E 1040	1	J.S. Individual Income Tax Return	2009	(99) IRS Use	Only - Do no	t write or st	aple in this space.	
Label	For the	e year Jan. 1-Dec. 31, 2009, or other tax year beginning	, 2009,	ending	, 20		OMB No. 1545-00	74
	Y01	r first name and initial	Last name			You	r social security num	ber
instructions A	T:	MOTHY M.	KAINE					
on page 14.) B	If a	joint return, spouse's first name and initial	Last name			Spo	ouse's social security	number
Use the IRS	Al	INE B.	HOLTON					
label. H	Hoi	ne address (number and street). If you have a P.O.	box, see page 14.		Apt. no	E.	You must enter	OS:
Otherwise, E							your SSN(s) abo	ove.
please print R or type. E	City	town or post office, state, and ZIP code. If you have a foreign	gn address, see page 14.			Che	scking a box below w	ill not
Presidential	R	CHMOND, VA 23227-4405	•			cha	nge your tax or refun	đ.
Election Campa	ign 🕨	Check here if you, or your spouse if filin	g jointly, want \$3 to go	to this fund (see pa	ge 14) 🕨	<u> </u>	You S	pouse
Filing Status	1	Single	4	Head of househ	old (with q	ualifying p	erson). If the qua	lifying
riling Status	2	f X Married filing jointly (even if only one had inc	ome)	person is a child	l but not y	our depen	dent, enter this ch	ild's
Check only	3	Married filing separately. Enter spouse's SSA	above	name here. 🕨				
one box.		and full name here.	5	Qualifying widow	v(er) with	dependen	t child (see page 1	6)
Everntions	6a	X Yourself. If someone can claim you as a dep	endent, do not check box	6a			Boxes checked on 6a and 6b	2
Exemptions	b	X Spouse					No. of children	
		Dependents:	(2) Dependent's social	(3) Dependent's relationship to	14	4) √ if qualify- ing child for hild tax credit	on 6c who: lived with you	_3_
	_	(1) First name Last name	security number	you		(see page 17)	 did not live with you due to divorce 	n e
	1	NATHANIEL KAINE		SON			or separation (see page 18)	
If more than four	_	JINWOOD KAINE		SON				
dependents, see page 17 and		ANNELLA KAINE		DAUGHTER		X	Dependents on 60 not entered above	
check here							Add numbers	
		Total number of exemptions claimed					on lines above	5
Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2					174,1	
Attach Form(s)	8a					8a	5	86.
W-2 here. Also	b	Tax-exempt interest. Do not include on line 8a	*******************************	8b			3 (140 July 1997)	
attach Forms	9a	Ordinary dividends, Attach Schedule B if required				9a	1,0	78.
W-2G and 1099-R if tax	b	Qualified dividends (see page 22)		9b 1	,078.			
was withheld.	10	Taxable refunds, credits, or offsets of state and lo	cal income taxes	***************************************		10	1	64.
	11	Alimony received	***************************************			11		
If you did not	12	Business income or (loss). Attach Schedule C or				12		
get a W-2,	13	Capital gain or (loss). Attach Schedule D if require				13		27.
see page 22.	14	Other gains or (losses). Attach Form 4797				14		
	15a	IRA distributions 15a		b Taxable amount		15b		-
Enclose, but do not attach, any	16a	Pensions and annuities 16a		b Taxable amount		16b	5862 1050	
payment. Also,	17	Rental real estate, royalties, partnerships, S corpo	rations, trusts, etc. Attact	h Schedule E		17		0.
please use Form 1040-V.	18	Farm income or (loss). Attach Schedule F. Unemployment compensation in excess of \$2,400 per reci (see page 27)	nient			18		
FUIII 1040-8.	19	,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		19		
	20a	Social security benefits 20a		Taxable amount (see	page 27)	20b		
	21	Other income. List type and amount (see page 29				4		
						21	175 0	\C E
	22	Add the amounts in the far right column for lines				22	175,9	33.
Antionenal	23	Educator expenses (see page 29) Certain business expenses of reservists, performing artists officials. Attach Form 2106 or 2106-EZ	, and fee-basis government	23		-		
Adjusted Gross	24			24		-		
income	25 26	Health savings account deduction. Attach Form 8		25		-		
	26 27	Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule		27				
	28	Self-employed SEP, SIMPLE, and qualified plans		28				
	29	Self-employed bealth insurance deduction (see pa		29		1		
	30	Penalty on early withdrawal of savings		30				
	31a	Alimony paid b Recipient's SSN ▶		31a				
	32	IRA deduction (see page 31)		32		1		
	33	Student loan interest deduction (see page 34)		33				
	34	Tuition and fees deduction. Attach Form 8917		34		1		
	35	Domestic production activities deduction. Attach I				1		
	36	Add lines 23 through 31a and 32 through 35				36		
910001 10-20-09	37	Subtract line 36 from line 22. This is your adjuste				37	175,9	55.

Form 1040 (20		IMOTHY M. KAINE & AN	NE B. HO	LTON				Dans 2
Tax and	38	Amount from line 37 (adjusted gross income	e)				38	Page 2 175,955.
Credits	_ 39a	Check You were born before Jan	nuary 2, 1945,	Blind.	Total box		- 00	1101000
Standard		if: Spouse was born before						
Deduction for People who	[0	If your spouse itemizes on a separate return or you w	vere a dual-status alie	en, see page 35	and chack here	39h		
check any	40a	Itemized deductions (from Schedule A) or v	our standard ded	uction /see le	ft margin)		40-	22 212
box on line 39a, 39b, or	b	Itemized deductions (from Schedule A) or y if you are increasing your standard deduction by cert disaster loss, attach Schedule L and check here (see Subtract line 40 from time 20).	tain real estate taxes,	new motor vehi	de taxes, or a net	40h	40a	32,312.
40b 0f who can be	41	Subtract line 40a from line 38	, , , , , , , , , , , , , , , , , , , ,	***************************************		400		140 (40
claimed as a	42	Exemptions. If line 38 is \$125,100 or less an	d you did not pro	vide housing:	o o Midwaataa		41	<u>143,643.</u>
dependent]	multiply \$3,650 by the number on line 6d. Ot	harwica cae nace	vio s ilousilly	to a ivilowesteri	i dispiaced individual		10.000
	43	Taxable income. Subtract line 42 from line 4	Incittisc, see page	ra šhan li 4:			42	18,250.
All others:	44	Tax. Check if any tax is from: a Form/s	1 2014 b 7 5	4070	i, enter -o-		43	125,393.
Single or	45	Tax. Check if any tax is from: a Form(s	/ 00 14 B F0	ım 49/2			. 44	23,613.
Married filing	46	Atternative minimum tax. Attach Form 6251					45	
separately, \$5,700	1	Add lines 44 and 45				Þ	46	23,613.
Married filing	40	Foreign tax credit. Attach Form 1116 if require	ed		. 47			
jointly or Qualifying	48	Credit for child and dependent care expenses						
widow(er)	49	Education credits from Form 8863, line 29		***************************************	49			
\$11,400	50	Retirement savings contributions credit. Attac	ch Form 8880 📖	**************	50			
Head of household,	51	Child tax credit (see page 42)			84			
\$8,350	52	Credits from Form: a 8396 b 8	3839 CL_ 56	95	52			
	53	Other credits from Form: a 3800 b	8801 c		53			
	54	Add lines 47 through 53. These are your total	credits	2-21-21 - ET 20-41		44. 80. VII. VIII. T. VIII. VIIII. VIII. VIIII. VIII. VIII. VIII. VIII. VIII. VIIII. VIII. VIII. VIIII. VIIII. VIII. VIII. VIII. VIII. VIII. VIII. VIII. VIIII. VIII. VIII. VI		
	55	Subtract line 54 from line 46. If line 54 is mon	e than line 46, ent	er -N-			54	22 (12
Other	56	Self-employment tax. Attach Schedule SE	0 (1141) 1110 40, OHE	61 0			55	23,613.
Taxes	57	Unreported social security and Medicare tax for	rom Form: a	4127 b	7 0010		56	
	58	Additional tax on IRAs, other qualified retireme	ant plane ata Atte) 7 0 /	0ala		57	
	59	Additional taxes: a AEIC payments b	Llevesheld	ich Form 532	au tednited	***************************************	58	·
	60	Add lines 55 through 50. This is your total to	Housenoid e	impioyment ta	ixes. Attach Sch	redule H	59	
Payments	2 61	Add lines 55 through 59. This is your total tax		***************************************			60	23,613.
rayment		Federal income tax withheld from Forms W-2	and 1099		61	29,509	•	
	62	2009 estimated tax payments and amount app	olied from 2008 re	turn	62			
If you have	63	Making work pay and government retiree cred	its. Attach Schedu	ile M	63	281	•	
a qualifying	64 a	arned income credit (EIC)			64a	-		
child, attach Schedule EIC.	b	Vontaxable combat pay election	64b					
Schedule Elg.	65	Additional child tax credit. Attach Form 8812		3000	65			
	66	Refundable education credit from Form 8863, I	line 16		66			
	67 I	irst-time homebuyer credit. Attach Form 5405			67			
	68 /	amount paid with request for extension to file	(see page 72)	2770	68			
	69	xcess social security and tier 1 RRTA tax with	held (see page 72	1	69			
	70 (redits from Form: a 2439 b 4136	c 8801 d	8885	70		-	
		dd lines 61, 62, 63, 64a, and 65 through 70.					-	20 700
Refund	72	line 71 is more than line 60, subtract line 60	from line 71. This	ic the amount		THE PROPERTY OF THE PARTY OF TH	71	29,790.
Direct deposit?	73a A	mount of line 72 you want refunded to you.	f Form 9999 in att	is the amount	you uverpaid		72	6,177.
See page 73 and fill in 73b.		orting Che C Type: Che	or or or occors att	Account number	ilere		73a	6,177.
73c, and 73d, or Form 8888.		mount of line 72 you want applied to your 20	Savings	a number [1 =4 1	<u> </u>		
Amount					74			
You Owe	76 E	mount you owe. Subtract line 71 from line 60			page 74		75	
Third Part		stimated tax penalty (see page 74)			. 76			
Designee	Design	you want to allow another person to discuss the MALCOLM P. FRIDDE	LT	Phone	804_6	Yes. Complete the f	Personal iden	No tification
Sign	Under p	enalties of perjury, I declare that I have examined this r plete. Declaration of preparer (other than taxpayer) is to presignature	return and accompan	ying schedules :	ind statements, ar	nd to the best of my know	viedge and beli	ef, they are true, correct,
Here	Yo	ir signature	Date	Your occupation	parer nasany knov on	viedge.	l Davtime p	hone number
Joint return? See page 15.	_			ATTORN	EY		1	
Keep a copy for your	Sp	ouse's signature. If a joint return, DOIN must sign.	Date	Spouse's occu				
records.				ATTORN	EV			
Paid	Preparer	s		1 0100	Date	Chacliff	0	U DTM
Preparer's						Check if self- employed	Preparer's SSI	A OF PIIN
Use Only	Firm's na	me (or TROUTMAN SANDI	ERS T.T.D		·	EIN		*
	yours if s		OINT					
910002	ployed),	duress.	2210			Phone	™8U4-6	97-1200

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99

Itemized Deductions

Attach to Form 1040.

► See Instructions for Schedule A (Form 1040).

2009
Attachment
Sequence No. 07

Name(s) shown on Form 1040 TIMOTHY M. KAINE & ANNE B. HOLTON Caution. Do not include expenses reimbursed or paid by others. Medical and Medical and dental expenses (See page A-1.) 1 **Dental** 2 Enter amount from Form 1040, line 38 **Expenses** Multiply line 2 by 7.5% (.075) 3 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-Taxes You State and local (check only one box): Paid a X Income taxes, or 5 9,319. General sales taxes (See page A-2.) Real estate taxes (See page A-5.) 637. 6 New motor vehicle taxes from line 11 of the worksheet on page 2. Skip this line if you checked box 5b Other taxes. List type and amount PERSONAL PROPERTY TAX 94 8 Add lines 5 through 8 9 10,050. Interest Home mortgage interest and points reported to you on Form 1098 STMT 2 10 824. You Paid Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-7 and show that person's name, (See identifying no., and address page A-6.) Note. Personal 12 Points not reported to you on Form 1098 12 interest is Qualified mortgage insurance premiums (See page A-7.) 13 deductible. Investment interest. Attach Form 4952 if required. (See page A-8.) 14 Add lines 10 through 14 15 824. Gifts to Gifts by cash or check 16 21,530 Charity Other than by cash or check. If any gift of \$250 or more, see page A-8. If you made a You must attach Form 8283 if over \$500 17 gift and got a 18 Carryover from prior year benefit for it, 18 see page A-8 19 Add lines 16 through 18 19 21,530. Casualty and Theft Losses Casualty or theft loss(es). Attach Form 4684. (See page A-10.) 20 Job Expenses Unreimbursed employee expenses · job travel, union dues, job education, etc. and Certain Attach Form 2106 or 2106-EZ if required. (See page A-10.) Miscellaneous **Deductions** 21 Tax preparation fees 2,304 22 23 Other expenses · investment, safe deposit box, etc. List type and amount (See page A-10.) 23 Add lines 21 through 23 2,304. 25 Enter amount from Form 1040, line 38 25 175, 955. Multiply line 25 by 2% (.02) 3,519. Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-0. Other Other - from list on page A-11. List type and amount Miscellaneous **Deductions** 28 Total Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)? Itemized No. Your deduction is not limited. Add the amounts in the far right column **Deductions** for lines 4 through 28. Also, enter this amount on Form 1040, line 40a. 32,312. 29 Yes. Your deduction may be limited. See page A-11 for the amount to enter. If you elect to itemize deductions even though they are less than your standard deduction, check here

SCHEDULE B

Name(s) shown on return

(Form 1040A or 1040)
Department of the Tressury
Internal Revenue Service

(99)

Attach to Form 1040A or 1040.

► See instructions.

Interest and Ordinary Dividends

2009 Attachment Sequence No. 08

Your social security number

TIMOTHY M. KAINE & ANNE B. HOLTON Part I List name of payer. If any interest is from a seller-financed mortgage and the buyer used the Amount Interest property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address DEUTSCHE BANK ALEX BROWN 54. SUNTRUST 229. SUNTRUST 296 WACHOVIA BANK Note. If you received a Form 1099-INT, Form 1099-OID. or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form. Add the amounts on line 1 586. 2 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a 4 586. Note. If line 4 is over \$1,500, you must complete Part III. Amount Part II 5 List name of payer Ordinary AMERICAN CENTURY INVESTMENTS 35. Dividends GENERAL ELECTRIC 1,043. Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's 5 name as the payer and enter the ordinary dividends shown on that form. 6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a 1,078. Note. If line 6 is over \$1,500, you must complete Part III Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign Foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. Yes No Accounts At any time during 2009, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing and requirements for Form TD F 90-22.1 X **Trusts** b If "Yes," enter the name of the foreign country During 2009, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See page B-2 X

SCHEDULE D (Form 1040)

(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.

2009 Attachment Sequence No. 12

Name(s) shown on return

cur against against a superbase

(a) Description of property	(4-1-		ar or Less	1000	
(Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(C) Date sold (Mo., day, yr.)	(d) Sales price	(6) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
0.100 SH TELEFONAKTIEBOLAGET LM ER	VARIOUS	06/10/09	1.	0.	1
Enter your short-term totals, if any, from Sched Total short-term sales price amounts.	ule D-1, line 2	2			
Add lines 1 and 2 in column (d)		3	1.		
Short-term gain from Form 6252 and short-term	gain or (loss)		- 12P)		
from Forms 4684, 6781, and 8824		***************************************		4	
Net short-term gain or (loss) from partnerships, from Schodule(s) K.1.					
from Schedule(s) K-1 Short-term capital loss carryover. Enter the amo	ount if any from	line 10 of your Canita		5	
Carryover Worksheet in the instructions				6	(
Net short-term capital gain or (loss). Combine	e lines 1 through	6 in column (f)		7	1
Part II Long-Term Capital Gains and Lo		ts Held More Th	an One Year		- 344
(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 or (loss) Subtract (e) from (d)
0.486 SH AMERICAN CENTURY					
TNITECOMENTO	L	0= (0= (0=			
O 393 SH AMEDICAN CENTURY	VARIOUS	05/01/09	13.	0.	13.
0.393 SH AMERICAN CENTURY					
	VARIOUS VARIOUS	05/01/09	13.	0.	13.
0.393 SH AMERICAN CENTURY INVESTMENTS	VARIOUS	11/06/09			
0.393 SH AMERICAN CENTURY INVESTMENTS Enter your long-term totals, if any, from Schedule	VARIOUS	11/06/09			
0.393 SH AMERICAN CENTURY INVESTMENTS Enter your long-term totals, if any, from Schedule Total long-term sales price amounts. Add lines 8 and 9 in column (d)	VARIOUS D-1, line 9	11/06/09			
9 Enter your long-term totals, if any, from Schedule 1 Total long-term sales price amounts. Add lines 8 and 9 in column (d)	VARIOUS D-1, line 9	11/06/09 9 10 6252; and	26.	0.	
O.393 SH AMERICAN CENTURY INVESTMENTS Enter your long-term totals, if any, from Schedule Total long-term sales price amounts. Add lines 8 and 9 in column (d) Gain from Form 4797, Part I; long-term gain from long-term gain or (loss) from Forms 4684, 6781, a	VARIOUS D-1, line 9 Forms 2439 and and 8824	11/06/09 9 10 6252; and	26.	0.	
9 Enter your long-term totals, if any, from Schedule 10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)	VARIOUS D-1, line 9 Forms 2439 and and 8824 corporations, est	11/06/09 9 10 6252; and	26.	0.	
9 Enter your long-term totals, if any, from Schedule 10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)	VARIOUS D-1, line 9 Forms 2439 and and 8824 corporations, est	11/06/09 9 10 6252; and	26.	11	
9 Enter your long-term totals, if any, from Schedule 10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)	VARIOUS D-1, line 9 Forms 2439 and and 8824 corporations, est	11/06/09 9 10 6252; and ates, and trusts	26.	11	
Penter your long-term totals, if any, from Schedule Total long-term sales price amounts. Add lines 8 and 9 in column (d) Gain from Form 4797, Part I; long-term gain from long-term gain or (loss) from Forms 4684, 6781, at Net long-term gain or (loss) from partnerships, Schedule(s) K-1 Capital gain distributions Long-term capital loss carryover. Enter the amount Carryover Worksheet in the instructions	VARIOUS D-1, line 9 Forms 2439 and and 8824 corporations, est	11/06/09 9 10 6252; and ates, and trusts	26. Loss	0. 11 12 13	
O . 393 SH AMERICAN CENTURY INVESTMENTS Penter your long-term totals, if any, from Schedule Total long-term sales price amounts. Add lines 8 and 9 in column (d) Gain from Form 4797, Part I; long-term gain from long-term gain or (loss) from Forms 4684, 6781, at Net long-term gain or (loss) from partnerships, Schedule(s) K-1 Capital gain distributions	VARIOUS D-1, line 9 Forms 2439 and and 8824 corporations, est	11/06/09 9 10 6252; and ates, and trusts	26. Loss	0. 11 12 13	

P	edute D (Form 1040) 2009 TIMOTHY M. KAINE & ANNE B. HOLTON		age 2
16	Combine lines 7 and 15 and enter the result	16	27
	If line 16 is:		
	 A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. 		13:
	 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 go to line 22.		
17	Are lines 15 and 16 both gains?		
	X Yes. Go to line 18.		
	No. Skip lines 18 through 21, and go to line 22.		
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the		
	instructions	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions	1 9	
20	Are lines 18 and 19 both zero or blank?		
	X Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the		
	Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the Instructions for Form		
	1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below.		
	No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the		
	Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:		
	• The loss on line 16 or	21 (
	• (\$3,000), or if married filing separately, (\$1,500)		
	Note When finising which arrows to a set		
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		*

Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the Instructions

for Form 1040 (or in the Instructions for Form 1040NR).

No. Complete the rest of Form 1040 or Form 1040NR.

Schedule D (Form 1040) 2009

SCHEDULE E

(Form 1040)

Department of the Treasury Internal Revenue Service (

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

Name(s) shown on return

Your social security number

	IMOTHY M. KAINE & ANNE	В.	HOLTON		<u></u>					
ŝ	Part I Income or Loss From Rer	ital Ke	eal Estate and Roya	lties N	lote. If you ar	e in the business o	of renting persona	proper	У, use	
-	Schedule C or C-EZ (see page E-3). If List the type and address of each rental real es	you are a	n individual, report farm renti	at income						
-	RESIDENTIAL PROPERTY	are brob	orty.		2 For eac	h rental real estate	property listed		Yes	No
•	The state of the s	RTC	HMOND, VA - 8	25 2	during	1, did you or your the tax year for pe	tamily use it		ı	
ī	3	1(1)	IIIIOND, VA - C	33.2	for mor	e than the greater	of:	Α		Х
					■ 14 c	lays or				
(of the total days	rented at fair	В		
_					(See pa	al value? de E-3)				
lı	ncome:	_		Proper		3	<u> </u>	C C		
	¥		Α	В	T	С	(Add col		8. and	C.)
3	***************************************	3	12,325.				3		2,3	
-	Royalties received	4					4			-
	xpenses:									
	# ************************************	5								
-	Auto and travel (see page E-4)	6								
8	and maintained	7	1,559.							
g			378.							
10		9	759.							
11		10								
	Mortgage interest paid to banks, etc.	-"-				<u> </u>	_ 1			
	(see page E-5)	12	4,745.							
13	Other interest	13	4,743.				12	4	,74	5.
14		14	5,224.				_ *			
15		15	3/224.							
16		16	3,671.							
17		17	1,581.							
18	Other (list)	· ·	2,001							
	le:	1								
							-			
		18				<u> </u>				
		[
_										
19	Add lines 5 through 18	19	17,917.				19	17	,91	7.
20	Depreciation expense or depletion (see page E-5)	20	3,458.				20	3	,45	8.
21	Total expenses. Add lines 19 and 20	21	21,375.							
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 page E-5 to		<0.0E0				ě			
	find out if you must file Form 6198	22	<9,050.>			·	_			
	Deductible rental real estate loss. Caution.	1								
	Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you									
	must file Form 8582. Real estate professionals									
	must complete line 43 on page 2	23	0 .)(
	Income. Add positive amounts shown on line 22.				<u> </u>		24			n
25	Losses. Add royalty losses from line 22 and rental	real estate	e losses from line 23. Enter to	otal losses	here	******************	25 (0.0
26	Fotal rental real estate and royalty income or (los	s). Comb	ine lines 24 and 25. Enter the	e result he	re.					J 6)
	f Parts II, III, IV, and line 40 on page 2 do not apply	to you, a	ilso enter this amount on For	m 1040.						
_	ine 17, or Form 1040NR, line 18. Otherwise, include	this ame	ount in the total on line 41 on	page 2			26		(ο.

Statement of Rental and Royalty Income

Name(s) as shown on return TIMOTHY M. KAINE & ANNE B.	HOT TION			You	r social security number
Kind RESIDENTIAL PROPERTY		ND, VA -			
Rental and Royalty Income		GROSS	PERSONAL/DUAL OWNERSHIP EXCLUSION	VACATION HOME LOSS LIMITATION	NET TO SCH E
3. Rents received	3	12,325.			12,325.
4. Royalties received	4				
Rental and Royalty Expenses		-			
5. Advertising	5			i	
6. Auto and travel					
7. Cleaning and maintenance		1,559.			1,559
8. Commissions		378.			378.
9. Insurance		1,253.	494.		759.
10. Legal and other professional fees	10			-	
11. Management fees	11				
12. Mortgage interest paid to banks, etc.		5,569.	824.		4,745.
13. Other interest	13				
14. Repairs		5,224.			5,224.
15. Supplies					
16. Taxes	16	4,308.	637.		3,671.
17. Utilities		1,581.			1,581.
	18				
19. Add lines 5 through 18 20. Depreciation expense or depletion 21. Total expenses. Add lines 19 and 20 22. Income or (loss) from rental or royalty properties. Subtract line 21 from line 3 (rosts) or line 4 (royaltics)	20	19,872. 4,058. 23,930.	1,955. 600. 2,555.		17,917. 3,458. 21,375.
Subtract line 21 from line 3 (rents) or line 4 (royalties)	22	<u></u>			<9,050.

Passive Activity Loss Limitations

Department of the Treasury See separate instructions. Internal Revenue Service (99) Attach to Form 1040 or Form 1041. OMB No. 1545-1008

Name(s) shown on return

Identifying number

T	IMOTHY M. KAINE & ANNE B. HOLTON				
	Part I 2009 Passive Activity Loss Caution: Complete Worksheets 1, 2,	and 3 o	n page 2 before como	letina	Part I
R	ental Real Estate Activities With Active Participation (For the definition of active participation)	ticinati	on see	Cong	rati.
S	pecial Allowance for Rental Real Estate Activities on page 3 of the instructions.)				
	a Activities with net income (enter the amount from Worksheet 1,				
	column (a))	1a			
	b Activities with net loss (enter the amount from Worksheet 1,				
	andreas (IV)	1ь	<9,050.	. >	
	c Prior years unallowed losses (enter the amount from Worksheet				
	1, column (c))	1c	<16,425.		
_	d Combine lines 1a, 1b, and 1c			1d	<25,475.
C	ommercial Revitalization Deductions From Rental Real Estate Activities				
2	Commercial revitalization deductions from Worksheet 2, column (a)	2a			
	b Prior year unallowed commercial revitalization deductions from				
		2b			
_	Add lines 2a and 2b			2c	
All	Other Passive Activities				
3	a Activities with net income (enter the amount from Worksheet 3,				
		3a 📗			
	b Activities with net loss (enter the amount from Worksheet 3,				
		3ь	 		
	Prior years unallowed losses (enter the amount from Worksheet 3,				
		3c			
4	Combine lines 3a, 3b, and 3c			3d	1000019001000000
•	Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed leader external or line 1c. Other 2c. P.	ed, inclu	iding any prior year	İ	
	unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report	the los	ses on the forms and		
	schedules normally used			4	<25,475.
	Time 4 is a loss and. • Line 10 is a loss, go to Part II.				
	• Line 2c is a loss (and line 1d is zero or more), skip Part II a	and go	to Part III.		
C	Line 3d is a loss (and lines 1d and 2c are zero or more), saution: If your filing status is married filing separately and you have during the decided and the second status in the second status	rip Part	is II and III and go to Iir	ne 15.	,
Pa	aution: If your filing status is married filing separately and you lived with your spouse at art II or Part III. Instead, go to line 15.	any tim	e dufing the year,do no	ot cor	nplete
	ert II Special Allowance for Rental Real Estate Activities With A	otivo	Dortigination		
نينسا	Note: Enter all numbers in Part II as positive amounts. See page 8 of the instru	ictions	for an example		
5	Enter the smaller of the loss on line 1d or the loss on line 4	1000113	TOT BIT EXBITIPIE.	-	25 475
6		6	150,000.	5	25,475.
7		7	175,955.	9200000000	STATEMENT 7
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and		2,3,7535		- Telt Pripil t
	9, enter -0- on line 10. Otherwise, go to line 8.				
8	Subtract line 7 from line 6	3			
9	Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separate	ly, see	the instructions	9	
10	Enter the smaller of line 5 or line 9	81. E. E.	200	10	0.
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.			126-107-51	
	新聞 Special Allowance for Commercial Revitalization Deduction	ns Fr	om Rental Real E	stat	e Activities
	Note: Enter all numbers in Part III as positive amounts. See the example for Pa	rt II on	page 8 of the instruction	ons.	
11	the result of the amount, it way, on the returned ming separately, s	ee inst	ructions	11	
12	Enter the loss from line 4			12	
13	Reduce line 12 by the amount on line 10		201001001001001001001001001001	13	
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13			14	
, X	Total Losses Allowed	_			
15	Add the income, if any, on lines 1a and 3a and enter the total			15	
16	Total losses allowed from all passive activities for 2009. Add lines 10, 14, and 15	See th	e instructions		
	to find out how to report the losses on your tax return SEF	ST	ATEMENT 6	16	0.

			See inst			Г					
Name of activity			ent yea	r		Prior	years		Overa	ll ga	in or loss
	(6	a) Net income (line 1a)) Net lo (line 1b		(c) Una loss (li		(d) Gain			(e) Loss
 											
								ļ			
											
	S	EE ATTAC	HED	STA	TEM	ENT F	OR WO	RKS	HEET	1	
Total. Enter on Form 8582, lines 1a, 1b, and 1c	•			<9.0		> <16					
Worksheet 2 - For Form 8582, Line	es 2a a	nd 2b (See ins	truction	ns.)				-			
Name of activity		(a) Current deductions (i	_	U	inallov	(b) Prior wed deduc	year tions (lir	ne 2b)	(0	c) O	verall loss
				1							
otal. Enter on Form 8582, lines 2a and 2b	•										
Worksheet 3 - For Form 8582, Line		b, and 3c (Se	ee instr	uctions.	.)						
Name of activity		11	nt year			Prior years			Overall gain or lo		
	(a	(a) Net income (b) Net loss (line 3a) (line 3b)			(c) Unal loss (lir		(0	(d) Gain		(e) Loss	
		<u> </u>	<u> </u>			 -				\dashv	
	_ _										
										_	
otal. Enter on Form 8582, lines 3a, b, and 3c	•					-	ñ				
Norksheet 4 - Use this worksheet	if an ar	nount is sho	o nwo	n For	m 85	82. line	10 or 14	4 (See i	nstruction	e)	
Name of activity	For and to b	m or schedule d line number re reported on e instructions)) Loss		(b) Ra		(c)	(c) Special allowance		(d) Subtract column (c) from column (a
										-	
										+	<u> </u>
otal		•									
otal /orksheet 5 - Allocation of Unallov	wed Lo	SSES (See inst	ructions	e)							
Name of activity		Form or sche and line num to be reporte	dule iber	J.,	(a) Lo	ess	a) Ratio		(c) I	Jnallowed loss
<u> </u>		(see instructi									
		THE ROWS	777	-							
		SEE ATTAC	HED	STA	TEM	ENT F	OR WO	ORKS:	HEET	5	
otal		*************************			25	,475.	1.00	0000	0000		25,475
9762 12-01-09						,		000	- 0 0 0		Form 8582 (200

Name of activity and lin to be re (see institution of see institution of activity) SEE AT Total Worksheet 7 - Activities With Losses Reported or Name of activity: (a) Form or schedule and line number to be reported on (see instructions):	r schedule le number eported on structions)	(a) L	oss	(b) Unatlowed loss	(c) Allowed loss
Total Worksheet 7 - Activities With Losses Reported or Name of activity: (a) Form or schedule and line number to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule b Net income from form or	ГТАСНЕТ				
Total Worksheet 7 - Activities With Losses Reported or Name of activity: (a) Form or schedule and line number to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule b Net income from form or	гтасняя				
Worksheet 7 - Activities With Losses Reported or Name of activity: (a) Form or schedule and line number to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule b Net income from form or		STATE	MENT F	OR WORKSHEET	6
Worksheet 7 - Activities With Losses Reported or Name of activity: (a) Form or schedule and line number to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule b Net income from form or	•	2.5	5,475.	25,475.	21,000,000,000,000,000
Form or schedule and line number to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule b Net income from form or	Two or N	lore Form	s or Sch	edules (See instruction	ns.)
to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule b Net income from form or		(b)	(c) Rat	(d) Healtone	
b Net income from or					
c Subtract line 1b from line 1a. If zero or less, enter -0	•			0	3
Form or schedule and line number to be reported on (see instructions):					
1a 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):					
1a 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 8582 (2009)

ALTERNATIVE MINIMUM TAX

Form 8582

Passive Activity Loss Limitations

Department of the Treasury Internal Revenue Service (99) See separate instructions.
 Attach to Form 1040 or Form 1041.

2009
Attachment Sequence No. 88

Name(s) shown on return

TIMOTHY M. KAINE & ANNE B. HOLTON

Identifying number

Part I 2009 Passive Activity Loss Caution: Complete Works!	no do 1 0 10 -		
Rental Real Estate Activities With Active Participation (For the definition of	feets 1, 2, and 3 on	page 2 before completing Pa	rt I.
Special Allowance for Rental Real Estate Activities on page 3 of the instru	i active participation	1, see	
Activities with net income (enter the amount from Worksheet 1, column (a))			
Activities with net loss (enter the amount from Worksheet 1, column (b))	9.5% (66	<9.050	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	984.19	<9,050.> <16,425.>	
d Combine lines 1a, 1b, and 1c	and what we have	110,423.	<25 47E
Commercial Revitalization Deductions From Rental Real Estate Activities		1d	<25,475.
2a Commercial revitalization deductions from Worksheet 2, column (a)	2a		
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2h		
c Add lines 2a and 2b		2c	
All Other Passive Activities			
3a Activities with net income (enter the amount from Worksheet 3, column (a))			
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3ь		
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	30		
d_Combine lines 3a, 3b, and 3c			
unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 858	are allowed, includ	ing any prior year	
schedules normally used	******************************	4	<25,475.
If line 4 is a loss and: Line 1d is a loss, go to Part II.		98 (60 C) 28 (C) 28 (C) 28 (C) 28 (C) 4	
 Line 2c is a loss (and line 1d is zero or more), sl 	kip Part II and go to	Part III.	
Line 3d is a loss (and lines 1d and 2c are zero of Caution: If your filling atoms is a region of filling.)	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 Part II or Part III. Instead, go to line 15.	spouse at any time	during the year,do not compl	ete
Part II Special Allowance for Rental Real Estate Activities	With Active P	articination	10.
Note: Enter all numbers in Part II as positive amounts. See page 8 o	f the instructions fo	r an example	
5 Enter the smaller of the loss on line 1d or the loss on line 4	925		25,475.
Enter \$150,000. If married filing separately, see the instructions	6	150,000.	25/4/5:
7 Enter modified adjusted gross income, but not less than zero (see the instr	7.) 7	175,955.	ALCOHOLD STATE
Note: If line 7 is greater than or equal to line 6, skip lines 8 and			4 .
9, enter -0- on line 10. Otherwise, go to line 8.			Service Control Control
8 Subtract line 7 from line 6	0		
 wuitiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filling 	separately see the	e instructions 9	*************************
u Enter the smaller of line 5 or line 9			0.
n in to be a doss, do to rait iii. Officiwise no to ing 15			
Part III Special Allowance for Commercial Revitalization D	eductions From	n Rental Real Estate	Activities
Note: Enter all numbers in Part III as positive amounts. See the exam	nple for Part II on pa	ge 8 of the instructions.	
terminal services and an activity, on line to, it married thing ser	parately, see instruc	ctions 11	
2 Enter the loss from line 4 3 Reduce line 12 by the amount on line 10		12	
Reduce line 12 by the amount on line 10 Enter the smallest of line 2c (treated as a positive amount), line 11, or line Part 10 Total Losses Allowed	40	13	
Part IV Total Losses Allowed	13	14	
Add the income, if any, on lines 1a and 3a and enter the total	SV7000 255	45	
6 Total losses allowed from all passive activities for 2009. Add lines 10, 14	4. and 15. See the	netructions 15	
to find out how to report the losses on your tax return	SEE STAT	PEMENT 11	0.
HA 919761 12-01-09 For Paperwork Reduction Act Notice, see separate instr	ructions.	TEMENT II 16	Form 8582 (2009)

Form 8582 (2009) TIMOTHY M. KAINE & ANNE B. HOLTON

Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c (See instructions.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (line 1a) (line 1b) (e) Loss loss (line 1c) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 1a, 1b, and 1c <9,050.> <16,425.> Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year Name of activity (c) Overall loss deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a and 2b Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (line 3a) (d) Gain (e) Loss (line 3b) loss (line 3c) Total. Enter on Form 8582, lines 3a, 3b, and 3c Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.) Form or schedule and line number (d) Subtract Name of activity (c) Special (a) Loss to be reported on (b) Ratio column (c) allowance (see instructions) from column (a) Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions) SEE ATTACHED STATEMENT FOR WORKSHEET 5 Total ...

25,475. 1.000000000

ALTERNATIVE MINIMUM TAX

Form 8582 (2009) TIMOTHY M. KAINE & ANNE B. HOLTON
Worksheet 6 - Allowed Losses (See instructions.)

Pana	2

Name of activity	and line r	Form or schedule and line number to be reported on (see instructions)		Loss	(b) Unallowed loss		(c) Allowed loss	
	SEE ATT	ACHED	STATE	MENT F	OR W	ORKSHEET	6	
Total			,	E 47E		05 455		
Worksheet 7 - Activities With Losse	s Reported on T	wo or N	ore Form	ns or Sch	edule	S (See instruction	(8.)	
Name of activity:	(a)		(b)	(c) Rat		(d) Unallowed		
Form or schedule and line number to be reported on (see instructions):								
1a 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):								
1a 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, e	enter -0							
Form or schedule and line number to be reported on (see instructions):								
la 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, e	nter -0							
otal								

Form 8582 (2009)

SCHEDULE M (Form 1040A or 1040)

Making Work Pay and Government Retiree Credits

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

See separate instructions.

OMB No. 1545-0074
2009
Attachment 466

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Attachment Sequence No. 166 Your social security number

TI	MOTHY M. KAINE & ANNE B. HOLTON	
16	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 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)?	
	X 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)	
b	Nontaxable combat pay included on	
	line 1a (see instructions)1b	
2	Multiply line 1a by 6.2% (.062)	
3	Enter \$400 (\$800 if married filing jointly)	
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	
6	Enter \$75,000 (\$150,000 if married filing jointly)	
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.	
	X Yes. Subtract line 6 from line 5	
8	Multiply line 7 by 2% (.02)	8 519.
9	Subtract line 8 from line 4. If zero or less, enter -0-	9 281.
10	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. X 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	10
13	Subtract line 12 from line 9. If zero or less, enter -0-	12 0. 13 281.
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 1040ND line 40	281.

	JQ	JALIFIED DIVI	DENDS		STATEMENT
NAME OF PAYER				INARY IDENDS	QUALIFIED DIVIDENDS
AMERICAN CENTURY IN GENERAL ELECTRIC CO				35. 1,043.	35 1,043
TOTAL INCLUDED IN F	ORM 1040, LINE	9B		=	1,078
SCHEDULE A	MORTGAGE REPOR	INTEREST AND	POINTS		STATEMENT
DESCRIPTION					AMOUNT
HOME MORTGAGE INTERI RESIDENTIAL PROPERTY	EST PAID TO A		TITUTION ICHMOND, V	- 'A	824
TOTAL TO SCHEDULE A	, LINE 10				824
FORM 8582 A	ACTIVE RENTAL (OF REAL ESTAT	E - WORKSH	EET 1	STATEMENT
	CURRENT		RIOR YEAR	OVERALL	GAIN OR LOS
NAME OF ACTIVITY	NET INCOME	NET LOSS	UNALLOWED LOSS	GAIN	LOSS
RESIDENTIAL PROPERTY RICHMOND, VA	0.	<9,050.>	<16 425		
			<16,425.		<25 , 475.
'OTALS	0.	<9,050.>	<16.425.3	>	<25 A7E
POTALS	<u> </u>	<9,050.> 	<16,425.	>	<25,475.
	LOCATION OF UN				<25,475. TATEMENT 4
ORM 8582 AL					
ORM 8582 AL AME OF ACTIVITY ESIDENTIAL PROPERTY	LOCATION OF UN	FORM OR	ES - WORKSI	HEET 5 S	UNALLOWED LOSS

TOTAL TO FORM 8582, LINE 16

FORM 8582	A	LLOWED LOS	SSES - WORK	SHEET 6	STA	TEMENT
NAME OF ACTIVITY			FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL PROPERT	CHMOND,	VA	SCH E	25,475.	25,475.	
TOTALS				25,475.	25,475.	
FORM 8582	SUI	MMARY OF P	ASSIVE ACT	IVITIES	STAT	EMENT
	SUI	MMARY OF P	ASSIVE ACT	IVITIES	STAT	EMENT
R R E	FORM OR	MMARY OF P	PRIOR	NET	UNALLOWED	ALLOWED
R R E A NAME	FORM OR		PRIOR			
R R E A NAME - ————————————————————————————————————	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET	UNALLOWED LOSS	ALLOWED

FORM 8582	MODIFIED AGI		STATEMENT 7
INCOME			
WAGES, SALARIES, TIPS ETC. DIVIDEND INCOME TAXABLE REFUNDS ALIMONY RECEIVED TAXABLE IRA DISTRIBUTIONS TAXABLE PENSIONS AND ANNUITIES UNEMPLOYMENT COMPENSATION OTHER INCOME			174,100. 1,078. 164.
INTEREST INCOME ADD: SERIES EE AND I EXCLUSION		586.	
BUSINESS INCOME OR LOSS ADD: PASSIVE LOSSES SUBTRACT: PASSIVE INCOME			586.
SALE OF ASSETS ADD: PASSIVE/RREA PROFESSIONAL SUBTRACT: PASSIVE INCOME	LOSSES	27.	
RENTAL, ROYALTY OR PASSTHROUGH IN ADD: PASSIVE/RREA PROFESSIONAL SUBTRACT: PASSIVE INCOME	NCOME OR LOSS LOSSES		27.
FARM OR FARM RENTAL INCOME OR LOS ADD: PASSIVE/RREA PROFESSIONAL SUBTRACT: PASSIVE INCOME	LOSSES		
FOTAL INCOME		_	
			175,955.
ADJUSTMENTS			
MOVING EXPENSES SELF-EMPLOYED HEALTH INSURANCE DE PENALTY ON EARLY WITHDRAWAL OF SA ALIMONY PAID KEOGH/SEP DEDUCTION OTHER ADJUSTMENTS	DUCTION VINGS		
COTAL ADJUSTMENTS	****		
OTAL TO FORM 8582, LINE 7			175,955.

TIMOTHY M. KAINE &	ANNE	B. HOL	ron ——			
FORM 8582	TIVE	ALTEI RENTAL	RNATIVE MINI OF REAL EST	MUM TAX ATE - WORKS	SHEET 1	PATEMENT (
		CURREN	T YEAR	PRIOR YEAR		AIN OR LOSS
NAME OF ACTIVITY	NET	INCOME	NET LOSS	UNALLOWED LOSS	GAIN	LOSS
RESIDENTIAL PROPERTY				·		
RICHMOND, VA		0.	<9,050.	> <16,425	.>	<25,475.
TOTALS		0.	<9,050.	> <16,425	.>	<25,475.
NAME OF ACTIVITY			FORM OR SCHEDULE			
RESIDENTIAL PROPERTY -				LOSS	RATIO	UNALLOWED LOSS
	-		SCH E	LOSS	RATIO	UNALLOWED LOSS
RICHMOND, VA	-		SCH E		RATIO 1.000000000	LOSS
·	_		SCH E	25,475.		LOSS
RICHMOND, VA TOTALS FORM 8582	<u> </u>	ALTERI ALLOWED	SCH E NATIVE MINIM LOSSES - WO	25,475. 25,475.	1.000000000	LOSS 25,475.

SCH E

25,475.

25,475.

RESIDENTIAL PROPERTY -

TOTALS

RICHMOND, VA

25,475.

25,475.

TIMOTHY M. KAINE & ANNE B. HOLTON

FORM 8582AMT	SUMMAI	RY OF PASS	IVE ACTIVI	TIES - AMT	STAT	EMENT 11
R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
X RESIDENTIAL PROPERTY -	SCH E	<9,050.>	> <16,425.	> <25,475.>	> 25,475.	
TOTALS		<9,050.>	<16,425.	<25,475.>	25,475.	
PRIOR YEAR CARRYOV	ERS ALLOWE	D DUE TO	URRENT YE	AR NET ACTIV	/ITY INCOME	
TOTAL TO FORM 8582	AMT, LINE	16			•	