

Form **8879**Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization**

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

OMB No. 1545-0074

2009

Declaration Control Number (DCN)

00-030199-00047-0

Taxpayer's name

DEBORAH L MARKOWITZ

Social security number

Spouse's name

PAUL W MARKOWITZ

Spouse's social security number

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

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	122,614.
2	Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11)	2	18,691.
3	Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7)	3	6,567.
4	Refund (Form 1040, line 73a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 13a)	4	0.
5	Amount you owe (Form 1040, line 75; Form 1040A, line 48; Form 1040EZ, line 13)	5	

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

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

Taxpayer's PIN: check one box only

☒ I authorize **MARGARET ATKINS MUNRO E.A.** to enter or generate my PIN

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on my tax year 2009 electronically filed income tax return.

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

Your signature

Date

4-10-10

Spouse's PIN: check one box only

☒ I authorize **MARGARET ATKINS MUNRO E.A.** to enter or generate my PIN

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on my tax year 2009 electronically filed income tax return.

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

Spouse's signature

Date

4-10-10

Practitioner PIN Method Returns Only – continue below**Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN **03019963443**

do not enter all zeros

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

ERO's signature

Date

04/08/10

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

BAA For Paperwork Reduction Act Notice, see instructions.

Form 8879 (2009)

FDIA1701 10/21/09

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for taking part in the IRS *e-file* Program.

DEBORAH L & PAUL W MARKOWITZ

(Taxpayer Name)

4 PEARL ST

(Taxpayer Address optional)

MONTPELIER VT 05602

- 1 ☒ Your federal income tax return/extension for 2009 was filed electronically with the Andover Submission Processing Center. The electronic filing services were provided by MARGARET ATKINS MUNRO E.A.
- 2 ☒ Your return was accepted on 04/14/2010 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The declaration Control Number (DCN) assigned to your return is 00-030199-00047-0
- 3 ☐ Your return was accepted on _____. Please allow 4-6 weeks for the processing of your return. The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.
- 4 ☐ Your refund or part of your refund may be offset due to a debt owed to the Internal Revenue Service, the Office of Child Support Enforcement, or other government agency.
- 5 ☐ Your electronic funds withdrawal payment was accepted.
- 6 ☐ Your electronic funds withdrawal payment was not accepted. You must pay the balance due by the prescribed due date. You may see your payment options in the 'If You Owe Tax' section.
- 7 ☐ Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on _____. The Declaration Control Number (DCN) assigned to your extension is _____.

PLEASE DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS submission processing center that processes paper returns for your area. The address is available at www.irs.gov, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to www.irs.gov and click on 'Where's My Refund' to view your refund status. Exception: If box 3 above is checked, please allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

Label (See instructions.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign	For the year Jan 1 - Dec 31, 2009, or other tax year beginning , 2009, ending , 20		OMB No. 1545-0074	
	Your first name DEBORAH	MI L	Last name MARKOWITZ	Your social security number [REDACTED]
	If a joint return, spouse's first name PAUL	MI W	Last name MARKOWITZ	Spouse's social security number [REDACTED]
	Home address (number and street). If you have a P.O. box, see instructions. Apartment no. 4 PEARL ST			You must enter your social security number(s) above. ▲
City, town or post office. If you have a foreign address, see instructions. State ZIP code MONTPELIER VT 05602				
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions) <input type="checkbox"/> You <input type="checkbox"/> Spouse				

Filing Status

1 <input type="checkbox"/> Single 2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above & full name here .	4 <input type="checkbox"/> 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 <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions)
--	--

Check only one box.

Exemptions

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a b <input checked="" type="checkbox"/> Spouse c Dependents: <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">(1) First name</th> <th style="width:25%;">Last name</th> <th style="width:20%;">(2) Dependent's social security number</th> <th style="width:20%;">(3) Dependent's relationship to you</th> <th style="width:10%;">(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)</th> </tr> </thead> <tbody> <tr> <td>AVIVA</td> <td>MARKOWITZ</td> <td>[REDACTED]</td> <td>Daughter</td> <td><input type="checkbox"/></td> </tr> <tr> <td>SANDRA</td> <td>MARKOWITZ</td> <td>[REDACTED]</td> <td>Daughter</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>ARI</td> <td>MARKOWITZ</td> <td>[REDACTED]</td> <td>Son</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)	AVIVA	MARKOWITZ	[REDACTED]	Daughter	<input type="checkbox"/>	SANDRA	MARKOWITZ	[REDACTED]	Daughter	<input checked="" type="checkbox"/>	ARI	MARKOWITZ	[REDACTED]	Son	<input type="checkbox"/>	Boxes checked on 6a and 6b ... 2 No. of children on 6c who: • lived with you ... 3 • did not live with you due to divorce or separation (see instrs) ... Dependents on 6c not entered above ... Add numbers on lines above ... 5
(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)																	
AVIVA	MARKOWITZ	[REDACTED]	Daughter	<input type="checkbox"/>																	
SANDRA	MARKOWITZ	[REDACTED]	Daughter	<input checked="" type="checkbox"/>																	
ARI	MARKOWITZ	[REDACTED]	Son	<input type="checkbox"/>																	
d Total number of exemptions claimed																					

If more than four dependents, see instructions and check here ☐

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 8a Taxable interest. Attach Schedule B if required b Tax-exempt interest. Do not include on line 8a 9a Ordinary dividends. Attach Schedule B if required b Qualified dividends (see instrs) 10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) 11 Alimony received 12 Business income or (loss). Attach Schedule C or C-EZ 13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here 14 Other gains or (losses). Attach Form 4797 15a IRA distributions 16a Pensions and annuities 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 18 Farm income or (loss). Attach Schedule F 19 Unemployment compensation in excess of \$2,400 per recipient (see instructions) 20a Social security benefits 21 Other income 22 Add the amounts in the far right column for lines 7 through 21. This is your total income	<table style="width:100%;"> <tr><td style="width:50%;">7</td><td style="width:50%; text-align: right;">76,210.</td></tr> <tr><td>8a</td><td style="text-align: right;">196.</td></tr> <tr><td>9a</td><td style="text-align: right;">197.</td></tr> <tr><td>10</td><td></td></tr> <tr><td>11</td><td></td></tr> <tr><td>12</td><td style="text-align: right;">63,798.</td></tr> <tr><td>13</td><td style="text-align: right;">-1,422.</td></tr> <tr><td>14</td><td></td></tr> <tr><td>15b</td><td></td></tr> <tr><td>16b</td><td></td></tr> <tr><td>17</td><td></td></tr> <tr><td>18</td><td></td></tr> <tr><td>19</td><td></td></tr> <tr><td>20b</td><td></td></tr> <tr><td>21</td><td></td></tr> <tr><td>22</td><td style="text-align: right;">138,979.</td></tr> </table>	7	76,210.	8a	196.	9a	197.	10		11		12	63,798.	13	-1,422.	14		15b		16b		17		18		19		20b		21		22	138,979.
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19																																	
20b																																	
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22	138,979.																																

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
If you did not get a W-2, see instructions.
Enclose, but do not attach, any payment. Also, please use Form 1040-V.

Adjusted Gross Income

23 Educator expenses (see instructions) 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 25 Health savings account deduction. Attach Form 8889 26 Moving expenses. Attach Form 3903 27 One-half of self-employment tax. Attach Schedule SE 28 Self-employed SEP, SIMPLE, and qualified plans 29 Self-employed health insurance deduction (see instructions) 30 Penalty on early withdrawal of savings 31a Alimony paid b Recipient's SSN 32 IRA deduction (see instructions) 33 Student loan interest deduction (see instructions) 34 Tuition and fees deduction. Attach Form 8917 35 Domestic production activities deduction. Attach Form 8903 36 Add lines 23 - 31a and 32 - 35 37 Subtract line 36 from line 22. This is your adjusted gross income	<table style="width:100%;"> <tr><td style="width:50%;">23</td><td style="width:50%;"></td></tr> <tr><td>24</td><td></td></tr> <tr><td>25</td><td></td></tr> <tr><td>26</td><td></td></tr> <tr><td>27</td><td style="text-align: right;">4,507.</td></tr> <tr><td>28</td><td style="text-align: right;">11,858.</td></tr> <tr><td>29</td><td></td></tr> <tr><td>30</td><td></td></tr> <tr><td>31a</td><td></td></tr> <tr><td>32</td><td></td></tr> <tr><td>33</td><td></td></tr> <tr><td>34</td><td></td></tr> <tr><td>35</td><td></td></tr> <tr><td>36</td><td style="text-align: right;">16,365.</td></tr> <tr><td>37</td><td style="text-align: right;">122,614.</td></tr> </table>	23		24		25		26		27	4,507.	28	11,858.	29		30		31a		32		33		34		35		36	16,365.	37	122,614.
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33																															
34																															
35																															
36	16,365.																														
37	122,614.																														

Tax and Credits**Standard Deduction for**

• People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$5,700

Married filing jointly or Qualifying widow(er), \$11,400

Head of household, \$8,350

38	Amount from line 37 (adjusted gross income)	38	122,614.
39a	Check if: <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
	<input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind. 39b		
40a	If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here 40a		18,293.
40b	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) 40b		
41	Subtract line 40a from line 38	41	104,321.
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	18,250.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	86,071.
44	Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	13,874.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Add lines 44 and 45	46	13,874.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 29	49	1,500.
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit (see instructions)	51	350.
52	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input checked="" type="checkbox"/> 5695	52	1,347.
53	Other crs from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
54	Add lines 47 through 53. These are your total credits	54	3,197.
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	10,677.
56	Self-employment tax. Attach Schedule SE	56	9,014.
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H	59	
60	Add lines 55-59. This is your total tax	60	19,691.
61	Federal income tax withheld from Forms W-2 and 1099	61	6,567.
62	2009 estimated tax payments and amount applied from 2008 return	62	11,640.
63	Making work pay and government retiree credit. Attach Schedule M	63	800.
64a	Earned income credit (EIC)	64a	
b	Nontaxable combat pay election 64b		
65	Additional child tax credit. Attach Form 8812	65	
66	Refundable education credit from Form 8863, line 16	66	1,000.
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	
70	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	70	
71	Add lns 61-63, 64a, & 65-70. These are your total pmts	71	20,007.
72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	72	316.
73a	Amount of line 72 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	73a	0.
b	Routing number XXXXXXXXXX c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number XXXXXXXXXXXXXXXXXXXX		
74	Amount of line 72 you want applied to your 2010 estimated tax	74	316.
75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see instructions	75	
76	Estimated tax penalty (see instructions)	76	

Other Taxes**Payments**

If you have a qualifying child, attach Schedule EIC.

Refund

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

Amount You Owe**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ **Yes. Complete the following.** ☐ **No**

Designee's name **MARGARET ATKINS MUNRO EA** Phone no. **(802) 878-1055** Personal identification number (PIN) [REDACTED]

Sign Here

Joint return? See instructions.

Keep a copy for your records.

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

Your signature	Date	Your occupation	Daytime phone number
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
		GOV'T ADMINISTRATOR	
		CONSULTANT	

Paid Preparer's Use Only

Preparer's signature **MARGARET ATKINS MUNRO E.A.** Date **04/15/2010** Check if self-employed ☒ Preparer's SSN or PTIN **P00220540**

Firm's name (or yours if self-employed) **PO BOX 68** EIN **04-3588676**

address, and ZIP code **ESSEX JUNCTION VT 05453-0068** Phone no. **(802) 878-1055**

SCHEDULE A
(Form 1040)Department of the Treasury
Internal Revenue Service (99)**Itemized Deductions**

OMB No. 1545-0074

2009Attachment
Sequence No. **07**▶ **Attach to Form 1040.**▶ **See Instructions for Schedule A (Form 1040).**

Name(s) shown on Form 1040

Your social security number

DEBORAH L & PAUL W MARKOWITZ

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):			
a	<input checked="" type="checkbox"/> Income taxes, or			
b	<input type="checkbox"/> General sales taxes	5	5,133.	
6	Real estate taxes (see instructions)	6	4,889.	
7	New motor vehicle taxes from line 11 of the worksheet on page 2. Skip this line if you checked box 5b	7		
8	Other taxes. List type and amount ▶	8		
9	Add lines 5 through 8	9		10,022.
Interest You Paid	10 Home mtg interest and points reported to you on Form 1098	10	941.	
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		
12	Points not reported to you on Form 1098. See instrs for spl rules	12		
13	Qualified mortgage insurance premiums (see instructions)	13		
14	Investment interest. Attach Form 4952 if required. (See instrs.)	14		
15	Add lines 10 through 14	15		941.
Gifts to Charity	16 Gifts by cash or check. If you made any gift of \$250 or more, see instrs	16	7,330.	
If you made a gift and got a benefit for it, see instructions.	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		7,330.
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.) ▶			
Employee Business Expenses	860.	21	860.	
22	Tax preparation fees	22	519.	
23	Other expenses — investment, safe deposit box, etc. List type and amount ▶			
Miscellaneous Expenses	75.	23	75.	
24	Add lines 21 through 23	24	1,454.	
25	Enter amount from Form 1040, line 38	25	122,614.	
26	Multiply line 25 by 2% (.02)	26	2,452.	
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27		0.
Other Miscellaneous Deductions	28 Other — from list in the instructions. List type and amount ▶	28		
Total Itemized Deductions	29 Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)? <input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40a. <input type="checkbox"/> Yes. Your deduction may be limited. See instructions for the amount to enter.	29		18,293.
30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ <input type="checkbox"/>			

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

► **Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.**
► **Attach to Form 1040, 1040NR, or 1041.** ► **See Instructions for Schedule C (Form 1040).**

OMB No. 1545-0074

2009

Attachment
Sequence No. **09**

Name of proprietor

PAUL W MARKOWITZ

Social security number (SSN)

A Principal business or profession, including product or service (see instructions)

ENVIRONMENTAL CONSULTANT

B Enter code from instructions

► **541990**

C Business name. If no separate business name, leave blank.

D Employer ID number (EIN), if any

E Business address (including suite or room no.) ► **4 PEARL ST**

City, town or post office, state, and ZIP code **MONTPELIER, VT 05602**

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►

G Did you 'materially participate' in the operation of this business during 2009? If 'No,' see instructions for limit on losses ☒ Yes ☐ No

H If you started or acquired this business during 2009, check here

Part I Income

1 Gross receipts or sales. **Caution.** See the instructions and check the box if:

- This income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, or
- You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see instructions for limit on losses

☐

2 Returns and allowances

3 Subtract line 2 from line 1

4 Cost of goods sold (from line 42 on page 2)

5 **Gross profit.** Subtract line 4 from line 3

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

7 **Gross income.** Add lines 5 and 6

1	67,170.
2	
3	67,170.
4	
5	67,170.
6	
7	67,170.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising

8

9 Car and truck expenses (see instructions)

9

10 Commissions and fees

10

11 Contract labor (see instructions)

11

12 Depletion

12

13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)

13

765.

14 Employee benefit programs (other than on line 19)

14

15 Insurance (other than health)

15

175.

16 Interest:

a Mortgage (paid to banks, etc)

16a

b Other

16b

17 Legal & professional services

17

250.

18 Office expense

18

1,874.

19 Pension and profit-sharing plans

19

20 Rent or lease (see instructions):

a Vehicles, machinery, and equipment

20a

b Other business property

20b

21 Repairs and maintenance

21

187.

22 Supplies (not included in Part III)

22

23 Taxes and licenses

23

24 Travel, meals, and entertainment:

a Travel

24a

b Deductible meals and entertainment (see instructions)

24b

25 Utilities

25

26 Wages (less employment credits)

26

27 Other expenses (from line 48 on page 2)

27

235.

28 **Total expenses** before expenses for business use of home. Add lines 8 through 27

28

3,486.

29 Tentative profit or (loss). Subtract line 28 from line 7

29

63,684.

30 Expenses for business use of your home. Attach **Form 8829**

30

1,105.

31 **Net profit or (loss).** Subtract line 30 from line 29.

31

62,579.

- If a profit, enter on both **Form 1040, line 12**, and **Schedule SE, line 2** or on **Form 1040NR, line 13** (if you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

- If a loss, you **must** go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see instructions).

- If you checked 32a, enter the loss on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040NR, line 13** (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

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

32a ☐ All investment is at risk.

32b ☐ Some investment is not at risk.

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

Part III Cost of Goods Sold (see instructions)**33** Method(s) used to value closing inventory: **a** ☐ Cost **b** ☐ Lower of cost or market **c** ☐ Other (attach explanation)**34** Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☐ No
If 'Yes,' attach explanation**35** Inventory at beginning of year. If different from last year's closing inventory, attach explanation **35****36** Purchases less cost of items withdrawn for personal use **36****37** Cost of labor. Do not include any amounts paid to yourself **37****38** Materials and supplies **38****39** Other costs **39****40** Add lines 35 through 39 **40****41** Inventory at end of year **41****42** **Cost of goods sold.** Subtract line 41 from line 40. Enter the result here and on page 1, line 4 **42****Part IV Information on Your Vehicle.** Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.**43** When did you place your vehicle in service for business purposes? (month, day, year) ▶**44** Of the total number of miles you drove your vehicle during 2009, enter the number of miles you used your vehicle for:**a** Business **b** Commuting (see instructions) **c** Other**45** Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No**46** Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No**47 a** Do you have evidence to support your deduction? ☐ Yes ☐ No**b** If 'Yes,' is the evidence written? ☐ Yes ☐ No**Part V Other Expenses.** List below business expenses not included on lines 8-26 or line 30.

PROFESSIONAL BOOKS	235.
.....	
.....	
.....	
.....	
.....	
.....	
.....	
.....	
.....	
.....	
48 Total other expenses. Enter here and on page 1, line 27	48 235.

33	Method(s) used to value closing inventory:	a	<input type="checkbox"/> Cost	b	<input type="checkbox"/> Lower of cost or market	c	<input type="checkbox"/> Other (attach explanation)
----	--	---	-------------------------------	---	--	---	---

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☐ No
If 'Yes,' attach explanation

35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35
----	---	----

36	Purchases less cost of items withdrawn for personal use	36	
----	---	----	--

37	Cost of labor. Do not include any amounts paid to yourself	37	
-----------	--	-----------	--

38	Materials and supplies	38
-----------	-------------------------------------	-----------

39 Other costs	39	
----------------------	----	--

40 Add lines 35 through 39	40	
---	-----------	--

41 Inventory at end of year	41	
--	-----------	--

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4 **42**

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ _____.

44 Of the total number of miles you drove your vehicle during 2009, enter the number of miles you used your vehicle for:

a Business	b Commuting (see instructions)	c Other
-------------------	---------------------------------------	----------------

45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

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

47 a Do you have evidence to support your deduction? ☐ Yes ☐ No

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

Part V **Other Expenses.** List below business expenses not included on lines 8-26 or line 30.

[illegible]

SCHEDULE D**(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Capital Gains and Losses**

► Attach to Form 1040 or Form 1040NR. ► See instructions for Schedule D (Form 1040).
► Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2009Attachment
Sequence No. **12**

Name(s) shown on return

Your social security number

DEBORAH L & PAUL W MARKOWITZ**Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less**

(a) Description of property (Example: 100 shares XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold (Mo, day, yr)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1 10.4790 sh. LEGG MASON PARTNERS APPRECIATION FUND	Various	04/08/09	101.	138.	-37.
22.5910 sh. LEGG MASON PARTNERS SMALL CAP VALUE FU	12/12/08	04/08/09	220.	235.	-15.
25.0000 sh. MACQUARIE GROUP LIMITED NPV	03/23/09	10/10/07	1,934.	385.	1,549.
125.0000 sh. GLIMCHER REALTY TRUST-SBI	01/26/09	01/10/08	1,635.	326.	1,309.
25.0000 sh. SCHOOL SPECIALTY INC	08/28/09	05/28/08	750.	626.	124.
2 Enter your short-term totals, if any, from Schedule D-1, line 2	2	29,157.			-3,490.
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)	3	33,797.			
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824	4				
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	5				
6 Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss Carryover Worksheet in the instructions	6				
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)	7				-560.

Part II Long-Term Capital Gains and Losses – Assets Held More Than One Year

(a) Description of property (Example: 100 shares XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold (Mo, day, yr)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
8 13.0150 sh. LEGG MASON PARTNERS AGGRESSIVE GROWTH	11/26/01	04/08/09	737.	1,127.	-390.
229.1780 sh. LEGG MASON PARTNERS APPRECIATION FUND	Various	04/08/09	2,214.	3,438.	-1,224.
187.8720 sh. LEGG MASON PARTNERS SMALL CAP VALUE F	Various	04/08/09	1,832.	3,237.	-1,405.
157.7440 sh. OPPENHEIMER MAIN STREET GROWTH & INCO	03/18/96	04/08/09	3,300.	4,585.	-1,285.
23.3320 sh. OPPENHEIMER MAIN STREET GROWTH & INCOM	Various	04/14/09	500.	685.	-185.
9 Enter your long-term totals, if any, from Schedule D-1, line 9	9	8,357.			3,627.
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)	10	16,940.			
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824	11				
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	12				
13 Capital gain distributions. See instrs	13				
14 Long-term capital loss carryover. Enter the amount, if any, from line 15 of your Capital Loss Carryover Worksheet in the instructions	14				
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on page 2	15				-862.

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

Schedule D (Form 1040) 2009

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	-1,422.
<p>If line 16 is:</p> <ul style="list-style-type: none"> • A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • Zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then to go line 22. 		
<p>17 Are lines 15 and 16 both gains?</p> <p><input type="checkbox"/> Yes. Go to line 18.</p> <p><input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p>		
18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions	18	
19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions	19	
<p>20 Are lines 18 and 19 both zero or blank?</p> <p><input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below.</p> <p><input type="checkbox"/> No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.</p>		
<p>21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:</p> <ul style="list-style-type: none"> • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) 	21	-1,422.
<p>Note. When figuring which amount is smaller, treat both amounts as positive numbers.</p>		
<p>22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?</p> <p><input checked="" type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 (or in the Instructions for Form 1040NR).</p> <p><input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.</p>		

SCHEDULE D-1
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Continuation Sheet for Schedule D (Form 1040)

▶ See instructions for Schedule D (Form 1040).
▶ Attach to Schedule D to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2009

Attachment
Sequence No. **12A**

Name(s) shown on return

Your social security number

DEBORAH L & PAUL W MARKOWITZ

Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less

(a) Description of property (Example: 100 shares XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold (Mo, day, yr)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1 25.0000 sh. RED ROBIN GOURMET BURGERS INC	08/31/09	06/10/08	573.	377.	196.
27.0000 sh. DEXIA SA BELGIUM NPV	05/13/09	06/25/08	179.	63.	116.
25.0000 sh. BARCLAYS PLC ADR	01/29/09	07/07/08	412.	96.	316.
25.0000 sh. PATTERSON COMPANIES INC	04/08/09	10/20/08	614.	480.	134.
25.0000 sh. IDEXX LABORATORIES CORP	12/10/09	10/21/08	1,017.	1,336.	-319.
25.0000 sh. KOHLS CORP	03/10/09	10/21/08	792.	907.	-115.
25.0000 sh. LUXOTTICA GROUP SPA SPONSORED ADR	12/04/09	10/23/08	476.	644.	-168.
25.0000 sh. HOME PROPERTIES INC	08/12/09	10/27/08	781.	1,093.	-312.
25.0000 sh. BOEING CO	01/12/09	11/13/08	993.	1,148.	-155.
15.0000 sh. STRYKER CORP	03/10/09	11/13/08	669.	494.	175.
10.0000 sh. STRYKER CORP	03/10/09	11/17/08	431.	329.	102.
15.0000 sh. STRYKER CORP	03/27/09	11/17/08	646.	509.	137.
12.0000 sh. AVALONBAY COMMUNITIES INC	02/24/09	11/18/08	613.	525.	88.
13.0000 sh. AVALONBAY COMMUNITIES INC	05/11/09	11/18/08	664.	753.	-89.
25.0000 sh. BOSTON PROPERTIES INC	06/16/09	11/19/08	1,112.	1,290.	-178.
3.0000 sh. BAIDU INC SPONSORED ADR REPSTG	06/16/09	12/02/08	350.	921.	-571.
2.0000 sh. BAIDU INC SPONSORED ADR REPSTG	09/10/09	12/02/08	233.	668.	-435.
4.0000 sh. CURRENCYSHARES EURO TRUST EURO SHS	02/02/09	01/14/09	515.	532.	-17.
25.0000 sh. DEUTSCHE POSTBANK AG	10/01/09	01/20/09	237.	903.	-666.
25.0000 sh. HSBC HOLDINGS PLC SPONSORED ADR	01/23/09	01/20/09	837.	837.	0.
25.0000 sh. HSBC HOLDINGS PLC SPONSORED ADR	04/15/09	01/20/09	763.	889.	-126.
11.0000 sh. CONTINENTAL AIRLINES INC CL B	11/10/08	02/12/09	137.	157.	-20.
50.0000 sh. RITCHIE BROS AUCTIONEERS INC	08/07/09	02/23/09	829.	1,250.	-421.
See Additional Short-Term Sales			15,284.		-1,162.
2 Totals. Add the amounts in column (d). Also, combine the amounts in column (f). Enter here and on Schedule D, line 2. ▶			29,157.		-3,490.

Your social security number

Full social security number

Part II Long-Term Capital Gains and Losses – Assets Held More Than One Year

(a) Description of property <small>(Example: 100 shares XYZ Co)</small>	(b) Date acquired <small>(Mo, day, yr)</small>	(c) Date sold <small>(Mo, day, yr)</small>	(d) Sales price <small>(see instructions)</small>	(e) Cost or other basis <small>(see instructions)</small>	(f) Gain or (loss) Subtract (e) from (d)
8 25.0000 sh. HDFC BK LTD ADR REPSTG 3 SHS	06/18/07	01/16/09	1,495.	2,109.	-614.
3.0000 sh. FIRST SOLAR INC	08/14/07	02/23/09	379.	290.	89.
25.0000 sh. RYANAIR HOLDINGS PLC SPONSORED ADR	05/29/97	05/27/09	722.	77.	645.
15.0000 sh. AKAMI TECHNOLOGIES INC	Various	06/01/09	330.	588.	-258.
5.0000 sh. ZENITH NATIONAL INSURANCE CORP	01/26/04	06/11/09	113.	122.	-9.
25.0000 sh. ZENITH NATIONAL INSURANCE CORP	Various	08/12/09	621.	594.	27.
25.0000 sh. RYANAIR HOLDINGS PLC SPONSORED ADR	05/29/97	09/03/09	667.	77.	590.
20.0000 sh. ZENITH NATIONAL INSURANCE CORP	01/28/04	11/02/09	550.	471.	79.
131.0000 sh. RYANAIR HOLDINGS PLC SPONSORED ADR	05/29/97	11/17/09	3,480.	402.	3,078.
9 Totals. Add the amounts in column (d). Also, combine the amounts in column (f). Enter here and on Schedule D, line 9 . ▶ 9			8,357.		3,627.

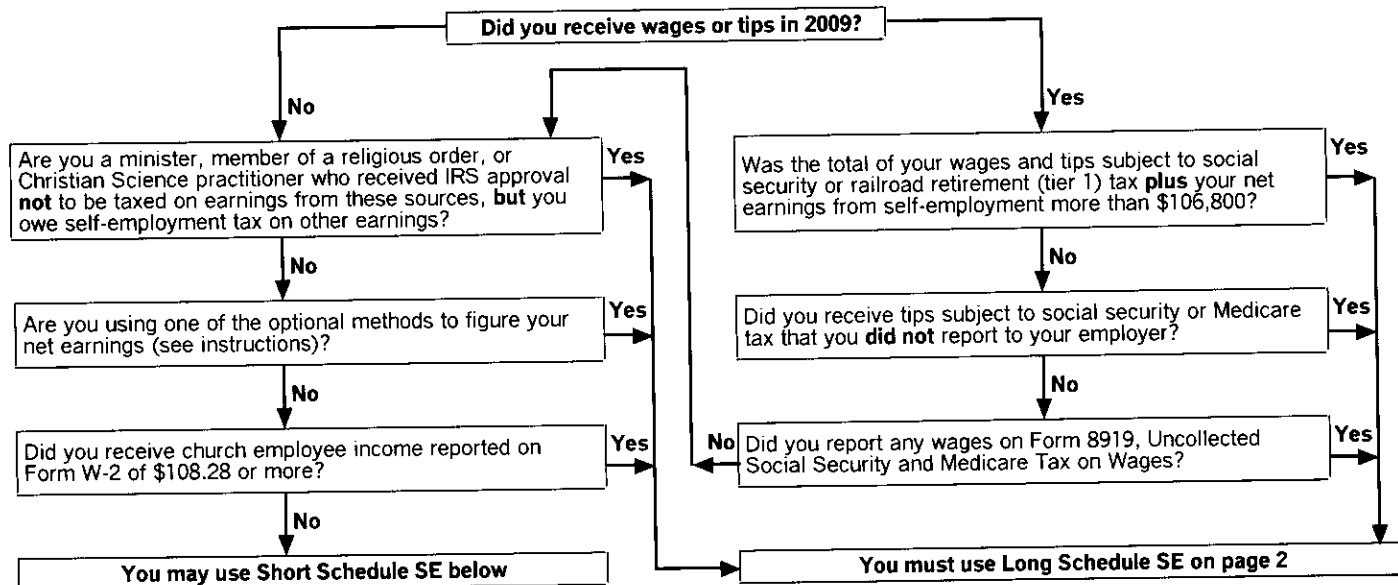
SCHEDULE SE
(Form 1040)Department of the Treasury
Internal Revenue Service**Self-Employment Tax**

OMB No. 1545-0074

2009Attachment
Sequence No. **17**▶ **Attach to Form 1040. ▶ See Instructions for Schedule SE (Form 1040).**Name of person with **self-employment** income (as shown on Form 1040)**PAUL W MARKOWITZ**Social security number of person
with **self-employment** income ▶**Who Must File Schedule SE**

You must file Schedule SE if:

- You had net earnings from self-employment from **other than** church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, **or**
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is **not** church employee income (see instructions).

Note. Even if you had a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either 'optional method' in Part II of Long Schedule SE (see instructions).**Exception.** If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner **and** you filed Form 4361 and received IRS approval not to be taxed on those earnings, **do not** file Schedule SE. Instead, write 'Exempt - Form 4361' on Form 1040, line 56.**May I Use Short Schedule SE or Must I Use Long Schedule SE?****Note.** Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE*, above.**Section A – Short Schedule SE. Caution.** Read above to see if you can use Short Schedule SE.

1a Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 6b, or listed on Schedule K-1 (Form 1065), box 20, code Y	1b	
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instrs for types of income to report on this line. See instrs for other income to report	2	63,798.
3 Combine lns 1a, 1b & 2	3	63,798.
4 Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If less than \$400, do not file this schedule; you do not owe self-employment tax	4	58,917.
5 Self-employment tax. If the amount on line 4 is: <ul style="list-style-type: none">• \$106,800 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 56.• More than \$106,800, multiply line 4 by 2.9% (.029). Then, add \$13,243.20 to the result. Enter the total here and on Form 1040, line 56.	5	9,014.
6 Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 27	6	4,507.

**Education Credits (American Opportunity, Hope, and
Lifetime Learning Credits)**

► See separate instructions to find out if you are eligible to take the credits.
► Attach to Form 1040 or Form 1040A.

OMB No. 1545-0074

2009Attachment
Sequence No. **50**

Name(s) shown on return

Your social security number

DEBORAH L & PAUL W MARKOWITZ

Caution: • You **cannot** take both an education credit and the tuition and fees deduction (see Form 8917) for the **same student** for the same year.

Part I American Opportunity Credit

Use Part II if you are claiming the Hope credit for a student attending school in a Midwestern disaster area. If you use Part II, you cannot use Part I for any student.

Caution: You **cannot** take the American opportunity credit for more than **4 tax years** for the **same student**.

1	(a) Student's name (as shown on page 1 of your tax return)	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Qualified expenses (see instructions). Do not enter more than \$4,000 for each student.	(d) Subtract \$2,000 from the amount in column (c). If zero or less, enter -0-	(e) Multiply the amount in column (d) by 25% (.25)	(f) If column (d) is zero, enter the amount from column (c). Other- wise, add \$2,000 to the amount in column (e).
	First name Last name					
	AVIVA MARKOWITZ		4,000.	2,000.	500.	2,500.
2	Tentative American opportunity credit. Add the amounts on line 1, column (f). Skip Part II if line 2 is more than zero. If you are taking the lifetime learning credit for a different student, go to Part III; otherwise, go to Part IV.					2,500.

Part II Hope Credit

Use this part if you are claiming the Hope credit for a student attending school in a Midwestern disaster area and elect to waive the computation method in Part I for all students.

Caution: You **cannot** take the Hope credit for more than **2 tax years** for the **same student**.

3	(a) Student's name (as shown on page 1 of your tax return)	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Qualified expenses (see instructions). Do not enter more than \$2,400* for each student.	(d) Enter the smaller of the amount in column (c) or \$1,200**	(e) Add column (c) and column (d)	(f) Enter one-half of the amount in column (e)
	First name Last name					
4	Tentative Hope credit. Add the amounts on line 3, column (f). If you are taking the lifetime learning credit for a different student, go to Part III; otherwise, go to Part V.					4

*For each student who attended an eligible educational institution in a Midwestern disaster area, **do not** enter more than \$4,800.
For each student who attended an eligible educational institution in a Midwestern disaster area, enter the **smaller of the amount in column (c) or \$2,400.

Part III Lifetime Learning Credit. Caution: You cannot take the American opportunity credit or the Hope credit and the lifetime learning credit for the same student in the same year.

5	(a) Student's name (as shown on page 1 of your tax return)	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Qualified expenses (see instructions)
	First name Last name		
6	Add the amounts on line 5, column (c), and enter the total		6
7a	Enter the smaller of line 6 or \$10,000		7a
b	For students who attended an eligible educational institution in a Midwestern disaster area, enter the smaller of \$10,000 or their qualified expenses included on line 6 (see special rules in the instructions)		7b
c	Subtract line 7b from line 7a		7c
8a	Multiply line 7b by 40% (.40)		8a
b	Multiply line 7c by 20% (.20)		8b
c	Tentative lifetime learning credit. Add lines 8a and 8b. If you have an entry on line 2, go to Part IV; otherwise go to Part V		8c

Part IV Refundable American Opportunity Credit

9	Enter the amount from line 2	9	2,500.
10	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	10	180,000.
11	Enter the amount from Form 1040, line 38,* or Form 1040A, line 22	11	122,614.
12	Subtract line 11 from line 10. If zero or less, stop ; you cannot take any education credit	12	57,386.
13	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	13	20,000.
14	If line 12 is: <ul style="list-style-type: none"> Equal to or more than line 13, enter 1.000 on line 14 Less than line 13, divide line 12 by line 13. Enter the result as a decimal (rounded to at least three places) 	14	1.000
15	Multiply line 9 by line 14. Caution: If you were under age 24 at the end of the year and meet the conditions in the instructions, you cannot take the refundable American opportunity credit. Skip line 16, enter the amount from line 15 on line 17, and check this box <input type="checkbox"/>	15	2,500.
16	Refundable American opportunity credit. Multiply line 15 by 40% (.40). Enter the amount here and on Form 1040, line 66, or Form 1040A, line 43. Then go to line 17 below	16	1,000.

Part V Nonrefundable Education Credits

17	Subtract line 16 from line 15	17	1,500.
18	Add line 4 and line 8c. If you have no entry on these lines, skip lines 19 through 24, and enter the amount from line 17 on line 25	18	
19	Enter: \$120,000 if married filing jointly; \$60,000 if single, head of household, or qualifying widow(er)	19	
20	Enter the amount from Form 1040, line 38*, or Form 1040A, line 22	20	
21	Subtract line 20 from line 19. If zero or less, skip lines 22 and 23, and enter zero on line 24	21	
22	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	22	
23	If line 21 is: <ul style="list-style-type: none"> Equal to or more than line 22, enter the amount from line 18 on line 24 and go to line 25 Less than line 22, divide line 21 by line 22. Enter the result as a decimal (rounded to at least three places) 	23	
24	Multiply line 18 by line 23	24	
25	Add line 17 and line 24. If zero, stop ; you cannot take any nonrefundable education credit	25	1,500.
26	Enter the amount from Form 1040, line 46, or Form 1040A, line 28	26	13,874.
27	Enter the total, if any, of your credits from: <ul style="list-style-type: none"> Form 1040, lines 47, 48, and the amount from Schedule R entered on line 53 Form 1040A, lines 29 and 30 	27	
28	Subtract line 27 from line 26. If zero or less, stop ; you cannot take any nonrefundable education credit	28	13,874.
29	Nonrefundable education credits. Enter the smaller of line 25 or line 28 here and on Form 1040, line 49, or Form 1040A, line 31	29	1,500.

* If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see Pub 970 for the amount to enter.

Expenses for Business Use of Your Home

OMB No. 1545-0074

2009Attachment
Sequence No. **66**Department of the Treasury
Internal Revenue Service (99)

► **File only with Schedule C (Form 1040).**
Use a separate Form 8829 for each home you used for business during the year.
 ► **See separate instructions.**

Name(s) of proprietor(s)

Your social security number

PAUL W MARKOWITZ**ENVIRONMENTAL CONSULTANT****Part I Part of Your Home Used for Business**

1	Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions)	1	150
2	Total area of home	2	2,300
3	Divide line 1 by line 2. Enter the result as a percentage	3	6.52 %
For daycare facilities not used exclusively for business go to line 4. All others go to line 7.			
4	Multiply days used for daycare during year by hours used per day	4	hr
5	Total hours available for use during the year (365 days x 24 hours) (see instructions)	5	8,760 hr
6	Divide line 4 by line 5. Enter the result as a decimal amount	6	
7	Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3	7	6.52 %

Part II Figure Your Allowable Deduction

8	Enter the amount from Schedule C, line 29, plus any net gain or (loss) derived from the business use of your home and shown on Schedule D or Form 4797. If more than one place of business, see instructions	8	63,684.
See instrs for columns (a) and (b) before completing lines 9-21.			
9	Casualty losses (see instructions)	9	
10	Deductible mortgage interest (see instructions)	10	1,007.
11	Real estate taxes (see instructions)	11	5,230.
12	Add lines 9, 10, and 11	12	6,237.
13	Multiply line 12, column (b) by line 7	13	407.
14	Add line 12, column (a) and line 13	14	407.
15	Subtract line 14 from line 8. If zero or less, enter -0-	15	63,277.
16	Excess mortgage interest (see instructions)	16	
17	Insurance	17	
18	Rent	18	
19	Repairs and maintenance	19	2,250.
20	Utilities	20	4,784.
21	Other expenses (see instrs)	21	480.
22	Add lines 16 through 21	22	7,514.
23	Multiply line 22, column (b) by line 7	23	490.
24	Carryover of operating expenses from 2008 Form 8829, line 42	24	
25	Add line 22 column (a), line 23, and line 24	25	490.
26	Allowable operating expenses. Enter the smaller of line 15 or line 25	26	490.
27	Limit on excess casualty losses and depreciation. Subtract line 26 from line 15	27	62,787.
28	Excess casualty losses (see instructions)	28	
29	Depreciation of your home from line 41 below	29	208.
30	Carryover of excess casualty losses and depreciation from 2008 Form 8829, line 43	30	
31	Add lines 28 through 30	31	208.
32	Allowable excess casualty losses and depreciation. Enter the smaller of line 27 or line 31	32	208.
33	Add lines 14, 26, and 32	33	1,105.
34	Casualty loss portion, if any, from lines 14 and 32. Carry amount to Form 4684 , Section B	34	
35	Allowable expenses for business use of your home. Subtract line 34 from line 33. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions	35	1,105.

Part III Depreciation of Your Home

36	Enter the smaller of your home's adjusted basis or its fair market value (see instructions)	36	138,000.
37	Value of land included on line 36	37	13,200.
38	Basis of building. Subtract line 37 from line 36	38	124,800.
39	Business basis of building. Multiply line 38 by line 7	39	8,137.
40	Depreciation percentage (see instructions)	40	2.5600 %
41	Depreciation allowable (see instructions). Multiply line 39 by line 40. Enter here and on line 29 above	41	208.

Part IV Carryover of Unallowed Expenses to 2010

42	Operating expenses. Subtract line 26 from line 25. If less than zero, enter -0-	42	0.
43	Excess casualty losses and depreciation. Subtract line 32 from line 31. If less than zero, enter -0-	43	0.

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDIA6902 06/25/09

Form **8829** (2009)

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)**2009**Attachment
Sequence No. **67**Department of the Treasury
Internal Revenue Service (99)

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

Name(s) shown on return

Identifying number

DEBORAH L & PAUL W MARKOWITZ

Business or activity to which this form relates

Sch C ENVIRONMENTAL CONSULTANT**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 the instructions for a higher limit for certain businesses	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	765.
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
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	250,000.
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
	LAPTOP COMPUTER	765.	765.
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	765.
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	765.
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	140,773.
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	765.
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	13	0.

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 2009	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 2009 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			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	

Section C — Assets Placed in Service During 2009 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	765.
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	

Form **5695**Department of the Treasury
Internal Revenue Service**Residential Energy Credits**► See instructions.
► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2009Attachment
Sequence No. **158**

Name(s) shown on return

Your social security number

DEBORAH L & PAUL W MARKOWITZ**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.)

1 Were the qualified energy efficiency improvements or residential energy property costs for your main home located in the United States? (see instructions)	1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 your home	2a	
b Exterior windows (including certain storm windows) and skylights	2b	
c Exterior doors (including certain storm doors)	2c	
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	2d	
3 Residential energy property costs (see instructions).		
a Energy-efficient building property	3a	4,490.
b Qualified natural gas, propane, or oil furnace or hot water boiler	3b	
c Advanced main air circulating fan used in a natural gas, propane, or oil furnace	3c	
4 Add lines 2a through 3c	4	4,490.
5 Multiply line 4 by 30% (.30)	5	1,347.
6 Maximum credit amount. (If you jointly occupied the home, see instructions)	6	1,500.
7 Enter the smaller amount of line 5 or line 6	7	1,347.
8 Enter the amount from Form 1040, line 46, or Form 1040NR, line 43	8	13,874.
9 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	9	1,500.
10 Subtract line 9 from line 8. If zero or less, stop . You cannot take the nonbusiness energy property credit	10	12,374.
11 Nonbusiness energy property credit. Enter the smaller of line 7 or line 10	11	1,347.

BAA For Paperwork Reduction Act Notice, see separate instructions.Form **5695** (2009)

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.

Part II Residential Energy Efficient Property Credit (See instructions before completing this part.)**Note.** Skip lines 12 through 21 if you only have a **credit carryforward from 2008.**

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	18	
19	Multiply line 18 by 30% (.30)	19	
20	Kilowatt capacity of property on line 18 above \times \$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.	25	
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	28	

Part 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	1,347.
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Form 5695 (2009)

SCHEDULE M
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

**Making Work Pay and Government
Retiree Credits**

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

► **See separate instructions.**

OMB No. 1545-0074

2009

Attachment
Sequence No. **166**

Name(s) shown on return

Your social security number

DEBORAH L & PAUL W MARKOWITZ

1 a Important: See the instructions if you can be claimed as someone else's dependent or are filing Form 1040NR. Check the 'No' box below and see the instructions if **(a)** you have a net loss from a business, **(b)** you received a taxable scholarship or fellowship grant not reported on a Form W-2, **(c)** your wages include pay for work performed while an inmate in a penal institution, **(d)** you received a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan, or **(e)** you are filing Form 2555 or 2555-EZ.

Do you (and your spouse if filing jointly) have 2009 wages of more than \$6,451 (\$12,903 if married filing jointly)?

- ☒ **Yes.** Skip lines 1a through 3. Enter \$400 (\$800 if married filing jointly) on line 4 and go to line 5.
☐ **No.** Enter your earned income (see instructions) **1 a**

b Nontaxable combat pay included on line 1a (see instructions) **1 b**

2 Multiply line 1a by 6.2% (.062) **2**

3 Enter \$400 (\$800) if married filing jointly **3**

4 Enter the **smaller** of line 2 or line 3 (unless you checked 'Yes' on line 1a) **4** **800.**

5 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22 **5** **122,614.**

6 Enter \$75,000 (\$150,000 if married filing jointly) **6** **150,000.**

7 Is the amount on line 5 more than the amount on line 6?

- ☒ **No.** Skip line 8. Enter the amount from line 4 on line 9 below.
☐ **Yes.** Subtract line 6 from line 5 **7**

8 Multiply line 7 by 2% (.02) **8**

9 Subtract line 8 from line 4. If zero or less, enter -0- **9** **800.**

10 Did you (or your spouse, if filing jointly) receive an economic recovery payment in 2009? You may have received this payment if you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits (see instructions).

- ☒ **No.** Enter -0- on line 10 and go to line 11.
☐ **Yes.** Enter the total of the payments received by you (and your spouse, if filing jointly). Do not enter more than \$250 (\$500 if married filing jointly) **10** **0.**

11 Did you (or your spouse, if filing jointly) receive a pension or annuity in 2009 for services performed as an employee of the U.S. Government or any U.S. state or local government from work **not** covered by social security? Do not include any pension or annuity reported on Form W-2.

- ☒ **No.** Enter -0- on line 11 and go to line 12.
☐ **Yes.** • If you checked 'No' on line 10, enter \$250 (\$500 if married filing jointly and the answer on line 11 is 'Yes' for both spouses)
• If you checked 'Yes' on line 10, enter -0- (exception: enter \$250 if filing jointly and the spouse who received the pension or annuity did not receive an economic recovery payment described on line 10) **11** **0.**

12 Add lines 10 and 11 **12** **0.**

13 Subtract line 12 from line 9. If zero or less, enter -0- **13** **800.**

14 **Making work pay and government retiree credits.** Add lines 11 and 13. Enter the result here and on Form 1040, line 63, Form 1040A, line 40; or Form 1040NR, line 60 **14** **800.**

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

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

Schedule **M** (Form 1040A or 1040) 2009

Schedule D-1

Additional Short-Term Sales

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain (loss) Subtract (e) from (d)
25.0000 sh. MEDCO HEALTH SOLUTIONS	01/06/09	03/12/09	932.	1,126.	-194.
9.0000 sh. HSBC HOLDINGS PLC SPONSORED ADR	06/04/09	04/08/09	233.	414.	-181.
39.0000 sh. CONTINENTAL AIRLINES INC CL B	11/10/08	04/13/09	509.	557.	-48.
25.0000 sh. RED ROBIN GOURMET BURGERS INC	08/31/09	05/08/09	538.	524.	14.
25.0000 sh. PF CHANGS CHINA BISTRO INC	12/17/09	05/28/09	735.	945.	-210.
40.0000 sh. DARDEN RESTAURANTS INC	10/05/09	06/01/09	1,470.	1,375.	95.
10.0000 sh. BERKLEY W R CORPORATION	01/28/09	06/11/09	227.	286.	-59.
25.0000 sh. SIMON PROPERTY GROUP INC	04/16/09	07/06/09	1,188.	1,505.	-317.
22.0000 sh. QUADRA MINING LTD	04/16/09	07/07/09	156.	114.	42.
53.0000 sh. QUADRA MINING LTD	04/16/09	08/17/09	528.	274.	254.
25.0000 sh. BERKLEY W R CORPORATION	01/28/09	09/02/09	623.	715.	-92.
25.0000 sh. MOODYS CORP	12/30/09	10/19/09	599.	699.	-100.
25.0000 sh. ICICI BANK LTD SPONSORED ADR	06/22/09	10/23/09	952.	749.	203.
65.0000 sh. BERKLEY W R CORPORATION	01/28/09	11/17/09	1,577.	1,858.	-281.
25.0000 sh. HUMAN GENOME SCIENCES INC	11/03/09	11/23/09	680.	701.	-21.
25.0000 sh. HUMAN GENOME SCIENCES INC	11/03/09	11/30/09	681.	701.	-20.
75.0000 sh. TAKE-TWO INTERACTIVE SOFTWARE INC	11/18/09	12/08/09	591.	903.	-312.
10.0000 sh. RTS HSBC HOLDINGS PLC CONTRA	Various	01/20/09	74.	9.	65.
MYRIAD GENETICS INC	OPEN	08/18/09	604.	0.	0.
ROSETTA STONE	OPEN	08/21/09	510.	0.	0.
IRON MOUNTAIN INC	OPEN	10/20/09	652.	0.	0.
EBIX INC	OPEN	12/10/09	1,225.	0.	0.

Total

15,284.-1,162.