

JUDICIAL OFFICE
CANDIDATE OATH

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2012 APR 13 PM 4: 11

OFFICE USE ONLY
ELECTIONS DEPARTMENT

OATH OF CANDIDATE (Section 105.031, Florida Statutes)

I, LUISE KRIEGER MARTIN
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the judicial office of County Judge, 11
(office) (district #) (circuit #)
6; my legal residence is Miami-Dade County, Florida; I am a qualified elector
(group #)

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

X [Signature] (305)975-0231 LuiseKriegerMartin@gmail.com
Signature of Candidate Telephone Number Email Address

1351 NW 12th St #502 Miami Florida 33125
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 109288706

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

Loo-eez kree-guhr mahr-tin

STATE OF FLORIDA
COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 13 day of April, 2012.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public
DAMARIS VALDEZ





OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 6741131

RECEIVED FROM Luise Krieger Martin

DATE 4 / 13 / 12
MONTH DAY YEAR

ADDRESS 6468 Manor Ln

CASH \$ _____

South Miami CITY FI STATE 33143 ZIP

CHECKS \$ 5371.20

AMOUNT OF: Five Thousand Three Hundred Seventy-one DOLLARS, AND 20 CENTS

TOTAL \$ 5371.20

FOR PAYMENT OF: Qualifying Fec County Court Group 6

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.

DEPT.: Elections

BY: MARIA ACOSTA

FOR OFFICE USE ONLY

TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

LUISE KRIEGER MARTIN
CAMPAIGN ACCOUNT
C/O KAREN JONES
6468 MANOR LN.
SOUTH MIAMI, FL 33143

63-9648
670

103

DATE 4/10/12

PAY TO THE ORDER OF Board of County Commisioners \$ 5371 ²⁰ -

Juan Gonzalez thru Shudell Seventy one + 20/12 DOLLARS

Sabadell United Bank **S^B**

MEMO Qualifying Fee

© BELOUE WALLET OR DUPLICATE SAFETY PAPER

Security Features Included. Details on Back.

[Redacted Signature]

FORM 6 FULL AND PUBLIC DISCLOSURE OF 2011

Please print or type your name, mailing address, agency name, and position below :

FINANCIAL INTERESTS

RECEIVED

FOR OFFICE USE ONLY: 2012 APR 13 PM 4:11

MIAMI COUNTY
ELECTIONS DEPARTMENT

ID No.

Conf. Code

P. Req. Code

LAST NAME --- FIRST NAME --- MIDDLE NAME:
MARTIN LUISE KRIEGER

MAILING ADDRESS:
1351 NW 12TH ST #502

CITY: MIAMI ZIP: 33125 COUNTY: MIAMI-DADE

NAME OF AGENCY :
ELEVENTH JUDICIAL CIRCUIT

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
MIAMI-DADE COUNTY COURT JUDGE, GROUP 6

CHECK IF THIS IS A FILING BY A CANDIDATE

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2011, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of 3/30, 20 12 was \$ ~600,000

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effects (described above) is \$ ~175,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
Bank of America, Coconut Grove bank checking & savings	~19,000
ING (Pioneer Fund)	57,663
Wells Fargo (cien 226, hgsi 824, intc 5623, mdt 1959, mu 809, invesso small cap smeax 43,390)	67,414
russell invt co lifepoints growth 13,771)/ Krieger Family Trust	~112,000
Residence pb 146-60t-18777 lot 17/ Loan to Campaign	~525,000/75,000

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Bank of America Mortgage+Heloc	~375,000
SunTrust auto loan	~19,000

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2011 federal income tax return, including all W2's, schedules, and attachments; **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income; by completing the remainder of Part D, below.

I elect to file a copy of my 2011 federal income tax return and all W2's, schedules, and attachments. 2012 APR 13 PM 4:11
 [If you check this box and attach a copy of your 2011 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME
tax return attached	

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 5]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

Sma

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
 COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 13 day of

April, 2012 by Luise Krieger Martin

[Signature]
 (Signature of Notary Public--State of Florida)

Damaris Valdez
 (Print, Type, or Stamp Commissioned Name of Notary Public)

NOTARY PUBLIC
DAMARIS E. VALDEZ
 MY COMMISSION # **DD 968456**
 EXPIRES: **March 7, 2014**
 Bonded Thru Budget Notary Services

Personally Known OR Produced Identification

Type of Identification Produced _____

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.

Form 1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return 2011 OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2011, or other tax year beginning 2011, ending 2011, See separate instructions.

Your first name and initial DAVID J. Last name MARTIN Your social security number

If a joint return, spouse's first name and initial LUISE S. Last name MARTIN Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Presidential Election Campaign

Foreign country name Foreign province/country Foreign postal code Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Filing Status 1 Single 2 Married filing jointly (even if only one had income) 3 Married filing separately. Enter spouse's SSN above and full name here. 4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. 5 Qualifying widow(er) with dependent child

Exemptions 6a Yourself. If someone can claim you as a dependent, do not check box 6a 6b Spouse 6c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) Child under age 17 qual. for child tax credit (see instr.)

d Total number of exemptions claimed Add numbers on lines above 4

Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 272,130 8a Taxable interest. Attach Schedule B if required 8a 15 b Tax-exempt interest. Do not include on line 8a 8b 1 9a Ordinary dividends. Attach Schedule B if required 9a 35 b Qualified dividends 9b 33 10 Taxable refunds, credits, or offsets of state and local income taxes 10 11 Alimony received 11 12 Business income or (loss). Attach Schedule C or C-EZ 12 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 13 14 Other gains or (losses). Attach Form 4797 14 15a IRA distributions 15a b Taxable amount 15b 16a Pensions and annuities 16a b Taxable amount 16b 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 0 18 Farm income or (loss). Attach Schedule F 18 19 Unemployment compensation 19 20a Social security benefits 20a b Taxable amount 20b 21 Other income. List type and amount 21 22 Combine the amounts in the far right column for lines 7 through 21. This is your total income 22 272,180

Adjusted Gross Income 23 Educator expenses 23 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24 25 Health savings account deduction. Attach Form 8889 25 26 Moving expenses. Attach Form 3903 26 27 Deductible part of self-employment tax. Attach Schedule SE 27 28 Self-employed SEP, SIMPLE, and qualified plans 28 29 Self-employed health insurance deduction 29 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN 31a 32 IRA deduction 32 33 Student loan interest deduction 33 34 Tuition and fees. Attach Form 8917 34 35 Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 35 36 37 Subtract line 36 from line 22. This is your adjusted gross income 37 272,180

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	272,180
	39a	Check if: <input type="checkbox"/> You were born before January 2, 1947, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1947, <input type="checkbox"/> Blind. Total boxes checked 2		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
Standard Deduction for—	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	24,935
• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.	41	Subtract line 40 from line 38	41	247,245
• All others: Single or Married filing separately, \$5,800	42	Exemptions. Multiply \$3,700 by the number on line 6d	42	14,800
Married filing jointly or Qualifying widow(er), \$11,600	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	232,445
Head of household, \$8,500	44	Tax (see instr.). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> elec.	44	54,155
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	748
	46	Add lines 44 and 45	46	54,903
	47	Foreign tax credit. Attach Form 1116 if required	47	
	48	Credit for child and dependent care expenses. Attach Form 2441	48	
	49	Education credits from Form 8863, line 23	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit (see instructions)	51	
	52	Residential energy credits. Attach Form 5695	52	
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
	54	Add lines 47 through 53. These are your total credits	54	
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	54,903
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59a	Household employment taxes from Schedule H	59a	1,640
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
	60	Other taxes. Enter code(s) from instructions	60	
	61	Add lines 55 through 60. This is your total tax	61	56,543
Payments	62	Federal income tax withheld from Forms W-2 and 1099	62	55,735
	63	2011 estimated tax payments and amount applied from 2010 return	63	
If you have a qualifying child, attach Schedule EIC.	64a	Earned income credit (EIC)	64a	
	b	Nontaxable combat pay election <input type="checkbox"/> 64b		
	65	Additional child tax credit. Attach Form 8812	65	
	66	American opportunity credit from Form 8863, line 14	66	
	67	First-time homebuyer credit from Form 5405, line 10	67	
	68	Amount paid with request for extension to file	68	
	69	Excess social security and tier 1 RRTA tax withheld	69	
	70	Credit for federal tax on fuels. Attach Form 4136	70	
	71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71	
	72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	55,735
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	
Direct deposit? See instructions.	74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	74a	
	b	Routing number <input type="text"/>		
	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number <input type="text"/>		
	75	Amount of line 73 you want applied to your 2012 estimated tax	75	
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	808
	77	Estimated tax penalty (see instructions)	77	

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Designee's name **DAVID HIXSON** Personal identification number (PIN) **22046** Phone no. **305-944-7001**

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.

Your signature: Date: Your occupation: **FIRE FIGHTER** Daytime phone number:

Spouse's signature. If a joint return, both must sign. Date: Spouse's occupation: **JUDGE** If the IRS sent you an Identify Protection PIN, enter it here (see instr.):

Paid Print/Type preparer's name: **DAVID HIXSON** Preparer's signature: **DAVID HIXSON** Date: **04/09/12** Check if self-employed PTIN: **P00234392**

Preparer Use Only Firm's name: **HIKSON, MARIN, DESANCTIS & COMPANY, P.A.** Firm's EIN: **59-2810589**
 Firm's address: **1557 NE 164TH ST STE 201 NORTH MIAMI BEACH FL 33162-4077** Phone no.: **305-944-7001**

**SCHEDULE A
(Form 1040)**

Itemized Deductions

OMB No. 1545-0074

2011

Attachment Sequence No. **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

DAVID J. & LUISE S. MARTIN

2012 APR 13 PM 4:07

Your social security number

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)			
	2	Enter amount from Form 1040, line 38	2		
	3	Multiply line 2 by 7.5% (.075)	3		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4	
Taxes You Paid	5 State and local (check only one box):				
	a	<input type="checkbox"/> Income taxes, or	5	2,230	
	b	<input checked="" type="checkbox"/> General sales taxes			
	6	Real estate taxes (see instructions)	6	6,964	
	7	Personal property taxes	7		
	8	Other taxes. List type and amount ▶	8		
	9	Add lines 5 through 8		9	9,194
	Interest You Paid	10	Home mortgage interest and points reported to you on Form 1098	10	14,645
		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 no., and address ▶	11	
12		Points not reported to you on Form 1098. See instructions for special rules	12	171	
13		Mortgage insurance premiums (see instructions)	13		
14		Investment interest. Attach Form 4952 if required. (See instructions.)	14		
15		Add lines 10 through 14		15	14,816
Gifts to Charity		16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	925
	17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17		
	18	Carryover from prior year	18		
	19	Add lines 16 through 18		19	925
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)		20	
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶ Union Dues	21	600	
	22	Tax preparation fees	22	775	
	23	Other expenses—investment, safe deposit box, etc. List type and amount ▶	23		
	24	Add lines 21 through 23	24	1,375	
	25	Enter amount from Form 1040, line 38	25	272,180	
	26	Multiply line 25 by 2% (.02)	26	5,444	
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-		27	0
Other Miscellaneous Deductions	28	Other—from list in instructions. List type and amount ▶		28	
Total Itemized Deductions	29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40		29	24,935
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>			

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1000 11-102 COUNTY
ELECTIONS DEPARTMENT

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number



DAVID J. & LUISE S. MARTIN

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section.

28	(a) Name	(b) Enter P for partnership, S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A					
B					
C					
D					

Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A				
B				
C				
D				
29a Totals				
b Totals				
30	Add columns (g) and (j) of line 29a			30
31	Add columns (f), (h), and (i) of line 29b			31
32	Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below			32

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A	KRIEGER FAMILY IRREVOCABLE TRUST I	65-6251551
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A	21	21	
B			
34a Totals		21	
b Totals	21		
35	Add columns (d) and (f) of line 34a		35 21
36	Add columns (c) and (e) of line 34b		36 21
37	Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below		37 0

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs)—Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40
41	Total income or (loss). Combine lines 26, 32, 37, 39, & 40. Enter the result here & on Form 1040, line 17, or Form 1040NR, line 18	41
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see instructions)	42
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43

Form **1116**

Foreign Tax Credit
(Individual, Estate, or Trust)

OMB No. 1545-0121

2011

Attachment Sequence No. **19**

Department of the Treasury
Internal Revenue Service (99)

◆ Attach to Form 1040, 1040NR, 1041, or 990-T.
◆ See separate instructions.

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Name
DAVID J. MARTIN
LUISE S. MARTIN

Identifying number as shown on page 1 of your tax return
2012 APR 13 PM 4:07

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Passive category income
- b General category income
- c Section 901(j) income
- d Certain income re-sourced by treaty
- e Lump-sum distributions

f Resident of (name of country) ◆ **US**

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

g Enter the name of the foreign country or U.S. possession ◆	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
VARIOUS				
1a Gross income from sources within country shown above and of the type checked above (see instructions): DIVIDENDS				1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, & you used an alternative basis to determine its source (see instructions) ◆ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	9,194			
b Other dedts. (attach stmt)				
c Add lines 3a and 3b	9,194			
d Gross foreign source income (see instructions)				
e Gross income from all sources (see instructions)	272,180			
f Divide line 3d by line 3e (see instructions)				
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use worksheet on page 14 of the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Foreign taxes paid or accrued									
	In foreign currency					In U.S. dollars				
	Taxes withheld at source on:				(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
(h) <input checked="" type="checkbox"/> Paid	(i) <input type="checkbox"/> Accrued	(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties		(m) Interest	(o) Dividends	(p) Rents and royalties		
A										
B										
C										

8 Add lines A through C, column(s). Enter the total here and on line 9, page 2 ◆ 8

For Paperwork Reduction Act Notice, see instructions.

DAVID J. & LUISE S. MARTIN

Form 1116 (2011)

Part III Figuring the Credit

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 WASHINGTON COUNTY
 ELECTIONS DEPARTMENT

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	
10	Carryback or carryover (attach detailed computation)	10	
11	Add lines 9 and 10	11	
12	Reduction in foreign taxes (see instructions)	12	
13	Taxes reclassified under high tax kickout (see instructions)	13	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15	
16	Adjustments to line 15 (see instructions)	16	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	
18	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	
20	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 Caution: If you are completing line 20 for separate category e (lump-sum distributions), see instructions.	20	
21	Multiply line 20 by line 19 (maximum amount of credit)	21	
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV (see instructions)	22	

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on passive category income	23	
24	Credit for taxes on general category income	24	
25	Credit for taxes on certain income re-sourced by treaty	25	
26	Credit for taxes on lump-sum distributions	26	
27	Add lines 23 through 26	27	
28	Enter the smaller of line 20 or line 27	28	
29	Reduction of credit for international boycott operations. See instructions for line 12	29	
30	Subtract line 29 from line 28. This is your foreign tax credit . Enter here and on Form 1040, line 47; Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	0

Form **6251**

Alternative Minimum Tax—Individuals

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (99)

◆ See separate instructions.

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Attachment Sequence No **32**

◆ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR

DAVID J. & LUISE S. MARTIN

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Your social security number

Part I 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 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	247,245
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	
3	Taxes from Schedule A (Form 1040), line 9	9,194
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	0
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	
6	Skip this line. It is reserved for future use	
7	Tax refund from Form 1040, line 10 or line 21	
8	Investment interest expense (difference between regular tax and AMT)	
9	Depletion (difference between regular tax and AMT)	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	
11	Alternative tax net operating loss deduction	
12	Interest from specified private activity bonds exempt from the regular tax	
13	Qualified small business stock (7% of gain excluded under section 1202)	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	
17	Disposition of property (difference between AMT and regular tax gain or loss)	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	
19	Passive activities (difference between AMT and regular tax income or loss)	0
20	Loss limitations (difference between AMT and regular tax income or loss)	0
21	Circulation costs (difference between regular tax and AMT)	
22	Long-term contracts (difference between AMT and regular tax income)	
23	Mining costs (difference between regular tax and AMT)	
24	Research and experimental costs (difference between regular tax and AMT)	
25	Income from certain installment sales before January 1, 1987	
26	Intangible drilling costs preference	
27	Other adjustments, including income-based related adjustments	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$223,900, see instructions.)	256,439

Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2011, 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 . . . \$48,450 Married filing jointly or qualifying widow(er) . . . 150,000 . . . 74,450 Married filing separately . . . 75,000 . . . 37,225 If line 28 is over the amount shown above for your filing status, see instructions.	47,840
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	208,599
31	• If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • 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 the back and enter the amount from line 54 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.	54,903
32	Alternative minimum tax foreign tax credit (see instructions)	
33	Tentative minimum tax. Subtract line 32 from line 31	54,903
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Schedule J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Schedule J (see instructions)	54,155
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	748

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **6251** (2011)

DAVID J. & LUISE S. MARTIN

Form 6251 (2011)

Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in the instructions.

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for this line	36	208,599
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	33
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	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 refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39	33
40	Enter the smaller of line 36 or line 39	40	33
41	Subtract line 40 from line 36	41	208,566
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	54,898
43	Enter: <ul style="list-style-type: none"> • \$69,000 if married filing jointly or qualifying widow(er), • \$34,500 if single or married filing separately, or • \$46,250 if head of household. 	43	69,000
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, 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	232,412
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	33
47	Enter the smaller of line 45 or line 46	47	
48	Subtract line 47 from line 46	48	33
49	Multiply line 48 by 15% (.15)	49	5
If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50.			
50	Subtract line 46 from line 40	50	
51	Multiply line 50 by 25% (.25)	51	
52	Add lines 42, 49, and 51	52	54,903
53	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	53	54,908
54	Enter the smaller of line 52 or line 53 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31	54	54,903

**SCHEDULE H
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)
Name of employer

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

◆ Attach to Form 1040, 1040NR, 1040-SS, or 1041.

◆ See separate instructions.

OMB No. 1545-1971

2011

Attachment
Sequence No. **44**

Social security number

65-1014825

Employer identification number

65-1014825

ELECTIONS DEPARTMENT

DAVID J. MARTIN

A Did you pay any one household employee cash wages of \$1,700 or more in 2011? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions before you answer this question.)

- Yes.** Skip lines B and C and go to line 1.
- No.** Go to line B.

B Did you withhold federal income tax during 2011 for any household employee?

- Yes.** Skip line C and go to line 5.
- No.** Go to line C.

C Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2010 or 2011 to all household employees? (Do not count cash wages paid in 2010 or 2011 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Do not file this schedule.
- Yes.** Skip lines 1-7 and go to line 8. (Calendar year taxpayers having no household employees in 2011 do not have to complete this form for 2011.)

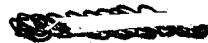
Part I Social Security, Medicare, and Federal Income Taxes

1	Total cash wages subject to social security taxes	1	10,400	
2	Social security taxes. Multiply line 1 by 10.4% (.104)	2		1,082
3	Total cash wages subject to Medicare taxes	3	10,400	
4	Medicare taxes. Multiply line 3 by 2.9% (.029)	4		302
5	Federal income tax withheld, if any	5		
6	Total social security, Medicare, and federal income taxes. Add lines 2, 4, and 5	6		1,384

7 Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2010 or 2011 to all household employees? (Do not count cash wages paid in 2010 or 2011 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Include the amount from line 6 above on Form 1040, line 59a. If you are not required to file Form 1040, see the line 7 instructions.
- Yes.** Go to line 8.

DAVID J. MARTIN



Schedule H (Form 1040) 2011

Part II Federal Unemployment (FUTA) Tax

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8 Did you pay unemployment contributions to only one state? (If you paid contributions to a credit reduction state, see instructions and check "No.")

Yes No

8		X
9	X	
10		X

9 Did you pay all state unemployment contributions for 2011 by April 17, 2012? Fiscal year filers see instructions

10 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?

Next: If you checked the "Yes" box on all the lines above, complete Section A.

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HARRIS COUNTY ELECTIONS DEPARTMENT

If you checked the "No" box on any of the lines above, skip Section A and complete Section B.

Section A

11 Name of the state where you paid unemployment contributions

12 Contributions paid to your state unemployment fund

12

13 Total cash wages subject to FUTA tax

13

14 FUTA tax. Multiply the portion of the wages on line 13 paid before July 1 by .008. Multiply the portion of the wages on line 13 paid after June 30 by .006. Enter the sum of those two amounts on line 14, skip Section B, and go to line 23

14

Section B

15 Complete all columns below that apply (if you need more space, see instructions):

(a) Name of state	(b) Taxable wages (as defined in state act)	(c) State experience rate period		(d) State experience rate	(e) Multiply col. (b) by .054	(f) Multiply col. (b) by col. (d)	(g) Subtract col. (f) from col. (e). If zero or less, enter -0-	(h) Contributions paid to state unemployment fund
		From	To					
FL	7,000	01/01	12/31	0.0103	378	72	306	72

16 Totals

16

306

72

17 Add columns (g) and (h) of line 16

17

378

18 Total cash wages subject to FUTA tax (see the line 13 instructions)

18

10,400

19 Multiply the portion of the wages on line 18 paid before July 1 by 6.2% (.062). Multiply the portion of the wages on line 18 paid after June 30 by 6.0% (.060). Enter the sum of those amounts on line 19

19

634

20 Multiply line 18 by 5.4% (.054)

20

562

21 Enter the smaller of line 17 or line 20

21

378

(Employers in a credit reduction state must use the worksheet on page H-7 and check here)

22 FUTA tax. Subtract line 21 from line 19. Enter the result here and go to line 23

22

256

Part III Total Household Employment Taxes

23 Enter the amount from line 6. If you checked the "Yes" box on line C of page 1, enter -0-

23

1,384

24 Add line 14 (or line 22) and line 23

24

1,640

25 Are you required to file Form 1040?

Yes. Stop. Include the amount from line 24 above on Form 1040, line 59a. Do not complete Part IV below.

No. You may have to complete Part IV. See instructions for details.

Part IV Address and Signature - Complete this part only if required. See the line 25 instructions.

Address (number and street) or P.O. box if mail is not delivered to street address

Apt., room, or suite no.

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

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature		Date	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Firm's name	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's address	Firm's EIN	
		Phone no.	

DAVID J. & LUISE S. MARTIN



Form 8582 (2011)

Caution: The worksheets must be filed with your tax return. Keep a copy for your records.

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Worksheet 1—For Form 8582, Lines 1a, 1b, and 1c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
KRIEGER FAMILY IRREVOCABLE TRUST I	21		369		348
Total. Enter on Form 8582, lines 1a, 1b, and 1c	21		369		

Worksheet 2—For Form 8582, Lines 2a and 2b (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

Worksheet 3—For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
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.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total			1.00		

Worksheet 5—Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
KRIEGER FAMILY IRREVOCABLE TRUST I	Sch E2	348	1.0000	348
Total		348	1.00	348

DAVID J. & LUISE S. MARTIN



Form 8582 (2011)

Worksheet 6—Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
KRIEGER FAMILY IRREVOCABLE TRUST I	Sch E2	369	348	21
Total	◆	369	348	21

Worksheet 7—Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
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 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- ◆					
Total ◆			1.00		

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 ELECTIONS DEPARTMENT

Form **8582**

**AMT Version
Passive Activity Loss Limitations**

OMB No. 1545-1008

Department of the Treasury
Internal Revenue Service (99)

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

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2011
Attachment
Sequence No. **88**

Name(s) shown on return

Identifying number

DAVID J. & LUISE S. MARTIN

2012 APR 13 PM 4:03

Part I 2011 Passive Activity Loss

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.

DAVID J. & LUISE S. MARTIN
ELECTIONS DEPARTMENT

Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)

1a	Activities with net income (enter the amount from Worksheet 1, column (a))	21	
1b	Activities with net loss (enter the amount from Worksheet 1, column (b))		
1c	Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	364	
1d	Combine lines 1a, 1b, and 1c		-343

Commercial Revitalization Deductions From Rental Real Estate Activities

2a	Commercial revitalization deductions from Worksheet 2, column (a)		
2b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)		
2c	Add lines 2a and 2b		

All Other Passive Activities

3a	Activities with net income (enter the amount from Worksheet 3, column (a))		
3b	Activities with net loss (enter the amount from Worksheet 3, column (b))		
3c	Prior years unallowed losses (enter the amount from Worksheet 3, column (c))		
3d	Combine lines 3a, 3b, and 3c		

4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used		-343
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- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
 - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
 - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

5	Enter the smaller of the loss on line 1d or the loss on line 4		343
6	Enter \$150,000. If married filing separately, see instructions	150,000	
7	Enter modified adjusted gross income, but not less than zero (see instructions) Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.	272,180	
8	Subtract line 7 from line 6		
9	Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions		
10	Enter the smaller of line 5 or line 9 If line 2c is a loss, go to Part III. Otherwise, go to line 15.		0

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions		
12	Enter the loss from line 4		
13	Reduce line 12 by the amount on line 10		
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13		

Part IV Total Losses Allowed

15	Add the income, if any, on lines 1a and 3a and enter the total		21
16	Total losses allowed from all passive activities for 2011. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return		21

For Paperwork Reduction Act Notice, see instructions.

AMT Version

DAVID J. & LUISE S. MARTIN

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Form 8582 (2011)

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.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
KRIEGER FAMILY IRREVOCABLE TRUST I	21		364		343
Total. Enter on Form 8582, lines 1a, 1b, and 1c	21		364		

Worksheet 2—For Form 8582, Lines 2a and 2b (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

Worksheet 3—For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
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.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total			1.00		

Worksheet 5—Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
KRIEGER FAMILY IRREVOCABLE TRUST I	Sch E2	343	1.0000	343
Total		343	1.00	343

AMT Version

DAVID J. & LUISE S. MARTIN

Form 8582 (2011)

~~XXXXXXXXXX~~
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Worksheet 6—Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
KRIEGER FAMILY IRREVOCABLE TRUST I	Sch E2	364	343	21
Total		364	343	21

Worksheet 7—Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
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 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-					
Total			1.00		

Form 1040	Qualified Dividends and Capital Gain Tax Worksheet	2011
------------------	---	-------------

Name

Taxpayer Identification Number

DAVID J. & LUISE S. MARTIN

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If you do not have to use the Schedule D Tax Worksheet use this worksheet to figure your tax if any of the following applies:

- You reported qualified dividends on Form 1040, line 9b (or Form 1040NR, line 10b)
 - You do not have to file Schedule D and you reported capital gain distributions on Form 1040, line 13 (or Form 1040NR, line 14)
- You do not have to file Schedule D if **both** of the following apply:
- The only amounts you have to report on Schedule D are capital gain distributions from Form(s) 1099-DIV, box 2a, or substitute statement(s)
 - None of the Forms 1099-DIV or substitute statements have an amount in box 2b (unrecaptured section 1250 gain), box 2c (section 1202 gain), or box 2d (collectibles (28%) gain).
- You are filing Schedule D and Schedule D, lines 15 and 16, are both more than zero.

HARRIS COUNTY
ELECTIONS DEPARTMENT

Qualified Dividends and Capital Gain Tax Worksheet - Form 1040, Line 44

1. Enter the amount from Form 1040, line 43. However if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheets	1.	232,445
2. Enter the amount from Form 1040, line 9b*	2.	33
3. Are you filing Schedule D?*		
<input type="checkbox"/> Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or 16 is a loss, enter -0-	3.	
<input checked="" type="checkbox"/> No. Enter the amount from Form 1040, line 13		
4. Add lines 2 and 3	4.	33
5. If filing Form 4952 (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise, enter -0-	5.	0
6. Subtract line 5 from line 4. If zero or less, enter -0-	6.	33
7. Subtract line 6 from line 1. If zero or less, enter -0-	7.	232,412
8. Enter:		
\$34,500 if single or married filing separately		
\$69,000 if married filing jointly or qualifying widow(er)	8.	69,000
\$46,250 if head of household		
9. Enter the smaller of line 1 or line 8	9.	69,000
10. Enter the smaller of line 7 or line 9	10.	69,000
11. Subtract line 10 from line 9. This amount is taxed at 0%	11.	0
12. Enter the smaller of line 1 or line 6	12.	33
13. Enter the amount from line 11	13.	0
14. Subtract line 13 from line 12	14.	33
15. Multiply line 14 by 15% (.15)	15.	5
16. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet	16.	54,150
17. Add lines 15 and 16	17.	54,155
18. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet	18.	54,161
19. Tax on all taxable income. Enter the smaller of line 17 or line 18. Also include this amount on Form 1040, line 44. (If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet)	19.	54,155

*If you are filing Form 2555 or 2555-EZ, these lines may be reduced (but not below zero) by your capital gain excess. Please refer to Foreign Earned Income Tax Worksheets - Excess Capital Gain for detail if the lines have been reduced.

Form **8582**

Passive Activity Loss Limitations

OMB No. 1545-1008

Department of the Treasury
Internal Revenue Service (99)

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

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Attachment Sequence No. **88**

Name(s) shown on return

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Identifying number

DAVID J. & LUISE S. MARTIN

DEKALB COUNTY
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Part I 2011 Passive Activity Loss

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)			
1a	Activities with net income (enter the amount from Worksheet 1, column (a))	21	
1b	Activities with net loss (enter the amount from Worksheet 1, column (b))		
1c	Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	369	
1d	Combine lines 1a, 1b, and 1c		-348
Commercial Revitalization Deductions From Rental Real Estate Activities			
2a	Commercial revitalization deductions from Worksheet 2, column (a)		
2b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)		
2c	Add lines 2a and 2b		
All Other Passive Activities			
3a	Activities with net income (enter the amount from Worksheet 3, column (a))		
3b	Activities with net loss (enter the amount from Worksheet 3, column (b))		
3c	Prior years unallowed losses (enter the amount from Worksheet 3, column (c))		
3d	Combine lines 3a, 3b, and 3c		
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used		-348

- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
 - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
 - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

5	Enter the smaller of the loss on line 1d or the loss on line 4		348
6	Enter \$150,000. If married filing separately, see instructions	150,000	
7	Enter modified adjusted gross income, but not less than zero (see instructions)	272,180	
8	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8. Subtract line 7 from line 6		
9	Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions		
10	Enter the smaller of line 5 or line 9		0

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions		
12	Enter the loss from line 4		
13	Reduce line 12 by the amount on line 10		
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13		

Part IV Total Losses Allowed

15	Add the income, if any, on lines 1a and 3a and enter the total		21
16	Total losses allowed from all passive activities for 2011. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return		21

For Paperwork Reduction Act Notice, see instructions.

Form 1040	General Sales Tax Deduction Worksheet	2011
------------------	--	-------------

Name as shown on return: **DAVID J. & LUISE S. MARTIN** Taxpayer Identification Number: ~~XXXXXXXXXX~~

State of **Florida** Locality of **MIAMI-DADE COUNTY (1.0%)** RECEIVED 2012 APR 13 PM 4:09

General Sales Tax from IRS Tables MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

- | | | |
|---|----|---------|
| 1. Enter the amount of adjusted gross income (AGI) from Form 1040, Line 37 | 1. | 272,180 |
| 2. Add the nontaxable amounts from Form 1040, lines 8b, 15a, 16a, 20a (Exclude rollovers and tax-free Sec. 1035 exchanges) | 2. | 1 |
| 3. Add the following nontaxable items: nontaxable combat pay, public assistance, veteran's benefits, and workers' compensation. Also include any amounts which increase spendable income, such as the refundable portion of refundable tax credits received in 2011 | 3. | |
| 4. Add lines 1 through 3, this is income for general sales tax table purposes | 4. | 272,181 |
| 5. Enter the amount from the sales tax table in the Schedule A instructions. Part-year residents, complete lines 6 - 8; Full-year residents skip lines 6 - 8 and enter the amount from line 5 on line 9 | 5. | 1,911 |
| 6. Enter the number of days of residence in state | 6. | |
| 7. Total days in year | 7. | 365 |
| 8. Divide line 6 by line 7 (rounded to at least 3 decimal places) | 8. | |
| 9. Multiply line 5 by line 8, this is the deductible general sales tax using the IRS table. | 9. | 1,911 |


Local Sales Tax Using IRS Tables

- | | | |
|--|-----|--------|
| 10. Enter the amount from the sales tax table in the Schedule A instructions. | 10. | 1,911 |
| 11. If you are a resident of Alaska, Arizona, Arkansas, California (Los Angeles County only), Colorado, Georgia, Illinois, Louisiana, Missouri, New York State, North Carolina, South Carolina, Tennessee, Utah, or Virginia, enter the amount from the applicable Optional Local Sales Tax Table in the Schedule A instructions. | 11. | |
| 12. Enter the local general sales tax rate (exclude statewide local sales tax rate) | 12. | 1.0000 |
| 13. Enter the state general sales tax rate (include statewide local sales tax rate) | 13. | 6.0000 |
| 14. Divide line 12 by line 13 (rounded to at least 3 decimal places) | 14. | 0.167 |
| 15. If you entered an amount on line 11, multiply line 11 by line 12. This is the local sales tax using the optional local sales tax tables. Part-year residents, complete lines 16 - 18; Full-year residents skip lines 16 - 18 and enter the amount from line 15 on line 19. If you did not enter an amount on line 11, multiply line 10 by line 14. This is the local sales tax using the optional state and certain local sales tax tables. Part-year residents, complete lines 16 - 18; Full-year residents skip lines 16 - 18 and enter the amount from line 15 on line 19 | 15. | 319 |
| 16. Enter the number of days of residence in locality | 16. | |
| 17. Total days in year | 17. | 365 |
| 18. Divide line 16 by line 17 (rounded to at least 3 decimal places) | 18. | |
| 19. Multiply line 15 by line 18. This is the deductible general local sales tax using the IRS tables. | 19. | 319 |

General Sales Tax Summary

- | | | |
|---|-----|-------|
| 20. Enter the sum of line 9 from all General Sales Tax Deduction Worksheets | 20. | 1,911 |
| 21. Enter the sum of line 19 from all General Sales Tax Deduction Worksheets | 21. | 319 |
| 22. Add lines 20 and 21, this is the total General Sales taxes using the tables | 22. | 2,230 |
| 23. Enter the actual state and local general sales taxes paid | 23. | |
| 24. Enter the greater of line 22 or line 23 | 24. | 2,230 |
| 25. Enter the state and local taxes paid on specified items (major purchases) | 25. | |
| 26. Add lines 24 and 25, this is the deductible General Sales tax | 26. | 2,230 |
| 27. Enter total state and local income taxes paid | 27. | |

Enter the greater of line 26 or 27 on Schedule A, line 5. If line 26 is greater, mark Schedule A, line 5b. If line 27 is greater, mark Schedule A, line 5a.

Form 1116	Foreign Tax Credit Worksheet	2011
Name DAVID J. & LUISE S. MARTIN		Taxpayer Identification Number 

If you have qualified dividends or capital gains, you may be required to use the worksheet on this page to make adjustments to those qualified dividends and gains before taking them into account on line 18. If you qualify for the adjustment exception as detailed in the Form 1116 instructions, no adjustment is necessary. If you figured your tax using the **Qualified Dividends and Capital Gain Tax Worksheet**, complete the worksheet as follows: Skip lines 2 through 5. On line 6, enter the amount from line 14 of the **Qualified Dividends and Capital Gain Tax Worksheet**. Complete all other lines as instructed on the worksheet.

Worksheet for Form 1116, Page 2, Line 18

1. Enter the amount from Form 1040, line 41 or Form 1040NR, line 39	1.	<u>247,245</u>
2. Enter your worldwide 28% gains (see instructions)	2.	_____
3. Multiply line 2 by .2000	3.	_____
4. Enter your worldwide 25% gains (see instructions)	4.	_____
5. Multiply line 4 by .2857	5.	_____
6. Enter your worldwide 15% gains and qualified dividends (see instructions)	6.	<u>33</u>
7. Multiply line 6 by .5714	7.	<u>19</u>
8. Enter your worldwide 0% gains and qualified dividends (see instructions)	8.	_____
9. Add lines 3, 5, 7 and 8	9.	<u>19</u>
10. Subtract line 9 from line 1. Enter the result here and on Form 1116, line 18	10.	<u>247,226</u>

Please refer to the Form 6251 instructions for the alternative minimum tax amounts reported on this worksheet

Worksheet for AMT Form 1116, Page 2, Line 18

1. Enter the amount from Form 6251, line 28	1.	<u>256,439</u>
2. Enter the amount from Form 6251, line 50	2.	_____
3. Multiply line 2 by .1071	3.	_____
4. Enter the amount from Form 6251, line 48	4.	<u>33</u>
5. Multiply line 4 by .4643	5.	<u>15</u>
6. Enter the amount from Form 6251, line 47	6.	_____
7. Add lines 3, 5 and 6	7.	<u>15</u>
8. Subtract line 7 from line 1. Enter the result here and on the AMT Form 1116, line 18	8.	<u>256,424</u>

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Form 1040	Foreign Tax Credit Carryover Worksheet	2011
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Name DAVID J. & LUISE S. MARTIN	Taxpayer Identification Number
---	------------------------------------

Foreign Income Category Passive Income

Regular

	Foreign Taxes Available	Maximum Credit Allowable	Unused (+) or Excess (-)	Carryback Applied from CY	Carryforward Applied to CY	* CY Unused (+) or Excess (-)
2001						
2002						
2003	1	2	-1			-1
2004						
2005						
2006						
2007						
2008	2	3	-1			-1
2009	6	65	-59			-59
2010						
2011						

* Amounts flow to the Foreign Tax Credit Carryover Report

Alternative Minimum Tax

	Foreign Taxes Available	Maximum Credit Allowable	Unused (+) or Excess (-)	Carryback Applied from CY	Carryforward Applied to CY	* CY Unused (+) or Excess (-)
2001						
2002						
2003	1	2	-1			-1
2004						
2005						
2006						
2007						
2008	2	4	-2			-2
2009	6	82	-76			-76
2010						
2011						

* Amounts flow to the Foreign Tax Credit Carryover Report

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Form **1040**

AMT Schedule D Tax Worksheet

2011

Name
DAVID J. & LUISE S. MARTIN

Taxpayer Identification Number
~~XXXXXXXXXX~~

NOTE: All forms referenced below refer to the AMT versions

- 1. Enter the amount from Form 6251, line 30. (However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter instead the amount from line 3 of the AMT Foreign Eamed Income Tax Worksheet on page 9 of the Form 6251 instructions) 1. 208,599
- 2. Enter your qualified dividends from Form 1040, line 9b (or Form 1040NR, line 10b) 2. 33
- 3. Form 4952, line 4g amount 3. _____
- 4. Form 4952, line 4e amount 4. _____
- 5. Subtract line 4 from line 3. If zero or less, enter -0- 5. 0
- 6. Subtract line 5 from line 2. If zero or less, enter -0- 6. 33
- 7. Enter the **smaller** of line 15 or line 16 of Schedule D 7. _____
- 8. Enter the **smaller** of line 3 or line 4 8. _____
- 9. Subtract line 8 from line 7. If zero or less, enter -0- 9. 0
- 10. Add lines 6 and 9 10. 33
- 11. Add the AMT 28% Rate Capital Gain and the AMT Unrecaptured Section 1250 Gain 11. _____
- 12. Enter the **smaller** of line 9 or line 11 12. _____
- 13. Subtract line 12 from line 10. Enter the result here and on Form 6251, line 37 13. 33

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Form 1040	AMT Disposition of Property/Exemption Worksheets	2011
------------------	---	-------------

Name **DAVID J. & LUISE S. MARTIN** Taxpayer Identification Number XXXXXXXXXX

Form 6251, Line 17 - Disposition of Property (difference between AMT and Regular Tax Gain or Loss)

- | | | |
|--|----|---|
| 1. Enter the amount of the AMT ordinary gain(loss) calculated on line 17 of AMT 4797 | 1. | |
| 2. Enter the amount of ordinary gain(loss) calculated on Form 4797, line 17 | 2. | |
| 3. Subtract line 2 from line 1. This is the adjustment from the disposition of ordinary income property. | 3. | 0 |
| 4. Enter the amount of the AMT taxable gain(loss) calculated on the AMT Sch D | 4. | |
| 5. Enter the amount of the taxable capital gain(loss) reported 1040 line 13 | 5. | |
| 6. Subtract line 5 from line 4. This is the adjustment from the disposition of capital income property. | 6. | 0 |
| 7. Add lines 3 and 6. This is the difference between AMT and regular tax gain or loss.
Enter the disposition of property adjustment on Form 6251 line 17 | 7. | 0 |

Form 6251, Line 29 - Exemption Worksheet

- | | | |
|---|-----|---------|
| 1. Enter \$48,450 if single or head of household; \$74,450 if married filing jointly or qualifying widow(er); \$37,225 if married filing separately | 1. | 74,450 |
| 2. Enter your alternative minimum taxable income (AMTI) from Form 6251, line 28 | 2. | 256,439 |
| 3. Enter \$112,500 if single or head of household; \$150,000 if married filing jointly or qualifying widow(er); \$75,000 if married filing separately | 3. | 150,000 |
| 4. Subtract line 3 from line 2. If zero or less, enter -0- | 4. | 106,439 |
| 5. Multiply line 4 by 25% (.25) | 5. | 26,610 |
| 6. Subtract line 5 from line 1. If zero or less, enter -0-. If any of the three conditions under Certain Children Under Age 24 apply to you, complete lines 7 through 10. Otherwise, stop here and enter this amount on Form 6251, line 29, and go to Form 6251, line 30 | 6. | 47,840 |
| 7. Minimum exemption amount for certain children under age 24 | 7. | |
| 8. Enter your earned income , if any. See instructions | 8. | |
| 9. Add lines 7 and 8 | 9. | |
| 10. Enter the smaller of line 6 or line 9 here and on Form 6251, line 29, and go to Form 6251, line 30 | 10. | |

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Form **1040** | **AMT Passive Activity and Loss Limit Adjustment Worksheet** | **2011**

Name **DAVID J. & LUISE S. MARTIN** Taxpayer Identification Number **[REDACTED]**

Column A	Activity Name	Form/Schedule	Unit	Basis	At-risk	Passive	PTP	Farm
	KRIEGER FAMILY IRREVOCABLE TRUST I	K1-T	1				X	
Column B								
Column C								
Column D								
Column E								

Current Inc / (Loss) Before Adjustments:	Column A	Column B	Column C	Column D	Column E
1a Sch C, E, F / 4835 Inc/(Loss)					
1b K1 Rec Sch E, P2 Inc / (Loss)	21				
1c K1 Rec Sch E, P1 Inc / (Loss)					
1d K1 Rec 1040, P1 Inc / (Loss)					
1e K1 Rec Sch A Deductions					
1f K1 Rec Form 4684 Losses					
1g K1 Rec Other Deductions					
1 Total Current Inc / (Loss) (Lines 1a to 1g)	21				

Adjustments & Preference Items:	Column A	Column B	Column C	Column D	Column E
2a Depreciation post '86					
2b Depletion					
2c Circulation expenditures					
2d Depreciation pre '87					
2e Long-term contracts					
2f Research & experimental					
2g Tax shelter farm					
2h Large partnership					
2i Mining costs / amortization					
2j Trust/Estate adjustment					
2 Total Adjustment & Preference (Lines 2a to 2j)					

Alternative Minimum Tax Income:	Column A	Column B	Column C	Column D	Column E
3a Current Inc/(Loss) (from Line 1) <small>At-risk recapture Excess distribution</small>	21				
3b Adjustments & Preference (from Line 2)					
3c PY Suspended Basis					
3d Disallowed Basis					
3e PY Suspended At-Risk					
3f Disallowed At-Risk					
3g Section 179 Adjustment + Excess Farm					
3h PY Suspended Passive	-364				
3i Disallowed Passive	343				
3 AMT Income / Loss (Line 3a to 3i)	0				

Regular Tax Income:	Column A	Column B	Column C	Column D	Column E
4a Current Inc/(Loss) (from Line 1) <small>At-risk recapture Excess distribution</small>	21				
4b PY Suspended Basis					
4c Disallowed Basis					
4d PY Suspended At-Risk					
4e Disallowed At-Risk					
4f Section 179 Adjustment + Excess Farm					
4g PY Suspended Passive	-369				
4h Disallowed Passive	348				
4 Regular Tax Inc / (Loss) (Lines 4a to 4h)	0				

Form 6251, Line 19 - Passive Activities (All activities marked passive or PTP)
5 Passive Activities (Line 3 less Line 4) **0**

Form 6251, Line 20 - Loss Limitations (All activities not marked passive or PTP)
6 Loss Limitation Activities (Line 3 less Line 4)

Total of all passive activities to Form 6251, Line 19 **0**

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Form **1040**

K-1 Reconciliation Worksheet - Sch E, B, D, Form 4797

2011

Name **LUISE S. MARTIN**

Entity Name **KRIEGER FAMILY IRREVOCABLE TRUST I EIN 65-6251551**

Entity Type **Trust/Estate**

Taxpayer Identification Number **K1T**

Screen **K1T**

Entire disposition of activity

Schedule E page 2	Current Year Amount	Passive Activity Type Rental Real Estate			Disallowed			PY Suspended Basis Loss	Disallowed Basis Limitation	PY Suspended At-risk Loss	Disallowed At-risk Limitation	PY Suspended Passive Loss	Disallowed Loss Limitation	Tax Return
		PY Suspended Basis Loss	Disallowed Basis Limitation	PY Suspended At-risk Loss	Disallowed At-risk Limitation	PY Suspended Passive Loss	Disallowed Loss Limitation							
Ordinary business income/-loss														
Net rental real estate income/-loss	1,762													
Other net rental income/-loss														
Guaranteed payments														
Section 179 expense														
Disallowed Section 179 expense														
Depletion														
Intangible drilling expensed														
Preproductive period expense														
Commercial revitalization deduct														
Reforestation expense deduct														
Other deductions	1,741													
Unreimbursed expenses														
Other incl/loss - Schedule E														
Debt financed acquisition														
Dependent care benefits														
Total Schedule E page 2	21											-369	348	0
Schedule E page 1														
Royalties														
Deductions-royalty income														
Depletion														
Total Schedule E page 1														
Schedule B														
Interest Income														
Tax-exempt interest income	1													1
Dividend Income	35													35
Qualified dividends (1040, Page 1)	33													33
Schedule D 8849-8781														
Short-term capital gain/-loss														
Long-term capital gain/-loss														
28% capital gain/-loss														
1256 contracts and straddles														
Form 4797														
4797 Part I														
4797 Part II														
Section 179/280F recapture														

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Form **1040**

K-1 Reconciliation Worksheet - AMT Version, Page 1

2011

Name **LUISE S. MARTIN**

Entity Name **KRIEGER FAMILY IRREVOCABLE TRUST I EIN 65-6251551**

Entity Type **Trust/Estate**

Taxpayer Identification Number

Screen **X1T**

K1 Unit **1**

Passive Activity Type Rental Real Estate

Entire disposition of activity

Schedule E page 2	Current Year Amount	Passive Activity Type Rental Real Estate		Disallowed		PY Suspended At-risk Loss	Disallowed At-risk Limitation	PY Suspended Passive Loss	Disallowed Loss Limitation	Tax Return
		PY Suspended Basis Loss	Disallowed Basis Limitation	PY Suspended At-risk Loss	Disallowed At-risk Limitation					
Ordinary business income/-loss										
Net rental real estate income/-loss	1,762									
Other net rental income/-loss										
Guaranteed payments										
Section 179 expense										
Disallowed Section 179 expense										
Depletion										
Intang drilling expensed										
Preproductive period expense										
Commercial revitalization deduct										
Reforestation expense deduct										
Other deductions	1,741									
Unreimbursed expenses										
Other inc/loss - Schedule E										
Debt financed acquisition										
Dependent care expense										
Depreciation adjustment post '86										
Depletion adjustment										
Circulation expenditures										
Depreciation pre '87										
Long-term contracts										
Research & experimental										
Tax shelter farm activities										
Large partnership adj (1065-B)										
Trust adj for minimum tax										
Total Schedule E page 2	21							-364	343	0
Schedule E page 1										
Royalties										
Deductions-royalty income										
Depletion										
Depletion adjustment										
Total Schedule E page 1										
Form 1040 page 1										
Other portfolio income/-loss										
Other income/-loss										
Penalty for early withdrawal										

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 WASHINGTON COUNTY
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Form **1040**

K-1 Reconciliation Worksheet - AMT Version, Page 2

2011

Name **LUISE S. MARTIN**

Entity Name **KRIEGER FAMILY IRREVOCABLE TRUST I EIN 65-6251551**

Taxpayer Identification Number **Screen K1T**

Entity Type **Trust/Estate**

Passive Activity Type **Rental Real Estate**

Entire disposition of activity

K1 Unit **1**

Schedule A	Current Year Amount	PY Suspended		Disallowed		PY Suspended		Disallowed		Alternative Minimum Tax Amount
		Basis Loss	Basis Limitation	At-risk Loss	At-risk Limitation	Passive Loss	Loss Limitation	Loss Limitation		
Cash contributions (50%)										
Cash contributions (30%)										
Noncash contributions (50%)										
Noncash contributions (30%)										
Cap gain prop 50% org (30%)										
Cap gain prop (20%)										
Portfolio deductions (2% floor)										
Portfolio deductions (other)										
Real estate taxes										
State income tax withheld										
Foreign taxes										
Investment int from 4952										
Form 4952										
Investment interest expense										
Form 4684										
Form 4684 it loss trade/business										
Form 4684 it loss income producing										
Form 4684 st loss income producing										
Other deductions										
Self-employed medical insurance										
Shareholder med ins not on Form W2										
Dependent care benefits (Form 2441)										
Schedule B/1040 Page 1										
Private activity bond interest										
Sch D - Alternative Minimum Tax										
Short-term capital gain/-loss										
Long-term capital gain/-loss										
28% capital gain/-loss										
1256 contracts and straddles (6781)										
Form 4797 - Alternative Minimum Tax										
4797 Part I										
4797 Part II										
Difference between AMT and regular income/loss										
Minimum tax income or loss	21									364
Regular tax income or loss	21									369
										343
										348
										0
										0

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Included on Form 6251, Line 19 - Passive activities

Form 1040	Passive Activity Deduction Worksheet	2011
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Name LUISE S. MARTIN		Taxpayer Identification Number XXXXXXXXXX	
Activity KRIEGER FAMILY IRREVOCABLE TRUST I	Form K1T	Unit 1	Entire Disposition of Activity
Type Rental real estate w/active participation			

Regular Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating	<u>369</u>		<u>21</u>	<u>348</u>
Schedule D - Short-term				
Schedule D - Long-term				
Schedule D - 28% rate				
Form 4797 - Part I				
Form 4797 - Part II				
Other Losses - 1040 pg 1				
Commercial revitalization				

Alternative Minimum Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating	<u>364</u>		<u>21</u>	<u>343</u>
Schedule D - Short-term				
Schedule D - Long-term				
Schedule D - 28% rate				
Form 4797 - Part I				
Form 4797 - Part II				
Other Losses - 1040 pg 1				
Commercial revitalization				

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Form 1040	Passive Activity MAGI Calculation	2011
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Name DAVID J. & LUISE S. MARTIN	Taxpayer Identification Number
---	------------------------------------

1 Adjusted gross income		1	272,180
2 Subtractions:			
2(a) Passive activity income	2(a)	21	
2(b) Taxable social security income	2(b)		
2(c) Other	2(c)		
2(d) Total subtractions	2(d)		21
3 Additions:			
3(a) Allowed passive activity losses	3(a)	21	
3(b) Rental real estate loss allowed to real estate professionals	3(b)		
3(c) Your IRA deduction	3(c)		
3(d) Spouse's IRA deduction	3(d)		
3(e) Domestic production activities deduction	3(e)		
3(f) One-half self-employment tax	3(f)		
3(g) Series EE & I Bond Interest	3(g)		
3(h) Other	3(h)		
Total additions	3(i)		21
4 Modified adjusted gross income		4	272,180

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Federal Statements

STATE OF FLORIDA

Form W-2, Box 12

Description	Amount
Section 457(b) contributions	\$ 300
Total	\$ 300

STATE OF FLORIDA

Form W-2, Box 14 - Other

Description	Amount
IRC Section 125 flexible benefits prog.	\$ 2,230
Total	\$ 2,230

Form 1040, Line 8b - Tax-exempt Interest

Payer	Amount
KRIEGER FAMILY IRREVOCABLE TRUST I	\$ 1
Total	\$ 1

Form 1040, Dividend Income

Payer	Ordinary Dividends	Qualified Dividends
KRIEGER FAMILY IRREVOCABLE TRUST I	\$ 35	\$ 33
Total	\$ 35	\$ 33

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 HAMILTON COUNTY
 ELECTIONS DEPARTMENT

Federal Statements

CITY OF CORAL GABLES

Form W-2, Box 12

Description	Amount
Section 457(b) contributions	\$ 6,590
Total	\$ 6,590

CITY OF CORAL GABLES

Form W-2, Box 14 - Other

Description	Amount
Union dues	\$ 600
Total	\$ 600

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ELECTIONS DEPARTMENT

Federal Statements**Schedule A, Line 5b - State and Local General Sales Taxes**

Description	Amount
General Sales Tax	\$ 2,230
Total	\$ 2,230

Schedule A, Line 6 - Real Estate Taxes

Description	Amount
PRINCIPAL RESIDENCE	\$ 6,964
Total	\$ 6,964

Schedule A, Line 10 - Home Mortgage Interest From Form 1098

Description	Amount
BANK OF AMERICA	\$ 14,645
Total	\$ 14,645

Schedule A, Line 12 - Points Not Reported on Form 1098

Description	Amount
BANK OF AMERICA	\$ 171
Total	\$ 171

Schedule A, Line 16 - Charitable Contributions by Cash or Check

Description	Amount
RANSOM EVERGLADES	\$ 300
MIAMI DADE COLLEGE FOUNDATION	75
CANCERFREE KIDS	200
WALK MS	100
BIKE MS	50
HANCOCK FRENCH WOODS ART	200
Total	\$ 925

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 ELECTIONS DEPARTMENT

Federal Statements

FROM K-1

Form 1116 line 3e - Gross Income from All Sources

Description	Amount
1040 lines 7-11, 15b-16b, 19-20b, 21	\$ 272,180
Total	\$ 272,180

FROM K-1

Form 1116 line 4a - Apportioned Home Mortgage Interest

Description	A	B	C
1116 line 3d gross frgn source income	\$	\$	\$
Less apportioned 2555 income, if any			
Gross foreign source income			
1116 line 3e all sources gross income			
Less Form 2555 excluded income, if any			
Gross income from all sources			
Gross foreign inc/gross inc all sources			
Schedule A home mortgage interest			
1116 line 4a home mortgage interest (mort int X apportionment factor)			

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 ELECTIONS DEPARTMENT

Federal Statements

FROM K-1

AMT Form 1116 line 3e - Gross Income from All Sources

<u>Description</u>	<u>Amount</u>
1040 lines 7-11, 15b-16b, 19-20b, 21	\$ 272,180
Total	<u>\$ 272,180</u>

FROM K-1

AMT Form 1116 line 4a - Apportioned Home Mortgage Interest

<u>Description</u>	<u>A</u>	<u>B</u>	<u>C</u>
1116 line 3d gross frgn source income	\$	\$	\$
Less apportioned 2555 income, if any			
Gross foreign source income			
1116 line 3e all sources gross income			
Less Form 2555 excluded income, if any			
Gross income from all sources			
Gross foreign inc/gross inc all sources			
AMT home mortgage interest			
1116 line 4a home mortgage interest (mort int X apportionment factor)			

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Federal Statements

Form 6251, Line 19 - Passive Activities

Description	Form/ Sch	AMT Inc/Loss	Regular Inc/Loss	Difference Line 20
KRIEGER FAMILY IRREVOCABLE TRUST I	Sch E2	\$ 0	\$ 0	\$ 0
Total		\$ 0	\$ 0	\$ 0

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ELECTIONS DEPARTMENT
HARRIS COUNTY

Federal Statements

Form 8582. Passive Activity Income and Allowed Losses

Activity Name	Screen	Unit #	Current Year Net Income	Current Year Net Loss	Prior Year Unallowed Loss	Unallowed Loss	Allowed Loss	Form Location
KRIEGER FAMILY IRREVOCABLE TRUST I	K1-T	1	\$ 21	\$ 0	\$ 369	\$ 348	\$ 21	Sch E Part III
Total			<u>\$ 21</u>	<u>\$ 0</u>	<u>\$ 369</u>	<u>\$ 348</u>	<u>\$ 21</u>	

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 ELECTIONS DEPARTMENT

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Form **1040** **Salaries & Wages Report** **2011**

Name **DAVID J. & LUISE S. MARTIN** Taxpayer Identification Number ~~XXXXXXXXXX~~

T/S	Employer	Federal Wages	Federal Withheld	Soc Sec Wages
A	S STATE OF FLORIDA	129,736	22,709	106,800
B	T CITY OF CORAL GABLES	142,394	33,026	
C				
D				
E				
F				
G				
H				
I				
J				
K				
L				
M				
		142,394	33,026	
Taxpayer		129,736	22,709	106,800
Spouse		272,130	55,735	106,800
Totals				

	Soc Sec Withheld	Medicare Wages	Medicare Withheld	Soc Sec Tips	Allocated Tips	Dep Care Ben	Other, Box 14
A	4,486	132,050	1,915				2,230
B		148,384	2,152				600
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
Taxpayer		148,384	2,152				600
Spouse		4,486	132,050				2,230
Totals		4,486	280,434	4,067			2,830

	State	State Wages	State Withheld	Name of Locality	Local Wages	Local Withheld
A	FL	129,736				
B	FL	142,394				
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						
M						
Taxpayer		142,394				
Spouse		129,736				
Totals		272,130				

ELECTIONS DIVISION
 COUNTY CLERK
 DEPARTMENT
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Form **1040****Two Year Comparison Report - Page 1****2010 & 2011**

Name

DAVID J. & LUISE S. MARTIN

Taxpayer Identification Number

	2010		2011		Differences
		MFJ		MFJ	
Filing Status					
Dependents claimed		2		2	
1. Salaries and wages	1.	253,491	272,130	18,639	
2. Interest income	2.	23	15	-8	
3. Tax exempt interest income	3.		1	1	
4. Dividend income	4.	16	35	19	
5. Qualified dividend income	5.	13	33	20	
6. Taxable state/local refunds	6.				
7. Alimony received	7.				
8. Business income/loss	8.				
9. Capital gain/loss	9.				
10. Other gains/losses	10.				
11. Taxable IRA distributions	11.				
12. Taxable pensions	12.				
13. Rent and royalty income including farm rental	13.				
14. Partnership/S corp income	14.				
15. Estate or trust income	15.				
16. Farm income/loss	16.				
17. Unemployment compensation	17.				
18. Taxable social security	18.				
19. Other income	19.				
20. Total income	20.	253,530	272,180	18,650	
21. Moving expenses	21.				
22. Self-employment tax adjustment	22.				
23. SEP/SIMPLE/Qualified plans deductions	23.				
24. SE health insurance	24.				
25. Forfeited interest	25.				
26. Alimony paid	26.				
27. IRA deductions	27.				
28. Student loan interest	28.				
29. Other adjustments	29.				
30. Adjusted gross income	30.	253,530	272,180	18,650	
31. Medical	31.				
32. Taxes	32.	11,982	9,194	-2,788	
33. Interest	33.	15,054	14,816	-238	
34. Contributions	34.	900	925	25	
35. Casualty losses	35.				
36. Miscellaneous expenses	36.				
37. Allowable itemized deductions	37.	27,936	24,935	-3,001	
38. Standard deduction	38.	11,400	11,600	200	
		Itemized	Itemized		
39. Deduction taken	39.	27,936	24,935	-3,001	
40. Subtract line 39 from line 30	40.	225,594	247,245	21,651	
41. Exemptions	41.	14,600	14,800	200	
42. Taxable income	42.	210,994	232,445	21,451	

ELECTIONS DEPARTMENT
 2012 APR 13 PM 4:10

Form 1040	Two Year Comparison Report - Page 2	2010 & 2011
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Name

DAVID J. & LUISE S. MARTIN

Taxpayer Identification Number

~~XXXXXXXXXX~~

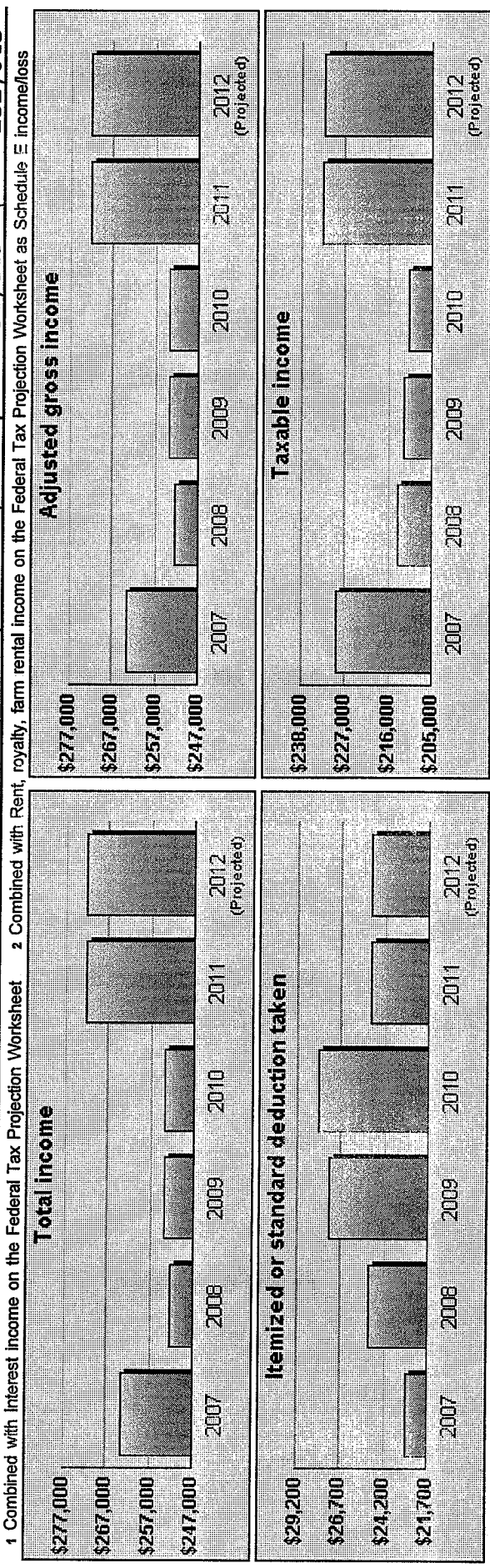
		2010	2011	Differences
43. Taxable income from 2YR page 1, line 42	43.	210,994	232,445	21,451
44. Tax on taxable income	44.	47,407	54,155	6,748
45. Alternative minimum tax	45.	1,457	748	-709
46. Child care credit	46.	520		-520
47. Education credits	47.			
48. Retirement savings credit	48.			
T 49. Child tax credit	49.			
a 50. General business credit	50.			
x 51. Other credits	51.			
52. Total credits	52.	520		-520
C 53. Net tax liability	53.	48,344	54,903	6,559
o 54. Self-employment taxes	54.			
m 55. Other taxes	55.	1,648	1,640	-8
p 56. Total tax	56.	49,992	56,543	6,551
u 57. Income tax withheld	57.	53,759	55,735	1,976
t 58. Estimated tax payments	58.			
a 59. Earned income credit	59.			
t 60. Additional Child tax credit	60.			
i 61. Other refundable tax credits	61.			
o 62. Other payments	62.			
n 63. Total payments	63.	53,759	55,735	1,976
64. Tax due/-refund	64.	-3,767	808	4,575
65. Penalties and interest	65.			
66. Net tax due/-refund	66.	-3,767	808	4,575
67. Refund applied to estimated tax payments	67.			
68. Refund received	68.	-3,767		3,767
69. Marginal tax rate	69.	33.0%	33.0%	
70. Effective tax rate	70.	24%	24%	

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 WASHINGTON COUNTY
 ELECTIONS DEPARTMENT

Form **1040** **Tax Return History Report - Page 1** **2011**

Name **DAVID C. & LUISE S. MARTIN** Taxpayer Identification Number **██████████**

Filing Status	2007	2008	2009	2010	2011	2012 Projected
	MFJ	MFJ	MFJ	MFJ	MFJ	MFJ
Salaries and wages	258,721	251,035	253,113	253,491	272,130	272,130
Interest income	778	388	110	23	15	50
Dividend income	1,144	670	432	16	35	1
Business income/loss						
Capital gains/losses	2,514					
Other gains/losses						
IRA distributions, pensions, annuities						
Rent, royalty, farm rental income						
Partnership/S corp income						
Estate or trust income	356	182	2			
Farm income/loss						
Other income/loss						
Total income	263,513	252,275	253,657	253,530	272,180	272,180
Total adjustments						
Adjusted gross income	263,513	252,275	253,657	253,530	272,180	272,180
Allowable itemized deductions	22,963	25,066	27,375	27,936	24,935	24,935
Standard deduction	10,700	11,900	13,555	11,400	11,600	11,900
Itemized or standard deduction taken	22,963	25,066	27,375	27,936	24,935	24,935
Exemptions	11,424	13,533	14,405	14,600	14,800	15,200
Taxable income	229,126	213,676	211,877	210,994	232,445	232,045



Form **1040**

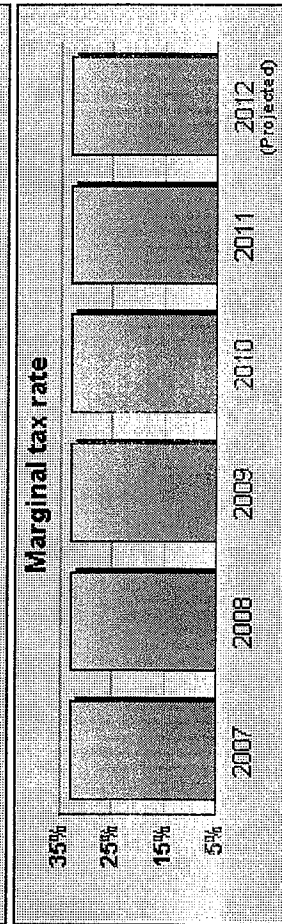
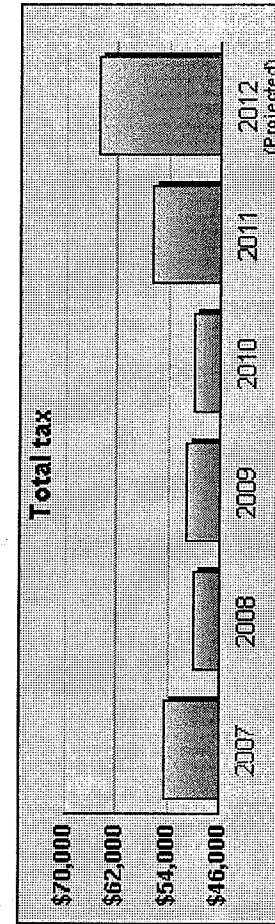
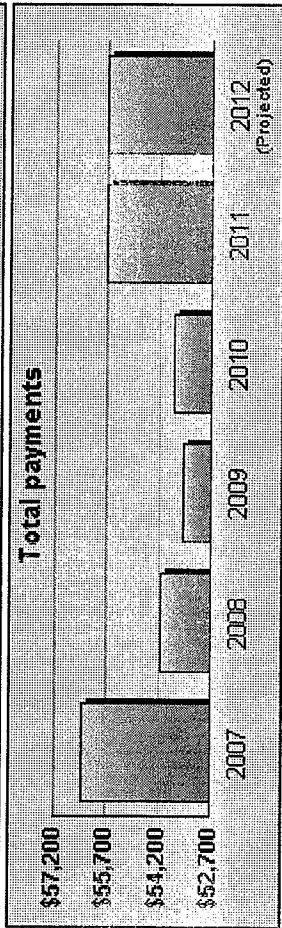
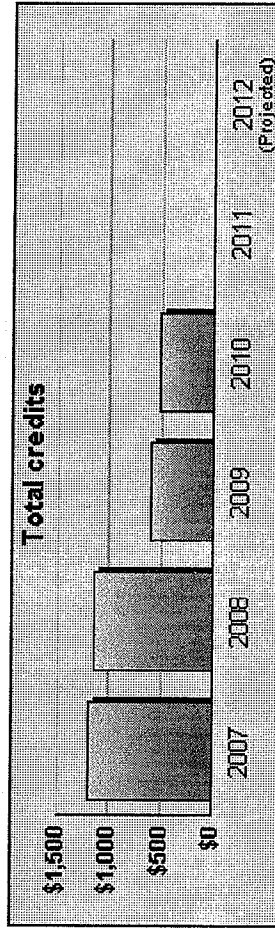
Tax Return History Report - Page 2

2011

Name **DAVID J & LUISE S. MARTIN**

Taxpayer Identification Number

	2007	2008	2009	2010	2011	2012 Projected
Taxable income	229,126	213,676	211,877	210,994	232,445	232,045
Tax on taxable income	54,239	49,149	47,683	47,407	54,155	53,475
Alternative minimum tax	428	836	2,904	1,457	748	9,674
Total credits	1,200	1,139	606	520		
Net tax liability	53,467	48,846	49,981	48,344	54,903	63,149
Self-employment taxes						
Other taxes	1,047	1,047	1,047	1,648	1,640	1,640
Total tax	54,514	49,893	51,028	49,992	56,543	64,789
Income tax withheld	56,382	54,155	53,513	53,759	55,735	55,735
Estimated tax payments						
Other payments						
Total payments	56,382	54,155	53,513	53,759	55,735	55,735
Total due/-refund	-1,868	-4,262	-2,485	-3,767	808	9,054
Penalties and interest						
Net tax due/-refund	-1,868	-4,262	-2,485	-3,767	808	9,054
Refund applied to estimated tax payments						
Refund received	-1,868	-4,262	-2,485	-3,767		
Marginal tax rate	33.0%	33.0%	33.0%	33.0%	33.0%	33.0%
Effective tax rate	24%	23%	24%	24%	24%	28%



Form **8948**
(Rev. December 2011)

Department of the Treasury
Internal Revenue Service

Preparer Explanation for Not Filing Electronically

OMB No. 1545-2200

▶ Attach to taxpayer's Form 1040, 1040A, 1040EZ, or Form 1041.

Attachment Sequence No. **173**

Name(s) on tax return

DAVID J. & LUISE S. MARTIN

Taxpayer's identifying number

589-20-1989

Three out of four taxpayers now use IRS e-file. Go to www.irs.gov/efile for details on using IRS e-file. The benefits of electronic filing include the following.

- Faster refunds
- Secure transmissions
- E-payment options
- More accurate returns
- Easier filing method
- Receipt acknowledged

Check the applicable box to indicate the reason this return is not being filed electronically. Do not check more than one box.

1 Taxpayer chose to file this return on paper.

2 The preparer received a waiver from the requirement to electronically file the tax return.

Waiver Reference Number _____ Approval Letter Date _____

3 The preparer is a member of a recognized religious group that is conscientiously opposed to filing electronically.

4 This return was rejected by IRS e-file and the reject condition could not be resolved.

Reject code: _____ Number of attempts to resolve reject: _____

5 The preparer's e-file software package does not support Form _____ or Schedule _____ attached to this return.

6 Check the box that applies and provide additional information if requested.

a The preparer is ineligible to file electronically because IRS e-file does not accept foreign preparers without social security numbers who live and work abroad.

b The preparer is ineligible to participate in IRS e-file.

c Other: Describe below the circumstances that prevented the preparer from filing this return electronically.

ENTRIES ON SCHEDULE H DO NOT ALLOW FOR ELECTRONIC FILING

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 TAXPAYER SECURITY
 ELECTIONS DEPARTMENT