Form **1040** Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return 2010 IRS Use Only—Do not write or staple in this space.

OMB No. 1545-0074

Name, Address, and SSN

See separate instructions.

PRINT CLEARLY

For the year Jan. 1–Dec. 31, 2010, or other tax year beginning , ending

Your first name	M.I.	Last name	Suffix	Your social security number
Henry	P	Van De Putte	Jr.	[redacted]
If a joint return, spouse's first name	M.I.	Last name	Suffix	Spouse's social security number
Leticia	R	Van De Putte		[redacted]

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
1616 W. Mulberry

Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, see instructions.
San Antonio TX 78201

Presidential Election Campaign ▶ Check here if you, or your spouse if filing jointly, want $3 to go to this fund ▶ Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Filing Status

Check only one box.

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

Exemptions

6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a
b ☒ Spouse

Boxes checked on 6a and 6b: 2

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see page 15)
Isabella	Van De Putte	[redacted]	Daughter	☐
Paul	Van De Putte	[redacted]	Son	☐
				☐
				☐

If more than four dependents, see instructions and check here ▶ ☐

No. of children on 6c who:
- lived with you: 1
- did not live with you due to divorce or separation (see instructions): 0

Dependents on 6c not entered above: 1

d Total number of exemptions claimed

Add numbers on lines above ▶ 4

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 20.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7	Wages, salaries, tips, etc. Attach Form(s) W-2			7	139,644
8a	Taxable interest. Attach Schedule B if required			8a	2,013
b	Tax-exempt interest. Do not include on line 8a	8b			
9a	Ordinary dividends. Attach Schedule B if required			9a	
b	Qualified dividends	9b			
10	Taxable refunds, credits, or offsets of state and local income taxes			10	
11	Alimony received			11	
12	Business income or (loss). Attach Schedule C or C-EZ			12	-306
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐			13	
14	Other gains or (losses). Attach Form 4797			14	
15a	IRA distributions	15a	15,000 b Taxable amount	15b	12,955
16a	Pensions and annuities	16a	b Taxable amount	16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			17	21,274
18	Farm income or (loss). Attach Schedule F			18	
19	Unemployment compensation			19	
20a	Social security benefits	20a	b Taxable amount	20b	0
21	Other income. List type and amount Gambling winnings			21	9,071
22	Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶			22	184,651

Adjusted Gross Income

23	Educator expenses	23			
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24			
25	Health savings account deduction. Attach Form 8889	25			
26	Moving expenses. Attach Form 3903	26			
27	One-half of self-employment tax. Attach Schedule SE	27			
28	Self-employed SEP, SIMPLE, and qualified plans	28			
29	Self-employed health insurance deduction	29			
30	Penalty on early withdrawal of savings	30			
31a	Alimony paid b Recipient's SSN ▶	31a			
32	IRA deduction	32			
33	Student loan interest deduction	33			
34	Tuition and fees. Attach Form 8917	34			
35	Domestic production activities deduction. Attach Form 8903	35			
36	Add lines 23 through 31a and 32 through 35			36	
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶			37	184,651

Tax and Credits

38	Amount from line 37 (adjusted gross income)		184,651
39a	Check if: ☐ You were born before January 2, 1946, ☐ Blind. ☐ Spouse was born before January 2, 1946, ☐ Blind. } Total boxes checked ▶ 39a ☐		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b ☐		
40	**Itemized deductions** (from Schedule A) or your **standard deduction** (see instructions)		25,949
41	Subtract line 40 from line 38		158,702
42	**Exemptions.** Multiply $3,650 by the number on line 6d		14,600
43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		144,102
44	**Tax** (see instructions). Check if any tax is from: a ☐ Form(s) 8814 b ☐ Form 4972		28,592
45	**Alternative minimum tax** (see instructions). Attach Form 6251		
46	Add lines 44 and 45 ▶		28,592
47	Foreign tax credit. Attach Form 1116 if required		
48	Credit for child and dependent care expenses. Attach Form 2441		
49	Education credits from Form 8863, line 23		
50	Retirement savings contributions credit. Attach Form 8880		
51	Child tax credit (see instructions)		
52	Residential energy credits. Attach Form 5695		
53	Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐		
54	Add lines 47 through 53. These are your **total credits**		
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- ▶		28,592

Other Taxes

56	Self-employment tax. Attach Schedule SE		
57	Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919		
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		
59	a ☐ Form(s) W-2, box 9 b ☐ Schedule H c ☐ Form 5405, line 16		
60	Add lines 55 through 59. This is your **total tax** ▶		28,592

Payments

If you have a qualifying child, attach Schedule EIC.

61	Federal income tax withheld from Forms W-2 and 1099	22,394	
62	2010 estimated tax payments and amount applied from 2009 return		
63	Making work pay credit. Attach Schedule M	107	
64a	**Earned income credit (EIC)**		
b	Nontaxable combat pay election 64b		
65	Additional child tax credit. Attach Form 8812		
66	American opportunity credit from Form 8863, line 14		
67	First-time homebuyer credit from Form 5405, line 10		
68	Amount paid with request for extension to file		
69	Excess social security and tier 1 RRTA tax withheld		
70	Credit for federal tax on fuels. Attach Form 4136		
71	Credits from Form: a ☐ 2439 b ☐ 8839 c ☐ 8801 d ☐ 8885		
72	Add lines 61, 62, 63, 64a, and 65 through 71. These are your **total payments** ▶		22,501

Refund

73	If line 72 is more than line 60, subtract line 60 from line 72. This is the amount you **overpaid**		
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ▶ ☐		
▶ b	Routing number ▶ c Type: ☐ Checking ☐ Savings		
▶ d	Account number		
75	Amount of line 73 you want **applied to your 2011 estimated tax** ▶		

Direct deposit? See instructions.

Amount You Owe

76	**Amount you owe.** Subtract line 72 from line 60. For details on how to pay, see instructions ▶		6,153
77	Estimated tax penalty (see instructions)	62	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ **Yes.** Complete below. ☒ **No**

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here

Joint return? See page 12. Keep a copy for your records.

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

Your signature	Date	Your occupation	Daytime phone number
		EXECUTIVE	[redacted]
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
	7-19-11	PHARMACIST	

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Ismael N. Martinez, CPA		7/7/2011		[redacted]
Firm's name ▶ Martinez, Rosario & Company, LLP			Firm's EIN ▶	[redacted]
Firm's address ▶ 115 E. Travis St. Suite 1400 San Antonio TX 78205			Phone no.	[redacted]

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

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

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Name(s) shown on Form 1040: Henry P, Jr. and Leticia R Van De Putte

Your social security number: [redacted]

Medical and Dental Expenses		**Caution.** Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1	10,310		
	2	Enter amount from Form 1040, line 38 [2] 184,651				
	3	Multiply line 2 by 7.5% (.075)	3	13,849		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	0
Taxes You Paid	5	State and local (**check only one box**): a [ ] Income taxes, or b [X] General sales taxes	5	1,695		
	6	Real estate taxes (see instructions)	6	3,740		
	7	New motor vehicle taxes from line 11 of the worksheet on back (for certain vehicles purchased in 2009). Skip this line if you checked box 5b	7			
	8	Other taxes. List type and amount ▶	8			
	9	Add lines 5 through 8			9	5,435
Interest You Paid	10	Home mortgage interest and points reported to you on Form 1098	10	5,153		
	11	Home mortgage interest not reported to you on Form 1098. If to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ▶ Name Address TIN	11			
Note. Your mortgage interest deduction may be limited (see instructions).	12	Points not reported to you on Form 1098. See instructions for special rules	12			
	13	Mortgage insurance premiums (see instructions)	13			
	14	Investment interest. Attach Form 4952 if required. (See instructions.)	14			
	15	Add lines 10 through 14			15	5,153
Gifts to Charity	16	Gifts by cash or check. If you made any gift of $250 or more, see instructions	16	6,290		
If you made a gift and got a benefit for it, see instructions.	17	Other than by cash or check. If any gift of $250 or more, see instructions. You **must** attach Form 8283 if over $500	17			
	18	Carryover from prior year	18			
	19	Add lines 16 through 18			19	6,290
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)			20	
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶	21			
	22	Tax preparation fees	22			
	23	Other expenses—investment, safe deposit box, etc. List type and amount ▶	23			
	24	Add lines 21 through 23	24	0		
	25	Enter amount from Form 1040, line 38 [25] 184,651				
	26	Multiply line 25 by 2% (.02)	26	3,693		
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-			27	0
Other Miscellaneous Deductions	28	Other—from list in instructions. List type and amount ▶ Gambling losses 9,071			28	9,071
Total Itemized Deductions	29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40			29	25,949
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ [ ]				

SCHEDULE B (Form 1040A or 1040)

Department of the Treasury Internal Revenue Service (99)

Interest and Ordinary Dividends

▶ Attach to Form 1040A or 1040. ▶ See instructions on back.

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2010

Attachment Sequence No. 08

Name(s) shown on return: Henry P, Jr. and Leticia R Van De Putte

Your social security number: [redacted]

Part I Interest

(See instructions on back and the instructions for Form 1040A, or Form 1040, line 8a.)

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

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions on back and list this interest first. Also, show that buyer's social security number and address ▶	1	
	Select Employees FCU		1,072
	Dixie Flag Manufacturing Company		914
	Select FCU		27
2	Add the amounts on line 1	2	2,013
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶	4	2,013

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

Part II Ordinary Dividends

(See instructions on back and the instructions for Form 1040A, or Form 1040, line 9a.)

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

			Amount
5	List name of payer ▶	5	
6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	6	0

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

Part III Foreign Accounts and Trusts

(See instructions on back)

	You must complete this part if you **(a)** had over $1,500 of taxable interest or ordinary dividends; **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	Yes	No
7a	At any time during 2010, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See instructions on back for exceptions and filing requirements for Form TD F 90-22.1.		X
b	If "Yes," enter the name of the foreign country ▶		
8	During 2010, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions on back		X

SCHEDULE C (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

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

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

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2010

Attachment Sequence No. 09

Name of proprietor: Leticia R Van De Putte

Social security number (SSN): [redacted]

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

B Enter code from pages C-9, 10, & 11 ▶ 446110

C Business name. If no separate business name, leave blank.

D Employer ID number (EIN), if any

E Business address (including suite or room no.) ▶ 1616 W. MULBERRY

City, town or post office, state, and ZIP code: SAN ANTONIO TX 78201

F Accounting method: (1) [X] Cash (2) [ ] Accrual (3) [ ] Other (specify) ▶

G Did you "materially participate" in the operation of this business during 2010? If "No," see instructions for limit on losses [X] Yes [ ] No

H If you started or acquired this business during 2010, check here ▶ [ ]

Part I Income

1	Gross receipts or sales. Caution. See instructions and check the box if: • This income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see instructions for limit on losses. ▶ [ ]	1	
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	0
4	Cost of goods sold (from line 42 on page 2)	4	
5	Gross profit. Subtract line 4 from line 3	5	0
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6 ▶	7	0

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

8	Advertising	8		18	Office expense	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
				22	Supplies (not included in Part III)	22	
				23	Taxes and licenses	23	
				24	Travel, meals, and entertainment:		
				a	Travel	24a	
14	Employee benefit programs (other than on line 19)	14		b	Deductible meals and entertainment (see instructions)	24b	
15	Insurance (other than health)	15		25	Utilities	25	
16	Interest:			26	Wages (less employment credits)	26	
a	Mortgage (paid to banks, etc.)	16a		27	Other expenses (from line 48 on page 2)	27	306
b	Other	16b					
17	Legal and professional services	17					

28	Total expenses before expenses for business use of home. Add lines 8 through 27 ▶	28	306
29	Tentative profit or (loss). Subtract line 28 from line 7	29	-306
30	Expenses for business use of your home. Attach Form 8829	30	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	-306

32 If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

32a [X] All investment is at risk.

32b [ ] Some investment is not at risk.

Part III Cost of Goods Sold (see instructions)

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

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

35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36	Purchases less cost of items withdrawn for personal use	36	
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs	39	
40	Add lines 35 through 39	40	0
41	Inventory at end of year	41	
42	**Cost of goods sold.** Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42	0

Part IV Information on Your Vehicle.

Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

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

44 Of the total number of miles you drove your vehicle during 2010, enter the number of miles you used your vehicle for:

a Business b Commuting (see instructions) c Other

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

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

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

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

Part V Other Expenses.

List below business expenses not included on lines 8–26 or line 30.

LICENSES	306
48 Total other expenses. Enter here and on page 1, line 27 . . . 48	306

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).

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2010

Attachment Sequence No. 13

Name(s) shown on return: Henry P, Jr. and Leticia R Van De Putte

Your social security number: [redacted]

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.

1 List the type and address of each rental real estate property:

	Property	Yes	No
A	XTO Energy, Inc. 810 Houston St., Fort Worth, TX 76102		X
B			
C			

2 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:
- 14 days or
- 10% of the total days rented at fair rental value?

(See page E-4)

Income:	Line	Properties A	Properties B	Properties C	Line	Totals (Add columns A, B, and C.)
3 Rents received	3				3	0
4 Royalties received	4	25,425			4	25,425
Expenses:						
5 Advertising	5					
6 Auto and travel (see page E-5)	6					
7 Cleaning and maintenance	7					
8 Commissions	8					
9 Insurance	9					
10 Legal and other professional fees	10	480				
11 Management fees	11					
12 Mortgage interest paid to banks, etc. (see page E-5)	12				12	0
13 Other interest	13					
14 Repairs	14					
15 Supplies	15					
16 Taxes	16	1,171				
17 Utilities	17					
18 Other (list) ▶ Miscellaneous	18	2,500				
19 Add lines 5 through 18	19	4,151			19	4,151
20 Depreciation expense or depletion (see page E-5)	20				20	0
21 Total expenses. Add lines 19 and 20	21	4,151				
22 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-6 to find out if you must file **Form 6198**	22	21,274				
23 Deductible rental real estate loss. **Caution.** Your rental real estate loss on line 22 may be limited. See page E-6 to find out if you must file **Form 8582.** Real estate professionals **must** complete line 43 on page 2	23	( )	( )	( )		
24 **Income.** Add positive amounts shown on line 22. **Do not** include any losses					24	21,274
25 **Losses.** Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here					25	(0)
26 **Total rental real estate and royalty income or (loss).** 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					26	21,274

Form **6251**

Department of the Treasury
Internal Revenue Service (99)

Alternative Minimum Tax—Individuals

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2010

Attachment Sequence No. **32**

Name(s) shown on Form 1040 or Form 1040NR: Henry P, Jr. and Leticia R Van De Putte

Your social security number: [redacted]

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 6. (If less than zero, enter as a negative amount.)	1	158,702
2	Medical and dental. Enter the **smaller** of Schedule A (Form 1040), line 4, **or** 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	0
3	Taxes from Schedule A (Form 1040), lines 5, 6, and 8	3	5,435
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6	If filing Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 17 from that schedule	6	( )
7	Tax refund from Form 1040, line 10 or line 21	7	( )
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Alternative tax net operating loss deduction	11	( )
12	Interest from specified private activity bonds exempt from the regular tax	12	
13	Qualified small business stock (7% of gain excluded under section 1202)	13	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17	Disposition of property (difference between AMT and regular tax gain or loss)	17	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19	Passive activities (difference between AMT and regular tax income or loss)	19	
20	Loss limitations (difference between AMT and regular tax income or loss)	20	
21	Circulation costs (difference between regular tax and AMT)	21	
22	Long-term contracts (difference between AMT and regular tax income)	22	
23	Mining costs (difference between regular tax and AMT)	23	
24	Research and experimental costs (difference between regular tax and AMT)	24	
25	Income from certain installment sales before January 1, 1987	25	( )
26	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
28	**Alternative minimum taxable income.** Combine lines 1 through 27. (If married filing separately and line 28 is more than $219,900, see page 8 of the instructions.)	28	164,137

Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2010, see page 8 of the instructions.) **IF your filing status is . . . AND line 28 is not over . . . THEN enter on line 29 . . .** Single or head of household . . . $112,500 . . . $47,450 Married filing jointly or qualifying widow(er) . . 150,000 . . . 72,450 Married filing separately . . . 75,000 . . . 36,225 If line 28 is over the amount shown above for your filing status, see page 8 of the instructions.	29	68,916
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 33 and 35 and skip the rest of Part II	30	95,221
31	• If you are filing Form 2555 or 2555-EZ, see page 9 of the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 54 here. • All others: If line 30 is $175,000 or less ($87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract $3,500 ($1,750 if married filing separately) from the result.	31	24,757
32	Alternative minimum tax foreign tax credit (see page 9 of the instructions)	32	
33	Tentative minimum tax. Subtract line 32 from line 31	33	24,757
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Schedule J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Schedule J (see page 11 of the instructions)	34	28,592
35	**AMT.** Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	0

Form **8606**

Department of the Treasury
Internal Revenue Service (99)

Nondeductible IRAs

▶ See separate instructions.

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

OMB No. 1545-0074

2010

Attachment Sequence No. 48

Name. If married, file a separate form for each spouse required to file Form 8606. See instructions.

Henry P Van De Putte, Jr.

Your social security number [redacted]

Fill in Your Address Only If You Are Filing This Form by Itself and Not With Your Tax Return ▶

Home address (number and street, or P.O. box if mail is not delivered to your home) | Apt. no.

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

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2010.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2010 **and** you made nondeductible contributions to a traditional IRA in 2010 or an earlier year. For this purpose, a distribution does not include a rollover, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2010 (excluding any portion you recharacterized) **and** you made nondeductible contributions to a traditional IRA in 2010 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2010, including those made for 2010 from January 1, 2011, through April 18, 2011 (see instructions)			1	2,045
2	Enter your total basis in traditional IRAs (see instructions)			2	
3	Add lines 1 and 2			3	2,045
	In 2010, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? — No ▶ Enter the amount from line 3 on line 14. Do not complete the rest of Part I. — Yes ▶ Go to line 4.				
4	Enter those contributions included on line 1 that were made from January 1, 2011, through April 18, 2011			4	
5	Subtract line 4 from line 3			5	2,045
6	Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2010, plus any outstanding rollovers. (see instructions)	6			
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2010. **Do not** include rollovers, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see instructions)	7	15,000		
8	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2010. **Do not** include amounts converted that you later recharacterized (see instructions). Also enter this amount on line 16	8			
9	Add lines 6, 7, and 8 — 9: 15,000				
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"	10	× 0.13633		
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also enter this amount on line 17	11	0		
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA	12	2,045		
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions			13	2,045
14	Subtract line 13 from line 3. This is **your total basis in traditional IRAs for 2010 and earlier years**			14	0
15	**Taxable amount.** Subtract line 12 from line 7. If more than zero, also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b			15	12,955

Note: You may be subject to an additional 10% tax on the amount on line 15 if you were under age 59½ at the time of the distribution (see instructions).

Part II 2010 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2010 (excluding any portion you recharacterized).

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2010. **Do not** include amounts you later recharacterized back to traditional, SEP, or SIMPLE IRAs in 2010 or 2011 (see instructions).	16	
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see instructions)	17	

Form **8917**

Department of the Treasury
Internal Revenue Service

Tuition and Fees Deduction

See Instructions.
Attach to Form 1040 or Form 1040A.

OMB No. 1545-0074

2010

Attachment Sequence No. **60**

Name(s) shown on return: Henry P, Jr. and Leticia R Van De Putte

Your social security number: [redacted]

CAUTION *You* ***cannot*** *take both an education credit from Form 8863 and the tuition and fees deduction from this form for the* ***same student*** *for the same tax year.*

Before you begin: √ To see if you qualify for this deduction, see *Who Can Take the Deduction* in the instructions below.
√ If you file Form 1040, figure any write-in adjustments to be entered on the dotted line next to Form 1040, line 36. See the 2010 Form 1040 instructions for line 36.

1	**(a)** Student's name (as shown on page 1 of your tax return) First name	Last name	**(b)** Student's social security number (as shown on page 1 of your tax return)	**(c)** Qualified expenses (see instructions)
	Isabella	Van De Putte	[redacted]	1,300

2	Add the amounts on line 1, column (c), and enter the total			2	1,300
3	Enter the amount from Form 1040, line 22, or Form 1040A, line 15	3	184,651		
4	Enter the total from either: • Form 1040, lines 23 through 33, plus any write-in adjustments entered on the dotted line next to Form 1040, line 36, **or** • Form 1040A, lines 16 through 18	4			
5	Subtract line 4 from line 3.* If the result is more than $80,000 ($160,000 if married filing jointly), **stop;** you cannot take the deduction for tuition and fees			5	184,651
	*If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see *Effect of the Amount of Your Income on the Amount of Your Deduction* in Pub. 970, chapter 6, to figure the amount to enter on line 5.				
6	**Tuition and fees deduction.** Is the amount on line 5 more than $65,000 ($130,000 if married filing jointly)? ☐ **Yes.** Enter the **smaller** of line 2, or $2,000. ☐ **No.** Enter the **smaller** of line 2, or $4,000. **Also enter** this amount on Form 1040, line 34, or Form 1040A, line 19.			6	0

SCHEDULE M
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Making Work Pay Credit

▶ Attach to Form 1040A or 1040. ▶ See separate instructions.

OMB No. 1545-0074

2010

Attachment Sequence No. 166

Name(s) shown on return: Henry P. Jr. and Leticia R Van De Putte

Your social security number: [redacted]

CAUTION *To take the making work pay credit, you must include your social security number (if filing a joint return, the number of either you or your spouse) on your tax return. A social security number does not include an identification number issued by the IRS. Only the Social Security Administration issues social security numbers.*

CAUTION *You cannot take the making work pay credit if you can be claimed as someone else's dependent or if you are a nonresident alien.*

Important: Check the "No" box on line 1a and see the instructions if:
(a) You have a net loss from a business,
(b) You received a taxable scholarship or fellowship grant not reported on a Form W-2,
(c) Your wages include pay for work performed while an inmate in a penal institution,
(d) You received a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan, or
(e) You are filing Form 2555 or 2555-EZ.

1a Do you (and your spouse if filing jointly) have 2010 wages of more than $6,451 ($12,903 if married filing jointly)?
☐ **Yes.** Skip lines 1a through 3. Enter $400 ($800 if married filing jointly) on line 4 and go to line 5.
☒ **No.** Enter your earned income (see instructions) **1a** 139,338

b Nontaxable combat pay included on line 1a (see instructions) **1b**

2 Multiply line 1a by 6.2% (.062) **2** 8,639

3 Enter $400 ($800 if married filing jointly) **3** 800

4 Enter the **smaller** of line 2 or line 3 (unless you checked "Yes" on line 1a) **4** 800

5 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22 . . . **5** 184,651

6 Enter $75,000 ($150,000 if married filing jointly) **6** 150,000

7 Is the amount on line 5 more than the amount on line 6?
☐ **No.** Skip line 8. Enter the amount from line 4 on line 9 below.
☒ **Yes.** Subtract line 6 from line 5 . . . . **7** 34,651

8 Multiply line 7 by 2% (.02) **8** 693

9 Subtract line 8 from line 4. If zero or less, enter -0- **9** 107

10 Did you (or your spouse, if filing jointly) receive an economic recovery payment in **2010**? You may have received this payment in 2010 if you did not receive an economic recovery payment in 2009 but you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits in November 2008, December 2008, or January 2009 (see instructions).
☒ **No.** Enter -0- on line 10 and go to line 11.
☐ **Yes.** Enter the total of the payments you (and your spouse, if filing jointly) received in **2010**. Do not enter more than $250 ($500 if married filing jointly) **10** 0

11 **Making work pay credit.** Subtract line 10 from line 9. If zero or less, enter -0-. Enter the result here and on Form 1040, line 63; or Form 1040A, line 40 . . . . **11** 107

*If you are filing Form 2555, 2555-EZ, or 4563 or you are excluding income from Puerto Rico, see instructions.

Line 18 (Sch E page 1 (1040)) - Other Expense Summary for 01

1	Miscellaneous	1	2,500
2	Total	2	2,500

Form **W-2 Wage and Tax Statement** 2010

a Control number 0000296	7 Social security tips	1 Wages, tips, other comp. 5733.54	2 Federal income tax withheld 252.00
c Employer's name, address, and ZIP code	8 Allocated tips	3 Social security wages 6309.54	4 Social security tax withheld 391.19
TEXAS SENATE PAYROLL OFFICE P. O. BOX 12068 AUSTIN TX 78711 00101	9 Advance EIC payment	5 Medicare wages and tips 6309.54	6 Medicare tax withheld 91.49
	10 Dependent care benefits	11 Nonqualified plans	12a Code
e Employee's name, address, and ZIP code Suff. 15000000000 LETICIA R. VAN DE PUTTE 1616 W. MULBERRY SAN ANTONIO TX 78201	13 Statutory employee / Retirement plan X / Third party sick pay	14 Other	12b Code
	b Employer identification number (EIN) [redacted]		12c Code
	d Employee's social security no. [redacted]		12d Code

15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 1545-0008 **Dept. of the Treasury - IRS**

1 Wages, tips, other comp. 14492.38	2 Federal income tax withheld 950.15
3 Social security wages 14492.38	4 Social security tax withheld 898.53
5 Medicare wages and tips 14492.38	6 Medicare tax withheld 210.14
d Control number 000122 71/QNA · Dept. 000200 · Corp.	Employer use only A 90
c Employer's name, address, and ZIP code ADP TOTALSOURCE CO XXII INC 10200 SUNSET DRIVE MIAMI FL 33173	
b Employer's [redacted] number	e Employee's [redacted] SSA number
7 Social security tips	8 Allocated tips
9 Advance EIC payment	10 Dependent care benefits
11 Nonqualified plans	12a
14 Other	12b
	12c
	12d
	13 Stat emp. / Ret. plan / 3rd party sick pay
e/f Employee's name, address and ZIP code LETICIA VAN DE PUTTE 1616 W. MULBERRY SAN ANTONIO TX 78201	
15 State TX · Employer's state ID no.	16 State wages, tips, etc.
17 State income tax	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

TX State Reference Copy
W-2 Wage and Tax Statement **2010**
Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

a Employee's social security number [redacted]

Copy C—For EMPLOYEE'S RECORDS (See *Notice to Employee* on back of Copy B.)
OMB No. 1545-0008

b Employer identification number (EIN)
74-2218703

c Employer's name, address, and ZIP code
DIXIE FLAG MANUFACTURING CO.
PO BOX 8618

SAN ANTONIO, TEXAS 78208

d Control number
02-0009000

e Employee's name, address, and ZIP code
HENRY P. VAN DE PUTTE JR

1616 W. MULBERRY
SAN ANTONIO TX 78201

1 Wages, tips, other compensation 103492.60	2 Federal income tax withheld 19635.68
3 Social security wages 103492.60	4 Social security tax withheld 6416.46
5 Medicare wages and tips 105705.60	6 Medicare tax withheld 1532.64
7 Social security tips	8 Allocated tips
9 Advance EIC payment	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
13 Statutory employee / Retirement plan / Third-party sick pay	12b
14 Other	12c
	12d

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
TX	[redacted]	105705.60				

Form **W-2** Wage and Tax Statement **2010**

38-2089803 Department of the Treasury—Internal Revenue Service

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

Extra Employee Copy		**2010** OMB No. 1545-0008
a Employee's social security number [redacted]	1 Wages, tips, other comp. 15925.22	2 Federal income tax withheld 1555.84
b Employer ID number [redacted]	3 Social security wages 15925.22	4 Social security tax withheld 987.36
	5 Medicare wages and tips 15925.22	6 Medicare tax withheld 230.92

c Employer's name, address, and ZIP code

Davila Pharmacy Inc
1423 Guadalupe
San Antonio, TX 78207

d Control Number
2158 5164 Van De Putte Leticia

e Employee's first name and initial Last name

Leticia Van De Putte
PO Box 8618 Attn: Jennifer
San Antonio, TX 78208

f Employee's address, and ZIP code

7 Social security tips	8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee	14 Other	12b Code
Retirement plan X		12c Code
Third-party sick pay		12d Code

15 State Emplr.'s state I.D. #	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS