| | 40 | Department of | the Treasury — Internal Re | venue Service | | | 000 | | | |
|----------|---------------------|--|---|----------------------------|---------------|-----------------------------|--------------------|---|---|--|
| Fo | rm U | 41 U.S. Inc | come Tax Retu | urn for Estat | es and | Trusts | 200 | 16 | OMB No. 1545-0092 | |
| A | Type of | entity (see instr): | For calendar year 2 | 006 or fiscal year b | eginning | 2/01 | , 2006 and end | ling | 1/31 , 07 | |
| X | Deceder | nt's estate | | | | | C Em | ployer ider | ntification number | |
| | Simple | trust | Estate of Joi | nathan P Sol | ona | | 1 | 6-987 | 6543 | |
| | Comple | | Mary L Fiduc: | | ong | | | e entity cre | | |
| - | | d disability trust | Executor | rar i | | | | 3/01/ | 2006 | |
| - | | S portion only) | 103 South Ma: | in Street | | | | | naritable and split-interest | |
| | | type trust | Suite 103 | | | | tru | trusts, check applicable boxes (see instr): | | |
| - | | y estate — Chapter 7 | Hometown, NY | 14755-0001 | | | | scribed in section 4947(a)(1) | | |
| - | | y estate — Chapter 11 | | | | | | | ate foundation | |
| - | | ncome fund | | | | | | | section 4947(a)(2) | |
| | | | F Check X Initi | | | | | | | |
| В | | Schs K-1 attached | annlicable | | al return | Amended return | | nange in tru | | |
| _ | | ctions) > 3 | | inge in fiduciary | | Change in fiduciary's | | nange in fic | luciary's address | |
| <u>G</u> | Pooled | | (see instructions): | Bought | | Sold Date | | 1 | 12,341. | |
| | | | me | | | | | | 8,031. | |
| | | 2a Total ordinary di | vidends | ficiarios | | See . Statelli | en.c.z | | Statement 3 | |
| | | | nds allocable to: (1) Bene | | | | | | Statement 3 | |
| | | | e or (loss). Attach Schedule or (loss). Attach Sche | | | | | | 28,172. | |
| Inc | ome | | partnerships, other estates | | | | | | 20,112. | |
| 1110 | Joine | | e or (loss). Attach Sch | | | | | | | |
| | | | n or (loss). Attach Fo | | | | | | | |
| | | | st type and amount | | | | | 8 | | |
| | | | e. Combine lines 1, 2 | | | | | ▶ 9 | 48,544. | |
| | | | ck if Form 4952 is at | | | | | 10 | 10,511. | |
| | | | | | | See Stater | ment 4 | | 36. | |
| | | | S | | | | | | | |
| | | , | eduction (from Sched | | | | | | | |
| | | | countant, and return p | | | | | | 16,169. | |
| | | | ions not subject to th | | | | | | 9. | |
| De | duc- | | llaneous itemized deduction | | | 48000 | | | | |
| ao | 115 | 16 Add lines 10 | through 15h | is subject to the 2 70 no | 01 | | | ▶ 16 | 16,214. | |
| | | 17 Adjusted total | through 15bal income or (loss). S | ubtract line 16 from | a line 0 | 17 | 32,330 | | 10,211. | |
| | | | ibution deduction) (fro | | | | | | 32,330. | |
| | | | eduction including ce | · · | | | | | 32,330. | |
| | | | | | | | | 20 | 600. | |
| | | | through 20 | | | | | ▶ 21 | 32,930. | |
| | | | me. Subtract line 21 | | | | | | -600. | |
| | | | om Schedule G, line 7 | | | | | 23 | 0. | |
| | | | 06 estimated tax payments | • | | | | | | |
| | | | x payments allocated | | | | | | | |
| | | | 24b from line 24a | | | * | | | | |
| Ta | | d Tax paid with | n Form 7004 (see ins | tructions) | | | | 24d | | |
| an Pa | a yments | | me tax withheld. If ar | | | | | 24e | | |
| | ,,cc | | deral telephone excis | | | | | | | |
| | | | ents: g Form 2439 | | | | | ► 24i | | |
| | | | nts. Add lines 24c th | | | | | ≥ 25 | | |
| | | | | • | | | | | | |
| | | | x penalty (see instrud ne 25 is smaller than | | | | | | | |
| | | | nt. If line 25 is larger | | | | | | | |
| | | | Rt. IT line 25 is larger to 2008 to be: a Credited to 20 0 | | 62 73 9110 | | overpaid funded | ▶ 29 | | |
| | | | ry, I declare that I have exa and complete. Declaration | | ng accompany | | | | nowledge and | |
| | | belief, it is true, correct, | and complete. Declaration | of preparer (other than ta | xpayer) is ba | sed on all information of v | which preparer has | | | |
| Si | gn | _ Mary L Fi | duciarv | 1 | 1 | • | | Ma | y the IRS discuss this return h the preparer shown below | |
| H | ere | | ry or officer representing fide | uciary Date | | EIN of fiduciary if a finan | cial institution | | e instrs)? X Yes No | |
| | | | | | | Date | | <u>_</u> | parer's SSN or PTIN | |
| | | Preparer's signature | | | | | Check if self- | | | |
| Pa | id . | | un Firm Mor- | Hono | | | employed ► | 98765 | .13 | |
| | eparer's se Only | (or vours if | our Firm Name | | | | | | | |
| US | , Coniny | self-employed). \triangleright 12 address, and | 234 Main Stree | | | | Phone number | (5 | 518) 555-1212 | |

Χ

6 If this is an estate or a complex trust making the section 663(b) election, check here (see instructions)..... To make a section 643(e)(3) election, attach Schedule D (Form 1041), and check here (see instructions).....

9 Are any present or future trust beneficiaries skip persons? See instructions.....

7

| | Allowed Sold Minimum To Consider the Constitution | 901 | 0343 | raye 3 |
|----------|--|-----|------|---------------------------------------|
| | nedule I Alternative Minimum Tax (see instructions) | | | |
| Par | t I – Estate's or Trust's Share of Alternative Minimum Taxable Income | | | 20 220 |
| 1 | Adjusted total income or (loss) (from page 1, line 17) | | | 32,330. |
| 2 | Interest | | - | 2.0 |
| 3 | Taxes. | - | | 36. |
| 4 | Miscellaneous itemized deductions (from page 1, line 15b) | | 1 | |
| 5 | Refund of taxes | - | | <u> </u> |
| 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 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) | 12 | | |
| 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). | | 1 | \ |
| 21 22 | Income from certain installment sales before January 1, 1987 | | | |
| | Intangible drilling costs preference. | | - | |
| 23 | Other adjustments, including income-based related adjustments. | | 1 | · · · · · · · · · · · · · · · · · · · |
| 24 | Alternative tax net operating loss deduction (See the instructions for the limitation that applies.) | | 1 | 22 266 |
| 25 | Adjusted alternative minimum taxable income. Combine lines 1 through 24 | 25 | | 32,366. |
| 26 | Income distribution deduction from Part II, line 44 | | | |
| 27 | Estate tax deduction (from page 1, line 19). | | | |
| 28 | Add lines 26 and 27. | 28 | | 32,366. |
| 29 | Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25 | | | 32,300. |
| | If line 29 is: | 23 | | |
| | • \$22,500 or less, stop here and enter -0- on 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. | | | |
| Par | t II — Income Distribution Deduction on a Minimum Tax Basis | | | |
| 30 | Adjusted alternative minimum taxable income (see instructions) | 30 | | 32,366. |
| 31 | Adjusted tax-exempt interest (other than amounts included on line 8) | | | 4,093. |
| 32 | Total net gain from Schedule D (Form 1041), line 15, column (1). If a loss, enter -0 | | | 28,172. |
| 33 | Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable | | | |
| - | purposes (from Schedule A, line 4) | 33 | | |
| 34 | Capital gains paid or permanently set aside for charitable purposes from gross income | | | |
| | (see instructions). | 34 | | |
| 35 | Capital gains computed on a minimum tax basis included on line 25 | 35 | (| 28,172.) |
| 36 | Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount | 36 | | 0. |
| 37 | Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. If zero or less, enter -0- | 37 | | 36,459. |
| 38 | Income required to be distributed currently (from Schedule B, line 9) | 38 | | |
| 39 | Other amounts paid, credited, or otherwise required to be distributed (from Schedule B, line 10) | 39 | | 58,172. |
| 40 | Total distributions. Add lines 38 and 39 | 40 | | 58,172. |
| 41 | Tax-exempt income included on line 40 (other than amounts included on line 8) | 41 | | 4,093. |
| 42 | Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40 | 42 | | 54,079. |

43

44

32,366.

43

44

Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 37. If zero or

less, enter -0-....

Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line 43. Enter

SCHEDULE D (Form 1041)

Capital Gains and Losses

OMB No. 1545-0092

2006

Department of the Treasury Internal Revenue Service

Estate of Jonathan P Solong

Name of estate or trust

► 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). Employer identification number

16-9876543

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
(Example: 100 shares
7% preferred of 'Z' Co) (b) (f) Gain or (Loss) for the entire year 1 (c) Date sold (d) Sales price **(e)** Cost or Date acquired (mo, day, yr) (mo, day, yr) other basis (see instructions) (col (d) less col (e)) My Favorite Fund, Inc. 3/15/06 7/01/06 85 63 22. My Favorite Fund, 7/01/06 4/15/06 45. 45. 0. 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824..... 2 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts...... 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2005 Capital Loss 4 Net short-term gain or (loss). Combine lines 1 through 4 in column (f). Enter here and on line 13. column (3) below..... 5 22. Long-Term Capital Gains and Losses — Assets Held More Than One Year Part II 6 (c) (e) Description of property (Example: 100 shares 7% preferred of 'Z' Co) Date acquired Date sold Sales price Cost or Gain or (Loss) (mo, day, yr) (mo, day, yr) other basis for the entire year (see instructions) (col (d) less col (e)) See Statement 10 27,962. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824..... 7 8 9 188. 10 Gain from Form 4797, Part I.... 10 Long-term capital loss carryover. Enter the amount, if any, from line 14, of the 2005 Capital Loss Carryover Worksheet 11 Net long-term gain or (loss). Combine lines 6 through 11 in column (f). Enter here and on line 14a, column (3) below..... 28,150. Summary of Parts I and II Part III (2) Estate's or trust's (1) Beneficiaries' (3) Total Caution: Read the instructions before completing this part. (see instructions) 13 Net short-term gain or (loss)..... 22 22. 13 Net long-term gain or (loss): 28,150. 28,150. 14a b Unrecaptured section 1250 gain (see line 18 of the worksheet in the instructions)..... 14b c 28% rate gain or (loss)..... 14c 15 Total net gain or (loss). Combine lines 13 and 14a. ▶ 15 28,172. Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4. 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. BAA For Paperwork Reduction Act Notice, see the instructions for Form 1041.

| Schedule K-1 | 2006 | | Final K-1 | | Amended | K-1 | OMB No. 1545-0092 |
|--|--|-------------------------------------|------------|---------------|-----------------|----------------|--|
| (Form 1041) | 2006 | P | art III | Benefi | ciary's Sha | re o | f Current Year Income, |
| Department of the Treasury Internal Revenue Service | For calendar year 2006, or tax year beginning $2/01$, 2006 | Deductions, Cred 1 Interest income | | | | | Final year deductions |
| | or tax year beginning $\frac{2/01}{1/31}$, 2006 and ending $\frac{1}{31}$, $\frac{2007}{1/31}$ | ' | interest | iricome | | 11 | I mai year deddctions |
| Beneficiary's Sh | nare of Income, Deductions, | 2a | Ordinary | dividends | | | |
| Credits, etc. | ► See separate instructions. | | 0 1:6 | L II : 1 - 1 | 1,386. | | |
| | • | 2 b | Qualified | dividends | 1,386. | | |
| Part I Inform | nation About the Estate or Trust | 3 | Net shor | t-term capi | | | |
| A Estate's or trust's e | employer identification number | | | | 8. | | |
| 16 0076542 | | 4a | Net long | -term capit | | | |
| 16-9876543 B Estate's or trust's r | name | 4 b | 28% rate | nain | 9,384. | 12 | Alternative minimum tax adjustment |
| | onathan P Solong | | 2070 (410 | , ga | | A | 12. |
| | - | 4c | Unrecap | tured section | on 1250 gain | | |
| | address, city, state, and ZIP code | 5 | Other no | rtfolio and | | _J | 12. |
| Mary L Fiduo 103 South Ma | | 3 | nonbusir | ness incom | е | | |
| Suite 103 | Z 147FF 0001 | _ | 0 1 | 1 | | | |
| Hometown, N | 1 14/55-0001 | 6 | Ordinary | business i | ncome | L | |
| | | 7 | Net renta | al real esta | te income | | |
| 1 - 1 1 | 1041-T was filed and it was filed | | | | | | |
| onter the date | | 8 | Other re | ntal incom | е | 13 | Credits and credit recapture |
| E Check if this is | the final Form 1041 for the estate or trust | 9 | Directly : | annortione | d deductions | | |
| F | distriction of the second | | Directly (| аррогионо | a adaddidiid | | |
| F ∐ Tax shelter reg | jistration number, if any | | | | | | |
| G Check if Form | 8271 is attached | | | ٧ | | | |
| | | | | | | | |
| Part II Inform | nation About the Beneficiary | | | | | 14 | Other information |
| H Beneficiary's identi | ifvina number | _ | | | | _A | 1,364. |
| 111-11-1111 | | 10 | Estate ta | ax deduction | n | E | 1,386. |
| | e, address, city, state, and ZIP code | | | | | - <u> -</u> - | |
| Harriet H H 101 Main St | eartbreak reet, Suite 103 | | | | | L | |
| | Y 14755-0001 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | 1 | | | it for addition | | |
| | | inco | me and d | lirectly app | ortioned dedu | show uction | ing the beneficiary's share of as from each business, rental |
| | | real | estate, a | nd other re | ental activity. | | |
| | | F O | | | | | |
| | | R | | | | | |
| | | R | | | | | |
| Beneficiary 1 | | U | | | | | |
| | | S E | | | | | |
| J X Domestic bene | ficiary Foreign beneficiary | O N L | | | | | |

| Schedule K-1 | 2000 | | Fina | I K-1 | | Amended | K-1 | OMB No. 1545-0092 |
|--|--|-------------|--------|-----------------------|-----------------------|-----------------------------|---------------|--|
| (Form 1041) | 2006 | P | art | III | Benefi | ciary's Sha | are o | f Current Year Income, |
| Department of the Treasury Internal Revenue Service | For calendar year 2006, or tax year beginning $2/01$, 2006 | 1 | Int | erest inc | | tions, Cred | 11 11 | and Other Items Final year deductions |
| | or tax year beginning $2/01$, 2006 and ending $1/31$, 2007 | ' | 1111 | erest inc | Jonne | | '' | I mai year deductions |
| Reneficiary's Sh | nare of Income, Deductions, | 2a | Or | dinary d | ividends | | | |
| Credits, etc. | ► See separate instructions. | | _ | | | 1,386. | <u>_</u> | |
| | See Separate instructions. | 2 b | Qu | alified d | lividends | 1,386. | | |
| Part I Inform | nation About the Estate or Trust | 3 | Ne | t short-t | erm capi | | | |
| A Estate's or trust's e | employer identification number | | | | | 7. | | |
| | | 4a | a Ne | t long-te | erm capit | | | |
| 16-9876543 | 2000 | 16 | 20 | 0/ roto o | noin | 9,383. | 10 | |
| B Estate's or trust's n | onathan P Solong | 40 | 28 | % rate g | Jain | | 12 A | Alternative minimum tax adjustment 12. |
| Estate of oc | machan F Solong | 4c | Un | recaptur | red section | on 1250 gain | | |
| | address, city, state, and ZIP code | | | | r 1: 1 | | _J_ | 12. |
| Mary L Fiduc 103 South Ma Suite 103 | | 5 | no | ner porti nbusine: | folio and ss incom | е | | |
| Hometown, NY | <i>!</i> 14755-0001 | 6 | Or | dinary b | usiness | ncome | | |
| | | 7 | Ne | t rental | real esta | te income | 1 | |
| | 1041-T was filed and it was filed | 8 | Ot | her renta | al incom | е | 13 | Credits and credit recapture |
| E Check if this is | the final Form 1041 for the estate or trust | 9 | Dir | ectly ap | portione | d deductions | | |
| F Tax shelter reg | istration number, if any | | +- | | | | | |
| G Check if Form 8 | 8271 is attached | | 17 | | <u></u> | | | |
| | | | 4- | | | | | |
| Part II Inform | nation About the Beneficiary | | | | | | 14 A | Other information 1,364. |
| H Beneficiary's identif | fying number | 10 | Es | tate tax | deduction | n | + | |
| 222-22-2222 | e, address, city, state, and ZIP code | | | | | | E | 1,386. |
| Elsie E Exe | | | | | | | | |
| 635 West St | reet, Apartment 105 | | | | 4 | | <u> </u> | |
| maryville, i | NY 14768-0333 | | | | | | | |
| | | | | | | | | |
| | | | | | | | L | |
| | | | | | | | | |
| | | *Se | e at | tached | statemer | nt for addition | l nal info | rmation. |
| | | | | | | | | ing the beneficiary's share of |
| | | inco | ome | and dire | ectly app | ortioned decental activity. | luction | is from each business, rental |
| | | rea | ıı esi | ale, and | ouiei ie | activity. | | |
| | | O R | | | | | | |
| | | I R | | | | | | |
| | | S | | | | | | |
| Beneficiary 2 | | U S E | | | | | | |
| . 17 | | 0 | | | | | | |
| J X Domestic benef | ficiary Foreign beneficiary | N L V | | | | | | |

| Sche | edule K-1 | 2006 | | Final K- | 1 Amended | K-1 | OMB No. 1545-0092 | |
|----------|--|--|---|--------------|--|----------------|---|--|
| (Form | m 1041) nent of the Treasury Revenue Service | 2006 For calendar year 2006, | Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items | | | | | |
| internai | Revenue Service | or tax year beginning $2/01$, 2006 and ending $1/31$, 2007 | 1 | Interes | t income | 11 | Final year deductions | |
| | | are of Income, Deductions, | 2a | Ordina | ry dividends 1,386. | | | |
| Cred | dits, etc. | ► See separate instructions. | 2b | Qualific | ed dividends | | | |
| Pa | rt I Inform | ation About the Estate or Trust | 3 | Net she | 1,386. ort-term capital gain | | | |
| A E | Estate's or trust's e | mployer identification number | | Netter | 7. | | | |
| | 16-9876543 | | 4a | Net Ior | ng-term capital gain 9,383. | | | |
| | Estate's or trust's n | | 4b | 28% ra | ate gain | 12 | Alternative minimum tax adjustment | |
| | Estate of Jo | nathan P Solong | 4c | Unreca | ptured section 1250 gain | _ <u>A</u> _ | 12. | |
| 1 | | ddress, city, state, and ZIP code | _ | Othor | antfalia and | J | 12. | |
|] : | Mary L Fiduc 103 South Ma Suite 103 | in Street | 5 | | oortfolio and siness income | | | |
|] | Hometown, NY | 14755-0001 | 6 | Ordina | ry business income | | | |
| D | Check if Form 1 | 041-T was filed and | 7 | Net rer | ntal real estate income | | | |
| | enter the date i | t was filed | 8 | Other r | rental income | 13 | Credits and credit recapture | |
| E [| Check if this is | the final Form 1041 for the estate or trust | 9 | Directly | y apportioned deductions | | | |
| F | Tax shelter regi | stration number, if any | <u> </u> | | | | | |
| G [| Check if Form 8 | 3271 is attached | | | | | | |
| | | ation About the Beneficiary | | | | 14 A | Other information 1,365. | |
| 1 | Beneficiary's identif 16-3333333 | ying number | 10 | Estate | tax deduction | | | |
| 1 | - | address, city, state, and ZIP code Solong Testamentary Trust | | | | _E_ | <u>1,386.</u> | |
| | 207 Court St | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | *Se | e attach | ed statement for addition | al info | ormation. | |
| | | | inco | me and | tement must be attached directly apportioned dedu and other rental activity. | show uction | ing the beneficiary's share of s from each business, rental | |
| | | | F O R | | | | | |
| | | | I R | | | | | |
| Bene | eficiary 3 | | S U S E | | | | | |
| - | | iciony Decreion handicion | 0 | | | | | |
| J | X Domestic benef | iciary Foreign beneficiary | N L Y | • | | | | |

| 2006 | Federal Statements | | Page 1 |
|---|--|----------|---|
| Client SOLON900 | Estate of Jonathan P Solong | | 16-9876543 |
| Statement 1 Form 1041, Line 1 Interest Income | | | 11:48AM |
| Mortgagor, Herbert and Mary | | \$ | 1,202. |
| \$50,000.00 TBill Big Z, Empire of US Guardian Life Insurance Co. Long Away City Savings and I M&T Bank Series E;U.S. Bond Your Favorite Brokerage Fire | Loan Association m, LLC m, LLC. Total | | 688. 750. 763. 344. 2,542. 151. 100. 248. 2,350. 3,203. 12,341. |
| Statement 2 Form 1041, Line 2a Total Ordinary Dividends | | | |
| IBM Corp; Common | m, LLC m, LLC Total | \$ | 5,000. 125. 136. 2,040. 730. 8,031. |
| IBM Corp; Common | | \$ | 5,000. 125. |
| Your Favorite Brokerage Firm | m, LLCm, LLC | \$ | 105. 2,040. 730. 8,000. |
| Statement 4 Form 1041, Line 11 Taxes | | | |
| Real Property Taxes (investr | ment) Total | \$ \$ | 36. 36. |
| | | | |

| 2006 | Federal Statements | Pa | ge 2 |
|---|---|----------------------------------|-----------------------------|
| Client SOLON900 | Estate of Jonathan P Solong | 16-98 | 76543 |
| 11/05/07 Statement 5 Form 1041, Line 14 Attorney, Accountant & Tax Prepare | er Fees | 1 | 1:48AM |
| Attorney, Accountant & Tax F | reparer Fees: | \$ 18,2 | 15. |
| Less 11.23 % Allocated to | Tax-exempt Income Total | -2,0 \$ 16,1 | |
| Statement 6 Form 1041, Line 15(a) Other Deductions not Subject to 2% My Favorite Fund, Inc Less 11.23 % Allocated to T | Subtotal | \$ | 10. 10. -1. 9. |
| Statement 7 Form 1041, Other Information, Line Tax Exempt Income Your Favorite Brokerage Firm Your Favorite Brokerage Firm Your Favorite Brokerage Firm | a, LLC | 2,9 | 34. 44. |
| | 1 ncome ,140. x 100 = 11.23% | \$ 6,1 \$ 12,3 8,0 28,1 | 31. 72. 40. |
| Total Indirect Deductions - Percentage Allocable to Tax- Amount Allocable to Tax-Exem Tax-Exempt Interest and Divi Less: Allocated Indirect Ded Net Tax-exempt Interest and | Allocable Exempt Income upt Income dends ductions | \$ 2,0 \$ 6,1 2,0 | 225. 23% 047. 047. |

| 2 | n | n | C |
|---|---|---|---|
| | U | 0 | O |

Federal Statements

Page 3

Client SOLON900

Estate of Jonathan P Solong

16-9876543

11/05/07

11:48AM

Statement 9 Schedule D, Line 9 Capital Gain Distributions

 My Favorite Fund, Inc.
 \$ 188.

 Total
 \$ 188.

Statement 10 Schedule D, Part II, Line 6 Long-Term Capital Gains and Losses

| Description of Property | Date Acquired | Date Sold | Sales Price | Cost or Basis | Gain/ Loss |
|-------------------------|------------------|--------------|----------------|------------------|---------------|
| My Favorite Fund, Inc. | 3/01/06 | 5/15/06 | 10. | 7. | 3. |
| Grand Piano | 3/01/06 | 7/01/06 | 4,250. | 4,250. | 0. |
| My Favorite Fund, Inc. | 3/01/06 | 7/01/06 | 5,906. | 4,385. | 1,521. |
| My Favorite Fund, Inc. | 3/15/06 | 7/01/06 | 85. | 63. | 22. |
| My Favorite Fund, Inc. | 4/15/06 | 7/01/06 | 45. | 45. | 0. |
| My Favorite Fund, Inc. | 3/01/06 | 7/01/06 | 5,906. | 4,385. | 1,521. |
| My Favorite Fund, Inc. | 3/15/06 | 7/01/06 | 85. | 63. | 22. |
| My Favorite Fund, Inc. | 4/15/06 | 7/01/06 | 45. | 45. | 0. |
| My Favorite Fund, Inc. | 3/01/06 | 7/01/06 | 5,906. | 4,385. | 1,521. |
| IBM Corp; Common | 3/01/06 | 7/15/06 | 31,750. | 26,948. | 4,802. |
| Lot with cabin | 3/01/06 | 8/01/06 | 40,000. | 30,000. | 10,000. |
| ABC Corporation; Common | 3/01/06 | 11/01/06 | 22,500. | 15,000. | 7,500. |
| Agway, Inc.; Bond | 3/01/06 | 11/15/06 | 34,300. | 33,250. | 1,050. |
| | | | | Total \$ | 27,962. |