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Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No 1545-0687

For calendar year 2009 or other tax year beginning _____, 2009,
and ending _____,

2009

Department of the Treasury
Internal Revenue Service (77)

▶ See separate instructions.

Open to Public Inspection for 501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed	Print or Type	THE MENTAL INSIGHT FOUNDATION 283 SECOND STREET EAST SONOMA, CA 95476	D Employer identification number (Employees' trust, see instructions for Block D) 94-3256579
B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)			E Unrelated business activity codes (See instructions for Block E) 721110

C Book value of all assets at end of year **14,278,115.**

F Group exemption number (See instructions for Block F.) ▶

G Check organization type . . . ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity.
▶ **INVESTMENT IN KIMPTON GROUP HOLDING, LLC**

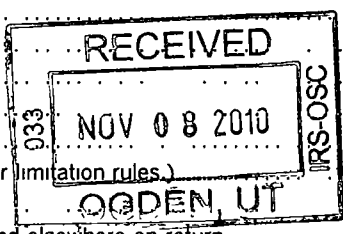
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If 'Yes,' enter the name and identifying number of the parent corporation . . . ▶

J The books are in care of ▶ **VIRGINIA HUBBELL** Telephone number ▶ **(707) 938-8248**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from partnerships and S corporations (attach statement) ST 1		5 133,103.		133,103.
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Sch G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule.)		12		
13 Total. Combine lines 3 through 12		13 133,103.	0.	133,103.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules.)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	133,103.
31 Net operating loss deduction (limited to the amount on line 30)	31	
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	133,103.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.	34	132,103.



SCANNED NOV 10 2009

General Business Credit

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

Name(s) shown on return
THE MENTAL INSIGHT FOUNDATION

Identifying number
94-3256579

Part I Current Year Credit

Important: You may not be required to complete and file a separate credit form (shown in parentheses below) to claim the credit. For details, see the instructions

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

For Paperwork Reduction Act Notice, see separate instructions.

Part II Allowable Credit (Continued)

Note. If you are not filing Form 8844, skip lines 20 through 24 and enter -0- on line 25.

20	Multiply line 16 by 75%	20	
21	Enter the greater of line 15 or line 20	21	2,442.5
22	Subtract line 21 from line 13. If zero or less, enter -0-	22	32,327.50
23	Subtract line 19b from line 22. If zero or less, enter -0-	23	32,327.50
24	Enter the amount from Form 8844, line 10 or line 12	24	2,661
25	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 23 or line 24.	25	2,661.00
26	Subtract line 15 from line 13. If zero or less, enter -0-	26	32,327.5
27	Add lines 19b and 25	27	2,661.00
28	Subtract line 27 from line 26. If zero or less, enter -0-	28	29,666.50
29a	Enter the investment credit from Form 3468, Part III, line 19 (attach Form 3468)	29a	
b	Enter the work opportunity credit from Form 5884, line 10 or line 12	29b	
c	Enter the alcohol and cellulosic biofuel fuels credit from Form 6478, line 14 or line 16.	29c	
d	Enter the low-income housing credit from Form 8586, Part II, line 18 or line 20.	29d	
e	Enter the applicable part of the amount of the renewable electricity, refined coal, and Indian coal production credit from Form 8835, Part II, line 36 or line 38.	29e	
f	Enter the credit for employer social security and Medicare taxes paid on certain employee tips from Form 8846, line 12	29f	1,355
g	Enter the qualified railroad track maintenance credit from Form 8900, line 12	29g	
30	Add lines 29a through 29g	30	1,355
31	Enter the smaller of line 28 or line 30	31	1,355.00
32	Credit allowed for the current year. Add lines 27 and 31. Report the amount from line 32 (if smaller than the sum of lines 8, 24, and 30, see instructions) as indicated below or on the applicable line of your return • Individuals Form 1040, line 53 or Form 1040NR, line 49 • Corporations Form 1120, Schedule J, line 5c } • Estates and trusts. Form 1041, Schedule G, line 2c	32	4,016.00

Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips

Department of the Treasury
Internal Revenue Service

▶ Attach to your tax return.

Name(s) shown on return

THE MENTAL INSIGHT FOUNDATION

Identifying number

94-3256579

Note. Claim this credit **only** for social security and Medicare taxes paid by a food or beverage establishment where tipping is customary for providing food or beverages. See the instructions for line 1.

1	Tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year (see instructions)	1	
2	Tips not subject to the credit provisions (see instructions)	2	
3	Creditable tips. Subtract line 2 from line 1.	3	
4	Multiply line 3 by 7 65% (0765) If you had any tipped employees whose wages (including tips) exceeded \$106,800, see instructions and check here. <input type="checkbox"/>	4	
5	Credit for employer social security and Medicare taxes paid on certain employee tips from partnerships and S corporations	5	1,355
6	Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K; all others, go to line 7	6	1,355
7	Credit for employer social security and Medicare taxes paid on certain employee tips included on line 6 from passive activities (see instructions).	7	
8	Subtract line 7 from line 6	8	1,355
9	Credit for employer social security and Medicare taxes paid on certain employee tips allowed for 2009 from passive activities (see instructions)	9	
10	Carryforward of the credit for employer social security and Medicare taxes paid on certain employee tips that originated in a tax year that began after 2006 (see instructions)	10	
11	Carryback of the credit for employer social security and Medicare taxes paid on certain employee tips from 2010 (see instructions).	11	
12	Add lines 8 through 11 Report this amount on Form 3800, line 29f	12	1,355

General Instructions

Section references are to the Internal Revenue Code.

Purpose of Form

Certain food and beverage establishments (see *Who Should File* below) use Form 8846 to claim a credit for social security and Medicare taxes paid or incurred by the employer on certain employees' tips. The credit is part of the general business credit.

You can claim or elect not to claim the credit any time within 3 years from the due date of your return on either your original return or on an amended return.

Who Should File

File Form 8846 if you meet both of the following conditions.

1. You had employees who received tips from customers for providing, delivering, or serving food or beverages for consumption if tipping of employees for delivering or serving food or beverages is customary.

2. During the tax year, you paid or incurred employer social security and Medicare taxes on those tips.

How the Credit Is Figured

Generally, the credit equals the amount of employer social security and Medicare taxes paid or incurred by the employer on tips received by the employee. However, the amount of tips for any month that are used to figure the credit must be reduced by the amount by which the wages that would have been payable during that month at \$5.15 an hour exceed the wages (excluding tips) paid by the employer during that month.

For example, an employee worked 100 hours and received \$450 in tips for October 2009. The worker received \$375 in wages (excluding tips) at the rate of \$3.75 an hour. If the employee had been paid \$5.15 an hour, the employee would have received wages, excluding tips, of \$515. For credit purposes, the \$450 in tips is reduced by \$140 (the difference between \$515 and \$375), and only \$310 of the employee's tips for October 2009 is taken into account.

Specific Instructions

Figure the current year credit from your trade or business on lines 1 through 4.

Line 1

Enter the tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year.

Include tips received from customers for providing, delivering, or serving food or beverages for consumption if tipping of employees for delivering or serving food or beverages is customary.

Line 2

If you pay each tipped employee wages (excluding tips) equal to or more than \$5.15 an hour enter zero on line 2.

Figure the amount of tips included on line 1 that are not creditable for each employee on a monthly basis. This is the total amount that would be payable to the employee at \$5.15 an hour reduced by the wages (excluding tips) actually paid to the employee during the month. Enter on line 2 the total amounts figured for all employees.

STATEMENT 1
FORM 990-T, PART I, LINE 5
INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS

<u>NAME</u>	<u>GROSS INCOME</u>	<u>DEDUCTIONS</u>	<u>INCOME (LOSS)</u>
KIMPTON GROUP HOLDING, LLC	\$ 437,645.	\$ 314,714.	\$ 122,931.
TBD RESTAURANT HOLDING CORP.	11,024.	794.	10,230.
NORTHERN TRUST PRIVATE EQUITY FUND LP	0.	58.	-58.
		TOTAL	<u>\$ 133,103.</u>

**Empowerment Zone and Renewal
Community Employment Credit**

2009

Attachment
Sequence No **99**

Department of the Treasury
Internal Revenue Service

▶ Attach to your tax return.

Name(s) shown on return

Identifying number

THE MENTAL INSIGHT FOUNDATION

94-3256579

1 Enter the total qualified wages paid or incurred during calendar year 2009 only (see instructions)		
a Qualified empowerment zone wages \$ _____ X 20% (20)	1a	
b Qualified renewal community wages \$ _____ X 15% (15)	1b	
2 Add lines 1a and 1b See instructions for the adjustment you must make to salaries and wages	2	
3 Empowerment zone and renewable community employment credit from partnerships, S corporations, cooperatives, estates, and trusts	3	2,661
4 Add lines 2 and 3. Partnerships and S corporations, report this amount on Schedule K; all others, go to line 5	4	2,661
5 Empowerment zone and renewal community employment credit included on line 4 from passive activities (see instructions).	5	2,661
6 Subtract line 5 from line 4	6	
7 Passive activity credit allowed for 2009 (see instructions)	7	2,661
8 Carryforward of empowerment zone and renewal community employment credit to 2009	8	
9 Carryback of empowerment zone and renewal community employment credit from 2010 (see instructions)	9	
10 Add lines 6 through 9 Cooperatives, estates, and trusts, go to line 11. All others, report this amount on Form 3800, line 24	10	2,661
11 Amount allocated to the patrons of the cooperative or the beneficiaries of the estate or trust (see instructions).	11	
12 Cooperatives, estates, and trusts. Subtract line 11 from line 10. Report this amount on Form 3800, line 24	12	

For Paperwork Reduction Act Notice, see instructions.

Form **8844** (2009)

Part II Allowable Credit

9	Regular tax before credits			
	• Individuals Enter the amount from Form 1040, line 44 or Form 1040NR, line 41 . . .	}	. . .	9
	• Corporations Enter the amount from Form 1120, Schedule J, line 2; or the applicable line of your return			
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return			
				34,770
10	Alternative minimum tax			
	• Individuals. Enter the amount from Form 6251, line 36	}	10
	• Corporations. Enter the amount from Form 4626, line 14			
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56			
11	Add lines 9 and 10.			11
				34,770
12a	Foreign tax credit	12a		
b	Credits from Form 1040, lines 48 through 52 (or Form 1040NR, lines 45 through 48); Form 8859, line 11; Form 8834, lines 22 and 29, Form 8910, line 21; Form 8911, line 23; Form 8936, line 14, and Schedule R, line 24	12b		
c	Add lines 12a and 12b			12c
13	Net income tax. Subtract line 12c from line 11. If zero, skip lines 14 through 17 and enter -0- on line 18a			13
				34,770
14	Net regular tax. Subtract line 12c from line 9. If zero or less, enter -0-	14	34,770	
15	Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions)	15	2,442.5	
16	Tentative minimum tax			
	• Individuals. Enter the amount from Form 6251, line 34	}	16
	• Corporations. Enter the amount from Form 4626, line 12			
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54			
17	Enter the greater of line 15 or line 16			17
				2,442.50
18a	Subtract line 17 from line 13. If zero or less, enter -0-			18a
				32,327.50
b	For a corporation electing to accelerate the research credit, enter the bonus depreciation amount attributable to the research credit. (see instructions)			18b
c	Add lines 18a and 18b			18c
				32,327.50
19a	Enter the smaller of line 8 or line 18c			19a
	C corporations: See the line 19a instructions if there has been an ownership change, acquisition, or reorganization.			
b	Enter the smaller of line 8 or line 18a. If you made an entry on line 18b, go to line 19c, otherwise, skip line 19c (see instructions)			19b
c	Subtract line 19b from line 19a. This is the refundable amount for a corporation electing to accelerate the research credit. Include this amount on line 32g of Form 1120 (or the applicable line of your return)			19c

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (column 3 plus column 4)
(1)				
(2)				
(3)				
(4)				
Totals	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute columns 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals	Enter here and on page 1, Part I, line 10, column (A).	Enter here and on page 1, Part I, line 10, column (B).				Enter here and on page 1, Part II, line 26.

Schedule J – Advertising Income (See instructions.)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (column 2 minus column 3). If a gain, compute columns 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)).						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (column 2 minus column 3). If a gain, compute columns 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
(5) Totals from Part I						
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, column (A).	Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 27.

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
Total. Enter here and on page 1, Part II, line 14			

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> . See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____			
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)	\$ _____		
(2) Additional 3% tax (not more than \$100,000)	\$ _____		
c Income tax on the amount on line 34		35 c	34,770.
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)		36	
37 Proxy tax. See instructions.		37	
38 Alternative minimum tax		38	
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies		39	34,770.

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	40 a		
b Other credits (see instructions)	40 b		
c General business credit. Attach Form 3800	40 c	4,016.	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40 d		
e Total credits. Add lines 40a through 40d	40 e		4,016.
41 Subtract line 40e from line 39	41		30,754.
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	42		
43 Total tax. Add lines 41 and 42	43		30,754.
44 a Payments: A 2008 overpayment credited to 2009	44 a	199,876.	
b 2009 estimated tax payments	44 b		
c Tax deposited with Form 8868	44 c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	44 d		
e Backup withholding (see instructions)	44 e		
f Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input type="checkbox"/> Form 4136 _____ <input type="checkbox"/> Other _____ Total	44 f		
45 Total payments. Add lines 44a through 44f.	45		199,876.
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached. <input type="checkbox"/>	46		
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	47		
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48		169,122.
49 Enter the amount of line 48 you want: Credited to 2010 estimated tax ▶ 169,122. Refunded ▶ 0.	49		0.

Part V Statements Regarding Certain Activities and Other Information (see instructions.)

1 At any time during the 2009 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶ _____	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see the instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ 0.		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3				
4 a Additional section 263A costs (attach schedule)	4 a				
b Other costs (attach sch)	4 b		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
5 Total. Add lines 1 through 4b	5				X

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

Sign Here Signature of officer: *[Signature]* Date: 11-2-10 Title: President

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer's Use Only

Preparer's signature: JOHN R. COMYNS *[Signature]* Date: 10/29/10
 Firm's name (or yours if self-employed), address, and ZIP code: COMYNS, SMITH, MCCLEARY & DEEVER, LLP
 3470 MT. DIABLO BLVD. #A110 LAFAYETTE, CA 94549
 Preparer's SSN or PTIN: 566-02-9284
 EIN: 68-0307221
 Phone no: (925) 299-1040

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1 Description of property		
(1)		
(2)		
(3)		
(4)		
2 Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) . . . ▶
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		

Schedule E – Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property	2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach sch)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶		Enter here and on page 1, Part I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8 ▶				

Schedule F – Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1 Name of Controlled Organization	2 Employer Identification Number	Exempt Controlled Organizations				
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5	
(1)						
(2)						
(3)						
(4)						
Nonexempt Controlled Organizations		7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)						
(2)						
(3)						
(4)						
Totals ▶				Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, part I, line 8, column (B).	