

Label
(See instructions.)

Use the IRS label.
Otherwise, please print or type.

Presidential Election Campaign

For the year Jan 1 - Dec 31, 2006, or other tax year beginning , 2006, ending , 20		OMB No. 1545-0074
Your first name Barry L. Friedman	MI Last name	Your social security number 108-36-0183
If a joint return, spouse's first name Deborah Friedman	MI Last name	Spouse's social security number None
Home address (number and street). If you have a P.O. box, see instructions 480 Tweedsmuir Avenue		You must enter your social security number(s) above. ▲
City, town or post office. If you have a foreign address, see instructions Ottawa K1Z 5N9 Canada		
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions)		<input type="checkbox"/> You <input type="checkbox"/> Spouse

Filing Status

- | | |
|---|---|
| 1 <input type="checkbox"/> Single | 4 <input type="checkbox"/> 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 ▶ |
| 2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) | |
| 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above & full name here ▶ | 5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions) |

Check only one box.

Exemptions

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	Boxes checked on 6a and 6b	2
b <input checked="" type="checkbox"/> Spouse	No. of children on 6c who:	
c Dependents:		
(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you
See Statement 1		
d Total number of exemptions claimed		8

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 instructions.

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

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	
8a Taxable interest. Attach Schedule B if required	8a	52.
b Tax-exempt interest. Do not include on line 8a	8b	
9a Ordinary dividends. Attach Schedule B if required	9a	1,268.
b Qualified dividends (see instrs)	9b	1,260.
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here. ▶ <input type="checkbox"/>	13	-1,284.
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions	15a	
b Taxable amount (see instrs)	15b	63,622.
16a Pensions and annuities	16a	
b Taxable amount (see instrs)	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits	20a	
b Taxable amount (see instrs)	20b	
21 Other income	21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income. ▶	22	63,658.

Adjusted Gross Income

23 Archer MSA deduction. Attach Form 8853	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 (see instructions)	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid b Recipient's SSN	31a	
32 IRA deduction (see instructions)	32	
33 Student loan interest deduction (see instructions)	33	
34 Jury duty pay you gave to your employer	34	
35 Domestic production activities deduction. Attach Form 8903	35	
36 Add lines 23 - 31a and 32 - 35	36	0.
37 Subtract line 36 from line 22. This is your adjusted gross income	37	63,658.

Tax and Credits**Standard Deduction for —**

• People who checked any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$5,150

Married filing jointly or Qualifying widow(er), \$10,300

Head of household, \$7,550

38 Amount from line 37 (adjusted gross income) 38 63,658.

39a Check ☐ You were born before January 2, 1942, ☐ Blind. Total boxes checked ☐ 39a ☐ Spouse was born before January 2, 1942, ☐ Blind. ☐ 39bb If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here. ☐ 39b

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 10,300.

41 Subtract line 40 from line 38. 41 53,358.

42 If line 38 is over \$112,875, or you provided housing to a person displaced by Hurricane Katrina, see instructions. Otherwise, multiply \$3,300 by the total number of exemptions claimed on line 6d. 42 26,400.

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 26,958.

44 Tax (see instrs). Check if any tax is from: a ☐ Form(s) 8814 b ☐ Form 4972 44 3,159.

45 Alternative minimum tax (see instructions). Attach Form 6251. 45 0.

46 Add lines 44 and 45 46 3,159.

47 Foreign tax credit. Attach Form 1116 if required 47

48 Credit for child and dependent care expenses. Attach Form 2441 48

49 Credit for the elderly or the disabled. Attach Schedule R 49

50 Education credits. Attach Form 8863 50

51 Retirement savings contributions credit. Attach Form 8880 51

52 Residential energy credits. Attach Form 5695 52

53 Child tax credit (see instructions). Attach Form 8901 if required 53 3,159.

54 Credits from: a ☐ Form 8396 b ☐ Form 8839 c ☐ Form 8859 5455 Other credits. Check applicable box(es): a ☐ Form 3800 b ☐ Form 8801 c ☐ Form 55

56 Add lines 47 through 55. These are your total credits 56 3,159.

57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- 57 0.

Other Taxes

58 Self-employment tax. Attach Schedule SE. 58

59 Social security and Medicare tax on tip income not reported to employer. Attach Form 4137. 59

60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required. 60

61 Advance earned income credit payments from Form(s) W-2, box 9 61

62 Household employment taxes. Attach Schedule H 62

63 Add lines 57-62. This is your total tax 63 0.

Payments

If you have a qualifying child, attach Schedule EIC.

64 Federal income tax withheld from Forms W-2 and 1099. 64

65 2006 estimated tax payments and amount applied from 2005 return. 65

66a Earned income credit (EIC). No 66a

b Nontaxable combat pay election. ☐ 66b

67 Excess social security and tier 1 RRTA tax withheld (see instructions) 67

68 Additional child tax credit. Attach Form 8812 68

69 Amount paid with request for extension to file (see instructions). 69

70 Payments from: a ☐ Form 2439 b ☐ Form 4136 c ☐ Form 8885 70

71 Credit for federal telephone excise tax paid. Attach Form 8913 if required. 71

72 Add lines 64, 65, 66a, and 67 through 71. These are your total payments 72 0.

Refund

Direct deposit? See instructions and fill in 74b, 74c, and 74d or Form 8888.

73 If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid. 73

74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here. ☐ 74ab Routing number. ☐ c Type: ☐ Checking ☐ Savingsd Account number. ☐

75 Amount of line 73 you want applied to your 2007 estimated tax. 75

Amount You Owe

76 Amount you owe. Subtract line 72 from line 63. For details on how to pay, see instructions. 76 0.

77 Estimated tax penalty (see instructions) 77

Third Party DesigneeDo you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete the following. ☐ NoDesignee's name ☐ Preparer Phone no. ☐ Personal identification number (PIN) ☐**Sign Here**

Joint return? See instructions. 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 ☐Spouse's signature. If a joint return, both must sign. ☐ Date ☐ Spouse's occupation ☐Computer Tech ☐Preparer's signature ☐ Date ☐ Check if self-employed ☐ Preparer's SSN or PTIN ☐**Paid Preparer's Use Only**Firm's name (or yours if self-employed) ☐ Spitzkoff & Associates, Inc.address, and ZIP code ☐ 99 Powerhouse Rd.Roslyn Heights, NY 11577 ☐ EIN 11-2997214

Phone no. (516) 484-1515

Form **1040** U.S. Individual Income Tax Return **2007**

Department of the Treasury — Internal Revenue Service

IRS Use Only — Do not write or staple in this space.

Label
(See instructions.)

Use the IRS label.
Otherwise, please print or type.

Presidential Election Campaign

For the year Jan 1 - Dec 31, 2007, or other tax year beginning , 2007, ending , 20		OMB No. 1545-0074
Your first name Barry L. Friedman	MI Last name	Your social security number 108-36-0183
If a joint return, spouse's first name Deborah Friedman	MI Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. 480 Tweedsmuir Avenue		You must enter your social security number(s) above. ▲
City, town or post office. If you have a foreign address, see instructions. Ottawa K1Z 5N9 Canada		
State ZIP code		Checking a box below will not change your tax or refund.
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions).		<input type="checkbox"/> You <input type="checkbox"/> 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 & full name here . . . ▶
- 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here . . . ▶
- 5 ☐ Qualifying widow(er) with dependent child (see instructions)

Exemptions

If more than four dependents, see instructions.

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	Boxes checked on 6a and 6b	2
b <input checked="" type="checkbox"/> Spouse	No. of children on 6c who:	
c Dependents:	• lived with you	6
(1) First name Last name	• did not live with you due to divorce or separation (see instrs)	
See Statement 1	Dependents on 6c not entered above.	
	Add numbers on lines above	8
d Total number of exemptions claimed		

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 instructions.

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

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	
8a Taxable interest. Attach Schedule B if required	8a	15.
b Tax-exempt interest. Do not include on line 8a	8b	
9a Ordinary dividends. Attach Schedule B if required	9a	849.
b Qualified dividends (see instrs)	9b	849.
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here	13	-3,000.
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions	15a	
b Taxable amount (see instrs)	15b	78,566.
16a Pensions and annuities	16a	
b Taxable amount (see instrs)	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits	20a	
b Taxable amount (see instrs)	20b	
21 Other income	21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income. ▶	22	76,430.

Adjusted Gross Income

23 Educator expenses (see instructions)	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 (see instructions)	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid b Recipient's SSN	31a	
32 IRA deduction (see instructions)	32	
33 Student loan interest deduction (see instructions)	33	
34 Tuition and fees deduction. Attach Form 8917	34	
35 Domestic production activities deduction. Attach Form 8903	35	
36 Add lines 23 - 31a and 32 - 35	36	0.
37 Subtract line 36 from line 22. This is your adjusted gross income	37	76,430.

Tax and Credits**Standard Deduction for —**

• People who checked any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$5,350

Married filing jointly or Qualifying widow(er), \$10,700

Head of household, \$7,850

38	Amount from line 37 (adjusted gross income)	38	76,430.
39a	Check if: <input type="checkbox"/> You were born before January 2, 1943, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1943, <input type="checkbox"/> Blind. Total boxes checked 39a <input type="checkbox"/>		
b	If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here. 39b <input type="checkbox"/>		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	10,700.
41	Subtract line 40 from line 38.	41	65,730.
42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 6d. If line 38 is over \$117,300, see the instructions	42	27,200.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	38,530.
44	Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 8889	44	4,911.
45	Alternative minimum tax (see instructions). Attach Form 6251.	45	0.
46	Add lines 44 and 45	46	4,911.
47	Credit for child and dependent care expenses. Attach Form 2441	47	
48	Credit for the elderly or the disabled. Attach Schedule R	48	
49	Education credits. Attach Form 8863	49	
50	Residential energy credits. Attach Form 5695	50	
51	Foreign tax credit. Attach Form 1116 if required	51	2,603.
52	Child tax credit (see instructions). Attach Form 8901 if required	52	2,308.
53	Retirement savings contributions credit. Attach Form 8880.	53	
54	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8839	54	
55	Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55	
56	Add lines 47 through 55. These are your total credits	56	4,911.
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	0.

Other Taxes

58	Self-employment tax. Attach Schedule SE.	58	
59	Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919	59	
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required.	60	
61	Advance earned income credit payments from Form(s) W-2, box 9	61	
62	Household employment taxes. Attach Schedule H	62	
63	Add lines 57-62. This is your total tax	63	0.

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099.	64	
65	2007 estimated tax payments and amount applied from 2006 return.	65	
66a	Earned income credit (EIC). No 66a		
b	Nontaxable combat pay election. 66b		
67	Excess social security and tier 1 RRTA tax withheld (see instructions)	67	
68	Additional child tax credit. Attach Form 8812	68	
69	Amount paid with request for extension to file (see instructions)	69	
70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70	
71	Refundable credit for prior year minimum tax from Form 8801, line 27.	71	
72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	0.

Refund

Direct deposit? See instructions and fill in 74b, 74c, and 74d or Form 8888.

73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid.	73	
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here. <input type="checkbox"/>	74a	
b	Routing number. c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number.		
75	Amount of line 73 you want applied to your 2008 estimated tax.	75	

Amount You Owe

76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see instructions.	76	0.
77	Estimated tax penalty (see instructions)	77	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete the following. <input type="checkbox"/> No	
Designee's name Preparer	Phone no. Personal Identification number (PIN)

Sign Here

Joint return? See instructions. 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
		Retired	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
		Computer Tech	

Paid Preparer's Use Only

Preparer's signature Gerald Spitzkoff E.A.	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN P00039167
Firm's name (or yours if self-employed) Spitzkoff & Associates, Inc.	EIN 11-2997214		
Address, and ZIP code 99 Powerhouse Rd. Roslyn Heights, NY 11577	Phone no. (516) 484-1515		