

Form 1040 U.S. Individual Income Tax Return 2004 CONFIDENTIAL PATIENT'S COPY

Label (See instructions.) ANUCHA BROWNE-SANDERS

Presidential Election Campaign (See instructions.) Note: Checking 'Yes' will not change your tax or reduce your refund.

Filing Status 1 Single 2 Married filing jointly 3 Married filing separately 4 Head of household 5 Qualifying widow(er)

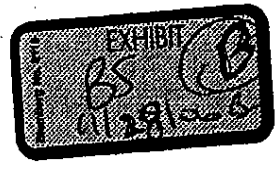
Exemptions 6a Yourself 6b Spouse c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) if qualifying child for child tax credit

Income table with columns for line number, description, and amount. Total income: 235,073.

Adjusted Gross Income table with columns for line number, description, and amount. Adjusted gross income: 235,073.

BAA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.

FOIA0112 1/1/04 Form 1040 (2004) PL04384



Form 1040 (2004) ANUCHA BROWNE-SANDERS Page 2

CONFIDENTIAL

Tax and Credits	37 Amount from line 36 (adjusted gross income) 37	235,073.
	38 a Check <input type="checkbox"/> You were born before January 2, 1940, <input type="checkbox"/> Blind. Total boxes checked = 38 a	
	if: <input type="checkbox"/> Spouse was born before January 2, 1940, <input type="checkbox"/> Blind. Total boxes checked = 38 b	
	b If your spouse itemizes on a separate return, or you were a dual-status alien, see instructions and check here 38 b	
Standard Deduction for — • People who checked any box on line 38a or 38b or who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, \$4,850 Married filing jointly or Qualifying widow(er), \$9,700 Head of household, \$7,150	39 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 39	50,687.
	40 Subtract line 39 from line 37 40	184,386.
	41 If line 37 is \$107,025 or less, multiply \$3,100 by the total number of exemptions claimed on line 6d. If line 37 is over \$107,025, see the worksheet in the instructions 41	6,696.
	42 Taxable income. Subtract line 41 from line 40. If line 41 is more than line 40, enter -0- 42	177,690.
	43 Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 43	42,761.
	44 Alternative minimum tax (see instructions). Attach Form 6251 44	6,662.
	45 Add lines 43 and 44 45	49,423.
	46 Foreign tax credit. Attach Form 1116 if required 46	
	47 Credit for child and dependent care expenses. Attach Form 2441 47	1,200.
	48 Credit for the elderly or the disabled. Attach Schedule R 48	
49 Education credits. Attach Form 8863 49		
50 Retirement savings contributions credit. Attach Form 8880 50		
51 Child tax credit (see instructions) 51		
52 Adoption credit. Attach Form 8839 52		
53 Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859 53		
54 Other credits. Check applicable box(es): a <input type="checkbox"/> Form 3800 54 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Specify		
55 Add lines 46 through 54. These are your total credits 55	1,200.	
56 Subtract line 55 from line 45. If line 55 is more than line 45, enter -0- 56	48,223.	
Other Taxes	57 Self-employment tax. Attach Schedule SE 57	
	58 Social security and Medicare tax on tip income not reported to employer. Attach Form 4137 58	
	59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 59	
	60 Advance earned income credit payments from Form(s) W-2 60	
	61 Household employment taxes. Attach Schedule H 61	
	62 Add lines 56-61. This is your total tax 62	48,223.
Payments	63 Federal income tax withheld from Forms W-2 and 1099 63	49,801.
if you have a qualifying child, attach Schedule EIC.	64 2004 estimated tax payments and amount applied from 2003 return 64	
	65 a Earned income credit (EIC) 65 a b Nontaxable combat pay election 65 b	
	66 Excess social security and tier I RRTA tax withheld (see instructions) 66	5.
	67 Additional child tax credit. Attach Form 8812 67	
	68 Amount paid with request for extension to file (see instructions) 68	
	69 Other pmts from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885 69	
	70 Add lines 63, 64, 65a, and 66 through 69. These are your total payments 70	49,806.
Refund	71 If line 70 is more than line 62, subtract line 62 from line 70. This is the amount you overpaid 71	1,583.
Direct deposit? See instructions and fill in 72b, 72c, and 72d.	72 a Amount of line 71 you want refunded to you 72 a	1,583.
	b Routing number <input type="checkbox"/> XXXXXXXXXX <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d Account number <input type="checkbox"/> XXXXXXXXXXXXXXXXXXXX	
	73 Amount of line 71 you want applied to your 2005 estimated tax 73	
Amount You Owe	74 Amount you owe. Subtract line 70 from line 62. For details on how to pay, see instructions 74	
	75 Estimated tax penalty (see instructions) 75	
Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete the following. <input type="checkbox"/> No	
	Designee's name: Preparer	Phone no.:
Sign Here	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.	
Joint return? See instructions.	Your signature	Date
Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.	Date
	Your occupation	Daytime phone number
	MARKETING	
	Spouse's occupation	
Paid Preparer's Use Only	Preparer's signature	Date
	Firm's name (or yours if self-employed), address, and ZIP code	03/29/2005
	Check if self-employed <input type="checkbox"/>	Preparer's SSN or EIN
	EIN	
	Phone no.	

REDACTED

SCHEDULE A
(Form 1040)

Itemized Deductions **CONFIDENTIAL**

OMB No. 1545-0074

2004
07

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040.
▶ See Instructions for Schedule A (Form 1040).

Name(s) shown on Form 1040

Your social security number

ANUCHA BROWNE-SANDERS

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 37	2			
3	Multiply line 2 by 7.5% (.075)	3			
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4			
Taxes You Paid					
5 State and local (check only one box):		5	19,407.		
a <input checked="" type="checkbox"/> Income taxes, or					
b <input type="checkbox"/> General sales taxes (see instructions)					
6	Real estate taxes (see instructions)	6	9,694.		
7	Personal property taxes	7	49.		
8	Other taxes. List type and amount ▶	8			
9	Add lines 5 through 8	9			29,150.
Interest You Paid					
10	Home mtg interest and points reported to you on Form 1098	10	13,777.		
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 ▶				
Note. Personal interest is not deductible.					
12	Points not reported to you on Form 1098. See instrs for spl rules	12			
13	Investment interest. Attach Form 4952 if required. (See instrs.)	13	311.		
14	Add lines 10 through 13	14			14,088.
Gifts to Charity					
15	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	15	9,725.		
16	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	16	495.		
17	Carryover from prior year	17			
18	Add lines 15 through 17	18			10,220.
Casualty and Theft Losses					
19	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	19			
Job Expenses and Most Other Miscellaneous Deductions					
20	Unreimbursed employee expenses – job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶				
21	Tax preparation fees	21			
22	Other expenses – investment, safe deposit box, etc. List type and amount ▶				
	Miscellaneous Expenses	312.	312.		
23	Add lines 20 through 22	23	312.		
24	Enter amount from Form 1040, line 37	24	235,073.		
25	Multiply line 24 by 2% (.02)	25	4,701.		
26	Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-	26			0.
Other Miscellaneous Deductions					
27	Other – from list in the instructions. List type and amount ▶	27			
Total Itemized Deductions					
28 Is Form 1040, line 37, over \$142,700 (over \$71,350 if MFS)?		28			
<input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter this amount on Form 1040, line 39.					
<input checked="" type="checkbox"/> Yes. Your deduction may be limited. See instructions for the amount to enter.					50,687.

Itemized Deductions Limited per IRC Sec. 68.

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

FDIA0301 11/02/04

Schedule A (Form 1040) 2004

04386

Schedule A & B (Form 1040) 2004

CONFIDENTIAL

Name(s) shown on Form 1040.

ANUCHA BROWNE-SANDERS

Your social security number

Schedule B – Interest and Ordinary Dividends

08

**Part I
Interest**

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address

(See instructions for Form 1040, line 8a.)

MERRILL LYNCH

REDACTED

Amount

51.

Note. If you received a Form 1099-INT, Form 1099-DIV, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

2 Add the amounts on line 1

2

51.

3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815

3

4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a

4

51.

Note. If line 4 is over \$1,500, you must complete Part III.

**Part II
Ordinary Dividends**

5 List name of payer

CHARLES SCHWAB

WALT DISNEY

MERRILL LYNCH

Amount

242.

63.

1,509.

(See instructions for Form 1040, line 9a.)

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's 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 1040, line 9a

6

1,814.

Note. If line 6 is over \$1,500, you must complete Part III.

**Part III
Foreign Accounts and Trusts**

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

Yes No

7a At any time during 2004, 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 instructions for exceptions and filing requirements for Form TD F 90-22.1

b If 'Yes,' enter the name of the foreign country

8 During 2004, 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 instructions

(See instructions.)

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

SCHEDULE C
(Form 1040)

Profit or Loss From Business **CONFIDENTIAL**
(Sole Proprietorship)

OMB No. 1545-0074
2004
09

Department of the Treasury
Internal Revenue Service

Partnerships, joint ventures, etc. must file Form 1065 or 1065-B.
Attach to Form 1040 or 1041. See instructions for Schedule C (Form 1040).

Name of proprietor

ANUCHA BROWNE-SANDERS

Social security number (SSN)

REDACTED

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

DIRECT MARKETING

B Enter code from instructions

454390

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.)
City, town or post office, state, and ZIP code

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) _____

G Did you 'materially participate' in the operation of this business during 2004? If 'No,' see instructions for limit on losses Yes No

H If you started or acquired this business during 2004, check here _____

Income

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, see the instructions and check here <input type="checkbox"/>	1	
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	
6 Other income, including Federal and state gasoline or fuel tax credit or refund	6	
7 Gross income. Add lines 5 and 6	7	

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

8 Advertising	8		19 Pension and profit-sharing plans	19	
9 Car and truck expenses (see instructions)	9	6,669.	20 Rent or lease (see instructions):		
10 Commissions and fees	10		a Vehicles, machinery, and equipment	20a	
11 Contract labor (see instructions)	11		b Other business property	20b	
12 Depletion	12		21 Repairs and maintenance	21	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	209.	22 Supplies (not included in Part III)	22	2,887.
14 Employee benefit programs (other than on line 19)	14		23 Taxes and licenses	23	
15 Insurance (other than health)	15		24 Travel, meals, and entertainment:		
16 Interest:			a Travel	24a	
a Mortgage (paid to banks, etc.)	16a		b Meals and entertainment		1,584.
b Other	16b		c Enter nondeductible amount included on line 24b (see instr)		792.
17 Legal & professional services	17	450.	d Subtract line 24c from line 24b	24d	792.
18 Office expense	18	809.	25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28		26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	8,613.
29 Tentative profit (loss). Subtract line 28 from line 7	29		30 Expenses for business use of your home. Attach Form 8829	30	-20,429.
30 Expenses for business use of your home. Attach Form 8829	30		31 Net profit or (loss). Subtract line 30 from line 29.	31	-20,429.

• If a profit, enter on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, 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 Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see instructions). Estates and trusts, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198.

32a All investment is at risk.

32b Some investment is not at risk.

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

Schedule C (Form 1040) 2004

Schedule C (Form 1040) 2004 ANUCHA BROWNE-SANDERS

CONFIDENTIAL

Page 2

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? If "Yes," attach explanation Yes No

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

REDACTED

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) 02/13/2001

44 Of the total number of miles you drove your vehicle during 2004, enter the number of miles you used your vehicle for:
 a Business 17,785 b Commuting _____ c Other 6,373

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

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

47 a Do you have evidence to support your deduction? Yes No
 b If "Yes," is the evidence written? Yes No

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

TELEPHONE	1,297.
BOOKS; SUBSCRIPTIONS	1,091.
INTERNET	277.
POSTAGE	336.
PARKING & TOLLS	184.
PROFESSIONAL DUES	1,747.
CONFERENCES	3,681.
48 Total other expenses. Enter here and on page 1, line 27	8,613.

Schedule C (Form 1040) 2004

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Capital Gains and Losses

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

CONFIDENTIAL

OMB No. 1545-0074

2004

12

Name(s) shown on Form 1040

ANUCHA BROWNE-SANDERS

REDACTED

Your social security number

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)
1 250 SHS SIRIUS SATELLITE RADIO	11/22/04	12/08/04	1,980.	1,417.	563.
2 Enter your short-term totals, if any, from Schedule D-1, line 2		2			
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)		3	1,980.		
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 8 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)					7 563.

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 20 SHS AT & T WIRELESS	Various	10/27/04	300.	300.	0.
9 Enter your long-term totals, if any, from Schedule D-1, line 9		9			
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)		10	300.		
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 13 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 0.

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

Schedule D (Form 1040) 2004

CONFIDENTIAL

Summary

16 Combine lines 7 and 15 and enter the result. If line 16 is a loss, skip lines 17 through 20, and go to line 21. If a gain, enter the gain on Form 1040, line 13, and then go to line 17 below

16 563

17 Are lines 15 and 16 both gains?

Yes. Go to line 18.

No. Skip lines 18 through 21, and go to line 22.

REDACTED

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

20 Are lines 18 and 19 both zero or blank?

Yes. Complete Form 1040 through line 42, and then complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040. Do not complete lines 21 and 22 below.

No. Complete Form 1040 through line 42, and then complete the Schedule D Tax Worksheet in 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, the smaller of:

- The loss on line 16 or
- (\$3,000), or if married filing separately, (\$1,500)

21

Note. When figuring which amount is smaller, treat both amounts as positive numbers.

22 Do you have qualified dividends on Form 1040, line 9b?

Yes. Complete Form 1040 through line 42, and then complete the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040.

No. Complete the rest of Form 1040.

Form **2441**

Child and Dependent Care Expenses

OMB No. 1545-0068

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on Form 1040

Attach to Form 1040.
See separate instructions.

CONFIDENTIAL 2004

21

ANUCHA BROWNE-SANDERS

REDACTED

Your social security number

Before you begin: You need to understand the following terms. See Definitions in the instructions.
• Dependent Care Benefits • Qualifying Person(s) • Qualified Expenses

Part I Persons or Organizations Who Provided the Care — You must complete this part.
(If you need more space, use the bottom of page 2.)

1	(a) Care provider's name	(b) Address (no., street, apt no., city, state, and ZIP code)	(c) Identifying no. (SSN or EIN)	(d) Amount paid (see instructions)
	SUMMIT YMCA	67 MAPLE STREET SUMMIT NJ 07901	221-48-7392	6,186.

Did you receive dependent care benefits? No Yes
 No —> Complete only Part II below.
 Yes —> Complete Part III on page 2 next.

Caution. If the care was provided in your home, you may owe employment taxes. See the instructions for Form 1040, line 61.

Part II Credit for Child and Dependent Care Expenses

2 Information about your qualifying person(s). If you have more than two qualifying persons, see the instructions.

(a) Qualifying person's name		(b) Qualifying person's social security number	(c) Qualified expenses you incurred and paid in 2004 for the person listed in column (a)
First	Last		
			3,093.
			3,093.

3	Add the amounts in column (c) of line 2. Do not enter more than \$3,000 for one qualifying person or \$6,000 for two or more persons. If you completed Part III, enter the amount from line 32	3	6,000.
4	Enter your earned income. See instructions	4	228,557.
5	If married filing jointly, enter your spouse's earned income (if your spouse was a student or was disabled, see the instructions); all others, enter the amount from line 4	5	228,557.
6	Enter the smallest of line 3, 4, or 5	6	6,000.
7	Enter the amount from Form 1040, line 37	7	235,073.

8 Enter on line 8 the decimal amount shown below that applies to the amount on line 7

If line 7 is:			If line 7 is:		
Over	But not over	Decimal amount is	Over	But not over	Decimal amount is
\$0	– 15,000	.35	\$29,000	– 31,000	.27
15,000	– 17,000	.34	31,000	– 33,000	.26
17,000	– 19,000	.33	33,000	– 35,000	.25
19,000	– 21,000	.32	35,000	– 37,000	.24
21,000	– 23,000	.31	37,000	– 39,000	.23
23,000	– 25,000	.30	39,000	– 41,000	.22
25,000	– 27,000	.29	41,000	– 43,000	.21
27,000	– 29,000	.28	43,000	– No limit	.20

9	Multiply line 6 by the decimal amount on line 8. If you paid 2003 expenses in 2004, see the instructions	9	1,200.
10	Enter the amount from Form 1040, line 45, minus any amount on Form 1040, line 46	10	49,423.
11	Credit for child and dependent care expenses. Enter the smaller of line 9 or line 10 here and on Form 1040, line 47	11	1,200.

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 2441 (2004)

CONFIDENTIAL

Form **6251**

Alternative Minimum Tax -- Individuals

OMB No. 1545-0227

2004

Department of the Treasury
Internal Revenue Service (99)

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

32

Name(s) shown on Form 1040

Your social security number

ANUCHA BROWNE-SANDERS

Alternative Minimum Taxable Income (See instructions for how to complete each line.)		
1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 40, and go to line 2. Otherwise, enter the amount from Form 1040, line 37, and go to line 7. (If less than zero, enter as a negative amount.)	1	184,386.
2 Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4 or 2-1/2% of Form 1040, line 37	2	0.
3 Taxes from Schedule A (Form 1040), line 9	3	29,150.
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	0.
5 Miscellaneous deductions from Schedule A (Form 1040), line 26	5	0.
6 If Form 1040, line 37, is over \$142,700 (over \$71,350 if married filing separately), enter the amount from line 9 of the Itemized Deductions Worksheet in the Instructions for Schedules A and B (Form 1040)	6	-2,771.
7 Tax refund from Form 1040, line 10 or line 21	7	-4,088.
8 Investment interest expense (difference between regular tax and AMT)	8	0.
9 Depletion (difference between regular tax and AMT)	9	0.
10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	REDACTED
11 Interest from specified private activity bonds exempt from the regular tax	11	
12 Qualified small business stock (7% of gain excluded under section 1202)	12	
13 Exercise of incentive stock options (excess of AMT income over regular tax income)	13	
14 Estates and trusts (amount from Schedule K-1 (Form 1041), line 9)	14	
15 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	15	
16 Disposition of property (difference between AMT and regular tax gain or loss)	16	
17 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	17	-93.
18 Passive activities (difference between AMT and regular tax income or loss)	18	
19 Loss limitations (difference between AMT and regular tax income or loss)	19	
20 Circulation costs (difference between regular tax and AMT)	20	
21 Long-term contracts (difference between AMT and regular tax income)	21	
22 Mining costs (difference between regular tax and AMT)	22	
23 Research and experimental costs (difference between regular tax and AMT)	23	
24 Income from certain installment sales before January 1, 1987	24	
25 Intangible drilling costs preference	25	
26 Other adjustments, including income-based related adjustments	26	
27 Alternative tax net operating loss deduction	27	
28 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$191,000, see instructions.)	28	206,584.

Alternative Minimum Tax		
29 Exemption. (If this form is for a child under age 14, see instructions.)		
IF your filing status is ... AND line 28 is not over ... THEN enter on line 29 ...		
Single or head of household	\$112,500	\$40,250
Married filing jointly or qualifying widow(er)	150,000	58,000
Married filing separately	75,000	29,000
If line 28 is over the amount shown above for your filing status, see instructions.		
30 Subtract line 29 from line 28. If zero or less, enter -0- here and on lines 33 and 35 and stop here	30	189,855.
31 • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here. • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	31	49,423.
32 Alternative minimum tax foreign tax credit (see instructions)	32	
33 Tentative minimum tax. Subtract line 32 from line 31	33	49,423.
34 Tax from Form 1040, line 43 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 46). If you used Schedule J to figure your tax, the amounts for lines 43 and 46 of Form 1040 must be refigured without using Schedule J (see instructions)	34	42,761.
35 Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 44	35	6,662.

BAA For Paperwork Reduction Act Notice, see separate instructions.

FOIA53 04393

Form 6251 (2004)

CONFIDENTIAL

Tax Computation Using Maximum Capital Gains Rates

REDACTED

36	Enter the amount from Form 6251, line 30	36	189,855.
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 43, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the AMT, if necessary) (see instructions)	37	1,814.
38	Enter the amount from Schedule D (Form 1040), line 19 (as figured for the AMT, if necessary) (see instructions)	38	
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as figured for the AMT, if necessary)	39	1,814.
40	Enter the smaller of line 36 or line 39	40	1,814.
41	Subtract line 40 from line 36	41	188,041.
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	42	49,151.
43	Enter: <ul style="list-style-type: none"> • \$58,100 if married filing jointly or qualifying widow(er), • \$29,050 if single or married filing separately, or • \$38,900 if head of household. 	43	38,900.
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 43, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	44	175,876.
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	0.
46	Enter the smaller of line 36 or line 37	46	1,814.
47	Enter the smaller of line 45 or line 46	47	0.
48	Multiply line 47 by 5% (.05)	48	0.
49	Subtract line 47 from line 46	49	1,814.
50	Multiply line 49 by 15% (.15) If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go to line 51.	50	272.
51	Subtract line 46 from line 40	51	
52	Multiply line 51 by 25% (.25)	52	
53	Add lines 42, 48, 50, and 52	53	49,423.
54	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	54	49,659.
55	Enter the smaller of line 53 or line 54 here and on line 31	55	49,423.

Form **4952**

Investment Interest Expense Deduction

OMB No. 1545-0191

Department of the Treasury
Internal Revenue Service (99)

Attach to your tax return.

CONFIDENTIAL

2004
51

Name(s) shown on return

ANUCHA BROWNE-SANDERS

Identifying number

Total Investment Interest Expense

REDACTED

1	Investment interest expense paid or accrued in 2004 (see instructions)	1	311.
2	Disallowed investment interest expense from 2003 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	311.

Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	1,865.	
4b	Qualified dividends included on line 4a	4b	1,814.	
4c	Subtract line 4b from line 4a	4c	51.	
4d	Net gain from the disposition of property held for investment	4d	563.	
4e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e	0.	
4f	Subtract line 4e from line 4d	4f	563.	
4g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)	4g		
4h	Investment income. Add lines 4c, 4f, and 4g	4h	614.	
5	Investment expenses (see instructions)	5		
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6	614.	

Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2005. Subtract line 6 from line 3. If zero or less, enter -0-	7	0.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	311.

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 4952 (2004)

ANUCHA BROWNE-SANDERS

CONFIDENTIAL

Supporting Statement of:

Schedule A/Ln 6a- RE tax main res

Description	Amount
BOA	9,694.00
Total	<u>9,694.00</u>

REDACTED