VANTIENDEREN CARTER & BOLANDER P.C. 6802 S 1300 E SALT LAKE CITY, UT 84121-2721 (801) 561-8685

PRESTON and ELIZABETH OLSEN 957 BRYANSTON COVE MURRAY, UT 84123

Dear PRESTON and ELIZABETH,

Please find enclosed copies of your tax return(s) for the tax year ended December 31, 2009. Instructions for filing your return(s) are attached for your convenience. Retain the copies for your records.

The federal income tax return will be electronically filed, do not mail the enclosed copy, but retain it for your records.

Form 1040

Federal Individual Income Tax Return

The Utah income tax return will be electronically filed, do not mail the enclosed copy, but retain it for your records.

Form TC-40

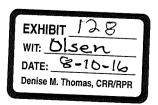
Utah Individual Income Tax

We prepared your returns based on the information you provided us. Please review the returns carefully to ensure that there are no omissions or misstatements of material facts.

If you have any questions about your tax returns, please contact us. We appreciate this opportunity to serve you.

Sincerely,

Bryan C. Bolander, CPA



Tax Summary and Instructions for Filing 2009 Federal Individual Income Tax Return

Summary of Federal Information:

Federal adjusted gross income	\$ 102,792.00
Federal taxable income	\$ 56,401.00
Federal refund	\$ 21,245.00

Your return will be electronically filed.

Your federal refund of \$21,245.00 will be directly deposited in your bank account.

Tax Summary and Instructions for Filing 2009 Utah Individual Income Tax Return

Summary of Form TC-40 Information:

State taxable income	\$ 101,851.00
State refund	\$ 3,013.00

Your Utah return will be electronically filed.

Your Utah refund of \$3,013.00 will be directly deposited in your bank account.

Form 1040	Department of the Treasury — Internal Revenue Service U.S. Individual Income Tax R	eturn 2009	3	A	and a new material Main and an
Form I UTU			1 (3 3)	Uniy — Do not	write or staple in this space.
	For the year Jan 1 - Dec 31, 2009, or other tax year beginnin	g , 2009, end ist name	ting , 20	Your	OMB No. 1545-0074 social security number
Label					<u> </u>
(See instructions.)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	LSEN			-4944
Use the	If a joint return, spouse's first name MI La	ist name		Spou	se's social security number
IRS label.	22 22 24 427 22 24 27	DLSEN			-0632
Otherwise, please print	Home address (number and street). If you have a P.O. box, see	e instructions.	Apartment i	10.	You must enter your social security
or type.	957 BRYANSTON COVE			🛦	number(s) above.
	City, town or post office. If you have a foreign address, see inst	tructions.	State ZIP code		king a box below will not
Presidential	MURRAY		UT 84123	chan	ge your tax or refund.
Election Campaign	Check here if you, or your spouse if filing jointly, want \$	3 to go to this fund? (see in	structions)	▶ □ Y	ou Spouse
Filing Chatron	1 Single	4	Head of household (wi	th qualifying	person). (See
Filing Status	2 X Married filing jointly (even if only one had inco	ome)	instructions.) If the qua	alifying pers	on is a child
	3 Married filling separately, Enter spouse's SSN :		but not your dependent name here.	i, eillei iins	CHIIC S
Check only one box.	name here *	5 🗍	Qualifying widow(er) with d	ependent child	(see instructions)
				***************************************	Poves checked
Exemptions	6a X Yourself. If someone can claim you				on 6a and 6b 2
	b X Spouse			(4) V if	No, of children on 6c who;
	c Dependents:	(2) Dependent's social security	(3) Dependent's relationship		lived 5
		number	to you	qualifying child for child tax credit	with you 3
	(1) First name Last name			(see instrs)	_ live with you
	Lacon o	-6584	Son	X	due to divorce _ or separation
If more than four	S	-2559	Son	X	(see instrs) — Dependents
dependents.	S Oi	-6799	Daughter	X	on 6c not
see instructions			10000		- entered above
and check here			<u> </u>		on lines
	d Total number of exemptions claimed				140,433.
Income	7 Wages, salaries, tips, etc. Attach Form(s			1	
meome	8a Taxable interest. Attach Schedule B if re			Q 6	<u> </u>
	b Tax-exempt interest. Do not include on 1			9a	2.
Attach Form(s) W-2 here. Also	9a Ordinary dividends. Attach Schedule B if b Qualified dividends (see instrs)	required	[ab]	4345	2
attach Forms	10 Taxable refunds, credits, or offsets of state and loc	al income taxes (see instruc	tions)	10	941.
W-2G and 1099-R	11 Alimony received				
if tax was withheld.	12 Business income or (loss). Attach Sched	ule C or C-F7	***************************************	h	-30,600.
If you did not	13 Capital gain or (loss). Att Sch D if read. If not read	ck here	▶ □	13	443.
get a W-2, see instructions.	14 Other gains or (losses). Attach Form 479	, ok nore			
ase manuchona.	15a IRA distributions		axable amount (see ins		
	16a Pensions and annuities 16a		exable amount (see ins		
	17 Rental real estate, royalties, partnerships				-63.
Enclose, but do			*	18	
not attach, any	18 Farm income or (loss). Attach Schedule 19 Unemployment compensation in excess of \$2,400 per recipient (see instructions)			19	
payment. Also,	20 a Social security benefits	b Та	axable amount (see ins	trs) 20 b	
please use Form 1040-V.	21 Other income		•	21	
	22 Add the amounts in the far right column	for lines 7 through 21.	This is your total incom	ne . 🏲 22	111,159.
	23 Educator expenses (see instructions)		23		
Adjusted	24 Certain business expenses of reservists, performing government officials. Attach Form 2106 or 2106-EZ	artists, and fee-basis	24		
Gross	and the second s		25		
Income			26		
	26 Moving expenses. Attach Form 390327 One-half of self-employment tax. Attach		27		
,			28		
			29		
	29 Self-employed health insurance deduction (see insti		30		
	30 Penalty on early withdrawal of savings .		31 a		
	31 a Alimony paid b Recipient's SSN		<u></u>	230.	
	the contract of the contract o			137.	
			J.		
		III 9909		36	8,367.
	36 Add lines 23 - 31a and 32 - 3537 Subtract line 36 from line 22. This is you	r adjusted aross inco	me		102,792.
DAA F P!!	sure, Privacy Act, and Paperwork Reduction Act				Form 1040 (2009)
DAA FOT DISCIOS	oute, rilvacy Act, and raperwork neduction Act	monde, see misa actio	1 010112		

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Form 1040 (2009)	PRESTON & ELIZABETH OLSEN	-4944 Page 2
Tax and	38 Amount from line 37 (adjusted gross income)	38 102,792.
Credits	39 a Check You were born before January 2, 1945, Blind. Total boxes	
	if: Spouse was born before January 2, 1945, ☐ Blind. checked ► 39a	4
Standard Deduction	b If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here ► 39b	20 241
for -	40 a Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a 28,141.
 People who check any box 	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 instructions)	
on line 39a, 39b,	41 Subtract line 40a from line 38	41 74,651.
or 40b or who can be claimed	42 Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced	42 18,250.
as a dependent,	individual, multiply \$3,650 by the number on line 6d. Otherwise, see instructions 43 Taxable income. Subtract line 42 from line 41.	
see instructions.	If line 42 is more than line 41, enter -0-	43 56,401.
All others:	44 Tax (see instrs). Check if any tax is from: a Form(s) 8814	
Single or Married	b ☐ Form 4972	44 7,629.
filing separately,	45 Alternative minimum tax (see instructions). Attach Form 6251	45 7,629.
\$5,700	46 Add lines 44 and 45	48' 7,029.
Married filing	The state of the s	-
jointly or Qualifying	48 Credit for child and dependent care expenses. Attach Form 2441	1
widow(er),	50 Retirement savings contributions credit. Attach Form 8880 50	•
\$11,400	51 Child tax credit (see instructions)	
Head of	52 Credits from Form: a 8396 b 8839 c 5695 52	
household,	53 Other ors from Form: a X 3800 b 8801 c 53 4,629.	
\$8,350		54 7,629.
	the state of the s	
***************************************	55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -U- 56 Self-employment tax, Attach Schedule SE	56
Other	57 Unreported social security and Medicare tax from Form: a 4137 b 8919	57
Taxes	58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58
IUAUS	59 Additional taxes: a AEIC payments b Household employment taxes. Attach Schedule H	59
	60 Add lines 55-59. This is your total tax	60 0.
Payments	61 Federal income tax withheld from Forms W-2 and 1099 61 20,445.	
ayincins	62 2009 estimated tax payments and amount applied from 2008 return 62	
15	63 Making work pay and government retires credit. Attach Schedule M 63 800.	
If you have a qualifying	64a Earned income credit (EIC)	-
child, attach	b Nontaxable combat pay election ▶ 64b 2868	
Schedule EiC.	65 Additional child tax credit, Attach Form 8812	-
	66 Refundable education credit from Form 8863, line 16	-
	67 First-time homebuyer credit. Attach Form 5405	-
	and the state of t	-
		-
		71 21,245.
	71 Add Ins 61-63, 64a, & 65-70. These are your total pmts 72 If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	72 21,245.
Refund	73a Amount of line 72 you wa <u>nt refunded to you</u> . If Form 8888 is <u>attached</u> , check here •	73a 21,245.
Direct deposit? See instructions	b Routing number 2150	
and fill in 73b,	b d Account number	
73c, and 73d or Form 8888.	74 Amount of line 72 you want applied to your 2010 estimated tax	
Amount	75 Amount you owe. Subtract line 71 from line 60. For details on how to pay, see instructions	75
You Owe	76 Estimated tax penalty (see instructions)	Charles Constitution of the Constitution of th
	Do you want to allow another person to discuss this return with the IRS (see instructions)?	nplete the following. No
Third Party	Phone	Personal identification > 11112
<u>Designee</u>	Designees ► Bryan C. Bolander, CPA no. ► (801) 561–8685 Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which pr	
Sign		
Here Joint return?	Your signature Date Your occupation	Daytime phone number
See instructions.	ATTORNEY	
Кеер а сору	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation	
for your records.	HOMEMAKER	Preparer's SSN or PTIN
	Preparer's Date	ı
Paid	signature 1947 107 2010 Check if self-employed	P00123543
Preparer's	Firm's name VANTIENDEREN CARTER & BOLANDER P.C.	07 0460410
Use Only	self-employed) 6802 S 1300 E.	87-0468419
	ZIP code SALT LAKE CITY UT 84121-2721 Phone n	
		Form 1040 (2009)

FDIA0112 09/17/09

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SCHEDULE A (Form 1040)			Itemized Deductions		OMB No. 1545-0074 2009	
Department of the Tr Internal Revenue Ser	reasur; vice	(99)	► Attach to Form 1040. ► See Instructions for	Schedule A (Form 1040).		Altachment Sequence No. 07
Name(s) shown on Fe	orm 10	040		Yours	ocial s	ecurity number
PRESTON &	EL					-4944
Medical			on. Do not include expenses reimbursed or paid by others.			
and Dental	1		and dental expenses (see instructions)	1	9.46	
Expenses	2		mount from Form 1040, line 38 2			
	3	,	bly line 2 by 7.5% (.075)	3	4	
	4		act line 3 from line 1. If line 3 is more than line 1, enter -0-		910566	
Taxes You Paid	5	-	and local (check only one box):			
raid	a	-cocoon-	acome taxes, or	5 7,016.		
	-		eneral sales taxes	6 1,387.	•	
	6 7	Meal	estate taxes (see instructions)	2,30,.	1	
(See	′	2. Sk	ip this line if you checked box 5b	7		
instructions.)	8	Other	taxes. List type and amount >	الم المسابق		
				8	9	8,403.
	9		ines 5 through 8		9	6,403.
Interest You Paid	10	Home i	mtg interest and points reported to you on Form 1098	10 12,149.	1	
TOGFAIG	11	from w	thom you bought the home, see instructions and show that person's name,			
			ying number, and address ►			
					1000	
				11		
Note.	12	Points	not reported to you on Form 1098. See instrs for spcl rules	12		
Personal	13	Quali	fied mortgage insurance premiums (see instructions)	13	J	
interest	14	Inves	tment interest. Attach Form 4952 if required.			
is not deductible.			nstrs.)	14		
	15		ines 10 through 14		15	12,149.
Gifts to	16	Gifts	by cash or check. If you made any gift of \$250 or			
Charity		more	, see instrs	16 7,589.	-	
If you made a gift and	17	Other	r than by cash or check. If any gift of \$250 or , see instructions. You must attach Form 8283 if			
got a benefit		more	, see instructions. You must attach Form 6203 ii	17		
for it, see instructions.	18	Carry	vover from prior year	18		
	19	Add I	ines 16 through 18	**************************************	19	7,589.
Casualty and					00	
Theft Losses	20	Casu	alty or theft loss(es). Attach Form 4684. (See instructions.)	Lagranger 1	20	
Job Expenses	21	Unrei	imbursed employee expenses – job travel, union dues, ducation, etc. Altach Form 2106 or 2106-EZ if			
and Certain Miscellaneous			red. (See instructions.)		15.00	
Deductions		redan		21	100000	
	22			22		
			r expenses — investment, safe deposit box, etc. List	3000		
(See instructions.)	23		and amount Annual Ann			
msadenons.)		GPC.		23		
	24		lines 21 through 23	24		
	25	Enter	amount from Form 1040, line 38 25			
		Multip	ply line 25 by 2% (.02)	26		
·	27	Subtr	ract line 26 from line 24. If line 26 is more than line 24, enter	-0-	27	
Other	28	Othe	r - from list in the instructions. List type and amount >		-	
Miscellaneous Deductions					28	
			1040 / 20		20	
Total Itemized	29		rm 1040, line 38, over \$166,800 (over \$83,400 if ied filing separately)?			
Deductions			lo Your deduction is not limited. Add the amounts in the fall	r right column		
		Lunnan	for lines 4 through 28. Also, enter this amount on Form	1040, line 40a.	29	28,141.
			es. Your deduction may be limited. See instructions for the			
	30	If you	elect to itemize deductions even though they are less than your standard ded	uction, check here 🟲 📗		

BAA For Paperwork Reduction Act Notice, see Form 1040 instructions.

FDIA0301 11/20/09

Schedule A (Form 1040) 2009

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SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sale Proprietorship)

OMB No. 1545-0074 2009

► Partnerships, joint ventures, etc, generally must file Form 1065 or 1065-B. ► Attach to Form 1040, 1040NR, or 1041. ► See Instructions for Schedule C (Form 1040). Department of the Treasury Internal Revenue Service Attachment (99)Social security number (SSN) PRESTON OLSEN B Enter code from instructions Principal business or profession, including product or service (see instructions) **►** 999999 SOLAR ENERGY Employer ID number (EIN), if any Business name. If no separate business name, leave blank 27-0602297 PFO SOLAR LLC E Business address (including suite or room no.) ► 957 BRYANSTON COVE MURRAY, UT 84123 City, town or post office, state, and ZIP code Other (specify) Accrual (3) Accounting method: (1) X Cash (2) G Did you 'materially participate' in the operation of this business during 2009? If 'No,' see instructions for limit on losses H If you started or acquired this business during 2009, check here Part I Income Gross receipts or sales. Caution. See the instructions and check the box if: This income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, or You are a member of a qualified joint venture reporting only rental real estate income not subject 0. to self-employment tax. Also see instructions for limit on losses 2 2 Returns and allowances ... 0. 3 Subtract line 2 from line 1 4 4 Cost of goods sold (from line 42 on page 2) 0. 5 Gross profit. Subtract line 4 from line 3 Other income, including federal and state gasoline or fuel tax credit or refund 6 (see instructions)...... 0. 7 Gross income. Add lines 5 and 6 Expenses. Enter expenses for business use of your home only on line 30 18 8 18 Office expense 19 19 Pension and profit-sharing plans ... Car and truck expenses 20 Rent or lease (see instructions) (see instructions) 20 a a Vehicles, machinery, and equipment 10 10 Commissions and fees ... 20 b b Other business property 11 Contract labor 21 21 Repairs and maintenance (see instructions) . 11 22 Supplies (not included in Part III) 12 12 Depletion 23 Depreciation and section Taxes and licenses 179 expense deduction (not included in Part III) 24 Travel, meals, and entertainment: 24 a 30,600 13 (see instructions). b Deductible meals and entertainment Employee benefit programs (see instructions) 246 (other than on line 19) 14 25 Utilities 25 15 15 Insurance (other than health) ... 26 Wages (less employment credits) 16 Interest: 16 a a Mortgage (paid to banks, etc) Other expenses (from line 48 on 27 27 16 b page 2) 17 Legal & professional services. 17 28 30,600. Total expenses before expenses for business use of home. Add lines 8 through 27 ... -30,600. 29 29 Tentative profit or (loss). Subtract line 28 from line 7 30 30 Expenses for business use of your home. Attach Form 8829 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2 or on Form 1040NR, line 13 (if you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. 31 -30,600. If a loss, you must go to line 32. 32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter All investment is 32 a X at risk. on Form 1041, line 3. Some investment is not at risk.

BAA For Paperwork Reduction Act Notice, see Form 1040 instructions.

If you checked 32b, you must attach Form 6198. Your loss may be limited

FDIZ0112 06/18/09

Schedule C (Form 1040) 2009

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Sche	edule C (Form 1040) 2009 PRESTON OLSEN	-49	44	Page 2
Par	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach	n explanati	on)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If 'Yes,' attach explanation	·····	Yes	No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	. 36		
37	Cost of labor. Do not include any amounts paid to yourself	. 37		
38	Materials and supplies	. 38		
39	Other costs	. 39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	;		
	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4			
Par	Information on Your Vehicle. Complete this part only if you are claiming car or truck expense required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file	s on line 9 Form 4562	and are no	t
43	When did you place your vehicle in service for business purposes? (month, day, year)	T		
	bills design 0000 sales the appealant of miles you used your you	nia far		
	Of the total number of miles you drove your vehicle during 2009, enter the number of miles you used your vehicle Business b Commuting (see instructions) cOther			
•				
45	Was your vehicle available for personal use during off-duty hours?			No
46	Do you (or your spouse) have another vehicle available for personal use?			∐No
	a Do you have evidence to support your deduction?			∐No
	b If 'Yes,' is the evidence written?		Yes	No
Par	Other Expenses. List below business expenses not included on lines 8-26 or line 30.			
				.,
				,
48	Total other expenses. Enter here and on page 1, line 27	. 48 Schodule	C (Form 10	40) 2000
		していたいここ	~ linumin	107 2003

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SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2009

► Attach to Form 1040 or Form 1040NR. ► See Instructions for Schedule D (Form 1040). Department of the Treasury Internal Revenue Service ► Use Schedule D-1 to list additional transactions for lines 1 and 8.

Attachment Sequence No. 12

-4944

Name(s) shown on return

PRESTON & ELIZABETH OLSEN

Your social security number

Par	tl Short-Term Capital Gains	and Losses	s – Assets H	eld One Year or I	_ess	
***************************************	(a) Description of property (Example: 100 shares XYZ Co)	(b) Date acquired (Mo, day, yr)	(C) Date sold (Mo. day, yr)	(d) Sales, price (see instructions)	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1	300.0000 sh. NVIDIA CORP	COM				
		01/14/09	06/19/09	2,880.	2,298.	<u>582.</u>
	250.0000 sh. OMNIVISION TECHNOLO	1				
		06/23/09	08/26/09	3,230.	2,770	460.
	3.0000 sh. CALL 100 NVIDIA CORE	COMMON			,	
	***	Various	03/06/09	167.	0.	167.
	UNITED STATES NATURAL GAS H	UND LP				
		12/16/08	08/31/09	1,493.	1,145.	348.
	•					
2	Enter your short-term totals, if any, from	Schedule D-1,	line 2 2			a barrespo con di più conformazioni "7,750 m.s
3	Total short-term sales price amounts. A column (d)		2 in 3	7,770.		
4	Short-term gain from Form 6252 and sho	ort-term gain or	(loss) from Forn	ns 4684, 6781, and 88	24 4	-738.
5	Net short-term gain or (loss) from partne	rships, S corpo	rations, estates,	and trusts from Scheo	iule(s) K-1 5	
6	Short-term capital loss carryover. Enter Worksheet in the instructions	the amount, if a	ny, from line 10	of your Capital Loss (Carryover 6	
7	Net short-term capital gain or (loss). Cor	nbine lines 1 thr	rough 6 in colum	ın (f)	7	819.
Pai	t II Long-Term Capital Gains	and Losses	s – Assets H	eld More Than Or	ne Year	
	(a) Description of property (Example: 100 shares XYZ Co)	(b) Date acquired (Mo, day, yr)	(C) Date sold (Mo, day, yr)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
8	5000.0000 sh. TRIAN ACQUISITION I	CORP WT 11/11/08	11/19/09	2,480.	1,750.	730.

9	Enter your long-term totals, if any, from \$	Schedule D-1, line 9	9				
				2,480.			
11	Gain from Form 4797, Part I; long-term g Forms 4684, 6781, and 8824	ain from Forms 2439 a	and 6252	e; and long-term gain o	or (loss) from	11	-1,106.
12	Net long-term gain or (loss) from partners	ships, S corporations,	estates,	and trusts from Sched	lule(s) K-1	12	
13	Capital gain distributions. See instrs	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,		13	
14	Long-term capital loss carryover. Enter the Worksheet in the instructions	ne amount, if any, from	line 15	of your Capital Loss C	Carryover	14	

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

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

-376. 15 Schedule **D** (Form 1040) 2009

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Sche	edule E (Form 1040) 2009			Attachmer	nt S				y numb			Page 2
	(s) shown on return. Do not enter name and social security num	nber if shown on Page 1.				rour	ociai		•	er		
	ESTON & ELIZABETH OLSEN tion: The IRS compares amounts reported on yo	or tay raturo with amou	inte e	shown on Schedul	2/4) K.1		·49	44			
	t II Income or Loss From Partners				10(3	91012						
Note	If you report a loss from an at-risk activity for the Form 6198. See instructions.	which any amount is no	t at	risk, you mus t ch	ieck	the b	ni xc	colur	ทก (e)	on line 28	3 and	
27	Are you reporting any loss not allowed in a prict loss from a passive activity (if that loss was not lf you answered 'Yes,' see instructions before one of the contraction of the contra	ot reported on Form 858	k or 2), c	basis limitations, or unreimbursed p	a p artr	rior ye nership	ar ui exp	nallov ienses	ved s?	. Yes	; <u>[</u> 2	₹] No
28	(a) Name	***************************************		(b) Enter P for partnership; S for S corporation	'	c) Chec foreig	n		d) Emp dentific num	cation	any a	Check if amount t at risk
Δ	UNITED STATES NATURAL GAS FUN	D. T.P.		P	 			20-	5576	760		П
	ORDINARY LOSS FROM SWAPS			P	T				5576		İ	
С												
D			,									
	Passive Income and Loss		<u> </u>	N	lon	passiv				·····		
	(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1		i) Nonpassive loss orn Schedule K-1		expe fror	sect nse o n Fo i	ion 17 deduc r m 4 5	tion 62	ĭnco	npass me fro dule l	ודוכ
_A			ļ	10							····	
В				53								
<u>_</u> C			-		+							
D 29.	a Totals		3486		225	arata	Wild Co	04.4036				
	o Totals			63				***************************************		6.500		
	Add columns (g) and (j) of line 29a								30			
31	Add columns (f), (h), and (i) of line 29b								31			<u>-63.</u>
32	Total partnership and S corporation income o	r (loss). Combine lines	30 a	nd 31. Enler the r	rest	ult here	e and	j	22			-63.
Par	include in the total on line 41 below								32	<u> </u>		
33	till and income of Loss From Estates a	(a) Name								(b) Emp	lover	ID no.
A		(a) ramo					···········		,			
В												
	Passive Income	and Loss	·		_		No	npass	sive In	come and	Loss	
	(c) Passive deduction or loss allo (atlach Form 8582 if required			I) Passive income om Schedule K-1		(e) De		ion or edule		(f) Oth from So		
A B					\dashv							
	a Totals											
i	Totals		19-151 A 12-51 A									
35	Add columns (d) and (f) of line 34a								35			
36	Add columns (c) and (e) of line 34b								36			
37	Total estate and trust income or (loss). Combi result here and include in the total on line 41 b	elow							37			
Par	t IV Income or Loss From Real Esta				(RI	EMIC	s) –	Res	sidua			
38	(a) Name	(b) Employer identification number		(c) Excess inclusion from Schedules Q, le 2c (see instructions)		(a) 10 (ne Sched	t los	le inco s) fro Q, lir	m	(e) Inc Schedul		
			n 11:	total on line 27 %					39			
39 Par												
40	Net farm rental income or (loss) from Form 48.								40			
41	Total income or (loss). Combine lines 26, 32, 3 Form 1040, line 17, or Form 1040NR, line 18 .	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		sult here and on		paggalatos de di	BANGBER P	. ►	41			-63.
42	Reconciliation of farming and fishing income. and fishing income reported on Form 4835, line box 14, code B; Schedule K-1 (Form 1120S), b (Form 1041), line 14, code F (see instructions)	e 7; Schedule K-1 (Forn box 17, code U; and Sch	n IU nedu	le K-1		· · · · · · · · · · · · · · · · · · ·						
43	Reconciliation for real estate professionals. If professional (see instructions), enter the net in anywhere on Form 1040 or Form 1040NR from in which you materially participated under the professional section in the profession	icome or (loss) you repo all rental real estate ac	ctiviti	ies I								
									~	ule F (For	104	0000

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Form 3800

General Business Credit

► See separate instructions.

OMB No. 1545-0895 2009

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

PRESTON & ELIZABETH OLSEN

Attach to your tax return.

ldentifying number -4944

Part	Current Year Credit		
mport	ant: You may not be required to complete and file a separate credit form (shown in parentheses below) to cla instructions.	im the	credit. For details,
1a	Investment credit (Form 3468, Part II only) (attach Form 3468)	1 a	
b	Welfare-to-work credit (only from partnerships, S corporations, estates, and trusts)	1 b	
С	Credit for increasing research activities (Form 6765). (Individuals: see instructions)	1 c	
d	Low-income housing credit (Form 8586, Part I only) (enter EIN if claiming this credit from a	1	
•	pass-through entity:)	1 d	
e	Disabled access credit (Form 8826) (do not enter more than \$5,000)	1 e	
f	Renewable electricity production credit (Form 8835;)	1 f	
g g	Indian employment credit (Form 8845)	1 g	
9 h	Orphan drug credit (Form 8820)	1 h	
	, -		
i	New markets credit (Form 8874) (enter EiN if claiming this credit from a pass-through entity:)	11	
	Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	1i	
j			
k	Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming this	1 k	
_	credit from a pass-through entity:)	11	
ı	Biodiesel and renewable diesel fuels credit (attach Form 8864)	1 m	*******
m	Low sulfur diesel fuel production credit (Form 8896)		
n	Distilled spirits credit (Form 8906)	<u> 1n</u>	
0	Nonconventional source fuel credit (Form 8907)	10	
p	Energy efficient home credit (Form 8908)	<u>1p</u>	
q	Energy efficient appliance credit (Form 8909)	<u>1q</u>	
r	Alternative motor vehicle credit (Form 8910) (enter EIN if claiming this credit from a		
	pass-through entity:)	<u> 1r</u>	
s	Alternative fuel vehicle refueling property credit (Form 8911)	1s_	
ŧ	Credits for affected Midwestern disaster area employers (Form 5884-A)	1t	
u	Mine rescue team training credit (Form 8923)	<u> 1 u</u>	
ν	Agricultural chemicals security credit (Form 8931)	1v	
w	Credit for employer differential wage payments (Form 8932)	1 w	
×	Carbon dioxide sequestration credit (Form 8933)	1 x	
ν	Qualified plug-in electric drive motor vehicle credit (Form 8936)	1у	
z	Qualified plug-in electric vehicle credit (Form 8834, Part I only)	1z	***************************************
aa	Credit for contributions to selected community development corporations (only from partnerships and S corporations)	1 aa	
hh	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1 bb	
	Contonal Ground Montain Ground and Ground Contonal Conton		
2	Add lines 1a through 1bb	2	
	The fine of the saget the tribition of the saget the sag		•
3	Passive activity credits included on line 2 (see instructions)	3	
4	Subtract line 3 from line 2	4	- Aller
5	Passive activity credits allowed for 2009 (see instructions)	5	
	Carryforward of general business credit to 2009. See instructions for the schedule to attach		
6			
7	Carryback of general business credit from 2010 (see instructions)	7	
8	Current year credit. Add lines 4 through 7	8	

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 3800 (2009)

FDIZ0513 12/23/09

FDIZ0513 12/23/09

Form 3800 (2009)

19 c

Form 3	800 (2009) PRESTON & ELIZABETH OLSEN		-4944	Page 3
Part				
Note.	f 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.
		1		
26	Subtract line 15 from line 13. If zero or less, enter -0-	26		4,629.
27	Add lines 19b and 25	27		0.
28	Subtract line 27 from line 26. If zero or less, enter -0-	28		4,629.
29 a	Enter the investment credit from Form 3468, Part III, line 19 (attach Form 3468)	<u>0.</u>		
b	Enter the work opportunity credit from Form 5884, line 10 or line 12			
С	Enter the alcohol and cellulosic biofuel fuels credit from Form 6478, line 14 or line 16			
d	Enter the low-income housing credit from Form 8586, Part II, line 18 or line 20	_		
e	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			
f	Enter the credit for employer social security and Medicare taxes paid on certain employee tips from Form 8846, line 12			
g	Enter the qualified railroad track maintenance credit from Form 8900, line 12		_	
30	Add lines 29a through 29g	30		18,000.
31	Enter the smaller of line 28 or line 30	31_		4,629.
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:			
	• Individuals. Form 1040, line 53 or Form 1040NR, line 49	32		4,629.
	Corporations. Form 1120, Schedule J, line 5c	[32		₹,043.
	Estates and trusts. Form 1041, Schedule G, line 2c			

Form 3800 (2009)

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Form 3468

Investment Credit

OMB No. 1545-0155

011/1 0 1 1 0 0				2009
Department of the Treasury (99)	► Attach to you	r tax return. See instructions.		Attachment Sequence No. 52
Vame(s) shown on return				ying number
PRESTON & ELIZAB	ETH OLSEN			-4944
***************************************	Regarding the Election To Treat			
f you are claiming the inve nformation. If you acquired	stment credit as a lessee based on a se I more than one property as a lessee, a	ection 48(d) (as in effect on Noven ttach a statement showing the info	nber 4, 1990) ele ormation below.	ction, provide the following
1 Name of lessor				
3 Description of propert	у			.
4 Amount for which you	were treated as having acquired the pr	operty Consideration During	at Cuadit an	. P 3
Part III Qualifying Advanced En	dvanced Coal Project Credit, Quergy Project Credit	ualifying Gasification Proje	ect Gredit, and	u Qualitying
5 Qualifying advanced of	coal project credit (see instructions):			
a Qualified investment	in integrated gasification combined cycling the tax year for projects described in	e property		
placed in service duri	ng the tax year for projects described in	x 20% (.20) 5a		
	\$			
b Qualified investment in placed in service duri	in advanced coal-based generation teching the tax year for projects described in	nology property section		i i
48A(d)(3)(B)(ii)	\$	_ x 15% (.15) 5b		
c Qualified investment i	in advanced coal-based generation tech	inology property		
placed in service duri	ng the tax year for projects described in	section		
48A(d)(3)(B)(III)	\$ <u></u>	_ X 30% (.30) . [5C]		5 di
	b, and 5c	. , , , , , , , , , , , , , , , , , , ,		5u
	n project credit (see instructions):			
include equipment that	in qualified gasification property placed were allocated or reallocated after Octo at separates and sequesters at least 75° ions\$	% of the project's , ,		
	in property other than in a above placed	1 1		
during the tax year		_ x 20% (.20) 6b		
	nd 6b			6c
	energy project credit (see instructions):			
Qualified investment i	in advanced energy project property pla	ced in		7
Service after February	/ 17, 2009 \$	X 50 % (.50)		8
* *		ves (see manuchons)		
9 Add lines 5d, 6c, 7, a Form 3800 line 1a	nd 8. Report this amount on			9
Part III Rehabilitatio	n Credit and Energy Credit			
	see instructions for requirements that m			
a Check this box if you expenditures into accordant capitalized). See instructional	are electing under section 47(d)(5) to ta ount for the tax year in which paid (or, f ructions, Note . This election applies to t evoke this election without IRS consent	eke your qualified rehabilitation for self-rehabilitated property, whe	r tax	
b Enter the dates on wh measuring period beg	nich the 24- or 60-month	and ends	······································	
c Enter the adjusted bate (or the first day of you	sis of the building as of the beginning dur holding period, if later)	ate above		
d Enter the amount of the or treated as incurred	he qualified rehabilitation expenditures i , during the period on line 10b above	incurred,		
Enter the amount of q	ualified rehabilitation expenditures and	multiply by the percentage shown	:	
e Pre-1936 huildings located	e			10e
f Pre-1936 buildings affected			c 13% (.13)	10 f

in the Gulf Opportunity Zone BAA For Paperwork Reduction Act Notice, see instructions.

h Certified historic structures located

FD(Z0401 01/27/10

x 10% (.10) ... 10g

x 26% (.26)

10 h

Form 3468 (2009)

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Form 3468 (2009) PRESTON & ELIZABETH OLSEN			-4944	Page 2
Part III Rehabilitation Credit and Energy Credit (continued)		, 		
i Certified historic structures affected by a				
Midwestern disaster \$ x 26% (.20	5)	10i	,,,	
i Other certified historic structures \$ x 20% (.24)))	10j		
For properties identified on lines 10h, 10i, or 10j, complete lines 10k and 10l				
k Enter the assigned NPS project number or the pass-through entity's employer identification number (see instructions)				
1 Enter the date that the NPS approved the Request for Certification of Completed Work (see instructions)	ı			
mRehabilitation credit from an electing large partnership (Schedule K-1 (Form 1065-B), box 9)		10m		
11 Energy credit:				
a Basis of properly using geothermal energy or solar energy (acquired before January 1, 2006, and the bas attributable to construction, reconstruction, or erection by the taxpayer before January 1, 2006) placed in				
service during the tax year (see instructions)))	11 a		
b Basis of property using solar illumination or solar energy placed in service during the tax year that was acquired after December 31, 2005, and the basis attributable to construction, reconstruction, or erection be	У			
the taxpayer after December 31, 2005 (see instructions)\$60,000. x 30% (.30		116		18,000.
Qualified fuel cell property (see instructions):				
c Basis of property placed in service during the tax year that was acquired after December 31, 2005, and before October 4, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpa				
after December 31, 2005, and before October 4, 2008 \$ x 30% (.30))	11 c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
d Applicable kilowatt capacity of property on line 11c (see instructions) ▶ x \$1,000		11 d		
e Enter the lesser of line 11c or 11d		11e		
f Basis of property placed in service during the tax year that was acquired after October 3, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer				
after October 3, 2008 \$ x 30% (.30))	11 f		
g Applicable kilowatt capacity of property on fine 11f (see instructions) * x \$3,000		11 g		
h Enter the lesser of line 11f or 11g	••••	11 h	town and the	
Qualified microturbine property (see instructions):				
i Basis of property placed in service during the tax year that was acquired after December 31, 2005, and the basis attributable to construction, reconstruction, or erection by the taxpayer				
after December 31, 2005))	111		
j Kilowati capacity of property on line 11i x \$200		11j		
k Enter the lesser of line 11i or 11j		11 k		
FDIZ0401 01/27/10			Form	3468 (2009)

FDIZ0401 01/27/10

Add lines 15 through 18. Report this amount on Form 3800, line 29a

Form 3468 (2009)

18,000.

19

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Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2009

Department of the Treasury Internal Revenue Service (99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No. 67

Name(s) shown on return	tochthying manuser
PRESTON & ELIZABETH OLSEN	-4944
Business or activity to which this form relates	
Sch C SOLAR ENERGY	

Scl	C SOLAR ENERGY						
Par	ti Election To Exp	ense Certain I	Property Under Sec complete Part V before y	tion 179 vou complete Pari	t /		
1	Maximum amount. See the	instructions for a	higher limit for certain hi	isinesses			1 \$250,000.
	Total cost of section 179 pr	conarty placed in s	envice (see instructions)	3311103333			2
2	Threshold cost of section 1	79 property before	reduction in limitation (see instructions)			3 \$800,000.
4	Reduction in limitation. Sul	tract line 3 from 1	ine 2. If zern or less, ent	er -0-			4
5	Dollar limitation for tax year						
J	separately, see instructions	S			,		5,
6	(a)	Description of property		(b) Cost (business i	use only)	(c) Elected cost	
7	Listed property. Enter the a	amount from line 2			7		8
	Total elected cost of section Tentative deduction. Enter	n 179 property. Ad	dd amounts in column (c)), lines 6 and 7			9
9	Carryover of disallowed de	the smaller of line	3 OF HOUR 2009 Form 456				10
10 11	Business income limitation	Enter the smalls	r of husiness income (no	t less than zero)	or line 5 (see	instrs)	11
	Section 179 expense dedu	ction. Add lines 9	and 10, but do not enter	more than line 11			12
13	Carryover of disallowed de	duction to 2010. A	dd lines 9 and 10, less li	ne 12 ¹	► 13		Ang 1514 SER (\$100 SER)
Note	: Do not use Part II or Part	III below for listed	property. Instead, use P.	art V.			
Pai			ce and Other Depre		t include liste	d property.) (S	ee instructions.)
	Special depreciation allows					Į	
14	tax year (see instructions)	, ,		· · · · · · · · · · · · · · · · · · ·			14 25,500.
15	Property subject to section	168(f)(1) election	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				15
	Other depreciation (includi						16
	t III MACRS Depre	ciation (Do not in	nclude listed property.) (S	See instructions)			
			Sectio	·····			
17	MACRS deductions for ass	ets placed in serv	ice in tax years beginning	g before 2009			17
18	If you are electing to group asset accounts, check here	3				· · · · · · · · · · · · · · · · · · ·	
	Section B	- Assets Placed	in Service During 2009				
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19:	3-year property	416663330150000					
	5-year property		25,500.	5.0 yrs	ΗY	200 DE	5,100.
	7-year property	The Control of the Co					
1	d 10-year property				.,		
	15-year property					<u> </u>	
	20-year properly						
	g 25-year property			25 yrs		S/L	
	Residential rental			27.5 yrs	MM	S/L	
	property			27.5 yrs	MM	S/L	
	Nonresidential real			39 yrs	MM	S/L	
	property				MM	S/L	
	Section C -	 Assets Placed in 	n Service During 2009 Ta	ax Year Using the	Alternative		System
20	a Class life					S/L	
	າ 12-year	Access displaying the first		12 yrs		S/L	
	: 40-year			40 yrs	MM	S/L	
	t IV Summary (See in						
21	Listed property. Enter amo	ount from line 28.	.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u>2</u> 1	
22	Total. Add amounts from line 12, the appropriate lines of your retu	lines 14 through 17, li	nes 19 and 20 in column (g), a corporations — see instruction	nd line 21. Enter here	and on	22	30,600.
23	For assets shown above a	nd placed in service	ne during the current year	r. enter			
4.3	the portion of the bacic att	ributable to section	n 263A costs		23		
	For Paperwork Reduction			****			Form 4562 (2009)

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Form **6781**

Gains and Losses From Section 1256 Contracts and Straddles

OMB	No.	154	5-0644
	n	n	9

Department of the Tre- Internal Revenue Serv			► Attacl	ı to your tax return.				A S	ttachment equence No. 82		
Name(s) shown on tax return					Identifying	number					
PRESTON &	ELIZABETH	OLSEN	273					-494	4		
Check all applicable t	ck all applicable boxes (see instructions). A Mixed straddle election C Mixed straddle				account election						
		В		Idle identification el	ection D	Ne	t section 12	256 cont	racts loss election		
Part I Se	ection 1256 (Contracts Ma	irked to Market								
1		(a) Identifi	cation of account			(b) (Loss)		(c) Gain		
From Sched	ule K-1						-1,8	44.			
						w					
2 Add the am	ounts on line I	in columns (b) a	and (c)		2		-1,8		7 044		
3 Net gain or	(loss). Combine	e line 2, columns	s (b) and (c)			,		3'	-1,844.		
4 Form 1099-	B adjustments.	See instructions	\$					4			
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				5	-1,844.		
Note: It line see instruct	ions.	gain, skip line o	and enter the gain	on line 7. Partnersl	прѕ апа э сс	ируган	UIIS,				
6 If you have	a net section 12	256 contracts los	ss and checked box	D above, enter the	amount of lo	ss to be	9	6			
							Г	7	-1,844.		
				Enter here and incl							
of Schedule	D (see instruct	ions)						8	<u>-738.</u>		
of Schedule	D (see instruct	ions)		Enter here and inclu				9	-1,106.		
La			raddles. Attach a	separate schedule	listing each:	straddle	and its co	mponen	ts.		
Section A -	I	1		1,,	70.		Lasi		T 415		
(a) Description of property	(b) Date entered into or acquired	(C) Date closed out or sold	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Los If column (e) than (d), e difference. Oil enter (on offsetting positions enter Otherwise,			(h) Recognized loss. If column (f) is more than (g), enter difference. Otherwise, enter -0-		
10					Eng.				enter 101		
							<u> </u>				
**************************************	<u> </u>				<u> </u>		<u> </u>				
11 a Enter the s Schedule D	hort-term portion (see instruction	n of losses from	line 10, column (h)	, here and include o	on the approp	oriate lii	ne of	<u>11 a</u>			
				here and include o				116			
Section B —			4.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			110	<u>' </u>		
(a) Description	T	(c) Date	(d) Gross	sales price	(e) Ca	st or othe	er basis	(f)) Gain, If column (d) is		
of property	entered into or acquired	closed out or sold	(4)			expense o		more	more than (e), enter difference. Otherwise, enter -0-		
12	,										
	<u> </u>				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1		
13a Enter the s	nort-term portion	n of gains from I	line 12, column (f),	here and include or	the appropri	iate line	e of	13a			
	•	•						134			
				nere and include on				13b	1		
				d on Last Day o					nstructions)		
	(a) Descri	iption of property			Fair market valu last business day of tax year		(d) Cost or basis as adju		(e) Unrecognized gain. If column (c) is more than (d), enter difference.		
14									Otherwise, enter -0-		
											
							····				
									F 6701 (0000)		
BAA For Paperv	ork Reduction	Act Notice, see	separate instruction	ns.	FDIZ1601 06	5/18/09			Form 6781 (2009)		

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SCHEDULE M (Form 1040A or 1040)

Name(s) shown on return

Making Work Pay and Government Retiree Credits

OMB No. 1545-0074 2009

Department of the Treasury Internal Revenue Service (99)

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

► See separate instructions.

Your social security number

PRE	STON & ELIZABETH OLSEN	-494	: 4
1 a	Important: See the instructions if you can be claimed as someone else's dependent or are filing Form 1040NR. Check the 'No' box below and see the instructions if (a) you have a net loss from a business, (b) you received a taxable scholarship or fellowship grant not reported on a Form W-2, (c) your wages include pay for work performed while an inmate in a penal institution, (d) you received a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan, or (e) you are filing Form 2555 or 2555-EZ. Do you (and your spouse if filing jointly) have 2009 wages of more than \$6,451 (\$12,903 if married filing jointly)? Yes. Skip lines 1a through 3. Enter \$400 (\$800 if married filing jointly) on line 4 and go to line 5.		
Ŀ	No. Enter your earned income (see instructions)	-	
2	(see instructions) Multiply line 1a by 6.2% (.062) 6,810	•	
3	Enter \$400 (\$800) if married filing jointly)	<u>-</u>	
	Enter the smaller of line 2 or line 3 (unless you checked 'Yes' on line 1a)	11000000	800.
	Enter the amount from Form 1040, line 38*, or Form 1040A, line 22		
	Enter \$75,000 (\$150,000 if married filing jointly)	-	
7	Is the amount on line 5 more than the amount on line 6? X No. Skip line 8. Enter the amount from line 4 on line 9 below. Yes. Subtract line 6 from line 5		
	Multiply line 7 by 2% (.02)		
9	Subtract line 8 from line 4. If zero or less, enter -0	9	800.
10	Did you (or your spouse, if filing jointly) receive an economic recovery payment in 2009? You may have received this payment if you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits (see instructions). X No. Enter -0- on line 10 and go to line 11.		
	Yes. Enter the total of the payments received by you (and your spouse, if filing jointly). Do not enter more than \$250 (\$500 if married filing jointly)	. 10	0,
11	Did you (or your spouse, if filing jointly) receive a pension or annuity in 2009 for services performed as an employee of the U.S. Government or any U.S. state or local government from work not covered by social security? Do not include any pension or annuity reported on Form W-2.		
	No. Enter -0- on line 11 and go to line 12. Yes. If you checked 'No' on line 10, enter \$250 (\$500 if married filing jointly and the answer on line 11 is 'Yes' for both spouses) If you checked 'Yes' on line 10, enter -0- (exception: enter \$250 if filing jointly and the spouse who received the pension or annuity did not receive an economic recovery payment described on line 10)	. 11	0.
	Add lines 10 and 11	. 12	0.
	Subtract line 12 from line 9. If zero or less, enter -0-	. 13	800.
14	Making work pay and government retiree credits. Add lines 11 and 13. Enter the result here and on Form 1040, line 63, Form 1040A, line 40; or Form 1040NR, line 60	. 14	800.

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*If you are filing Form 2555, 2555-EZ, or 4563 or you are excluding income from Puerto Rico, see instructions.

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

Schedule M (Form 1040A or 1040) 2009