

553C  
AZV262  
JUDY BRINKMAN SIMPLE TRUST

DIAGNOSTIC REPORT

TRUST NAME: JUDY BRINKMAN SIMPLE TRUST  
FEDERAL EIN: 25-1111111  
TRUST NUMBER: 02000214

\*\* No Severe Diagnostics Detected \*\*

Informational Diagnostics: Total 11  
-----

Federal (8)

1. Form 1041-ES

The 2009 estimated tax has all been paid in one quarter since computed estimated tax is less than \$ 500.

2. Federal

Overpayment to be applied to next year's estimated tax has been limited to computed estimated tax. To apply the specified amt in this instance leave your overpayment application input as is AND on your estimate compute option you must either select to suppress estimates or generate alphabetic-only estimates.

3. A record of the 2009 Federal projected estimated payments has been made:

| Payment Number | Date          | Amount | Overpayment Credit Applied | Total Paid and Credited |
|----------------|---------------|--------|----------------------------|-------------------------|
| 1              | APR. 15, 2009 | NONE   | 476.                       | 476.                    |
| 2              | JUNE 15, 2009 | NONE   | NONE                       | NONE                    |
| 3              | SEP. 15, 2009 | NONE   | NONE                       | NONE                    |
| 4              | JAN. 15, 2010 | NONE   | NONE                       | NONE                    |
| Totals         |               | NONE   | 476.                       | 476.                    |

4. Allocation of tax liability from Schedule G has been made:

The amount allocable to income is NONE  
The amount allocable to principal is 476.

5. Allocation of overpayment credited to 2009 Federal estimated tax has been made:

The amount allocable to income is NONE  
The amount allocable to principal is 476.

6. Allocation of the amount refunded on Form 1041 has been made:

The amount allocable to income is NONE  
The amount allocable to principal is 4,448.

7. Form 1116

Worksheet for line 17 did not print due to one of the following were not met. Line 5 of the Qualified Dividends Tax Worksheet is greater than zero and Line 15 of the Qualified Dividends Tax Worksheet is less than line 16 of that worksheet; or Schedule D Part V is used to calculate tax, and line 23 of the Schedule D is greater than zero, and line 33 of the Schedule D less than line 34; or your return qualifies for adjustment exception. Therefore the trust's taxable income before exemption was entered on line 17 of Form 1116.

(cont.)

DIAGNOSTIC REPORT

TRUST NAME: JUDY BRINKMAN SIMPLE TRUST  
FEDERAL EIN: 25-1111111  
TRUST NUMBER: 02000214

Informational Diagnostics: Total 11(cont.)  
-----

8. Form 2210

The Form 2210 will not print per your underpayment penalty compute option.

States (2)

9. Allocation of the amount owed to Illinois has been made:

The amount allocable to income is NONE  
The amount allocable to principal is 186.

10. Allocation of tax liability from Form IL-1041, Step 7, line 47 has been made:

The amount allocable to income is NONE  
The amount allocable to principal is 186.

Uncategorized (1)

11. Form 1116 recomputed for Alternative Minimum Tax

The AMT foreign tax credit for passive income of 30. has been limited to NONE

Carryover to next year is 30.

**ESTIMATED TAX WORKSHEET FOR FORM 1041-ES**

|  |          |          |      |
|--|----------|----------|------|
| A. 2008 Estimated Tax  |          | <b>A</b> |      |
| B. Enter 90% of Line A                                       | <b>B</b> |          |      |
| C. Enter 100% of tax on 2008 FORM 1041                       | <b>C</b> | 476.     |      |
| D. Required Annual Payment (Smaller of lines B or C)         | <b>D</b> |          | 476. |
| E. Income tax withheld (if applicable)                       | <b>E</b> |          |      |
| F. <b>Balance</b> (As rounded to the nearest multiple of 4 ) | <b>F</b> |          | 476. |

The 2009 estimated tax has all been paid in one quarter since computed estimated tax is less than \$ 500.

**Record of Estimated Tax Payments**

| Payment number | (a) Date   | (b) Amount | (c) 2008 overpayment credit applied | (d) Total amount paid and credited (add (b) and (c)) |
|----------------|------------|------------|-------------------------------------|--|
| 1              | 04/15/2009 |            | 476.                                | 476.   |
| 2              | 06/15/2009 |            |                                     |  |
| 3              | 09/15/2009 |            |                                     |  |
| 4              | 01/15/2010 |            |                                     |  |
| <b>Total</b>   |            |            | 476.                                | 476.   |

**2009 Estimated Tax Worksheet**

Keep for Your Records

|      |  |     |     |
|------|--|-----|-----|
| 1    | Enter adjusted total income expected in 2009   |     | 1   |
| 2    | Enter any expected income distribution deduction   | 2   |     |
| 3    | Enter any estate tax deduction   | 3   |     |
| 4    | Enter exemption (see instructions)   | 4   |     |
| 5    | Add lines 2 through 4  |     | 5   |
| 6    | Taxable income of estate or trust. Subtract line 5 from line 1   |     | 6   |
| 7    | <b>Tax.</b> Figure your tax on line 6 by using the <b>2009 Tax Rate Schedule</b> below. (If the estate or trust expects a net capital gain or qualified dividends and line 6 is more than zero, use the <b>Tax Computation Worksheet Using Maximum Capital Gains Rates</b> on page 4, to figure the tax.) Electing Alaska Native Settlement Trusts, see instructions |     | 7   |
| 8    | Alternative minimum tax  |     | 8   |
| 9    | Add lines 7 and 8. Include any tax on lump-sum distributions from Form 4972  |     | 9   |
| 10   | Credits (see instructions)   |     | 10  |
| 11   | Subtract line 10 from line 9. If zero or less, enter -0-   |     | 11  |
| 12   | Other taxes (see instructions)   |     | 12  |
| 13   | <b>2009 estimated tax.</b> Add lines 11 and 12. Reduce this total by any credit you expect to claim on Form 4136   |     | 13  |
| 14 a | Enter 90% of line 13 (66 2/3% for farmers and fishermen)   | 14a |     |
| b    | Enter the tax shown on the 2008 Form 1041 (110% of that amount if the estate's or trust's AGI on that return is more than \$150,000, and less than 2/3 of gross income for 2008 or 2009 is from farming or fishing)  | 14b |     |
| c    | <b>Required annual payment.</b> Enter the smaller of line 14a or 14b   |     | 14c |
| 15   | Income tax withheld and estimated to be withheld during 2009 and other refundable credits  |     | 15  |
| 16   | Subtract line 15 from line 14c<br><i>(Note: If line 13 minus line 15 is less than \$1,000, the estate or trust is not required to make estimated tax payments.)</i>  |     | 16  |
| 17   | <b>Installment amount.</b> If the first required payment is due April 15, 2009, enter 1/4 of line 16 (minus any 2008 overpayment that you are applying to this installment) here and on the payment line of the voucher(s). You may round off cents to the nearest whole dollar  |     | 17  |

**2009 Tax Rate Schedule**

Estates and trusts, if line 6 of the Estimated Tax Worksheet above is:

| Over - | But not over - | The tax is:    | Of the amount over - |
|--------|----------------|----------------|----------------------|
| \$0    | \$2,300        | 15%            | \$0                  |
| 2,300  | 5,350          | \$345.00 + 25% | 2,300                |
| 5,350  | 8,200          | 1,107.50 + 28% | 5,350                |
| 8,200  | 11,150         | 1,905.50 + 33% | 8,200                |
| 11,150 | -----          | 2,879.00 + 35% | 11,150               |

**Record of Estimated Tax Payments**

| Pay-ment no.             | (a) Date | (b) Check or money order number | (c) Amount | (d) 2008 overpayment credit applied | (e) Total amount paid and credited (add (c) and (d)) |
|--------------------------|----------|---------------------------------|------------|-------------------------------------|--|
| 1                        |          |                                 |            |                                     |  |
| 2                        |          |                                 |            |                                     |  |
| 3                        |          |                                 |            |                                     |  |
| 4                        |          |                                 |            |                                     |  |
| <b>Total</b> . . . . . ▶ |          |                                 |            |                                     |  |

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Form **1041-ES**  
Department of the Treasury  
Internal Revenue Service

**2009 Payment Voucher 4**

02000214

OMB No. 1545-0971

File only if the estate or trust is making a payment of estimated tax. Return this voucher with check or money order payable to "United States Treasury." Write the estate's or trust's EIN and "2009 Form 1041-ES" on the check or money order. Do not send cash. Enclose, but do not staple or attach, the payment with this voucher.

**Calendar year - Due Jan. 15, 2010**

Amount of estimated tax you are paying by check or money order.

|         |       |
|---------|-------|
| Dollars | Cents |
|---------|-------|

|   |               |   |
|---|---------------|---|
| Fiscal year filers-enter year ending _____<br><br>_____<br>(month and year) | Type or print | Employer identification number<br><b>25-1111111</b>                                     |
|   |               | Name of estate or trust<br><b>JUDY BRINKMAN SIMPLE TRUST</b>                            |
|   |               | Name and title of fiduciary<br><b>TR BANK &amp; TRUST COMPANY</b>                       |
|   |               | Address of fiduciary (number, street, and room or suite no.)<br><b>2395 MIDWAY ROAD</b> |
|   |               | City, state, and ZIP code<br><b>CARROLLTON, TX 75006</b>                                |

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Form 1041-ES  
Department of the Treasury  
Internal Revenue Service

2009 Payment Voucher 3

02000214

OMB No. 1545-0971

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Calendar year - Due Sept. 15, 2009

Amount of estimated tax you are paying by check or money order. Dollars Cents

Fiscal year filers-enter year ending (month and year)

Type or print Employer identification number 25-1111111 Name of estate or trust JUDY BRINKMAN SIMPLE TRUST Name and title of fiduciary TR BANK & TRUST COMPANY Address of fiduciary (number, street, and room or suite no.) 2395 MIDWAY ROAD City, state, and ZIP code CARROLLTON, TX 75006

JSA

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Form 1041-ES  
Department of the Treasury  
Internal Revenue Service

2009 Payment Voucher 2

02000214

OMB No. 1545-0971

File only if the estate or trust is making a payment of estimated tax. Return this voucher with check or money order payable to "United States Treasury." Write the estate's or trust's EIN and "2009 Form 1041-ES" on the check or money order. Do not send cash. Enclose, but do not staple or attach, the payment with this voucher.

Calendar year - Due June 15, 2009

Amount of estimated tax you are paying by check or money order. Dollars Cents

Fiscal year filers-enter year ending (month and year)

Type or print Employer identification number 25-1111111 Name of estate or trust JUDY BRINKMAN SIMPLE TRUST Name and title of fiduciary TR BANK & TRUST COMPANY Address of fiduciary (number, street, and room or suite no.) 2395 MIDWAY ROAD City, state, and ZIP code CARROLLTON, TX 75006

JSA

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Form 1041-ES  
Department of the Treasury  
Internal Revenue Service

2009 Payment Voucher 1

02000214

OMB No. 1545-0971

File only if the estate or trust is making a payment of estimated tax. Return this voucher with check or money order payable to "United States Treasury." Write the estate's or trust's EIN and "2009 Form 1041-ES" on the check or money order. Do not send cash. Enclose, but do not staple or attach, the payment with this voucher.

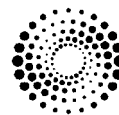
Calendar year - Due April 15, 2009

Amount of estimated tax you are paying by check or money order. Dollars Cents

Fiscal year filers-enter year ending (month and year)

Type or print Employer identification number 25-1111111 Name of estate or trust JUDY BRINKMAN SIMPLE TRUST Name and title of fiduciary TR BANK & TRUST COMPANY Address of fiduciary (number, street, and room or suite no.) 2395 MIDWAY ROAD City, state, and ZIP code CARROLLTON, TX 75006

TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006



THOMSON REUTERS

Robert A. Brinkman  
Susan James, CPA  
1000 Main Street  
Suite # 100  
Chicago, IL 60603-4303

RE: JUDY BRINKMAN SIMPLE TRUST

Enclosed is your tax information for the above referenced account necessary to complete your income tax return. This information is based on your reportable share of the trust's income earned during the year, not the amount paid to you and as such the amounts may differ. The difference may be caused by the allocation of fees, exclusion of tax-exempt income, our agreed plan of remitting, or variance between your taxable year and that of this account. Included in this package:

Schedule K-1 (Form 1041) - Schedule K-1 is an IRS required document and is used to report your share of the trust's or estate's income, credits, deductions, etc. Do not file the Schedule K-1 with your income tax return since a copy has already been filed with the IRS.

State information - If applicable, state tax information has been attached. Since income tax requirements vary from state to state, the presentation of the state tax information will be different for each state.

If you have interests in other accounts, the income tax information for those accounts will be included in a separate letter.

If you have any questions concerning this information, please call  
Your Administrator at (502)259-2500.

Sincerely,

**Schedule K-1  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**2008**

For calendar year 2008,  
or tax year beginning \_\_\_\_\_, 2008,  
and ending \_\_\_\_\_, 20 \_\_\_\_\_

**Beneficiary's Share of Income, Deductions,  
Credits, etc.**

▶ See back of form and instructions.

**Part I Information About the Estate or Trust**

**A** Estate's or trust's employer identification number  
25-1111111

**B** Estate's or trust's name  
JUDY BRINKMAN SIMPLE TRUST

**C** Fiduciary's name, address, city, state, and ZIP code  
TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006

**D**  Check if Form 1041-T was filed and enter the date it was filed \_\_\_\_\_

**E**  Check if this is the final Form 1041 for the estate or trust

**Part II Information About the Beneficiary**

**F** Beneficiary's identifying number  
111-22-3333

**G** Beneficiary's name, address, city, state, and ZIP code  
ROBERT A. BRINKMAN  
13000 EASTERBROOK DRIVE  
HIGHLAND PARK, IL 60305-0305

**H**  Domestic beneficiary  Foreign beneficiary

**Part III Beneficiary's Share of Current Year Income,  
Deductions, Credits, and Other Items**

|           |  |        |           |                                    |
|-----------|--|--------|-----------|------------------------------------|
| <b>1</b>  | Interest income                        |        | <b>11</b> | Final year deductions              |
|           |  | 291.   |           |                                    |
| <b>2a</b> | Ordinary dividends                     |        |           |                                    |
|           |  | 1,083. |           |                                    |
| <b>2b</b> | Qualified dividends                    |        |           |                                    |
|           |  | 1,041. |           |                                    |
| <b>3</b>  | Net short-term capital gain            |        |           |                                    |
| <b>4a</b> | Net long-term capital gain             |        |           |                                    |
| <b>4b</b> | 28% rate gain                          |        | <b>12</b> | Alternative minimum tax adjustment |
|           |  |        | A         | 26.                                |
| <b>4c</b> | Unrecaptured section 1250 gain         |        | J         | 26.                                |
| <b>5</b>  | Other portfolio and nonbusiness income |        |           |                                    |
|           |  | 127.   |           |                                    |
| <b>6</b>  | Ordinary business income               |        |           |                                    |
|           |  | 41.    |           |                                    |
| <b>7</b>  | Net rental real estate income          |        |           |                                    |
|           |  | 4.     | <b>13</b> | Credits and credit recapture       |
| <b>8</b>  | Other rental income                    |        |           |                                    |
| <b>9</b>  | Directly apportioned deductions        |        |           |                                    |
|           |  |        | <b>14</b> | Other information                  |
|           |  |        | A         | 810.                               |
| <b>10</b> | Estate tax deduction                   |        | B         | 12.                                |

\*See attached statement for additional information.  
**Note.** A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

**This list identifies the codes used on Schedule K-1 for beneficiaries and provides summarized reporting information for beneficiaries who file Form 1040. For detailed reporting and filing information, see the Instructions for Beneficiary Filing Form 1040 and the instructions for your income tax return.**

|   | <i>Report on</i>   |
|---|--|
| <b>1. Interest income</b>                           | Form 1040, line 8a   |
| <b>2a. Ordinary dividends</b>                       | Form 1040, line 9a   |
| <b>2b. Qualified dividends</b>                      | Form 1040, line 9b   |
| <b>3. Net short-term capital gain</b>               | Schedule D, line 5   |
| <b>4a. Net long-term capital gain</b>               | Schedule D, line 12  |
| <b>4b. 28% rate gain</b>                            | Line 4 of the worksheet for Schedule D, line 18  |
| <b>4c. Unrecaptured section 1250 gain</b>           | Line 11 of the worksheet for Schedule D, line 19   |
| <b>5. Other portfolio and nonbusiness income</b>    | Schedule E, line 33, column (f)  |
| <b>6. Ordinary business income</b>                  | Schedule E, line 33, column (d) or (f)   |
| <b>7. Net rental real estate income</b>             | Schedule E, line 33, column (d) or (f)   |
| <b>8. Other rental income</b>                       | Schedule E, line 33, column (d) or (f)   |
| <b>9. Directly apportioned deductions</b>           |  |
| <i>Code</i>   |  |
| <b>A Depreciation</b>                               | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>B Depletion</b>                                  | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>C Amortization</b>                               | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>10. Estate tax deduction</b>                     | Schedule A, line 28  |
| <b>11. Final year deductions</b>                    |  |
| <b>A Excess deductions</b>                          | Schedule A, line 23  |
| <b>B Short-term capital loss carryover</b>          | Schedule D, line 5   |
| <b>C Long-term capital loss carryover</b>           | Schedule D, line 12; line 5 of the wksht. for Sch. D, line 18; and line 16 of the wksht. for Sch. D, line 19 |
| <b>D Net operating loss carryover - regular tax</b> | Form 1040, line 21   |
| <b>E Net operating loss carryover - minimum tax</b> | Form 6251, line 28   |

**12. Alternative minimum tax (AMT) items**

| <i>Code</i>   | <i>Report on</i>  |
|---|---|
| <b>A</b> Adjustment for minimum tax purposes                                    | Form 6251, line 15  |
| <b>B</b> AMT adjustment attributable to qualified dividends                     | } See the beneficiary's instructions and the Instructions for Form 6251 |
| <b>C</b> AMT adjustment attributable to net short-term capital gain             |   |
| <b>D</b> AMT adjustment attributable to net long-term capital gain              |   |
| <b>E</b> AMT adjustment attributable to unrecaptured section 1250 gain          |   |
| <b>F</b> AMT adjustment attributable to 28% rate gain                           |   |
| <b>G</b> Accelerated depreciation   |   |
| <b>H</b> Depletion  |   |
| <b>I</b> Amortization   |   |
| <b>J</b> Exclusion items  | 2009 Form 8801  |
| <b>13. Credits and credit recapture</b>   |   |
| <b>A</b> Credit for estimated taxes   | Form 1040, line 63  |
| <b>B</b> Credit for backup withholding  | Form 1040, line 62  |
| <b>C</b> Low-income housing credit  | Form 8586 (also see the beneficiary's instructions)                     |
| <b>D</b> Qualified rehabilitation expenditures                                  | See the beneficiary's instructions                                      |
| <b>E</b> Basis of other investment credit property                              | See the beneficiary's instructions                                      |
| <b>F</b> Work opportunity credit  | Form 5884, line 3   |
| <b>G</b> Welfare-to-work credit   | Form 3800, line 1b  |
| <b>H</b> Alcohol and cellulosic biofuels fuel credit                            | Form 6478, line 9 (also see the beneficiary's instructions)             |
| <b>I</b> Credit for increasing research activities                              | Form 3800, line 1c  |
| <b>J</b> Renewable electricity, refined coal, and Indian coal production credit | See the beneficiary's instructions                                      |
| <b>K</b> Empowerment zone and renewal community employment credit               | Form 8844, line 3   |
| <b>L</b> Indian employment credit   | Form 3800, line 1g  |
| <b>M</b> Orphan drug credit   | Form 3800, line 1h  |
| <b>N</b> Credit for employer-provided child care and facilities                 | Form 3800, line 1k  |
| <b>O</b> Biodiesel and renewable diesel fuels credit                            | Form 8864, line 11 (also see the beneficiary's instructions)            |
| <b>P</b> Nonconventional source fuel credit                                     | Form 3800, line 1o  |
| <b>Q</b> Credit to holders of tax credit bonds                                  | Form 8912, line 8   |
| <b>R</b> Agricultural chemicals security credit                                 | Form 3800, line 1v  |
| <b>S</b> Energy efficient appliance credit                                      | Form 3800, line 1q  |
| <b>T</b> Credit for employer differential wage payments                         | Form 3800, line 1w  |
| <b>U</b> Recapture of credits   | See the beneficiary's instructions                                      |
| <b>14. Other information</b>  |   |
| <b>A</b> Tax-exempt interest  | Form 1040, line 8b  |
| <b>B</b> Foreign taxes  | Form 1040, line 47 or Sch. A, line 8                                    |
| <b>C</b> Qualified production activities income                                 | Form 8903, line 7   |
| <b>D</b> Form W-2 wages   | Form 8903, line 15  |
| <b>E</b> Net investment income  | Form 4952, line 4a  |
| <b>F</b> Gross farm and fishing income  | Schedule E, line 42   |
| <b>G</b> Foreign trading gross receipts (IRC 942(a))                            | See the instructions for Form 8873                                      |
| <b>H</b> Other information  | See the beneficiary's instructions                                      |

**Note.** If you are a beneficiary who does not file a Form 1040, see instructions for the type of income tax return you are filing.

FOREIGN TAX CREDIT INFORMATION (LINE 14, CODE B)

-----

(ENTER THE FOLLOWING ON FORM 1116 OR SCHEDULE A IF APPLICABLE)

| COUNTRY     | GROSS INCOME | TAXES | DATE PAID  |
|-------------|--------------|-------|------------|
| -----       | -----        | ----- | -----      |
| CANADA      | 96.          | 8.    | 12/31/2008 |
| NETHERLANDS | 40.          | 4.    | 12/31/2008 |
|             | -----        | ----- |            |
| TOTALS      | 136.         | 12.   |            |
|             | =====        | ===== |            |

\*\* FEDERAL SUMMARY OF PASSIVE/ACTIVE ACTIVITIES \*\*

---

|                                     |            |       |
|-------------------------------------|------------|-------|
| THOMSON LIMITED                     | 99-1234567 |       |
| ACTIVE INCOME (LOSS)                |            |       |
| LOCATION OF PROPERTY .....          | TEXAS      |       |
| ORDINARY BUSINESS INCOME .....      |            | 41.   |
| NET RENTAL REAL ESTATE INCOME ..... |            | 4.    |
|                                     |            | ----- |
| TOTAL ACTIVITY INCOME               |            | 45.   |
|                                     |            | ===== |

Illinois Department of Revenue  
**Schedule K-1-T**

**Beneficiary's Share of  
Income and Deductions**

To be completed by trusts or estates filing Form IL-1041

Beneficiaries receiving Schedule K-1-T should attach this form to their Illinois Tax Return

Year ending  
12 / 2008  
Month / Year

**Step 1: Identify your trust or estate**

1 Check the appropriate box  trust  estate

2 JUDY BRINKMAN SIMPLE TRUST  
Write your name as shown on your Form IL-1041.

3 25-1111111  
Write your federal employer identification number (FEIN).

4 Write the apportionment factor from Step 6, Line 3, of Schedule NR, Form IL-1041; otherwise, write "1." 1.000000

**Step 2: Identify your beneficiary**

5 ROBERT A. BRINKMAN  
Name

7 111-22-3333  
Social Security number or FEIN

6 13000 EASTERBROOK DRIVE  
Mailing address

8 Check the appropriate box  
 individual  corporation  trust  
 partnership  S corporation  estate

HIGHLAND PARK IL 60305-0305  
City State ZIP

**Step 3: Figure your beneficiary's share of your nonbusiness income**

|   | A<br>Beneficiary's share<br>(see instructions) | B<br>Nonresident beneficiary's<br>share allocable to Illinois |
|---|--|---|
| 9 Interest  | <u>291.</u>                                    |   |
| 10 Dividends  | <u>1,083.</u>                                  |   |
| 11 Rental income  |  |   |
| 12 Patent royalties                                       |  |   |
| 13 Copyright royalties                                    |  |   |
| 14 Other royalty income                                   |  |   |
| 15 Capital gain or loss from real property                |  |   |
| 16 Capital gain or loss from tangible personal property   |  |   |
| 17 Capital gain or loss from intangible personal property |  |   |
| 18 Other income <u>Specify</u>                            | <u>172.</u>                                    |   |

**Step 4: Figure your beneficiary's share of your business income**

(See instructions.)

|  | A<br>Beneficiary's share<br>from U.S. Schedule K-1,<br>less nonbusiness income | B<br>Nonresident beneficiary's<br>share apportioned to Illinois |
|--|--|---|
| 19 Interest  |  |   |
| 20 Dividends   |  |   |
| 21 Net short-term capital gain   |  |   |
| 22 Net long-term capital gain (total for year)   |  |   |
| 23 Annuities, royalties, and other nonpassive income before directly apportioned deductions                            |  |   |
| 24 <b>Directly apportioned deductions</b> - Depreciation, depletion, and amortization                                  |  |   |
| 25 Total annuities, royalties, and other nonpassive income. Subtract Column A, Line 24 from Line 23. See Instructions. |  |   |
| 26 Trade or business, rental real estate, and other rental income before directly apportioned deductions               |  |   |
| 27 <b>Directly apportioned deductions</b> - Depreciation, depletion, and amortization                                  |  |   |
| 28 Total trade or business, rental real estate, and other rental income. Subtract Column A, Line 27 from Line 26.      |  |   |
| 29 Other income <u>Specify</u>   |  |   |

## Step 5: Figure your beneficiary's share of your Illinois additions and subtractions

|  | A  | B  |
|--|--|--|
|  | Beneficiary's share<br>from Form IL-1041 | Nonresident beneficiary's<br>share apportioned or<br>allocated to Illinois |
| <b>Additions</b>   |  |  |
| 30 Federally tax-exempt interest income  | 30 <u>811.</u>                           |  |
| 31 Illinois income and replacement tax deducted  | 31 <u>80.</u>                            |  |
| 32 Illinois Bonus Depreciation addition  | 32 _____                                 |  |
| 33 Related-Party Expenses addition   | 33 _____                                 |  |
| 34 Distributive share of additions   | 34 _____                                 |  |
| 35 Other additions not listed above (as figured on Illinois<br>Schedule M (for businesses))    | 35 _____                                 |  |
| <b>Subtractions</b>  |  |  |
| 36 a Interest from U.S. Treasury obligations included as<br>business income                    | 36a _____                                |  |
| b Interest from U.S. Treasury obligations included as<br>nonbusiness income                    | 36b <u>130.</u>                          |  |
| 37 Federally-taxed refund of Illinois income and replacement tax                               | 37 _____                                 |  |
| 38 Payment from certain retirement plans   | 38 _____                                 |  |
| 39 Retirement payments to retired partners   | 39 _____                                 |  |
| 40 Enterprise Zone or River Edge Redevelopment Zone<br>Dividend Subtraction                    | 40 _____                                 |  |
| 41 High Impact Business within a Foreign Trade Zone<br>Dividend Subtraction                    | 41 <u>247.</u>                           |  |
| 42 Contributions to certain job training projects  | 42 _____                                 |  |
| 43 Illinois Bonus Depreciation subtraction   | 43 _____                                 |  |
| 44 Related-Party Expenses subtraction  | 44 _____                                 |  |
| 45 Distributive share of subtractions  | 45 _____                                 |  |
| 46 Other subtractions not listed above (as figured on Illinois<br>Schedule M (for businesses)) | 46 <u>418.</u>                           |  |

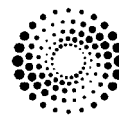
## Step 6: Figure your beneficiary's (except a corporate beneficiary) share of your Illinois August 1, 1969, appreciation amounts

|                               | A   | B  |
|-------------------------------|---|--|
|                               | Beneficiary's share<br>from Illinois Schedule F<br>(Form IL-1041) | Nonresident beneficiary's<br>share apportioned or<br>allocated to Illinois |
| 47 Section 1245 and 1250 gain | 47 _____  |  |
| 48 Section 1231 gain          | 48 _____  |  |
| 49 Capital gain               | 49 _____  |  |

## Step 7: Figure your beneficiary's share of pass-through entity payments

|   |          |
|---|----------|
| 50 Pass-through entity payments made on behalf of<br>nonresident beneficiary from Form IL-1000. | 50 _____ |
|---|----------|

TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006



THOMSON REUTERS

Robert A. Brinkman  
13000 Easterbrook Drive  
Highland Park, IL 60305-0305

RE: JUDY BRINKMAN SIMPLE TRUST

Enclosed is your tax information for the above referenced account necessary to complete your income tax return. This information is based on your reportable share of the trust's income earned during the year, not the amount paid to you and as such the amounts may differ. The difference may be caused by the allocation of fees, exclusion of tax-exempt income, our agreed plan of remitting, or variance between your taxable year and that of this account. Included in this package:

Schedule K-1 (Form 1041) - Schedule K-1 is an IRS required document and is used to report your share of the trust's or estate's income, credits, deductions, etc. Do not file the Schedule K-1 with your income tax return since a copy has already been filed with the IRS.

State information - If applicable, state tax information has been attached. Since income tax requirements vary from state to state, the presentation of the state tax information will be different for each state.

If you have interests in other accounts, the income tax information for those accounts will be included in a separate letter.

If you have any questions concerning this information, please call  
Your Administrator at (502)259-2500.

Sincerely,

cc: Susan James, CPA

**Schedule K-1  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**2008**

For calendar year 2008,  
or tax year beginning \_\_\_\_\_, 2008,  
and ending \_\_\_\_\_, 20 \_\_\_\_\_

**Beneficiary's Share of Income, Deductions, Credits, etc.**

▶ See back of form and instructions.

**Part I Information About the Estate or Trust**

**A** Estate's or trust's employer identification number  
25-1111111

**B** Estate's or trust's name  
JUDY BRINKMAN SIMPLE TRUST

**C** Fiduciary's name, address, city, state, and ZIP code  
TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006

**D**  Check if Form 1041-T was filed and enter the date it was filed \_\_\_\_\_

**E**  Check if this is the final Form 1041 for the estate or trust

**Part II Information About the Beneficiary**

**F** Beneficiary's identifying number  
111-22-3333

**G** Beneficiary's name, address, city, state, and ZIP code  
ROBERT A. BRINKMAN  
13000 EASTERBROOK DRIVE  
HIGHLAND PARK, IL 60305-0305

**H**  Domestic beneficiary  Foreign beneficiary

**Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items**

|           |  |        |           |                                    |
|-----------|--|--------|-----------|------------------------------------|
| <b>1</b>  | Interest income                        |        | <b>11</b> | Final year deductions              |
|           |  | 291.   |           |                                    |
| <b>2a</b> | Ordinary dividends                     |        |           |                                    |
|           |  | 1,083. |           |                                    |
| <b>2b</b> | Qualified dividends                    |        |           |                                    |
|           |  | 1,041. |           |                                    |
| <b>3</b>  | Net short-term capital gain            |        |           |                                    |
| <b>4a</b> | Net long-term capital gain             |        |           |                                    |
| <b>4b</b> | 28% rate gain                          |        | <b>12</b> | Alternative minimum tax adjustment |
|           |  |        | A         | 26.                                |
| <b>4c</b> | Unrecaptured section 1250 gain         |        | J         | 26.                                |
| <b>5</b>  | Other portfolio and nonbusiness income |        |           |                                    |
|           |  | 127.   |           |                                    |
| <b>6</b>  | Ordinary business income               |        |           |                                    |
|           |  | 41.    |           |                                    |
| <b>7</b>  | Net rental real estate income          |        |           |                                    |
|           |  | 4.     | <b>13</b> | Credits and credit recapture       |
| <b>8</b>  | Other rental income                    |        |           |                                    |
| <b>9</b>  | Directly apportioned deductions        |        |           |                                    |
|           |  |        | <b>14</b> | Other information                  |
|           |  |        | A         | 810.                               |
| <b>10</b> | Estate tax deduction                   |        | B         | 12.                                |

\*See attached statement for additional information.  
**Note.** A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule K-1 (Form 1041) 2008

**This list identifies the codes used on Schedule K-1 for beneficiaries and provides summarized reporting information for beneficiaries who file Form 1040. For detailed reporting and filing information, see the Instructions for Beneficiary Filing Form 1040 and the instructions for your income tax return.**

|   | <i>Report on</i>   |
|---|--|
| <b>1. Interest income</b>                           | Form 1040, line 8a   |
| <b>2a. Ordinary dividends</b>                       | Form 1040, line 9a   |
| <b>2b. Qualified dividends</b>                      | Form 1040, line 9b   |
| <b>3. Net short-term capital gain</b>               | Schedule D, line 5   |
| <b>4a. Net long-term capital gain</b>               | Schedule D, line 12  |
| <b>4b. 28% rate gain</b>                            | Line 4 of the worksheet for Schedule D, line 18  |
| <b>4c. Unrecaptured section 1250 gain</b>           | Line 11 of the worksheet for Schedule D, line 19   |
| <b>5. Other portfolio and nonbusiness income</b>    | Schedule E, line 33, column (f)  |
| <b>6. Ordinary business income</b>                  | Schedule E, line 33, column (d) or (f)   |
| <b>7. Net rental real estate income</b>             | Schedule E, line 33, column (d) or (f)   |
| <b>8. Other rental income</b>                       | Schedule E, line 33, column (d) or (f)   |
| <b>9. Directly apportioned deductions</b>           |  |
| <i>Code</i>   |  |
| <b>A Depreciation</b>                               | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>B Depletion</b>                                  | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>C Amortization</b>                               | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>10. Estate tax deduction</b>                     | Schedule A, line 28  |
| <b>11. Final year deductions</b>                    |  |
| <b>A Excess deductions</b>                          | Schedule A, line 23  |
| <b>B Short-term capital loss carryover</b>          | Schedule D, line 5   |
| <b>C Long-term capital loss carryover</b>           | Schedule D, line 12; line 5 of the wksht. for Sch. D, line 18; and line 16 of the wksht. for Sch. D, line 19 |
| <b>D Net operating loss carryover - regular tax</b> | Form 1040, line 21   |
| <b>E Net operating loss carryover - minimum tax</b> | Form 6251, line 28   |

| <b>12. Alternative minimum tax (AMT) items</b>                                  | <i>Report on</i>  |
|---|---|
| <i>Code</i>   |   |
| <b>A</b> Adjustment for minimum tax purposes                                    | Form 6251, line 15  |
| <b>B</b> AMT adjustment attributable to qualified dividends                     | } See the beneficiary's instructions and the Instructions for Form 6251 |
| <b>C</b> AMT adjustment attributable to net short-term capital gain             |   |
| <b>D</b> AMT adjustment attributable to net long-term capital gain              |   |
| <b>E</b> AMT adjustment attributable to unrecaptured section 1250 gain          |   |
| <b>F</b> AMT adjustment attributable to 28% rate gain                           |   |
| <b>G</b> Accelerated depreciation   |   |
| <b>H</b> Depletion  |   |
| <b>I</b> Amortization   |   |
| <b>J</b> Exclusion items  | 2009 Form 8801  |
| <b>13. Credits and credit recapture</b>   |   |
| <b>A</b> Credit for estimated taxes   | Form 1040, line 63  |
| <b>B</b> Credit for backup withholding  | Form 1040, line 62  |
| <b>C</b> Low-income housing credit  | Form 8586 (also see the beneficiary's instructions)                     |
| <b>D</b> Qualified rehabilitation expenditures                                  | See the beneficiary's instructions                                      |
| <b>E</b> Basis of other investment credit property                              | See the beneficiary's instructions                                      |
| <b>F</b> Work opportunity credit  | Form 5884, line 3   |
| <b>G</b> Welfare-to-work credit   | Form 3800, line 1b  |
| <b>H</b> Alcohol and cellulosic biofuels fuel credit                            | Form 6478, line 9 (also see the beneficiary's instructions)             |
| <b>I</b> Credit for increasing research activities                              | Form 3800, line 1c  |
| <b>J</b> Renewable electricity, refined coal, and Indian coal production credit | See the beneficiary's instructions                                      |
| <b>K</b> Empowerment zone and renewal community employment credit               | Form 8844, line 3   |
| <b>L</b> Indian employment credit   | Form 3800, line 1g  |
| <b>M</b> Orphan drug credit   | Form 3800, line 1h  |
| <b>N</b> Credit for employer-provided child care and facilities                 | Form 3800, line 1k  |
| <b>O</b> Biodiesel and renewable diesel fuels credit                            | Form 8864, line 11 (also see the beneficiary's instructions)            |
| <b>P</b> Nonconventional source fuel credit                                     | Form 3800, line 1o  |
| <b>Q</b> Credit to holders of tax credit bonds                                  | Form 8912, line 8   |
| <b>R</b> Agricultural chemicals security credit                                 | Form 3800, line 1v  |
| <b>S</b> Energy efficient appliance credit                                      | Form 3800, line 1q  |
| <b>T</b> Credit for employer differential wage payments                         | Form 3800, line 1w  |
| <b>U</b> Recapture of credits   | See the beneficiary's instructions                                      |
| <b>14. Other information</b>  |   |
| <b>A</b> Tax-exempt interest  | Form 1040, line 8b  |
| <b>B</b> Foreign taxes  | Form 1040, line 47 or Sch. A, line 8                                    |
| <b>C</b> Qualified production activities income                                 | Form 8903, line 7   |
| <b>D</b> Form W-2 wages   | Form 8903, line 15  |
| <b>E</b> Net investment income  | Form 4952, line 4a  |
| <b>F</b> Gross farm and fishing income  | Schedule E, line 42   |
| <b>G</b> Foreign trading gross receipts (IRC 942(a))                            | See the instructions for Form 8873                                      |
| <b>H</b> Other information  | See the beneficiary's instructions                                      |

**Note.** If you are a beneficiary who does not file a Form 1040, see instructions for the type of income tax return you are filing.

FOREIGN TAX CREDIT INFORMATION (LINE 14, CODE B)

-----

(ENTER THE FOLLOWING ON FORM 1116 OR SCHEDULE A IF APPLICABLE)

| COUNTRY     | GROSS INCOME | TAXES | DATE PAID  |
|-------------|--------------|-------|------------|
| -----       | -----        | ----- | -----      |
| CANADA      | 96.          | 8.    | 12/31/2008 |
| NETHERLANDS | 40.          | 4.    | 12/31/2008 |
|             | -----        | ----- |            |
| TOTALS      | 136.         | 12.   |            |
|             | =====        | ===== |            |

\*\* FEDERAL SUMMARY OF PASSIVE/ACTIVE ACTIVITIES \*\*

---

|                                     |            |       |
|-------------------------------------|------------|-------|
| THOMSON LIMITED                     | 99-1234567 |       |
| ACTIVE INCOME (LOSS)                |            |       |
| LOCATION OF PROPERTY .....          | TEXAS      |       |
| ORDINARY BUSINESS INCOME .....      |            | 41.   |
| NET RENTAL REAL ESTATE INCOME ..... |            | 4.    |
|                                     |            | ----- |
| TOTAL ACTIVITY INCOME               |            | 45.   |
|                                     |            | ===== |

Illinois Department of Revenue  
**Schedule K-1-T**

**Beneficiary's Share of  
Income and Deductions**

To be completed by trusts or estates filing Form IL-1041

Beneficiaries receiving Schedule K-1-T should attach this form to their Illinois Tax Return

Year ending  
12 / 2008  
Month / Year

**Step 1: Identify your trust or estate**

1 Check the appropriate box  trust  estate

2 JUDY BRINKMAN SIMPLE TRUST  
Write your name as shown on your Form IL-1041.

3 25-1111111  
Write your federal employer identification number (FEIN).

4 Write the apportionment factor from Step 6, Line 3, of Schedule NR, Form IL-1041; otherwise, write "1." 1.000000

**Step 2: Identify your beneficiary**

5 ROBERT A. BRINKMAN  
Name

7 111-22-3333  
Social Security number or FEIN

6 13000 EASTERBROOK DRIVE  
Mailing address

8 Check the appropriate box  
 individual  corporation  trust  
 partnership  S corporation  estate

HIGHLAND PARK IL 60305-0305  
City State ZIP

**Step 3: Figure your beneficiary's share of your nonbusiness income**

|   | A<br>Beneficiary's share<br>(see instructions) | B<br>Nonresident beneficiary's<br>share allocable to Illinois |
|---|--|---|
| 9 Interest  | <u>291.</u>                                    |   |
| 10 Dividends  | <u>1,083.</u>                                  |   |
| 11 Rental income  |  |   |
| 12 Patent royalties                                       |  |   |
| 13 Copyright royalties                                    |  |   |
| 14 Other royalty income                                   |  |   |
| 15 Capital gain or loss from real property                |  |   |
| 16 Capital gain or loss from tangible personal property   |  |   |
| 17 Capital gain or loss from intangible personal property |  |   |
| 18 Other income <u>Specify</u>                            | <u>172.</u>                                    |   |

**Step 4: Figure your beneficiary's share of your business income**

(See instructions.)

|  | A<br>Beneficiary's share<br>from U.S. Schedule K-1,<br>less nonbusiness income | B<br>Nonresident beneficiary's<br>share apportioned to Illinois |
|--|--|---|
| 19 Interest  |  |   |
| 20 Dividends   |  |   |
| 21 Net short-term capital gain   |  |   |
| 22 Net long-term capital gain (total for year)   |  |   |
| 23 Annuities, royalties, and other nonpassive income before directly apportioned deductions                            |  |   |
| 24 <b>Directly apportioned deductions</b> - Depreciation, depletion, and amortization                                  |  |   |
| 25 Total annuities, royalties, and other nonpassive income. Subtract Column A, Line 24 from Line 23. See Instructions. |  |   |
| 26 Trade or business, rental real estate, and other rental income before directly apportioned deductions               |  |   |
| 27 <b>Directly apportioned deductions</b> - Depreciation, depletion, and amortization                                  |  |   |
| 28 Total trade or business, rental real estate, and other rental income. Subtract Column A, Line 27 from Line 26.      |  |   |
| 29 Other income <u>Specify</u>   |  |   |

## Step 5: Figure your beneficiary's share of your Illinois additions and subtractions

|  | A  | B  |
|--|--|--|
|  | Beneficiary's share<br>from Form IL-1041 | Nonresident beneficiary's<br>share apportioned or<br>allocated to Illinois |
| <b>Additions</b>   |  |  |
| 30 Federally tax-exempt interest income  | 30 <u>811.</u>                           |  |
| 31 Illinois income and replacement tax deducted  | 31 <u>80.</u>                            |  |
| 32 Illinois Bonus Depreciation addition  | 32 _____                                 |  |
| 33 Related-Party Expenses addition   | 33 _____                                 |  |
| 34 Distributive share of additions   | 34 _____                                 |  |
| 35 Other additions not listed above (as figured on Illinois<br>Schedule M (for businesses))    | 35 _____                                 |  |
| <b>Subtractions</b>  |  |  |
| 36 a Interest from U.S. Treasury obligations included as<br>business income                    | 36a _____                                |  |
| b Interest from U.S. Treasury obligations included as<br>nonbusiness income                    | 36b <u>130.</u>                          |  |
| 37 Federally-taxed refund of Illinois income and replacement tax                               | 37 _____                                 |  |
| 38 Payment from certain retirement plans   | 38 _____                                 |  |
| 39 Retirement payments to retired partners   | 39 _____                                 |  |
| 40 Enterprise Zone or River Edge Redevelopment Zone<br>Dividend Subtraction                    | 40 _____                                 |  |
| 41 High Impact Business within a Foreign Trade Zone<br>Dividend Subtraction                    | 41 <u>247.</u>                           |  |
| 42 Contributions to certain job training projects  | 42 _____                                 |  |
| 43 Illinois Bonus Depreciation subtraction   | 43 _____                                 |  |
| 44 Related-Party Expenses subtraction  | 44 _____                                 |  |
| 45 Distributive share of subtractions  | 45 _____                                 |  |
| 46 Other subtractions not listed above (as figured on Illinois<br>Schedule M (for businesses)) | 46 <u>418.</u>                           |  |

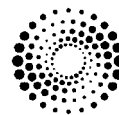
## Step 6: Figure your beneficiary's (except a corporate beneficiary) share of your Illinois August 1, 1969, appreciation amounts

|                               | A   | B  |
|-------------------------------|---|--|
|                               | Beneficiary's share<br>from Illinois Schedule F<br>(Form IL-1041) | Nonresident beneficiary's<br>share apportioned or<br>allocated to Illinois |
| 47 Section 1245 and 1250 gain | 47 _____  |  |
| 48 Section 1231 gain          | 48 _____  |  |
| 49 Capital gain               | 49 _____  |  |

## Step 7: Figure your beneficiary's share of pass-through entity payments

|   |          |
|---|----------|
| 50 Pass-through entity payments made on behalf of<br>nonresident beneficiary from Form IL-1000. | 50 _____ |
|---|----------|

TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006



THOMSON REUTERS

Judy C. Brinkman  
1304 W Park Avenue  
New York, NY 10036-0036

RE: JUDY BRINKMAN SIMPLE TRUST

Enclosed is your tax information for the above referenced account necessary to complete your income tax return. This information is based on your reportable share of the trust's income earned during the year, not the amount paid to you and as such the amounts may differ. The difference may be caused by the allocation of fees, exclusion of tax-exempt income, our agreed plan of remitting, or variance between your taxable year and that of this account. Included in this package:

Schedule K-1 (Form 1041) - Schedule K-1 is an IRS required document and is used to report your share of the trust's or estate's income, credits, deductions, etc. Do not file the Schedule K-1 with your income tax return since a copy has already been filed with the IRS.

State information - If applicable, state tax information has been attached. Since income tax requirements vary from state to state, the presentation of the state tax information will be different for each state.

If you have interests in other accounts, the income tax information for those accounts will be included in a separate letter.

If you have any questions concerning this information, please call  
Your Administrator at (502)259-2500.

Sincerely,

**Schedule K-1  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**2008**

For calendar year 2008,  
or tax year beginning \_\_\_\_\_, 2008,  
and ending \_\_\_\_\_, 20 \_\_\_\_\_

**Beneficiary's Share of Income, Deductions, Credits, etc.**

▶ See back of form and instructions.

**Part I Information About the Estate or Trust**

**A** Estate's or trust's employer identification number  
25-1111111

**B** Estate's or trust's name  
JUDY BRINKMAN SIMPLE TRUST

**C** Fiduciary's name, address, city, state, and ZIP code  
TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006

**D**  Check if Form 1041-T was filed and enter the date it was filed \_\_\_\_\_

**E**  Check if this is the final Form 1041 for the estate or trust

**Part II Information About the Beneficiary**

**F** Beneficiary's identifying number  
222-33-4444

**G** Beneficiary's name, address, city, state, and ZIP code  
JUDY C. BRINKMAN  
1304 W PARK AVENUE  
NEW YORK, NY 10036-0036

**H**  Domestic beneficiary  Foreign beneficiary

**Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items**

|           |  |        |           |                                    |
|-----------|--|--------|-----------|------------------------------------|
| <b>1</b>  | Interest income                        |        | <b>11</b> | Final year deductions              |
|           |  | 2,613. |           |                                    |
| <b>2a</b> | Ordinary dividends                     |        |           |                                    |
|           |  | 9,750. |           |                                    |
| <b>2b</b> | Qualified dividends                    |        |           |                                    |
|           |  | 9,371. |           |                                    |
| <b>3</b>  | Net short-term capital gain            |        |           |                                    |
| <b>4a</b> | Net long-term capital gain             |        |           |                                    |
| <b>4b</b> | 28% rate gain                          |        | <b>12</b> | Alternative minimum tax adjustment |
|           |  |        | A         | 240.                               |
| <b>4c</b> | Unrecaptured section 1250 gain         |        | J         | 240.                               |
| <b>5</b>  | Other portfolio and nonbusiness income |        |           |                                    |
|           |  | 1,136. |           |                                    |
| <b>6</b>  | Ordinary business income               |        |           |                                    |
|           |  | 371.   |           |                                    |
| <b>7</b>  | Net rental real estate income          |        | <b>13</b> | Credits and credit recapture       |
|           |  | 38.    |           |                                    |
| <b>8</b>  | Other rental income                    |        |           |                                    |
| <b>9</b>  | Directly apportioned deductions        |        |           |                                    |
|           |  |        | <b>14</b> | Other information                  |
|           |  |        | A         | 7,296.                             |
| <b>10</b> | Estate tax deduction                   |        | B         | 108.                               |

\*See attached statement for additional information.  
**Note.** A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

**This list identifies the codes used on Schedule K-1 for beneficiaries and provides summarized reporting information for beneficiaries who file Form 1040. For detailed reporting and filing information, see the Instructions for Beneficiary Filing Form 1040 and the instructions for your income tax return.**

|   | <i>Report on</i>   |
|---|--|
| <b>1. Interest income</b>                           | Form 1040, line 8a   |
| <b>2a. Ordinary dividends</b>                       | Form 1040, line 9a   |
| <b>2b. Qualified dividends</b>                      | Form 1040, line 9b   |
| <b>3. Net short-term capital gain</b>               | Schedule D, line 5   |
| <b>4a. Net long-term capital gain</b>               | Schedule D, line 12  |
| <b>4b. 28% rate gain</b>                            | Line 4 of the worksheet for Schedule D, line 18  |
| <b>4c. Unrecaptured section 1250 gain</b>           | Line 11 of the worksheet for Schedule D, line 19   |
| <b>5. Other portfolio and nonbusiness income</b>    | Schedule E, line 33, column (f)  |
| <b>6. Ordinary business income</b>                  | Schedule E, line 33, column (d) or (f)   |
| <b>7. Net rental real estate income</b>             | Schedule E, line 33, column (d) or (f)   |
| <b>8. Other rental income</b>                       | Schedule E, line 33, column (d) or (f)   |
| <b>9. Directly apportioned deductions</b>           |  |
| <i>Code</i>   |  |
| <b>A Depreciation</b>                               | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>B Depletion</b>                                  | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>C Amortization</b>                               | Form 8582 or Schedule E, line 33, column (c) or (e)  |
| <b>10. Estate tax deduction</b>                     | Schedule A, line 28  |
| <b>11. Final year deductions</b>                    |  |
| <b>A Excess deductions</b>                          | Schedule A, line 23  |
| <b>B Short-term capital loss carryover</b>          | Schedule D, line 5   |
| <b>C Long-term capital loss carryover</b>           | Schedule D, line 12; line 5 of the wksht. for Sch. D, line 18; and line 16 of the wksht. for Sch. D, line 19 |
| <b>D Net operating loss carryover - regular tax</b> | Form 1040, line 21   |
| <b>E Net operating loss carryover - minimum tax</b> | Form 6251, line 28   |

| <b>12. Alternative minimum tax (AMT) items</b>                                  | <i>Report on</i>  |
|---|---|
| <i>Code</i>   |   |
| <b>A</b> Adjustment for minimum tax purposes                                    | Form 6251, line 15  |
| <b>B</b> AMT adjustment attributable to qualified dividends                     | } See the beneficiary's instructions and the Instructions for Form 6251 |
| <b>C</b> AMT adjustment attributable to net short-term capital gain             |   |
| <b>D</b> AMT adjustment attributable to net long-term capital gain              |   |
| <b>E</b> AMT adjustment attributable to unrecaptured section 1250 gain          |   |
| <b>F</b> AMT adjustment attributable to 28% rate gain                           |   |
| <b>G</b> Accelerated depreciation   |   |
| <b>H</b> Depletion  |   |
| <b>I</b> Amortization   |   |
| <b>J</b> Exclusion items  | 2009 Form 8801  |
| <b>13. Credits and credit recapture</b>   |   |
| <b>A</b> Credit for estimated taxes   | Form 1040, line 63  |
| <b>B</b> Credit for backup withholding  | Form 1040, line 62  |
| <b>C</b> Low-income housing credit  | Form 8586 (also see the beneficiary's instructions)                     |
| <b>D</b> Qualified rehabilitation expenditures                                  | See the beneficiary's instructions                                      |
| <b>E</b> Basis of other investment credit property                              | See the beneficiary's instructions                                      |
| <b>F</b> Work opportunity credit  | Form 5884, line 3   |
| <b>G</b> Welfare-to-work credit   | Form 3800, line 1b  |
| <b>H</b> Alcohol and cellulosic biofuels fuel credit                            | Form 6478, line 9 (also see the beneficiary's instructions)             |
| <b>I</b> Credit for increasing research activities                              | Form 3800, line 1c  |
| <b>J</b> Renewable electricity, refined coal, and Indian coal production credit | See the beneficiary's instructions                                      |
| <b>K</b> Empowerment zone and renewal community employment credit               | Form 8844, line 3   |
| <b>L</b> Indian employment credit   | Form 3800, line 1g  |
| <b>M</b> Orphan drug credit   | Form 3800, line 1h  |
| <b>N</b> Credit for employer-provided child care and facilities                 | Form 3800, line 1k  |
| <b>O</b> Biodiesel and renewable diesel fuels credit                            | Form 8864, line 11 (also see the beneficiary's instructions)            |
| <b>P</b> Nonconventional source fuel credit                                     | Form 3800, line 1o  |
| <b>Q</b> Credit to holders of tax credit bonds                                  | Form 8912, line 8   |
| <b>R</b> Agricultural chemicals security credit                                 | Form 3800, line 1v  |
| <b>S</b> Energy efficient appliance credit                                      | Form 3800, line 1q  |
| <b>T</b> Credit for employer differential wage payments                         | Form 3800, line 1w  |
| <b>U</b> Recapture of credits   | See the beneficiary's instructions                                      |
| <b>14. Other information</b>  |   |
| <b>A</b> Tax-exempt interest  | Form 1040, line 8b  |
| <b>B</b> Foreign taxes  | Form 1040, line 47 or Sch. A, line 8                                    |
| <b>C</b> Qualified production activities income                                 | Form 8903, line 7   |
| <b>D</b> Form W-2 wages   | Form 8903, line 15  |
| <b>E</b> Net investment income  | Form 4952, line 4a  |
| <b>F</b> Gross farm and fishing income  | Schedule E, line 42   |
| <b>G</b> Foreign trading gross receipts (IRC 942(a))                            | See the instructions for Form 8873                                      |
| <b>H</b> Other information  | See the beneficiary's instructions                                      |

**Note.** If you are a beneficiary who does not file a Form 1040, see instructions for the type of income tax return you are filing.

FOREIGN TAX CREDIT INFORMATION (LINE 14, CODE B)

-----

(ENTER THE FOLLOWING ON FORM 1116 OR SCHEDULE A IF APPLICABLE)

| COUNTRY     | GROSS INCOME | TAXES | DATE PAID  |
|-------------|--------------|-------|------------|
| -----       | -----        | ----- | -----      |
| CANADA      | 862.         | 72.   | 12/31/2008 |
| NETHERLANDS | 359.         | 36.   | 12/31/2008 |
| TOTALS      | 1,221.       | 108.  |            |
|             | =====        | ===== |            |

STATE INCOME TAX INFORMATION

-----

FOR NEW YORK STATE INCOME TAX PURPOSES:  
 THE FOLLOWING ITEMS, IF ANY, ARE MODIFICATIONS OF THE AMOUNTS ON YOUR  
 FEDERAL SCHEDULE K-1. IF YOU HAVE ANY QUESTIONS, YOU SHOULD CONSULT  
 YOUR TAX COUNSEL.

FIDUCIARY ADDITION ..... 5,429.  
 (ENTER ABOVE ON FORM IT-201, PAGE 2)

\*\* FEDERAL SUMMARY OF PASSIVE/ACTIVE ACTIVITIES \*\*

-----

|                                     |            |       |
|-------------------------------------|------------|-------|
| THOMSON LIMITED                     | 99-1234567 |       |
| ACTIVE INCOME (LOSS)                |            |       |
| LOCATION OF PROPERTY .....          | TEXAS      |       |
| ORDINARY BUSINESS INCOME .....      |            | 371.  |
| NET RENTAL REAL ESTATE INCOME ..... |            | 38.   |
|                                     |            | ----- |
| TOTAL ACTIVITY INCOME               |            | 409.  |
|                                     |            | ===== |

Illinois Department of Revenue  
**Schedule K-1-T**

**Beneficiary's Share of  
Income and Deductions**

To be completed by trusts or estates filing Form IL-1041

Beneficiaries receiving Schedule K-1-T should attach this form to their Illinois Tax Return

Year ending  
12 / 2008  
Month / Year

**Step 1: Identify your trust or estate**

1 Check the appropriate box  trust  estate

2 JUDY BRINKMAN SIMPLE TRUST  
Write your name as shown on your Form IL-1041.

3 25-1111111  
Write your federal employer identification number (FEIN).

4 Write the apportionment factor from Step 6, Line 3, of Schedule NR, Form IL-1041; otherwise, write "1." 1.000000

**Step 2: Identify your beneficiary**

5 JUDY C. BRINKMAN  
Name

7 222-33-4444  
Social Security number or FEIN

6 1304 W PARK AVENUE  
Mailing address

8 Check the appropriate box  
 individual  corporation  trust  
 partnership  S corporation  estate

NEW YORK NY 10036-0036  
City State ZIP

**Step 3: Figure your beneficiary's share of your nonbusiness income**

|   | A<br>Beneficiary's share<br>(see instructions) | B<br>Nonresident beneficiary's<br>share allocable to Illinois |
|---|--|---|
| 9 Interest  | 2,613.   |   |
| 10 Dividends  | 9,750.   |   |
| 11 Rental income  |  |   |
| 12 Patent royalties                                       |  |   |
| 13 Copyright royalties                                    |  |   |
| 14 Other royalty income                                   |  |   |
| 15 Capital gain or loss from real property                |  |   |
| 16 Capital gain or loss from tangible personal property   |  |   |
| 17 Capital gain or loss from intangible personal property |  |   |
| 18 Other income <u>Specify</u>                            | 1,545.   |   |

**Step 4: Figure your beneficiary's share of your business income**

(See instructions.)

|  | A<br>Beneficiary's share<br>from U.S. Schedule K-1,<br>less nonbusiness income | B<br>Nonresident beneficiary's<br>share apportioned to Illinois |
|--|--|---|
| 19 Interest  |  |   |
| 20 Dividends   |  |   |
| 21 Net short-term capital gain   |  |   |
| 22 Net long-term capital gain (total for year)   |  |   |
| 23 Annuities, royalties, and other nonpassive income before directly apportioned deductions                            |  |   |
| 24 <b>Directly apportioned deductions</b> - Depreciation, depletion, and amortization                                  |  |   |
| 25 Total annuities, royalties, and other nonpassive income. Subtract Column A, Line 24 from Line 23. See Instructions. |  |   |
| 26 Trade or business, rental real estate, and other rental income before directly apportioned deductions               |  |   |
| 27 <b>Directly apportioned deductions</b> - Depreciation, depletion, and amortization                                  |  |   |
| 28 Total trade or business, rental real estate, and other rental income. Subtract Column A, Line 27 from Line 26.      |  |   |
| 29 Other income <u>Specify</u>   |  |   |

## Step 5: Figure your beneficiary's share of your Illinois additions and subtractions

|  | A  | B  |
|--|--|--|
|  | Beneficiary's share<br>from Form IL-1041 | Nonresident beneficiary's<br>share apportioned or<br>allocated to Illinois |
| <b>Additions</b>   |  |  |
| 30 Federally tax-exempt interest income  | 30 <u>7,295.</u>                         | _____  |
| 31 Illinois income and replacement tax deducted  | 31 <u>719.</u>                           | _____  |
| 32 Illinois Bonus Depreciation addition  | 32 _____                                 | _____  |
| 33 Related-Party Expenses addition   | 33 _____                                 | _____  |
| 34 Distributive share of additions   | 34 _____                                 | _____  |
| 35 Other additions not listed above (as figured on Illinois<br>Schedule M (for businesses))    | 35 _____                                 | _____  |
| <b>Subtractions</b>  |  |  |
| 36 a Interest from U.S. Treasury obligations included as<br>business income                    | 36a _____                                | _____  |
| b Interest from U.S. Treasury obligations included as<br>nonbusiness income                    | 36b <u>1,169.</u>                        | _____  |
| 37 Federally-taxed refund of Illinois income and replacement tax                               | 37 _____                                 | _____  |
| 38 Payment from certain retirement plans   | 38 _____                                 | _____  |
| 39 Retirement payments to retired partners   | 39 _____                                 | _____  |
| 40 Enterprise Zone or River Edge Redevelopment Zone<br>Dividend Subtraction                    | 40 _____                                 | _____  |
| 41 High Impact Business within a Foreign Trade Zone<br>Dividend Subtraction                    | 41 <u>2,221.</u>                         | _____  |
| 42 Contributions to certain job training projects  | 42 _____                                 | _____  |
| 43 Illinois Bonus Depreciation subtraction   | 43 _____                                 | _____  |
| 44 Related-Party Expenses subtraction  | 44 _____                                 | _____  |
| 45 Distributive share of subtractions  | 45 _____                                 | _____  |
| 46 Other subtractions not listed above (as figured on Illinois<br>Schedule M (for businesses)) | 46 <u>3,765.</u>                         | _____  |

## Step 6: Figure your beneficiary's (except a corporate beneficiary) share of your Illinois August 1, 1969, appreciation amounts

|                               | A   | B  |
|-------------------------------|---|--|
|                               | Beneficiary's share<br>from Illinois Schedule F<br>(Form IL-1041) | Nonresident beneficiary's<br>share apportioned or<br>allocated to Illinois |
| 47 Section 1245 and 1250 gain | 47 _____  | _____  |
| 48 Section 1231 gain          | 48 _____  | _____  |
| 49 Capital gain               | 49 _____  | _____  |

## Step 7: Figure your beneficiary's share of pass-through entity payments

|   |          |
|---|----------|
| 50 Pass-through entity payments made on behalf of<br>nonresident beneficiary from Form IL-1000. | 50 _____ |
|---|----------|

1041 TAX RETURN FOR JUDY BRINKMAN SIMPLE TRUST  
02000214



\*0FD553C073322039920080000-000\*

A Type of entity (see instr.): For calendar year 2008 or fiscal year beginning, 2008, and ending. Decedent's estate, Simple trust, Complex trust, Qualified disability trust, ESBT (S portion only), Grantor type trust, Bankruptcy estate-Ch. 7, Bankruptcy estate-Ch. 11, Pooled income fund. Name of estate or trust: JUDY BRINKMAN SIMPLE TRUST. Name and title of fiduciary: TR BANK & TRUST COMPANY. Number, street, and room or suite no.: 2395 MIDWAY ROAD. City or town, state, and ZIP code: CARROLLTON, TX 75006. Employer identification number: 25-1111111. Date entity created: 08/25/1985.

B Number of Schedules K-1 attached (see instructions) 2. F Check applicable boxes: Initial return, Final return, Amended return, Change in trust's name, Change in fiduciary's address.

G Check here if the estate or filing trust made a section 645 election

Income section table with rows 1-9. 1 Interest income SEE STATEMENT 1 6,905. 2a Total ordinary dividends SEE STATEMENT 1 14,038. b Qualified dividends allocable to: (1) Beneficiaries 10,412. (2) Estate or trust 2,626. 3 Business income or (loss). Attach Schedule C or C-EZ (Form 1040). 4 Capital gain or (loss). Attach Schedule D (Form 1041). 5 Rents, royalties, partnerships, other estates and trusts, etc. Attach Schedule E (Form 1040). 6 Farm income or (loss). Attach Schedule F (Form 1040). 7 Ordinary gain or (loss). Attach Form 4797. 8 Other income. List type and amount SEE STATEMENT 2 3,000. 9 Total income. Combine lines 1, 2a, and 3 through 8 26,023.

Deductions section table with rows 10-21. 10 Interest. Check if Form 4952 is attached. 11 Taxes 1,000. 12 Fiduciary fees PORTION. SUBJ. TO. ALLOC.: 1,800. 1,201. 13 Charitable deduction (from Schedule A, line 7). 14 Attorney, accountant, and return preparer fees PORTION. SUBJ. TO. ALLOC.: 4,900. 3,270. 15a Other deductions not subject to the 2% floor (attach schedule) SEE STATEMENT 3. 200. 15b Allowable miscellaneous itemized deductions subject to the 2% floor. 16 Add lines 10 through 15b 5,671. 17 Adjusted total income or (loss). Subtract line 16 from line 9 20,352. 18 Income distribution deduction (from Schedule B, line 15). Attach Schedules K-1 (Form 1041). 15,454. 19 Estate tax deduction including certain generation-skipping taxes (attach computation). 20 Exemption 300. 21 Add lines 18 through 20. 15,754.

Tax and Payments section table with rows 22-29. 22 Taxable income. Subtract line 21 from line 17. If a loss, see page 23 of the instructions 4,598. 23 Total tax (from Schedule G, line 7) 476. 24 Payments: a 2008 estimated tax payments and amount applied from 2007 return 5,400. b Estimated tax payments allocated to beneficiaries (from Form 1041-T). c Subtract line 24b from line 24a 5,400. d Tax paid with Form 7004 (see page 24 of the instructions). e Federal income tax withheld. If any is from Form(s) 1099, check. Other payments: f Form 2439; g Form 4136. Total 5,400. 25 Total payments. Add lines 24c through 24e, and 24h 5,400. 26 Estimated tax penalty (see page 24 of the instructions). 27 Tax due. If line 25 is smaller than the total of lines 23 and 26, enter amount owed NONE. 28 Overpayment. If line 25 is larger than the total of lines 23 and 26, enter amount overpaid 4,924. 29 Amount of line 28 to be: a Credited to 2009 estimated tax 476.; b Refunded 4,448.

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

Sign Here section. Signature of fiduciary or officer representing fiduciary: Signature line. Date: 61-1122334. EIN of fiduciary if a financial institution: 61-1122334. May the IRS discuss this return with the preparer shown below (see instr.): Yes [X] No [ ]

Paid Preparer's Use Only section. Preparer's signature: Signature line. Date: 06/22/2009. Check if self-employed: [ ]. Preparer's SSN or PTIN: P00541305. Firm's name (or yours if self-employed), address, and ZIP code: THOMSON REUTERS (TAX & ACCOUNTING), 9711 FARRAR COURT, STE 110, RICHMOND, VA. EIN: 75-1297386. Phone no.: 804-727-3152, 23236.

**Schedule A Charitable Deduction.** Do not complete for a simple trust or a pooled income fund.

|   |   |   |  |
|---|---|---|--|
| 1 | Amounts paid or permanently set aside for charitable purposes from gross income (see page 25)   | 1 |  |
| 2 | Tax-exempt income allocable to charitable contributions (see page 25 of the instructions)   | 2 |  |
| 3 | Subtract line 2 from line 1   | 3 |  |
| 4 | Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes                              | 4 |  |
| 5 | Add lines 3 and 4   | 5 |  |
| 6 | Section 1202 exclusion allocable to capital gains paid or permanently set aside for charitable purposes (see page 25 of the instructions) | 6 |  |
| 7 | <b>Charitable deduction.</b> Subtract line 6 from line 5. Enter here and on page 1, line 13   | 7 |  |

**Schedule B Income Distribution Deduction**

|    |  |    |         |
|----|--|----|---------|
| 1  | Adjusted total income (see page 26 of the instructions)  | 1  | 20,352. |
| 2  | Adjusted tax-exempt interest SEE STATEMENT 5   | 2  | 10,150. |
| 3  | Total net gain from Schedule D (Form 1041), line 15, column (1) (see page 26 of the instructions)                                  | 3  |         |
| 4  | Enter amount from Schedule A, line 4 (minus any allocable section 1202 exclusion)  | 4  |         |
| 5  | Capital gains for the tax year included on Schedule A, line 1 (see page 26 of the instructions)                                    | 5  |         |
| 6  | Enter any gain from page 1, line 4, as a negative number. If page 1, line 4, is a loss, enter the loss as a positive number        | 6  | -1,000. |
| 7  | <b>Distributable net income.</b> Combine lines 1 through 6. If zero or less, enter -0-   | 7  | 29,502. |
| 8  | If a complex trust, enter accounting income for the tax year as determined under the governing instrument and applicable local law | 8  |         |
| 9  | Income required to be distributed currently  | 9  | 23,560. |
| 10 | Other amounts paid, credited, or otherwise required to be distributed  | 10 |         |
| 11 | Total distributions. Add lines 9 and 10. If greater than line 8, see page 26 of the instructions                                   | 11 | 23,560. |
| 12 | Enter the amount of tax-exempt income included on line 11  | 12 | 8,106.  |
| 13 | Tentative income distribution deduction. Subtract line 12 from line 11   | 13 | 15,454. |
| 14 | Tentative income distribution deduction. Subtract line 2 from line 7. If zero or less, enter -0-                                   | 14 | 19,352. |
| 15 | <b>Income distribution deduction.</b> Enter the smaller of line 13 or line 14 here and on page 1, line 18                          | 15 | 15,454. |

**Schedule G Tax Computation** (see page 27 of the instructions)

|    |   |    |      |
|----|---|----|------|
| 1  | <b>Tax:</b>   |    |      |
|    | a Tax on taxable income (see page 27 of the instructions)   | 1a | 506. |
|    | b Tax on lump-sum distributions. Attach Form 4972   | 1b |      |
|    | c Alternative minimum tax (from Schedule I (Form 1041), line 56)                                      | 1c | NONE |
|    | d <b>Total.</b> Add lines 1a through 1c   | 1d | 506. |
| 2a | Foreign tax credit. Attach Form 1116  | 2a | 30.  |
| b  | Other nonbusiness credits (attach schedule)   | 2b |      |
| c  | General business credit. Attach Form 3800   | 2c |      |
| d  | Credit for prior year minimum tax. Attach Form 8801   | 2d |      |
| 3  | <b>Total credits.</b> Add lines 2a through 2d   | 3  | 30.  |
| 4  | Subtract line 3 from line 1d. If zero or less, enter -0-  | 4  | 476. |
| 5  | Recapture taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 | 5  |      |
| 6  | Household employment taxes. Attach Schedule H (Form 1040)   | 6  |      |
| 7  | <b>Total tax.</b> Add lines 4 through 6. Enter here and on page 1, line 23                            | 7  | 476. |

**Other Information**

|  | Yes                      | No |
|--|--------------------------|----|
| 1 Did the estate or trust receive tax-exempt income? If "Yes," attach a computation of the allocation of expenses. Enter the amount of tax-exempt interest income and exempt-interest dividends \$ 12,479.   | X                        |    |
| 2 Did the estate or trust receive all or any part of the earnings (salary, wages, and other compensation) of any individual by reason of a contract assignment or similar arrangement?   |                          | X  |
| 3 At any time during calendar year 2008, did the estate or trust have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See page 29 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country |                          | X  |
| 4 During the tax year, did the estate or trust receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the estate or trust may have to file Form 3520. See page 29 of the instructions   |                          | X  |
| 5 Did the estate or trust receive, or pay, any qualified residence interest on seller-provided financing? If "Yes," see page 30 for required attachment  |                          | X  |
| 6 If this is an estate or a complex trust making the section 663(b) election, check here (see page 30)   | <input type="checkbox"/> |    |
| 7 To make a section 643(e)(3) election, attach Schedule D (Form 1041), and check here (see page 30)  | <input type="checkbox"/> |    |
| 8 If the decedent's estate has been open for more than 2 years, attach an explanation for the delay in closing the estate, and check here  | <input type="checkbox"/> |    |
| 9 Are any present or future trust beneficiaries skip persons? See page 30 of the instructions  |                          | X  |

**SCHEDULE I  
(Form 1041)**

**Alternative Minimum Tax - Estates and Trusts**

OMB No. 1545-0092

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 1041. See the separate instructions  
for Schedule I (Form 1041).**

**2008**

|  |   |
|--|---|
| Name of estate or trust<br><b>JUDY BRINKMAN SIMPLE TRUST</b> | Employer identification number<br><b>25-1111111</b> |
|--|---|

**Part I Estate's or Trust's Share of Alternative Minimum Taxable Income**

|    |  |    |         |
|----|--|----|---------|
| 1  | Adjusted total income or (loss) (from Form 1041, line 17)  |    | 20,352. |
| 2  | Interest   |    |         |
| 3  | Taxes  |    | 1,000.  |
| 4  | Miscellaneous itemized deductions (from Form 1041, line 15b)   |    |         |
| 5  | Refund of taxes  |    | ( )     |
| 6  | Depletion (difference between regular tax and AMT)   |    |         |
| 7  | Net operating loss deduction. Enter as a positive amount   |    |         |
| 8  | Interest from specified private activity bonds exempt from the regular tax                           |    |         |
| 9  | Qualified small business stock (see page 2 of the instructions)                                      |    |         |
| 10 | Exercise of incentive stock options (excess of AMT income over regular tax income)                   |    |         |
| 11 | Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)                      |    |         |
| 12 | Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)                          |    |         |
| 13 | Disposition of property (difference between AMT and regular tax gain or loss)                        |    |         |
| 14 | Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)         |    |         |
| 15 | Passive activities (difference between AMT and regular tax income or loss)                           |    |         |
| 16 | Loss limitations (difference between AMT and regular tax income or loss)                             |    |         |
| 17 | Circulation costs (difference between regular tax and AMT)   |    |         |
| 18 | Long-term contracts (difference between AMT and regular tax income)                                  |    |         |
| 19 | Mining costs (difference between regular tax and AMT)  |    |         |
| 20 | Research and experimental costs (difference between regular tax and AMT)                             |    |         |
| 21 | Income from certain installment sales before January 1, 1987   |    | ( )     |
| 22 | Intangible drilling costs preference   |    |         |
| 23 | Other adjustments, including income-based related adjustments  |    |         |
| 24 | Alternative tax net operating loss deduction (See the instructions for the limitation that applies.) |    | ( )     |
| 25 | Adjusted alternative minimum taxable income. Combine lines 1 through 24                              |    | 21,352. |
| 26 | Income distribution deduction from Part II, line 44  | 26 | 15,720. |
| 27 | Estate tax deduction (from Form 1041, line 19)   | 27 |         |
| 28 | Add lines 26 and 27  |    | 15,720. |
| 29 | Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25       |    | 5,632.  |

**Note:** Complete Part II below before going to line 26.

- If line 29 is:
- \$22,500 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust is not liable for the alternative minimum tax.
  - Over \$22,500, but less than \$165,000, go to line 45.
  - \$165,000 or more, enter the amount from line 29 on line 51 and go to line 52.

**Part II Income Distribution Deduction on a Minimum Tax Basis**

|    |   |  |           |
|----|---|--|-----------|
| 30 | Adjusted alternative minimum taxable income (see page 6 of the instructions)  |  | 21,352.   |
| 31 | Adjusted tax-exempt interest (other than amounts included on line 8)  |  | 10,150.   |
| 32 | Total net gain from Schedule D (Form 1041), line 15, column (1). If a loss, enter -0-   |  |           |
| 33 | Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4) |  |           |
| 34 | Capital gains paid or permanently set aside for charitable purposes from gross income (see page 6 of the instructions)                            |  |           |
| 35 | Capital gains computed on a minimum tax basis included on line 25   |  | ( 1,000.) |
| 36 | Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount  |  |           |
| 37 | Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. If zero or less, enter -0-                            |  | 30,502.   |
| 38 | Income required to be distributed currently (from Form 1041, Schedule B, line 9)  |  | 23,560.   |
| 39 | Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)                                       |  |           |
| 40 | Total distributions. Add lines 38 and 39  |  | 23,560.   |
| 41 | Tax-exempt income included on line 40 (other than amounts included on line 8)   |  | 7,840.    |
| 42 | Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40   |  | 15,720.   |

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (From 1041) (2008)

**Part II Income Distribution Deduction on a Minimum Tax Basis (continued)**

|           |   |           |         |
|-----------|---|-----------|---------|
| <b>43</b> | Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 37.<br>If zero or less, enter -0-    | <b>43</b> | 20,352. |
| <b>44</b> | <b>Income distribution deduction on a minimum tax basis.</b> Enter the smaller of line 42 or line 43. Enter here and on line 26 | <b>44</b> | 15,720. |

**Part III Alternative Minimum Tax**

|           |  |           |             |
|-----------|--|-----------|-------------|
| <b>45</b> | Exemption amount   | <b>45</b> | \$22,500.00 |
| <b>46</b> | Enter the amount from line 29  | <b>46</b> |             |
| <b>47</b> | Phase-out of exemption amount  | <b>47</b> | \$75,000.00 |
| <b>48</b> | Subtract line 47 from line 46. If zero or less, enter -0-  | <b>48</b> |             |
| <b>49</b> | Multiply line 48 by 25% (.25)  | <b>49</b> |             |
| <b>50</b> | Subtract line 49 from line 45. If zero or less, enter -0-  | <b>50</b> |             |
| <b>51</b> | Subtract line 50 from line 46  | <b>51</b> |             |
| <b>52</b> | Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has a gain on lines 14a and 15 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise, if line 51 is -<br>• \$175,000 or less, multiply line 51 by 26% (.26).<br>• Over \$175,000, multiply line 51 by 28% (.28) and subtract \$3,500 from the result | <b>52</b> |             |
| <b>53</b> | Alternative minimum foreign tax credit (see page 7 of the instructions)  | <b>53</b> |             |
| <b>54</b> | Tentative minimum tax. Subtract line 53 from line 52   | <b>54</b> |             |
| <b>55</b> | Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)  | <b>55</b> |             |
| <b>56</b> | <b>Alternative minimum tax.</b> Subtract line 55 from line 54. If zero or less, enter -0-. Enter here and on Form 1041, Schedule G, line 1c  | <b>56</b> |             |

**Part IV Line 52 Computation Using Maximum Capital Gains Rates**

**Caution:** If you did not complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet, see page 8 of the instructions before completing this part.

|   |  |           |            |
|---|--|-----------|------------|
| <b>57</b>   | Enter the amount from line 51  | <b>57</b> |            |
| <b>58</b>   | Enter the amount from Schedule D (Form 1041), line 22, line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet, whichever applies (as refigured for the AMT, if necessary)   | <b>58</b> |            |
| <b>59</b>   | Enter the amount from Schedule D (Form 1041), line 14b, column (2) (as refigured for the AMT, if necessary). If you did not complete Schedule D for the regular tax or the AMT, enter -0-  | <b>59</b> |            |
| <b>60</b>   | If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 58. Otherwise, add lines 58 and 59 and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary)   | <b>60</b> |            |
| <b>61</b>   | Enter the <b>smaller</b> of line 57 or line 60   | <b>61</b> |            |
| <b>62</b>   | Subtract line 61 from line 57  | <b>62</b> |            |
| <b>63</b>   | If line 62 is \$175,000 or less, multiply line 62 by 26% (.26). Otherwise, multiply line 62 by 28% (.28) and subtract \$3,500 from the result  | <b>63</b> |            |
| <b>64</b>   | Maximum amount subject to the 0% rate  | <b>64</b> | \$2,200.00 |
| <b>65</b>   | Enter the amount from line 23 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet on page 27 of the Instructions for Form 1041, whichever applies (as figured for the regular tax). If you did not complete Schedule D or either worksheet for the regular tax, enter -0- | <b>65</b> |            |
| <b>66</b>   | Subtract line 65 from line 64. If zero or less, enter -0-  | <b>66</b> |            |
| <b>67</b>   | Enter the <b>smaller</b> of line 57 or line 58   | <b>67</b> |            |
| <b>68</b>   | Enter the <b>smaller</b> of line 66 or line 67   | <b>68</b> |            |
| <b>69</b>   | Subtract line 68 from line 67  | <b>69</b> |            |
| <b>70</b>   | Multiply line 69 by 15% (.15)  | <b>70</b> |            |
| <b>If line 59 is zero or blank, skip lines 71 and 72 and go to line 73. Otherwise, go to line 71.</b> |  |           |            |
| <b>71</b>   | Subtract line 67 from line 61  | <b>71</b> |            |
| <b>72</b>   | Multiply line 71 by 25% (.25)  | <b>72</b> |            |
| <b>73</b>   | Add lines 63, 70, and 72   | <b>73</b> |            |
| <b>74</b>   | If line 57 is \$175,000 or less, multiply line 57 by 26% (.26). Otherwise, multiply line 57 by 28% (.28) and subtract \$3,500 from the result  | <b>74</b> |            |
| <b>75</b>   | Enter the <b>smaller</b> of line 73 or line 74 here and on line 52   | <b>75</b> |            |

**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

▶ **Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).**

OMB No. 1545-0092

**2008**

Name of estate or trust: **JUDY BRINKMAN SIMPLE TRUST**      Employer identification number: **25-1111111**

**Note:** Form 5227 filers need to complete *only* Parts I and II.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

| (a) Description of property<br>(Example: 100 shares 7% preferred of "Z" Co.) | (b) Date acquired<br>(mo., day, yr.) | (c) Date sold<br>(mo., day, yr.) | (d) Sales price | (e) Cost or other basis<br>(see page 4 of the instructions) | (f) Gain or (loss) for the entire year<br>Subtract (e) from (d) |
|--|--------------------------------------|----------------------------------|-----------------|---|---|
| <b>1a</b>  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |

|  |           |     |
|--|-----------|-----|
| <b>b</b> Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b . . . . .   | <b>1b</b> |     |
| <b>2</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . .   | <b>2</b>  |     |
| <b>3</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .  | <b>3</b>  |     |
| <b>4</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet . . . . .               | <b>4</b>  | ( ) |
| <b>5</b> <b>Net short-term gain or (loss).</b> Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . . . . . ▶ | <b>5</b>  |     |

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

| (a) Description of property<br>(Example: 100 shares 7% preferred of "Z" Co.) | (b) Date acquired<br>(mo., day, yr.) | (c) Date sold<br>(mo., day, yr.) | (d) Sales price | (e) Cost or other basis<br>(see page 4 of the instructions) | (f) Gain or (loss) for the entire year<br>Subtract (e) from (d) |
|--|--------------------------------------|----------------------------------|-----------------|---|---|
| <b>6a</b>  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |
|  |                                      |                                  |                 |   |   |

|  |           |        |
|--|-----------|--------|
| <b>b</b> Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b . . . . .  | <b>6b</b> |        |
| <b>7</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . .  | <b>7</b>  |        |
| <b>8</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .   | <b>8</b>  | 1,000. |
| <b>9</b> Capital gain distributions . . . . .  | <b>9</b>  |        |
| <b>10</b> Gain from Form 4797, Part I . . . . .  | <b>10</b> |        |
| <b>11</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet . . . . .                | <b>11</b> | ( )    |
| <b>12</b> <b>Net long-term gain or (loss).</b> Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back . . . . . ▶ | <b>12</b> | 1,000. |

| <b>Part III Summary of Parts I and II</b>                          |   | (1) Beneficiaries' (see page 5) | (2) Estate's or trust's | (3) Total |
|--|---|---------------------------------|-------------------------|-----------|
| <b>Caution:</b> Read the instructions before completing this part. |   |                                 |                         |           |
| <b>13</b>  | <b>Net short-term gain or (loss)</b> . . . . .                        | <b>13</b>                       |                         |           |
| <b>14</b>  | <b>Net long-term gain or (loss):</b>                                  |                                 |                         |           |
| a  | Total for year . . . . .  | <b>14a</b>                      | 1,000.                  | 1,000.    |
| b  | Unrecaptured section 1250 gain (see line 18 of the wrksht.) . . . . . | <b>14b</b>                      |                         |           |
| c  | 28% rate gain . . . . .   | <b>14c</b>                      |                         |           |
| <b>15</b>  | <b>Total net gain or (loss).</b> Combine lines 13 and 14a . . . . . ▶ | <b>15</b>                       | 1,000.                  | 1,000.    |

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

**Part IV Capital Loss Limitation**

|           |  |           |     |
|-----------|--|-----------|-----|
| <b>16</b> | Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the <b>smaller</b> of:<br>a The loss on line 15, column (3) or b \$3,000 . . . . . | <b>16</b> | ( ) |
|-----------|--|-----------|-----|

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** on page 7 of the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the worksheet on page 8 of the instructions if:

- Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

**Form 990-T trusts.** Complete this part **only** if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

|           |   |           |        |      |
|-----------|---|-----------|--------|------|
| <b>17</b> | Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . . .   | <b>17</b> | 4,598. |      |
| <b>18</b> | Enter the <b>smaller</b> of line 14a or 15 in column (2) but not less than zero . . . . .   | <b>18</b> | 1,000. |      |
| <b>19</b> | Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . . .  | <b>19</b> | 2,626. |      |
| <b>20</b> | Add lines 18 and 19 . . . . .   | <b>20</b> | 3,626. |      |
| <b>21</b> | If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . . . ▶   | <b>21</b> |        |      |
| <b>22</b> | Subtract line 21 from line 20. If zero or less, enter -0- . . . . .   | <b>22</b> | 3,626. |      |
| <b>23</b> | Subtract line 22 from line 17. If zero or less, enter -0- . . . . .   | <b>23</b> | 972.   |      |
| <b>24</b> | Enter the <b>smaller</b> of the amount on line 17 or \$2,200 . . . . .  | <b>24</b> | 2,200. |      |
| <b>25</b> | Is the amount on line 23 equal to or more than the amount on line 24?<br><input type="checkbox"/> <b>Yes.</b> Skip lines 25 and 26; go to line 27 and check the "No" box.<br><input checked="" type="checkbox"/> <b>No.</b> Enter the amount from line 23 . . . . . | <b>25</b> | 972.   |      |
| <b>26</b> | Subtract line 25 from line 24 . . . . .   | <b>26</b> | 1,228. |      |
| <b>27</b> | Are the amounts on lines 22 and 26 the same?<br><input type="checkbox"/> <b>Yes.</b> Skip lines 27 thru 30; go to line 31. <input checked="" type="checkbox"/> <b>No.</b> Enter the <b>smaller</b> of line 17 or line 22 . . . . .                                  | <b>27</b> | 3,626. |      |
| <b>28</b> | Enter the amount from line 26 (If line 26 is blank, enter -0-) . . . . .  | <b>28</b> | 1,228. |      |
| <b>29</b> | Subtract line 28 from line 27 . . . . .   | <b>29</b> | 2,398. |      |
| <b>30</b> | Multiply line 29 by 15% (.15) . . . . .   | <b>30</b> |        | 360. |
| <b>31</b> | Figure the tax on the amount on line 23. Use the 2008 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions) . . . . .  | <b>31</b> |        | 146. |
| <b>32</b> | Add lines 30 and 31 . . . . .   | <b>32</b> |        | 506. |
| <b>33</b> | Figure the tax on the amount on line 17. Use the 2008 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions) . . . . .  | <b>33</b> |        | 930. |
| <b>34</b> | <b>Tax on all taxable income.</b> Enter the <b>smaller</b> of line 32 or line 33 here and on line 1a of Schedule G, Form 1041 (or line 36 of Form 990-T) . . . . .  | <b>34</b> |        | 506. |

**SCHEDULE E  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships,  
S corporations, estates, trusts, REMICs, etc.)

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

OMB No. 1545-0074

**2008**

Attachment  
Sequence No. **13**

Name(s) shown on return

Your social security number

JUDY BRINKMAN SIMPLE TRUST

25-1111111

**Part I** **Income or Loss From Rental Real Estate and Royalties** **Note.** If you are in the business of renting personal property, use **Schedule C or C-EZ** (see page E-3). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

|          |   |   |            |           |
|----------|---|---|------------|-----------|
| <b>1</b> | List the type and location of each <b>rental real estate property</b> : | <b>2</b> For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:<br>• 14 days or<br>• 10% of the total days rented at fair rental value?<br>(See page E-3) | <b>Yes</b> | <b>No</b> |
|          |   |   | A          | N/A       |
|          |   |   | B          |           |
|          |   |   | C          |           |

| Income:  | Properties |     |     | Totals<br>(Add columns A, B, and C.) |
|--|------------|-----|-----|--------------------------------------|
|  | A          | B   | C   |                                      |
| <b>3</b> Rents received . . . . .  | <b>3</b>   |     |     | <b>3</b>                             |
| <b>4</b> Royalties received . . . . .  | <b>4</b>   |     |     | <b>4</b>                             |
| <b>Expenses:</b>   |            |     |     |                                      |
| <b>5</b> Advertising . . . . .   | <b>5</b>   |     |     |                                      |
| <b>6</b> Auto and travel (see page E-4) . . . . .  | <b>6</b>   |     |     |                                      |
| <b>7</b> Cleaning and maintenance . . . . .  | <b>7</b>   |     |     |                                      |
| <b>8</b> Commissions . . . . .   | <b>8</b>   |     |     |                                      |
| <b>9</b> Insurance . . . . .   | <b>9</b>   |     |     |                                      |
| <b>10</b> Legal and other professional fees . . . . .  | <b>10</b>  |     |     |                                      |
| <b>11</b> Management fees . . . . .  | <b>11</b>  |     |     |                                      |
| <b>12</b> Mortgage interest paid to banks, etc. (see page E-4) . . . . .   | <b>12</b>  |     |     | <b>12</b>                            |
| <b>13</b> Other interest . . . . .   | <b>13</b>  |     |     |                                      |
| <b>14</b> Repairs . . . . .  | <b>14</b>  |     |     |                                      |
| <b>15</b> Supplies . . . . .   | <b>15</b>  |     |     |                                      |
| <b>16</b> Taxes . . . . .  | <b>16</b>  |     |     |                                      |
| <b>17</b> Utilities . . . . .  | <b>17</b>  |     |     |                                      |
| <b>18</b> Other (list) ▶ . . . . .   | <b>18</b>  |     |     |                                      |
| <b>19</b> Add lines 5 through 18 . . . . .   | <b>19</b>  |     |     | <b>19</b>                            |
| <b>20</b> Depreciation expense or depletion (see page E-5) . . . . .   | <b>20</b>  |     |     | <b>20</b>                            |
| <b>21</b> Total expenses. Add lines 19 and 20 . . . . .  | <b>21</b>  |     |     |                                      |
| <b>22</b> Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file <b>Form 6198</b> . . . . .  | <b>22</b>  |     |     |                                      |
| <b>23</b> Deductible rental real estate loss. <b>Caution.</b> Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file <b>Form 8582</b> . Real estate professionals must complete line 43 on page 2 . . . . .   | <b>23</b>  | ( ) | ( ) | ( )                                  |
| <b>24</b> <b>Income.</b> Add positive amounts shown on line 22. <b>Do not</b> include any losses . . . . .   | <b>24</b>  |     |     | <b>24</b>                            |
| <b>25</b> <b>Losses.</b> Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here . . . . .   | <b>25</b>  |     |     | <b>25</b> ( )                        |
| <b>26</b> <b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . . . . . | <b>26</b>  |     |     | <b>26</b>                            |

For Paperwork Reduction Act Notice, see page E-7 of the instructions.

Schedule E (Form 1040) 2008

JSA  
8F0922 1.000

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

Your social security number

JUDY BRINKMAN SIMPLE TRUST

25-1111111

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 page E-1.

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? [ ] Yes [ ] No

Table with 5 columns: (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. Row A: SEE STATEMENT 7

Summary table for Part II with columns: (f) Passive loss allowed, (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. Totals: 1,080.

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name, (b) Employer identification number. Rows A and B are blank.

Summary table for Part III with columns: (c) Passive deduction or loss allowed, (d) Passive income from Schedule K-1, (e) Deduction or loss from Schedule K-1, (f) Other income from Schedule K-1. Totals: 35, 36, 37.

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

Table with 5 columns: (a) Name, (b) Employer identification number, (c) Excess inclusion from Schedules Q, line 2c, (d) Taxable income (net loss) from Schedules Q, line 1b, (e) Income from Schedules Q, line 3b. Row 39: Combine columns (d) and (e) only.

Part V Summary

Summary table for Part V with columns: Description, Amount. Rows 40-43: Net farm rental income, Total income or loss, Reconciliation of farming and fishing income, Reconciliation for real estate professionals.

**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ See separate instructions.

Name **JUDY BRINKMAN SIMPLE TRUST** Identifying number as shown on page 1 of your tax return **25-1111111**

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** beginning on page 3 of 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) ▶ **U.S.A.**

**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)**

|  | Foreign Country or U.S. Possession |                    |   | Total<br>(Add cols. A, B, and C.) |
|--|------------------------------------|--------------------|---|-----------------------------------|
|  | A                                  | B                  | C |                                   |
| <b>g</b> Enter the name of the foreign country or U.S. possession . . . . . ▶  | <b>CANADA</b>                      | <b>NETHERLANDS</b> |   |                                   |
| <b>1a</b> Gross income from sources within country shown above and of the type checked above (see page 13 of the instructions): -----  | 240.                               | 100.               |   | <b>1a</b> 340.                    |
| <b>b</b> Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/> |                                    |                    |   |                                   |
| <b>Deductions and losses (Caution: See pages 13 and 14 of the instructions):</b>   |                                    |                    |   |                                   |
| <b>2</b> Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .  |                                    |                    |   |                                   |
| <b>3</b> Pro rata share of other deductions <b>not definitely related:</b>   |                                    |                    |   |                                   |
| <b>a</b> Certain itemized deductions or standard deduction (see instructions) . . . . .  |                                    |                    |   |                                   |
| <b>b</b> Other deductions (attach statement) . . . . .   |                                    |                    |   |                                   |
| <b>c</b> Add lines 3a and 3b . . . . .   |                                    |                    |   |                                   |
| <b>d</b> Gross foreign source income (see instructions) . . . . .  |                                    |                    |   |                                   |
| <b>e</b> Gross income from all sources (see instructions) . . . . .  |                                    |                    |   |                                   |
| <b>f</b> Divide line 3d by line 3e (see instructions) . . . . .  |                                    |                    |   |                                   |
| <b>g</b> Multiply line 3c by line 3f . . . . .   |                                    |                    |   |                                   |
| <b>4</b> Pro rata share of interest expense (see instructions):  |                                    |                    |   |                                   |
| <b>a</b> Home mortgage interest (use worksheet on page 14 of the instructions) . . . . .   |                                    |                    |   |                                   |
| <b>b</b> Other interest expense . . . . .  |                                    |                    |   |                                   |
| <b>5</b> Losses from foreign sources . . . . .   |                                    |                    |   |                                   |
| <b>6</b> Add lines 2, 3g, 4a, 4b, and 5 . . . . .  |                                    |                    |   | <b>6</b>                          |
| <b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 14, page 2. . . . . ▶   |                                    |                    |   | <b>7</b> 340.                     |

**Part II Foreign Taxes Paid or Accrued (see page 14 of the instructions)**

| Country  | Credit is claimed for taxes (you must check one)<br>(h) <input checked="" type="checkbox"/> Paid<br>(i) <input type="checkbox"/> Accrued | Foreign taxes paid or accrued |               |                         |   |                 |               |                         | (s) Total foreign taxes paid or accrued (add cols. (o) through (r)) |              |
|----------|--|-------------------------------|---------------|-------------------------|---|-----------------|---------------|-------------------------|---|--------------|
|          |  | In foreign currency           |               |                         | (n) Other foreign taxes paid or accrued | In U.S. dollars |               |                         |   |              |
|          |  | (j) Date paid or accrued      | (k) Dividends | (l) Rents and royalties |   | (m) Interest    | (o) Dividends | (p) Rents and royalties |   | (q) Interest |
| <b>A</b> | 12/31/2008   |                               |               |                         |   |                 |               |                         | 20.   | 20.          |
| <b>B</b> | 12/31/2008   |                               |               |                         |   |                 |               |                         | 10.   | 10.          |
| <b>C</b> |  |                               |               |                         |   |                 |               |                         |   |              |
| <b>8</b> | Add lines A through C, column (s). Enter the total here and on line 9, page 2. . . . . ▶   |                               |               |                         |   |                 |               |                         |   | <b>8</b> 30. |

For Paperwork Reduction Act Notice, see page 19 of the instructions.

**Part III Figuring the Credit**

|    |   |    |         |  |          |
|----|---|----|---------|--|----------|
| 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  | 30 .    |  |          |
| 10 | Carryback or carryover (attach detailed computation) . . . . .  | 10 |         |  |          |
| 11 | Add lines 9 and 10 . . . . .  | 11 | 30 .    |  |          |
| 12 | Reduction in foreign taxes (see pages 15 and 16 of the instructions) . . . . .  | 12 |         |  |          |
| 13 | Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit (see instructions) . . . . .  | 13 |         |  | 30 .     |
| 14 | 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 page 16 of the instructions) . . . . .   | 14 | 340 .   |  |          |
| 15 | Adjustments to line 14 (see pages 16 and 17 of the instructions) . . . . .  | 15 |         |  |          |
| 16 | Combine the amounts on lines 14 and 15. 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 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.) . . . . .   | 16 | 340 .   |  |          |
| 17 | <b>Individuals:</b> Enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 2). If you are a nonresident alien, enter the amount from Form 1040NR, line 38 (minus any amount on Form 8914, line 2). <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption . . . . . | 17 | 4,898 . |  |          |
|    | <b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see page 17 of the instructions.   |    |         |  |          |
| 18 | Divide line 16 by line 17. If line 16 is more than line 17, enter "1". . . . .  | 18 |         |  | 0.069416 |
| 19 | <b>Individuals:</b> Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 41.<br><b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 . . . . .   | 19 |         |  | 506 .    |
|    | <b>Caution:</b> If you are completing line 19 for separate category e (lump-sum distributions), see page 19 of the instructions.  |    |         |  |          |
| 20 | Multiply line 19 by line 18 (maximum amount of credit) . . . . .  | 20 |         |  | 35 .     |
| 21 | Enter the <b>smaller</b> of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV (see page 19 of the instructions) . . . . . ▶  | 21 |         |  | 30 .     |

**Part IV Summary of Credits From Separate Parts III (see page 19 of the instructions)**

|    |   |    |      |  |      |
|----|---|----|------|--|------|
| 22 | Credit for taxes on passive category income . . . . .   | 22 | 30 . |  |      |
| 23 | Credit for taxes on general category income . . . . .   | 23 |      |  |      |
| 24 | Credit for taxes on certain income re-sourced by treaty . . . . .   | 24 |      |  |      |
| 25 | Credit for taxes on lump-sum distributions . . . . .  | 25 |      |  |      |
| 26 | Add lines 22 through 25 . . . . .   | 26 |      |  | 30 . |
| 27 | Enter the <b>smaller</b> of line 19 or line 26 . . . . .  | 27 |      |  | 30 . |
| 28 | Reduction of credit for international boycott operations. See instructions for line 12 beginning on page 15 . . . . .   | 28 |      |  |      |
| 29 | Subtract line 28 from line 27. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 47; Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a . . . . . ▶ | 29 |      |  | 30 . |

**Foreign Tax Credit**  
(Individual, Estate, or Trust)

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

**RECOMPUTED FOR AMT** ▶ See separate instructions.

Name **JUDY BRINKMAN SIMPLE TRUST** Identifying number as shown on page 1 of your tax return **25-1111111**

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** beginning on page 3 of 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) ▶ **U.S.A.**

**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)**

|  | Foreign Country or U.S. Possession |             |   | Total<br>(Add cols. A, B, and C.) |
|--|------------------------------------|-------------|---|-----------------------------------|
|  | A                                  | B           | C |                                   |
| <b>g</b> Enter the name of the foreign country or U.S. possession . . . . . ▶  | CANADA                             | NETHERLANDS |   |                                   |
| <b>1a</b> Gross income from sources within country shown above and of the type checked above (see page 13 of the instructions): -----  |                                    |             |   |                                   |
|  | 240.                               | 100.        |   | <b>1a</b> 340.                    |
| <b>b</b> Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/> |                                    |             |   |                                   |
| <b>Deductions and losses (Caution: See pages 13 and 14 of the instructions):</b>   |                                    |             |   |                                   |
| <b>2</b> Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .  |                                    |             |   |                                   |
| <b>3</b> Pro rata share of other deductions <b>not definitely related:</b>   |                                    |             |   |                                   |
| <b>a</b> Certain itemized deductions or standard deduction (see instructions) . . . . .  |                                    |             |   |                                   |
| <b>b</b> Other deductions (attach statement) . . . . .   |                                    |             |   |                                   |
| <b>c</b> Add lines 3a and 3b . . . . .   |                                    |             |   |                                   |
| <b>d</b> Gross foreign source income (see instructions) . . . . .  |                                    |             |   |                                   |
| <b>e</b> Gross income from all sources (see instructions) . . . . .  |                                    |             |   |                                   |
| <b>f</b> Divide line 3d by line 3e (see instructions) . . . . .  |                                    |             |   |                                   |
| <b>g</b> Multiply line 3c by line 3f . . . . .   |                                    |             |   |                                   |
| <b>4</b> Pro rata share of interest expense (see instructions):  |                                    |             |   |                                   |
| <b>a</b> Home mortgage interest (use worksheet on page 14 of the instructions) . . . . .   |                                    |             |   |                                   |
| <b>b</b> Other interest expense . . . . .  |                                    |             |   |                                   |
| <b>5</b> Losses from foreign sources . . . . .   |                                    |             |   |                                   |
| <b>6</b> Add lines 2, 3g, 4a, 4b, and 5 . . . . .  |                                    |             |   | <b>6</b>                          |
| <b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 14, page 2. . . . . ▶   |                                    |             |   | <b>7</b> 340.                     |

**Part II Foreign Taxes Paid or Accrued (see page 14 of the instructions)**

| Country  | Credit is claimed for taxes (you must check one)<br>(h) <input checked="" type="checkbox"/> Paid<br>(i) <input type="checkbox"/> Accrued | Foreign taxes paid or accrued |               |                         |   |                 |               |                         | (s) Total foreign taxes paid or accrued (add cols. (o) through (r)) |
|----------|--|-------------------------------|---------------|-------------------------|---|-----------------|---------------|-------------------------|---|
|          |  | In foreign currency           |               |                         | (n) Other foreign taxes paid or accrued | In U.S. dollars |               |                         |   |
|          |  | (j) Date paid or accrued      | (k) Dividends | (l) Rents and royalties |   | (m) Interest    | (o) Dividends | (p) Rents and royalties |   |
| <b>A</b> | 12/31/2008   |                               |               |                         |   |                 |               | 20.                     | 20.   |
| <b>B</b> | 12/31/2008   |                               |               |                         |   |                 |               | 10.                     | 10.   |
| <b>C</b> |  |                               |               |                         |   |                 |               |                         |   |
| <b>8</b> | Add lines A through C, column (s). Enter the total here and on line 9, page 2. . . . . ▶   |                               |               |                         |   |                 |               |                         | <b>8</b> 30.  |

For Paperwork Reduction Act Notice, see page 19 of the instructions.

**Part III Figuring the Credit**

|    |   |    |         |  |          |
|----|---|----|---------|--|----------|
| 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  | 30 .    |  |          |
| 10 | Carryback or carryover (attach detailed computation) . . . . .  | 10 |         |  |          |
| 11 | Add lines 9 and 10 . . . . .  | 11 | 30 .    |  |          |
| 12 | Reduction in foreign taxes (see pages 15 and 16 of the instructions) . . . . .  | 12 |         |  |          |
| 13 | Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit (see instructions) . . . . .  | 13 |         |  | 30 .     |
| 14 | 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 page 16 of the instructions) . . . . .   | 14 | 340 .   |  |          |
| 15 | Adjustments to line 14 (see pages 16 and 17 of the instructions) . . . . .  | 15 |         |  |          |
| 16 | Combine the amounts on lines 14 and 15. 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 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.) . . . . .   | 16 | 340 .   |  |          |
| 17 | <b>Individuals:</b> Enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 2). If you are a nonresident alien, enter the amount from Form 1040NR, line 38 (minus any amount on Form 8914, line 2). <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption . . . . . | 17 | 5,632 . |  |          |
| 18 | <b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see page 17 of the instructions.<br>Divide line 16 by line 17. If line 16 is more than line 17, enter "1". . . . .   | 18 |         |  | 0.060369 |
| 19 | <b>Individuals:</b> Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 41.<br><b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 . . . . .   | 19 |         |  | NONE     |
| 20 | <b>Caution:</b> If you are completing line 19 for separate category e (lump-sum distributions), see page 19 of the instructions.<br>Multiply line 19 by line 18 (maximum amount of credit) . . . . .  | 20 |         |  | NONE     |
| 21 | Enter the <b>smaller</b> of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV (see page 19 of the instructions) . . . . .  | 21 |         |  | NONE     |

**Part IV Summary of Credits From Separate Parts III** (see page 19 of the instructions)

|    |   |    |      |  |      |
|----|---|----|------|--|------|
| 22 | Credit for taxes on passive category income . . . . .   | 22 | NONE |  |      |
| 23 | Credit for taxes on general category income . . . . .   | 23 |      |  |      |
| 24 | Credit for taxes on certain income re-sourced by treaty . . . . .   | 24 |      |  |      |
| 25 | Credit for taxes on lump-sum distributions . . . . .  | 25 |      |  |      |
| 26 | Add lines 22 through 25 . . . . .   | 26 |      |  | NONE |
| 27 | Enter the <b>smaller</b> of line 19 or line 26 . . . . .  | 27 |      |  | NONE |
| 28 | Reduction of credit for international boycott operations. See instructions for line 12 beginning on page 15 . . . . .   | 28 |      |  |      |
| 29 | Subtract line 28 from line 27. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 47; Form 1040NR, line 44; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a . . . . . | 29 |      |  | NONE |

**Schedule K-1  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**2008**

For calendar year 2008,  
or tax year beginning \_\_\_\_\_, 2008,  
and ending \_\_\_\_\_, 20 \_\_\_\_\_

**Beneficiary's Share of Income, Deductions,  
Credits, etc.**

▶ See back of form and instructions.

**Part I Information About the Estate or Trust**

**A** Estate's or trust's employer identification number  
25-1111111

**B** Estate's or trust's name  
JUDY BRINKMAN SIMPLE TRUST

**C** Fiduciary's name, address, city, state, and ZIP code  
TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006

**D**  Check if Form 1041-T was filed and enter the date it was filed  
\_\_\_\_\_

**E**  Check if this is the final Form 1041 for the estate or trust

**Part II Information About the Beneficiary**

**F** Beneficiary's identifying number  
111-22-3333

**G** Beneficiary's name, address, city, state, and ZIP code  
ROBERT A. BRINKMAN  
13000 EASTERBROOK DRIVE  
HIGHLAND PARK, IL 60305-0305

**H**  Domestic beneficiary  Foreign beneficiary

**Part III Beneficiary's Share of Current Year Income,  
Deductions, Credits, and Other Items**

|           |  |        |           |                                    |
|-----------|--|--------|-----------|------------------------------------|
| <b>1</b>  | Interest income                        |        | <b>11</b> | Final year deductions              |
|           |  | 291.   |           |                                    |
| <b>2a</b> | Ordinary dividends                     |        |           |                                    |
|           |  | 1,083. |           |                                    |
| <b>2b</b> | Qualified dividends                    |        |           |                                    |
|           |  | 1,041. |           |                                    |
| <b>3</b>  | Net short-term capital gain            |        |           |                                    |
| <b>4a</b> | Net long-term capital gain             |        |           |                                    |
| <b>4b</b> | 28% rate gain                          |        | <b>12</b> | Alternative minimum tax adjustment |
|           |  |        | A         | 26.                                |
| <b>4c</b> | Unrecaptured section 1250 gain         |        | J         | 26.                                |
| <b>5</b>  | Other portfolio and nonbusiness income |        |           |                                    |
|           |  | 127.   |           |                                    |
| <b>6</b>  | Ordinary business income               |        |           |                                    |
|           |  | 41.    |           |                                    |
| <b>7</b>  | Net rental real estate income          |        |           |                                    |
|           |  | 4.     | <b>13</b> | Credits and credit recapture       |
| <b>8</b>  | Other rental income                    |        |           |                                    |
| <b>9</b>  | Directly apportioned deductions        |        |           |                                    |
|           |  |        | <b>14</b> | Other information                  |
|           |  |        | A         | 810.                               |
| <b>10</b> | Estate tax deduction                   |        | B         | 12.                                |

\*See attached statement for additional information.  
**Note.** A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

DETAIL OF INCOME AND DEDUCTIONS

|                                     | GROSS  | DEDUCTIONS | NET    |
|-------------------------------------|--------|------------|--------|
| OTHER INTEREST INCOME               | 552.   | 261.       | 291.   |
| QUALIFIED DIVIDENDS                 | 1,041. |            | 1,041. |
| NONQUALIFIED DIVIDENDS              | 80.    | 38.        | 42.    |
| OTHER MISCELLANEOUS INCOME          | 240.   | 113.       | 127.   |
| PARTNERSHIP INCOME (ACTIVE/PASSIVE) | 86.    | 41.        | 45.    |
| TOTALS                              | 1,999. | 453.       | 1,546. |

DEDUCTIONS:

|                                       |      |
|---------------------------------------|------|
| TAXES                                 | 80.  |
| FIDUCIARY FEES                        | 96.  |
| ATTY., ACCT. AND RETURN PREPARER FEES | 261. |
| OTHER MISCELLANEOUS DEDUCTIONS        | 16.  |
| TOTAL DEDUCTIONS                      | 453. |

111-22-3333

25-1111111

ROBERT A. BRINKMAN  
 13000 EASTERBROOK DRIVE  
 HIGHLAND PARK, IL 60305-0305

JUDY BRINKMAN SIMPLE TRUST  
 TR BANK & TRUST COMPANY  
 2395 MIDWAY ROAD  
 CARROLLTON, TX 75006

**Schedule K-1  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**2008**

For calendar year 2008,  
or tax year beginning \_\_\_\_\_, 2008,  
and ending \_\_\_\_\_, 20 \_\_\_\_\_

**Beneficiary's Share of Income, Deductions, Credits, etc.**

▶ See back of form and instructions.

**Part I Information About the Estate or Trust**

**A** Estate's or trust's employer identification number  
25-1111111

**B** Estate's or trust's name  
JUDY BRINKMAN SIMPLE TRUST

**C** Fiduciary's name, address, city, state, and ZIP code  
TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006

**D**  Check if Form 1041-T was filed and enter the date it was filed \_\_\_\_\_

**E**  Check if this is the final Form 1041 for the estate or trust

**Part II Information About the Beneficiary**

**F** Beneficiary's identifying number  
222-33-4444

**G** Beneficiary's name, address, city, state, and ZIP code  
JUDY C. BRINKMAN  
1304 W PARK AVENUE  
NEW YORK, NY 10036-0036

**H**  Domestic beneficiary  Foreign beneficiary

**Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items**

|           |  |        |           |                                    |
|-----------|--|--------|-----------|------------------------------------|
| <b>1</b>  | Interest income                        |        | <b>11</b> | Final year deductions              |
|           |  | 2,613. |           |                                    |
| <b>2a</b> | Ordinary dividends                     |        |           |                                    |
|           |  | 9,750. |           |                                    |
| <b>2b</b> | Qualified dividends                    |        |           |                                    |
|           |  | 9,371. |           |                                    |
| <b>3</b>  | Net short-term capital gain            |        |           |                                    |
| <b>4a</b> | Net long-term capital gain             |        |           |                                    |
| <b>4b</b> | 28% rate gain                          |        | <b>12</b> | Alternative minimum tax adjustment |
|           |  |        | A         | 240.                               |
| <b>4c</b> | Unrecaptured section 1250 gain         |        | J         | 240.                               |
| <b>5</b>  | Other portfolio and nonbusiness income |        |           |                                    |
|           |  | 1,136. |           |                                    |
| <b>6</b>  | Ordinary business income               |        |           |                                    |
|           |  | 371.   |           |                                    |
| <b>7</b>  | Net rental real estate income          |        |           |                                    |
|           |  | 38.    |           |                                    |
| <b>8</b>  | Other rental income                    |        |           |                                    |
| <b>9</b>  | Directly apportioned deductions        |        |           |                                    |
|           |  |        |           |                                    |
|           |  |        | <b>13</b> | Credits and credit recapture       |
|           |  |        |           |                                    |
|           |  |        | <b>14</b> | Other information                  |
|           |  |        | A         | 7,296.                             |
| <b>10</b> | Estate tax deduction                   |        | B         | 108.                               |

\*See attached statement for additional information.  
**Note.** A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

DETAIL OF INCOME AND DEDUCTIONS  
-----

|                                     | GROSS   | DEDUCTIONS | NET     |
|-------------------------------------|---------|------------|---------|
|                                     | -----   | -----      | -----   |
| OTHER INTEREST INCOME               | 4,962.  | 2,349.     | 2,613.  |
| QUALIFIED DIVIDENDS                 | 9,371.  |            | 9,371.  |
| NONQUALIFIED DIVIDENDS              | 719.    | 340.       | 379.    |
| OTHER MISCELLANEOUS INCOME          | 2,156.  | 1,020.     | 1,136.  |
| PARTNERSHIP INCOME (ACTIVE/PASSIVE) | 776.    | 367.       | 409.    |
|                                     | -----   | -----      | -----   |
| TOTALS                              | 17,984. | 4,076.     | 13,908. |
|                                     | =====   | =====      | =====   |

DEDUCTIONS:

|                                       |        |
|---------------------------------------|--------|
| TAXES                                 | 719.   |
| FIDUCIARY FEES                        | 863.   |
| ATTY., ACCT. AND RETURN PREPARER FEES | 2,350. |
| OTHER MISCELLANEOUS DEDUCTIONS        | 144.   |
|                                       | -----  |
| TOTAL DEDUCTIONS                      | 4,076. |
|                                       | =====  |

222-33-4444

25-1111111

JUDY C. BRINKMAN  
1304 W PARK AVENUE  
NEW YORK, NY 10036-0036

JUDY BRINKMAN SIMPLE TRUST  
  
TR BANK & TRUST COMPANY  
2395 MIDWAY ROAD  
CARROLLTON, TX 75006

EXPLANATION OF INCOME AND DEDUCTIONS

=====

INCOME

=====

INTEREST INCOME

-----

UNITED STATES GOVERNMENT INTEREST  
US TREASURY NOTE 9.000%

2,000.00

-----

TOTAL (ROUNDED)

2,000.00

FOREIGN INTEREST

HYDRO-QUEBEC (CANADA) 16 5/8 SERIES

1,200.00

-----

TOTAL (ROUNDED)

1,200.00

OTHER INTEREST

RATHEON COMPANY 8.25%  
INTEREST EXEMPT FROM STATE TAXATION

3,650.00

55.00

-----

TOTAL (ROUNDED)

3,705.00

-----

TOTAL INTEREST INCOME

6,905.00

=====

DIVIDEND INCOME

-----

FOREIGN DIVIDENDS

-----

QUALIFIED FOREIGN DIVIDENDS

-----

ROYAL DUTCH SHELL

500.00

-----

TOTAL QUALIFIED FOREIGN DIVIDENDS (ROUNDED)

500.00

-----

TOTAL FOREIGN DIVIDENDS

500.00

OTHER DIVIDENDS

-----

QUALIFIED NONPTP DIVIDENDS

-----

STATEMENT 1

CONTINUED...

EXPLANATION OF INCOME AND DEDUCTIONS (Cont'd)

|   |            |          |           |
|---|------------|----------|-----------|
| THOMSON LIMITED                             | 99-1234567 | 5,000.00 |           |
|   |            | -----    |           |
| TOTAL NONPTP QUALIFIED DIVIDENDS (ROUNDED)  |            |          | 5,000.00  |
| NONQUALIFIED NONPTP DIVIDENDS               |            |          |           |
|   |            | -----    |           |
| THOMSON LIMITED                             | 99-1234567 | 1,000.00 |           |
|   |            | -----    |           |
| TOTAL NONQUALIFIED DIVIDENDS (ROUNDED)      |            |          | 1,000.00  |
| QUALIFIED OTHER DIVIDENDS                   |            |          |           |
|   |            | -----    |           |
| ABBOTT LABS                                 |            | 3,800.00 |           |
| AMERICAN EXPRESS CO COM                     |            | 3,738.00 |           |
|   |            | -----    |           |
| TOTAL QUALIFIED OTHER DIVIDENDS (ROUNDED)   |            |          | 7,538.00  |
|   |            | -----    |           |
| TOTAL OTHER DIVIDENDS                       |            |          | 13,538.00 |
|   |            | -----    |           |
| TOTAL DIVIDEND INCOME                       |            |          | 14,038.00 |
|   |            | =====    |           |
| OTHER INCOME                                |            |          |           |
|   |            | -----    |           |
| OTHER INCOME                                |            | 3,000.00 |           |
|   |            | -----    |           |
| TOTAL OTHER INCOME (ROUNDED)                |            |          | 3,000.00  |
|   |            | =====    |           |
| DEDUCTIONS                                  |            |          |           |
| =====                                       |            |          |           |
| FIDUCIARY FEES                              |            |          |           |
|   |            | -----    |           |
| ALLOCABLE:                                  |            |          |           |
| TRUSTEE/EXECUTOR FEES-INCOME (ALLOCABLE)    |            | 1,800.00 |           |
|   |            | -----    |           |
| TOTAL ALLOCABLE FEES (ROUNDED)              |            |          | 1,800.00  |
| LESS: AMOUNT ALLOCATED TO TAX-EXEMPT INCOME |            |          | 599.00    |
|   |            | -----    |           |
| NET ALLOCABLE FEES                          |            |          | 1,201.00  |
|   |            | -----    |           |
| NET FIDUCIARY FEES                          |            |          | 1,201.00  |
|   |            | =====    |           |

EXPLANATION OF INCOME AND DEDUCTIONS (Cont'd)

ATTORNEY, ACCOUNTANT AND RETURN PREPARER FEES

ALLOCABLE:

|                                     |          |
|-------------------------------------|----------|
| AUDIT & ACCOUNTING FEES (ALLOCABLE) | 2,100.00 |
| LEGAL FEES - INCOME (ALLOCABLE)     | 2,800.00 |

|   |          |
|---|----------|
| TOTAL ALLOCABLE FEES (ROUNDED)              | 4,900.00 |
| LESS: AMOUNT ALLOCATED TO TAX-EXEMPT INCOME | 1,630.00 |
| NET ALLOCABLE FEES                          | 3,270.00 |

|  |          |
|--|----------|
| NET ATTORNEY, ACCOUNTANT, AND RETURN PREPARER FEES | 3,270.00 |
|--|----------|

OTHER DEDUCTIONS NOT SUBJECT TO THE 2% AGI FLOOR

ALLOCABLE:

|                                |        |
|--------------------------------|--------|
| OTHER ALLOCABLE EXPENSE-INCOME | 300.00 |
|--------------------------------|--------|

|   |        |
|---|--------|
| TOTAL ALLOCABLE (ROUNDED)                   | 300.00 |
| LESS: AMOUNT ALLOCATED TO TAX-EXEMPT INCOME | 100.00 |
| NET (ALLOCABLE)                             | 200.00 |

|                      |        |
|----------------------|--------|
| NET OTHER DEDUCTIONS | 200.00 |
|----------------------|--------|

TAX-EXEMPT INCOME (GROSS)

RESIDENT TAX-EXEMPT INTEREST

|                                     |          |
|-------------------------------------|----------|
| ILLINOIS ST HSG DEV AUTH 6.30% BOND | 1,260.00 |
| INTEREST ON KANE CNTY ILLINOIS      | 3,500.00 |
| UNIVERSITY OF ILL CERTIFICATE       | 1,680.00 |

|  |          |
|--|----------|
| TOTAL RESIDENT TAX-EXEMPT INTEREST (ROUNDED) | 6,440.00 |
|--|----------|

NONRESIDENT TAX-EXEMPT INTEREST

|                                     |          |
|-------------------------------------|----------|
| BAY CITY, MICHIGAN 6.80% ELECTRIC   | 2,040.00 |
| HAWAII ST 5.20% HARBOR CAP IMPT REV | 1,300.00 |
| HILLSBOROUGH COUNTY FL CAP IMPROVMT | 764.00   |
| HILLSBOROUGH COUNTY                 | 635.00   |
| NEW YORK STATE POWER AUTHORITY      | 1,300.00 |

EXPLANATION OF INCOME AND DEDUCTIONS (Cont'd)

=====

|   |          |
|---|----------|
| TOTAL NONRESIDENT TAX-EXEMPT INTEREST (ROUNDED) | 6,039.00 |
|---|----------|

-----

|                         |           |
|-------------------------|-----------|
| TOTAL TAX-EXEMPT INCOME | 12,479.00 |
|-------------------------|-----------|

=====

FOREIGN TAXES

=====

|                                     |        |
|-------------------------------------|--------|
| HYDRO-QUEBEC (CANADA) 16 5/8 SERIES | 100.00 |
|-------------------------------------|--------|

|                   |       |
|-------------------|-------|
| ROYAL DUTCH SHELL | 50.00 |
|-------------------|-------|

-----

|                               |        |
|-------------------------------|--------|
| TOTAL FOREIGN TAXES (ROUNDED) | 150.00 |
|-------------------------------|--------|

=====

FEDERAL COMPUTATION OF EXPENSES ALLOCABLE TO TAX-EXEMPT INCOME

=====

|     |   |         |
|-----|---|---------|
| 1.  | TAX-EXEMPT INCOME .....   | 12,479. |
| 2.  | GROSS TAXABLE INCOME .....  | 25,023. |
| 3.  | GROSS INCOME (LINE 1 + LINE 2) .....  | 37,502. |
| 4.  | ALLOCABLE EXPENSES .....  | 7,000.  |
| 5.  | EXPENSES ALLOCATED TO TAX-EXEMPT INCOME<br>(LINE 1 / LINE 3) X LINE 4 ..... | 2,329.  |
| 6.  | TAX-EXEMPT INCOME ALLOCABLE TO CHARITABLE DEDUCTION .....                   |         |
| 7.  | TAX-EXEMPT INCOME (AS ADJUSTED)<br>(LINE 1 - TOTAL OF LINES 5 + 6) .....    | 10,150. |
| 8.  | NONDISTRIBUTIVE TAX-EXEMPT INCOME .....                                     |         |
|     | LESS: EXPENSES ALLOCABLE TO NONDISTRIBUTIVE TEI .....                       |         |
| 9.  | NONDISTRIBUTIVE TAX-EXEMPT INCOME (AS ADJUSTED) .....                       |         |
| 10. | NET TAX-EXEMPT INCOME, AS ADJUSTED (LINE 7 - LINE 9) .....                  | 10,150. |
| 11. | NET ALLOCABLE EXPENSES (LINE 4 - LINE 5) .....                              | 4,671.  |

TAX-EXEMPT INCOME:

|   |         |
|---|---------|
| RESIDENT STATE GROSS TAX-EXEMPT INTEREST .....    | 6,440.  |
| NONRESIDENT STATE GROSS TAX-EXEMPT INTEREST ..... | 6,039.  |
|   | -----   |
|   | 12,479. |
|   | =====   |

GROSS TAXABLE INCOME:

|  |         |
|--|---------|
| INTEREST .....                             | 6,905.  |
| DIVIDENDS .....                            | 14,038. |
| INCOME FROM PARTNERSHIPS AND S CORPS ..... | 1,080.  |
| OTHER INCOME .....                         | 3,000.  |
|  | -----   |
|  | 25,023. |
|  | =====   |

ALLOCABLE EXPENSES:

|   |        |
|---|--------|
| FIDUCIARY FEES .....                      | 1,800. |
| ATTY, ACCT AND RETURN PREPARER FEES ..... | 4,900. |
| OTHER DEDUCTIONS .....                    | 300.   |
|   | -----  |
|   | 7,000. |
|   | =====  |

GAINS AND LOSSES FROM PASS-THRU ENTITIES

=====

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS  
AND OTHER FIDUCIARIES

15% RATE LONG-TERM CAPITAL GAIN (LOSS)

PARTNERSHIPS, TRUSTS, S CORPORATIONS:

THOMSON LIMITED 99-1234567 1,000.00

-----

TOTAL 15% RATE CAPITAL GAIN (LOSS) 1,000.00

-----

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED) 1,000.00

=====

SCHEDULE E, PART II - INCOME OR LOSS FROM PARTNERSHIPS AND S CORPS.

| NAME            | TYPE | X IF FOREIGN | EIN        | REPORTING<br>PYA/UPE<br>(LINE 27)<br>YES OR NO | INVESTMENT<br>ANY NOT<br>AT RISK | PASSIVE<br>LOSS<br>ALLOWED | PASSIVE<br>INCOME | NONPASSIVE<br>LOSS | NONPASSIVE<br>INCOME |
|-----------------|------|--------------|------------|--|----------------------------------|----------------------------|-------------------|--------------------|----------------------|
| THOMSON LIMITED | P    |              | 99-1234567 | N  |                                  |                            |                   |                    | 1,080.               |
| TOTALS          |      |              |            |  |                                  |                            |                   |                    | 1,080.               |

INCOME/LOSS FROM PARTNERSHIPS, ESTATES, TRUSTS, OR S CORPORATIONS

SCHEDULE E, PART II-INCOME/LOSS FROM PARTNERSHIPS AND S CORPORATIONS

THOMSON LIMITED

99-1234567

ORDINARY INCOME (LOSS)

980.

RENTAL REAL ESTATE INCOME (LOSS)

100.

NET INCOME OR ALLOWABLE LOSS

1,080.

TOTAL INCOME/LOSS FROM PARTNERSHIPS AND S CORPORATIONS

1,080.

TOTAL INCOME/LOSS FROM PARTNERSHIPS, TRUSTS, S CORPORATIONS

1,080.

ILLINOIS TAX RETURN FOR JUDY BRINKMAN SIMPLE TRUST  
02000214



\*0IL553C073322039920080000-000\*

**Illinois Department of Revenue**  
**2008 Form IL-1041**  
**Fiduciary Income and Replacement Tax Return**

Due on or before the 15th day of the 4th month following the close of the tax year.

Write the amount you are paying.  
 \$ 186.00

If this return is not for calendar year 2008, write your fiscal tax year here.

Tax year beginning \_\_\_\_\_, 2008, ending \_\_\_\_\_ 20 \_\_\_\_\_

**Step 1: Identify your fiduciary**

**I**

**A** Check the box that identifies your fiduciary.  Trust  Estate

**B** Write your name and/or number and mailing address.  
 If you have a change, check this box.

Name: JUDY BRINKMAN SIMPLE TRUST

c/o: TR BANK & TRUST COMPANY

Mailing address: 2395 MIDWAY ROAD

City: CARROLLTON State: TX ZIP: 75006

**C** Check the box if one of the following apply.  
 First return  If final, write the date. \_\_\_\_\_

**D** Check your method of accounting.  
 Cash  Accrual  Other \_\_\_\_\_

**E** Write your federal employer identification no. (FEIN).  
25-1111111

**F** Check the box if your residency is not in Illinois. Attach Illinois Schedule NR.

**G** Check the box if you are an  
 Electing small business trust (ESBT)   
 Individual bankruptcy estate

**H** Check the box if you attached Illinois Schedule 1299-D, Income Tax Credits.

**I** Check the box if you attached Illinois Schedule I, Income Received.

**J** If you have completed Federal Form 8886, check the box and attach it to this return.

**Step 2: Figure your income or loss**

|  | <b>A</b><br>Beneficiaries | <b>B</b><br>Fiduciary     |
|--|---------------------------|---------------------------|
| <b>1</b> Federal Taxable Income from U.S. Form 1041, Line 22.  |                           | <b>1</b> <u>4,598.00</u>  |
| <b>2</b> Federal net operating loss deduction from U.S. Form 1041, Line 15a. This amount cannot be negative.                                       |                           | <b>2</b> <u>.00</u>       |
| <b>3</b> Taxable income of ESBT, if required (see instructions).   |                           | <b>3</b> <u>.00</u>       |
| <b>4</b> Exemption claimed on U.S. Form 1041, Line 20.   |                           | <b>4</b> <u>300.00</u>    |
| <b>5</b> Illinois income and replacement tax deducted in arriving at Line 1.   | <b>5a</b> <u>799.00</u>   | <b>5b</b> <u>201.00</u>   |
| <b>6</b> State, municipal, and other interest income excluded from Line 1.   | <b>6a</b> <u>8,106.00</u> | <b>6b</b> <u>2,044.00</u> |
| <b>7</b> Illinois Special Depreciation addition. <b>Attach</b> Form IL-4562.   | <b>7a</b> <u>.00</u>      | <b>7b</b> <u>.00</u>      |
| <b>8</b> Related-party expenses addition. <b>Attach</b> Schedule 80/20.  | <b>8a</b> <u>.00</u>      | <b>8b</b> <u>.00</u>      |
| <b>9</b> Distributive share of additions. <b>Attach</b> Schedule K-1-P or K-1-T.   | <b>9a</b> <u>.00</u>      | <b>9b</b> <u>.00</u>      |
| <b>10</b> Other additions. <b>Attach</b> Illinois Schedule M (for businesses).   | <b>10a</b> <u>.00</u>     | <b>10b</b> <u>.00</u>     |
| <b>11</b> Add Column B, Lines 1 through 10b. This amount is your income or loss. Report Column A, Lines 5a through 10a, on Schedule K-1-T, Step 5. |                           | <b>11</b> <u>7,143.00</u> |

NS DR \_\_\_\_\_



12 Write the amount of your income or loss from Line 11.

12 7,143.00

**Step 3: Figure your Illinois base income or net loss**

|   | <b>A</b><br>Beneficiaries | <b>B</b><br>Fiduciary |
|---|---------------------------|-----------------------|
| 13 August 1, 1969, valuation limitation amount. <b>Attach</b> Schedule F.   | 13a <u>.00</u>            | 13b <u>.00</u>        |
| 14 Federally-taxed refund of Illinois income and replacement tax.   | 14a <u>.00</u>            | 14b <u>.00</u>        |
| 15 Payments from certain retirement plans (see instructions).   | 15a <u>.00</u>            | 15b <u>.00</u>        |
| 16 Interest income from U.S. Treasury and other exempt federal obligations.   | 16a <u>1,299.00</u>       | 16b <u>328.00</u>     |
| 17 Retirement payments to retired partners.   | 17a <u>.00</u>            | 17b <u>.00</u>        |
| 18 Enterprise Zone or River Edge Redevelopment Zone Dividend subtraction. <b>Attach</b> Schedule 1299-B.                          | 18a <u>.00</u>            | 18b <u>.00</u>        |
| 19 High Impact Business Dividend subtraction. <b>Attach</b> Schedule 1299-B.  | 19a <u>2,468.00</u>       | 19b <u>623.00</u>     |
| 20 Contributions to certain job training projects (see instructions).   | 20a <u>.00</u>            | 20b <u>.00</u>        |
| 21 Illinois Bonus Depreciation subtraction. <b>Attach</b> Form IL-4562.   | 21a <u>.00</u>            | 21b <u>.00</u>        |
| 22 Related-party expenses subtraction. <b>Attach</b> Schedule 80/20.  | 22a <u>.00</u>            | 22b <u>.00</u>        |
| 23 Distributive share of subtractions. <b>Attach</b> Schedule K-1-P or K-1-T.   | 23a <u>.00</u>            | 23b <u>.00</u>        |
| 24 Other subtractions. <b>Attach</b> Illinois Schedule M (for businesses).  | 24a <u>4,183.00</u>       | 24b <u>1,055.00</u>   |
| 25 Total subtractions. Add Column B, Lines 13b through 24b.<br>Report Column A, Lines 13a through 24a, on Schedule K-1-T, Step 5. |                           | 25 <u>2,006.00</u>    |
| 26 <b>Base income or net loss.</b> Subtract Line 25 from Line 12.   |                           | 26 <u>5,137.00</u>    |

**STOP** If you are a nonresident of Illinois, complete Schedule NR; otherwise go to Step 4.

**Step 4: Figure your net income**

|  |                    |                    |
|--|--------------------|--------------------|
| 27 Base income or net loss from Line 26, or, if a nonresident, from Schedule NR, Line 51.  |                    | 27 <u>5,137.00</u> |
| 28 Illinois net loss deduction. <b>Attach</b> Schedule NLD.<br>If Line 27 is zero or a negative amount, write "0."                       | 28 <u>.00</u>      |                    |
| 29 Standard exemption.<br><b>Residents only:</b> Write \$1,000.<br><b>Nonresidents only:</b> Write the amount from Schedule NR, Line 54. | 29 <u>1,000.00</u> |                    |
| 30 Add Lines 28 and 29.  |                    | 30 <u>1,000.00</u> |
| 31 <b>Net Income.</b> Subtract Line 30 from Line 27.<br>If the amount is negative, write "0."  |                    | 31 <u>4,137.00</u> |

**Step 5: Figure your net replacement tax - For trusts only, estates go to Step 6**

|   |  |                 |
|---|--|-----------------|
| 32 Replacement tax. Multiply Line 31 by 1.5% (.015).  |  | 32 <u>62.00</u> |
| 33 Recapture of investment credits. <b>Attach</b> Schedule 4255.                                      |  | 33 <u>.00</u>   |
| 34 Replacement tax before investment credits. Add Lines 32 and 33.                                    |  | 34 <u>62.00</u> |
| 35 Investment credits. <b>Attach</b> Form IL-477. ( <b>Fiscal-year files only. See instructions</b> ) |  | 35 <u>.00</u>   |
| 36 <b>Net replacement tax.</b> Subtract Line 35 from Line 34. If the amount is negative, write "0."   |  | 36 <u>62.00</u> |



37 Write the amount of your net income from Line 31. 37 4,137.00

Step 6: Figure your net income tax

38 Income tax. Multiply Line 37 by 3% (.03). 38 124.00
39 Recapture of investment credits. Attach Schedule 4255. 39 .00
40 Income tax before credits. Add Lines 38 and 39. 40 124.00
41 Credit for income tax paid to another state while an Illinois resident. Attach Schedule CR and other states' returns. 41 .00
42 Income tax credits. Attach Schedule 1299-D. 42 .00
43 Total credits. Add Lines 41 and 42. 43 .00
44 Net income tax. Subtract Line 43 from Line 40. If the amount is negative, write "0." 44 124.00

Step 7: Figure your refund or balance due

45 Trusts only: net replacement tax from Line 36. 45 62.00
46 Net income tax from line 44. 46 124.00
47 Total net income and replacement taxes. Add Lines 45 and 46. 47 186.00
48 Payments.
a Illinois Income Tax withheld. Attach W-2 forms. 48a .00
b Credit from 2007 overpayment. 48b .00
c Form IL-505-B (extension) payment. 48c .00
d Pass-through entity payments from Schedule K-1-P or K-1-T. 48d .00
49 Total payments. Add Lines 48a through 48d. 49 .00
50 Overpayment. If Line 49 is greater than Line 47, subtract Line 47 from Line 49. 50 .00
51 Amount to be credited to 2009. 51 .00
52 Refund. Subtract Line 51 from Line 50. This is the amount to be refunded. 52 .00
53 Tax Due. If Line 47 is greater than Line 49, subtract Line 49 from Line 47. This is the amount you owe. 53 186.00

Special Note -> Make your check payable to "Illinois Department of Revenue." Write the amount of your payment on the top of Page 1 in the space provided.

Step 8: Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Signature of fiduciary Date Title Phone 972-250-7000
Signature of preparer 06/22/2009 P00541305 Preparer's Social Security number or firm's FEIN
THOMSON REUTERS (TAX & ACCOUN RICHMOND, VA 23236 804-727-3152
Preparer firm's name (or yours, if self-employed) Address Phone

Mail this return to: Illinois Department of Revenue, P.O. Box 19009, Springfield, IL 62794-9009

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-0070



Illinois Department of Revenue  
**Schedule D**

Year ending  
12 2008  
 Month Year

**Beneficiary Information**

**IL Attachment No. 1**

Attach to your Form IL-1041

Write your name as shown on your Form IL-1041.

Write your federal employer identification number (FEIN).

JUDY BRINKMAN SIMPLE TRUST

25-1111111

**Step 1: Provide the following information**

- 1 Write the amount of base income or net loss from your Form IL-1041, Line 26. **1** 5,137
- 2 Write the apportionment factor from your Form IL-1041, Schedule NR, Step 6, Line 3. **2** \_\_\_\_\_

**Step 2: Identify your beneficiaries.** Attach additional sheets if necessary.

|   | A  | B                  | C                                       | D   | E   | F   |
|---|--|--------------------|---|---|---|---|
|   | Name and Address   | SSN or FEIN        | Beneficiary type<br>(See instructions.) | Total amount of<br>base income (loss)<br>distributable<br>(See instructions.) | Check the box if<br>the beneficiary<br>is an Illinois<br>non-resident | Pass-through<br>entity payment<br>amount<br>(See instructions.) |
| 1 | <u>ROBERT A. BRINKMAN</u><br><u>13000 EASTERBROOK DRIVE</u><br><u>HIGHLAND PARK, IL 60305-0305</u> | <u>111-22-3333</u> | <u>I</u>                                | <u>1,642.</u>   | <input type="checkbox"/>  | _____   |
| 2 | <u>JUDY C. BRINKMAN</u><br><u>1304 W PARK AVENUE</u><br><u>NEW YORK, NY 10036-0036</u>             | <u>222-33-4444</u> | <u>I</u>                                | <u>14,767.</u>  | <input checked="" type="checkbox"/>                                   | _____   |
| 3 | _____  | _____              | _____                                   | _____   | <input type="checkbox"/>  | _____   |
| 4 | _____  | _____              | _____                                   | _____   | <input type="checkbox"/>  | _____   |
| 5 | _____  | _____              | _____                                   | _____   | <input type="checkbox"/>  | _____   |
| 6 | _____  | _____              | _____                                   | _____   | <input type="checkbox"/>  | _____   |
| 7 | _____  | _____              | _____                                   | _____   | <input type="checkbox"/>  | _____   |

- 8 Add the amounts shown in Column D for partners or shareholders for which you have entered a check mark in Column E. Write the total here. (See instructions.) **8** 14,767.



# Schedule I

Attach to your Form IL-1041



Year ending

12 2008  
Month Year

## Income Received

IL Attachment No. 8

Write your name as shown on your Form IL-1041.

Write your federal employer identification number (FEIN).

JUDY BRINKMAN SIMPLE TRUST

25-1111111

### Identify the entities from whom you received income

# I

|   | A<br>Name and address | B<br>FEIN  | C<br>Type<br>(see instructions) |
|---|-----------------------|------------|---------------------------------|
| 1 | THOMSON LIMITED       | 99-1234567 | P                               |
| 2 |                       |            |                                 |
| 3 |                       |            |                                 |
| 4 |                       |            |                                 |
| 5 |                       |            |                                 |
| 6 |                       |            |                                 |
| 7 |                       |            |                                 |

JUDY BRINKMAN SIMPLE TRUST  
 Write your name as shown on your return

25-1111111  
 Write your federal employer identification number (FEIN)

**Step 1: Figure your subtractions**

◆ **Form IL-1041 filers only**

— **Enterprise Zone or River Edge Redevelopment Zone Dividend Subtraction**

|     | A<br>Corporation's name   | B<br>Name of Zone | C<br>Dividend amount |
|-----|---|-------------------|----------------------|
| 1 a | _____   | _____             | a _____              |
| b   | _____   | _____             | b _____              |
| c   | _____   | _____             | c _____              |
| 2   | Write the amount of distributive share of Enterprise Zone or River Edge Redevelopment Zone Dividend subtraction from Schedule K-1-P.        |                   | 2 _____              |
| 3   | Add Column C, Lines 1a through 1c and Line 2.<br>Write your <b>Enterprise Zone Dividend Subtraction</b> here and on Form IL-1041, Line 18b. |                   | 3 _____              |

— **High Impact Business within a Foreign Trade Zone Dividend Subtraction**

|     |  |             |            |
|-----|--|-------------|------------|
| 4 a | ABBOTT LABS  | SUBZONE 22F | a 3,091.00 |
| b   | _____  | _____       | b _____    |
| c   | _____  | _____       | c _____    |
| 5   | Write the amount of distributive share of High Impact Business Dividend subtraction from Schedule K-1-P.   |             | 5 _____    |
| 6   | Add Column C, Lines 4a through 4c and Line 5.<br>Write your <b>High Impact Business Dividend Subtraction</b> here and on Form IL-1041, Line 19b. |             | 6 3,091.00 |

**Step 2: Figure your subtractions**

◆ **Form IL-1120 filers only (U.S. Forms 1120, 1120F, 1120L, and 1120PC)**

|     |   |         |
|-----|---|---------|
| 7 a | Dividend deduction limitation amount (see instructions).  | a _____ |
| b   | Dividend deduction amounts (see instructions).  | b _____ |
| 8   | Divide Line 7a by Line 7b and carry to six decimal places. Write your <b>limitation ratio</b> here. | 8 _____ |

— **Enterprise Zone or River Edge Redevelopment Zone Dividend Subtraction**

|     | A<br>Name of zone   | B<br>Domestic corporations<br>(see instructions) | C<br>(See instructions) | D<br>Column B minus<br>Column C | E<br>Public utility corporations<br>(see instructions) | F<br>(See instructions) | G<br>Column E minus<br>Column F | H<br>Other dividends |
|-----|---|--|-------------------------|---------------------------------|--|-------------------------|---------------------------------|----------------------|
| 9 a | _____   | _____  | _____                   | _____                           | _____  | _____                   | _____                           | a _____              |
| b   | _____   | _____  | _____                   | _____                           | _____  | _____                   | _____                           | b _____              |
| c   | _____   | _____  | _____                   | _____                           | _____  | _____                   | _____                           | c _____              |
| d   | Total Columns D, G, and H.  |  |                         | d _____                         |  |                         |                                 | d _____              |
| 10  | Write the amount of distributive share of Enterprise Zone or River Edge Redevelopment Zone Dividend Subtraction from Schedule K-1-P.  |  |                         |                                 |  |                         |                                 | 10 _____             |
| 11  | Add Line 9d, Columns D, G, and H and Line 10.<br>Write your <b>Enterprise Zone or River Edge Redevelopment Zone Dividend Subtraction</b> here and on Form IL-1120, Line 13. |  |                         |                                 |  |                         |                                 | 11 _____             |

— **High Impact Business Dividend Subtraction**

|      |  |       |       |         |       |       |         |          |
|------|--|-------|-------|---------|-------|-------|---------|----------|
| 12 a | _____  | _____ | _____ | _____   | _____ | _____ | a _____ |          |
| b    | _____  | _____ | _____ | _____   | _____ | _____ | b _____ |          |
| c    | _____  | _____ | _____ | _____   | _____ | _____ | c _____ |          |
| d    | Total Columns D, G, and H.   |       |       | d _____ |       |       |         | d _____  |
| 13   | Write the amount of distributive share of High Impact Business Dividend Subtraction from Schedule K-1-P.   |       |       |         |       |       |         | 13 _____ |
| 14   | Add Line 12d, Columns D, G, and H and Line 13.<br>Write your <b>High Impact Business Dividend Subtraction</b> here and on Form IL-1120, Line 15. |       |       |         |       |       |         | 14 _____ |

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-0093

**Contribution Subtraction**

|      | A<br>Name of zone   | B<br>Zone organization | C<br>Contribution amount | D<br>Column C x 2 |
|------|---|------------------------|--------------------------|-------------------|
| 15 a | _____   | _____                  | _____                    | a _____           |
| b    | _____   | _____                  | _____                    | b _____           |
| c    | _____   | _____                  | _____                    | c _____           |
| 16   | Add Column D, Lines 15a through 15c.<br>Write your <b>Contribution Subtraction</b> here and on Form IL-1120, Step 3, Line 17. |                        |                          | 16 _____          |

**Interest Subtraction - Enterprise Zones or River Edge Redevelopment Zones (Form IL-1120 financial organizations only)**

|      | A<br>Borrower  | B<br>Property by which loan is secured | C<br>Year of investment credit | D<br>Zone of secured property | E<br>Basis of property | F<br>Loan amount | G<br>Total interest | H<br>Column E ÷ by Column F (cannot exceed "1")<br>Multiply result by Col. G |
|------|--|--|--------------------------------|-------------------------------|------------------------|------------------|---------------------|--|
| 17 a | _____  | _____                                  | _____                          | _____                         | _____                  | _____            | _____               | a _____  |
| b    | _____  | _____                                  | _____                          | _____                         | _____                  | _____            | _____               | b _____  |
| c    | _____  | _____                                  | _____                          | _____                         | _____                  | _____            | _____               | c _____  |
| 18   | Write the amount of distributive share of your Enterprise Zone or River Edge Redevelopment Zones Interest Subtraction from Schedule K-1-P.   |  |                                |                               |                        |                  |                     | 18 _____   |
| 19   | Add Column H, Lines 17a through 17c and Line 18.<br>Write your <b>Interest Subtraction</b> for enterprise zones or river edge redevelopment zones here and on Form IL-1120, Step 3, Line 14. |  |                                |                               |                        |                  |                     | 19 _____   |

**Interest Subtraction - High Impact Business within a Foreign Trade Zone (or sub-zone) (Form IL-1120 financial organizations only)**

|      |  |       |       |       |       |       |       |          |
|------|--|-------|-------|-------|-------|-------|-------|----------|
| 20 a | _____  | _____ | _____ | _____ | _____ | _____ | _____ | a _____  |
| b    | _____  | _____ | _____ | _____ | _____ | _____ | _____ | b _____  |
| c    | _____  | _____ | _____ | _____ | _____ | _____ | _____ | c _____  |
| 21   | Write the amount of distributive share of your High Impact Business Interest Subtraction from Schedule K-1-P.  |       |       |       |       |       |       | 21 _____ |
| 22   | Add Column H, Lines 20a through 20c and Line 21.<br>Write your <b>Interest Subtraction</b> for High Impact Business within a Foreign Trade Zone (or sub-zone) here and on Form IL-1120, Step 3, Line 16. |       |       |       |       |       |       | 22 _____ |

Illinois Department of Revenue  
**2008 Schedule M**

Attach to your Form IL-1120, IL-1120-ST, IL-1065, or IL-1041

**Other Additions and Subtractions**  
**(for businesses)**

Year ending  
12 2008  
 Month Year  
**IL Attachment No. 15**

**Step 1: Provide the following information**

JUDY BRINKMAN SIMPLE TRUST

Write your name as shown on your tax return.

25-1111111

Write your Federal Employer Identification no. (FEIN)

**Step 2: Figure your additions**

Write the amount of

- |          |   |          |       |
|----------|---|----------|-------|
| <b>1</b> | Capital gain taxed under IRC Section 852(b)(3).   | <b>1</b> | _____ |
| <b>2</b> | Notes, bonds, debentures, or obligations issued by the Governments of American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, or the Virgin Islands.                                 | <b>2</b> | _____ |
| <b>3</b> | Lloyd's plan of operation loss if reported on your behalf on Form IL-1023-C and included in your federal taxable income.  | <b>3</b> | _____ |
| <b>4</b> | Business expense recapture  | <b>4</b> | _____ |
| <b>5</b> | Any other state's income tax deducted from federal taxable income <b>(Form IL-1041 filers only)</b> .   | <b>5</b> | _____ |
| <b>6</b> | Capital loss to be carried forward <b>(Form IL-1041 filers only)</b> .  | <b>6</b> | _____ |
| <b>7</b> | Other income - Identify each item _____   | <b>7</b> | _____ |
| <b>8</b> | Add Lines 1 through 7. Write the amount here and on your Form IL-1120, Line 8, Form IL-1120-ST, Line 21, Form IL-1065, Line 22 or Form IL-1041, Line 10. <span style="float: right;">→</span> | <b>8</b> | _____ |

**Step 3: Figure your subtractions**

Write the amount of

- |           |  |           |       |
|-----------|--|-----------|-------|
| <b>9</b>  | Exempt interest dividends paid by regulated investment companies (IRC Section 852(b)(5)).  | <b>9</b>  | _____ |
| <b>10</b> | Notes, bonds, debentures, or obligations issued by the Governments of American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, or the Virgin Islands to the extent the amounts were required to be added back on Line 2. | <b>10</b> | _____ |
| <b>11</b> | Lloyd's plan of operation income if reported on your behalf on Form IL-1023-C.   | <b>11</b> | _____ |
| <b>12</b> | Income for which you claimed a credit under IRC Section 1341.  | <b>12</b> | _____ |
| <b>13</b> | Expense deductions disallowed federally under IRC Sections 171(a)(2), 265, 280C, 291(a)(3), or 832(b)(5)(B)(i).<br>Specify any amount relating to the following:   |           |       |
|           | <b>a</b> Interest expenses relating to municipal income (IRC Section 291)  | <b>a</b>  | _____ |
|           | <b>b</b> Interest and other expenses related to federally tax-exempt interest (IRC Section 265)  | <b>b</b>  | _____ |
|           | <b>c</b> Bond premium amortization on federally tax-exempt bonds (IRC Section 171)   | <b>c</b>  | _____ |
|           | <b>d</b> Expenses related to certain federal job credits (IRC Section 280C)  | <b>d</b>  | _____ |
|           | <b>e</b> Reduction in insurance company reserves (IRC Section 832)   | <b>e</b>  | _____ |
| <b>14</b> | Add Lines 13a through 13e.   | <b>14</b> | _____ |
| <b>15</b> | Add Lines 9 through 12 and Line 14.<br>Write the amount here and on Line 16.   | <b>15</b> | _____ |

### Step 3: Continued

|           |   |                           |
|-----------|---|---------------------------|
| <b>16</b> | Write the amount from Line 15.  | <b>16</b> _____           |
| <b>17</b> | Interest on the following obligations of Illinois state and local government, only if included in Illinois income (See instructions). <b>Attach</b> a copy of the statement that identifies the payer and the amount of interest for each obligation. |                           |
| <b>a</b>  | Illinois Housing Development Authority bonds and notes (except housing-related commercial facilities bonds and notes)   | <b>a</b> <u>5,238.00</u>  |
| <b>b</b>  | Illinois Development Finance Authority bonds, notes, and other obligations (venture fund and infrastructure bonds only)   | <b>b</b> _____            |
| <b>c</b>  | Illinois Sports Facilities Authority bonds  | <b>c</b> _____            |
| <b>d</b>  | Illinois Development Finance Authority bonds (only those issued under the Illinois Development Finance Authority Act, Sections 7.80 through 7.87)   | <b>d</b> _____            |
| <b>e</b>  | Illinois Development Finance Authority bonds or Illinois Finance Authority bonds issued under the Asbestos Abatement Finance Act  | <b>e</b> _____            |
| <b>f</b>  | Bonds issued by the Illinois Finance Authority under the Illinois Finance Authority Act.  | <b>f</b> _____            |
| <b>18</b> | Add Lines 17a through 17f.  | <b>18</b> <u>5,238.00</u> |
| <b>19</b> | Federally taxed Illinois state refund from prior years (See instructions.)  | <b>19</b> _____           |
| <b>20</b> | Dividends received, including IRC Section 78 Foreign Dividend Gross-up and subpart F income ( <b>Form IL-1120-ST filers only</b> ).   | <b>20</b> _____           |
| <b>21</b> | Contributions made to a job training project (See instructions.)  | <b>21</b> _____           |
| <b>22</b> | Reparations or other amounts received as a victim of persecution by Nazi Germany ( <b>Form IL-1041 filers only</b> ).   | <b>22</b> _____           |
| <b>23</b> | Other eligible subtractions from Publication 101 that are not subtracted anywhere else. Identify each item. _____   | <b>23</b> _____           |
| <b>24</b> | Add Line 16 and Lines 18 through 23.<br>Write the amount here and on Form IL-1120, Line 23,<br>Form IL-1120-ST or Form IL-1065, Line 34, or Form IL-1041, Line 24.  | <b>24</b> <u>5,238.00</u> |

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ILLINOIS FORM IL-1041 SCHEDULE I DETAIL

INCOME/LOSS FROM PARTNERSHIPS AND S CORPORATIONS

|   |            |        |
|---|------------|--------|
| THOMSON LIMITED   | 99-1234567 |        |
| -----   |            |        |
| ORDINARY INCOME (LOSS)                                      |            | 980.   |
| RENTAL REAL ESTATE INCOME (LOSS)                            |            | 100.   |
|   |            | -----  |
| NET INCOME OR ALLOWABLE LOSS                                |            | 1,080. |
|   |            | =====  |
|   |            |        |
| TOTAL INCOME/LOSS FROM PARTNERSHIPS AND S CORPORATIONS      |            | 1,080. |
|   |            | =====  |
|   |            |        |
| TOTAL INCOME/LOSS FROM PARTNERSHIPS, TRUSTS, S CORPORATIONS |            | 1,080. |
|   |            | =====  |

SCHEDULE M, LINE 17 (DOUBLE EXEMPT IL MUNICIPAL OBLIGATIONS)

=====

LINE 17A, IL HOUSING DEVELOPMENT AUTHORITY

=====

| OBLIGATION NAME<br>-----                         | AMOUNT<br>----- |
|--|-----------------|
| ILLINOIS ST HSG DEV AUTH 6.30% BOND    452010MA6 | 1,025.          |
| INTEREST ON KANE CNTY ILLINOIS        483943CW7  | 2,847.          |
| UNIVERSITY OF ILL CERTIFICATE         924331BAO  | 1,366.          |
|  | -----           |
| TOTAL - LINE 17A                                 | 5,238.          |
|  | =====           |