

Sales of Stocks, Securities, and Other Investment Property

Please provide copies of all Forms 1099-B and 1099-S

- Did you have any securities become worthless during 2008? (1 = Yes, 2 = No) __[9]
- Did you have any debts become uncollectible during 2008? (1 = Yes, 2 = No) __[10]
- Did you have any commodity sales, short sales, or straddles? (1 = Yes, 2 = No) __[11]
- Did you exchange any securities or investments for something other than cash? (1 = Yes, 2 = No) __[13]

T/S/J	Description of Property	Date Acquired	Date Sold	Gross Sales Price <small>(Less expenses of sale)</small>	Cost or Other Basis
	Short - Term Gains Smith Barney 057-80441	Various	Various	+ 1,052,327 ^[1]	+ 1,131,680 ^[2]
	Long - Term Gains Smith Barney 057-80441	Various	Various	+ 385,817	+ 347,542
	Short - Term Gains Smith Barney 057-80444	Various	Various	+ 113,885	+ 158,651
	Long - Term Gains Smith Barney 057-80444	Various	Various	+ 37,314	+ 26,849
	Short - Term Gains Smith Barney 057-80564	Various	Various	+ 689,951	+ 788,310
	Long - Term Gains Smith Barney 057-80564	Various	Various	+ 240,169	+ 238,169
	Short - Term Gains Smith Barney 057-80605	Various	Various	+ N/A	+ N/A
	Long - Term Gains Smith Barney 057-80605	Various	Various	+ 58,932	+ 59,143
	Short Sales Not Closed - Proceeds Reported on 1099	Smith Barney 057-80441		+ 55,507	
				+	+
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I sorted through all of the trades on the Smith Barney 1099's, and corrected the information. It is attached on an Excel spreadsheet printout. I can send the file to you if you can use it electronically. Just let me know. I am happy that you simply enter the totals above rather than the entire list of individual trades. If the IRS later asks for the detail, we can send it.

Control Totals +	Income	Form ID: D
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Other Income

Please provide all Forms 1099 showing miscellaneous income and any IRS Notice received such as Notice 1378

The Economic Stimulus Act of 2008 provided for economic stimulus payments (rebates) to be distributed to eligible individuals who filed a 2007 tax return. The stimulus payment you received is not taxable income to you. Since the economic stimulus payment was based upon your 2007 tax return, you may be entitled to a recovery rebate credit on your 2008 return. Enter the amount of the stimulus payment (before offset) you received below. If you filed a joint return in 2007, and your filing status did not change in 2008, fill in only the Taxpayer/Joint column. However, if your filing status changed to married filing joint in 2008 and your spouse received a separate stimulus payment, enter the amount in the Spouse column. If you did not receive a stimulus payment (before offset), indicate by checking the box provided below.

	Taxpayer/Joint		Spouse
Economic stimulus payment (rebate) received in 2008	+ _____ [23]	+	_____ [24]
Mark if you did not receive an economic stimulus payment (rebate)	_____ [26]		_____ [27]

	2008 Information	
	Taxpayer	Spouse
State and local income tax refunds	+ _____	+ 2,772 [1]
Alimony received	+ _____ [3]	+ _____ [4]
Unemployment compensation	+ _____ [8]	+ _____ [9]
Unemployment compensation federal withholding	+ _____ [8]	+ _____ [9]
Unemployment compensation state withholding	+ _____ [8]	+ _____ [9]
Unemployment compensation repaid	+ _____ [11]	+ _____ [12]
Veterans' disability or death benefits	+ _____ [16]	+ _____ [17]
Alaska Permanent Fund dividends	+ _____ [18]	+ _____ [19]

Prior Year Information
2,210

Self-Employment Income ?
T/S/J 1 = Yes, 2 = No

	2008 Information	
Other income, such as: Commissions, Jury pay, Director fees, Taxable scholarships	+	_____ [14]
CGMI Claims Admin - Penalties and Interest Award	+	4,781.82
CGMI Claims Admin - Penalties and Interest Award	+	14.87
1099-R Distribution	+	184,664.76
(rolled to a Conduit IRA - 100% non-taxable)	+	_____
Smith Barney 1099-Misc - Substitute Payments	+	660
in lieu of dividends	+	_____
	+	_____
	+	_____
	+	_____
	+	_____
	+	_____
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Prior Year Information

Schedule C - General Information

2 Preparer use only

	2008 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	T [2]	
Employer identification number	_____ [3]	
Business name	PARTY 911 OF SARATOGA [5]	
Principal business/profession	EVENT AND PART PLANNING [6]	
Business code	812990 [10]	812990
Business address, if different from home address on Organizer Form ID:1040		
Address	_____ [13]	
City/State/Zip	_____ [14] _____ [15] _____ [16]	
Accounting method (1 = Cash, 2 = Accrual, 3 = Other)	_____ [17]	
If other:	_____ [19]	
Inventory method (1 = Cost, 2 = LCM, 3 = Other)	_____ [20]	
If other enter explanation:	See attached Schedule C	
_____ [22]		
_____ [22]		
Enter an explanation if there was a change in determining your inventory:		
_____ [23]		
_____ [23]		
Did you "materially participate" in this business? (1 = Yes, 2 = No)	_____ [24]	
If not, number of hours you did significantly participate	_____ [26]	
Mark if you began or acquired this business in 2008	_____ [28]	
Mark if this business is considered related to qualified services as a minister or religious worker	_____ [29]	
Did you receive wages as a statutory employee or as a minister? (1 = Statutory employee, 2 = Minister)	_____ [31]	
Medical insurance premiums paid by this activity	+ _____ [33]	
Long-term care premiums paid by this activity	+ _____ [35]	
Amount of wages received as a statutory employee	+ _____ [38]	

Business Income

	2008 Information	Prior Year Information
Gross receipts or sales	+ _____ [43]	18,872
Returns and allowances	+ _____ [45]	
Other income:		
_____ [47]	+ _____ [47]	
_____ [47]	+ _____ [47]	
_____ [47]	+ _____ [47]	
_____ [47]	+ _____ [47]	
_____ [47]	+ _____ [47]	
_____ [47]	+ _____ [47]	

Cost of Goods Sold

	2008 Information	Prior Year Information
Beginning inventory	+ _____ [49]	
Purchases	+ _____ [51]	16,245
Labor:		
_____ [53]	+ _____ [53]	
_____ [53]	+ _____ [53]	
Materials	+ _____ [55]	
Other costs:		
_____ [57]	+ _____ [57]	
_____ [57]	+ _____ [57]	
_____ [57]	+ _____ [57]	
Ending inventory	+ _____ [59]	

Control Totals +

Business

Form ID: C-1

**SCHEDULE C
(Form 1040)**

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2008

Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

▶ Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.

▶ Attach to Form 1040, 1040NR, or 1041. ▶ See Instructions for Schedule C (Form 1040).

Name of proprietor Sally King		Social security number (SSN) 063 64 4958
A Principal business or profession, including product or service (see page C-3 of the instructions)		B Enter code from pages C-9, 10, & 11 ▶ 9 9 9 9 9 9
C Business name. If no separate business name, leave blank. SAK Holding Company LLC		D Employer ID number (EIN), if any
E Business address (including suite or room no.) ▶ 126 Nelson Avenue City, town or post office, state, and ZIP code Saratoga Springs, NY 12866		
F Accounting method: (1) <input type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you "materially participate" in the operation of this business during 2008? If "No," see page C-4 for limit on losses <input type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2008, check here <input type="checkbox"/>		

Part I Income

1 Gross receipts or sales. Caution. See page C-4 and check the box if: <ul style="list-style-type: none"> • This income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see page C-4 for limit on losses. 	▶ <input type="checkbox"/>		0	00
2 Returns and allowances		2		
3 Subtract line 2 from line 1		3	0	00
4 Cost of goods sold (from line 42 on page 2)		4	0	00
5 Gross profit. Subtract line 4 from line 3.		5	0	00
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-4).		6		
7 Gross income. Add lines 5 and 6		7	0	00

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

8 Advertising	8					18 Office expense	18		
9 Car and truck expenses (see page C-5)	9					19 Pension and profit-sharing plans	19		
10 Commissions and fees	10					20 Rent or lease (see page C-6):			
11 Contract labor (see page C-5)	11					a Vehicles, machinery, and equipment	20a		
12 Depletion	12					b Other business property	20b		
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-5)	13					21 Repairs and maintenance	21		
14 Employee benefit programs (other than on line 19)	14					22 Supplies (not included in Part III)	22		
15 Insurance (other than health)	15					23 Taxes and licenses	23		
16 Interest:						24 Travel, meals, and entertainment:			
a Mortgage (paid to banks, etc.)	16a					a Travel	24a		
b Other	16b					b Deductible meals and entertainment (see page C-7)	24b		
17 Legal and professional services	17		398	97		25 Utilities	25		
						26 Wages (less employment credits)	26		
						27 Other expenses (from line 48 on page 2)	27		
28 Total expenses before expenses for business use of home. Add lines 8 through 27			398	97					
29 Tentative profit or (loss). Subtract line 28 from line 7			-398	97					
30 Expenses for business use of your home. Attach Form 8829									
31 Net profit or (loss). Subtract line 30 from line 29.									
• If a profit, enter on both Form 1040, line 12 , and Schedule SE, line 2 , or on Form 1040NR, line 13 (if you checked the box on line 1, see page C-7). Estates and trusts, enter on Form 1041, line 3 .			-398	97					
• If a loss, you must go to line 32.									
32 If you have a loss, check the box that describes your investment in this activity (see page C-8).									
• If you checked 32a, enter the loss on both Form 1040, line 12 , and Schedule SE, line 2 , or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions on page C-7). Estates and trusts, enter on Form 1041, line 3 .						32a <input type="checkbox"/> All investment is at risk.			
• If you checked 32b, you must attach Form 6198 . Your loss may be limited.						32b <input type="checkbox"/> Some investment is not at risk.			

Part III Cost of Goods Sold (see page C-8)

33 Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach explanation)

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

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36 Purchases less cost of items withdrawn for personal use	36		
37 Cost of labor. Do not include any amounts paid to yourself	37		
38 Materials and supplies	38		
39 Other costs	39		
40 Add lines 35 through 39	40		
41 Inventory at end of year	41		
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42		

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-5 to find out if you must file Form 4562.

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

44 Of the total number of miles you drove your vehicle during 2008, enter the number of miles you used your vehicle for:

a Business b Commuting (see instructions) c Other

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

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

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

b If "Yes," is the evidence written? Yes No

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

48 **Total other expenses.** Enter here and on page 1, line 27 | 48

**SCHEDULE C
(Form 1040)**

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

OMB No. 1545-0074
2008
Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

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

Name of proprietor Sally King		Social security number (SSN) 063 64 4958
A Principal business or profession, including product or service (see page C-3 of the instructions) Event and party planning		B Enter code from pages C-9, 10, & 11 ▶ 8 1 2 9 9 0
C Business name. If no separate business name, leave blank. Party 911		D Employer ID number (EIN), if any
E Business address (including suite or room no.) ▶ 126 Nelson Avenue City, town or post office, state, and ZIP code Saratoga Springs, NY 12866		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you "materially participate" in the operation of this business during 2008? If "No," see page C-4 for limit on losses <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2008, check here <input type="checkbox"/>		

Part I Income

1 Gross receipts or sales. Caution. See page C-4 and check the box if: <ul style="list-style-type: none"> • This income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see page C-4 for limit on losses. 	▶ <input type="checkbox"/>								
2 Returns and allowances		2							
3 Subtract line 2 from line 1		3	1508			90			
4 Cost of goods sold (from line 42 on page 2)		4	1508			90			
5 Gross profit. Subtract line 4 from line 3.		5	582			40			
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-4).		6							
7 Gross income. Add lines 5 and 6		7	926			50			

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

8 Advertising	8	801	86	18 Office expense	18		
9 Car and truck expenses (see page C-5)	9			19 Pension and profit-sharing plans	19		
10 Commissions and fees	10			20 Rent or lease (see page C-6):			
11 Contract labor (see page C-5)	11			a Vehicles, machinery, and equipment	20a		
12 Depletion	12			b Other business property	20b		
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-5)	13			21 Repairs and maintenance	21		
14 Employee benefit programs (other than on line 19)	14			22 Supplies (not included in Part III)	22		
15 Insurance (other than health)	15			23 Taxes and licenses	23	350	43
16 Interest:				24 Travel, meals, and entertainment:			
a Mortgage (paid to banks, etc.)	16a			a Travel	24a		
b Other	16b			b Deductible meals and entertainment (see page C-7)	24b		
17 Legal and professional services	17	409	34	25 Utilities	25	927	86
				26 Wages (less employment credits)	26		
				27 Other expenses (from line 48 on page 2)	27		

28 Total expenses before expenses for business use of home. Add lines 8 through 27	28	2489	49
29 Tentative profit or (loss). Subtract line 28 from line 7	29	-1562	99
30 Expenses for business use of your home. Attach Form 8829	30		
31 Net profit or (loss). Subtract line 30 from line 29. <ul style="list-style-type: none"> • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see page C-7). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. 	31	-1562	99
32 If you have a loss, check the box that describes your investment in this activity (see page C-8). <ul style="list-style-type: none"> • If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions on page C-7). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited. 			
	32a	<input type="checkbox"/> All investment is at risk.	
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Part III Cost of Goods Sold (see page C-8)

33 Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach explanation)

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35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation 35 0 00

36 Purchases less cost of items withdrawn for personal use 36

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

38 Materials and supplies 38 582 40

39 Other costs 39

40 Add lines 35 through 39 40 582 40

41 Inventory at end of year 41

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4 42 582 40

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44 Of the total number of miles you drove your vehicle during 2008, enter the number of miles you used your vehicle for:

a Business b Commuting (see instructions) c Other

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

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

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

b If "Yes," is the evidence written? Yes No

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

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