Electronic Filing Instructions for your 2009 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 \$4,343.00. 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 Instructio Printed copy of your federal retu 						
2009 Federal Tax Return Summary	Adjusted Gross Income Taxable Income Total Tax Total Payments/Credits Amount to be Refunded Effective Tax Rate	\$ 103,027.00 \$ 74,995.00 \$ 14,766.00 \$ 19,109.00 \$ 4,343.00 14.33%					



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 2009 taxes:

Your federal refund is: \$ 4,343.00

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: \$24,382.00

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.

Form 1040 2009 U.S. Individual Income Tax Return (99)IRS Use Only - Do not write or staple in this space For the year Jan 1 - Dec 31, 2009, or other tax year beginning 2009, ending 20 OMB No. 1545-0074 Your first name Your social security number Last name Label (See instructions.) 321-70-6884 Havtham Farai If a joint return, spouse's first name MI Last name Spouse's social security number Use the IRS label. Otherwise. Home address (number and street). If you have a P.O. box, see instructions. Apartment no. You must enter your please print social security 22167 Morl<u>ey Ave.</u> or type. number(s) above. City, town or post office. If you have a foreign address, see instructions. State ZIP code Checking a box below will not **Presidential** 48124 Dearborn ΜI change your tax or refund. Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions). You Head of household (with qualifying person). (See Filing Status instructions.) If the qualifying person is a child 2 Married filing jointly (even if only one had income) but not your dependent, enter this child's 3 Married filing separately. Enter spouse's SSN above & full name here Check only name here. > Qualifying widow(er) with dependent child (see instructions) one box. Boxes checked on 6a and 6b **Exemptions** 6a Yourself. If someone can claim you as a dependent, do not check box 6a. . . No. of children (4) √ if on 6c who: (2) Dependent's (3) Dependent's c Dependents: lived social security relationship qualifying child for child tax credit with you . number to you did not First name Last name (see instrs) live with you due to divorce or separation If more (see instrs) than four Dependents dependents. on 6c not entered above see instructions and check here ► Add numbers on lines above Wages, salaries, tips, etc. Attach Form(s) W-2. 7 89 720. Income 55. 8 a Taxable interest. Attach Schedule B if required 8 a b Tax-exempt interest. Do not include on line 8a 8 b 59. 9 a Ordinary dividends. Attach Schedule B if required . 9a Attach Form(s) W-2 here. Also **b** Qualified dividends (see instrs) attach Forms Taxable refunds, credits, or offsets of state and local income taxes (see instructions) 10 W-2G and 1099-R if tax was withheld. 11 Business income or (loss). Attach Schedule C or C-EZ. . . 12 If you did not Capital gain or (loss). Att Sch D if read. If not read, ck here 13 get a W-2. see instructions. Other gains or (losses). Attach Form 4797 14 15 a **15 a** IRA distributions **b** Taxable amount (see instrs) . 15 b **b** Taxable amount (see instrs) . 39,767 **16a** Pensions and annuities . . . **16a** 16 b 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . 17 -26,574 Enclose, but do Farm income or (loss). Attach Schedule F . . 18 Unemployment compensation in excess of \$2,400 per recipient (see instructions) 19 not attach, any 19 payment. Also, 20 a Social security benefits **b** Taxable amount (see instrs). 20 b please use Form 1040-V. 21 103,027 22 Add the amounts in the far right column for lines 7 through 21. This is your total income. 22 23 Educator expenses (see instructions) **Adjusted** Certain business expenses of reservists, performing artists, and fee-basis 24 24 Gross government officials. Attach Form 2106 or 2106-EZ Income Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903. 26 27 One-half of self-employment tax. Attach Schedule SE . . 27 Self-employed SEP, SIMPLE, and qualified plans 28 28 29 Self-employed health insurance deduction (see instructions) . . . 29 30 30 Penalty on early withdrawal of savings 31 a Alimony paid **b** Recipient's SSN . . . ▶ 31 a 32 Student loan interest deduction (see instructions) . . 33 Tuition and fees deduction. Attach Form 8917 35 Domestic production activities deduction. Attach Form 8903. 36 103,027 Subtract line 36 from line 22. This is your adjusted gross income. 37

Department of the Treasury - Internal Revenue Service

Form 1040 (2009)	Haytham Faraj	3	21-7	/0-6884 Page 2
Tax and	38 Amount from line 37 (adjusted gross income)		38	103,027.
Credits	39 a Check You were born before January 2, 1945, Blind. Total boxes			
Cicuits	T if: Spouse was born before January 2, 1945, Blind. checked ▶ 3	39 a		
Standard	b If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here			
Deduction		ات مور	40 -	24 202
for —	40 a Itemized deductions (from Schedule A) or your standard deduction (see left margin)		40 a	24,382.
 People who check any box 	b If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see instructions) ▶ 4	40 b □		
on line 39a, 39b,	41 Subtract line 40a from line 38	~~ <u> </u>	41	78,645.
or 40b or who			71	70,043.
can be claimed	42 Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see instructions		42	3,650.
as a dependent, see instructions.	43 Taxable income. Subtract line 42 from line 41.		74	
see mshuchons.	If line 42 is more than line 41, enter -0		43	74,995.
• All others:	44 Tax (see instrs). Check if any tax is from: a Form(s) 8814			
0	b Form 4972		44	14,931.
Single or Married	45 Alternative minimum tax (see instructions). Attach Form 6251		45	0.
filing separately, \$5,700	46 Add lines 44 and 45		46	14,931.
ψο,. σο	47 Foreign tax credit. Attach Form 1116 if required			21/2021
Married filing	'			
jointly or	' '			
Qualifying widow(er),	49 Education credits from Form 8863, line 29			
\$11,400	50 Retirement savings contributions credit. Attach Form 8880 50			
	51 Child tax credit (see instructions)			
Head of	52 Credits from Form: a 8396 b 8839 c X 5695 · · · 52	165.		
household, \$8,350	53 Other crs from Form: a 3800 b 8801 c 53			
ψ0,000			E4	165
	-1 54 Add lines 47 through 53. These are your total credits	ľ	54	165.
	55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0		55	14,766.
	56 Self-employment tax. Attach Schedule SE		56	
Other	57 Unreported social security and Medicare tax from Form: a 4137 b 8919		57	
Taxes	58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		58	
	59 Additional taxes: a AEIC payments b Household employment taxes. Attach Schedule H		59	
	60 Add lines 55-59. This is your total tax		60	14,766.
Darmanta		,109.		2177001
Payments				
	· · · · · · · · · · · · · · · · · · ·			
If you have a	Making work pay and government retiree credit. Attach Schedule M 63	0.		
qualifying	64a Earned income credit (EIC) 64a			
child, attach	b Nontaxable combat pay election ► 64 b			
Schedule EIC.	65 Additional child tax credit. Attach Form 8812 65			
	66 Refundable education credit from Form 8863, line 16 66			
	67 First-time homebuyer credit. Attach Form 5405 67			
	68 Amount paid with request for extension to file (see instructions) 68			
	69 Excess social security and tier 1 RRTA tax withheld (see instructions) 69			
	71 Add Ins 61-63, 64a, & 65-70. These are your total pmts	▶	71	19,109.
Refund	72 If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	· · <u></u>	72	4,343.
Direct deposit?	73 a Amount of line 72 you want refunded to you. If Form 8888 is attached, check here	▶	73 a	4,343.
See instructions	▶ b Routing number 256074974	avings		
and fill in 73b,	► d Account number 1830176002	ŭ		
73c, and 73d or Form 8888.	74 Amount of line 72 you want applied to your 2010 estimated tax > 74			
_			75	
Amount You Owe	Amount you owe . Subtract line 71 from line 60. For details on how to pay, see instructions		75	
TOU OWE	76 Estimated tax penalty (see instructions)			
Third Party				the following. X No
<u>Designee</u>	Designee's name Phone no. ►		ersona number	l identification (PIN)
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the			
Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	preparer ha	as any k	nowledge.
Joint return?	Your signature Date Your occupation		Day	time phone number
See instructions.	Attorney			
Keep a copy	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation			
for your records.				
-	Date		Pren	parer's SSN or PTIN
	Preparer's ▶		,	
Paid	signature Cool f. Droppersod	zu		
Preparer's	Firm's name (or yours if Self-Prepared			
Use Only	self-employed), address, and	EIN		
ZIP code Phone no				

SCHEDULE A (Form 1040)

Itemized Deductions

OMB No. 1545-0074

2009

Department of the Treasury Internal Revenue Service (99)

► Attach to Form 1040.

► See Instructions for Schedule A (Form 1040).

Attachment Sequence No. **07**

Name(s) shown on Fo	orm 104	10			Your so	cial se	curity number
Haytham Fa	ara	j			321-	70-	6884
Medical		Caution. Do not include expenses reimbursed or paid by others.					
and	1	Medical and dental expenses (see instructions)	1				
Dental Expenses	2	Enter amount from Form 1040, line 38 2	-				
LAPCHISCS	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	5	State and local (check only one box):					
Paid	а						
	b		5	5,2	55		
	6	Real estate taxes (see instructions)	6	2,2			
	7	New motor vehicle taxes from line 11 of the worksheet on page		2,2.	33.		
(See	-	2. Skip this line if you checked box 5b	7				
instructions.)	8	Other taxes. List type and amount					
		Personal Property & Other taxes 550.	8		50.		
	9	Add lines 5 through 8				9	8,038.
Interest	10	Home mtg interest and points reported to you on Form 1098	10	7,0	00.		
You Paid	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name,					
		identifying number, and address					
		additional and additional additional and additional a					
			-				
			44				
			11				
Note.	12	Points not reported to you on Form 1098. See instrs for spcl rules	12		_		
Personal interest	13	Qualified mortgage insurance premiums (see instructions)	13				
is not	14	Investment interest. Attach Form 4952 if required.					
deductible.		(See instrs.)	14				
	15	Add lines 10 through 14				15	7,000.
Gifts to	16	Gifts by cash or check. If you made any gift of \$250 or					
Charity		more, see instrs \dots	16	3,3	10.		
If you made a gift and	17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if					
got a benefit		over \$500	17				
for it, see instructions.	18	Carryover from prior year			_		
motractions.	19	Add lines 16 through 18				19	3,310.
Casualty and	-10	7.dd iii 65 To tii 6dgir To TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT					3,310.
Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)				20	
Job Expenses	21	Unreimbursed employee expenses — job travel, union dues,					
and Certain		job education, etc. Attach Form 2106 or 2106-EZ if					
Miscellaneous Deductions		required. (See instructions.)					
		See Form 2106/2106-EZ 8,001.	21	8,0	01.		
	22	Tax preparation fees	22	!	94.		
(See	23	Other expenses – investment, safe deposit box, etc. List					
instructions.)		type and amount					
			23		_		
	24	Add lines 21 through 23 · · · · · · · · · · · · · · · · · ·	24	8,0	95.		
	25	Enter amount from Form 1040, line 38 25 103, 027.					
	26	Multiply line 25 by 2% (.02)	26	2,0			
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-				27	6,034.
Other	28	Other − from list in the instructions. List type and amount ►					
Miscellaneous Deductions							
Deductions						28	
Total Itemized	29	Is Form 1040, line 38, over \$166,800 (over \$83,400 if					
Deductions		married filing separately)?	abt!				
		X No. Your deduction is not limited. Add the amounts in the far ri for lines 4 through 28. Also, enter this amount on Form 10				29	24,382.
		Yes. Your deduction may be limited. See instructions for the am				23	27,302.
	30	If you elect to itemize deductions even though they are less than your standard ded					
	<u> </u>	in you door to hemize deductions even though they are less than your standard ded	activit, t	MIOOK HOLG			

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

2009

Attachment Sequence No. 13

Name(s) shown on return Your social security number Haytham Faraj 321-70-6884 Income or Loss From Rental Real Estate and Royalties Part I Note. If you are in the business of renting personal property, use

	Schedule C or C-EZ (see instructions). If y	ou are a	an individual, report farm rental	income or loss from For					
1	List the type and address of each rental r	eal es	tate property:		2 For each rental rea			Yes	No
Α	Town home				property listed on I or your family use				
	423 Commerce st.	A	urora, IL 60504	!	tax year for person	al purposes			X
В	Single Family home				for more than the of the form	reater of:			
	1888 Avenida Segovia	0	ceanside, CA 92	2056	 10% of the total 	days	В		X
С					rented at fair ren	ıtal value?			
					(See instructions.)		С		
Inc	ome:	•	_	Properties		- ,,	Total		
	-	_	A 10 064	B	С		olumns A		
3	Rents received	3	12,064.	17,500.		3		29,	564.
<u>4</u>	Royalties received	4				4			
-	enses:	_		26					
5	Advertising	5	47.6	26.		_			
6	Auto and travel (see instructions)	6	476.	1 200		-			
7	Cleaning and maintenance	7	1,404.	1,380.		-			
8	Commissions	8	421	584.		-			
9	Insurance	9	431.	584.		-			
10	Legal and other professional fees	-				-			
11	· ·	11				-			
12	Mortgage interest paid to banks, etc (see instructions)	12	14,195.	17,051.		12		21 ′	246.
13	Other interest	13	14,190.	17,031.		12		ΣΙ,	240.
14	Repairs	14	250.	500.		-			
15	Supplies	15	230.	500.		-			
16	Taxes	16	5,388.	2,054.		-			
17	Utilities	17	3,300.	2,054.		-			
18	Oth - = (lint) >					-			
				560.		-			
	, stove			300.		-			
		•				-			
		•				-			
		•				_			
		18							
						_			
		İ							
						_			
					-				
19	Add lines 5 through 18	19	22,144.	22,155.		19		44,2	299.
20	Depreciation expense or depletion							_	700
	(see instructions)	20	7,799.	00 155		20		7,	799.
21	Total expenses. Add lines 19 and 20	21	29,943.	22,155.		-			
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	-17,879.	-4,655.		_			
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	-12,423.	-3,235.					
24	Income. Add positive amounts shown on		•			. 24			
25	Losses. Add royalty losses from line 22 a	nd rent	al real estate losses from	line 23. Enter total l	osses here	25		15,6	558.
26	Total rental real estate and royalty income or (lo			ne					
	result here. If Parts II, III, IV, and line 40 on page 2 amount on Form 1040, line 17, or Form 1040NR, line	uo not a ne 18 ∩	ppiy to you, also enter this therwise, include this amount						
	in the total on line 41 on page 2		moo,oiddo and amount			26	_	.15 4	558

Name(s) shown on return. Do not enter name and social security number if shown on Page 1. Your social security number 321-70-6884 Haytham Faraj Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1 Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See instructions. 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? . . X No If you answered 'Yes,' see instructions before completing this section. (b) Enter P (c) Check if (d) Employer (e) Check if for partnership; 28 (a) Name foreign identification any amount **S** for S partnership number is not at risk corporation A The Law Firm of Puckett & Faraj, S 26-2570788 В C D **Passive Income and Loss** Nonpassive Income and Loss (j) Nonpassive income from (i) Section 179 (f) Passive loss allowed (g) Passive income (h) Nonpassive loss expense deduction (attach Form 8582 if required) from Schedule K-1 fróm Schedule K-1 from Form 4562 Schedule K-1 10,916 В С D 29 a Totals 10.916 **b** Totals Add columns (g) and (j) of line 29a . . . 30 31 -10,916. Add columns (f), (h), and (i) of line 29b 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 -10,916 Income or Loss From Estates and Trusts Part III 33 (a) Name (b) Employer ID no. Α В **Passive Income and Loss** Nonpassive Income and Loss (c) Passive deduction or loss allowed (f) Other income (d) Passive income (e) Deduction or loss (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 from Schedule K-1 Α В 34 a Totals 35 Add columns (d) and (f) of line 34a 35 Add columns (c) and (e) of line 34b . . . 36 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below. 37 Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder (c) Excess inclusion (d) Taxable income (b) Employer (e) Income from 38 (a) Name from Schedules Q, (net loss) from identification number Schedules Q, line 3b Schedules Q, line 1b line 2c (see instructions) 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 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 -26,574. **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 42 (Form 1041), line 14, code F (see instructions) 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

Form **8582**

Name(s) shown on return

Haytham Faraj

Passive Activity Loss Limitations

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

OMB No. 1545-1008

2009

Attachment Sequence No. 88

Department of the Treasury Internal Revenue Service (99)

Identifying number 321-70-6884

Part I 2009 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	<u>.</u>	
b Activities with net loss (enter the amount from Worksheet 1, column (b))	<u>-</u>	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c)) 1c		00 534
d Combine lines 1a, 1b, and 1c.	. 1d	-22,534.
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)		
c Add lines 2a and 2b	. 2c	
All Other Passive Activities		
3 a Activities with net income (enter the amount from Worksheet 3, column (a)) 3a	-	
b Activities with net loss (enter the amount from Worksheet 3, column (b))	_	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c)) 3c		
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	-22,534.
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 n Part II. Instead, go to line 15.		olete
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	22,534.
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) 7 118,685		
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		
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions		15,658.
10 Enter the smaller of line 5 or line 9 · · · · · · · · · · · · · · · · · ·		15,658.
If line 2c is a loss, go to Part III. Otherwise, go to line 15.	10	137030.
Part III Special Allowance for Commercial Revitalization Deductions From Rental Real	Estat	e 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 · · · · · · · · · · · · · · · · · ·		
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 2009. Add lines 10, 14, and 15. See the instructions to		
find out how to report the losses on your tax return	. 16	15,658.

6,876.

Form 8582 (2009) Haytham Faraj						321-70-688	Page 2
Caution: The worksheets must be filed with your	tax return. Keep a coj	py for y	our records.				
Worksheet 1 — For Form 8582, Lines	1a, 1b, and 1c (S	ee instr	uctions.)				
•		Current year			ears	Overa	II gain or loss
Name of activity	(a) Net income (line 1a)		Net loss ine 1b)	(c) Unall loss (lin		(d) Gain	(e) Loss
423 Commerce st.	0.		17,879.		•		17,879.
1888 Avenida Segovia	0.		4,655.				4,655.
Total. Enter on Form 8582, lines 1a, 1b, and 1c	0.		22,534.				
Worksheet 2 - For Form 8582, Lines 2	2a and 2b (See ins	struction	ns.)				
Name of activity			(a) Curre deduction	ent year s (line 2a)	`ú	Prior year nallowed tions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b							
Worksheet 3 — For Form 8582, Lines			ructions.)	ı		T	
	Curren	t year		Prior ye	ears	Overa	II gain or loss
Name of activity	(a) Net income (line 3a)		Net loss ine 3b)	(c) Unall loss (lin		(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 3a, 3b, and 3c · · · · · · · · · · · · · · · · · ·							
Worksheet 4 - Use this worksheet if a	an amount is sh	own c	on Form 8	582, line	10 or 1	14 (See instruction	ons.)
Name of activity	Form or schedule and line number to be reported on (see instructions)		(a) Loss	(b) Rati	0	(c) Special allowance	(d) Subtract column (c) from column (a)
423 Commerce st.	E Ln 23		17,879.	0.793			
1888 Avenida Segovia	E Ln 23		4,655.	0.206	57673	3,23	5. 1,420.
Total			22,534.	1.0	Λ	15,65	8. 6,876.
Worksheet 5 – Allocation of Unallowe				1.0	0	13,03	0.1 0,070.
Name of activity	Form or sche and line num to be reported (see instructions)	dule ber d on	(á Lo	a) ss	(b) Ratio		(c) Unallowed loss
423 Commerce st.	E Ln 23			5,456.	0	.79348458	5,456.
1888 Avenida Segovia	E Ln 23			1,420.	0	.20651542	1,420.

6,876.

1.00

321-70-6884 Haytham Faraj Worksheet 6 — Allowed Losses (See instructions.) (a) Loss (c) Allowed loss Form or schedule (b) and line number Unallowed loss Name of activity to be reported on (see instructions) 423 Commerce st Ln 23 17,879 5,456 12,423 Ε 1888 Avenida Segovia E Ln 23 4,655. 1,420. 3,235. 22,534. 6,876. 15,658. Worksheet 7 — Activities With Losses Reported on Two or More Forms or Schedules (See instructions.) (c) Ratio (d) (e) **Unallowed loss** Allowed loss 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 **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 **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- ▶ 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 **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 **b** Net income from form or schedule . . .

1.00

c Subtract line 1b from line 1a. If zero or less, enter -0- . . .

Total

Form **2106-EZ**

Unreimbursed Employee Business Expenses

OMB No. 1545-0074

2009

Attachment 129A Sequence No

Department of the Treasury Internal Revenue Service

► Attach to Form 1040 or Form 1040NR.

Occupation in which you incurred expenses Social security number 321-70-6884 Haytham Faraj Attorney

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 2009.

Caution: You can use the standard mileage rate for 2009 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.

Pai	rt I Figure Your Expenses		
1	Vehicle expense using the standard mileage rate. Complete Part II and multiply line 8a by 55 (.55)	1	660.
2	Parking fees, tolls, and transportation, including train, bus, etc, that did not involve overnight travel or commuting to and from work	2	
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	3,054.
4	Business expenses not included on lines 1 through 3. Do not include meals and entertainment	4	1,963.
5	Meals and entertainment expenses: \$ 4,648. 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	2,324.
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	8,001.
Pai	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 2009, enter the number of miles you used your vehicle for	·.	
á	a Business1,200 b Commuting (see instr)0 c Other		3,500
9	Was your vehicle available for personal use during off-duty hours?	. X Yes	No
10	Do you (or your spouse) have another vehicle available for personal use?	. Yes	X No
11 a	a Do you have evidence to support your deduction?	. X Yes	☐ No
ı	b If 'Yes,' is the evidence written?	. X Yes	No

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 2106-EZ (2009)

Form **5695**

Residential Energy Credits

See instructions.

OMB No. 1545-0074 2009

Attachment Sequence No. 158

Department of the Treasury Internal Revenue Service

Haytham Faraj

Attach to Form 1040 or Form 1040NR.

321-70-6884

Before you begin Part I: Figure the amount of any credit for the elderly or the disabled you are claiming Part I Nonbusiness Energy Property Credit (See instructions before completing this part.) Were the qualified energy efficiency improvements or residential energy property costs for your main home X Yes located in the United States? (see instructions) No Caution: If you checked the 'No' box, you cannot claim the nonbusiness energy property credit. Do not complete Part I. 2 Qualified energy efficiency improvements (see instructions). a Insulation material or system specifically and primarily designed to reduce the heat loss or gain of 2 a 2 b **b** Exterior windows (including certain storm windows) and skylights 2 c d Metal roof with appropriate pigmented coatings, or asphalt roof with appropriate cooling granules, that are specifically and primarily designed to reduce the heat gain of your home, and the roof meets or exceeds the Energy Star program requirements in effect at the time of purchase or installation . . . 3 Residential energy property costs (see instructions). 550. 3 b c Advanced main air circulating fan used in a natural gas, propane, or oil furnace..... 3 c 550. Add lines 2a through 3c . . . 5 165. Maximum credit amount. (If you jointly occupied the home, see instructions) 550. Enter the smaller amount of line 5 or line 6 . . . 165. Enter the amount from Form 1040, line 46, or Form 1040NR, line 43 . . 14,931 Enter the total, if any, of your credits from Form 1040, lines 47 through 50, and Schedule R, line 24; or Form 1040NR, lines 44 through 46 14,931. Subtract line 9 from line 8. If zero or less, **stop.** You cannot take the nonbusiness energy property credit

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 5695 (2009)

165.

Before you begin Part II:

Figure the amount of any of the following credits you are claiming.

- Credit for the elderly or the disabled.
 District of Columbia first-time homebuyer credit.
 Alternative motor vehicle credit.
- Qualified plug-in electric vehicle credit.Qualified plug-in electric drive motor vehicle credit.

Par	Residential Energy Efficient Property Credit (See instructions before completing this particle)	oart.)	
Not	e. Skip lines 12 through 21 if you only have a credit carryforward from 2008.	1	
12	Qualified solar electric property costs	12	
13	Qualified solar water heating property costs	13	
14	Qualified small wind energy property costs	14	
15	Qualified geothermal heat pump property costs	15	
16	Add lines 12 through 15	16	
17	Multiply line 16 by 30% (.30)	17	
18	Qualified fuel cell property costs	_	
19	Multiply line 18 by 30% (.30)	_	
20	Kilowatt capacity of property on line 18 above ► X \$1,000 20		
21	Enter the smaller of line 19 or line 20	21	
22	Credit carryforward from 2008. Enter the amount, if any, from your 2008 Form 5695, line 28	22	
23	Add lines 17, 21, and 22	23	
24	Enter the amount from Form 1040, line 46, or Form 1040NR, line 43 24	_	
25	1040 filers: Enter the total, if any, of your credits from Form 1040, lines 47 through 50; line 11 of this form; line 12 of the Line 11 Worksheet in Pub 972 (see instructions); Form 8396, line 11; Form 8839, line 18; Form 8859, line 11; Form 8834, line 22; Form 8910, line 21; Form 8936, line 14; and Schedule R, line 24.		
	1040NR filers: Enter the amount, if any, from Form 1040NR, lines 44 through 46; line 11 of this form; line 12 of the Line 11 worksheet in Pub 972 (see instructions); Form 8396, line 11; Form 8839, line 18, Form 8859, line 11; Form 8834, line 22; Form 8910, line 21; and Form 8936, line 14.	-	
26	Subtract line 25 from line 24. If zero or less, enter -0- here and on line 27	26	
27	Residential energy efficient property credit. Enter the smaller of line 23 or line 26	27	
28	Credit carryforward to 2010. If line 27 is less than line 23, subtract line 27 from line 23		
Par	t III Current Year Residential Energy Credits		
29	Add lines 11 and 27. Enter the result here and on Form 1040, line 52, or Form 1040NR, line 48, and check box c on that line	. 29	165.

Form **5695** (2009)

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING

TAXPAYER: Haytham Faraj PRIMARY SSN: 321-70-6884

FEDERAL RETURN SUBMITTED: June 4, 2010 05:04 AM PDT

FEDERAL RETURN ACCEPTANCE DATE:

Your return was electronically transmitted on 06/04/2010

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 15, 2010. 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 15, 2010, your Intuit electronic postmark will indicate April 15, 2010, 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 15, 2010, and a corrected return is submitted and accepted before April 20, 2010. If your return is submitted after April 20, 2010, 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, 2010. 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, 2010, and the corrected return is submitted and accepted by October 20, 2010.

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 2009 Michigan Tax Return Important: Your taxes are not finished until all required steps are completed.



Haytham Faraj 22167 Morley Ave. Dearborn, MI 48124

Dearboin, Mi	40124						
Balance Due/ Refund	Your Michigan state tax return (Form you in the amount of \$864.00. Your t deposited into your account within 8 accepted. The account information yo 1830176002 Routing Transit Number: 2	ax refun to 14 d u entere	d should be dired lays after your ro d - Account Numbo	ct eturn is			
Where's My Refund?	Before you call the Michigan Department of Treasury 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 Michigan Department of Treasury directly at 1-800-827-4000. You can also visit the Michigan Department of Treasury web site at https://treas-secure.treas.state.mi.us/eservice_enu/start.swe.						
No Signature Document Needed	No signature form is required since you signed your return electronically.						
What You Need to Keep	 Your Electronic Filing Instructions Printed copy of your state and feder 						
2009 Michigan Tax Return Summary	Taxable Income Total Tax Total Payments/Credits Amount to be Refunded	\$ \$ \$ \$ \$	70,276.00 3,039.00 3,903.00 864.00				

2009 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.

BEILL BUILD BOOK I GENERALLI GENERALISED LOGISED DED DE DO DE DE DESCRIPCIONES DE DOCUMENTO. BEILLI

Software	Use Only		
X	MI-1040 included	MI-1040CR-7 included	

FILER'S IDENTIFICATION

HAYTHAM 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	s First Name	Filer's Social Security Number
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)	THAM	321-70-6884
		Spouse's Social Security Number
	Address (No. Street P.O. Roy or Rural Route)	
22167 MORLEY AVE	Address (No., Street, 1. O. Box of Naral Notice)	
	67 MORLEY AVE	
City or Town State ZIP Code		ZIP Code
DEARBORN MI 48124		

Instructions

Staple this form to the top of your 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 "2009 income tax" on the front of your check.

1030 MIIA0203 11/02/09

2009 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 15, 2010.

Туре	or print in	blue or	black ink.
	► 1 Filer	's First Na	me

		► 1 Filer's First Name	M.I.	Last Name				► 2 File	er's Social Security	/ No.			
Р		HAYTHAM		FARAJ			321-70-6884						
		If a Joint Return, Spouse's First Name	M.I.		1								
L A C E							► 3 Spouse's Social Security No.						
Ĕ	H F	ne Address (No., Street, P.O. Box or Rural Route)											
	R E												
L A B E L		22167 MORLEY AVE.											
B	ľ	City or Town		State ZIP 0	Code			► 4 Sc	hool District Code	(5 digits - see instructions)			
Ĺ		DEARBORN		MI 481	124			8	2230				
Υοι	ı m	nay contribute to the CHILDREN'S TRUST FU	ND (on line 22 of this form.									
>	5	STATE CAMPAIGN FUND		Yes No	•	6	FARME	ERS, FI	SHERMEN O	R SEAFARERS			
		Check this box if you (or your spouse, if filing		a You X									
		a joint return) want \$3 of your taxes to go to this fund. This will not increase your tax or								2/3 of your income is			
		reduce your refund.		b Spouse				Trom	i tarming, tisn	ing or seafaring.			
	7	FILING STATUS. Check one.			•	8	RESIDI	FNCY.	Check all that	apply			
	•					Ü	E-1			арріу.			
		a X Single *If yo	u ch	neck box 'c,' complete line 3			a X	Res	ident 				
				r spouse's name below:			b	Non		f you check box 'b' or			
								•		nd attach Schedule NI			
		c Married, filing separately*					С	Part	-Year Reside	nt*			
_	_												
	9	EXEMPTIONS					_				1		
		a Number of exemptions you claimed on you	ır 20	009 federal return	. •	-	9 a	1	x \$3,600	3,600.	00		
		h Number of individuals CE or alder who are	1:4 4	for a analial avamation		-	O.b.				00		
		b Number of individuals 65 or older who qua c Number of individuals who qualify for one of the follo	•				9 b		x \$2,300		00		
		hemiplegic, paraplegic, quadriplegic, or totally and p	perma	anently disabled	. •	-	9 c		x \$2,300		00		
		d Number of children ages 18 and under you	ı cla	nimed as Michigan exemptions .	. •	-	9 d		x \$600		00		
		e Number of qualified disabled veterans			. •	-	9 e	1	x \$300	300.	00		
		f If your unemployment compensation is 50°	% or	r more of your Adjusted Gross			_	1					
		Income (amount claimed on line 10) check	٠,			•	9 f	(✓)	\$ 2,300		00		
		g If someone else can claim you as a dependent, che instructions, and enter the amount from the workshe	et .	t) the box, complete worksheet 2 in the	. Þ	-	9 g	(✓)	9 g		00		
								• , ,			ĺ		
		h Add lines 9a, 9b, 9c, 9d, 9e, 9f and 9g. En							9 h	·			
	10	•		,		• •		1 0		*			
	11	Additions from Michigan Schedule 1, line 7	7. At	tach Schedule 1	٠.	• •	'	1 1		10,916.			
	12	Total. Add lines 10 and 11						12		113,943.	00		
	13	B Subtractions from Michigan Schedule 1, lir	ne 2	1. Attach Schedule 1			'	13		39,767.	00		
	14	Income subject to tax. Subtract line 13 from line 1.	2. If li	ine 13 is greater than line 12, enter '0'				14		74,176.	00		
	15	Exemption allowance. Amount from line	9h o	or Schedule NR, line 20			'	1 5		3,900.	00		
	16	Taxable income. Subtract line 15 from line	e 14	I. If line 15 is greater than line 14	4, ent	ter '(0'	16		70,276.	00		
	17	Tax. Multiply line 16 by 4.35% (.0435)						17		3,057.	00		
	18	Total Nonrefundable Credits. Amount from	om S	Schedule 2, line 11. Attach Sche	dule	2.		. 18		100.	00		
	19	Income tax. Subtract line 18 from line 17.	If lin	ne 18 is greater than line 17, ent	er '0'	٠		▶ 19		2,957.	00		
E	9	DIRECT DEPOSIT Deposit your refund directly into your bank account! A Routing Transit Number	2 <u>5</u> 6	074974			b Type	e of ount:	► (1)	ecking (2) X Savir	ngs		
		See instructions and complete a, b and c. C Account	0.5	0156000									
		Number ► 1	.83	0176002									

	THAM FARAJ MI-1040, Page 2 Filer's Social	al Security Number	321-70-688	34		
20	Enter amount of Income Tax from line 19		20		2,957.	00
21	Military Family Relief Fund. Enter your contribution amount (\$1 minimur	m)		▶ 21		00
22	Children's Trust Fund. Enter your contribution amount (\$5 minimum) .			▶ 22		00
23	Children of Veterans Tuition Grant Program. Enter your contribution am	nount (\$2 minimur	n)	▶ 23		00
24	Additional Voluntary Contributions from Form 4642, line 12, Attach Form	n 4642		24		00
25	USE Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1, line 3, in the instructions.			▶ 25	82.	00
26 REF	Add lines 20, 21, 22, 23, 24 and 25		26		3,039.	00
27	Property Tax Credit. Attach MI-1040CR or MI-1040CR-2			▶ 27		00
28	Farmland Preservation Credit. Attach MI-1040CR-5			▶ 28		00
29	Qualified Adoption Expenses. Attach U.S. 8839 and MI-8839			▶ 29		00
30	Stillbirth Credit. Amount from Worksheet 3, in the instructions	<u></u>		▶ 30		00
31 a	Federal Earned Income Tax Credit	31 a	00			
b	Michigan Earned Income Tax Credit. Multiply line 31a by 20% (0.20) .			► 31 b		00
32	Energy Efficient Qualified Home Improvement Credit. Amount from For		▶ 32		00	
33	Michigan Historic Preservation Tax Credit (refundable). Amount from Fo	orm 3581, line 16	a or 16b	▶ 33		00
34	Michigan tax withheld from Schedule W, line 3. Attach Schedule W (do	not submit W-2	's)	▶ 34	3,903.	00
35	Estimated tax, extension payments and 2008 credit forward			▶ 35		00
36	Total refundable credits and payments. Add lines 27 through 30, 31b, a	nd 32 through 35	36		3,903.	00
REF	UND OR TAX DUE	Office Use Only				
37	If line 36 is less than line 26, subtract line 36 from line 26.					
		(see instr)				0.0
38	Overpayment. If line 36 is greater than line 26, subtract line 26 from lin		_		864.	00
39	Credit Forward. Amount of line 38 to be credited to your 2010 estimated tax for your 2				0.54	00
40	Subtract line 39 from line 38	RI	EFUND ► 40		864.	00
	eased Taxpayer. If Filer and/or Spouse died after December 31, 2008, check the priate box below.	Preparer Ce return is bas	ertification. I dec sed on all informa	lare under pena tion of which I h	alty of perjury that this ave any knowledge.	3
^ _	Filer is Deceased ► Spouse is Deceased	► Preparer's	PTIN, FEIN or SSN			71
	payer Certification. I declare under penalty of perjury that the information in this return ttachments is true and complete to the best of my knowledge.	► Preparer's	Business Name (print o	or type)		Ţ
Filer's	S Signature Date	SELF-PRI	EPARED ness Address (print or to	wne)		
Spou	se's Signature Date	Treparer 3 Busin	iess Address (print of t	урс)		
>	authorize Treasury to discuss my return with my preparer. Yes	No				
	nd, credit or zero returns. Mail your return to: Michigan Departr amount on line 37. Mail your check and return to: Michigan Departr	-	•			

Make your check payable to 'State of Michigan.' Print your Social Security number and '2009 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/iit

2009 MICHIGAN Schedule 1 Additions and Subtractions

Issued under authority of Public Act 281 of 1967

Type or print in blue or black ink.

Atta	ch to Form MI-1040.					Attachmen	t 1A
Filer'	s First Name	M.I.	Last Name	Filer's Social Security Num	ber		
HA	YTHAM		FARAJ	321-70-688	4		
If a J	oint Return, Spouse's First Name	M.I.	Last Name	Spouse's Social Security N	lumber		
Add	ditions to Income						
1	Gross interest and dividends from obli (other than Michigan) or their political	igation subdiv	s issued by states isions		1		00
2	Deduction for taxes on, or measured by your federal return (see instructions)	oy, ince	ome including self-employment tax taken	on	2		00
3	Gains from Michigan column of MI-10	40D aı	nd MI-4797		3		00
4	Losses attributable to other states (se	e instr	uctions)		4	10,916.	00
5	Net loss from federal column of your N	Michiga	an MI-1040D or MI-4797		5		00
6	Other (see instructions). Describe:			· · · · · · · · · · · · · · · · · · ·	6		00
7		6. Ente	er here and on MI-1040, line 11		7	10,916.	00
Sub	otractions from Income						Т
8	Income from U.S. government bonds Attach U.S. Schedule B or 1040A Sch	and ot nedule	her U.S. obligations included in MI-1040, 1 if over \$5,000.	line 10 ▶	8		00
9	Military pay from U.S. Armed Forces i (Include retirement pay on line 12 of the	nclude his sch	d in MI-1040, line 10. Attach Schedule Wedule.).	^{1.}	9		00
10	Gains from federal column of Michigan	n MI-1	040D and MI-4797		0		00
11	Income attributable to another state.	Explair	type and source: Oth St l	ous/rental inc► 1	1	0.	00
12	Retirement or pension benefits include See exceptions in instructions. Name of payer		II-1040, line 10. (Include military retireme DEFENSE FINANCE AND ACCO	,	2	39,767.	00
13	Dividend/interest/capital gains deducti	ion for	senior citizens (see instructions)		3		00
14 15	Social Security benefits from U.S. 104 Income earned while a resident of a re		20b or U.S. <i>1040A</i> , line 14b		4		00
13	Name of zone:	zi iaissi	ance zone.	► 1	5		00
16	Michigan state and local income tax re	efunds	received in 2009 and included in MI-104	0, line 10 · · · · · · 1	6		00
17	Michigan Education Savings Program	and M	II529 Advisor Plan		7		00
18	Michigan Education Trust				8		00
19	Venture Capital Deduction. Attach For	rm 453	4		9		00
20	Miscellaneous subtractions (see instructions).	Descril	pe:	<u> </u>	0		00
21	Total subtractions. Add lines 8 throu	ıgh 20.	Enter here and on MI-1040, line 13		:1	39,767.	00

Attachment 1A

2009 MICHIGAN Schedule 2 Nonrefundable Credits

Issued under authority of Public Act 281 of 1967.

Attach to Form MI-1040.			Attachment 1					
Filer's First Name	M.I.	Last Name	Filer's Social Security Number					
			▶					
HAYTHAM		FARAJ	321-70-6884					
If a Joint Return, Spouse's First Name	M.I.	Last Name	Spouse's Social Security Number					

		Amount	_	r	Credit	T 1
1	City Income Tax Credit (see instructions)		0.0	1 b		00
2	Public Contribution Credit (see instructions)	490.	0.0	2 b	100.	00
3	Community Foundation Credit. Enter code from instructions . ► 3 a		0.0	3 b		00
4	Homeless Shelter/Food Bank Credit (see instructions)		0.0	4 b		00
5	Credit for Income Tax Imposed by Government Units Outside Michigan. Attach a copy of the return 5 a		00	5 b		00
6	Michigan Historic Preservation Tax Credit (nonrefundable). For a refund of any unused credit, see Form 3581 inst. Attach Form 3581 • 6 a	(00	6 b		00
7	College Tuition and Fees Credit. Attach Schedule CT		_	7		00
8	Vehicle Donation Credit. Enter code from list below ▶ 8 a		0.0	8 b		00
9	Individual or Family Development Account Credit		00	9 b		00
10	Energy Cost Recovery Surcharge Credit ▶ 10 a		00	10 b		00
11	Total nonrefundable credits. Add lines 1b, 2b, 3b, 4b, 5b, 6b, 7, 8b, 9b and 10b. Enter here and carry amount to your MI-1040, line 18 · · · · · · · · · · · · · · · · · ·		1		100.	00

VEHICLE DONATON CREDIT CODE TABLE

- 604 Carlink, Inc.
- 105 Goodwill Industries of Mid-Michigan, Inc.
- 705 Goodwill Industries of Northern Michigan, Inc.
- 905 Goodwill Industries of Southeast Michigan, Inc.
- 803 Goodwill Industries of West Michigan, Inc.
- 601 Goodwill of Southwestern Michigan, Inc.
- 202 Goodwill Wheels to Work

Michigan Department of Treasury 3924 (Rev 9-09), Page 1

2009 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967.

INSTRUCTIONS: If you had Michigan income tax withheld in 2009, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 34). Attach your completed Schedule W to your MI-1040 or MI-1040X form where applicable. See complete instructions. Type or print in blue or black ink.

Attachment 13

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

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

	Α	▶ B	С	D	→ E	F
if f	er 'X' or: Spouse	Box b — Employer's federal identification number	Employer's name	Box 1 — Wages, tips, other compensation	Box 17 — Michigan income tax withheld	Box 19 — City income tax withheld
Х		26-2570788	LAW FIRM OF PUCKE	89,720.00	3,903.00	00
				00	00	00
				00	00	00
				00	00	00
				00	00	00
				00	00	00
				00	00	00
				00	0.0	00
Enter -	Table 1	Subtotal from additional S	chedule W forms (if applicable)		0.0	00
1 5	SUBTO	TAL. Enter total of Table 1.	, columns E and F. Carry total of column 040 Instruction Booklet	F to the City	3,903.00	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

וטחו	<u> </u>	MICHICAL TAX WIT	INILLO ON 1033 and 4113 1 O	KINIO				
Ente if f	A er 'X' or: Spouse	► B Payer's federal identification number	Taxable pensi ayer's federal distribution, mi) .	► E Michigan income tax withheld		F Box 7 — Distribution Code (1099-R only)
100 01	Spouse	identification number	. ayer e name	income, etc (see in	SII.)	tax withinoid		Odde (1000-11 offly)
Х		36-2673279	AURORA AOUSING AU	0.	00	0.0	0	
					00	0	0	
					00	0	0	
					00	0	0	
					00	0	0 0	
					00	0	0	
Enter -	Table 2	Subtotal from additional Se	chedule W forms (if applicable)			0	0	
2 \$	SUBTO	TAL. Enter total of Table 2	, column E		2	0.0	0	
3 -	TOTAL	. Add line 1 and line 2, colu	ımn E. Carry total to your MI-1040, line 3	34 ▶	3	3,903.0	0 0	

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

2009

Attachment Sequence No. 13

Name(s) shown on return Your social security number Haytham Faraj 321-70-6884 Income or Loss From Rental Real Estate and Royalties Part I Note. If you are in the business of renting personal property, use

1	Schedule C or C-EZ (see instructions). If y List the type and address of each rental r				2 For each rental			Yes	No
A	Town home	55	ppy.			on line 1, did you		1	- 1-
	423 Commerce st.		urora, IL 60504			se it during the sonal purposes	Α		Х
В	Single Family home				for more than the				
_	1888 Avenida Segovia		ceanside, CA 920	 156	• 14 days, or	atal davia	В		Х
С					 10% of the to rented at fair 	rental value?			
_	h				(See instruction		С		
_	1			Properties			Total	s S	
Inc	ome:	F	Α	В	С	(Add colu			d C.)
3	Rents received	3	12,064.	17,500.		3		29,5	
_	Royalties received	4	22/0011	27,0001		4			<u> </u>
	enses:								
	Advertising	5		26.					
	Auto and travel (see instructions)	6	476.	20.					
7	Cleaning and maintenance	7	1,404.	1,380.					
8	Commissions	8	1,404.	1,300.					
9	Insurance	9	431.	584.					
	Legal and other professional fees	10	431.	304.					
10		-							
11	Management fees	11							
12	Mortgage interest paid to banks, etc	40	14 100	17 051		40		21 0	116
40	(see instructions)	12	14,195.	17,051.		12		31,2	40.
13		13	050	500					
14	Repairs	14	250.	500.					
15	Supplies	15							
16	Taxes	16	5,388.	2,054.					
17	Utilities	17							
18	Other (list)								
Nev	stove	.		560.					
		. L							
		. L							
		. L							
		18							
19	Add lines 5 through 18	19	22,144.	22,155.		19		44,2	<u> 19</u> 9.
20	Depreciation expense or depletion								
	(see instructions)	20	7,799.			20		7,7	799.
21	Total expenses. Add lines 19 and 20	21	29,943.	22,155.					
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	-17,879.	-4,655.					
00			11,017.	1,055.					
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		10 400	2 225					
٠.,	must complete line 43 on page 2	23	-12,423.	-3,235.		24			
24	Income. Add positive amounts shown on		•					1 - 1	
25	Losses. Add royalty losses from line 22 a				sses nere	25	-	15,6	58.
26	Total rental real estate and royalty income or (lo								
	result here. If Parts II, III, IV, and line 40 on page 2 amount on Form 1040, line 17, or Form 1040NR, lir	uo not a ne 18 ∩t	ppiy io you, aiso enter this herwise, include this amount						
	in the total on line 41 on page 2					26	-	15,6	58.

Name(s) shown on return. Do not enter name and social security number if shown on Page 1. Your social security number 321-70-6884 Haytham Faraj Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1 Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See instructions. 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? . . X No If you answered 'Yes,' see instructions before completing this section. (b) Enter P (c) Check if (d) Employer (e) Check if for partnership; 28 (a) Name foreign identification any amount **S** for S partnership number is not at risk corporation A The Law Firm of Puckett & Faraj, S 26-2570788 В C D **Passive Income and Loss** Nonpassive Income and Loss (j) Nonpassive income from (i) Section 179 (f) Passive loss allowed (g) Passive income (h) Nonpassive loss expense deduction (attach Form 8582 if required) from Schedule K-1 fróm Schedule K-1 from Form 4562 Schedule K-1 10,916 В С D 29 a Totals 10.916 **b** Totals Add columns (g) and (j) of line 29a . . . 30 31 -10,916. Add columns (f), (h), and (i) of line 29b 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 -10,916 Income or Loss From Estates and Trusts Part III 33 (a) Name (b) Employer ID no. Α В **Passive Income and Loss** Nonpassive Income and Loss (c) Passive deduction or loss allowed (f) Other income (d) Passive income (e) Deduction or loss (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 from Schedule K-1 Α В 34 a Totals 35 Add columns (d) and (f) of line 34a 35 Add columns (c) and (e) of line 34b . . . 36 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below. 37 Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder (c) Excess inclusion (d) Taxable income (b) Employer (e) Income from 38 (a) Name from Schedules Q, (net loss) from identification number Schedules Q, line 3b Schedules Q, line 1b line 2c (see instructions) 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 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 -26,574. **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 42 (Form 1041), line 14, code F (see instructions) 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