• Individuals. Enter the amount from Form 6251, line 36 .....</li> <li>• Corporations. Enter the amount from Form 4626, line 14 .....</li> <li>• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56 .....</li> </ul>		<b>10</b>	<b>23,561.</b>
<b>11 Add lines 9 and 10 .....</b>		<b>11</b>	<b>141,408.</b>
<b>12a Foreign tax credit .....</b>		<b>12a</b>	<b>319.</b>
<b>b Credits from Form 1040, lines 48 through 52 (or Form 1040NR, lines 45 through 48); Form 8859, line 11; Form 8834, lines 22 and 29; Form 8910, line 21; Form 8911, line 23; Form 8936, line 14; and Schedule R, line 24 .....</b>		<b>12b</b>	
<b>c Add lines 12a and 12b .....</b>		<b>12c</b>	<b>319.</b>
<b>13 Net income tax. Subtract line 12c from line 11. If zero, skip lines 14 through 17 and enter -0- on line 18a .....</b>		<b>13</b>	<b>141,089.</b>
<b>14 Net regular tax. Subtract line 12c from line 9. If zero or less, enter -0- .....</b>		<b>14</b>	<b>117,528.</b>
<b>15 Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions) .....</b>		<b>15</b>	<b>23,132.</b>
<b>16 Tentative minimum tax:</b> <ul style="list-style-type: none"> <li>• Individuals. Enter the amount from Form 6251, line 34 .....</li> <li>• Corporations. Enter the amount from Form 4626, line 12 .....</li> <li>• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54 .....</li> </ul>		<b>16</b>	<b>141,089.</b>
<b>17 Enter the greater of line 15 or line 16 .....</b>		<b>17</b>	<b>141,089.</b>
<b>18a Subtract line 17 from line 13. If zero or less, enter -0- .....</b>		<b>18a</b>	<b>0.</b>
<b>b For a corporation electing to accelerate the research credit, enter the bonus depreciation amount attributable to the research credit. (see instructions) .....</b>		<b>18b</b>	
<b>c Add lines 18a and 18b .....</b>		<b>18c</b>	
<b>19a Enter the smaller of line 8 or line 18c .....</b>		<b>19a</b>	<b>0.</b>
<b>C corporations:</b> See the line 19a instructions if there has been an ownership change, acquisition, or reorganization.			
<b>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 .....</b>		<b>19b</b>	<b>0.</b>
<b>c Subtract line 19b from line 19a. This is the refundable amount for a corporation electing to accelerate the research credit. Include this amount on line 32g of Form 1120 (or the applicable line of your return) .....</b>		<b>19c</b>	

**Part II 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	
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-		23	
24	Enter the amount from Form 8844, line 10 or line 12		24	
25	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 23 or line 24		25	0.
26	Subtract line 15 from line 13. If zero or less, enter -0-		26	117,957.
27	Add lines 19b and 25		27	
28	Subtract line 27 from line 26. If zero or less, enter -0-		28	117,957.
29a	Enter the investment credit from Form 3468, Part III, line 19 (attach Form 3468)	29a		
29b	Enter the work opportunity credit from Form 5884, line 10 or line 12	29b		
29c	Enter the alcohol and cellulosic biofuel fuels credit from Form 6478, line 14 or line 16	29c		
29d	Enter the low-income housing credit from Form 8586, Part II, line 18 or line 20	29d		
29e	Enter the applicable part of the amount of the renewable electricity, refined coal, and Indian coal production credit from Form 8835, Part II, line 36 or line 38	29e		
29f	Enter the credit for employer social security and Medicare taxes paid on certain employee tips from Form 8846, line 12	29f		
29g	Enter the qualified railroad track maintenance credit from Form 8900, line 12	29g		
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. Report the amount from line 32 (if smaller than the sum of lines 8, 24, and 30, see instructions) as indicated below or on the applicable line of your return:		32	0.
	<ul style="list-style-type: none"> <li>• Individuals. Form 1040, line 53 or Form 1040NR, line 49</li> <li>• Corporations. Form 1120, Schedule J, line 5c</li> <li>• Estates and trusts. Form 1041, Schedule G, line 2c</li> </ul>			

**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.

Name(s) shown on return

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

1 Enter the gross proceeds from sales or exchanges reported to you for 2009 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20

1

**Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year** (see instructions)

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) 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)
2 GOLDMAN SACHS HEDGE FUND PARTNERS, LLC						37.

3 Gain, if any, from Form 4684, line 43	3	
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 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: <b>Partnerships (except electing large partnerships) and S corporations.</b> 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. <b>Individuals, partners, S corporation shareholders, and all others.</b> 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.	7	37.
8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8	
9 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)	9	

**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):

GOLDMAN SACHS HEDGE FUND PARTNERS, LLC						9,151.
--	--	--	--	--	--	--------

11 Loss, if any, from line 7	11	
12 Gain, if any, from line 7 or amount from line 8, if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 35 and 42a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Combine lines 10 through 16	17	9,151.
18 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 39, 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	18a	
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	18b	9,151.

LHA For Paperwork Reduction Act Notice, see separate instructions.

**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, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
These columns relate to the properties on lines 19A through 19D.			
		Property A	Property B
		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:		
a	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.		
a	Additional depreciation after 1975 (see instructions)	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	
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).		
a	Soil, water, and land clearing expenses	27a	
b	Line 27a multiplied by applicable percentage	27b	
c	Enter the smaller of line 24 or 27b	27c	
28	If section 1254 property:		
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	If section 1255 property:		
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	

**Summary of Part III Gains.** Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 37. Enter the portion from other than casualty or theft on Form 4797, line 6	32

**Part IV** Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33
34	Recomputed depreciation (see instructions)	34
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35

Form **6251**

**Alternative Minimum Tax - Individuals**

OMB No. 1545-0074

**2009**

Department of the Treasury  
Internal Revenue Service (09)

▶ Attach to Form 1040 or Form 1040NR.

Attachment  
Sequence No. **32**

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

Your social security number

**CHRISTOPHER J & MARY P CHRISTIE**

[REDACTED]

**Part I 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, 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.)	1	437,478.
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	3	84,991.
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 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)	6	-3,772.
7	If filing Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 20 from that schedule	7	
8	Tax refund from Form 1040, line 10 or line 21	8	
9	Investment interest expense (difference between regular tax and AMT)	9	
10	Depletion (difference between regular tax and AMT)	10	
11	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	11	
12	Alternative tax net operating loss deduction	12	
13	Interest from specified private activity bonds exempt from the regular tax	13	
14	Qualified small business stock (7% of gain excluded under section 1202)	14	
15	Exercise of incentive stock options (excess of AMT income over regular tax income)	15	
16	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	16	
17	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	17	
18	Disposition of property (difference between AMT and regular tax gain or loss)	18	
19	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	19	
20	Passive activities (difference between AMT and regular tax income or loss) <b>SEE STATEMENT 24</b>	20	0.
21	Loss limitations (difference between AMT and regular tax income or loss)	21	
22	Circulation costs (difference between regular tax and AMT)	22	
23	Long-term contracts (difference between AMT and regular tax income)	23	
24	Mining costs (difference between regular tax and AMT)	24	45.
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	<b>Alternative minimum taxable income.</b> Combine lines 1 through 28. (If married filing separately and line 29 is more than \$216,900, see instructions.)	29	518,742.

**Part II Alternative Minimum Tax (AMT)**

30	Exemption. (If you were under age 24 at the end of 2009, 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 ..... \$46,700 Married filing jointly or qualifying widow(er) ..... 150,000 ..... 70,950 Married filing separately ..... 75,000 ..... 35,475 If line 29 is over the amount shown above for your filing status, see instructions.	30	0.
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	31	518,742.
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 for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here. • All others: If line 31 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 31 by 26% (.26). Otherwise, multiply line 31 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	32	141,408.
33	Alternative minimum tax foreign tax credit (see instructions)	33	319.
34	Tentative minimum tax. Subtract line 33 from line 32	34	141,089.
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	117,528.
36	<b>AMT.</b> Subtract line 35 from line 34. If zero or less, enter -0-. Enter here and on Form 1040, line 45	36	23,561.

**Part 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, enter the amount from line 3 of the worksheet in the instructions	37	518,742.
38	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see the instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38	2,618.
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, see instructions for the amount to enter	39	
40	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 38. Otherwise, add lines 38 and 39, and enter 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	2,618.
41	Enter the smaller of line 37 or line 40	41	2,618.
42	Subtract line 41 from line 37	42	516,124.
43	If line 42 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 42 by 26% (.26). Otherwise, multiply line 42 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	43	141,015.
44	Enter: <ul style="list-style-type: none"> <li>• \$67,900 if married filing jointly or qualifying widow(er),</li> <li>• \$33,950 if single or married filing separately, or</li> <li>• \$45,500 if head of household.</li> </ul>	44	67,900.
45	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	45	420,262.
46	Subtract line 45 from line 44. If zero or less, enter -0-	46	0.
47	Enter the smaller of line 37 or line 38	47	2,618.
48	Enter the smaller of line 46 or line 47	48	
49	Subtract line 48 from line 47	49	2,618.
50	Multiply line 49 by 15% (.15)	50	393.
If line 39 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go to line 51.			
51	Subtract line 47 from line 41	51	
52	Multiply line 51 by 25% (.25)	52	
53	Add lines 43, 50, and 52	53	141,408.
54	If line 37 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 37 by 26% (.26). Otherwise, multiply line 37 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	54	141,748.
55	Enter the smaller of line 53 or line 54 here and on line 32. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 32. Instead, enter it on line 4 of the worksheet in the instructions	55	141,408.



ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s)

CHRISTOPHER J & MARY P CHRISTIE

Social Security Number

[REDACTED]

Form Name	Description	Income	Adjustment				Form 6251 Other Adjustment
			Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251, Line 21	
K1 -	GOLDMAN SACHS HEDGE FUNDS PARTNERS, LLC						
*	REGULAR INCOME	-14,549.					45.
*	MINING COST, LN 24	45.					45.
*	AMT NET INCOME	-14,504.					
K1 -	CANTOR FITZGERALD LP						
*	REGULAR INCOME	2,136.					
*	AMT NET INCOME	2,136.					
	** TOTAL ADJ & PREF **						45.

Form **1116**

**ALTERNATIVE MINIMUM TAX  
Foreign Tax Credit**

OMB No. 1545-0121

**2009**

Department of the Treasury  
Internal Revenue Service (99)

(Individual, Estate, or Trust)

Attachment  
Sequence No. **19**

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

Name **CHRISTOPHER J & MARY P CHRISTIE** Identifying number as shown on page 1 of your tax return **[REDACTED]**

**CHRISTOPHER J & MARY P CHRISTIE**

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.

- a  Passive category income
- b  General category income
- c  Section 901(j) income
- d  Certain income re-sourced by treaty
- e  Lump-sum distributions

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.

**Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)**

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession ▶ <b>VARIOUS</b>				
1a Gross income from sources within country shown above and of the type checked above:	<b>3,178.</b>			<b>3,178.</b>
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) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See pages 13 and 14 of the instructions):</b>				
2 Expenses definitely related to the income on line 1a (attach statement)	<b>987.</b>			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income	<b>3,178.</b>			
e Gross income from all sources	<b>596,985.</b>			
f Divide line 3d by line 3e	<b>.005323</b>			
g Multiply line 3e by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use worksheet on page 14 of the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	<b>987.</b>			<b>987.</b>
7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 ▶				<b>2,191.</b>

**Part II Foreign Taxes Paid or Accrued**

Country	Credit is claimed for taxes (you must check one) (h) <input type="checkbox"/> Paid (i) <input checked="" type="checkbox"/> Accrued	Foreign taxes paid or accrued						(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
		In foreign currency			In U.S. dollars				
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends		
A								<b>319.</b>	<b>319.</b>
B									
C									
8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶								<b>319.</b>	<b>319.</b>

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **1116** (2009)

ALTERNATIVE MINIMUM TAX

**Part 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	319.	
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11	319.	
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		319.
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	2,191.	
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.)	16	2,191.	
17	<b>Individuals:</b> 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). <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption <b>SEE STATEMENT 25</b>	17	517,526.	
<i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>				
18	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"	18		.004234
19	<b>Individuals:</b> Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 41. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	19		141,408.
<i>Caution: If you are completing line 19 for separate category (lump-sum distributions), see pg. 19 of the instructions.</i>				
20	Multiply line 19 by line 18 (maximum amount of credit)	20		599.
21	Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV	21		319.

**Part IV Summary of Credits From Separate Parts III**

22	Credit for taxes on passive category income	22		
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	26		
27	Enter the smaller of line 19 or line 26	27		319.
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 47; Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	29		319.

**SCHEDULE H  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Household Employment Taxes**

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

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

▶ See separate instructions.

OMB No. 1545-1971

**2009**

Attachment  
Sequence No. 44

Name of employer

CHRISTOPHER J & MARY P CHRISTIE

Social security number

Employer identification number

**A** Did you pay any one household employee cash wages of \$1,700 or more in 2009? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions on page H-4 before you answer this question.)

- Yes. Skip lines B and C and go to line 1.  
 No. Go to line B.

**B** Did you withhold federal income tax during 2009 for any household employee?

- Yes. Skip line C and go to line 5.  
 No. Go to line C.

**C** Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2008 or 2009 to all household employees? (Do not count cash wages paid in 2008 or 2009 to your spouse, your child under age 21, or your parent.)

- No. Stop. Do not file this schedule.  
 Yes. Skip lines 1-9 and go to line 10 on page 2. (Calendar year taxpayers having no household employees in 2009 do not have to complete this form for 2009.)

**Part I Social Security, Medicare, and Federal Income Taxes**

1	Total cash wages subject to social security taxes (see page H-4)	1	23,760.
2	Social security taxes. Multiply line 1 by 12.4% (.124)	2	2,946.
3	Total cash wages subject to Medicare taxes (see page H-4)	3	23,760.
4	Medicare taxes. Multiply line 3 by 2.9% (.029)	4	689.
5	Federal income tax withheld, if any	5	2,338.
6	Total social security, Medicare, and federal income taxes. Add lines 2, 4, and 5	6	5,973.
7	Advance earned income credit (EIC) payments, if any	7	
8	Net taxes (subtract line 7 from line 6)	8	5,973.

**9** Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2008 or 2009 to all household employees? (Do not count cash wages paid in 2008 or 2009 to your spouse, your child under age 21, or your parent.)

- No. Stop. Include the amount from line 8 above on Form 1040, line 59, and check box b on that line. If you are not required to file Form 1040, see the line 9 instructions on page H-4.  
 Yes. Go to line 10 on page 2.

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

Schedule H (Form 1040) 2009

**Part II Federal Unemployment (FUTA) Tax**

	Yes	No
10 Did you pay unemployment contributions to only one state? (If you paid contributions to Michigan, check "No.")	<input checked="" type="checkbox"/>	
11 Did you pay all state unemployment contributions for 2009 by April 15, 2010? Fiscal year filers, see page H-5	<input checked="" type="checkbox"/>	
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?	<input checked="" type="checkbox"/>	

Next: If you checked the "Yes" box on all the lines above, complete Section A.  
If you checked the "No" box on any of the lines above, skip Section A and complete Section B.

**Section A**

13 Name of the state where you paid unemployment contributions	NJ	
14 State reporting number as shown on state unemployment tax return		
15 Contributions paid to your state unemployment fund (see page H-5)	0% RATE	
16 Total cash wages subject to FUTA tax (see page H-5)	15	7,000.
17 FUTA tax. Multiply line 16 by .008. Enter the result here, skip Section B, and go to line 26		56.

**Section B**

18 Complete all columns below that apply (if you need more space, see page H-5):

(a) Name of state	(b) State reporting number as shown on state unemployment tax return	(c) Taxable wages (as defined in state act)	(d) State experience rate period		(e) State experience rate	(f) Multiply col. (c) by 0.54	(g) Multiply col. (c) by col. (e)	(h) Subtract col. (g) from col. (f). If zero or less, enter -0-	(i) Contributions paid to state unemployment fund
			From	To					

19 Totals		19
20 Add columns (h) and (i) of line 19	20	
21 Total cash wages subject to FUTA tax (see the line 16 instructions on page H-5)		21
22 Multiply line 21 by 6.2% (.062)		22
23 Multiply line 21 by 5.4% (.054)	23	
24 Enter the smaller of line 20 or line 23 (Michigan employers must use the worksheet in the separate instructions and check here)	<input type="checkbox"/>	24
25 FUTA tax. Subtract line 24 from line 22. Enter the result here and go to line 26		25

**Part III Total Household Employment Taxes**

26 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0-	26	5,973.
27 Add line 17 (or line 25) and line 26 (see page H-5)	27	6,029.

28 Are you required to file Form 1040?  
 Yes. Stop. Include the amount from line 27 above on Form 1040, line 59, and check box b on that line. Do not complete Part IV below.  
 No. You may have to complete Part IV. See page H-5 for details.

**Part IV Address and Signature - Complete this part only if required. See the line 28 instructions on page H-5.**

Address (number and street) or P.O. box if mail is not delivered to street address \_\_\_\_\_ Apt., room, or suite no. \_\_\_\_\_  
 City, town or post office, state, and ZIP code \_\_\_\_\_

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature \_\_\_\_\_ Date \_\_\_\_\_

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code		EIN	Phone no.

Form **4952****Investment Interest Expense Deduction**

OMB No. 1545-0191

**2009**Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.

Attachment  
Sequence No. **51**

Name(s) shown on return

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE****Part I Total Investment Interest Expense**

1	Investment interest expense paid or accrued in 2009 (see instructions) <b>SEE STATEMENT 26</b>	1	4,014.
2	Disallowed investment interest expense from 2008 Form 4952, line 7	2	
3	<b>Total investment interest expense.</b> Add lines 1 and 2	3	4,014.

**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) <b>STMT 27</b>	4a	24,676.
b	Qualified dividends included on line 4a	4b	2,618.
c	Subtract line 4b from line 4a	4c	22,058.
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)	4e	
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	22,058.
5	Investment expenses (see instructions)	5	
6	<b>Net investment income.</b> Subtract line 5 from line 4h. If zero or less, enter -0-	6	22,058.

**Part III 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	<b>Investment interest expense deduction.</b> Enter the smaller of line 3 or 6. See instructions <b>STMT 28</b>	8	4,014.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4952** (2009)

ALTERNATIVE MINIMUM TAX

Form **4952**

**Investment Interest Expense Deduction**

OMB No. 1545-0191

**2009**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.

Attachment  
Sequence No. **51**

Name(s) shown on return

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

**Part I Total Investment Interest Expense**

1	Investment interest expense paid or accrued in 2009 (see instructions)	SEE STATEMENT 29	1	4,014.
2	Disallowed investment interest expense from 2008 Form 4952, line 7		2	
3	Total investment interest expense. Add lines 1 and 2		3	4,014.

**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	24,676.		
b	Qualified dividends included on line 4a	4b	2,618.		
c	Subtract line 4b from line 4a			4c	22,058.
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)	4e			
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	22,058.
5	Investment expenses (see instructions)			5	
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-			6	22,058.

**Part III 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	4,014.

REGULAR FORM 4952, LINE 8 4,014.  
 LESS RECOMPUTED FORM 4952, LINE 8 4,014.  
 INTEREST ADJUSTMENT - FORM 6251, LINE 9

Form **8801**

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

OMB No. 1545-1073

**2009**

Department of the Treasury  
Internal Revenue Service (99)

▶ See separate instructions.  
▶ Attach to Form 1040, 1040NR, or 1041.

Attachment  
Sequence No. 74

Name(s) shown on return

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

**Part I Net Minimum Tax on Exclusion Items**

1 Combine lines 1, 6, 7, and 11 of your 2008 Form 6251. Estates and trusts, see instructions	1	342,037.
2 Enter adjustments and preferences treated as exclusion items (see instructions)	2	80,979.
3 Minimum tax credit net operating loss deduction (see instructions)	3	( )
4 Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more than \$214,900 and you were married filing separately for 2008, see instructions	4	423,016.
5 Enter: \$69,950 if married filing jointly or qualifying widow(er) for 2008; \$46,200 if single or head of household for 2008; or \$34,975 if married filing separately for 2008. Estates and trusts, enter \$22,500	5	69,950.
6 Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2008; \$112,500 if single or head of household for 2008; or \$75,000 if married filing separately for 2008. Estates and trusts, enter \$75,000	6	150,000.
7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7	273,016.
8 Multiply line 7 by 25% (.25)	8	68,254.
9 Subtract line 8 from line 5. If zero or less, enter -0-. If under age 24 at the end of 2008, see instructions	9	1,696.
10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 1040NR filers, see instructions	10	421,320.
11 • If for 2008 you filed Form 2555 or 2555-EZ, see page 2 of the instructions for the amount to enter. • If for 2008 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 14a and 15, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 49 here. Form 1040NR filers, see instructions. • All others: If line 10 is \$175,000 or less (\$87,500 or less if married filing separately for 2008), multiply line 10 by 26% (.26). Otherwise, multiply line 10 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2008) from the result. Form 1040NR filers, see instructions.	11	114,015.
12 Minimum tax foreign tax credit on exclusion items (see instructions)	12	259.
13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13	113,756.
14 Enter the amount from your 2008 Form 6251, line 35, or 2008 Form 1041, Schedule I, line 55	14	87,041.
15 Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-	15	26,715.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8801 (2009)



**Part II** Current Year Nonrefundable and Refundable Credits and Carryforward to 2010

16	Enter the amount from your 2008 Form 6251, line 36, or 2008 Form 1041, Schedule I, line 56	16	26,725.
17	Enter the amount from line 15	17	26,715.
18	Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	10.
19	2008 credit carryforward. Enter the amount from your 2008 Form 8801, line 31	19	20.
20	Enter your 2008 unallowed qualified electric vehicle credit (see instructions)	20	
21	Combine lines 18 through 20. If zero or less, enter -0-	21	30.
22	Enter 50% (.50) of the total interest and penalties you paid before October 3, 2008, on alternative minimum tax attributable to the exercise of incentive stock options for 2007 or any prior year	22	
23	Add lines 21 and 22. If zero, stop here and see instructions	23	30.
24	Enter your 2009 regular income tax liability minus allowable credits (see instructions)	24	117,528.
25	Enter the amount from your 2009 Form 6251, line 34, or 2009 Form 1041, Schedule I, line 54	25	141,089.
26	Subtract line 25 from line 24. If zero or less, enter -0-	26	0.
27	Current year nonrefundable credit. Enter the smaller of line 23 or line 26. Also enter this amount on your 2009 Form 1040, line 53 (check box b); Form 1040NR, line 49 (check box b); or Form 1041, Schedule G, line 2d	27	0.
28	<p>• Estates and trusts: Leave lines 28 and 29 blank and go to line 30.</p> <p>• Individuals: Did you have a minimum tax credit carryforward to 2007 (on your 2006 Form 8801, line 26) or pay any interest or penalties before October 3, 2008, on alternative minimum tax attributable to the exercise of incentive stock options for 2007 or any prior year?</p> <p><input checked="" type="checkbox"/> No. Leave lines 28 and 29 blank and go to line 30.</p> <p><input type="checkbox"/> Yes. Complete Part IV of Form 8801 to figure the amount to enter</p>	28	
29	<p>Is line 28 more than line 27?</p> <p><input type="checkbox"/> No. Leave line 29 blank and go to line 30.</p> <p><input type="checkbox"/> Yes. Subtract line 27 from line 28. This is your current year refundable credit. Enter the result here and on your 2009 Form 1040, line 70 (check box c), or Form 1040NR, line 64 (check box c)</p>	29	
30	Credit carryforward to 2010. Subtract the larger of line 27 or line 28 from line 23. Keep a record of this amount because you may use it in future years	30	30.

**Part III Tax Computation Using Maximum Capital Gains Rates**

**Caution.** If you did not complete the 2008 Qualified Dividends and Capital Gain Tax Worksheet, the 2008 Schedule D Tax Worksheet, or Part V of the 2008 Schedule D (Form 1041), see the instructions before completing this part.

31	Enter the amount from Form 8801, line 10. If you filed Form 2555 or 2555-EZ for 2008, enter the amount from line 3 of the worksheet on page 2 of the instructions	31	421,320.
<p><b>Caution.</b> If for 2008 you filed Form 1040NR, 1041, 2555, or 2555-EZ, see page 4 of the instructions before completing lines 32, 33, and 34.</p>			
32	Enter the amount from line 6 of your 2008 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2008 Schedule D Tax Worksheet, or the amount from line 22 of the 2008 Schedule D (Form 1041), whichever applies*	32	3,497.
<p>If you figured your 2008 tax using the 2008 Qualified Dividends and Capital Gain Tax Worksheet, skip line 33 and enter the amount from line 32 on line 34. Otherwise, go to line 33.</p>			
33	Enter the amount from line 19 of your 2008 Schedule D (Form 1040), or line 14b, column (2), of the 2008 Schedule D (Form 1041)	33	
34	Add lines 32 and 33, and enter the smaller of that result or the amount from line 10 of your 2008 Schedule D Tax Worksheet	34	3,497.
35	Enter the smaller of line 31 or line 34	35	3,497.
36	Subtract line 35 from line 31	36	417,823.
37	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately for 2008), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2008) from the result. Form 1040NR filers, see instructions	37	113,490.
38	Enter: <ul style="list-style-type: none"> <li>• \$65,100 if married filing jointly or qualifying widow(er) for 2008,</li> <li>• \$32,550 if single or married filing separately for 2008,</li> <li>• \$43,650 if head of household for 2008, or</li> <li>• \$2,200 for an estate or trust.</li> </ul> Form 1040NR filers, see instructions	38	65,100.
39	Enter the amount from line 7 of your 2008 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2008 Schedule D Tax Worksheet, or the amount from line 23 of the 2008 Schedule D (Form 1041), whichever applies. If you did not complete either worksheet or Part V of the 2008 Schedule D (Form 1041), enter -0-. Form 1040NR filers, see instructions	39	327,411.
40	Subtract line 39 from line 38. If zero or less, enter -0-	40	0.
41	Enter the smaller of line 31 or line 32	41	3,497.
42	Enter the smaller of line 40 or line 41	42	
43	Subtract line 42 from line 41	43	3,497.
44	Multiply line 43 by 15% (.15)	44	525.
<p>If line 33 is zero or blank, skip lines 45 and 46 and go to line 47. Otherwise, go to line 45.</p>			
45	Subtract line 41 from line 35	45	
46	Multiply line 45 by 25% (.25)	46	
47	Add lines 37, 44, and 46	47	114,015.
48	If line 31 is \$175,000 or less (\$87,500 or less if married filing separately for 2008), multiply line 31 by 26% (.26). Otherwise, multiply line 31 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2008) from the result. Form 1040NR filers, see instructions	48	114,470.
49	Enter the smaller of line 47 or line 48 here and on line 11. If you filed Form 2555 or 2555-EZ for 2008, do not enter this amount on line 11. Instead, enter it on line 4 of the worksheet on page 2 of the instructions	49	114,015.

\* The 2008 Qualified Dividends and Capital Gain Tax Worksheet is on page 38 of the 2008 Instructions for Form 1040. The 2008 Schedule D Tax Worksheet is on page D-10 of the 2008 Instructions for Schedule D (Form 1040) (page 8 of the 2008 Instructions for Schedule D (Form 1041)).

**Part IV** Tentative Refundable Credit

50	Enter the amount from line 21		50
51	Enter the total of lines 18 and 20 from your 2007 Form 8801. If zero or less, enter -0-	51	
52	Enter the total of lines 18 and 20 from your 2008 Form 8801. If zero or less, enter -0-	52	
53	Enter the total of lines 18 and 20 from your 2009 Form 8801. If zero or less, enter -0-	53	
54	Add lines 51 through 53		54
55	Long-term unused minimum tax credit. Subtract line 54 from line 50 (if zero or less, enter -0- here and on line 59 and go to line 60)		55
56	Multiply line 55 by 50% (.50)		56
57	Enter the amount from your 2008 Form 8801, line 61		57
58	Enter the larger of line 56 or line 57		58
59	Enter the smaller of line 55 or line 58		59
60	Enter the amount from line 22		60
61	Add lines 59 and 60. Enter the result here and on line 28		61

**Foreign Tax Credit**

(Individual, Estate, or Trust)

Department of the Treasury  
Internal Revenue Service (99)

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

Name **CHRISTOPHER J & MARY P CHRISTIE** Identifying number as shown on page 1 of your tax return XXXXXXXXXX

**CHRISTOPHER J & MARY P CHRISTIE**

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.

- a  Passive category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  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.

**Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)**

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession ▶ <b>VARIOUS</b>				
1a Gross income from sources within country shown above and of the type checked above:	<b>7,032.</b>			<b>7,032.</b>
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) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See pages 13 and 14 of the instructions):</b>				
2 Expenses definitely related to the income on line 1a (attach statement)	<b>2,121.</b>			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income	<b>7,032.</b>			
e Gross income from all sources	<b>502,027.</b>			
f Divide line 3d by line 3e	<b>.014007</b>			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use worksheet on page 14 of the instructions)	<b>19.</b>			
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	<b>2,140.</b>			<b>2,140.</b>
7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 ▶				<b>4,892.</b>

**Part II Foreign Taxes Paid or Accrued**

Country	Credit is claimed for taxes (you must check one) (h) <input type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency			In U.S. dollars						
		Taxes withheld at source on:			Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))		
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends			(p) Rents and royalties	(q) Interest
A											
B											
C											

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

8

LHA For Paperwork Reduction Act Notice, see separate instructions.

**Part 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	259.	
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11	259.	
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		259.
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	4,892.	
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.)	16	4,892.	
17	Individuals: Enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 2). If you are a nonresident alien, 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 <i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>	17	421,392.	
18	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"	18		.011609
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 <i>Caution: If you are completing line 19 for separate category (lump-sum distributions), see pg. 19 of the instructions.</i>	19		114,015.
20	Multiply line 19 by line 18 (maximum amount of credit)	20		1,324.
21	Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV	21		259.

**Part IV Summary of Credits From Separate Parts III**

22	Credit for taxes on passive category income	22		
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	26		
27	Enter the smaller of line 19 or line 26	27		259.
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 47; Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	29		259.

Minimum Tax Foreign Tax Credit  
on Exclusion Items  
2008 Schedule D Tax Worksheet Recalculated

Name CHRISTOPHER J & MARY P CHRISTIE

1. Enter your taxable income from Form 8801, line 10 ..... 1. 421,320.
2. Enter your qualified dividends from Form 1040, line 9b ..... 2. N/A
3. Enter the amount from  
Form 4952, line 4g ..... 3. N/A
4. Enter the amount from  
Form 4952, line 4e\* ..... 4. N/A
5. Subtract line 4 from line 3. If zero or less, enter -0- ..... 5. N/A
6. Subtract line 5 from line 2. If zero or less, enter -0- ..... 6. N/A
7. Enter the smaller of line 15 or line 16 of Sch. D ..... 7. N/A
8. Enter the smaller of line 3 or line 4 ..... 8. N/A
9. Subtract line 8 from line 7. If zero or less, enter -0- ..... 9. N/A
10. Add lines 6 and 9 ..... 10. 3,497.
11. Add lines 18 and 19 of Schedule D ..... 11. \_\_\_\_\_
12. Enter the smaller of line 9 or line 11 ..... 12. \_\_\_\_\_
13. Subtract line 12 from line 10 ..... 13. 3,497.
14. Subtract line 13 from line 1. If zero or less, enter -0- ..... 14. 417,823.
15. Enter the smaller of:
  - The amount on line 1 or
  - \$30,650 if single or married filing separately;
  - \$61,300 if married filing jointly or qualifying widow(er); or
  - \$41,050 if head of household..... 15. 65,100.
16. Enter the smaller of line 14 or line 15 ..... 16. 65,100.
17. Subtract line 10 from line 1. If zero or less, enter -0- ..... 17. 417,823.
18. Enter the larger of line 16 or line 17 ..... 18. 417,823.  
If lines 15 and 16 are the same, skip lines 19 and 20 and go to line 21. Otherwise, go to line 19.
19. Subtract line 16 from line 15 ..... 19. \_\_\_\_\_  
If lines 1 and 15 are the same, skip lines 20 through 32 and go to line 33. Otherwise, go to line 20.
20. Enter the smaller of line 1 or line 13 ..... 20. 3,497.
21. Enter the amount from line 19 (if line 19 is blank, enter -0-) ..... 21. 0.
22. Subtract line 21 from line 20. If zero or less, enter -0- ..... 22. 3,497.
23. Multiply line 22 by 15% (.15) ..... 23. N/A  
If Schedule D, line 19, is zero or blank, skip lines 24 through 29 and go to line 30. Otherwise, go to line 24.
24. Enter the smaller of line 9 above or Schedule D, line 19 ..... 24. \_\_\_\_\_
25. Add lines 10 and 18 ..... 25. \_\_\_\_\_
26. Enter the amount from line 1 above ..... 26. \_\_\_\_\_
27. Subtract line 26 from line 25. If zero or less, enter -0- ..... 27. \_\_\_\_\_
28. Subtract line 27 from line 24. If zero or less, enter -0- ..... 28. \_\_\_\_\_
29. Multiply line 28 by 25% (.25) ..... 29. N/A  
If Schedule D, line 18, is zero or blank, skip lines 30 through 32 and go to line 33. Otherwise, go to line 30.
30. Add lines 18, 19, 22, and 28 ..... 30. \_\_\_\_\_
31. Subtract line 30 from line 1 ..... 31. \_\_\_\_\_
32. Multiply line 31 by 28% (.28) ..... 32. N/A
33. Figure the tax on the amount on line 18. Use the Tax Table or Tax Computation Worksheet, whichever applies ..... 33. N/A
34. Add lines 23, 29, 32, and 33 ..... 34. N/A
35. Figure the tax on the amount on line 1. Use the Tax Table or Tax Computation Worksheet, whichever applies ..... 35. N/A
36. Tax on all taxable income (including capital gains and qualified dividends). Enter the smaller of line 34 or  
line 35. Also include this amount on Form 1040, line 43 ..... 36. N/A

Form  
1116AMT - 8801

Minimum Tax Foreign Tax Credit  
on Exclusion Items  
Worksheet for Line 17

Name

CHRISTOPHER J & MARY P CHRISTIE



1 Enter the amount from Form 8801, line 4		423,016.
2 Enter 2008 worldwide 28% gains	N/A	
3 Multiply line 2 by 0.2000	N/A	
4 Enter 2008 worldwide 25% gains		
5 Multiply line 4 by 0.1071		
6 Enter 2008 worldwide 15% gains and qualified dividends	3,497.	
7 Multiply line 6 by 0.4643	1,624.	
8 Enter 2008 worldwide 0% gains and qualified dividends		
9 Multiply line 8 by 1.0000		
10 Add lines 5, 7, and 9		1,624.
11 Subtract line 8 from line 1. Enter the result here and on MTFTCE Form 1116, line 17		421,392.

# Gains and Losses From Section 1256 Contracts and Straddles

▶ Attach to your tax return.

Name(s) shown on tax return

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

- Check all applicable boxes (see instructions):
- A  Mixed straddle election
  - B  Straddle-by-straddle identification election
  - C  Mixed straddle account election
  - D  Net section 1256 contracts loss election

**Part I Section 1256 Contracts Marked to Market**

(a) Identification of account	(b) (Loss)	(c) Gain
1 FROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	3,503.	
2 Add the amounts on line 1 in columns (b) and (c)	2 ( 3,503 )	
3 Net gain or (loss). Combine line 2, columns (b) and (c)		3 -3,503.
4 Form 1099-B adjustments. See instructions and attach schedule		4
5 Combine lines 3 and 4		5 -3,503.
<i>Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions.</i>		
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
7 Combine lines 5 and 6		7 -3,503.
8 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)		8 -1,401.
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)		9 -2,102.

**Part II Gains and Losses From Straddles.** Attach a separate schedule listing each straddle and its components.

**Section A - Losses From Straddles**

(a) Description of property	(b) Date entered into or acquired			(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-
	(c) Date closed out or sold							
	Mo	Day	Yr					
10								
11 a 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**

(a) Description of property	(b) Date entered into or acquired			(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-
	(c) Date closed out or sold					
	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						13a
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)

(a) Description of property	(b) Date acquired			(c) Fair market value on last business day of tax year	(d) Cost or other basis as adjusted	(e) Unrecognized gain if column (c) is more than (d) enter difference. Otherwise, enter -0-
	Mo	Day	Yr			
14						



# Passive Activity Loss Limitations

Department of the Treasury  
Internal Revenue Service (99)

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

**2009**  
Attachment  
Sequence No. **88**

Name(s) shown on return <b>CHRISTOPHER J &amp; MARY P CHRISTIE</b>	Identifying number <b>[REDACTED]</b>
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**Part I 2009 Passive Activity Loss** Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.

<b>Rental Real Estate Activities With Active Participation</b> (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))	1a		
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))	1c		
d Combine lines 1a, 1b, and 1c		1d	
<b>Commercial Revitalization Deductions From Rental Real Estate Activities</b>			
2a Commercial revitalization deductions from Worksheet 2, column (a)	2a		
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b		
c Add lines 2a and 2b		2c	
<b>All Other Passive Activities</b>			
3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	2,136.	
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b		
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c		
d Combine lines 3a, 3b, and 3c		3d	
4 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			4
If line 4 is a loss and:	<ul style="list-style-type: none"> <li>• Line 1d is a loss, go to Part II.</li> <li>• Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.</li> <li>• Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.</li> </ul>		2,136.

**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	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 9, enter -0- on line 10. Otherwise, go to line 8.		
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 separately, 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.		

**Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**

Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12 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	

**Part 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 2009. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return	16	<b>SEE STATEMENT 31</b>

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.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c					

**Worksheet 2 - For Form 8582, Lines 2a and 2b** (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

**Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c** (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
SEE ATTACHED STATEMENT FOR WORKSHEET 3					
Total. Enter on Form 8582, lines 3a, 3b, and 3c	2,136.				

**Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14** (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
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
Total				

**Reportable Transaction Disclosure Statement**

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

Name(s) shown on return (Individuals enter last name, first name, middle initial)

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

Number, street, and room or suite no.

City or town, state, and ZIP code

**MENDHAM, NJ 07945**

**A** If you are filing more than one Form 8886 with your tax return, sequentially number each Form 8886 and enter the statement number for this Form 8886 ..... ▶ Statement number 1 of 7

**B** Enter the form number of the tax return to which this form is attached or related ..... ▶ **1040**

Enter the year of the tax return identified above ..... ▶ **2009**

Is this Form 8886 being filed with an amended tax return?  Yes  No

**C** Check the box(es) that apply (see instructions).  Initial year filer  Protective disclosure

**1a** Name of reportable transaction

**LOSS TRANSACTIONS - SECTION 988**

**1b** Initial year participated in transaction

**2007**

**1c** Reportable transaction or tax shelter registration number (9 digits or 11 digits)

**2** Identify the type of reportable transaction. Check all boxes that apply (see instructions).

- a  Listed
- b  Confidential
- c  Contractual protection
- d  Loss
- e  Brief asset holding period
- f  Transaction of interest

**3** If you checked box 2a or 2f, enter the published guidance number for the listed transaction or transaction of interest ..... ▶ **N/A**

**4** Enter the number of "same as or substantially similar" transactions reported on this form ..... ▶ **VARIOUS**

**5** If you participated in the transaction through another entity, check all applicable boxes and provide the information below for the entity (see instructions). (Attach additional sheets, if necessary.)

- a** Type of entity:
- |  |   |
|--|---|
| <input type="checkbox"/> Partnership   | <input checked="" type="checkbox"/> Partnership |
| <input type="checkbox"/> S corporation | <input type="checkbox"/> S corporation          |
| <input type="checkbox"/> Trust         | <input type="checkbox"/> Trust                  |
| <input type="checkbox"/> Foreign       | <input type="checkbox"/> Foreign                |

**b** Name  
 ▶ **GOLDMAN SACHS HEDGE FUND PARTNERS, LLC**

**c** Employer identification number (EIN), if known ..... ▶ [REDACTED]

**d** Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received) ..... ▶ **NONE**

**6** Enter below the name and address of each individual or entity to whom you paid a fee with regard to the transaction if that individual or entity promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. (Attach additional sheets, if necessary.)

a Name	Identifying number (if known)	Fees paid
Number, street, and room or suite no.		\$

City or town, state, and ZIP code

b Name	Identifying number (if known)	Fees paid
Number, street, and room or suite no.		\$

City or town, state, and ZIP code



7 Facts

a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions).

- Deductions
- Exclusions from gross income
- Tax credits
- Other \_\_\_\_\_
- Capital loss
- Nonrecognition of gain
- Deferral
- Ordinary loss
- Adjustments to basis
- Absence of adjustments to basis

b Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction for all affected years. Include facts of each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Include in your description your participation in the transaction and all related transactions regardless of the year in which they were entered into. Also, include a description of any tax result protection with respect to the transaction.

TAXPAYER IS A PARTNER IN GOLDMAN SACHS HEDGE FUND PARTNERS, LLC WHICH IS A PARTNER IN VARIOUS PARTNERSHIPS THAT HAVE DIRECTLY FILED THEIR RESPECTIVE FORMS 8866 ACCORDING TO IRS REGULATIONS. THIS EXPLANATION IS FOR ALL FORMS 8886 MADE PART OF THIS TAX RETURN.

8 Identify all tax-exempt, foreign, and related entities and individuals involved in the transaction. Check the appropriate box(es) (see instructions). Include their names(s), identifying number(s), address(es), and a brief description of their involvement. For each foreign entity, identify its country of incorporation or existence. For each related entity, explain how it is related. (Attach additional sheets, if necessary.)

a Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

b Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

### Reportable Transaction Disclosure Statement

OMB No. 1545-1800

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

Attachment  
Sequence No. **137**

Name(s) shown on return (individuals enter last name, first name, middle initial)

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

Number, street, and room or suite no.

City or town, state, and ZIP code

**MENDHAM, NJ 07945**

**A** If you are filing more than one Form 8886 with your tax return, sequentially number each Form 8886 and enter the statement number for this Form 8886 ▶ Statement number 2 of 7

**B** Enter the form number of the tax return to which this form is attached or related ▶ 1040

Enter the year of the tax return identified above ▶ 2009

Is this Form 8886 being filed with an amended tax return?  Yes  No

**C** Check the box(es) that apply (see instructions).  Initial year filer  Protective disclosure

**1a** Name of reportable transaction

#### LOSS TRANSACTIONS- SECTION 988

**1b** Initial year participated in transaction

2006

**1c** Reportable transaction or tax shelter registration number (9 digits or 11 digits)

**2** Identify the type of reportable transaction. Check all boxes that apply (see instructions).

- a**  Listed **c**  Contractual protection **e**  Brief asset holding period  
**b**  Confidential **d**  Loss **f**  Transaction of interest

**3** If you checked box 2a or 2f, enter the published guidance number for the listed transaction or transaction of interest ▶

**4** Enter the number of "same as or substantially similar" transactions reported on this form ▶ VARIOUS

**5** If you participated in the transaction through another entity, check all applicable boxes and provide the information below for the entity (see instructions). (Attach additional sheets, if necessary.)

- a** Type of entity:  Partnership  Partnership  
 S corporation  S corporation  
 Trust  Trust  
 Foreign  Foreign

**b** Name ▶ GOLDMAN SACHS HEDGE FUND PARTNERS, LLC

**c** Employer identification number (EIN), if known ▶ [REDACTED]

**d** Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received) ▶ NONE

**6** Enter below the name and address of each individual or entity to whom you paid a fee with regard to the transaction if that individual or entity promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. (Attach additional sheets, if necessary.)

a Name	Identifying number (if known)	Fees paid \$
--------	-------------------------------	--------------

Number, street, and room or suite no.

City or town, state, and ZIP code

b Name	Identifying number (if known)	Fees paid \$
--------	-------------------------------	--------------

Number, street, and room or suite no.

City or town, state, and ZIP code

7 Facts

a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions).

- Deductions
- Exclusions from gross income
- Tax credits
- Other \_\_\_\_\_
- Capital loss
- Nonrecognition of gain
- Deferral
- Ordinary loss
- Adjustments to basis
- Absence of adjustments to basis

b Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction for all affected years. Include facts of each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Include in your description your participation in the transaction and all related transactions regardless of the year in which they were entered into. Also, include a description of any tax result protection with respect to the transaction.

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8 Identify all tax-exempt, foreign, and related entities and individuals involved in the transaction. Check the appropriate box(es) (see instructions). Include their names(s), identifying number(s), address(es), and a brief description of their involvement. For each foreign entity, identify its country of incorporation or existence. For each related entity, explain how it is related. (Attach additional sheets, if necessary.)

a Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

b Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

**Reportable Transaction Disclosure Statement**

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

Name(s) shown on return (individuals enter last name, first name, middle initial)

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

Number, street, and room or suite no.

City or town, state, and ZIP code

**MENDHAM, NJ 07945**

A If you are filing more than one Form 8886 with your tax return, sequentially number each Form 8886 and enter the statement number for this Form 8886 ▶ Statement number 3 of 7

B Enter the form number of the tax return to which this form is attached or related ▶ 1040

Enter the year of the tax return identified above ▶ 2009

Is this Form 8886 being filed with an amended tax return?  Yes  No

C Check the box(es) that apply (see instructions).  Initial year filer  Protective disclosure

1a Name of reportable transaction

**LOSS TRANSACTIONS- SECTION 988**

1b Initial year participated in transaction

1c Reportable transaction or tax shelter registration number (9 digits or 11 digits)

2006

2 Identify the type of reportable transaction. Check all boxes that apply (see instructions).

- a  Listed
- b  Confidential
- c  Contractual protection
- d  Loss
- e  Brief asset holding period
- f  Transaction of interest

3 If you checked box 2a or 2f, enter the published guidance number for the listed transaction or transaction of interest ▶ \_\_\_\_\_

4 Enter the number of "same as or substantially similar" transactions reported on this form ▶ VARIOUS

5 If you participated in the transaction through another entity, check all applicable boxes and provide the information below for the entity (see instructions). (Attach additional sheets, if necessary.)

- a Type of entity:
 

<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Partnership
<input type="checkbox"/> S corporation	<input type="checkbox"/> S corporation
<input type="checkbox"/> Trust	<input type="checkbox"/> Trust
<input type="checkbox"/> Foreign	<input type="checkbox"/> Foreign

b Name  
 ▶ GOLDMAN SACHS HEDGE FUND PARTNERS, LLC

c Employer identification number (EIN), if known ▶ \_\_\_\_\_

d Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received) ▶ NONE

6 Enter below the name and address of each individual or entity to whom you paid a fee with regard to the transaction if that individual or entity promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. (Attach additional sheets, if necessary.)

a Name	Identifying number (if known)	Fees paid
Number, street, and room or suite no.		\$

Number, street, and room or suite no.

City or town, state, and ZIP code

b Name	Identifying number (if known)	Fees paid
Number, street, and room or suite no.		\$

Number, street, and room or suite no.

City or town, state, and ZIP code

7 Facts

a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions).

- Deductions
- Exclusions from gross income
- Tax credits
- Other \_\_\_\_\_
- Capital loss
- Nonrecognition of gain
- Deferral
- Ordinary loss
- Adjustments to basis
- Absence of adjustments to basis

b Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction for all affected years. Include facts of each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Include in your description your participation in the transaction and all related transactions regardless of the year in which they were entered into. Also, include a description of any tax result protection with respect to the transaction.

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a Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

b Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	



# Reportable Transaction Disclosure Statement

OMB No. 1545-1800

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

Attachment  
 Sequence No. **137**

Name(s) shown on return (Individuals enter last name, first name, middle initial)

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

Number, street, and room or suite no.

City or town, state, and ZIP code

**MENDHAM, NJ 07945**

- A** If you are filing more than one Form 8886 with your tax return, sequentially number each Form 8886 and enter the statement number for this Form 8886. Statement number 4 of 7
- B** Enter the form number of the tax return to which this form is attached or related. 1040
- Enter the year of the tax return identified above. 2009

Is this Form 8886 being filed with an amended tax return?  Yes  No

- C** Check the box(es) that apply (see instructions).  Initial year filer  Protective disclosure

**1a** Name of reportable transaction

**LOSS TRANSACTIONS- SECTION 988**

**1b** Initial year participated in transaction

**2008**

**1c** Reportable transaction or tax shelter registration number (9 digits or 11 digits)

**2** Identify the type of reportable transaction. Check all boxes that apply (see instructions).

- a**  Listed **c**  Contractual protection **e**  Brief asset holding period
- b**  Confidential **d**  Loss **f**  Transaction of interest

**3** If you checked box 2a or 2f, enter the published guidance number for the listed transaction or transaction of interest

**4** Enter the number of "same as or substantially similar" transactions reported on this form. VARIOUS

**5** If you participated in the transaction through another entity, check all applicable boxes and provide the information below for the entity (see instructions). (Attach additional sheets, if necessary.)

- a** Type of entity:
- |  |   |
|--|---|
| <input type="checkbox"/> Partnership   | <input checked="" type="checkbox"/> Partnership |
| <input type="checkbox"/> S corporation | <input type="checkbox"/> S corporation          |
| <input type="checkbox"/> Trust         | <input type="checkbox"/> Trust                  |
| <input type="checkbox"/> Foreign       | <input type="checkbox"/> Foreign                |

**b** Name  
 ▶ **GOLDMAN SACHS HEDGE FUND PARTNERS, LLC**

**c** Employer identification number (EIN), if known. [REDACTED]

**d** Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received). NONE

**6** Enter below the name and address of each individual or entity to whom you paid a fee with regard to the transaction if that individual or entity promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. (Attach additional sheets, if necessary.)

a	Name	Identifying number (if known)	Fees paid
	Number, street, and room or suite no.		\$
	City or town, state, and ZIP code		

b	Name	Identifying number (if known)	Fees paid
	Number, street, and room or suite no.		\$
	City or town, state, and ZIP code		

7 Facts

a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions).

- Deductions
- Exclusions from gross income
- Tax credits
- Other \_\_\_\_\_
- Capital loss
- Nonrecognition of gain
- Deferral
- Ordinary loss
- Adjustments to basis
- Absence of adjustments to basis

b Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction for all affected years. Include facts of each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Include in your description your participation in the transaction and all related transactions regardless of the year in which they were entered into. Also, include a description of any tax result protection with respect to the transaction.

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a Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

b Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

### Reportable Transaction Disclosure Statement

OMB No. 1545-1800

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

Attachment  
Sequence No. **137**

Name(s) shown on return (individuals enter last name, first name, middle initial)

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

Number, street, and room or suite no.

City or town, state, and ZIP code

**MENDHAM, NJ 07945**

- A** If you are filing more than one Form 8886 with your tax return, sequentially number each Form 8886 and enter the statement number for this Form 8886 ▶ Statement number 5 of 7
- B** Enter the form number of the tax return to which this form is attached or related ▶ 1040
- Enter the year of the tax return identified above ▶ 2009

Is this Form 8886 being filed with an amended tax return?  Yes  No

- C** Check the box(es) that apply (see instructions).  Initial year filer  Protective disclosure

**1a** Name of reportable transaction

**LOSS TRANSACTIONS- SECTION 988**

**1b** Initial year participated in transaction

**2008**

**1c** Reportable transaction or tax shelter registration number (9 digits or 11 digits)

**2** Identify the type of reportable transaction. Check all boxes that apply (see instructions).

- a**  Listed **c**  Contractual protection **e**  Brief asset holding period  
**b**  Confidential **d**  Loss **f**  Transaction of interest

**3** If you checked box 2a or 2f, enter the published guidance number for the listed transaction or transaction of interest ▶

**4** Enter the number of "same as or substantially similar" transactions reported on this form ▶ **VARIOUS**

**5** If you participated in the transaction through another entity, check all applicable boxes and provide the information below for the entity (see instructions). (Attach additional sheets, if necessary.)

- a** Type of entity:  Partnership  Partnership  
 S corporation  S corporation  
 Trust  Trust  
 Foreign  Foreign

**b** Name ▶ **GOLDMAN SACHS HEDGE FUND PARTNERS, LLC**

**c** Employer identification number (EIN), if known ▶

**d** Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received) ▶ **NONE**

**6** Enter below the name and address of each individual or entity to whom you paid a fee with regard to the transaction if that individual or entity promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. (Attach additional sheets, if necessary.)

<b>a</b> Name	Identifying number (if known)	Fees paid
Number, street, and room or suite no.		\$
City or town, state, and ZIP code		

<b>b</b> Name	Identifying number (if known)	Fees paid
Number, street, and room or suite no.		\$
City or town, state, and ZIP code		

7 Facts

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- Tax credits
- Other \_\_\_\_\_
- Capital loss
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a Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

b Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

### Reportable Transaction Disclosure Statement

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Identifying number

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▶ Statement number 6 of 7

B Enter the form number of the tax return to which this form is attached or related

▶ 1040

Enter the year of the tax return identified above

▶ 2009

Is this Form 8886 being filed with an amended tax return?

Yes  No

C Check the box(es) that apply (see instructions).

Initial year filer  Protective disclosure

1a Name of reportable transaction

**LOSS TRANSACTIONS- SECTION 988**

1b Initial year participated in transaction

**2008**

1c Reportable transaction or tax shelter registration number (9 digits or 11 digits)

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- b  Confidential
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▶ **VARIOUS**

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a Type of entity:

- Partnership
- S corporation
- Trust
- Foreign
- Partnership
- S corporation
- Trust
- Foreign

b Name

▶ **GOLDMAN SACHS HEDGE FUND PARTNERS, LLC**

c Employer identification number (EIN), if known

d Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received)

**NONE**

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Number, street, and room or suite no.		
City or town, state, and ZIP code		

b Name	Identifying number (if known)	Fees paid \$
Number, street, and room or suite no.		
City or town, state, and ZIP code		

7 Facts

a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions).

- Deductions       Exclusions from gross income       Tax credits       Other \_\_\_\_\_
- Capital loss       Nonrecognition of gain       Deferral
- Ordinary loss       Adjustments to basis       Absence of adjustments to basis

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a Type of entity:       Tax-exempt       Foreign       Related

Name	Identifying number
Address	
Description	

b Type of entity:       Tax-exempt       Foreign       Related

Name	Identifying number
Address	
Description	

### Reportable Transaction Disclosure Statement

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

Name(s) shown on return (individuals enter last name, first name, middle initial)

Identifying number

**CHRISTOPHER J & MARY P CHRISTIE**

Number, street, and room or suite no.

[REDACTED]

City or town, state, and ZIP code

**MENDHAM, NJ 07945**

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Enter the year of the tax return identified above. 2009

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C Check the box(es) that apply (see instructions).  Initial year filer  Protective disclosure

1a Name of reportable transaction

**LOSS TRANSACTIONS- SECTION 988**

1b Initial year participated in transaction

**2009**

1c Reportable transaction or tax shelter registration number (9 digits or 11 digits)

[REDACTED]

2 Identify the type of reportable transaction. Check all boxes that apply (see instructions).

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- b  Confidential
- c  Contractual protection
- d  Loss
- e  Brief asset holding period
- f  Transaction of interest

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4 Enter the number of "same as or substantially similar" transactions reported on this form. ▶ \_\_\_\_\_

5 If you participated in the transaction through another entity, check all applicable boxes and provide the information below for the entity (see instructions). (Attach additional sheets, if necessary.)

- a Type of entity:
  - Partnership
  - S corporation
  - Trust
  - Foreign
- b Name ▶ \_\_\_\_\_

- c Employer identification number (EIN), if known ▶ \_\_\_\_\_
- d Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received) ▶ \_\_\_\_\_

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Number, street, and room or suite no.		\$
City or town, state, and ZIP code		

b Name	Identifying number (if known)	Fees paid
Number, street, and room or suite no.		\$
City or town, state, and ZIP code		

7 Facts

a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions).

- Deductions
- Exclusions from gross income
- Tax credits
- Other \_\_\_\_\_
- Capital loss
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a Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	

b Type of entity:  Tax-exempt  Foreign  Related

Name	Identifying number
Address	
Description	



## Form 1116

## U.S. and Foreign Source Income Summary

NAME

CHRISTOPHER J &amp; MARY P CHRISTIE

INCOME TYPE	TOTAL	U.S.	FOREIGN GENERAL
Compensation	517,240.	517,240.	
Dividends/Distributions	5,261.	5,261.	
Interest	9,666.	9,666.	
Capital Gains	14,571.	14,571.	
Business/Profession			
Rent/Royalty	17,684.	17,662.	22.
State/Local Refunds			
Partnership/S Corporation	SEE STATEMENT 32	19,798.	3,156.
Trust/Estate			
Other Income	9,609.	9,609.	
Gross Income	596,985.	593,807.	3,178.

## Less:

Section 911 Exclusion			
Capital Losses	17,571.	17,571.	
Capital Gains Tax Adjustment			
Total Income - Form 1116	579,414.	576,236.	3,178.

## Deductions:

Business/Profession Expenses	35,367.	34,380.	987.
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			
Capital Gains Tax Adjustment			
Total Deductions	35,367.	34,380.	987.
Adjusted Gross Income	544,047.	541,856.	2,191.

## Less Itemized Deductions:

Specifically Allocated	19,777.	19,777.	
Home Mortgage Interest	4,097.	4,097.	
Other Interest	626.	626.	
Ratably Allocated	82,069.	81,632.	437.
Total Adjustments to Adjusted Gross Income	106,569.	106,132.	437.
Taxable Income Before Exemptions	437,478.	435,724.	1,754.

Form 1116

Allocation of Itemized Deductions

NAME

CHRISTOPHER J & MARY P CHRISTIE



	Total Itemized Deductions	Itemized Deductions After Sec. 68 Reduction	Form 1116		
			Specifically U.S.	Specifically Foreign	Ratable
Taxes	84,991.	82,069.			82,069.
Interest - Not Including Investment Interest	4,243.	4,097.	4,097.		
Contributions	20,481.	19,777.	19,777.		
Miscellaneous Deductions Subject to 2%					
Other Miscellaneous Deductions - Not Including Gambling Losses					
Foreign Adjustment					
Total Itemized Deductions Subject to Sec. 68	109,715.	105,943.			
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental					
Investment Interest	626.	626.	626.		
Post Aug. 27 Contributions					
Casualty Losses					
Gambling Losses					
Foreign Adjustment					
Total Itemized Deductions	110,341.				
Total Allowed on Schedule A		106,569.	24,500.		82,069.

NAME

CHRISTOPHER J & MARY P CHRISTIE

Foreign Income Category

GENERAL LIMITATION INCOME

Regular	2004	2005	2006	2007	2008	2009
1. Foreign tax paid/accrued						
2. FTC carryback to 2009 for amended returns						319.
3. Reduction allocated to excluded income						
4. Foreign tax available						319.
5. Maximum credit allowable						474.
6. Unused foreign tax ( + ) or excess of limit ( - )						
7. Foreign tax carryback					-706.	-155.
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-706.	-155.
Total foreign taxes from all available years to be carried to next year						

	1999	2000	2001	2002	2003
1. Foreign tax paid/accrued					
2. FTC carryback to 2009 for amended returns					
3. Reduction allocated to excluded income					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax ( + ) or excess of limit ( - )					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Less treaty adjustment					
10. Foreign tax or excess limit remaining					

NAME

CHRISTOPHER J & MARY P CHRISTIE

Foreign Income Category

GENERAL LIMITATION INCOME

AMT	2004	2005	2006	2007	2008	2009
1. Foreign tax paid/accrued						319.
2. FTC carryback to 2009 for amended returns						
3. Reduction allocated to excluded income						
4. Foreign tax available						319.
5. Maximum credit allowable						599.
6. Unused foreign tax ( + ) or excess of limit ( - )					-1,065.	-280.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-1,065.	-280.
Total foreign taxes from all available years to be carried to next year						

	1999	2000	2001	2002	2003
1. Foreign tax paid/accrued					
2. FTC carryback to 2009 for amended returns					
3. Reduction allocated to excluded income					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax ( + ) or excess of limit ( - )					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Less treaty adjustment					
10. Foreign tax or excess limit remaining					

NAME

CHRISTOPHER J & MARY P CHRISTIE

Wages and Salaries:



Source	Amount
Total Foreign Wages and Salaries	

Business and Profession Income:

Source	Amount
GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	1,578.
GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	1,578.
Total Foreign Business and Profession Income	3,156.

Reduction for Foreign Earned Income Exclusion/Deduction:

Total Foreign Wages and Salaries	
Foreign Earned Income Exclusion/Deduction	
Percent Applicable to Foreign Wages and Salaries	

Reduction Amount

Wages and Salaries Included on Form 1116, line 1

Total Foreign Business and Profession Income	
Foreign Earned Income Exclusion/Deduction	
Percent Applicable to Foreign Business and Profession Income	

Reduction Amount

Business and Profession Income Included on Form 1116, line 1 3,156.

Detail General Business Credit Carryforward Worksheet

CHRISTOPHER J & MARY P CHRISTIE

Form and Type	Year Carried From	Amount Available for Carryover	Amount Used in 2009	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Net Carryover
LARGE PARTNERSHIP - GENERAL CREDIT	2007	34.										34.
LARGE PARTNERSHIP - GENERAL CREDIT	2009	5.										5.
<b>Totals</b>		<b>39.</b>										<b>39.</b>

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FORM 1040 MISCELLANEOUS INCOME STATEMENT 1

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DESCRIPTION	AMOUNT
ANCELLATION OF DEBT - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	458.
TOTAL TO FORM 1040, LINE 21	458.

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FORM 1040

PENSIONS AND ANNUITIES

STATEMENT 2

THRIFT SAVINGS PLAN

AMOUNT RECEIVED THIS YEAR	142,035.
NONTAXABLE AMOUNT (ROLLOVER)	142,035.
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D	

0.

TOTAL INCLUDED IN FORM 1040, LINE 16B





FORM 1040

STATE AND LOCAL INCOME TAX REFUNDS

STATEMENT 3

	2008	2007	2006
ROSS STATE/LOCAL INC TAX REFUNDS LESS: TAX PAID IN FOLLOWING YEAR	NEW JERSEY 4,167.		
NET TAX REFUNDS NEW JERSEY	4,167.		
TOTAL NET TAX REFUNDS	4,167.		



. IS THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR FILING STATUS?

NO. STOP. MULTIPLY \$3,650 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42.

YES. CONTINUE

. MULTIPLY \$3,650 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D . . . . . 21,900.

. ENTER THE AMOUNT FROM FORM 1040, LINE 38 . . . . . 544,047.

. ENTER THE AMOUNT FOR YOUR FILING STATUS . . . . . 250,200.

- SINGLE \$166,800
- MARRIED FILING JOINTLY OR WIDOW(ER) \$250,200
- MARRIED FILING SEPARATELY \$125,100
- HEAD OF HOUSEHOLD \$208,500

. SUBTRACT LINE 4 FROM LINE 3 . . . . . 293,847.

. IS LINE 5 MORE THAN \$122,500 (\$61,250 IF MARRIED FILING SEPARATELY)?

[X] YES. MULTIPLY \$2,433 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D. ENTER THE RESULT HERE AND ON FORM 1040, LINE 42. DO NOT COMPLETE THE REST OF THIS WORKSHEET.

[ ] NO. DIVIDE LINE 5 BY \$2,500 (\$1,250 IF MARRIED FILING SEPARATELY). IF THE RESULT IS NOT A WHOLE NUMBER, INCREASE IT TO THE NEXT WHOLE NUMBER (FOR EXAMPLE, INCREASE 0.0004 TO 1) . . . . . 14,598.

. MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT AS A DECIMAL . . . . .

. MULTIPLY LINE 2 BY LINE 7 . . . . .

. DIVIDE LINE 8 BY 3 . . . . .

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



FORM 1040	TAXABLE STATE AND LOCAL INCOME TAX REFUNDS		STATEMENT	5
	2008	2007	2006	
ET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.	4,167.			
ESS:REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION	4,167.			
NET REFUNDS FOR RECALCULATION				
TOTAL ITEMIZED DEDUCTIONS BEFORE PHASEOUT	104,817.			
DEDUCTION NOT SUBJ TO PHASEOUT	1,243.			
NET REFUNDS FROM LINE 1				
LINE 2 MINUS LINES 3 AND 4	103,574.			
MULT LN 5 BY APPL SEC. 68 PCT	27,620.			
PRIOR YEAR AGI	446,854.			
ITEM. DED. PHASEOUT THRESHOLD	159,950.			
SUBTRACT LINE 8 FROM LINE 7 (IF ZERO OR LESS, SKIP LINES 10 THROUGH 15, AND ENTER AMOUNT FROM LINE 1 ON LINE 16)	286,904.			
0 MULT LN 9 BY APPL SEC. 68 PCT	2,869.			
1 ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10)	100,705.			
2 ITEM DED. NOT SUBJ TO PHASEOUT	1,243.			
3A TOTAL ADJ. ITEMIZED DEDUCTIONS	101,948.			
3B PRIOR YR. STD. DED. AVAILABLE	11,900.			
4 PRIOR YR. ALLOWABLE ITEM. DED.	101,948.			
5 SUBTRACT THE GREATER OF LINE 13A OR LINE 13B FROM LINE 14				
6 TAXABLE REFUNDS (LESSER OF LINE 15 OR LINE 1)				
7 ALLOWABLE PRIOR YR. ITEM. DED.	101,948.			
8 PRIOR YEAR STD. DED. AVAILABLE	11,900.			
9 SUBTRACT LINE 18 FROM LINE 17	90,048.			
0 LESSER OF LINE 16 OR LINE 19				
1 PRIOR YEAR TAXABLE INCOME	330,908.			
2 AMOUNT TO INCLUDE ON FORM 1040, LINE 10				
* IF LINE 21 IS -0- OR MORE, USE AMOUNT FROM LINE 20				
* IF LINE 21 IS A NEGATIVE AMOUNT, NET LINES 20 AND 21				0.
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2006				
TOTAL TO FORM 1040, LINE 10				0.

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FORM 1040 TAX-EXEMPT INTEREST STATEMENT 6

NAME OF PAYER	AMOUNT
GOLDMAN SACHS	8,125.
FORM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	20.
TOTAL TO FORM 1040, LINE 8B	8,145.

FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 7

EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
CANTOR FITZGERALD	517,240.	124,267.	43,500.	26.	6,622.	7,656.
TOTALS	517,240.	124,267.	43,500.	26.	6,622.	7,656.

FORM 1040 QUALIFIED DIVIDENDS STATEMENT 8

NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
GOLDMAN SACHS	1,311.	981.
FORM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	3,840.	1,552.
FORM K-1 - CANTOR FITZGERALD LP	85.	85.
TOTAL INCLUDED IN FORM 1040, LINE 9B		2,618.

SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 9

DESCRIPTION	AMOUNT
FORM K-1 - CANTOR FITZGERALD LP	9.
CANTOR FITZGERALD	43,500.
STATE DISABILITY INSURANCE - CANTOR FITZGERALD	26.
STATE DISABILITY INSURANCE - CANTOR FITZGERALD	145.
STATE UNEMPLOYMENT INSURANCE - CANTOR FITZGERALD	123.
NEW JERSEY 2ND QTR ESTIMATE PAYMENTS	9.
NEW JERSEY 3RD QTR ESTIMATE PAYMENTS	21.
NEW JERSEY PRIOR YEAR OVERPAYMENT APPLIED	4,167.

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EW YORK 2ND QTR ESTIMATE PAYMENTS	9.
EW YORK 3RD QTR ESTIMATE PAYMENTS	27.
EW YORK 4TH QTR ESTIMATE PAYMENTS	37.
EW YORK PRIOR YEAR BALANCE DUE AND EXTENSION PAYMENTS	36.
ASSACHUSETTS 4TH QTR ESTIMATE PAYMENTS	2.
ALIFORNIA FORM 592-B WITHHOLDING	14.
<b>OTAL TO SCHEDULE A, LINE 5</b>	<b>48,125.</b>

CHEDULE A		CASH CONTRIBUTIONS	STATEMENT 10
DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	
ISCELLANEOUS	20,455.		
ROM K-1 - CANTOR FITZGERALD LP	25.		
<b>UBTOTALS</b>	<b>20,480.</b>		
<b>OTAL TO SCHEDULE A, LINE 16</b>		<b>20,480.</b>	

CHEDULE A		INVESTMENT INTEREST	STATEMENT 11
DESCRIPTION		AMOUNT	
ROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC		626.	
<b>OTAL TO SCHEDULE A, LINE 14</b>		<b>626.</b>	

CHEDULE A		CONTRIBUTIONS OTHER THAN CASH OR CHECK			STATEMENT 12
DESCRIPTION	AMOUNT 100% LIMIT	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	AMOUNT 20% LIMIT	
ROM K-1 - CANTOR ITZGERALD LP			1.		
<b>UBTOTALS</b>			<b>1.</b>		
<b>OTAL TO SCHEDULE A, LINE 17</b>				<b>1.</b>	



SCHEDULE A	ITEMIZED DEDUCTIONS WORKSHEET	STATEMENT 13
1.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28 . . . . .	110,341.
2.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 14, AND 20, PLUS ANY GAMBLING AND CASUALTY OR THEFT LOSSES INCLUDED ON LINE 28. . . . .	626.
3.	IS THE AMOUNT ON LINE 2 LESS THAN THE AMOUNT ON LINE 1? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 2 FROM LINE 1 . . . . .	109,715.
4.	MULTIPLY LINE 3 BY 80% (.80). . . . .	87,772.
5.	ENTER THE AMOUNT FROM FORM 1040, LINE 38. . . . .	544,047.
6.	ENTER: \$166,800 (\$83,400 IF MARRIED FILING SEPARATELY) . . . . .	166,800.
7.	IS THE AMOUNT ON LINE 6 LESS THAN THE AMOUNT ON LINE 5? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 6 FROM LINE 5 . . . . .	377,247.
8.	MULTIPLY LINE 7 BY 3% (.03) . . . . .	11,317.
9.	ENTER THE SMALLER OF LINE 4 OR LINE 8 . . . . .	11,317.
10.	DIVIDE LINE 9 BY 1.5 . . . . .	7,545.
11.	SUBTRACT LINE 10 FROM LINE 9 . . . . .	3,772.
2.	TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 11 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 29 . . . . .	106,569.

SCHEDULE D	NET SHORT-TERM GAIN OR LOSS FROM FORMS 6252, 4684, 6781 AND 8824	STATEMENT 14
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DESCRIPTION OF PROPERTY	GAIN OR LOSS
FORM 6781, PART I	-1,401.
TOTAL TO SCHEDULE D, PART I, LINE 4	-1,401.

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SCHEDULE D	NET LONG-TERM GAIN OR LOSS FROM FORMS 4797, 2439, 6252, 4684, 6781 AND 8824	STATEMENT 15
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DESCRIPTION OF PROPERTY	GAIN OR LOSS	28% GAIN
FORM 6781, PART I	-2,102.	
FORM 4797	37.	
TOTAL TO SCHEDULE D, PART II, LINE 11	-2,065.	

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SCHEDULE D	NET SHORT-TERM GAIN OR LOSS FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES	STATEMENT 16
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DESCRIPTION OF ACTIVITY	GAIN OR LOSS
OLDMAN SACHS HEDGE FUND PARTNERS, LLC	14,534.
TOTAL TO SCHEDULE D, PART I, LINE 5	14,534.

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SCHEDULE D	NET LONG-TERM GAIN OR LOSS FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES	STATEMENT 17
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DESCRIPTION OF ACTIVITY	GAIN OR LOSS	28% GAIN
OLDMAN SACHS HEDGE FUND PARTNERS, LLC	-12,855.	
TOTAL TO SCHEDULE D, PART II, LINE 12	-12,855.	

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CHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 18
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1. ENTER THE AMOUNT FROM FORM 1040, LINE 41 . . . . .		437,478.
2. DID YOU FILE FORM 8914? X NO. ENTER -0- YES. ENTER THE AMOUNT FROM YOUR FORM 8914, LINE 6 . . . . .		
3. SUBTRACT LINE 2 FROM LINE 1 . . . . .		437,478.
4. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT.		3,000.
5. COMBINE LINES 3 AND 4. IF ZERO OR LESS, ENTER -0- . . . . .		440,478.
6. ENTER THE SMALLER OF LINE 4 OR LINE 5 . . . . .		3,000.
7. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT .		
8. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15 . . . . .		
9. ADD LINES 6 AND 8 . . . . .		
0. SHORT-TERM CAPITAL LOSS CARRYOVER TO 2010. SUBTRACT LINE 9 FROM LINE 7. IF ZERO OR LESS, ENTER -0- . . .		
1. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT.		89,757.
2. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7 . . . . .	3,825.	
3. SUBTRACT LINE 7 FROM LINE 6. IF ZERO OR LESS, ENTER -0- . . . . .	3,000.	
4. ADD LINES 12 AND 13 . . . . .		6,825.
5. LONG-TERM CAPITAL LOSS CARRYOVER TO 2010. SUBTRACT LINE 14 FROM LINE 11. IF ZERO OR LESS, ENTER -0- . .		82,932.





FORM 1116 SUMMARY OF FOREIGN TAXES PAID OR ACCRUED STATEMENT 19

GENERAL LIMITATION INCOME

NAME OF COUNTRY IMPOSING TAX

DATE PAID	DATE ACCRUED	AMT/FOREIGN CURRENCY	AMOUNT IN U.S. DOLLARS			
			DIVIDENDS	RENT/ROYALTY	INTEREST	OTHER
VARIOUS		0.				239.
VARIOUS		0.				80.
						319.
TOTAL TO FORM 1116, PART II, LINE 8						319.

PRIOR YEAR TAXES PAID IN THE CURRENT YEAR:

	FOREIGN AMT	CONV. RATE	U.S. AMT
2008			
2007			
2006			
2005			
2004			

TOTAL PRIOR YEAR TAXES PAID IN THE CURRENT YEAR

FORM 1116 EXPENSES DIRECTLY ALLOCABLE TO FOREIGN INCOME STATEMENT 20

DESCRIPTION	COUNTRY	AMOUNT
OLDMAN SACHS HEDGE FUND PARTNERS, LLC	VARIOUS	494.
OLDMAN SACHS HEDGE FUND PARTNERS, LLC	VARIOUS	493.
TOTAL TO FORM 1116, PART I, LINE 2		987.



FORM 1116 WORLDWIDE CAPITAL GAINS STATEMENT 21  
 WORKSHEET FOR LINE 17

1	ENTER THE AMOUNT FROM FORM 1040, LINE 41. IF YOU ARE A NONRESIDENT ALIEN, ENTER THE AMOUNT FROM FORM 1040NR, LINE 38		437,478.
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	2,618.	
7	MULTIPLY LINE 6 BY 0.5714	1,496.	
8	ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS		
9	ADD LINES 3, 5, 7, AND 8		1,496.
10	SUBTRACT LINE 9 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116, LINE 17		435,982.

FORM 2441 QUALIFYING PERSONS STATEMENT 22

QUALIFYING PERSONS

FIRST NAME	LAST NAME	SOCIAL SEC NO	QUALIFIED EXPENSES
RAH	CHRISTIE		7,920.
TRICK	CHRISTIE		7,920.
IDGET	CHRISTIE		7,920.
TAL TO FORM 2441, PAGE 1, LINE 3			23,760.



FORM 3800 GENERAL BUSINESS CREDIT CARRYFORWARD RECONCILIATION STATEMENT 23

1.	TOTAL GENERAL BUSINESS CREDIT CARRYFORWARD . . . . .	34.
2.	LESS AMOUNT OF CREDIT USED IN PRIOR YEARS. . . . .	
3.	CREDIT CARRYFORWARD AVAILABLE IN THE CURRENT YEAR (LINE 1 - LINE 2) . . . . .	34.
4.	LESS ITC RECAPTURE OFFSET (FORM 4255, LINE 12) . . . . .	
5.	CARRYFORWARD AFTER ITC RECAPTURE (LINE 3 - LINE 4) . . . . .	34.
6.	LESS AMOUNT ATTRIBUTABLE TO PASSIVE ACTIVITIES . . . . .	
7.	TOTAL TO FORM 3800, LINE 6 (LINE 5 - LINE 6) . . . . .	34.

FORM 6251 PASSIVE ACTIVITIES STATEMENT 24

NAME OF ACTIVITY	FORM	NET INCOME (LOSS)		ADJUSTMENT
		AMT	REGULAR	
ANTOR FITZGERALD LP	SCH E	2,136.	2,136.	
TOTAL TO FORM 6251, LINE 20				

FORM 1116 ALTERNATIVE MINIMUM TAX FOREIGN TAX CREDIT STATEMENT 25  
 WORLDWIDE CAPITAL GAINS  
 WORKSHEET FOR LINE 17

1	ENTER THE AMOUNT FROM FORM 6251, LINE 29		518,742.
2	ENTER WORLDWIDE 25% GAINS		
3	MULTIPLY LINE 2 BY 0.1071		
4	ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS	2,618.	
5	MULTIPLY LINE 4 BY 0.4643	1,216.	
6	ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS		
7	ADD LINES 3, 5, AND 6		1,216.
8	SUBTRACT LINE 7 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116 AMT, LINE 17		517,526.

FORM 4952 INVESTMENT INTEREST EXPENSE STATEMENT 26

DESCRIPTION	CURRENT	CARRYOVER
FORM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	626.	
FORM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	3,388.	
TOTALS TO FORM 4952, LINES 1 AND 2	4,014.	

FORM 4952 INCOME FROM PROPERTY HELD FOR INVESTMENT STATEMENT 27

DESCRIPTION	AMOUNT
INTEREST INCOME	9,666.
DIVIDEND INCOME	5,261.
NEIL PPC INC - ROYALTIES	17,662.
GOLDMAN SACHS HEDGE FUND PARTNERS, LLC - ROYALTY	22.
GOLDMAN SACHS HEDGE FUND PARTNERS, LLC	-7,935.
TOTAL TO FORM 4952, LINE 4A	24,676.

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FORM 4952 INVESTMENT INTEREST EXPENSE DEDUCTION SUMMARY STATEMENT 28

NAME	FORM OR SCHEDULE	INVESTMENT INTEREST EXPENSE	INVESTMENT INTEREST EXPENSE C/O	DISALLOWED INVESTMENT INTEREST EXPENSE	ALLOWED INVESTMENT INTEREST EXPENSE
FROM K-1 - GOLDMAN SAC	SCH A	626.	0.	0.	626.
FROM K-1 - GOLDMAN SAC	SCH E	3,388.	0.	0.	3,388.
TOTALS		4,014.	0.	0.	4,014.

FORM 4952AMT INVESTMENT INTEREST EXPENSE STATEMENT 29

DESCRIPTION	CURRENT	CARRYOVER
FROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LC	626.	
FROM K-1 - GOLDMAN SACHS HEDGE FUND PARTNERS, LC	3,388.	
TOTALS TO FORM 4952AMT, LINES 1 AND 2	4,014.	



FORM 8582 OTHER PASSIVE ACTIVITIES - WORKSHEET 3 STATEMENT 30

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
CANTOR FITZGERALD LP	2,136.	0.		2,136.	
TOTALS	2,136.	0.		2,136.	

FORM 8582 SUMMARY OF PASSIVE ACTIVITIES STATEMENT 31

NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
CANTOR FITZGERALDSCH E LP		2,136.		2,136.		
TOTALS		2,136.		2,136.		

PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME

TOTAL TO FORM 8582, LINE 16

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FORM 1116

INCOME SUMMARY  
FOREIGN PARTNERSHIP/S-CORPORATION INCOME

STATEMENT 32

DESCRIPTION

AMOUNT

OLDMAN SACHS HEDGE FUND PARTNERS, LLC  
OLDMAN SACHS HEDGE FUND PARTNERS, LLC

1,578.  
1,578.

TOTAL FOREIGN PARTNERSHIP/S-CORPORATION INCOME

3,156.