MAURINE HAMILTON

Davila Buschhorn

& Associates, P. C.

Your Future, Our Business



7207 McNeil Dr. Austin, TX 78729 • 7610 (512) 258-6637 Fax 258-7699

October 21, 2008

Maurine Hamilton 9008 East Dr. Austin, TX 78753-5112 #3556

For Professional Services:

Prior Balance
Prepare 2006 1040

and sundry discussions with client and attorney.

\$1010.00

The embergled money is hidd

The oregoing to need a

Deval Shis money .

A carrying charge of 11/2 % per month shall be made after 30 days.

Davila, Buschhorn & Associates, P.C. 7207 McNeil Dr. Austin, Texas 78729-7610 512-258-6637 / 512-258-7699 Fax

October 20, 2008

Maurine P. Hamilton Estate 9008 East Dr. Austin, TX 78753-5112

Enclosed is the decedent's 2006 income tax return. The return should be signed and dated by the executor of the estate.

Specific filing instructions are as follows.

FEDERAL INCOME TAX RETURN:

Mail your return on or before October 31, 2008.

Mail to - Internal Revenue Service Center Austin, TX 73301-0002

No payment is required as you are due a refund in the amount of \$30.

Your copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Very truly yours,

Daniel/Davila I/I, MPA, CPA, PFS, CRC

Name(s) as shown on return

Social security number

MAURINE P. HAMILTON

459-20-2593

2005 Filing Status SINGLE	2006 Filing Status SINC	GLE	4
2005 Tax Bracket 0.0%	2006 Tax Bracket 0 . 0 9	b	· C _A
Description	Tax Year 2005	Tax Year 2006	Increase (Decrease)
SCHEDULE B - TAXABLE INTEREST SCHEDULE E (RENTAL AND PASSTHROUGH) OTHER INCOME TOTAL INCOME	7910. -2480. 0. 5430.	6219. -801. -820. 4598.	-1691. 1679. -820. -832.
ADJUSTED GROSS INCOME	5430.	4598.	-832.
MEDICAL AND DENTAL EXPENSES TAXES TOTAL ITEMIZED DEDUCTIONS	0. 0. 0.	4022. 5977. 9999.	4022. 5977. 9999.
STANDARD DEDUCTION INCOME BEFORE EXEMPTIONS PERSONAL EXEMPTIONS TAXABLE INCOME	6250. -820. 3200. -4020	0. -5401. 3300. -8701.	-6250. -4581. 100. -4681.
FEDERAL TELEPHONE EXCISE TAX PAID TOTAL PAYMENTS	0.	30. 30.	30. 30.
TAX OVERPAID AMOUNT REFUNDED		30.	30. 30.
THE TOTAL PROPERTY OF THE PARTY			

DECEASED

1040	ι (J.S. Individual Income Tax Retur	2006	(99) IRS Use Only	- Do not wr	ite or sta	aple in this space.	
		year Jan. 1-Dec. 31, 2006, or other tax year beginning	, 2006, €	ending .20			OMB No. 1545-00)74
Label		ir first name and initial		DEC. 10/06/0	(6)	You	r social security nun	nber
(See instructions	MZ	AURINE P.	HAMILTON			4	59 20 2	5.9.3
on page 16.) B		joint return, spouse's first name and initial	Last name			Spo	ouse's social securit	y number
and the same of th		,						7
label	Hoi	me address (number and street). If you have a P.	.O. box, see page 16.		Apt. no.		You must ent	ter
Otherwise, E		008 EAST DR.					your SSN(s) ab	
please print R		, town or post office, state, and ZIP code. If you have a fo	oreign address, see page 16.			Che	ecking appx below v	will not
or type. E		JSTIN, TX 78753-5112					nge your tax or refu	
Election Campa			ling jointly, want \$3 to go	to this fund (see page	16)		You 🔲	Spouse
	1	X Single	4	Head of household		ifyiror	erson). If the qu	alifying
Filing Status	2	Married filing jointly (even if only one had	income)	person is a child bu	t not your	de pen	dent, enter this c	:hild's
01 1 2 1	3	Married filing separately. Enter spouse's S		name here.) '		
Check only one box.		and full name here.	5	Qualifying widow(er) with dep	enden	t child (see page	17)
	6a	X Yourself. If someone can claim you as a d	ependent, do not check box	6a	1		Boxes checked on 6a and 6b	_1
Exemptions	b	Spouse		. ¢	?		No. of children	
	c	Dependents:	(2) Dependent's social	(3) Dependent so	ing	if qualify- child for	on 6c who: lived with you	
		(1) First name Last name	security number	you	(see	tax credit page 19)		ith
	_			4			or separation (see page 20)	
	_		: :				_	
If more than four	_						Dependents on on the not entered above	
dependents, see page 19.	_						_ Add numbers	
oos page ves	ď	Total number of exemptions claimed					on lines above	1
Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2				7		
	8a	Taxable interest. Attach Schedule B if required		>		8a	6	219.
Attach Form(s) W-2 here. Also	b	Tax-exempt interest. Do not include on line 8a	: 2	8b	J.			
attach Forms	9a	Ordinary dividends. Attach Schedule B if requir	ed			9a		
W-2G and	b	Qualified dividends (see page 23)		9b		Jan.		
1099-R if tax was withheld.	10	Taxable refunds, credits, or offsets of state and	l local income taxes			10		
was miniota.	11	Alimony received				11		
If you did not	12	Alimony received Business income or (loss). Attach Schedule C	or C-EZ		<u></u> L	12		
If you did not get a W-2,	13	Capital gain or (loss). Attach Schedule D if requ	uired arnot required, check h	nere		13		
see page 23.	14	Other gains or (losses). Attach Form 4797	√.05 ,02.			14		
	15a	IRA distributions 15a	t t	Taxable amount		15b		
Enclose, but do not attach, any	16a	Pensions and annuities16a		Taxable amount		16b		
payment. Also,	17	Rental real estate, royalties, partnerships S co				17		801.
please use	18	Farm income or (loss). Attach Schedule F				18		
Form 1040-V.	19	Unemployment compensation				19		
	20a	Social security benefits 20a		Taxable amount (see pag	e 27)	20b		0.
	21	Other income. List type and amount (see page			200	Anni.		000
		NOL CARRYOVER TO 2000			320.	21		820.
	22	Add the amounts in the far right column for lin				22	4	598.
A alianete el	23	Archer MSA deduction. Attach Form 8853 Certain business expenses of reservists, performing ar officials. Attach Form 2106 or 2106-EZ	tists, and fee-basis government	23				
Adjusted	24			24	-	1 1		
Gross	25	Health savings account deduction. Attach Forn		25				
Income	26	Moving experises. Attach Form 3903		26				
	27	One-half of self-employment tax. Attach Sched		28				
	28	Self-employed SEP, SIMPLE, and qualified pla		29	1	10		
	29	Self-employed health insurance deduction (see		30				
	*			31a				
	318 32	Y Alimony paid b Recipient's SSN ► IRA deduction (see page 31)		32		A A		
	33	Student loan interest deduction (see page 33)		33		- 30 IR		
	,∞ 33 34	Jury duty pay you gave to your employer		34				
	35	Domestic production activities deduction. Attac						
*	36	Add lines 23 through 31a and 32 through 35				36		
610001 03-19-07	37	Subtract line 36 from line 22. This is your adju				37	4	598.
								_

Tax and		AURINE P. HAMILTON	459-20-2593		
	38	Amount from line 37 (adjusted gross income)		38	4598.
Credits			Total boxes		
Standard	000		checked ► 39a 1		
Deduction for -	h	If your spouse itemizes on a separate return or you were a dual-status alien, see page 34 and cl			
 People who L checked any 	40	Itemized deductions (from Schedule A) or your standard deduction (see left ma		40	(909)
box on line 39a or 39b 01 who	7			41	-5401.
can be claimed	41	Subtract line 40 from line 38 If line 38 is over \$112,875, or you provided housing to a person displaced by Hu		41	<u> </u>
as a dependent.	42			40	§ 3300. ³ /
		see page 36. Otherwise, multiply \$3,300 by the total number of exemptions claim		42	
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, en		43	0.
All others: Single or	44	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972		44	0.
Married filing	45	Alternative minimum tax. Attach Form 6251		45	
separately, \$5,150	46	Add lines 44 and 45		46	0.
Married filing	47	Foreign tax credit. Attach Form 1116 if required	47		7
jointly or	48	Credit for child and dependent care expenses. Attach Form 2441	48	Y	9-
Qualifying widow(er),	49	Credit for the elderly or the disabled. Attach Schedule R	49		30
\$10,300	50	Education credits. Attach Form 8863	50		The
Head of	51	Retirement savings contributions credit. Attach Form 8880	51		ove.
household, \$7,550	52	Residential energy credits. Attach Form 5695	52		950 Tu ove, 65
	53	Child tax credit (see page 42). Attach Form 8901 if required	53		25
	54	Credits from: a Form 8396 b Form 8839 c Form 8859	54		
	55	Other credits: a Form 3800 b Form 8801 c Form	55		
	56	Add lines 47 through 55. These are your total credits		56	
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-		57	0.
	58	Self-employment tax. Attach Schedule SE		58	
Other	59	Social security and Medicare tax on tip income not reported to employer. Attach		59	
Taxes	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5323		60	
	61	Advance earned income credit payments from Form(s) W-2, box 9		61	
	62	Household employment taxes. Attach Schedule H		62	
	63		>	63	0.
Payments		Faderal income toy withhold from Forms W. 2 and 1000	64	00	
ayinents		Federal income tax withheld from Forms W-2 and 1099 2006 estimated tax payments and amount applied from 2005 referred	65	619	
If you have	65 - 66 o	Earned income credit (EIC)	66a		
a qualifying	_ 00 a	Nontaxable combat pay election 66b 6	000		
child, attach Schedule EIC.	67	6/8	67	P 1 200	
	07				
	60	Excess social security and tier 1 RRTA tax withheld (see page 60)	68		
	68	Additional child tax credit. Attach Form 8812	68		
	69	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file page 60)	69		
	69 70	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file (see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885	69 70		
	69 70 71	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required	69 70 71 30.	70	3.0
2ofund	69 70 71 72	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments	69 70 71 30.	72	30.
Refund	69 70 71 72 73	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you	69 70 71 30.	73	30.
Direct deposit? See page 61	69 70 71 72 73 74 a	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you for the form 8888 is attached, check he	69 70 71 30.		
Direct deposit? See page 61 and fill in 74b, 74c, and 74d,	69 70 71 72 73 74 a	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you. Amount of line 73 you want refuncted to you. If Form 8888 is attached, check he Routing Number Savings Account Inchesting Savings do number	69 70 71 30. Ou overpaid	73	30.
Direct deposit? See page 61 and fill in 74b, 74c, and 74d, or Form 8888.	69 70 71 72 73 74 a	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you Amount of line 73 you want refuncted to you. If Form 8888 is attached, check he Routing Savings of Account Checking Savings of Account Mount of line 73 you want reflected to your 2007 estimated tax	69 70 71 30. Ou overpaid ore	73 74a	30.
Direct deposit? See page 61 and fill in 74b, 74c, and 74d, or Form 8888.	69 70 71 72 73 74 a b 75 76	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file (see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you Amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of d number Amount of line 73 you want reflected to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60)	69 70 71 30 00 overpaid are 75 age 62	73	30.
Direct deposit? See page 61 and fill in 74b, 74c, and 74d, or Form 8888. Amount You Owe	69 70 71 72 73 74 a 55 76 77	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you Amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of number Amount of line 73 you want refunded to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62)	69 70 71 30 00 overpaid are 75 age 62 77	73 74a 76	30.
Direct deposit? See page 81 and fill in 74b, 4'dc, and 74d, or Form 8888. Amount You Owe Third Part	69 70 71 72 73 74a 5 76 77	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you Amount of line 73 you want refuncted to you. If Form 8888 is attached, check he Routing Savings of number Amount of line 73 you want peplied to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow bother person to discuss this return with the IRS (see page 1910nee's Phone Phone	69 70 71 30 00 overpaid are 75 age 62 77	73 74a 76 ollowing. Personal identificat	30. 30.
Direct deposit? See page 81 und fill in 74b, ye Form 8888. Amount You Owe Third Part Designee	69 70 71 72 73 74a ► b 75 76 77	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file (see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you Amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of d number Amount of line 73 you want reflected to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow whether person to discuss this return with the IRS (see page 62) PRESIDENT ARER	69 70 71 30. Ou overpaid ore 75 age 62 77 63)? X Yes. Complete the formula of the best of my known of the statements, and to the best of my known of the statements, and to the best of my known of the statements.	73 74a 76 Ollowing. Personal identificat number (PIN)	30. 30.
Direct deposit? See page 61 And fill in 74b, 1/4c, and 74d, or Form 8888. Amount You Owe Third Part Designee Sign	69 70 71 72 73 74a	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you Amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of number Amount of line 73 you want refunded to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow whother person to discuss this return with the IRS (see page 1910 per alter of perion). I declare that I have examined this return and accompanying schedules an amount period of perion. I declare that I have examined this return and accompanying schedules an amount period of perion. I declare that I have examined this return and accompanying schedules an amount period of perion of per	ou overpaid ou overpaid ore 75 age 62 77 63)? X Yes. Complete the formula of the best of my known for has any knowledge.	73 74a 76 Ollowing. Personal identificat number (PIN) viedge and belief, the	30. 30.
Direct deposit? See page 61 and fill in 74b, 74c, and 74d, or Form 8888.	69 70 71 72 73 74a	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of account Amount of line 73 you want refunded to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow another person to discuss this return with the IRS (see page 62) O you want to allow another person to discuss this return with the IRS (see page 62) Part ARER Penalties of person I declare that I have examined this return and accompanying schedules anomalies. Declaration of preparer (other than taxpayer) is based on all information of which prepare your signature.	ou overpaid ou overpaid ore 75 age 62 77 63)? X Yes. Complete the formula of the best of my known or has any knowledge.	73 74a 76 Ollowing. Personal identificat number (PIN) viedge and belief, the	30. 30.
Direct deposit? See page 61 Amount You Owe Third Part Designee Sign Here Joint return? See page 17.	69 70 71 72 73 74a	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file (see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you Amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of d number Amount of line 73 you want applied to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) To you want to allow another person to discuss this return with the IRS (see page 62) To you want to allow another person to discuss this return and accompanying schedules anomplete. Decident of preparer (other than taxpayer) is based on all information of which prepare your signature. Page 10 July 1 declare that I have examined this return and accompanying schedules anomplete. Decident of preparer (other than taxpayer) is based on all information of which prepare your signature. Page 12 July 1 July	ou overpaid ore 75 age 62 77 63)? X Yes. Complete the form that any knowledge.	73 74a 76 Ollowing. Personal identificat number (PIN) viedge and belief, the	30. 30.
Direct deposit? See page 61 Ard fill in 74b, Ard., and 74d, or Form 8888. Amount You Owe Third Part Designee Sign Here Joint return? See page 17. Keep a copy or your	69 70 71 72 73 74a	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of account Amount of line 73 you want refunded to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow another person to discuss this return with the IRS (see page 62) O you want to allow another person to discuss this return with the IRS (see page 62) Part ARER Penalties of person I declare that I have examined this return and accompanying schedules anomalies. Declaration of preparer (other than taxpayer) is based on all information of which prepare your signature.	ou overpaid ore 75 age 62 77 63)? X Yes. Complete the form that any knowledge.	73 74a 76 Ollowing. Personal identificat number (PIN) viedge and belief, the	30. 30.
Direct deposit? See page 81 and fill in 74b, yar, 4c, and 74d, or Form 8888. Amount You Owe Third Part Designee Sign Here Joint return? See page 17. See page 17. See page 17. See page 17. See page opyor your ecords.	69 70 71 72 73 74a b 75 76 77 by Condition of the conditi	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you amount of line 73 you want refunced to you. If Form 8888 is attached, check he Routing Savings of number Amount of line 73 you want poplied to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow bother person to discuss this return with the IRS (see page 1910 person of person). I declare that I have examined this return and accompanying schedules amonplete. Declaration of preparer (other than taxpayer) is based on all information of which preparer your signature. If a joint return, both must sign. Date Spouse's occupation RETIRED Spouse's occupation	70 71 30 00 overpaid are 75 age 62 77 33 X Yes. Complete the form that any knowledge.	73 74a 76 Ollowing. Personal identificat number (PIN) wiedge and belief, the	No ion pay are true, correct, number
Direct deposit? See page 61 Ard fill in 74b, Ard., and 74d, or Form 8888. Amount You Owe Third Part Designee Sign Here Joint return? See page 17. Keep a copy or your ecords. Paid	69 70 71 72 73 74a b 75 76 77 ty Definition of the control of the	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of number Account Manumber Account Only yield to your 2007 estimated tax Amount of line 73 you want applied to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow another person to discuss this return with the IRS (see page 10) you want to allow another person to discuss this return and accompanying schedules anomplete. Declaration of preparer (other than taxpayer) is based on all information of which preparer your signature. If a joint return, both must sign. Date Spouse's occupation RETIRED Spouse's occupation	70 71 30 00 overpaid ore 75 age 62 77 63)? X Yes. Complete the formula of the best of my known for has any knowledge. Date Check if self-	73 74a 76 Ollowing. Personal identificat number (PIN) wledge and belief, the	No ion pey are true, correct, number
Direct deposit? See page 81 Ard fill in 74b, Ard, and 74d, or Form 8888. Amount You Owe Third Part Designee Sign Here Joint return? See page 17. Keep a copy or your ecords. Paid Preparer's	69 70 71 72 73 74a b 75 76 77 ty Definition of the control of the	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you amount of line 73 you want refuncted to you. If Form 8888 is attached, check he Routing Savings d number Amount of line 73 you want peplied to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow wrother person to discuss this return with the IRS (see page in penalties of period). I declare that I have examined this return and accompanying schedules an once penalties of period. I declare that I have examined this return and accompanying schedules and once penalties of period. I declare that I have examined this return and accompanying schedules and once penalties of period. I declare that I have examined this return and accompanying schedules and once penalties of period. I declare that I have examined this return and accompanying schedules and once penalties of period. I declare that I have examined this return and accompanying schedules and once penalties. PRETIRED Spouse is signature. If a joint return, both must sign. Date Spouse's occupation	70 71 30 71 30 Ou overpaid ere	73 74a 76 Ollowing. Personal identificat number (PIN) wledge and belief, the	No ion pey are true, correct, number
Direct deposit? See page 61 Add fill in 74b, Add, and 74d, or Form 8888. Amount You Owe Third Part Designee Sign Here Joint return? See page 17. Keep a copy or your ecords.	69 70 71 72 73 74a b 75 76 77 by Dengal and c	Additional child tax credit. Attach Form 8812 Amount paid with request for extension to file see page 60) Payments from: a Form 2439 b Form 4136 c Form 8885 Credit for federal telephone excise tax paid attach Form 8913 if required Add lines 64, 65, 66a, and 67 through These are your total payments If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you amount of line 73 you want refunded to you. If Form 8888 is attached, check he Routing Savings of number Account Manumber Account Only yield to your 2007 estimated tax Amount of line 73 you want applied to your 2007 estimated tax Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62) O you want to allow another person to discuss this return with the IRS (see page 10) you want to allow another person to discuss this return and accompanying schedules anomplete. Declaration of preparer (other than taxpayer) is based on all information of which preparer your signature. If a joint return, both must sign. Date Spouse's occupation RETIRED Spouse's occupation	70 71 30 71 30 00 overpaid are 75 age 62 77 63)? X Yes. Complete the formula of the best of my known are has any knowledge. Check if self-employed	73 74a 76 Ollowing. Personal identificat number (PIN) wledge and belief, the	No ion pey are true, correct, number

SCHEDULES A&B (Form 1040)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on Form 1040

Schedule A - Itemized Deductions

(Schedule B is on page 2)

➤ Attach to Form 1040.

➤ See Instructions for Schedules A&B (Form 1040).

OMB No. 1545-0074

2006
Attachment
Sequence No. 07

Your social security number

MAURINE	P.	HAMILTON		459	20 2593
Medical		Caution. Do not include expenses reimbursed or paid by others.			
and	1	Medical and dental expenses (see page A-1) SEE STATEMENT 2	1	4367.	
Dental	2	Enter amount from Form 1040, line 38			
Expenses	3		3	345.	, San Y
Lxpenses	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4	4022.
Taxes You	5	State and local income taxes SEE STATEMENT 3 ST	5	557	
Paid	6	Real estate taxes (see page A-3)	6	5420.	
(See	7	Personal property taxes	7		
page A-3.)	8	Other taxes. List type and amount			
		·	11 1		
			8	7	
	9	Add lines 5 through 8	n Pi	9	5977.
Interest	10	Home mortgage interest and points reported to you on Form 1098	10		
You Paid	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-3 and show that person's name,) ³²		
(See		identifying no., and address			
page A-3.)		·			
Note.			11		
Personal interest is	12	Points not reported to you on Form 1098.	12		
not	13	Investment interest. Attach Form 4952 if required. (See page A-4.)	13		
deductible.	14	Add lines 10 through 13		14	
Gifts to	15	Gifts by cash or check.	15		
Charity	16	Other than by cash or check. If any gift of \$250 or more, see page A-5.			
If you made a		You must attach Form 8283 if over \$500	16		
gift and got a benefit for it,	17	Carryover from prior year	17		
see page A-4.	18	Add lines 15 through 17		18	
Casualty and Theft Losses					
	19	Casualty or theft loss(es). Attach Form 4684. (See page A-6.)		19	
Job Expenses and Certain	20	Unreimbursed employee expenses - job travel, union dues, job education, etc.		9	
Miscellaneous		Attach Form 2106 or 2106-EZ if required. (See page A-6.)	15 g/1		
Deductions		~	00		
			20	36.	
		Tax preparation fees	21	50.	
(0	22				
(See page A-6.)					
page			22		
	22	Add lines 20 through 28	23	36.	
	23 24	Add lines 20 through 22. Enter amount from Form 1040, line 38	20	50.	
	25	Multiply line 24 by 2% (.02)	25	92.	
	26	Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-	25	26	0.
Other	27	Other - from list on page A-7. List type and amount		20	
Miscellaneous	2'	>			
Deductions					
				27	
Total	28	orm 1040, line 38, over \$150,500 (over \$75,250 if married filing separately)?			
Itemized	м	X No. Your deduction is not limited. Add the amounts in the far right column)		
Deductions		for lines 4 through 27. Also, enter this amount on Form 1040, line 40.		▶ 28	9999.
5		Yes. Your deduction may be limited. See page A-7 for the amount to enter.)		
	29	If you elect to itemize deductions even though they are less than your standard deduction, chec	k here		
CEMA	For	Paperwork Reduction Act Notice, see Form 1040 instructions.		Schedule A	(Form 1040) 2006

Page 2

Name(s) shown on Form 1040. Do not enter name and social security number if shown on page 1.

Your social security number

MAURINE P. HAMILTON

459 20 2593

Schedule B - Interest and Ordinary Dividends Part I 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the Amount Interest property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address GUARANTY BANK 37. RANDOLPH BROOKS FCU 3817. YOAKUM NATL BANK 18. Note. If you YOAKUM NATL BANK 13. received a Form CHASE 2334. 1099-INT. Form 1099-OID. or substitute statement from a brokerage firm, list the firm's name as the paver and enter the total interest shown on that form. Add the amounts on line 1 6219. 2 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 3 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a 6219 4 Note. If line 4 is over \$1,500, you must complete Part III. Amount Part II 5 List name of payer **Ordinary Dividends** Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's 5 name as the paver and enter the ordinary dividends shown on that form. App the amounts on line 5. Enter the total here and on Form 1040, line 9a Note: If line 6 is over \$1,500, you must complete Part III. Part III must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (b) had a foreign Yes No **Foreign** account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. 7a At any time during 2006, did you have an interest in or a signature or other authority over a financial **Accounts** account in a foreign country, such as a bank account, securities account, or other financial account? and X **Trusts** b If "Yes," enter the name of the foreign country ▶

If "Yes," you may have to file Form 3520. See page B-2

X

During 2006, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

MA.	TTR	TNE	P.	HA	MT	LTON

MAI	URINE P. HAMILTON						4	<u>59-20</u>	-2593
	on: The IRS compares amounts reported on yo								
Pa	rt II Income or Loss From Par		-	-			at-risi	cactivity fo	or which
	any amount is not at risk, you mu								
27	Are you reporting any loss not allowed in a pri								
	passive activity (if that loss was not reported of		irsed partnership exper	ises?				Yes	≫∟ No
	If you answered "Yes," see page E-6 before co	mpleting this section.		T					<u></u>
00		Mama		(b) Enter P	for (C) Check			loyer 💝	(e) Check if any amount is
28	(a) Name		for S corpora	if foreign tion partnership	identi	licatioi	n number	not at risk
Α								<u> </u>	
В								,	
С									
D							/		
	Passive Income and L	oss			npassive In	4	nd Los	SS	
	(f) Passive loss allowed	(g) Passive income	(h) Nonpassive lo					j) Nonpassiv	
	(attach Form 8582 if required)	from Schedule K-1	from Schedule K	-1 deal		#M 4562		from Sched	Jule K-1
Α									
В									
C					1				
D				A	13				
29a	Totals		A COLUMN TO SERVICE						
b	Totals						= 0m H	1.500 64	
30	Add columns (g) and (j) of line 29a			<u> </u>			30	3	
31	Add columns (f), (h), and (i) of line 29b			, y 			31	()
32	Total partnership and S corporation income	or (loss). Combine lines 30	and 31. Enter the						
	result here and include in the total on line 41 t						32		
Pa	rt III Income or Loss From Esta	ates and Trusts							
00		(a) Name							nployer
33		(a) Ivallie						identificati	on number
Α									
В		4	3,						
		ome and Loss	×					e and Loss	
	(c) Passive deduction or loss allowed	(b)	Passive income		Deduction or lo			(f) Other inc Schedul	
	(attach Form 8582 if required)	NI OII	n Schedule K-1	11 01	II Schedule K	-1		Scileuui	E K-1
Α									
В					No.				
34a	Totals			in the second		are the state of			
b	Totals		Constant State Real				STAR .	100000	the take games
35	Add columns (d) and (f) of line 34a	<u>.</u>					35		
36	Add columns (c) and (e) of line 34b	%	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				36	()
37	Total estate and trust income or (loss). Com						37	Haldan	
Pa	rt IV Income or Loss From Rea			1			auai		
38	(a) Name	(b) Employer	(c) Excess inclusion	1000	Taxable incor s) from Sche	dules Q,		(e) incom Schedules (
	(4) 1141110	identification number	Schedules Q, line	: 20	line 1b			ociieuuies (u, iiie ob
39	Combine columns (d) and (e) only. Enter the	result here and include in th	e total on line 41 below		<u></u>		39		
Pa	rt V Summary								0.01
40	Net farm rental income or (loss) from Form 4						40		-801.
41	Total income or (1008). Combine lines 26, 32, 37			or Form 10	40NR, line 18	▶	41		-801.
42	Reconciliation of farming and fishing incom								
	reported on form 4835, line 7; Schedule K-1			1 1					
	(Form 1729S), box 17, code T; and Schedule	K-1 (Form 1041), line 14, c	ode F (see page E-7)	42		570.			
43	Reconciliation for real estate professionals.	TO STATE ASSOCIATION AND ADDRESS OF THE PARTY OF THE PART							
	enter the net income or (loss) you reported anywhere of	on Form 1040 or Form 1040NR fr	om ali rental real estate	1					
	activities in which you materially participated under the	e passive activity loss rules		43					# E) 27 T

6251

Alternative Minimum Tax - Individuals

2006

Department of the Treasury Internal Revenue Service (99

► Attach to Form 1040 or Form 1040NR.

Attachment Sequence No. 32

Your social security number Name(s) shown on Form 1040 or Form 1040NR 459 20 2593 MAURINE P. HAMILTON **Alternative Minimum Taxable Income** Part I 1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 6), and go to line 2. Otherwise, enter -5401. the amount from Form 1040, line 38 (minus any amount on Form 8914, line 6), and go to line 7. (If less than zero, enter as a negative amount.) 115. 2 Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2 1/2% of Form 1040, line 38 5977. 3 Taxes from Schedule A (Form 1040), line 9 3 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions ... 4 5 Miscellaneous deductions from Schedule A (Form 1040), line 26 6 If Form 1040, line 38, is over \$150,500 (over \$75,250 if married filing separately), enter the amount from line 11 of the Itemized Deductions Worksheet on page A-7 of the instructions for Schedule A (Form 1040) 6 7 7 Tax refund from Form 1040, line 10 or line 21 Investment interest expense (difference between regular tax and AMT) 8 Depletion (difference between regular tax and AMT) 9 820. Net operating loss deduction from Form 1040, line 21. Enter as a positive amount 10 Interest from specified private activity bonds exempt from the regular tax 11 12 Qualified small business stock (7% of gain excluded under section 1202) Exercise of incentive stock options (excess of AMT income over regular tax income) 13 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 14 15 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) Disposition of property (difference between AMT and regular tax gain or loss) 16 17 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 801 18 Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 5 18 19 Loss limitations (difference between AMT and regular tax income or loss) 19 Circulation costs (difference between regular tax and AMT) 20 21 Long-term contracts (difference between AMT and regular tax income) 21 22 22 Mining costs (difference between regular tax and AMT) 23 Research and experimental costs (difference between regular tax and AMT) 24 24 Income from certain installment sales before January 1, 1987 25 25 Intangible drilling costs preference 26 26 Other adjustments, including income-based related adjustments 27 Alternative tax net operating loss deduction 27 Alternative minimum taxable income. Combine lines through 27. (If married filing separately and line 2312. 28 is more than \$200,100, see instructions) Part II Alternative Minimum Tax Exemption. (If this form is for a child under age 18, see instructions.) IF your filing status is ... AND line 28 is not over THEN enter on line 29 Single or head of household \$112,500 \$42,500 62,550 42500. 29 Married filing separately 75,000 If line 28 is over the amount shown above for your filing status, see instructions. 30 Subtract line 29 from line 28. If more than zero or you are filing Form 2555 or 2555-EZ, go to line 31. If zero or 0. less and you are not filing Form 2555 or 2555-EZ, enter -0- on lines 33 and 35 and skip the rest of Part II 30 31 • If you are filing Form 2555 62555-EZ, see page 8 of the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b, or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured 0. 31 for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here. • All others: If line 30 s \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result. 32 32 Alternative months tax foreign tax credit (see instructions) 0. 33 Tentative minimum tax. Subtract line 32 from line 31 33 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If your sed Sch J to figure your tax, the amount for line 44 of Form 1040 must be refigured without using Sch J 34 35 Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0. Enter here and on 35

Pa	art III Tax Computation Using Maximum Capital Gains Rates			
	Enter the amount from Form 6251, line 30		36	
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax	1 1		₹ ,.
	Worksheet in the instructions for Form 1040, line 44, or the amount from			
	line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for			& *
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if			
	necessary) (see the instructions)	37		
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the			30
	AMT, if necessary) (see instructions)	38		•
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the			
	AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter			
	the smaller of that result or the amount from line 10 of the Schedule D Tax			
	Worksheet (as refigured for the AMT, if necessary)	39	@ Y	
40	Enter the smaller of line 36 or line 39		40	
	Subtract line 40 from line 36		41	
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply li			
	Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married fili	ng separately) from		
	the result	^V	> 42	
43	Enter:			
	• \$61,300 if married filing jointly or qualifying widow(er),			
	• \$30,650 if single or married filing separately, or	43		
	• \$41,050 if head of household.			
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain			
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from			
	line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for			
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If			
	you did not complete either worksheet for the regular tax, enter -0-	44	4	
45	Subtract line 44 from line 43. If zero or less, enter -0-	45		
46	Enter the smaller of line 36 or line 37	46		
47	Enter the smaller of line 45 or line 46	47		
48	Multiply line 47 by 5% (.05)		▶ 48	
70	Watapiy iiilo 17 by 670 (100)		954	
40	Subtract line 47 from line 46	49		
49	Subtract line 47 from line 40	.,,		
E 0	Multiply line 49 by 15% (.15)		50	
50				
	If line 38 is zero or blank, skip lines 51 and 32 and go to line 53. Otherwise, go	o to line 51.		
E4	Subtract line 46 from line 40	51		
51	Subtract line 40 from line 40			
	Multiply line E1 by 25% (25)		52	
52	Multiply line 51 by 25% (.25)			
	Add Sec. 40, 40, 50, and 50.		53	
53	Add lines 42, 48, 50, and 52		33	
	If line 36 is \$175,000 or less if married filing separately), multiply	line 36 by 26% (26)		
54				
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married fil	ing separately) nom	54	
	the result			
	Follow the control of the FO and the FO have and an time Col		55	
55	Enter the smaller of line 53 or line 54 here and on line 31		55	

Form **6251** (2006)

		ALTERNA	TIVE MINIMUM TAX RE	CONCILIATION REPO	RT					
Name(s)		п п					Social Security Number			
MAURI	INE P. HAMILTON						459-20-2593			
Form			Adjustment							
Name	Description	Income	Form 6251, Line 16	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251 Other Adjustment			
4835	MAURINE P. HAMILTON (D EC. 10/06/06) * REGULAR INCOME FARM LOSS ADJ * AMT NET INCOME	-801. 801. 0.		attrillon - 40 104°	801. 801.					
	** TOTAL ADJ & PREF **			:11000 - 40 10A	801.					
			· 12 and 54 daia it	attu						
		Econo Danna								
	Arteceived March 137									

619911 05-01-06

Form **4835**

Farm Rental Income and Expenses

(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income not subject to self-employment tax)

Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2006

Attachment Sequence No. 37

Form **4835** (2006)

Department of the Treasury Internal Revenue Service

Name(s) shown on tax return

Your social security number

459-20-2593

MAURINE P. HAMILTON (DEC. 10/06/06)

									- CAO	
A D	d you actively participate in the operation of this f	arm du	ring 2006?						X Yes	No
Pa	rt I Gross Farm Rental Income	- Ba	sed on Production	n Ind	clude amounts conver	ted to	o cash or the equiv	alent) ^g	
								all'		
1	Income from production of livestock, produce, g						A	\$1		
2a	Cooperative distributions (Form(s) 1099-PATR)						Taxable amount			
3 a	Agricultural program payments		3a			3b	Taxable appount	3b		
4	Commodity Credit Corporation (CCC) loans:									
a	CCC loans reported under election							4a		
b	CCC loans forfeited					4c	Takable amount	4c		
5	Crop insurance proceeds and federal crop disas			1	1		y»			
a	Amount received in 2006		5a			ムレー	Taxable amount	5b		
C	If election to defer to 2007 is attached, check he				ount deferred from 20			5d		
6	Other income, including federal and state gasoli	ne or fi	uel tax credit or refund		SEE ST	ÅΤΙ	EMENT 6	6		570.
7	Gross farm rental income. Add amounts in the	right o	column for lines 1 through	6. Er	iter the total here					
	and on Schedule E (Form 1040), line 42				₹0			7		570.
Da	rt II Expenses - Farm Rental Pr		be Danatinaluda nama		lining and					
Tea	Expenses - Farm Rental Pr	oper	Ly. Do not include persor	nai or	living expenses.					
8	Car and truck expenses. Also attach			21,	Rension and profit-s	harir	ng plans	21		
	Form 4562	8		22	Rent or lease:					
9	Chemicals	9			a Vehicles, machinery	, and	equipment	22a		
			. 3	<u>a</u> '	Other (land, animals	, etc.	.)	22b		
10	Conservation expenses	10	[\$]	23	Repairs and mainter			23		
11	Custom hire (machine work)	11		24	Seeds and plants			24		
12	Depreciation and section 179 expense		. 0	25	Storage and wareho			25		
	deduction not claimed elsewhere	12		26	Supplies			26		
13	Employee benefit programs other than		€ The state of th	27	Taxes			27		596.
	on line 21 (see Schedule F instructions)	13		28	Utilities			28		286.
14	Feed	14		29	Veterinary, breeding			29		
15	Fertilizers and lime	15_	*	30	Other expenses (spe					
16	Freight and trucking	16	/					30a		
17	Gasoline, fuel, and oil	, O						30b		
18	Insurance (other than health)	18	489.					30c		
19	Interest:	9.1.9			d			30d		
a	Mortgage (paid to banks, etc.)	19a						30e		
b	Other	19b		1				30f		
20	Labor hired (less employment creats)	20						30g		
								-		
31	Total expenses. Add lines 8 through 30g (see i	nstruct	ions)				•	31	-	1371.
32	Net farm rental income wiloss). Subtract line							Ū.		20721
J.L	and on Schedule E, line 40. If the result is a loss							32	_	-801.
33	If line 32 is a loss, speck the box that describes						٦	33a		ent is at risk.
UU							>	33b		stment is not at
	You may have o complete Form 8582 to deterr		ur daductible loce regard					000	115K.	
	If you checked box 33b, you must complete For									
	loss here and on Schedule E, line 40	019	boloic going to rolling	JZ. 11	outer case, effect the	acu	PAL	33c		-801.
	iooo nagaana on contodulo E, iiilo to			100				1 000	_	O O T .

For Paperwork Reduction Act Notice, see separate instructions.

Form **8582**

Department of the Treasury
Internal Revenue Service (99)

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2006
Attachment

Identifying number Name(s) shown on return 459-20-MAURINE P. HAMILTON Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I. Part I 2006 Passive Activity Loss Rental Real Estate Activities With Active Participation (For the definition of active participation see Special Allowance for Rental Real Estate Activities on page 3 of the instructions.) 1a Activities with net income (enter the amount from Worksheet 1. 1a column (a)) b Activities with net loss (enter the amount from Worksheet 1, -801 1b column (b)) c Prior years unallowed losses (enter the amount from Worksheet 1, column (c)) 10 -801. d Combine lines 1a, 1b, and 1c..... Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) c Add lines 2a and 2b 20 **All Other Passive Activities** 3a Activities with net income (enter the amount from Worksheet 3, column (a)) **b** Activities with net loss (enter the amount from Worksheet 3. column (b)) c Prior years unallowed losses (enter the amount from Worksheet 3. column (c)) d Combine lines 3a, 3b, and 3c.... 3d Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 3582. Report the losses on the forms and -801. schedules normally used If line 4 is a loss and: • Line 1d is a loss, go to Part II. Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15. Caution: If your filing status is married filing separately and you with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15. Part II | Special Allowance for Rental Real state Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example. 801. Enter the smaller of the loss on line 1d or the loss on line 4 5 Enter \$150,000. If married filing separately, see the instructions 150000 5399. STATEMENT 11 Enter modified adjusted gross income, but not less than zero (see the instr.) ... 7 Note: If line 7 is greater than or equal to the 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8. 144601 Subtract line 7 from line 6 8 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see the instructions 25000. 801. Enter the smaller of line 5 of ine 5 If line 2c is a loss, go to Par III. Otherwise, go to line 15. Part III | Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions. Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions 11 Enter the loss from line 4 12 Reduce line to by the amount on line 10 13 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 Part IV Total Losses Allowed Add the income, if any, on lines 1a and 3a and enter the total 15 Total losses allowed from all passive activities for 2006. Add lines 10, 14, and 15. See the instructions

to find out how to report the losses on your tax return

801

SEE STATEMENT 10

Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c (See instructions.) Prior years Overall gain or loss Current year Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss loss (line 1c) (line 1a) (line 1b) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 1a, -8011b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year (c) Overall loss Name of activity deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a and 2b Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss loss (line 3c) (line 3a) (line 3b) Total. Enter on Form 8582, lines 3a, 3b, and 3c Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.) Form or schedule (d) Subtract and line number (c) Special column (c) Name of activity (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions) SEE ATTACHED STATEMENT FOR WORKSHEET 4 801 801. 1.0000000 Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions) **Total**

Name of activity	and line nu to be repor	Form or schedule and line number to be reported on (see instructions)		(a) Loss		nallowed loss	(c) Allowed loss	
	GET 3 MM		CM2 MT		OD E	ODVGIIDA		
	SEE ATTA	ACHED	STATE	SMENT F	OR W	ORKSHEET	*	
Total Worksheet 7 - Activities With Losses	D	>	4 F	801.		0.	801.	
Name of Activity:	(a)	WO OF IN	(b)	(c) Ra		(d) Unallowed	(e) Allowed loss	
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule								
b Net income from form or schedule					,,,,			
c Subtract line 1b from line 1a. If zero or less, e	enter -0-			40				
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule								
b Net income from form or schedule			%					
c Subtract line 1b from line 1a. If zero or less, e	enter -0							
Form or schedule and line number to be reported on (see instructions):		,						
1a Net loss plus prior year unallowed loss from form or schedule								
b Net income from form or schedule								
c Subtract line 1b from line 1a. If zero or less	hter -0							
Total	>			=				
619763 10-17-06							Form 8582 (2006)	

Name				Social Security Number
MAI	JRINE P. HAMILTON			459-20-2593
1	Enter the amount from your 2006 Form 1040, line 41, or Form 1040NR, line 38, m	ninus any amount		
	on Form 8914, line 6. Estates and trusts, enter taxable income increased by the t			
	deduction, income distribution deduction, and exemption amount		1	5401.
2	Nonbusiness capital losses before limitation. Enter as a positive number	2		
3	Nonbusiness capital gains (without regard to any section 1202 exclusion)	3		
4	If line 2 is more than line 3, enter the difference; otherwise, enter -0-	4 0		
5	If line 3 is more than line 2, enter the difference;			
5	otherwise, enter -0-			
_	Nonbusiness deductions (see instructions)	6 9999		
6	A CONTRACTOR OF THE CONTRACTOR	3333		Ä
7	Nonbusiness income other than capital gains (see instructions) 7 6219.			
	,	8 6219	>¥	
8	Add lines 5 and 7	A	•	3780.
9	If line 6 is more than line 8, enter the difference; otherwise, enter -0-		9	3700.
10	If line 8 is more than line 6, enter the difference;			
	otherwise, enter -0 But do not enter more			
	than line 5 10 0 •			
11	Business capital losses before limitation. Enter as a positive number	11	-	
12	Business capital gains (without regard to any		S S S S S S S S S S	
	section 1202 exclusion)12			
13	Add lines 10 and 12	13		
14	Subtract line 13 from line 11. If zero or less, enter -0-	14 0	•	
15	Add lines 4 and 14	15		
16	Enter the loss, if any, from line 16 of Schedule D (Form 1040). (Estates			
	and trusts, enter the loss, if any, from line 15, column (3), of Schedule D			
	(Form 1041).) Enter as a positive number. If you do not have a loss on			
	that line (and do not have a section 1202 exclusion), skip lines 16 through			
	21 and enter on line 22 the amount from line 15	16	7.8	
	₹3,			
17	Section 1202 exclusion. Enter as a positive number	,	17	
18	Subtract line 17 from line 16. If zero or less, enter -0-	18	199	
19	Enter the loss, if any, from line 21 of Schedule D (Form 1040). (Estates and			
	trusts, enter the loss, if any, from line 16 of Schedule Dofferm 1041).) Enter	A	Hy Pir	
	as a positive number	19	17.50	
20	If line 18 is more than line 19, enter the difference; enterwise, enter -0-			
21	If line 19 is more than line 18, enter the difference otherwise, enter -0-		21	
22	Subtract line 20 from line 15. If zero or less, enter -0-			
23	Domestic production activities deduction from 1040, line 35 (or included or			
24	NOL deduction for losses from other years. Enter as a positive number			820.
25	NOL. Combine lines 1, 9, 17, and 21 through 24. If the result is less than zero, the			
	current year NOL. If the result is zeroor more, you do not have an NOL		25	-801.

NOL				Detail I	NOL Carryover/Ca	arryback Worksh	eet				2006
Name(s)	INE P. HAMI	T.TON									Security Number
Year	Amount Available for Carryover/Carryback	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in	Amount Used in
2005	820.			no esta el como	SA Francisco Antonios					6	
2006	801.										
						Hamilton - F	1047 IKTE	Noo			
						a althilloid . A					
					a allid Sylvita						
				Capily Davi							
- 52è	J. 15 . 5		13 Jood Etou								
		ived March	3 *								
	1624				100 PM						

FORM	1040 SOCIAL	SECURITY BENEFITS WORKSHEET	STATEMENT 1
CHEC	K ONLY ONE BOX:		
X A.	SINGLE, HEAD OF HOUSEHOLD	D, OR QUALIFYING WIDOW(ER)	
в.	MARKIED FILING JOINTLY		
C.		Y AND LIVED WITH YOUR SPOUSE	
	AT ANY TIME DURING 2006		
D.	MARRIED FILING SEPARATELY FOR ALL OF 2006	Y AND LIVED APART FROM YOUR SPOUSE	
	1011 1111 01 1000		
1.	ENTER THE TOTAL AMOUNT FRO	OM BOX 5 OF ALL YOUR	
	FORMS SSA-1099 AND RRB-10	99. ALSO, ENTER THIS AMOUNT ON	
			19615.
2.	ENTER ONE HALF OF LINE 1		9808.
3.	ADD THE AMOUNTS ON FORM 1	040, LINE 7, 8B, 9A, 10 THRU 🦀,	
	15B 16B 17 THRII 19 21	AND SCHEDULE B. LINE 2. DO NOT	
	INCLUDE ANY AMOUNTS FROM	BOX 5 OF FORMS SSA-1099 OR RRB-1099	4598.
4.		XCLUSIONS FROM FOREIGN EARNED	
		INCOME FROM U.S. POSSESSIONS,	
		O BY BONA FIDE RESIDENTS OF	
	PUERTO RICO THAT YOU CLAIM	MED	
5.	ADD LINES 2, 3, AND 4		14406.
6.	ADD THE AMOUNTS ON FORM 1	040, LINES 23 THROUGH LINE 32,	
	DOTTED LINE NEXT TO LINE	36 炎	0.
7.	SUBTRACT LINE 6 FROM LINE	ADJUSTMENTS YOU ENTERED ON THE 36	14406.
8.	ENTER: \$25,000 IF YOU C	HECKED BOX A OR D, OR	
		HECKED BOX BOOR	
	\$-0- IF YOU C	HECKED BOX 🔊	25000.
9.	IS THE AMOUNT ON LINE 8 L	ESS THAN THE AMOUNT ON LINE 7?	
		UR SOCIAL SECURITY BENEFITS ARE	
		RM 1040 LINE 20B. IF YOU ARE	λ
	MARRIED FILING SEPARATELY	AND YOU LIVED APART FROM YOUR	
		E SURE YOU ENTERED 'D' TO THE	
	RIGHT OF THE WORD "BENEFI		
	[] YES. SUBTRACT LINE 8	FROM LINE 7	0.
10.	ENTER \$9,000 IF YOU CHEC		
	\$12,000 IF YOU CHEC		
	\$-0- IF YOU CHEC	KED BOX C	
		E 9. IF ZERO OR LESS, ENTER -0	
12.	ENTER THE SMALLER OF SINE	9 OR LINE 10	
14.	ENTER THE SMALLER OF LINE	2 OR LINE 13	
		.85). IF LINE 11 IS ZERO, ENTER $-0-$	
	ADD LINES 14 AND 15		
17.	MULTIPLY LINE BY 85% (.	85)	
18.		THE SMALLER OF LINE 16 OR LINE 17	0.
	* ALSO ENTER THIS AMOUNT	ON FORM 1040, LINE 20B	

SCHEDULE A MEDICAL AND DENTAL EXPENSES	STATEMENT 2
DESCRIPTION	AMOUNT
DOCTORS, DENTISTS, ETC. MEDICARE PREMIUMS WITHHELD	3482.
TOTAL TO SCHEDULE A, LINE 1	4367.
SCHEDULE A STATE AND LOCAL GENERAL SALES TAXES	STATEMENT 3
DESCRIPTION	AMOUNT
DESCRIPTION STATE SALES TAX LOCAL SALES TAX TOTAL TO SCHEDULE A, LINE 5	422. 135.
TOTAL TO SCHEDULE A, LINE 5	557.

SCH	EDULE A GENERAL SALES TAX DEDUCTION WORKSHEET	STATEMENT	4
	ENTER YOUR STATE GENERAL SALES TAXES FROM THE APPLICABLE TABLE. TEXAS IF, FOR ALL OF 2006, YOU LIVED ONLY IN CONNECTICUT, THE	4	22.
	DISTRICT OF COLUMBIA, HAWAII, INDIANA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, MISSISSIPPI, NEW JERSEY, RHODE ISLAND, VIRGINIA, OR WEST VIRGINIA, SKIP LINES 2 THROUGH 5, ENTER -0- ON LINE 6, AND GO TO LINE 7. OTHERWISE, GO TO LINE 2.	6 1 ¹⁸	
2	THROUGH 5, ENTER -0- ON LINE 6, AND GO TO LINE 7. OTHERWISE, GO TO LINE 2. DID YOU LIVE IN ALASKA, ARIZONA, ARKANSAS (TEXARKANA ONLY), CALIFORNIA (LOS ANGELES COUNTY ONLY), COLORADO, GEORGIA, ILLINOIS, LOUISIANA, NEW YORK STATE, OR NORTH CAROLINA IN 2006? IF NO, ENTER -0 IF YES, ENTER YOUR LOCAL GENERAL SALES TAXES FROM THE APPLICABLE TABLE. DID YOUR LOCALITY IMPOSE A LOCAL GENERAL SALES TAX IN 2006? RESIDENTS OF CALIFORNIA, NEVADA AND TEXARKANA, ARKANSAS, SEE INSTRUCTIONS. IF NO, SKIP LINES 3 THROUGH 5, ENTER -0- ON LINE 6 AND GO TO LINE 7.)*	
3	TAXES FROM THE APPLICABLE TABLE. DID YOUR LOCALITY IMPOSE A LOCAL GENERAL SALES TAX IN 2006? RESIDENTS OF CALIFORNIA, NEVADA AND TEXARKANA,		
	IF YES, ENTER YOUR LOCAL GENERAL SALES		
4	TAX RATE, BUT OMIT PERCENTAGES. 2.0000 AUSTIN DID YOU ENTER -0- ON LINE 2 ABOVE? IF NO, SKIP LINES 4 AND 5 AND GO TO DINE 6.		
	IF YES, ENTER YOUR STATE GENERAL SALES TAX RATE, BUT OMIT PERCENTAGES. 6.2500		
5	DIVIDE LINE 3 BY LINE 4. ENTER THE RESULT AS A DECIMAL (ROUNDED TO AT LEAST THREE PLACES)3200 DID YOU ENTER -0- ON LINE 2 ABOVE?		
O	IF NO, MULTIPLY LINE 2 BY LINE 3. IF YES, MULTIPLY LINE 1 BY LINE 5.	1	35.
6 A	ADD LINE 1 AND LINE 6.	5	57.
	PART-YEAR DAYS RATE. MULTIPLY LINE 6A BY LINE 6B.	1.000	000 57.
7	ENTER YOUR GENERAL SALES TAXES PAID ON SPECIFIED ITEMS, IF ANY.		
8	DEDUCTION FOR GENERAL SALES TAXES. ADD LINES 6C AND 7. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 5. BE SURE TO ENTER "SO" ON THE DOTTED LINE TO THE LEFT OF THE ENTRY SPACE.	5	57.

459-20-2593

FORM 6251	PASSI	VE ACTIVITI	ES	STATEMENT	5
		NET IN	COME (LOSS)		
NAME OF ACTIVITY	FORM	AMT	REGULAR	ADJUSTMEN	T
MAURINE P. HAMILTON (DEC. 10/06/06)	FORM 4835		-801		01.
TOTAL TO FORM 6251, L	INE 18			8	01.
			70		

FORM 4835	OTHER INCOME	STATEMENT 6
DESCRIPTION		AMOUNT
RENTS		570.
TOTAL TO FORM 4835, PART I, LIN	E 6	570.

FORM 8582 AC	TIVE RENTAL O	F REAL ESTA	TE - WORKSHE	ET 1 STA	TEMENT 7
	CURRENT	YEAR	PRIOR YEAR UNALLOWED	OVERALL GA	IN OR DOSS
NAME OF ACTIVITY	NET INCOME	NET LOSS	LOSS	GAIN	LOSS
MAURINE P. HAMILTON (DEC. 10/06/06)	0.	-801.			-801.
TOTALS	0.	-801.			-801.
FORM 8582 LOSSES FRO	M ACTIVE RENT	AL OF REAL	ESTATE-WORKS	HEET 4 STA	TEMENT 8
NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO		REMAINING UNALLOWED LOSS
MAURINE P. HAMILTON (DEC. 10/06/06)	FORM 4835	801.	1.00000000	801.	0.
TOTALS		801.	1,00000000	801.	0.
FORM 8582	ALLOWED	LOSSES	RKSHEET 6	STA	TEMENT 9
		FORM		UNALLOWED	ALLOWED
NAME OF ACTIVITY		SCHEDULE	LOSS	LOSS	LOSS
MAURINE P. HAMILTON	DEC. 10/06/06) FORM 483	5 801.	0.	801.
TOTALS			801.	0.	801.
4.음식, 강인점, 항면, 유민(2012년)					

FORM 8582	SUM	MARY OF PA	ASSIVE ACT	IVITIES	STAT	EMENT	10
R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALEOWI LOSS	∳ ED
X MAURINE P. HAMILTON (DEC.	FORM 4835					\$ ************************************	
10/06/06)		-801.		-801.		80	01.
TOTALS		-801.		-801.		8 (01.
PRIOR YEAR CARRYOV	ERS ALLOWE	D DUE TO	CURRENT YE	AR NET ACTIV	ZITY INCOME		
TOTAL TO FORM 8582	, LINE 16					8(01.

FORM 8582	MODIFIED	AGI	STATEMENT	11
INCOME				
WAGES, SALARIES, TIPS ETC. DIVIDEND INCOME TAXABLE REFUNDS ALIMONY RECEIVED TAXABLE IRA DISTRIBUTIONS TAXABLE PENSIONS AND ANNUITIES				
UNEMPLOYMENT COMPENSATION OTHER INCOME			-82	20.
INTEREST INCOME ADD: SERIES EE AND I EXCLUSION	N		6219.	
BUSINESS INCOME OR LOSS ADD: PASSIVE LOSSES SUBTRACT: PASSIVE INCOME			621	.9.
SALE OF ASSETS ADD: PASSIVE/RREA PROFESSIONA SUBTRACT: PASSIVE INCOME	L LOSSES			
RENTAL, ROYALTY OR PASSTHROUGH ADD: PASSIVE/RREA PROFESSIONA SUBTRACT: PASSIVE INCOME	INCOME OR L	oss 		
FARM OR FARM RENTAL INCOME OR L ADD: PASSIVE/RREA PROFESSIONA SUBTRACT: PASSIVE INCOME	L LOSSES		-801. 801.	
				0.
TOTAL INCOME ADJUSTMENTS MOVING EXPENSES			539	99.
ADJUSTMENTS				
MOVING EXPENSES SELF-EMPLOYED HEALTH INSURANCE PENALTY ON EARLY WITHDRAWAL OF ALIMONY PAID KEOGH/SEP DEDUCTION OTHER ADJUSTMENTS	DEDUCTION			
TOTAL ADJUSTMENTS				
TOTAL TO FORM 8582, LINE 7			539	99.

A Resultible of the control of the state of INTERNAL REVENUE SERVICE AUSTIN, TX 73301-0002





Daniel Davida III
MPA, CPA · PFS, CRC

512-258-6637 Fax 512-258-7699 danny@dbtxcpa.com www.dbtxcpa.com

7267 McNeil Dr · Austin, Texas 78729-7610

Your Future, Our Business

7,000 McNell Dr + Austin, Texas 78729,7610 + 512 259 6637