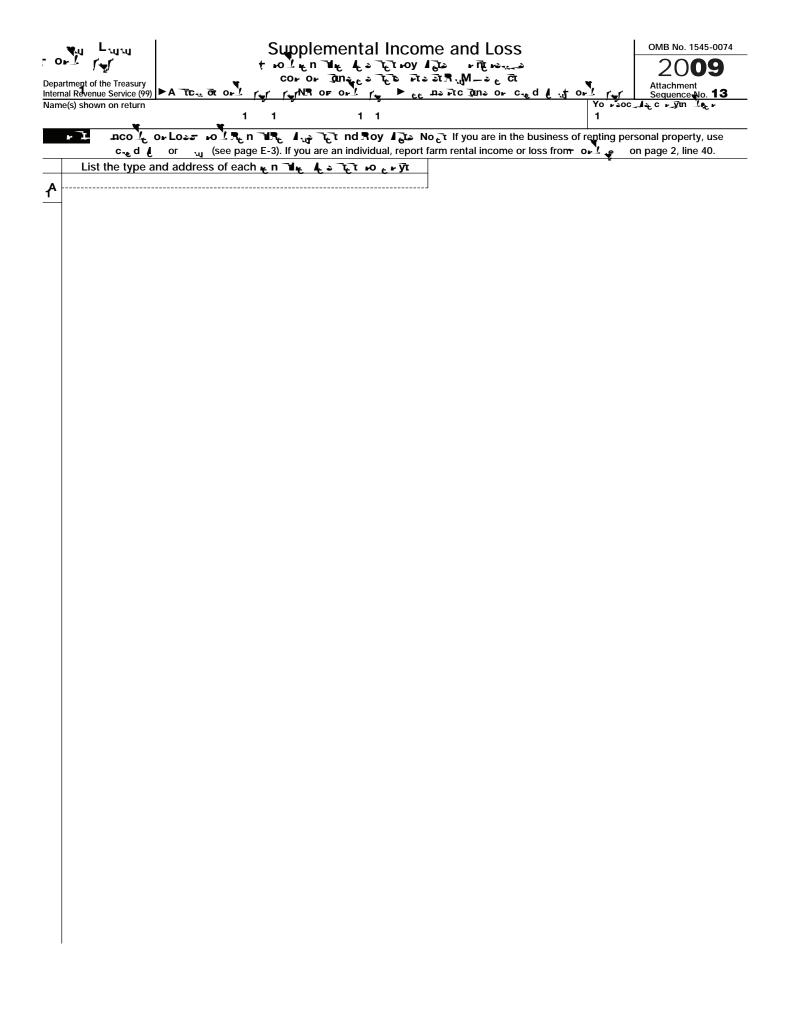
1040	Department of the Treasury: Internal Revenue Service	n 2009	IRS Use Only: Do n	ot write or staple in this space.
	For the year Jan. 1, Dec., 1, 200, or other tax year beginn	ing , 200 , ending	, 20	OMB No. 1 -00
	Your first name and initial	Last name		Your soci security nu er
(See				
instructions on page 1 .)		Last name		Spouse s soci security nu _er
se the RS				
e.	Home address (number and street). If you have a P.	O. box, see page 1 .	Apt. no.	You ust enter
Otherwise,				your SSN(s) above.
please print or type.		have a foreign address, see page 1.	- i	Checking a box below will not
				change your tax or refund.
Presidenti E ection C p ig	n Check here if you, or your spouse if filing journaments of the spouse of the spou	pintly, want \$ to go to this fund (s	see page 1)	You Spouse
Filmer Ct. two		Head of	of household (with g	ualifying person). (See page 1 .) If the
Fi ing St tus	Married filing jointly (even if only one			but not your dependent, enter this
Check only one	Married filing separately. Enter spous	,	name here.	
box.	and full name here.		ying widow(er) with	dependent child (see page 🕈)
E e ptions	Yourse f If someone can claim yo	u as a dependent, do not check b	юх, а	Boescheced
E e ptions	Spouse			on nd 🚽
	c Dependents	(2) Dependent's (3) Dep	endent's 🛛 (4) 🗸 if qua	alifying
	(1) First name Last name		nip to you child for chi credit (see pa	
	<u></u>		Torean (ace pe	<u> </u>
If more than four		1		
dependents, see				

page 1 and check here 

Schedule	E (Form 1040) 2009	Attachment Sequence	No. 13 Page 2
Name(s) s	shown on return. Do not enter name and social security number if shown on other side.		Your social security number
Cautio	n. The IRS compares amounts reported on your tax return with amounts	shown on Schedule(s) K	(-1.
Part I		J 1	5
27	any amount is not at risk, you must check the box in column (e) on line 28 a		
27	Are you reporting any loss not allowed in a prior year due to the at-risk	or basis limitations, a r	prior vear

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 □ Yes □ No partnership expenses? If you answered "Yes," see page E-7 before completing this section.
(b) Enter P for (c) Check if (d) Employer (e) Check if

28	(a) Name	(b) Enter P for partnership; S for S corporation	foreign foreiship	(d) Employer identification number	(e) Check if any amount is not at risk
Α					
В					

Form	4	7	9	7

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

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

OMB No. 1545-0184

Attachment

)09

► Atta

Attach to your tax return.

Sequence No.

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 (see instructions)

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 Year (see instructions)

► See separate 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)
Gain if any from Form 468	4 line 43					



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								
Nome of estivity	Current year		Prior years	Overall gain or loss				
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss			

Form 8582 (2009)