

Electronic Filing Instructions for your 2010 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.



Haytham Faraj
22167 Morley Ave.
Dearborn, MI 48124

Balance Due/Refund	Your federal tax return (Form 1040) shows a refund due to you in the amount of \$1,087.00. Your tax refund should be direct deposited into your account within 8 to 14 days after your return is accepted. The account information you entered - Account Number: 1830176002 Routing Transit Number: 256074974.																		
Where's My Refund?	Before you call the Internal Revenue Service with questions about your refund, give them 8 to 14 days processing time from the date your return is accepted. If then you have not received your refund, or the amount is not what you expected, contact the Internal Revenue Service directly at 1-800-829-4477. You can also check www.irs.gov and select the "Where's my refund?" link.																		
No Signature Document Needed	No signature form is required since you signed your return electronically.																		
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your federal return																		
2010 Federal Tax Return Summary	<table><tr><td>Adjusted Gross Income</td><td>\$</td><td>154,717.00</td></tr><tr><td>Taxable Income</td><td>\$</td><td>96,498.00</td></tr><tr><td>Total Tax</td><td>\$</td><td>20,722.00</td></tr><tr><td>Total Payments/Credits</td><td>\$</td><td>21,809.00</td></tr><tr><td>Amount to be Refunded</td><td>\$</td><td>1,087.00</td></tr><tr><td>Effective Tax Rate</td><td></td><td>13.39%</td></tr></table>	Adjusted Gross Income	\$	154,717.00	Taxable Income	\$	96,498.00	Total Tax	\$	20,722.00	Total Payments/Credits	\$	21,809.00	Amount to be Refunded	\$	1,087.00	Effective Tax Rate		13.39%
Adjusted Gross Income	\$	154,717.00																	
Taxable Income	\$	96,498.00																	
Total Tax	\$	20,722.00																	
Total Payments/Credits	\$	21,809.00																	
Amount to be Refunded	\$	1,087.00																	
Effective Tax Rate		13.39%																	



Hi Haytham,

We just want to thank you for using TurboTax this year! It's our goal to make your taxes easy and accurate, year after year.

With TurboTax Home & Business:

Your Head Start On Next Year:

When you come back next year, taxes will be so easy! All your information will be saved and ready to transfer in to your new return. We'll ask you questions about what changed since we last talked, and we'll be ready to get you the credits and deductions you deserve, no matter what life throws at you.

Here's the final wrap up for your 2010 taxes:

Your federal refund is: \$ 1,087.00

We reviewed over 350 deductions and credits so you can be sure you didn't miss a thing, and that you got the maximum refund - guaranteed.
Your Deductions and Credits:

Your itemized deductions this year: \$54,569.00

Your Guarantee of Accuracy:

Breathe easy. The calculations on your return are backed with our 100% Accuracy Guarantee.

- We double checked your return for errors along the way.
- We helped with step-by-step guidance to get your answers on the right IRS forms.
- We asked you specific questions related to your business and found all the related deductions.
- We made sure you didn't miss a deduction even if something in your life changed, like a new job, new house - or more kids!

Also included:

- We e-filed your federal returns for free, so you could get your refund in as few as 8 days.
- We provide the Audit Support Center free of charge, in the unlikely event you get audited.

Many happy returns from TurboTax.



Audit Defense Order Confirmation

Thank you for choosing Audit Defense for your 2010 tax return. This service is provided by TaxResources, Inc. (TRI) an independent tax firm.

Name: Haytham Faraj
Confirmation Number: TTDS04604157265
Amount Paid: 39.95

When TRI defends your tax return during an IRS audit, you will have professional representation throughout the entire process.

TRI:

- Defends your 2010 tax return in an audit through the highest level of appeals
- Schedules and attends all audit appointments
- Reviews your tax return for additional problem areas
- Reviews your source documentation before the IRS sees it
- Handles all audit correspondence and makes all audit phone calls
- Prepares requests for appeals conferences and U.S. Tax Court Petition, if necessary
- Minimizes the financial impact of an audit

If you paid for Audit Defense by credit card:

1. You'll receive an email from TaxResources in two to five days notifying you that your membership has been processed
2. View and print your certificate at <http://intuit.taxaudit.com>
3. To ensure you receive your confirmation email, please add *AuditDefenseCertificates@taxaudit.com* to your email address book

If you choose to pay for Audit Defense with your tax refund (e-filed returns only):

1. You'll need notice that the IRS has accepted your efiled return and your refund has been processed
2. Two to five days after this, you'll receive an email from TaxResources notifying you that your membership has been processed
3. View and print your certificate at <http://intuit.taxaudit.com>
4. To ensure you receive your confirmation email, please add *AuditDefenseCertificates@taxaudit.com* to your email address book

IMPORTANT: If you're **filing by mail** and **did not pay** for Audit Defense with a credit card, your order will not go through. We recommend going back and either efilng your return or paying by credit card.

If you receive an audit or tax notice from the IRS or state taxing agency, contact TRI immediately at 877-829-9695. TRI's customer service office hours are 9 to 5 p.m. PST, Monday through Friday. TRI must be your only contact with the IRS (please read the Audit Defense Membership Agreement).

For more information or to purchase Audit Defense for other tax returns, visit TRI's website at <http://intuit.taxaudit.com>.



Consent to Use Your Tax Return Information

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use, without your consent, your tax return information for purposes other than the preparation and filing of your tax return.

You are not required to complete this form. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

Before we continue, we need your permission to check your tax return to see if you are eligible for certain options in our program. Specifically, we would like to check your age, whether you have a refund and the amount, your state of residence, and whether you are a U.S. Resident.

The following statements apply:

I authorize Intuit, the maker of TurboTax to use the 2010 tax return information described above to determine my eligibility to place all or a portion of my refund on a debit card.

Sign this agreement by entering your name:

Haytham

Taxpayer's First Name

Faraj

Taxpayer's Last Name

Spouse's First Name (if applicable)

Spouse's Last Name (if applicable)

Enter today's date:

05/10/2011

Date

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.

Name, Address, and SSN

For the year Jan 1 - Dec 31, 2010, or other tax year beginning , 2010, ending , 20
OMB No. 1545-0074
Your first name MI Last name
Haytham Faraj
Your social security number
321-70-6884
If a joint return, spouse's first name MI Last name
Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. Apartment no.
22167 Morley Ave.
Make sure the SSN(s) above and on line 6c are correct.
City, town or post office. If you have a foreign address, see instructions. State ZIP code
Dearborn MI 48124
Checking a box below will not change your tax or refund.
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? You Spouse

Filing Status

1 [X] Single
2 [] Married filing jointly (even if only one had income)
3 [] Married filing separately. Enter spouse's SSN above & full name here.
4 [] Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here
5 [] Qualifying widow(er) with dependent child

Exemptions

6a [X] Yourself. If someone can claim you as a dependent, do not check box 6a.
b [] Spouse
c Dependents:
(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) [X] if child under age 17 qualifying for child tax cr (see instrs)
Boxes checked on 6a and 6b 1
No. of children on 6c who:
• lived with you
• did not live with you due to divorce or separation (see instrs)
Dependents on 6c not entered above
Add numbers on lines above 1
d Total number of exemptions claimed 1

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 103,908.
8a Taxable interest. Attach Schedule B if required 8a 47.
8b Tax-exempt interest. Do not include on line 8a 8b
9a Ordinary dividends. Attach Schedule B if required 9a 38.
9b Qualified dividends 9b 38.
10 Taxable refunds, credits, or offsets of state and local income taxes 10 946.
11 Alimony received 11
12 Business income or (loss). Attach Schedule C or C-EZ 12
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here 13
14 Other gains or (losses). Attach Form 4797 14 -2.
15a IRA distributions 15a b Taxable amount 15b
16a Pensions and annuities 16a b Taxable amount 16b 40,738.
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 9,404.
18 Farm income or (loss). Attach Schedule F 18
19 Unemployment compensation 19
20a Social security benefits 20a b Taxable amount 20b
21 Other income 21
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income 22 155,079.

Adjusted Gross Income

23 Educator expenses 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 29 362.
30 Penalty on early withdrawal of savings 30
31a Alimony paid b Recipient's SSN 31a
32 IRA deduction 32
33 Student loan interest deduction 33
34 Tuition and fees. Attach Form 8917 34
35 Domestic production activities deduction. Attach Form 8903 35
36 Add lines 23 - 31a and 32 - 35 36 362.
37 Subtract line 36 from line 22. This is your adjusted gross income 37 154,717.

Tax and Credits

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-55 for Tax and Credits.

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 56-60 for Other Taxes.

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Includes lines 61-72 for Payments.

Refund

Direct deposit? See instructions.

Table with 3 columns: Line number, Description, and Amount. Includes lines 73-75 for Refund.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 76-77 for Amount You Owe.

Third Party Designee

Form for Third Party Designee with fields for name, phone number, and PIN.

Sign Here

Signature area with fields for taxpayer and spouse signatures, dates, and occupations.

Paid Preparer's Use Only

Form for Paid Preparer's Use Only with fields for name, address, and EIN.

**SCHEDULE A
(Form 1040)**

Itemized Deductions

OMB No. 1545-0074

2010

Attachment
Sequence No. **07**

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to Form 1040.**

▶ **See Instructions for Schedule A (Form 1040).**

Name(s) shown on Form 1040

Haytham Faraj

Your social security number

321-70-6884

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	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	5 State and local (check only one box):		5		
	a	<input checked="" type="checkbox"/> Income taxes, or		4,520.	
	b	<input type="checkbox"/> General sales taxes			
	6	Real estate taxes (see instructions)	6	7,864.	
	7	New motor vehicle taxes from line 11 of the worksheet on page 2 (for certain vehicles purchased in 2009). Skip this line if you checked box 5b	7		
	8	Other taxes. List type and amount ▶ <u>Personal Property & Other taxes</u> 426.	8	426.	
	9	Add lines 5 through 8	9	12,810.	
	Interest You Paid	10	Home mtg interest and points reported to you on Form 1098	10	27,332.
		11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying number, and address ▶	11	
Note. Your mortgage interest deduction may be limited (see instrs).					
12		Points not reported to you on Form 1098. See instrs for spl rules	12		
13		Mortgage insurance premiums (see instructions)	13		
14		Investment interest. Attach Form 4952 if required. (See instrs.)	14		
15		Add lines 10 through 14	15	27,332.	
Gifts to Charity		16	Gifts by cash or check. If you made any gift of \$250 or more, see instrs	16	3,700.
	17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17		
	18	Carryover from prior year	18		
	19	Add lines 16 through 18	19	3,700.	
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20		
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses — job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶ <u>See Form 2106/2106-EZ</u> 13,747.	21	13,747.	
	22	Tax preparation fees	22	74.	
	23	Other expenses — investment, safe deposit box, etc. List type and amount ▶	23		
	24	Add lines 21 through 23	24	13,821.	
	25	Enter amount from Form 1040, line 38	25	154,717.	
	26	Multiply line 25 by 2% (.02)	26	3,094.	
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	10,727.	
Other Miscellaneous Deductions	28	Other — from list in instructions. List type and amount ▶	28		
Total Itemized Deductions	29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40	29	54,569.	
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ <input type="checkbox"/>			

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss
(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc)
▶ Attach to Form 1040, 1040NR, or Form 1041.
▶ See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

2010

Attachment
Sequence No. **13**

Name(s) shown on return

Haytham Faraj

Your social security number

321-70-6884

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 instructions). 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	Town home 423 Commerce st. Aurora, IL 60504	● 14 days, or ● 10% of the total days rented at fair rental value? (See instructions.)	A		X
B	Residential rental 5626 Cambourne rd Darborn Heights, MI 48127		B		X
C			C		

Income:	Properties			Totals (Add columns A, B, and C.)
	A	B	C	
3 Rents received	3 10,470.	0.		3 10,470.
4 Royalties received	4			4
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6 250.			
7 Cleaning and maintenance	7 1,428.			
8 Commissions	8			
9 Insurance	9 535.	958.		
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc (see instructions)	12 13,927.			12 13,927.
13 Other interest	13			
14 Repairs	14 2,690.	550.		
15 Supplies	15			
16 Taxes	16 5,543.	1,931.		
17 Utilities	17	2,305.		
18 Other (list) ▶	18			
19 Add lines 5 through 18	19 24,373.	5,744.		19 30,117.
20 Depreciation expense or depletion (see instructions)	20 7,799.	3,253.		20 11,052.
21 Total expenses. Add lines 19 and 20 . .	21 32,172.	8,997.		
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 instructions to find out if you must file Form 6198	22 -21,702.	-8,997.		
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See instructions to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23 0.	0.		
24 Income. Add positive amounts shown on line 22. Do not include any losses	24			24
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25			25 0.
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			26 0.

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

Your social security number

Haytham Faraj

321-70-6884

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 the box in column (e) on line 28 and attach Form 6198. See instructions.

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
If you answered 'Yes,' see instructions before completing this section.

28	(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
A	The Law Firm of Puckett & Faraj, PC	S	<input type="checkbox"/>	26-2570788	<input type="checkbox"/>
B			<input type="checkbox"/>		<input type="checkbox"/>
C			<input type="checkbox"/>		<input type="checkbox"/>
D			<input type="checkbox"/>		<input type="checkbox"/>

Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A				9,404.
B				
C				
D				
29a Totals				9,404.
b Totals				
30 Add columns (g) and (j) of line 29a				30 9,404.
31 Add columns (f), (h), and (i) of line 29b				31
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				32 9,404.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer ID no.
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a Totals			
b Totals			
35 Add columns (d) and (f) of line 34a			35
36 Add columns (c) and (e) of line 34b			36
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below			37

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

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	9,404.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see instructions)	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

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

Haytham Faraj

Identifying number

321-70-6884

1 Enter the gross proceeds from sales or exchanges reported to you for 2010 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) **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)

2	(a) Description of property	(b) Date acquired (month, day, year)	(c) Date sold (month, day, year)	(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)
	From K-1						-2.

3 Gain, if any, from Form 4684, line 42 **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 **7** -2.

Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

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):

11 Loss, if any, from line 7 **11** -2.

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 34 and 41a **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** -2.

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 38, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss 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** -2.

**Depreciation and Amortization
(Including Information on Listed Property)**

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

Name(s) shown on return

Haytham Faraj

Identifying number

321-70-6884

Business or activity to which this form relates

Form 2106 Attorney

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	0.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

Section B – Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(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
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property	02/10	48,318.	39 yrs	MM	S/L	1,084.
				MM	S/L	

Section C – Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	1,084.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C** if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 24b If 'Yes,' is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No								
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25								
26 Property used more than 50% in a qualified business use:								
27 Property used 50% or less in a qualified business use:								
Mercedes Benz S55	09/10/09	0.00						
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28								
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29								

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2010 tax year (see instructions):					
43 Amortization of costs that began before your 2010 tax year. 43					
44 Total. Add amounts in column (f). See the instructions for where to report 44					

**Depreciation and Amortization
(Including Information on Listed Property)**

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

Name(s) shown on return

Haytham Faraj

Identifying number

321-70-6884

Business or activity to which this form relates

Sch E Residential rental

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

Section B – Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(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
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property	03/10	113,000.	27.5 yrs	MM	S/L	3,253.
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C – Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	3,253.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Passive Activity Loss Limitations

Department of the Treasury
Internal Revenue Service (99)

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

2010

Attachment
Sequence No. **88**

Name(s) shown on return

Identifying number

Haytham Faraj

321-70-6884

Part I 2010 Passive Activity Loss

Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)			
1 a Activities with net income (enter the amount from Worksheet 1, column (a))	1 a	0 .	
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1 b	-30,699 .	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1 c	-5,456 .	
d Combine lines 1a, 1b, and 1c	1 d		-36,155 .

Commercial Revitalization Deductions From Rental Real Estate Activities			
2 a Commercial revitalization deductions from Worksheet 2, column (a)	2 a		
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2 b		
c Add lines 2a and 2b	2 c		

All Other Passive Activities			
3 a Activities with net income (enter the amount from Worksheet 3, column (a))	3 a		
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3 b		
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3 c		
d Combine lines 3a, 3b, and 3c	3 d		

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		-36,155 .
--	----------	--	-----------

- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
 - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
 - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See the instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5		36,155 .
6 Enter \$150,000. If married filing separately, see the instructions	6	150,000 .	
7 Enter modified adjusted gross income, but not less than zero (see instructions)	7	154,717 .	
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 instructions	9		
10 Enter the smaller of line 5 or line 9	10		0 .

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 in 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		0 .
16 Total losses allowed from all passive activities for 2010. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return	16		0 .

BAA For Paperwork Reduction Act Notice, see the instructions.

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
423 Commerce st.	0.	21,702.	5,456.		27,158.
5626 Cambourne rd	0.	8,997.			8,997.
Total. Enter on Form 8582, lines 1a, 1b, and 1c ▶	0.	30,699.	5,456.		

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
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶					

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 ▶			1.00		

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
423 Commerce st.	E Ln 23	27,158.	0.75115475	27,158.
5626 Cambourne rd	E Ln 23	8,997.	0.24884525	8,997.
Total ▶		36,155.	1.00	36,155.

Worksheet 6 – Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
423 Commerce st.	E Ln 23	27,158.	27,158.	0.
5626 Cambourne rd	E Ln 23	8,997.	8,997.	0.
Total		36,155.	36,155.	0.

Worksheet 7 – Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)

Name of activity . . .	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total			1.00		

Name of activity . . .					
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions)					
1 a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total			1.00		

Your name Haytham Faraj	Occupation in which you incurred expenses Attorney	Social security number 321-70-6884
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You Can Use This Form Only if All of the Following Apply.

- You are an employee deducting ordinary and necessary expenses attributable to your job. An ordinary expense is one that is common and accepted in your field of trade, business, or profession. A necessary expense is one that is helpful and appropriate for your business. An expense does not have to be required to be considered necessary.
- You **do not** get reimbursed by your employer for any expenses (amounts your employer included in box 1 of your Form W-2 are not considered reimbursements for this purpose).
- If you are claiming vehicle expense, you are using the standard mileage rate for 2010.

Caution: You can use the standard mileage rate for 2010 **only if:** (a) you owned the vehicle and used the standard mileage rate for the first year you placed the vehicle in service, **or** (b) you leased the vehicle and used the standard mileage rate for the portion of the lease period after 1997.

Part I Figure Your Expenses

1	Vehicle expense using the standard mileage rate. Complete Part II and multiply line 8a by 50¢ (.50)	1	0.
2	Parking fees, tolls, and transportation, including train, bus, etc, that did not involve overnight travel or commuting to and from work	2	76.
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	662.
4	Business expenses not included on lines 1 through 3. Do not include meals and entertainment	4	11,061.
5	Meals and entertainment expenses: \$ <u>3,896.</u> x 50% (.50) (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 80% (.80) instead of 50%. For details, see instructions.)	5	1,948.
6	Total expenses. Add lines 1 through 5. Enter here and on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 9). (Armed Forces reservists, fee-basis state or local government officials, qualified performing artists, and individuals with disabilities: See the instructions for special rules on where to enter this amount.)	6	13,747.

Part II Information on Your Vehicle. Complete this part **only** if you are claiming vehicle expense on line 1.

7 When did you place your vehicle in service for business use? (month, day, year) ▶ 09/10/2009

8 Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your vehicle for:

a Business 0 b Commuting (see instr) 800 c Other 2,700

9 Was your vehicle available for personal use during off-duty hours? **Yes** **No**

10 Do you (or your spouse) have another vehicle available for personal use? **Yes** **No**

11 a Do you have evidence to support your deduction? **Yes** **No**

 b If 'Yes,' is the evidence written? **Yes** **No**

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

Form 1040 Qualified Dividends and Capital Gain Tax Worksheet 2010

Line 44

► Keep for your records

Name(s) Shown on Return Haytham Faraj	Social Security Number 321-70-6884
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1	Enter the amount from Form 1040, line 43	1	<u>96,498.</u>
2	Enter the amount from Form 1040, line 9b	2	<u>38.</u>
3	Are you filing Schedule D? <input type="checkbox"/> Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or 16 is blank or loss, enter -0- <input checked="" type="checkbox"/> No. Enter the amount from Form 1040, line 13.	3	<u> </u>
4	Add lines 2 and 3	4	<u>38.</u>
5	If filing Form 4952 (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise enter -0-	5	<u>0.</u>
6	Subtract line 5 from line 4. If zero or less, enter -0-	6	<u>38.</u>
7	Subtract line 6 from line 1. If zero or less, enter -0-	7	<u>96,460.</u>
8	Enter: \$34,000 if single or married filing separately, \$68,000 if married filing jointly or qualifying widow(er), or \$45,550 if head of household.	8	<u>34,000.</u>
9	Enter the smaller of line 1 or line 8	9	<u>34,000.</u>
10	Enter the smaller of line 7 or line 9	10	<u>34,000.</u>
11	Subtract line 10 from line 9 (this amount taxed at 0%)	11	<u>0.</u>
12	Enter the smaller of line 1 or line 6	12	<u>38.</u>
13	Enter the amount from line 11	13	<u>0.</u>
14	Subtract line 13 from line 12.	14	<u>38.</u>
15	Multiply line 14 by 15% (.15)	15	<u>6.</u>
16	Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet.	16	<u>20,722.</u>
17	Add lines 15 and 16	17	<u>20,728.</u>
18	Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet.	18	<u>20,722.</u>
19	Tax on all taxable income. Enter the smaller of line 17 or line 18 here and on Form 1040, line 44.	19	<u>20,722.</u>

Tax Payments Worksheet

2010

▶ Keep for your records

Name(s) Shown on Return Haytham Faraj	Social Security Number 321-70-6884
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Estimated Tax Payments for 2010 (If more than 4 payments for any state or locality, see Tax Help)

	Federal		State			Local		
	Date	Amount	Date	Amount	ID	Date	Amount	ID
1	04/15/10		04/15/10			04/15/10		
2	06/15/10		06/15/10			06/15/10		
3	09/15/10		09/15/10			09/15/10		
4	01/18/11		01/18/11			01/18/11		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)	Federal	State	ID	Local	ID
6 Overpayments applied to 2010					
7 Credited by estates and trusts					
8 Totals Lines 1 through 7					
9 2010 extensions					

Taxes Withheld From:	Federal	State	Local
10 Forms W-2	19,014.	4,520.	
11 Forms W-2G			
12 Forms 1099-R	2,795.		
13 Forms 1099-MISC and 1099-G	0.	0.	
14 Schedules K-1			
15 Forms 1099-INT, DIV and OID			
16 Social Security and Railroad Benefits			
17 Form 1099-B			
18 a Other withholding			
b Other withholding			
c Other withholding			
19 Total Withholding Lines 10 through 18c	21,809.	4,520.	
20 Total Tax Payments for 2010	21,809.	4,520.	

Prior Year Taxes Paid In 2010 (If multiple states or localities, see Tax Help)	State	ID	Local	ID
21 Tax paid with 2009 extensions				
22 2009 estimated tax paid after 12/31/09				
23 Balance due paid with 2009 return				
24 Other (amended returns, installment payments, etc)				

Charitable Contributions Summary

2010

▶ Keep for your records

Name(s) Shown on Return Haytham Faraj	Social Security Number 321-70-6884
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Part I

 Cash Contributions Summary

Name of Charitable Organization	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) 100% Limit (Sch. K-1)
Arab American National Muesem	250.	250.		
Arab American National Muesem	400.	400.		
Arab American National Muesem	100.	100.		
Trial Lawyers College	2,400.	2,400.		
Trial Lawyers College	355.	355.		
Michigan Radio NPR	75.	75.		
ACLU	120.	120.		
Totals:	3,700.	3,700.		

Part II

 Non-Cash Contributions Summary

Name of Charitable Organization	Total	Other Property		Capital Gain Property	
	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) 30% Limit	(e) 20% Limit
Totals:					

Part III

 Contribution Carryovers to 2011

	Total	Cash and Other Non-Capital Gain Property			Capital Gain Property	
	(a) Total	(b) 100% Limit	(c) 50% Limit	(d) 30% Limit	(e) 30% Limit	(f) 20% Limit
1 2010 contributions	3,700.		3,700.			
2 2010 contributions allowed	3,700.	0.	3,700.	0.	0.	0.
3 Carryovers from:						
a 2009 tax year						
b 2008 tax year						
c 2007 tax year						
d 2006 tax year						
e 2005 tax year						
4 Carryovers allowed in 2010	0.		0.	0.	0.	0.
5 Carryovers disallowed in 2010	0.		0.	0.	0.	0.
6 Carryovers to 2011:						
a From 2010	0.		0.	0.	0.	0.
b From 2009						
c From 2008						
d From 2007						
e From 2006						
f From 2005 (expired)						

Part IV

 Special Situations in Your Return for Current Year Donations

- 1 Was the **entire interest** given for all property donated to all charities? Yes No
- 2 Were **restrictions** attached to any charities's right to use or dispose of any property donated to any charity? Yes No
- 3 Did you give to anyone other than the charity the right to income from any of the donated property or to possession of any of the donated property? Yes No
- 4 Was any charity other than a 50% charity? Yes No

Schedule E

Schedule E Worksheet

2010

Keep for your records.

Name(s) as shown on return Haytham Faraj Social Security Number 321-70-6884

This copy of the worksheet will be on Schedule E, Page 1, Copy 1, Property A

1 Property type Town home Location (street address) 423 Commerce st.
 City Aurora State IL Zip 60504 Foreign Country _____

Check all that apply

- A Owned by spouse
- B Owned jointly
- C Rental property
- D Royalty property
- E Active participation
- F Material participation
- G Commercial property
- H Some investment is not at risk
- I Rented to a nonpassive activity
- J Other passive exceptions
- K Complete taxable disposition - See Help
- L Treat all MACRS assets for this activity as qualified Indian reservation property? Yes No
- M Treat all assets acquired after August 27, 2005 as qualified GO Zone property? Regular Extension No
- N Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? Yes No
- O Was this activity located in a Qualified Disaster Area? Yes No

Ownership Percentage

- P Check to allocate income and expenses using ownership percentage
- Q Enter ownership percentage _____ %

Combined personal residence and rental use

- R Check to allocate personal use items
- S Percentage of rental use _____ %

Vacation home

- T Check if this is a vacation home property
- U Check to allocate interest and taxes using Tax Court Method
- V Number of days rented _____
- W Number of days personal use _____
- X Number of days property owned if less than 365 _____

Income

		% if Different	Total
3 Enter rental income (not reported on 1099)			
Rents from 1099-MISC and Cancellation of Debt Worksheets	10,470.		
Total rents received	10,470.	100.000000	10,470.
4 Enter royalties received (not reported on 1099)			
Royalties from 1099-MISC, Schedule K-1 and Cancellation of Debt Worksheets			
Total royalties received			

Expenses

	(a) Total	(b) Enter % if not 100.00	(c) Reported on Schedule E	(d) Vacation Home Loss Limitation	(e) Allocated to Personal Use
5 Advertising					
6a Auto					
b Travel	250.		250.		
7 Cleaning and maintenance	1,428.		1,428.		
8 Commissions					
9a Mortgage insurance qualified					
b Other insurance	535.		535.		
10 Legal and other professional fees					
11 Management fees					
12a Mortgage interest qualified	13,927.		13,927.		
b Mortgage interest other					
13 Other interest					
14 Repairs	2,690.		2,690.		
15 Supplies					
16a Real estate taxes	5,543.		5,543.		
b Other taxes					
17 Utilities					
18 Other expenses					
a					
b					
c					
d					
e Indirect operating expense					
f Operating expense carryover					
g Vehicle rental					
h Amortization					
19 Add lines 5 through 18	24,373.		24,373.		
20a Depreciation	7,799.		7,799.		
b Depletion					
c Depreciation carryover					
21 Total expenses. Add 19 and 20			32,172.		
22 Income or (loss)			-21,702.		
23 Deductible rental real estate loss			0.		

Schedule E

Schedule E Worksheet

2010

Keep for your records.

Name(s) as shown on return Haytham Faraj Social Security Number 321-70-6884

This copy of the worksheet will be on Schedule E, Page 1, Copy 1, Property B

1 Property type Residential rental Location (street address) 5626 Cambourne rd
 City Darborn Heights State MI Zip 48127 Foreign Country _____

Check all that apply

- A Owned by spouse
- B Owned jointly
- C Rental property
- D Royalty property
- E Active participation
- F Material participation
- G Commercial property
- H Some investment is not at risk
- I Rented to a nonpassive activity
- J Other passive exceptions
- K Complete taxable disposition - See Help
- L Treat all MACRS assets for this activity as qualified Indian reservation property? Yes No
- M Treat all assets acquired after August 27, 2005 as qualified GO Zone property? Regular Extension No
- N Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? Yes No
- O Was this activity located in a Qualified Disaster Area? Yes No

Ownership Percentage

- P Check to allocate income and expenses using ownership percentage
- Q Enter ownership percentage _____ %

Combined personal residence and rental use

- R Check to allocate personal use items
- S Percentage of rental use _____ %

Vacation home

- T Check if this is a vacation home property
- U Check to allocate interest and taxes using Tax Court Method
- V Number of days rented _____
- W Number of days personal use _____
- X Number of days property owned if less than 365 _____

Income

		% if Different	Total
3 Enter rental income (not reported on 1099)	0.		
Rents from 1099-MISC and Cancellation of Debt Worksheets			
Total rents received	0.	100.000000	0.
4 Enter royalties received (not reported on 1099)			
Royalties from 1099-MISC, Schedule K-1 and Cancellation of Debt Worksheets			
Total royalties received			

Expenses

	(a) Total	(b) Enter % if not 100.00	(c) Reported on Schedule E	(d) Vacation Home Loss Limitation	(e) Allocated to Personal Use
5 Advertising					
6a Auto					
b Travel					
7 Cleaning and maintenance					
8 Commissions					
9a Mortgage insurance qualified					
b Other insurance	958.		958.		
10 Legal and other professional fees					
11 Management fees					
12a Mortgage interest qualified					
b Mortgage interest other					
13 Other interest					
14 Repairs	550.		550.		
15 Supplies					
16a Real estate taxes	1,931.		1,931.		
b Other taxes					
17 Utilities	2,305.		2,305.		
18 Other expenses					
a					
b					
c					
d					
e Indirect operating expense					
f Operating expense carryover					
g Vehicle rental					
h Amortization					
19 Add lines 5 through 18	5,744.		5,744.		
20a Depreciation	3,253.		3,253.		
b Depletion					
c Depreciation carryover					
21 Total expenses. Add 19 and 20			8,997.		
22 Income or (loss)			-8,997.		
23 Deductible rental real estate loss			0.		

Shareholder's Share of Income, Credits,
Deductions, etc.

2010

► Keep for your records

Shareholder's Name Haytham Faraj	Social Security Number 321-70-6884
-------------------------------------	---------------------------------------

Part I Information About the Corporation

- A** Corporation's Employer Identification Number 26-2570788
- B** Corporation's
 Name The Law Firm of Puckett & Faraj, PC
 Address
 City
 State
 ZIP Code
- C** IRS Center where corporation filed return

Part II Information About the Shareholder

- Shareholder is Taxpayer Spouse Joint
- D** Shareholder's Identifying Number 321-70-6884
- E** Shareholder's
 Name Haytham Faraj
 Address 22167 Morley Ave.
 City Dearborn
 State MI
 ZIP Code 48124
- F** Shareholder's percentage of stock ownership for tax year 50.000000 %
 At-Risk Status (check one):
 All investment in corporation is at-risk
 Some investment in corporation **not** at-risk

Final K-1 Amended K-1

Part III Shareholder's Share of Current Year Income, Deductions, Credits, Other Items

- Check Type of Activity Reported on this Schedule K-1:
- Business
 Rental Real Estate
 Other Rental Activities
 Other (investment club, etc.)
- 1** Ordinary business income (loss) 9,404.
 Check if "materially" participated in the business activities
- 2** Net rental real estate income (loss)
 Check if "materially" participated in rental real estate activities
 Check if "actively" participated in rental real estate activities
 Check if rental of property to a nonpassive activity
- 3** Other net rental income (loss)
 Check if rental of property to a nonpassive activity
- 4** Interest income
 Interest income from U.S. obligations included in box 4.
- 5 a** Ordinary dividends
5 b Qualified dividends
 Interest income from U.S. obligations included in box 5.
- 6** Royalties
Double-click to link royalties to Schedule E Worksheet

Part III Shareholder's Share of Current Year Income, Deductions, Other Items (continued)

7	Net short-term capital gain (loss)	_____
8 a	Net long-term capital gain (loss)	_____
8 b	Collectibles (28%) gain (loss)	_____
8 c	Unrecaptured section 1250 gain	_____
9	Net section 1231 gain (loss)	-2.
10	Other income (loss)	
	Code Description	Amount
	_____	_____
	_____	_____
	_____	_____
	_____	_____
11	Section 179 deduction	_____
12	Other deductions	
	Code Description	Amount
	_____	_____
	_____	_____
	_____	_____
	_____	_____
13	Credits & credit recapture	
	Code Description	Amount
	_____	_____
	_____	_____
	_____	_____
	_____	_____
14	Foreign transactions	
	A Name of country or U.S. possession ▶ _____	
	Code Description	Amount
	_____	_____
	_____	_____
	_____	_____
	_____	_____
15	Alternative minimum tax (AMT) items	
	Code Description	Amount
	A Post-1986 depreciation adjustment	-21.
	B Adjusted gain or loss **	-123.
	_____	_____
	_____	_____
	_____	_____
16	Items affecting shareholder basis	
	Code Description	Amount
	_____	_____
	_____	_____
	_____	_____
	_____	_____
17	Other information	
	Code Description	Amount
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Name(s) Shown on Return
Haytham Faraj

Social Security Number
321-70-6884

Part I Information from Form(s) 1098-E, Student Loan Interest Statement

(a) Lender's name	(b) Student loan interest (Box 1)
_____	_____
_____	_____
_____	_____
Total student loan interest.	_____

Part II Computation of Student Loan Interest Deduction

1 Enter the total interest you paid in 2010 on qualified student loans (see Form 1040 instructions).	1	1,638.
2 Enter the smaller of line 1 or \$2,500.	2	1,638.
3 Modified AGI Note: If line 3 is \$75,000 or more if single, head of household, or qualifying widow(er) or \$150,000 or more if married filing jointly, stop here . You cannot take the deduction.	3	154,717.
4 Enter: \$60,000 if single, head of household, or qualifying widow(er); \$120,000 if married filing jointly.	4	_____
5 Subtract line 4 from line 3. If zero or less, enter -0- here and on line 7, skip line 6, and go on to line 8	5	_____
6 Divide line 5 by \$15,000 or \$30,000 if married filing jointly. Enter the result as a decimal (rounded to at least three places)	6	_____
7 Multiply line 2 by line 6	7	_____
8 Student loan interest deduction. Subtract line 7 from line 2. Enter the result here and on Form 1040, line 33. Do not include this amount in figuring any other deduction on your return (such as on Schedule A, C, E, etc.)	8	_____

* **Modified AGI** is the amount from Form 1040, line 22, increased by any excludable income from Puerto Rico, or of bona fide residents of American Samoa, Guam, or the Commonwealth of the Northern Mariana Islands, and foreign earned income/housing exclusion, and decreased by amounts on Form 1040, lines 23 through 32 and any write-in amount next to line 36, not including the Foreign housing deduction on line A of the Other Adjustments to Income Smart Worksheet.

Federal Carryover Worksheet

2010

▶ Keep for your records

Name(s) Shown on Return Haytham Faraj	Social Security Number 321-70-6884
--	---------------------------------------

2009 State and Local Income Tax Information (See Tax Help)

(a) State or Local ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With- held/Pmts	(e) Paid With Return	(f) Total Over- payment	(g) Applied Amount
MI			3,903.		946.	
Totals . .			3,903.		946.	

Other Tax and Income Information

	2009	2010
1 Filing status	1 1 Single	1 1 Single
2 Number of exemptions for blind or over 65 (0 - 4)	2 _____	2 _____
3 Itemized deductions after limitation	3 24,382.	3 54,569.
4 Check box if required to itemize deductions	4 <input type="checkbox"/>	4 <input type="checkbox"/>
5 Adjusted gross income	5 103,027.	5 154,717.
6 Tax liability for Form 2210 or Form 2210-F	6 14,766.	6 20,722.
7 Alternative minimum tax	7 0.	7 0.
8 Federal overpayment applied to next year estimated tax	8 _____	8 _____

QuickZoom to the IRA Information Worksheet for IRA information ▶

Excess Contributions

	2009	2010
9 a Taxpayer's excess Archer MSA contributions as of 12/31	9 a _____	_____
b Spouse's excess Archer MSA contributions as of 12/31	b _____	_____
10 a Taxpayer's excess Coverdell ESA contributions as of 12/31	10 a _____	_____
b Spouse's excess Coverdell ESA contributions as of 12/31	b _____	_____
11 a Taxpayer's excess HSA contributions as of 12/31	11 a _____	_____
b Spouse's excess HSA contributions as of 12/31	b _____	_____

Loss and Expense Carryovers

	2009	2010
12 a Short-term capital loss	12 a _____	_____
b AMT Short-term capital loss	b _____	_____
13 a Long-term capital loss	13 a _____	_____
b AMT Long-term capital loss	b _____	_____
14 a Net operating loss available to carry forward	14 a _____	_____
b AMT Net operating loss available to carry forward	b _____	_____
15 a Investment interest expense disallowed	15 a _____	_____
b AMT Investment interest expense disallowed	b _____	_____
16 Nonrecaptured net Section 1231 losses from:	16 a _____	2.
a 2010	b _____	_____
b 2009	c _____	_____
c 2008	d _____	_____
d 2007	e _____	_____
e 2006	f _____	_____
f 2005	_____	_____

Haytham Faraj

321-70-6884

Loss and Expense Carryovers (cont'd)				2009	2010
17	AMT Nonrecap'd net Sec 1231 losses from:	a	2010 . . .	17 a	125.
		b	2009 . . .	b	
		c	2008 . . .	c	
		d	2007 . . .	d	
		e	2006 . . .	e	
		f	2005 . . .	f	
Credit Carryovers				2009	2010
18	General business credit		18		
19	Adoption credit from:	a	2010	19 a	
		b	2009	b	
		c	2008	c	
		d	2007	d	
		e	2006	e	
		f	2005	f	
20	Mortgage interest credit from:	a	2010	20 a	
		b	2009	b	
		c	2008	c	
		d	2007	d	
21	Credit for prior year minimum tax		21		
22	District of Columbia first-time homebuyer credit		22		
23	Residential energy efficient property credit		23		
Other Carryovers				2009	2010
24	Section 179 expense deduction disallowed		24		
25	Excess foreign housing deduction:	a	Taxpayer (Form 2555, line 46)	25 a	
		b	Taxpayer (Form 2555, line 48)	b	
		c	Spouse (Form 2555, line 46)	c	
		d	Spouse (Form 2555, line 48)	d	

Haytham Faraj

321-70-6884

Charitable Contribution Carryovers

26 2009 Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	(b) 30%	(c) 30%	(d) 20%
a 2009				
b 2008				
c 2007				
d 2006				
e 2005				

27 2010 Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	(b) 30%	(c) 30%	(d) 20%
a 2010				
b 2009				
c 2008				
d 2007				
e 2006				

28 Amount overpaid less earned income credit 4,343.

2009 State Capital Loss Carryovers (For users not transferring from the prior year)

State ID	Short-term Capital Loss for State	AMT Short-term Capital Loss for State	Long-term Capital Loss for State	AMT Long-term Capital Loss for State	Capital Loss (combined) for State	AMT Capital Loss (combined) for State

IRA Information Worksheet

2010

▶ Keep for your records

Name(s) Shown on Return Haytham Faraj	Social Security Number 321-70-6884
--	---------------------------------------

Part I Traditional IRA		Taxpayer	Spouse
	Basis and Value		
1	Total basis in traditional IRAs		
2	Year-end value on 12/31/2010.		
3	Basis carryover as of 12/31/2010		
Excess Contributions			
4	Excess contributions as of 12/31/2009		
5	Carryover of excess contributions to 2011		

Part II Roth IRA		Taxpayer	Spouse
Basis (Contribution and Conversion History)			
6	Basis in Roth IRA contributions	500.	
7	Basis in Roth IRA conversions.		
8	Contribution basis carryover as of 12/31/2010	500.	
9	Conversion basis carryover as of 12/31/2010		
Excess Contributions			
10	Excess contributions as of 12/31/2009		
11	Carryover of excess contributions to 2011		

Part III Traditional IRA Basis Detail		Taxpayer	Spouse
12	Basis for 2009 and earlier years		
13	Adjustment due to return of excess contributions		
14	Rollover of nontaxable portion of a qualified retirement plan		
15	Basis received from former spouse due to divorce or inherited.		
16	Basis transferred to former spouse due to divorce		
17	Adjusted total basis in Traditional IRAs.		

Part IV Traditional IRA Year-end Value Detail		Taxpayer	Spouse
18	Enter the combined value of all traditional IRAs (including SIMPLE IRAs) on 12/31/2010 (<i>See Help</i>)		
19	If any amounts were recharacterized either to or from any traditional IRA, enter the net amounts recharacterized after 12/31/2010 (<i>See Help</i>).		
20	Enter the total amount of any traditional IRA distributions that you rolled over, or intend to roll over, to another traditional IRA, but the rollover was (or will be) made after 12/31/2010		
21	Check this box if you converted all of the traditional IRAs you had in 2010 to Roth IRAs in 2010.	<input type="checkbox"/>	<input type="checkbox"/>

IRA Information Worksheet

► Keep for your records

2010

Page 2

Name(s) Shown on Return <u>Haytham Faraj</u>	Social Security Number <u>321-70-6884</u>
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Part V	Roth IRA Contribution and Conversion Balances	Taxpayer	Spouse
22	Opened a Roth IRA before 2006	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	2009 Balances (Basis - Before 2010 Transactions)		
23	Cumulative regular Roth IRA contributions, including rollovers from Roth 401(k) and Roth 403(b)	500.	
24	Cumulative pre 2006 conversions - taxable and nontaxable		
25	2006 conversion contributions taxable at conversion		
26	2006 conversion contributions not taxable at conversion		
27	2007 conversion contributions taxable at conversion		
28	2007 conversion contributions not taxable at conversion		
29	2008 conversion contributions taxable at conversion		
30	2008 conversion contributions not taxable at conversion		
31	2009 conversion contributions taxable at conversion		
32	2009 conversion contributions not taxable at conversion		
	2010 Transactions - Contributions	Taxpayer	Spouse
33	Regular Roth IRA contributions		
34	Rollover from Roth 401(k) and Roth 403(b)		
35	Conversion contributions taxable at conversion		
36	Conversion contributions not taxable at conversion		
37	Repayments of qualified Roth reservist distributions		
38	Repayment of basis from prior year hurricane distributions		
	2010 Transactions - Distributions		
39	Distributions from regular Roth IRA contributions and from rollovers from Roth 401(k) and Roth 403(b)		
40	Distributions from cumulative pre 2006 conversions		
41	Distributions from 2006 conversions taxable at conversion		
42	Distributions from 2006 conversions not taxable at conversion		
43	Distributions from 2007 conversions taxable at conversion		
44	Distributions from 2007 conversions not taxable at conversion		
45	Distributions from 2008 conversions taxable at conversion		
46	Distributions from 2008 conversions not taxable at conversion		
47	Distributions from 2009 conversions taxable at conversion		
48	Distributions from 2009 conversions not taxable at conversion		
49	Distributions from 2010 conversions taxable at conversion		
50	Distributions from 2010 conversions not taxable at conversion		
51	Did you have any open Roth IRA accounts on 12/31/2010?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Balance carryover to 2011 (Basis - After 2010 Transactions)		
52	Cumulative regular Roth IRA contributions, including rollovers from Roth 401(k) and Roth 403(b)	500.	
53	Cumulative pre 2007 conversions - taxable and nontaxable		
54	2007 conversion contributions taxable at conversion		
55	2007 conversion contributions not taxable at conversion		
56	2008 conversion contributions taxable at conversion		
57	2008 conversion contributions not taxable at conversion		
58	2009 conversion contributions taxable at conversion		
59	2009 conversion contributions not taxable at conversion		
60	2010 conversion contributions taxable at conversion		
61	2010 conversion contributions not taxable at conversion		

IRA Information Worksheet

2010

► Keep for your records

Page 3

Name(s) Shown on Return
Haytham Faraj

Social Security Number
321-70-6884

Part VI Roth IRA Basis Adjustments		Taxpayer	Spouse
	Received From Former Spouse due to Divorce or Inheritance		
62	Cumulative regular Roth IRA contributions, including rollovers from Roth 401(k) and Roth 403(b)	_____	_____
63	Cumulative pre 2006 conversions - taxable and nontaxable	_____	_____
64	2006 conversion contributions taxable at conversion	_____	_____
65	2006 conversion contributions not taxable at conversion	_____	_____
66	2007 conversion contributions taxable at conversion	_____	_____
67	2007 conversion contributions not taxable at conversion	_____	_____
68	2008 conversion contributions taxable at conversion	_____	_____
69	2008 conversion contributions not taxable at conversion	_____	_____
70	2009 conversion contributions taxable at conversion	_____	_____
71	2009 conversion contributions not taxable at conversion	_____	_____
72	2010 conversion contributions taxable at conversion	_____	_____
73	2010 conversion contributions not taxable at conversion	_____	_____
	Transferred To Former Spouse due to Divorce		
74	Cumulative regular Roth IRA contributions, including rollovers from Roth 401(k) and Roth 403(b)	_____	_____
75	Cumulative pre 2006 conversions - taxable and nontaxable	_____	_____
76	2006 conversion contributions taxable at conversion	_____	_____
77	2006 conversion contributions not taxable at conversion	_____	_____
78	2007 conversion contributions taxable at conversion	_____	_____
79	2007 conversion contributions not taxable at conversion	_____	_____
80	2008 conversion contributions taxable at conversion	_____	_____
81	2008 conversion contributions not taxable at conversion	_____	_____
82	2009 conversion contributions taxable at conversion	_____	_____
83	2009 conversion contributions not taxable at conversion	_____	_____
84	2010 conversion contributions taxable at conversion	_____	_____
85	2010 conversion contributions not taxable at conversion	_____	_____

Employee Home Office Worksheet

▶ Keep for your records

2010

Copy 1

Your name <u>Haytham Faraj</u>	Social Security Number <u>321-70-6884</u>
-----------------------------------	--

Part I **Part of Your Home Used for Business** Attorney
22167 Morley Ave.

1 Area used regularly and exclusively for business, regularly and exclusively for daycare, or regularly for inventory storage	1	<u>650</u>
2 Total area of home	2	<u>3,700</u>
3 Divide line 1 by line 2. Enter result as a percentage	3	<u>17.57</u> %
<ul style="list-style-type: none"> ● For daycare facilities not used exclusively for business, also complete lines 4 - 9. ● All others, skip lines 4 - 9 and enter the amount from line 3 on line 10. 		
4 Area used only partly for daycare	4	_____
5 Divide line 4 by line 2. Enter the result as a percentage	5	_____ %
6 Multiply days used for daycare during year by hours used per day	6	_____ hr
7 Total hours available for use during the year (365 x 24 hours)	7	_____ hr
8 Divide line 6 by line 7. Enter result as a decimal amount	8	_____
9 Multiply line 8 by line 5	9	_____ %
10 Business percentage. For daycare facilities not used exclusively for business, add line 3 and line 9. All others, enter the amount from line 3	10	<u>17.57</u> %

Part II **Figure Your Allowable Deduction**

11 Total wages from this business	11	<u>103,908.</u>
12 Percent of wages from the business use of this home	12	<u>60.00</u> %
13 Wages from the business use of home. Multiply line 11 by line 12	13	<u>62,345.</u>
14 Gain from business use of home shown on Schedule D or Form 4797	14	_____
15 Gross income from wages, Sch D and Form 4797. Add line 13 and line 14	15	<u>62,345.</u>
16 a Total employee expenses (excluding home office)	16 a	<u>6,347.</u>
b If there is more than one home office for this business, enter the amount of expenses from line 16a allocable to this home office.	b	_____
17 Any losses from this business shown on Schedule D or Form 4797	17	_____
18 Net income from business use of home. Line 15 less line 16 and line 17	18	<u>55,998.</u>

	(a) Direct expenses	(b) Indirect expenses	
See instructions for columns (a) and (b) before completing lines 19 - 29			
19 Casualty losses	_____	_____	
20 Deductible mortgage interest	_____	_____	
21 Real estate taxes	_____	<u>5,778.</u>	
22 Add lines 19, 20, and 21	_____	<u>5,778.</u>	
23 Multiply line 22, column (b) by line 10	_____	<u>1,015.</u>	
24 Add line 22, column (a) and line 23	_____	_____	<u>1,015.</u>
25 Subtract line 24 from line 18. If zero or less, enter -0-	_____	_____	<u>54,983.</u>
26 Insurance	_____	<u>2,772.</u>	
27 Rent	_____	<u>28,865.</u>	
28 Repairs and maintenance	_____	<u>759.</u>	
29 Utilities	_____	<u>3,552.</u>	
30 Other expenses	_____	_____	
31 Add lines 26 through 30	_____	<u>35,948.</u>	

32	Multiply line 31, column (b) by line 10	6,316.	
33	Carryover of operating expenses from 2009.		
34	Add line 31 in column (a), line 32, and line 33.	34	6,316.
35	Allowable operating expenses. Enter the smaller of line 25 or line 34	35	6,316.
36	Limit on excess casualty losses and depreciation. Subtract line 35 from line 25.	36	48,667.
37	Excess casualty losses	37	
38	Depreciation of your home from Part III	38	1,084.
39	Carryover of excess casualty losses and depreciation from 2009	39	
40	Add lines 37 through 39.	40	1,084.
41	Allowable excess casualty losses and depreciation. Enter the smaller of line 36 or line 40	41	1,084.
42	Add lines 24, 35, and 41	42	8,415.
43	Casualty loss portion, if any, from lines 24 and 41. Carry amount to Form 4684 , Section B.	43	
44	Allowable expenses for business use of your home. Subtract line 43 from line 42.	44	8,415.
45	Less deductible mortgage interest, mortgage insurance and real estate taxes reported on Sch A	45	1,015.
46	Form 2106 home office expenses. Carries to Form 2106 Adj Wks, line 3	46	7,400.

Part III Depreciation of Your Home

47	Enter the smaller of your home's adjusted basis or its fair market value	47	275,000.
48	Value of land included on line 47	48	
49	Basis of building. Subtract line 48 from line 47	49	275,000.
50	Business basis of building. Multiply line 49 by line 10	50	48,318.
51	Depreciation percentage	51	2.2436 %
52	Depreciation attributable to business use of home. Multiply line 50 by line 51	52	1,084.
53	Depreciation for additions and improvements attributable to business use of home	53	
54	Total allowable depreciation. Add line 52 and line 53. Enter here and on line 38	54	1,084.

Part IV Carryover of Unallowed Expenses to 2011

55	Operating expenses. Subtract line 35 from line 34. If less than zero, enter -0-	55	0.
56	Excess casualty losses and depreciation. Subtract line 41 from line 40. If less than zero, enter -0-	56	0.

Form 4562

Depreciation and Amortization Report

2010

Haytham Faraj
Sch E - Town home

Tax Year 2010
► Keep for your records

321-70-6884

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
Rental townhouse		04/01/06	214,482	16,020	100.00			214,482	27.5	SL/MM	28,922	7,799
SUBTOTAL PRIOR YEAR			214,482	16,020		0	0	214,482			28,922	7,799
TOTALS			214,482	16,020		0	0	214,482			28,922	7,799

Code: S = Sold, A = Auto, L = Listed, H = Home Office

Form 4562

Depreciation and Amortization Report

2010

Haytham Faraj
Sch E - Residential rental

Tax Year 2010
► Keep for your records

321-70-6884

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
Rental house		03/01/10	113,000	60,000	100.00			113,000	27.5	SL/MM		3,253
SUBTOTAL CURRENT YEAR			113,000	60,000		0	0	113,000			0	3,253
TOTALS			113,000	60,000		0	0	113,000			0	3,253

Code: S = Sold, A = Auto, L = Listed, H = Home Office

Form 4562

Haytham Faraj
Sch E - Town home

Alternative Minimum Tax Depreciation Report

Tax Year 2010
► Keep for your records

2010

321-70-6884

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation	Adjustment/Preference
DEPRECIATION													
Rental townhouse		04/01/06	214,482	16,020	100.00			214,482	27.5	SL/MM		7,799	0.
SUBTOTAL PRIOR YEAR			214,482	16,020		0	0	214,482			0	7,799	0.
TOTALS			214,482	16,020		0	0	214,482			0	7,799	0.

Code: S = Sold, A = Auto, L = Listed, H = Home Office

Form 4562

Haytham Faraj
 Sch E - Residential rental

Alternative Minimum Tax Depreciation Report

Tax Year 2010
 ▶ Keep for your records

2010

321-70-6884

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation	Adjustment/ Preference
DEPRECIATION													
Rental house		03/01/10	113,000	60,000	100.00			113,000	27.5	SL/MM		3,253	0.
SUBTOTAL CURRENT YEAR			113,000	60,000		0	0	113,000			0	3,253	0.
TOTALS			113,000	60,000		0	0	113,000			0	3,253	0.

Code: S = Sold, A = Auto, L = Listed, H = Home Office

Form 4562**Depreciation and Amortization Report****2010**Haytham Faraj
Form 2106 - Attorney

Tax Year 2010

▶ Keep for your records

321-70-6884

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
22167 Morley Ave.	H	02/24/10	275,000		17.57			48,318	39.0	SL/MM		1,084
SUBTOTAL CURRENT YEAR			275,000	0		0	0	48,318			0	1,084
Cell phone	L	11/01/08	538		100.00	538	0	0	7.0	200DB/HY	0	0
Computer		12/06/08	748		100.00	748	0	0	5.0	200DB/HY	0	0
External hard drive		12/11/08	136		100.00	136	0	0	5.0	200DB/HY	0	0
Mercedes Benz S55	L	09/10/09			0.00							
SUBTOTAL PRIOR YEAR			1,422	0		1,422	0	0			0	0
TOTALS			276,422	0		1,422	0	48,318			0	1,084

Code: S = Sold, A = Auto, L = Listed, H = Home Office

Form 4562

Haytham Faraj
Form 2106 - Attorney

Alternative Minimum Tax Depreciation Report

Tax Year 2010
► Keep for your records

2010

321-70-6884

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation	Adjustment/Preference
DEPRECIATION													
22167 Morley Ave.	H	02/24/10	275,000		17.57			48,318	39.0	SL/MM		1,084	0.
SUBTOTAL CURRENT YEAR			275,000	0		0	0	48,318			0	1,084	0.
Cell phone	L	11/01/08	538		100.00	538	0	0	7.0	200DB/HY	0	0	0.
Computer		12/06/08	748		100.00	748	0	0	5.0	200DB/HY	0	0	0.
External hard drive		12/11/08	136		100.00	136	0	0	5.0	200DB/HY	0	0	0.
Mercedes Benz S55	L	09/10/09			0.00								
SUBTOTAL PRIOR YEAR			1,422	0		1,422	0	0			0	0	0.
TOTALS			276,422	0		1,422	0	48,318			0	1,084	0.

Code: S = Sold, A = Auto, L = Listed, H = Home Office

Form **W-4**
 Department of the Treasury
 Internal Revenue Service

----- Cut here and give Form W-4 to your employer. Keep the top part for your records. -----

Employee's Withholding Allowance Certificate

OMB No. 1545-0074

2011

► Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.

1 Type or print your first name and middle initial Haytham		Last name Faraj		2 Your social security number 321-70-6884	
Home address (number and street or rural route) 22167 Morley Ave.		Apt		3 <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married, but legally separated, or spouse is a nonres alien, check the 'Single' box.	
City or town, state and ZIP code Dearborn MI 48124		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. . . . ► <input type="checkbox"/>			
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet)		5		0	
6 Additional amount, if any, you want withheld from each paycheck		6		\$ 519.	
7 I claim exemption from withholding for 2011, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, enter 'Exempt' here ►		7			

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature

(Form is not valid unless you sign it.) ►

Date ►

8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)		9 Office code (optional)	10 Employer identification number (EIN)
---	--	--------------------------	---

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING
TAXPAYER: Haytham Faraj
PRIMARY SSN: 321-70-6884

FEDERAL RETURN SUBMITTED: May 10, 2011 01:34 PM PDT
FEDERAL RETURN ACCEPTANCE DATE:

Your return was electronically transmitted on 05/10/2011

The Intuit Electronic Postmark shows the date and time Intuit received your federal tax return. The Intuit Electronic Postmark documents the filing date of your income tax return, and the electronic postmark information should be kept on file with your tax return and other tax-related documentation.

There are two important aspects of the Intuit Electronic Postmark:

1. THE INTUIT ELECTRONIC POSTMARK.

The electronic postmark shows the date and time Intuit received the federal return, and is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal individual income tax return.

TIMELY FILING:

For your federal return to be considered filed on time, your return must be postmarked on or before midnight April 18, 2011. Intuit's electronic postmark is issued in the Pacific Time (PT) zone. If you are not filing in the PT zone, you will need to add or subtract hours from the Intuit Electronic Postmark time to determine your local postmark time. For example, if you are filing in the Eastern Time (ET) zone and you electronically file your return at 9 AM on April 18, 2011, your Intuit electronic postmark will indicate April 18, 2011, 6 AM. If your federal tax return is rejected, the IRS still considers it filed on time if the electronic postmark is on or before April 18, 2011, and a corrected return is submitted and accepted before April 22, 2011. If your return is submitted after April 22, 2011, a new time stamp is issued to reflect that your return was submitted after the IRS deadline and, consequently, is no longer considered to have been filed on time.

If you request an automatic six-month extension, your return must be electronically postmarked by midnight October 15, 2011. If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before October 15, 2011, and the corrected return is submitted and accepted by October 20, 2011.

2. THE ACCEPTANCE DATE.

Once the IRS accepts the electronically filed return, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return.

Electronic Filing Instructions for your 2010 Michigan Tax Return

Important: Your taxes are not finished until all required steps are completed.



Haytham Faraj
22167 Morley Ave.
Dearborn, MI 48124

Balance Due/Refund	Your Michigan state tax return (Form MI-1040) shows a balance due of \$240.00. Mail your completed Form MI-1040-V with included payment made payable to the State of Michigan by April 18, 2011. Make sure you sign your check and write your social security number and "2010 MI-1040-V" on the check.															
No Signature Document Needed	No signature form is required since you signed your return electronically.															
What You Need to Mail	Your return shows a balance due of \$240.00. Mail your completed Form MI-1040-V with included payment of \$240.00 made payable to State of Michigan by April 18, 2011 to: Mail to: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909-8274 Do not mail Form MI-1040-V with payment until your return has been ACCEPTED for electronic filing by the Michigan Department of Treasury.															
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your state and federal returns															
2010 Michigan Tax Return Summary	<table><tr><td>Taxable Income</td><td>\$</td><td>109,433.00</td></tr><tr><td>Total Tax</td><td>\$</td><td>4,760.00</td></tr><tr><td>Total Payments/Credits</td><td>\$</td><td>4,520.00</td></tr><tr><td>Payment Due</td><td>\$</td><td>240.00</td></tr></table>	Taxable Income	\$	109,433.00	Total Tax	\$	4,760.00	Total Payments/Credits	\$	4,520.00	Payment Due	\$	240.00			
Taxable Income	\$	109,433.00														
Total Tax	\$	4,760.00														
Total Payments/Credits	\$	4,520.00														
Payment Due	\$	240.00														
Payments You Need to Make	Estimated Payments for 2011 - This printout includes your estimated tax vouchers for your state estimated taxes (Form MI-1040ES). Mail payments according to the schedule below: <table><thead><tr><th>Voucher Number</th><th>Due Date</th><th>Amount</th></tr></thead><tbody><tr><td>1</td><td>04/18/2011</td><td>\$ 179.00</td></tr><tr><td>2</td><td>06/15/2011</td><td>\$ 179.00</td></tr><tr><td>3</td><td>09/15/2011</td><td>\$ 179.00</td></tr><tr><td>4</td><td>01/17/2012</td><td>\$ 179.00</td></tr></tbody></table>	Voucher Number	Due Date	Amount	1	04/18/2011	\$ 179.00	2	06/15/2011	\$ 179.00	3	09/15/2011	\$ 179.00	4	01/17/2012	\$ 179.00
Voucher Number	Due Date	Amount														
1	04/18/2011	\$ 179.00														
2	06/15/2011	\$ 179.00														
3	09/15/2011	\$ 179.00														
4	01/17/2012	\$ 179.00														

Electronic Filing Instructions for your 2010 Michigan Tax Return

Important: Your taxes are not finished until all required steps are completed.



Haytham Faraj
22167 Morley Ave.
Dearborn, MI 48124

**Payments
You Need to
Make
(Continued)**

Include a separate check or money order for each payment, payable to "State of Michigan". Write your social security number and "2011 MI-1040ES" on each check.

Mail payments to:
Michigan Department of Treasury
P.O. Box 30774
Lansing, MI 48909-8274

**2011 MICHIGAN
MI-1040ES Estimated Individual Income Tax Voucher**

Issued under authority of Public Act 281 of 1967. See instructions for filing guidelines.

Due Date for Calendar Year Filers	
04-18-2011	
Your Social Security Number (SSN)	Spouse's Social Security Number
321-70-6884	
WRITE PAYMENT AMOUNT HERE	
\$	179. 00
MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909-8274	Enclose check payable to "State of Michigan." Write your SSN and "2011 MI-1040ES" on the front of your check. Do not fold or staple.

Taxpayer Name(s) and Address

HAYTHAM FARAJ

22167 MORLEY AVE.

DEARBORN

MI

48124

DO NOT WRITE IN THIS SPACE

**2011 MICHIGAN
MI-1040ES Estimated Individual Income Tax Voucher**

Issued under authority of Public Act 281 of 1967. See instructions for filing guidelines.

Due Date for Calendar Year Filers	
06-15-2011	
Your Social Security Number (SSN)	Spouse's Social Security Number
321-70-6884	
WRITE PAYMENT AMOUNT HERE	
\$	179. 00
MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909-8274	Enclose check payable to "State of Michigan." Write your SSN and "2011 MI-1040ES" on the front of your check. Do not fold or staple.

Taxpayer Name(s) and Address

HAYTHAM FARAJ

22167 MORLEY AVE.

DEARBORN

MI

48124

DO NOT WRITE IN THIS SPACE

**2011 MICHIGAN
MI-1040ES Estimated Individual Income Tax Voucher**

Issued under authority of Public Act 281 of 1967. See instructions for filing guidelines.

Due Date for Calendar Year Filers	
09-15-2011	
Your Social Security Number (SSN)	Spouse's Social Security Number
321-70-6884	
WRITE PAYMENT AMOUNT HERE	
\$	179. 00
MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909-8274	Enclose check payable to "State of Michigan." Write your SSN and "2011 MI-1040ES" on the front of your check. Do not fold or staple.

Taxpayer Name(s) and Address

HAYTHAM FARAJ

22167 MORLEY AVE.

DEARBORN

MI

48124

DO NOT WRITE IN THIS SPACE

**2011 MICHIGAN
MI-1040ES Estimated Individual Income Tax Voucher**

Issued under authority of Public Act 281 of 1967. See instructions for filing guidelines.

Due Date for Calendar Year Filers	
01-17-2012	
Your Social Security Number (SSN)	Spouse's Social Security Number
321-70-6884	
WRITE PAYMENT AMOUNT HERE	
\$	179. 00
MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909-8274	Enclose check payable to "State of Michigan." Write your SSN and "2011 MI-1040ES" on the front of your check. Do not fold or staple.

Taxpayer Name(s) and Address

HAYTHAM FARAJ

22167 MORLEY AVE.

DEARBORN

MI

48124

DO NOT WRITE IN THIS SPACE



Detach here and mail with your payment. Do not fold or staple the voucher.

Michigan Department of Treasury (Rev. 09-10)

2010 MICHIGAN Individual Income Tax e-file Payment Voucher

MI-1040-V

Issued under authority of Public Act 281 of 1967. See instruction for filing guidelines

Mail Form MI-1040-V with your payment after you e-file your MI-1040 return.
Do not use this form to make any other payments to the State of Michigan.

1. Filer's Name(s) (First, Middle Initial, Last) and Home Address (Street, City, State, ZIP Code) HAYTHAM FARAJ 22167 MORLEY AVE DEARBORN MI 48124	2. Filer's Social Security Number 321-70-6884	Spouse's Social Security Number
	WRITE PAYMENT AMOUNT HERE ➔ \$ 240.00	
	MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909-8274	Make check payable to ' State of Michigan. ' Write your Social Security number and ' 2010 MI-1040-V ' on the check. Do not fold or staple.

DO NOT WRITE IN THIS SPACE

MIIA2101 09/09/10

2010 MICHIGAN Individual Income Tax Barcode Datasheet



This datasheet is PAGE 1 of your individual income tax return and/or home heating credit claim. You must staple this form to the top of Form MI-1040 or MI-1040CR-7 for your return to be complete and to speed the processing.

Do **NOT** file this form alone.

See additional instructions below.



Software Use Only	
<input checked="" type="checkbox"/> MI-1040 included	<input type="checkbox"/> MI-1040CR-7 included

FILER'S IDENTIFICATION

Filer's First Name HAYTHAM	MI	Last Name FARAJ	Filer's Social Security Number 321-70-6884
If a Joint Return, Spouse's First Name	MI	Last Name	Spouse's Social Security Number
Home Address (No., Street, P.O. Box or Rural Route) 22167 MORLEY AVE			
City or Town DEARBORN		State MI	ZIP Code 48124

Instructions

Staple this form to the top of form MI-1040 *Individual Income Tax Return* or your MI-1040CR-7 *Home Heating Credit Claim*. **Do NOT file this form alone.**

If you make a correction to any of your data, **you must reprint the corrected page** of the return and this barcode datasheet to capture the corrected information in the barcode.

Mail the original datasheet and original return/claim (not photocopies) to the address on your return/claim.

Make your check payable to "**State of Michigan**" and **print the filer's Social Security Number** and "**2010 income tax**" on the front of your check.

2010 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 18, 2011.

Type or print in blue or black ink.

▶ 1 Filer's First Name HAYTHAM		M.I.	Last Name FARAJ		▶ 2 Filer's Social Security No. (Example: 123-45-6789) 321-70-6884	
If a Joint Return, Spouse's First Name		M.I.	Last Name		▶ 3 Spouse's Social Security No. (Example: 123-45-6789)	
Home Address (No., Street, P.O. Box or Rural Route)						
22167 MORLEY AVE.						
City or Town DEARBORN			State MI	ZIP Code 48124		▶ 4 School District Code (5 digits - see instructions) 82230

▶ 5 **STATE CAMPAIGN FUND**

Check this box if you (or your spouse, if filing a joint return) want \$3 of your taxes to go to this fund. This will not increase your tax or reduce your refund.

	a You	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	b Spouse	Yes <input type="checkbox"/>	No <input type="checkbox"/>

▶ 6 **FARMERS, FISHERMEN OR SEAFARERS**

Check this box if 2/3 of your income is from farming, fishing or seafaring.

▶ 7 **FILING STATUS.** Check one.

a Single

b Married, filing jointly

c Married, filing separately*

*If you check box 'c,' complete line 3 and enter spouse's name below:

▶ 8 **RESIDENCY.** Check all that apply.

a Resident

b Nonresident*

c Part-Year Resident*

*If you check box 'b' or 'c,' you must complete and attach Schedule NR.

▶ 9 **EXEMPTIONS**

a Number of exemptions you claimed on your 2010 federal return	▶ 9a	1	x \$3,600	3,600.	00
b Number of individuals 65 or older who qualify for a special exemption	▶ 9b		x \$ 2,300		00
c Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled	▶ 9c		x \$ 2,300		00
d Number of children ages 18 and under you claimed as Michigan exemptions	▶ 9d		x \$600		00
e Number of qualified disabled veterans	▶ 9e		x \$300		00
f If your unemployment compensation is 50% or more of your Adjusted Gross Income (amount claimed on line 10) check (X) the box and enter \$2,300	▶ 9f	<input type="checkbox"/>	\$ 2,300		00
g If someone else can claim you as a dependent, check (X) the box, complete Worksheet 2 in the instructions, and enter the amount from the worksheet	▶ 9g	<input type="checkbox"/>	9g		00
h Add lines 9a, 9b, 9c, 9d, 9e, 9f and 9g. Enter here and on line 15	▶ 9h			3,600.	00

10 Adjusted Gross Income from your U.S. Forms 1040, 1040A, 1040EZ or 1040NR (see instructions)	▶ 10			154,717.	00
11 Additions from Michigan Schedule 1, line 7. Attach Schedule 1	▶ 11				00
12 Total. Add lines 10 and 11	▶ 12			154,717.	00
13 Subtractions from Michigan Schedule 1, line 21. Attach Schedule 1	▶ 13			41,684.	00
14 Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter '0'	▶ 14			113,033.	00
15 Exemption allowance. Amount from line 9h or Schedule NR, line 20	▶ 15			3,600.	00
16 Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter '0'	▶ 16			109,433.	00
17 Tax. Multiply line 16 by 4.35% (.0435)	▶ 17			4,760.	00
18 Total Nonrefundable Credits. Amount from Schedule 2, line 11. Attach Schedule 2	▶ 18				00
19 Income tax. Subtract line 18 from line 17. If line 18 is greater than line 17, enter '0'.	▶ 19			4,760.	00

DIRECT DEPOSIT
Deposit your refund directly into your bank account!
See instructions and complete a, b and c.

a Routing Transit Number ▶		b Type of Account: ▶ (1) <input type="checkbox"/> Checking (2) <input type="checkbox"/> Savings
c Account Number ▶		

20	Enter amount of Income Tax from line 19	20	4,760.00
21	Voluntary Contributions from Form 4642, line 11, Attach Form 4642	21	00
22	USE Use tax due on Internet, mail order or other out-of-state TAX purchases from Worksheet 1, line 3, in the instructions.	▶ 22	0.00
23	Add lines 20, 21 and 22	23	4,760.00
REFUNDABLE CREDITS AND PAYMENTS			
24	Property Tax Credit. Attach MI-1040CR or MI-1040CR-2	▶ 24	00
25	Farmland Preservation Credit. Attach MI-1040CR-5.	▶ 25	00
26	Qualified Adoption Expenses. Attach U.S. Form 8839 and MI-8839	▶ 26	00
27	Stillbirth Credit. Amount from Worksheet 3, line B, in the instructions	▶ 27	00
28a	Federal Earned Income Tax Credit ▶ 28a		00
	b Michigan Earned Income Tax Credit. Multiply line 28a by 20% (0.20)	▶ 28b	00
29	Energy Efficient Qualified Home Improvement Credit. Attach Form 4764	▶ 29	00
30	Michigan Historic Preservation Tax Credit (refundable). Attach Form 3581	▶ 30	00
31	Michigan tax withheld from Schedule W, line 3. Attach Schedule W (do not submit W-2's)	▶ 31	4,520.00
32	Estimated tax, extension payments and 2009 credit forward	▶ 32	00
33	Total refundable credits and payments. Add lines 24 through 27, 28b, and 29 through 32	33	4,520.00
REFUND OR TAX DUE			
34	If line 33 is less than line 23, subtract line 33 from line 23. Include interest [] and penalty [] if applicable (see instr) YOU OWE	34	240.00
35	Overpayment. If line 33 is greater than line 23, subtract line 23 from line 33	35	00
36	Credit Forward. Amount of line 35 to be credited to your 2011 estimated tax for your 2011 tax return	▶ 36	00
37	Subtract line 36 from line 35 REFUND	▶ 37	00

Deceased Taxpayer. If Filer and/or Spouse died after December 31, 2009, check the appropriate box below.

▶ Filer is Deceased ▶ Spouse is Deceased

Taxpayer Certification. I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.

Filer's Signature	Date
Spouse's Signature	Date

▶ I authorize Treasury to discuss my return with my preparer. Yes No

Preparer Certification. I declare under penalty of perjury that this return is based on all information of which I have any knowledge.

▶ Preparer's PTIN, FEIN or SSN

▶ Preparer's Business Name (print or type)

SELF-PREPARED

Preparer's Business Address (print or type)

Refund, credit or zero returns. Mail your return to: **Michigan Department of Treasury, P.O. Box 30726, Lansing, MI 48909-8226**
Pay amount on line 34. Mail your check and return to: **Michigan Department of Treasury, P.O. Box 30727, Lansing, MI 48909-8227**

Make your check payable to 'State of Michigan.' Print your **Social Security number** and '2010 income tax' on the front of your check. If paying on behalf of another taxpayer, **write the taxpayer's name and Social Security number** on the check. Do not staple your check to the return. Keep a copy of your return and all supporting schedules for six years. To check the status of your refund, have a copy of your MI-1040 available when you visit: www.michigan.gov/it

2010 MICHIGAN Schedule 1 Additions and Subtractions

Issued under authority of Public Act 281 of 1967.

Type or print in blue or black ink.

Attach to Form MI-1040.

Attachment 1A

Filer's First Name HAYTHAM	M.I.	Last Name FARAJ	▶ Filer's Social Security Number (Example: 123-45-6789) 321-70-6884 Spouse's Social Security Number (Example: 123-45-6789)
If a Joint Return, Spouse's First Name	M.I.	Last Name	

Additions to Income (all entries must be positive numbers)

1 Gross interest and dividends from obligations issued by states (other than Michigan) or their political subdivisions	▶ 1		00
2 Deduction for taxes on, or measured by, income including self-employment tax taken on your federal return (see instructions)	▶ 2		00
3 Gains from Michigan column of MI-1040D and MI-4797	▶ 3		00
4 Losses attributable to other states (see instructions)	▶ 4		00
5 Net loss from federal column of your Michigan MI-1040D or MI-4797	▶ 5		00
6 Other (see instructions). Describe: _____	▶ 6		00
7 Total additions. Add lines 1 through 6. Enter here and on MI-1040, line 11.	▶ 7	0.	00

Subtractions from Income (all entries must be positive numbers)

8 Income from U.S. government bonds and other U.S. obligations included in MI-1040, line 10. Attach U.S. <i>Schedule B</i> or U.S. <i>1040A Schedule 1</i> if over \$5,000.	▶ 8		00
9 Military pay from U.S. Armed Forces included in MI-1040, line 10. Attach Schedule W. (Include retirement pay on line 12 of this schedule.)	▶ 9		00
10 Gains from federal column of Michigan MI-1040D and MI-4797	▶ 10		00
11 Income attributable to another state. Explain type and source: _____	▶ 11		00
12 Retirement or pension benefits included in MI-1040, line 10. (Include military retirement here.) See exceptions in instructions. Name of payer: <u>DEFENSE FINANCE AND ACCOUNTING</u>	▶ 12	40,738.	00
13 Dividend/interest/capital gains deduction for senior citizens (see instructions)	▶ 13		00
14 Social Security benefits from U.S. Form <i>1040</i> , line 20b or U.S. Form <i>1040A</i> , line 14b	▶ 14		00
15 Income earned while a resident of a renaissance zone. Name of zone: _____	▶ 15		00
16 Michigan state and local income tax refunds received in 2010 and included in MI-1040, line 10	▶ 16	946.	00
17 Michigan Education Savings Program and MI529 Advisor Plan	▶ 17		00
18 Michigan Education Trust	▶ 18		00
19 Venture Capital Deduction. Not available for 2010	▶ 19		00
20 Miscellaneous subtractions (see instructions). Describe: _____	▶ 20		00
21 Total subtractions. Add lines 8 through 20. Enter here and on MI-1040, line 13	▶ 21	41,684.	00

2010 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967.

INSTRUCTIONS: If you had Michigan income tax withheld in 2010, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 31). Attach your completed Schedule W to Form MI-1040 or MI-1040X where applicable. See complete instructions. Type or print in blue or black ink.

Attachment 13

Filer's First Name HAYTHAM	M.I.	Last Name FARAJ	▶ Filer's Social Security Number (Example: 123-45-6789) 321-70-6884 Spouse's Social Security Number (Example: 123-45-6789)
If a Joint Return, Spouse's First Name	M.I.	Last Name	

TABLE 1: MICHIGAN TAX WITHHELD ON W-2, W-2G or CORRECTED W-2 FORMS

▶ A Enter 'X' if for: You or Spouse	▶ B Box b – Employer's federal identification number	C Box c - Employer's name	D Box 1 – Wages, tips, other compensation	▶ E Box 17 – Michigan income tax withheld	F Box 19 – City income tax withheld
X	26-2570788	LAW FIRM OF PUCKE	103,908.00	4,520.00	00
			00	00	00
			00	00	00
			00	00	00
			00	00	00
			00	00	00
			00	00	00
			00	00	00
			00	00	00
Enter Table 1 Subtotal from additional Schedule W forms (if applicable)				00	00
1 SUBTOTAL. Enter total of Table 1, columns E and F. Carry total of column F to the City Income Tax Worksheet in the MI-1040 Instruction Booklet 1				4,520.00	00

IMPORTANT: If you have no entries for Table 2, carry total of line 1, column E, to line 3 below.

TABLE 2: MICHIGAN TAX WITHHELD ON 1099 and 4119 FORMS

▶ A Enter 'X' if for: You or Spouse	▶ B Payer's federal identification number	C Payer's name	D Taxable pension distribution, misc. income, etc (see instr.)	▶ E Michigan income tax withheld	F Box 7 – Distribution Code (1099-R only)
			00	00	
			00	00	
			00	00	
			00	00	
			00	00	
			00	00	
Enter Table 2 Subtotal from additional Schedule W forms (if applicable)				00	
2 SUBTOTAL. Enter total of Table 2, column E 2				00	
3 TOTAL. Add line 1 and line 2, column E. Carry total to your MI-1040, line 31 ▶ 3				4,520.00	

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss
(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc)
▶ **Attach to Form 1040, 1040NR, or Form 1041.**
▶ **See Instructions for Schedule E (Form 1040).**

OMB No. 1545-0074

2010

Attachment
Sequence No. **13**

Name(s) shown on return

Haytham Faraj

Your social security number

321-70-6884

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 instructions). 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	Town home 423 Commerce st. Aurora, IL 60504	● 14 days, or ● 10% of the total days rented at fair rental value? (See instructions.)	A		X
B	Residential rental 5626 Cambourne rd Darborn Heights, MI 48127		B		X
C			C		

Income:	Properties			Totals (Add columns A, B, and C.)
	A	B	C	
3 Rents received	3 10,470.	0.		3 10,470.
4 Royalties received	4			4
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6 250.			
7 Cleaning and maintenance	7 1,428.			
8 Commissions	8			
9 Insurance	9 535.	958.		
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc (see instructions)	12 13,927.			12 13,927.
13 Other interest	13			
14 Repairs	14 2,690.	550.		
15 Supplies	15			
16 Taxes	16 5,543.	1,931.		
17 Utilities	17	2,305.		
18 Other (list) ▶	18			
19 Add lines 5 through 18	19 24,373.	5,744.		19 30,117.
20 Depreciation expense or depletion (see instructions)	20 7,799.	3,253.		20 11,052.
21 Total expenses. Add lines 19 and 20	21 32,172.	8,997.		
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 instructions to find out if you must file Form 6198	22 -21,702.	-8,997.		
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See instructions to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23 0.	0.		
24 Income. Add positive amounts shown on line 22. Do not include any losses	24			24
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25			25 0.
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			26 0.

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

Your social security number

Haytham Faraj

321-70-6884

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 the box in column (e) on line 28 and attach Form 6198. See instructions.

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
If you answered 'Yes,' see instructions before completing this section.

28	(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
A	The Law Firm of Puckett & Faraj, PC	S	<input type="checkbox"/>	26-2570788	<input type="checkbox"/>
B			<input type="checkbox"/>		<input type="checkbox"/>
C			<input type="checkbox"/>		<input type="checkbox"/>
D			<input type="checkbox"/>		<input type="checkbox"/>

Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A				9,404.
B				
C				
D				
29a Totals				9,404.
b Totals				
30 Add columns (g) and (j) of line 29a				30 9,404.
31 Add columns (f), (h), and (i) of line 29b				31
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				32 9,404.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer ID no.
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a Totals			
b Totals			
35 Add columns (d) and (f) of line 34a			35
36 Add columns (c) and (e) of line 34b			36
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below			37

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

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	9,404.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see instructions)	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

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 **Haytham Faraj** Identifying number **321-70-6884**

1 Enter the gross proceeds from sales or exchanges reported to you for 2010 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) **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)

2	(a) Description of property	(b) Date acquired (month, day, year)	(c) Date sold (month, day, year)	(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)
	From K-1						-2.

3 Gain, if any, from Form 4684, line 42 **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 **7** -2.

Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

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):

11 Loss, if any, from line 7 **11** -2.

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 34 and 41a **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** -2.

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 38, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss 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** -2.