



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 ● \_\_\_\_\_, 2010, and ending ● \_\_\_\_\_, \_\_\_\_\_

FEDERAL BUSINESS CODE NUMBER ● 713200		FEDERAL EMPLOYER IDENTIFICATION NUMBER ● 63-0000011	
Name of Company ● You Win Casino LP			
Number and Street 100 Bet Your Dollar Street			
City or Town Looserville		State AZ	9 Digit ZIP Code 21478-1111
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 checked="" 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 ..... ●	3
State in Which Company Was Formed ● NV	Nature of Business ● Casino	Date Qualified in Alabama ● 05/01/1980	Number of Nonresident Members Included in Composite Filing ... <input type="checkbox"/>

DEPARTMENT USE ONLY

FN

Total Federal income as shown on Form 1065, line 8.  
● 410,649,777.00

Total Federal deductions as shown on Form 1065, line 21.  
● 4,158,889.00

Total assets as shown on Form 1065.  
● 6,275,256.00

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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	●	406,490,888
Reconciliation to Alabama Basis (see instructions)	2 Net short-term and long-term capital gains – income or (loss) .....	2	●	
	3 Salaries and wages reduced for federal employment credits .....	3	●	( )
	4 Net income or (loss) from rental real estate activities .....	4	●	
	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	●	
10 Net Alabama nonseparately stated income or (loss) (add line 1 and line 9) .....	10	●	406,490,888	
Separately Stated Items (Related to Business Income)	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	●	36,525
	16 Other separately stated items (attach schedule) .....	16	●	
	17 Net separately stated items (add line 11 through 16) .....	17	●	36,525
18 Total separately stated and nonseparately stated items (add line 10 and line 17) .....	18	●	406,527,413	
19 Alabama apportionment factor from Schedule D, line 4 .....	19	●	19.9650 %	
20 Nonseparately Stated Income Allocated and Apportioned to Alabama from Schedule D, line 7 .....	20	●	81,155,906	

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 (334) 111-2222 Daytime Telephone No. 123 Social Security No. 12 123

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 21 321
Firm's name (or yours, if self-employed) and address ● Italian Tax Service ● Via Appia Nuova 00185 Roma RM Italy	Telephone No. (334) 222-3333	E.I. No. 63-1111111	ZIP Code
Email Address suzyq@italiantaxservice.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	●	18,000,000	47,150,000	47,250,000
3 Furniture and fixtures	●			
4 Machinery and equipment	●			
5 Buildings and leasehold improvements	●		52,500,000	52,500,000
6 IDB/IRB property (at cost)	●			
7 Government property (at FMV)	●			
8 ●				
9 Less Construction in progress (if included)	●			
10 Totals	●	18,000,000	99,650,000	99,750,000
11 Average owned property (BOY + EOY ÷ 2)		●	●	99,700,000
12 Annual rental expense	●	x8 =	x8 =	
13 Total average property (add line 11 and line 12)		13a ● 18,000,000		13b ● 99,700,000
14 Alabama property factor — 13a ÷ 13b = line 14				14 ● 18.0541 %
<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	●	3,000,000	71,170,000	4.2152 %
<b>SALES</b>		ALABAMA	EVERYWHERE	
16 Destination sales	●			
17 Origin sales	●			
18 Total gross receipts from sales	●		15,652,000	
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 15,652,000	25c 0.0000 %
26 Sum of lines 14, 15c, and 25c ÷ 3 = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 4, Schedule D, page 3)				26 ● 19.9650 %



**SCHEDULE D**

**APPORTIONMENT AND ALLOCATION OF INCOME TO ALABAMA**

1	Net Alabama nonseparately stated income or (loss) from line 10, Schedule A	1	● 406,490,888
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	● 406,490,888
4	Apportionment factor from line 26, Schedule C	4	● 19.9650 %
5	Income or (loss) apportioned to Alabama (multiply amount on line 3 by the percentage on line 4)	5	● 81,155,906
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	● 81,155,906

**SCHEDULE E**

**OTHER INFORMATION**

- Indicate method of accounting (a)  cash (b)  accrual (c)  other
- Check if the company is currently being audited by the IRS  What years are involved? \_\_\_\_\_
- Check if the IRS has completed any audits
- Enter this company's Alabama Withholding Tax Account Number ● \_\_\_\_\_
- Briefly describe your operations ● Casino
- Indicate if company has been (a)  dissolved (b)  sold (c)  incorporated  
If company has been dissolved, sold, or incorporated, complete the following:  
Nature of change ● Incorporated  
Name and address of new company, corporation, or owner(s) ● \_\_\_\_\_
- Location of the partnership records ● Via Appia Nuova 00185 Roma RM Italy
- Check if an Alabama business privilege tax return was filed for this entity   
If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return.  
FEIN: ● \_\_\_\_\_ NAME: ● \_\_\_\_\_
- Taxpayer's email address: \_\_\_\_\_

**SCHEDULE K**

**DISTRIBUTIVE SHARE ITEMS**

	Federal Amount	Apportionment Factor	Alabama Amount	Enter on Alabama Schedule K-1
1 Alabama Nonseparately Stated Income (Schedule D, line 7)			● 81,155,906	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 I.R.C. §179 expense deduction				
a. Amount allowed on 1065	● 19,876			
b. Adjustments required (see instructions)	● 19,876			
c. Amount to be apportioned	●			Part III, Line O
5 Casualty losses	●			Part III, Line W
6 Portfolio income	● 36,525	19.9650	7,292	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	●		458,202,737	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	● 408,202,737	100%	● 408,202,737	Part III, Line X
16 Guaranteed payments to partners	● 561,900		● 112,183	Part III, Line N

**CHECK LIST**

HAVE THE FOLLOWING FORMS BEEN ATTACHED TO THE FORM 65?

- ALABAMA SCHEDULE K-1 (one for each owner)
- ALABAMA SCHEDULE NRA (if applicable)
- FEDERAL FORM 1065 (entire form as filed with the IRS)



# Required Entity Information For Partnerships and LLCs

1. List general partners.

NAME OF GENERAL PARTNER	SSN / FEIN	ADDRESS	PERCENT OF OWNERSHIP
a. ● Harry S. Truman	360000001	64154 Truman Street Winnerville, AZ 99854	10.00
b. ●			
c. ●			
d. ●			
e. ●			

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

Nevada

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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@italiantaxservice.com



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 63-0000011</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama • 8,115,591</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code You Win Casino LP 100 Bet Your Dollar Street + </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>)  • 112,183</p>
PART II Information About the Owner/Shareholder	
<p><b>C</b> Owner's/Shareholder's identifying number • 36-000001</p>	<p><b>O</b> Section 179 expense • 396</p>
<p><b>D</b> Owner's/Shareholder's name • Harry S. Truman</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 64154 Truman Street</p>	<p><b>Q</b> Portfolio income • 729</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Winnerville, AZ 99854</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? • 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 • 10.00%</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>AZ</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 • 40,820,274</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

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 63-0000011</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama • 811,559</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code You Win Casino LP 100 Bet Your Dollar Street + </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 • 360000003</p>	<p><b>O</b> Section 179 expense • 40</p>
<p><b>D</b> Owner's/Shareholder's name • John F. Kennedy</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 79 Marilyn Lane</p>	<p><b>Q</b> Portfolio income • 73</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Hollywood, CA 11474</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 • 1.00%</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>CA</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</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 • 4,082,027</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 63-0000011</p>	<p><b>M</b> Nonseparately stated income allocated and apportioned to Alabama • 72,228,756</p>
<p><b>B</b> Entity's name, address, city, state, and ZIP code You Win Casino LP Bet Your Dollar Street + </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 • 360000002</p>	<p><b>O</b> Section 179 expense • 3,532</p>
<p><b>D</b> Owner's/Shareholder's name • Dwight D. Eisenhower</p>	<p><b>P</b> Investment interest expense related to portfolio income •</p>
<p><b>E</b> Owner's/Shareholder's street address • 4 Eisenhower Street</p>	<p><b>Q</b> Portfolio income • 6,490</p>
<p><b>F</b> Owner's/Shareholder's city, state, ZIP code • Presidentville, VA 66641</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 • 89.00%</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>K</b> Owner's capital at end of tax year • <input type="checkbox"/> Tax Basis    <input checked="" 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 • 363,300,436</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.