



Partnership/Limited Liability Company Return of Income

ALSO TO BE FILED BY SYNDICATES, POOLS, JOINT VENTURES, ETC.

**Important!**  
You Must Check Applicable Box:

- Amended Return
- Initial Return
- Final Return
- General Partnership
- Limited Partnership
- LLC/LLP
- Qualified Investment Partnership

For Calendar Year 2010 or Fiscal Year beginning 1/1, 2010, and ending 12/30, 2010

FEDERAL BUSINESS CODE NUMBER ● 721110	FEDERAL EMPLOYER IDENTIFICATION NUMBER ● 63-0000012
Name of Company ● Presidential Stay Hotels, LLP	
Number and Street 997 Hotel Lane	
City or Town Uptown	State OH
9 Digit ZIP Code 34911-8951	
Check if the company operates in more than one state <input checked="" type="checkbox"/>	If above name or address is different from the one shown on your 2009 return, check here <input type="checkbox"/>
Check if the company qualifies for the Alabama Enterprise Zone Credit or the Capital Credit <input type="checkbox"/>	Number of Members During The Tax Year <input type="text" value="30"/>

DEPARTMENT USE ONLY

FN

Total Federal income as shown on Form 1065, line 8.  
● 323,465,613.00

Total Federal deductions as shown on Form 1065, line 21.  
● 242,784,210.00

Total assets as shown on Form 1065.  
● 108,367,919.00

CN

State in Which Company Was Formed ● IL	Nature of Business ● Hotel Services	Date Qualified in Alabama ● 06/01/1980	Number of Nonresident Members Included in Composite Filing ... <input type="text"/>
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UNLESS A COPY OF FEDERAL FORM 1065 IS ATTACHED THIS RETURN IS INCOMPLETE

**SCHEDULE A**

COMPUTATION OF SEPARATELY STATED AND NONSEPARATELY STATED INCOME

1	Federal Ordinary Income or (Loss) from trade or business activities	1	●	80,681,403
2	Net short-term and long-term capital gains – income or (loss)	2	●	
3	Salaries and wages reduced for federal employment credits	3	●	( 40,000 )
4	Net income or (loss) from rental real estate activities	4	●	203,125
5	Net income or (loss) from other rental activities	5	●	
6	Net gain or (loss) under I.R.C. §1231 (other than casualty losses)	6	●	
7	Adjustments due to the Federal Economic Stimulus Act of 2008 (attach schedule)	7	●	
8	Other reconciliation items (attach schedule)	8	●	
9	Net reconciling items (add lines 2 through 8)	9	●	163,125
10	Net Alabama nonseparately stated income or (loss) (add line 1 and line 9)	10	●	80,844,528
11	Contributions	11	●	( )
12	Oil and gas depletion	12	●	( )
13	I.R.C. §179 expense deduction (complete Schedule K)	13	●	( )
14	Casualty losses	14	●	( )
15	Portfolio income or (loss) less expenses (complete Schedule K)	15	●	92,650
16	Other separately stated items (attach schedule)	16	●	
17	Net separately stated items (add line 11 through 16)	17	●	92,650
18	Total separately stated and nonseparately stated items (add line 10 and line 17)	18	●	80,937,178
19	Alabama apportionment factor from Schedule D, line 4	19	●	%
20	Nonseparately Stated Income Allocated and Apportioned to Alabama from Schedule D, line 7	20	●	<b>Do not multiply line 18 by line 19</b>

Please Sign Here

I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.  
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.

Signature of general partner: \_\_\_\_\_ Date: 01/01/10 Daytime Telephone No.: (998) 444-7777 Social Security No.: 990 00 0001

Paid Preparer's Use Only

Preparer's Signature	Date ● 01/01/2010	Check if self-employed <input type="checkbox"/>	Preparer's Social Security No. ● 321 23 2345
Firm's name (or yours, if self-employed) and address ● 1 Mid State Street Montgomery, AL	Telephone No. ( 334 ) 222-3333	E.I. No. 63-1111111	ZIP Code 36111
Email Address suzyq@southerntaxservice.com			



**SCHEDULE B**

**ALLOCATION OF NONBUSINESS INCOME, LOSS, AND EXPENSE**

Identify by account name and amount all items of nonbusiness income, loss, and expense removed from apportionable income and those items which are directly allocable to Alabama. Adjustment(s) must also be made for any proration of expenses under Alabama Income Tax Rule 810-27-1-4-.01, which states, "Any allowable

deduction that is applicable to both business and nonbusiness income of the taxpayer shall be prorated to each class of income in determining income subject to tax as provided..." (See instructions).

DIRECTLY ALLOCABLE ITEMS	ALLOCABLE GROSS INCOME / LOSS		RELATED EXPENSE		NET OF RELATED EXPENSE	
	Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama	Column E Everywhere (Col. A less Col. C)	Column F Alabama (Col. B less Col. D)
<b>Nonseparately stated items</b>						
1a	●					
1b	●					
1c	●					
<b>1d Total (add lines 1a, 1b, and 1c)</b>					●	
<b>Separately stated items</b>						
1e	●					
1f	●					
1g	●					
<b>1h Total (add lines 1e, 1f, and 1g)</b>					●	

**SCHEDULE C**

**APPORTIONMENT FACTOR SCHEDULE – Do not complete if the entity operates exclusively in Alabama.**

TANGIBLE PROPERTY AT COST FOR PRODUCTION OF BUSINESS INCOME	ALABAMA		EVERYWHERE	
	BEGINNING OF YEAR	END OF YEAR	BEGINNING OF YEAR	END OF YEAR
1 Inventories	●			
2 Land	●		4,710,000	4,690,000
3 Furniture and fixtures	●			
4 Machinery and equipment	●		3,300,000	3,300,000
5 Buildings and leasehold improvements	●		81,500,000	78,750,000
6 IDB/IRB property (at cost)	●			
7 Government property (at FMV)	●			
8 ●				
9 Less Construction in progress (if included)	●			
10 Totals	●		89,510,000	86,740,000
11 Average owned property (BOY + EOY ÷ 2)		●		● 88,125,000
12 Annual rental expense	●	x8 =		x8 =
13 Total average property (add line 11 and line 12)		13a ●		13b ● 81,250,000
14 Alabama property factor — 13a ÷ 13b = line 14				14 ● %
<b>SALARIES, WAGES, COMMISSIONS AND OTHER COMPENSATION RELATED TO THE PRODUCTION OF BUSINESS INCOME</b>		15a ALABAMA	15b EVERYWHERE	15c
15 Alabama payroll factor — 15a ÷ 15b = 15c	●		7,300,000	%
<b>SALES</b>		ALABAMA	EVERYWHERE	
16 Destination sales	●			
17 Origin sales	●			
18 Total gross receipts from sales	●		7,004,000	
19 Dividends	●			
20 Interest	●			
21 Rents	●			
22 Royalties	●			
23 Gross proceeds from capital and ordinary gains	●			
24 Other ● (Federal 1065, line ●)	●			
25 Alabama sales factor — 25a ÷ 25b = line 25c		25a ●	25b 7,004,000	25c %
26 Sum of lines 14, 15c, and 25c ÷ 3 = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 4, Schedule D, page 3)				26 ● %



<b>SCHEDULE D</b>		<b>APPORTIONMENT AND ALLOCATION OF INCOME TO ALABAMA</b>	
1	Net Alabama nonseparately stated income or (loss) from line 10, Schedule A	1	● 80,844,528
2	Nonseparately stated (income) or loss treated as nonbusiness income (line 1d, Column E, Schedule B) – please enter income as a negative amount and losses as a positive amount	2	●
3	Apportionable income or (loss) – add line 1 and line 2	3	● 80,844,528
4	Apportionment factor from line 26, Schedule C	4	● 0.0000 %
5	Income or (loss) apportioned to Alabama (multiply amount on line 3 by the percentage on line 4)	5	●
6	Nonseparately stated income or (loss) allocated to Alabama as nonbusiness income (Column F, line 1d, Schedule B)	6	●
7	Nonseparately Stated Income Allocated and Apportioned to Alabama (add lines 5 and 6). Enter this amount on line 20, Schedule A and line 1, Schedule K – Alabama Amount	7	●

<b>SCHEDULE E</b>	<b>OTHER INFORMATION</b>		
1	Indicate method of accounting	(a) ● <input checked="" type="checkbox"/> cash	(b) ● <input type="checkbox"/> accrual
			(c) ● <input type="checkbox"/> other
2	Check if the company is currently being audited by the IRS	● <input type="checkbox"/> What years are involved? _____	
3	Check if the IRS has completed any audits	● <input type="checkbox"/>	
4	Enter this company's Alabama Withholding Tax Account Number	● _____	
5	Briefly describe your operations	● Hotel Service	
6	Indicate if company has been	(a) ● <input type="checkbox"/> dissolved	(b) ● <input type="checkbox"/> sold
			(c) ● <input type="checkbox"/> incorporated
	If company has been dissolved, sold, or incorporated, complete the following:		
	Nature of change ● _____		
	Name and address of new company, corporation, or owner(s) ● _____		
7	Location of the partnership records	● Presidential Suites Road Uptown, OH 34911	
8	Check if an Alabama business privilege tax return was filed for this entity	● <input type="checkbox"/>	
	If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return.		
	FEIN: ● _____	NAME: ● _____	
9	Taxpayer's email address: suzyq@southerntaxservice.com		

<b>SCHEDULE K</b>	<b>DISTRIBUTIVE SHARE ITEMS</b>			
	Federal Amount	Apportionment Factor	Alabama Amount	Enter on Alabama Schedule K-1
1	Alabama Nonseparately Stated Income (Schedule D, line 7)		●	Part III, Line M
<b>Separately Stated Items:</b>				
2	Contributions	●		Part III, Line S
3	Oil and gas depletion	●		Part III, Line Z
4	<b>I.R.C. §179</b> expense deduction			
	a. Amount allowed on 1065	●		
	b. Adjustments required (see instructions)	●		
	c. Amount to be apportioned	●		Part III, Line O
5	Casualty losses	● 92,650		Part III, Line W
6	Portfolio income	●		Part III, Line Q
7	Interest expense related to portfolio income	●		Part III, Line P
8	Other expenses related to portfolio income (attach schedule)	●		Part III, Line R
9	Other separately stated business items (attach explanation)	●		Part III, Line T
10	Small business health insurance premiums (attach explanation)	●		Part III, Line Y
11	Separately stated nonbusiness items (attach schedule)	●	●	Part III, Line AA
12	Composite payment made on behalf of owner/shareholder	●	●	Part III, Line U
13	U.S. taxes paid (attach explanation)	●		Part III, Line V
14	Alabama exempt income (attach explanation)	●		Part III, Line AB
<b>Transactions with Owners:</b>				
15	Property distributions to owners	● 75,140,310	● 75,140,310	Part III, Line X
16	Guaranteed payments to partners	● 22,675,031	● 354,320	Part III, Line N

<p><b>CHECK LIST</b></p> <p>HAVE THE FOLLOWING FORMS BEEN ATTACHED TO THE FORM 65?</p> <p><input checked="" type="checkbox"/> ALABAMA SCHEDULE K-1 (one for each owner)</p> <p><input type="checkbox"/> ALABAMA SCHEDULE NRA (if applicable)</p> <p><input checked="" type="checkbox"/> FEDERAL FORM 1065 (entire form as filed with the IRS)</p>
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# Required Entity Information For Partnerships and LLCs

1. List general partners.

NAME OF GENERAL PARTNER	SSN / FEIN	ADDRESS	PERCENT OF OWNERSHIP
a. ● George Washington	551111111	1 Washington Avenue Washington DC 20001	0.78
b. ● John Adams	552222222	2 Adams Avenue Washington DC 20002	0.78
c. ● Thomas Jefferson	553333333	3 Jefferson Avenue Washington DC 20003	0.78
d. ● James Madison	554444444	4 Madison Avenue Virginia 22482	0.78
e. ● James Monroe	556666666	5 Monroe Avenue Virginia 22482	0.78

2. List other states in which the Partnership/LLC operates, if applicable.

West Virginia

South Carolina

3. At any time during the tax year, did the Partnership/LLC transact business in a foreign country?  Yes  No  
 If yes, complete the information below:

NAME OF COUNTRY	NATURE OF BUSINESS	TAXABLE INCOME REPORTED TO COUNTRY
a. ●		
b. ●		
c. ●		
d. ●		
e. ●		

4. At any time during the tax year, did the Partnership/LLC invest in another Pass-Through entity?  Yes  No  
 If yes, complete the information below:

NAME OF ENTITY	FEIN	PERCENT OF OWNERSHIP
a. ●		
b. ●		
c. ●		
d. ●		
e. ●		

5. Person to contact for information regarding this return:

Name: Suzy Q

Telephone Number: (334) 222-3333

Email: suzyq@southerntaxservice.com



Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

Tax year beginning 01/01, 2010 and ending 12/31, 2010

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111133</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Woodrow Wilson</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 87 Wilson Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Woodtown, TN 87414</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>TN</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input checked="" type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,659</u></p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

A completed Alabama Schedule K-1 for each member in the Subchapter K entity/S corporation must be attached to Form 65/Form 20S.



Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

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<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 5511111111</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • George Washington</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 1 Washington Avenue</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Washington DC 20001</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input checked="" type="checkbox"/> General partner or LLC member manager      <input type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Corporation</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>Washington DC</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p> <p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,659</u></p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p> <p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

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<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111114</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Martin Van Buren</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 5441 Van Buren Avenue</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Reno, NV 89510</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>NV</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,660</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
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<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111116</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • John Tyler</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 9 Johnstown Road</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Tyler, WV 87491</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
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<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input checked="" type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,660</u></p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
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PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111118</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Zachary Taylor Corp</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 5 Taylor Road</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Atlanta, GA 78415</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input checked="" type="checkbox"/> General partner or LLC member manager      <input type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • S Corporation</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>GA</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,661</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

A completed Alabama Schedule K-1 for each member in the Subchapter K entity/S corporation must be attached to Form 65/Form 20S.



Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

Tax year beginning 01/01, 2010 and ending 12/31, 2010

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111132</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • William Howard Taft Corp</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • PO Box 6507</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Howards End, NM</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> • <input type="checkbox"/> General partner or LLC member manager      • <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • C Corporation</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident • <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: OR If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p> <p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input checked="" type="checkbox"/> Other 256,661</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p> <p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111131</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Theodore Roosevelt</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • PO Box 2506</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Rose, VT</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>UT</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,662</u></p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels , LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111117</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • James K. Polk Charity Org</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 10 Polk Court</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • New York, NY 11147</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Exempt Org</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>NY</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,661</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111120</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Franklin Pierce Corp</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 87774 Pierce Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Franklin, KY 11552</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • S Corporation</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>KY</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input checked="" type="checkbox"/> Other 256,662</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111130</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • William McKinley</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • PO Box 2503</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Madison, SD 11552</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>WY</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input checked="" type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,661</u></p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

Tax year beginning 01/01, 2010 and ending 12/31, 2010

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<b>PART II Information About the Owner/Shareholder</b>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111122</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Abraham Lincoln Trust</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 13447 Lincoln Station</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Presidentville, FL 55222</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Trust</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>FL</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,662</u></p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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## Owner's/Shareholder's Share of Income, Deductions, Credits, etc.

# 2010

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

Tax year beginning 01/01, 2010 and ending 12/31, 2010

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PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111123</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Andrew Johnson Trust</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • PO Box 647</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Johnsonstown, MN 14741</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Trust</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>MN</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input checked="" type="checkbox"/> Other 256,661</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
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PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels , LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111113</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Andrew Jackson Corp</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 54 Jackson Avenue</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • New York, NY 74187</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • C Corporation</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>NY</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,661</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

A completed Alabama Schedule K-1 for each member in the Subchapter K entity/S corporation must be attached to Form 65/Form 20S.



Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

Tax year beginning 01/01, 2010 and ending 12/31, 2010

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111125</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Rutherford B Hayes</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • PO Box 0020</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Reno, NV</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Disregarded Entity</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>NV</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input checked="" type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,660</u></p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<b>PART II Information About the Owner/Shareholder</b>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111115</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • William Henry Harrison</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 1732 Harrison Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Williamsburg, VA 71841</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>VA</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,660</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels , LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111134</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Warren G. Harding</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 7 Harding Lane</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Warrentonville, AK 87415</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 15.63%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>AR</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 5,132,403</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 7,514,031</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

Tax year beginning 01/01, 2010 and ending 12/31, 2010

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (see instructions) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111124</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Ulysses S. Grant</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • PO Box 0019</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Grantville, HI 10047</p>	<p><b>R</b> Other expenses related to portfolio income – do not include interest expense •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Trust</p>	<p><b>T</b> Other separately stated business items (attach schedule) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (see instructions) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>HI</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (see instructions) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input checked="" type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,661</p>	<p><b>W</b> Casualty losses (see instructions) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (attach schedule) •</p>
	<p><b>AB</b> Alabama exempt income (attach explanation) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

Tax year beginning 01/01, 2010 and ending 12/31, 2010

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (see instructions) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111126</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • James A Garfield</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 41 Garfield Rd</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Jamestown, CO</p>	<p><b>R</b> Other expenses related to portfolio income – do not include interest expense •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Disregarded Entity</p>	<p><b>T</b> Other separately stated business items (attach schedule) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (see instructions) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>DE</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (see instructions) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,661</p>	<p><b>W</b> Casualty losses (see instructions) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (attach schedule) •</p>
	<p><b>AB</b> Alabama exempt income (attach explanation) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels , LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111119</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Millard Filmore Corp</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 203 Fimore Lane</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Millard, TN 74814</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input checked="" type="checkbox"/> General partner or LLC member manager      <input type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • S Corporation</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>TN</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,660</u></p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

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- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111135</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Calvin and Coolidge</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 189 Park Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Wellington 6005 New Zealand</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Partnership</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 62.50%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>New Zealand</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input checked="" type="checkbox"/> Other 20,529,612</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes: Foreign Address Test</p>	<p><b>X</b> Withdrawals and distributions • 30,056,124</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

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PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (see instructions) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111128</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Grover Cleveland</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • PO Box 7481</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Cleveland, OH 78418</p>	<p><b>R</b> Other expenses related to portfolio income – do not include interest expense •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Disregarded Entity</p>	<p><b>T</b> Other separately stated business items (attach schedule) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (see instructions) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>MT</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (see instructions) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,660</p>	<p><b>W</b> Casualty losses (see instructions) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (attach schedule) •</p>
	<p><b>AB</b> Alabama exempt income (attach explanation) •</p>

A completed Alabama Schedule K-1 for each member in the Subchapter K entity/S corporation must be attached to Form 65/Form 20S.



Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane Westville, TX 75788</p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<b>PART II Information About the Owner/Shareholder</b>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111139</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • George W. Bush</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • West George Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Westville, TX 55748</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>TX</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 27,426,209</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<b>PART II Information About the Owner/Shareholder</b>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111121</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • James Buchanan Corp</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 4714 Buchanan Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Jamestown, MD</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • S Corporation</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>MD</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p> <p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,660</u></p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p> <p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

Tax year beginning 01/01, 2010 and ending 12/31, 2010

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (see instructions) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111129</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Benjamin Harrison</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 15 Harrison Road</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Somewhere, NH 91204</p>	<p><b>R</b> Other expenses related to portfolio income – do not include interest expense •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Disregarded Entity</p>	<p><b>T</b> Other separately stated business items (attach schedule) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (see instructions) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>ND</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (see instructions) •</p> <p><b>W</b> Casualty losses (see instructions) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input checked="" type="checkbox"/> Other 256,661</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (attach schedule) •</p> <p><b>AB</b> Alabama exempt income (attach explanation) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

Tax year beginning 01/01, 2010 and ending 12/31, 2010

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111127</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Chester Arthur</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 4132 Arthur Lane</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Chesterfield, LA</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Disregarded Entity</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>ME</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input checked="" type="checkbox"/> Other 256,661</p>	<p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,701</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p>
	<p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 1/1, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (see instructions) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 5566666666</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • James Monroe</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 5 Monroe Avenue</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Richmond VA 22482</p>	<p><b>R</b> Other expenses related to portfolio income – do not include interest expense •</p>
<p><b>G</b> <input checked="" type="checkbox"/> General partner or LLC member manager    <input type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Exempt Org</p>	<p><b>T</b> Other separately stated business items (attach schedule) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (see instructions) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>VA</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (see instructions) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,660</p>	<p><b>W</b> Casualty losses (see instructions) •</p> <p><b>X</b> Withdrawals and distributions • 375,702</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (attach schedule) •</p> <p><b>AB</b> Alabama exempt income (attach explanation) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

Tax year beginning 1/1, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

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- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (see instructions) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 5544444444</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • James Madison</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 4 Madison Avenue</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Richmond VA 22482</p>	<p><b>R</b> Other expenses related to portfolio income – do not include interest expense •</p>
<p><b>G</b> <input checked="" type="checkbox"/> General partner or LLC member manager    <input type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Partnership</p>	<p><b>T</b> Other separately stated business items (attach schedule) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (see instructions) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>VA</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (see instructions) •</p> <p><b>W</b> Casualty losses (see instructions) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input checked="" type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,660</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (attach schedule) •</p> <p><b>AB</b> Alabama exempt income (attach explanation) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
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Tax year beginning 1/1, 2010 and ending 12/31, 2010

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PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (see instructions) •</p>
<p><b>PART II</b> Information About the Owner/Shareholder</p>	
<p><b>C</b> Owner's/Shareholder's identifying number • 553333333</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • Thomas Jefferson</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 3 Jefferson Avenue</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Washington DC 20003</p>	<p><b>R</b> Other expenses related to portfolio income – do not include interest expense •</p>
<p><b>G</b> <input checked="" type="checkbox"/> General partner or LLC member manager      <input type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (attach schedule) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (see instructions) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence:  If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (see instructions) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,660</p>	<p><b>W</b> Casualty losses (see instructions) •</p>
<p><b>L</b> Notes:</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
	<p><b>Y</b> Small business health insurance premiums •</p>
	<p><b>Z</b> Oil and gas depletion •</p>
	<p><b>AA</b> Separately stated nonbusiness items (attach schedule) •</p>
	<p><b>AB</b> Alabama exempt income (attach explanation) •</p>

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Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
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Tax year beginning 01/01, 2010 and ending 12/31, 2010

SEE INSTRUCTIONS

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- Amended K-1

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>) •</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 552222222</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • John Adams</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 2 Adams Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Washington DC 20001</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input checked="" type="checkbox"/> General partner or LLC member manager      <input type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Individual</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input checked="" type="checkbox"/> Nonresident If a nonresident, provide state of legal residence: <u>Washington DC</u> If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p> <p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other <u>256,660</u></p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p> <p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

A completed Alabama Schedule K-1 for each member in the Subchapter K entity/S corporation must be attached to Form 65/Form 20S.



Owner's/Shareholder's Share of  
Income, Deductions, Credits, etc.

**2010**

- Subchapter K entity
- S corporation
- QIP Indicator

SEE INSTRUCTIONS

- Final K-1
- Amended K-1

Tax year beginning 1/1, 2010 and ending 12/31, 2010

PART I Information About the Pass Through Entity	PART III Owner's/Shareholder's Share of Current Year Alabama Income, Deductions, Credit, and Other Items
<p><b>A</b> Entity's Federal Employer Identification Number 63-0000012</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama •</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code Presidential Stay Hotels, LLP 997 Hotel Lane + </p>	<p><b>N</b> Amount of guaranteed payments to partner to be reported by the partner as Alabama source income (<i>see instructions</i>)  • 177,160</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 561111112</p>	<p><b>O</b> Section 179 expense •</p>
<p><b>D</b> Owner's/Shareholder's name • John Quincy Adams Charity Org</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 19 Adams Street</p>	<p><b>Q</b> Portfolio income •</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Washington DC 20001</p>	<p><b>R</b> Other expenses related to portfolio income – <i>do not include interest expense</i> •</p>
<p><b>G</b> <input type="checkbox"/> General partner or LLC member manager      <input checked="" type="checkbox"/> Limited partner or other LLC member</p>	<p><b>S</b> Charitable contributions •</p>
<p><b>H</b> What type of entity is this owner/shareholder? • Exempt Organization</p>	<p><b>T</b> Other separately stated business items (<i>attach schedule</i>) •</p>
<p><b>I</b> Owner's/Shareholder's percentage of profit and (loss) sharing • 0.78%</p>	<p><b>U</b> Composite payment made on behalf of owner/shareholder (<i>see instructions</i>) •</p>
<p><b>J</b> Check if owner/shareholder is a nonresident <input type="checkbox"/> Nonresident If a nonresident, provide state of legal residence:  If a nonresident, check if an Alabama Schedule NRA, nonresident agreement, has been filed for the shareholder. • <input type="checkbox"/> Schedule NRA filed</p>	<p><b>V</b> U.S. income taxes paid (<i>see instructions</i>) •</p> <p><b>W</b> Casualty losses (<i>see instructions</i>) •</p>
<p><b>K</b> Owner's capital at end of tax year • <input checked="" type="checkbox"/> Tax Basis    <input type="checkbox"/> GAAP    <input type="checkbox"/> Other 256,660</p>	<p><b>X</b> Withdrawals and distributions • 375,702</p>
<p><b>L</b> Notes:</p>	<p><b>Y</b> Small business health insurance premiums •</p> <p><b>Z</b> Oil and gas depletion •</p> <p><b>AA</b> Separately stated nonbusiness items (<i>attach schedule</i>) •</p> <p><b>AB</b> Alabama exempt income (<i>attach explanation</i>) •</p>

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