

Alfred & Maurine
Hamilton

2003 - Form 1040



CERTIFIED PUBLIC
ACCOUNTANTS &
FINANCIAL CONSULTANTS

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

July 12, 2004

TAXPAYER'S COPY
DAVILA, BUSCHHORN & ASSOCIATES, P.C.
Certified Public Accountants

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

Dear Maurine:

Enclosed are your 2003 income tax return and 2004 estimated tax vouchers. The return should be signed and dated by you.

Specific filing instructions are as follows.

FEDERAL INCOME TAX RETURN:

Mail your return on or before August 15, 2004.

Mail to - Internal Revenue Service Center
P.O. Box 660308
Dallas, TX 75266-0308

Enclose your check for \$15799, payable to the United States Treasury. Include your social security number, daytime phone number and the words "2003 Form 1040" on your check.

Also enclose Form 1040-V. Do not attach Form 1040-V or your payment to your return or to each other. Please leave Form 1040-V and your payment loose in the envelope.

Your income tax return includes a penalty for underpayment of estimated tax from Form 2210 of \$9, a late payment penalty of \$305 and late payment interest of \$256.

FEDERAL ESTIMATED TAX VOUCHERS:

Separately mail voucher 2 of Form 1040-ES as soon as possible.

Mail to - Internal Revenue Service Center
P.O. Box 660406
Dallas, TX 75266-0406

Enclose your check for \$8358, payable to the United States Treasury. Include your social security number and the words "2004 Form 1040-ES" on your check.

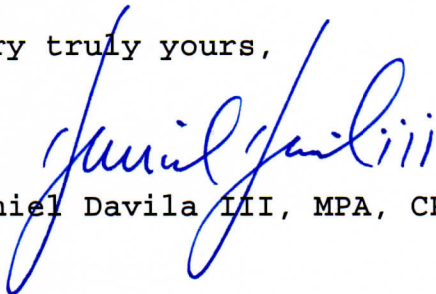
Retain vouchers 3 and 4 in your files and mail to the above address on or before the dates indicated.

For your reference we have listed all estimated tax payments and their original due dates below. Vouchers requiring no payment should not be filed.

Voucher no. 2	by 06/15/04	\$8358
Voucher no. 3	by 09/15/04	\$4179
Voucher no. 4	by 01/18/05	\$4179

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

Very truly yours,



Daniel Davila III, MPA, CPA, PFS

Two-Year Comparison Worksheet

2003

Name(s) as shown on return

ALFRED & MAURINE P. HAMILTON

Social security number

458-24-4617

2002 Filing Status **MARRIED FILING JOINT**

2003 Filing Status **MARRIED FILING JOINT**

2002 Tax Bracket **28.0%**

2003 Tax Bracket **33.0%**

Description	Tax Year 2002	Tax Year 2003	Increase (Decrease)
SCHEDULE B - TAXABLE INTEREST	5556.	2034.	-3522.
SCHEDULE D (CAPITAL GAIN/LOSS)	0.	63311.	63311.
TAXABLE IRA DISTRIBUTIONS	0.	3423.	3423.
TAXABLE PENSIONS AND ANNUITIES	116850.	133790.	16940.
SCHEDULE E (RENTAL AND PASSTHROUGH)	-1881.	-1624.	257.
TAXABLE SOCIAL SECURITY BENEFITS	27642.	28033.	391.
OTHER INCOME	-4118.	-4118.	
TOTAL INCOME	144049.	224849.	80800.
ADJUSTED GROSS INCOME	144049.	224849.	80800.
STANDARD DEDUCTION	9650.	11400.	1750.
INCOME BEFORE EXEMPTIONS	134399.	213449.	79050.
PERSONAL EXEMPTIONS	6000.	5246.	-754.
TAXABLE INCOME	128399.	208203.	79804.
TAX	28930.	44280.	15350.
TAX BEFORE CREDITS	28930.	44280.	15350.
TAX AFTER NON-REFUNDABLE CREDITS	28930.	44280.	15350.
TOTAL TAX	28930.	44280.	15350.
FEDERAL INCOME TAX WITHHELD	11100.	10471.	-629.
ESTIMATED TAX PAYMENTS	24680.	18580.	-6100.
TOTAL PAYMENTS	35780.	29051.	-6729.
TAX OVERPAID	6850.	0.	-6850.
AMOUNT REFUNDED	2390.	0.	-2390.
OVERPAYMENT APPLIED TO ESTIMATE	4460.	0.	-4460.
FORM 2210/2210F (EST. TAX PENALTY)	0.	9.	9.
BALANCE DUE (INCLUDING 2210/2210F)	0.	15238.	15238.
LATE PAYMENT/LATE FILING PEN. & INT.	0.	561.	561.
TOTAL DUE AFTER PENALTY & INTEREST	0.	15799.	15799.

Paperwork Reduction Act Notice.

We ask for the information on Form 1040-V to help us carry out the Internal Revenue laws of the United States. If you use Form 1040-V, you must provide the requested information. Your cooperation will help us ensure that we are collecting the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Internal Revenue Code section 6103.

The time needed to complete and mail Form 1040-V will vary depending on individual circumstances. The estimated average time is 12 minutes. If you have comments about the accuracy of this time estimate or suggestions for making Form 1040-V simpler, we would be happy to hear from you. See the Instructions for Form 1040.

Form **1040-V** (2003)

▼ Detach Here and Mail With Your Payment and Return ▼

Form **1040-V**

Department of the Treasury
Internal Revenue Service (99)

Payment Voucher

OMB No. 1545-0074

2003

▶ Do not staple or attach this voucher to your payment or return.

1 Your social security number (SSN) 458 24 4617		2 If a joint return, SSN shown second on your return 459 20 2593		3 Amount you are paying by check or money order 15799		Dollars	Cents
4 Your first name and initial ALFRED				Last name HAMILTON			
If a joint return, spouse's first name and initial MAURINE P.				Last name HAMILTON			
Home address (number and street) 9008 EAST DR.						Apt. no.	
City, town or post office, state, and ZIP code AUSTIN, TX 78753-5112							

2004 Estimated Tax Worksheet (keep for your records)

<p>1 Adjusted gross income you expect in 2004 (see instructions)</p>	1	161538.
<p>2 • If you plan to itemize deductions, enter the estimated total of your itemized deductions. Caution: If line 1 above is over \$142,700 (\$71,350 if married filing separately), your deduction may be reduced. See Pub. 505 for details. • If you do not plan to itemize deductions, enter your standard deduction from page 2.</p>	2	11600.
<p>3 Subtract line 2 from line 1</p>	3	149938.
<p>4 Exemptions. Multiply \$3,100 by the number of personal exemptions. If you can be claimed as a dependent on another person's 2004 return, your personal exemption is not allowed. Caution: See Pub. 505 to figure the amount to enter if line 1 above is over: \$214,050 if married filing jointly or qualifying widow(er); \$178,350 if head of household; \$142,700 if single; or \$107,025 if married filing separately</p>	4	6200.
<p>5 Subtract line 4 from line 3</p>	5	143738.
<p>6 Tax. Figure your tax on the amount on line 5 by using the 2004 Tax Rate Schedules on page 2. Caution: If you have qualified dividends or a net capital gain, see Pub. 505 to figure the tax</p>	6	30204.
<p>7 Alternative minimum tax from Form 6251</p>	7	
<p>8 Add lines 6 and 7. Also include any tax from Forms 4972 and 8814 and any recapture of education credits (see instructions)</p>	8	30204.
<p>9 Credits (see instructions). Do not include any income tax withholding on this line</p>	9	
<p>10 Subtract line 9 from line 8. If zero or less, enter -0-</p>	10	30204.
<p>11 Self-employment tax. Estimate of 2004 net earnings from self-employment \$ _____; if \$87,900 or less, multiply the amount by 15.3%; if more than \$87,900, multiply the amount by 2.9%, add \$10,899.60 to the result, and enter the total. Caution: If you also have wages subject to social security tax, see Pub. 505 to figure the amount to enter</p>	11	
<p>12 Other taxes (see instructions)</p>	12	
<p>13a Add lines 10 through 12</p>	13a	30204.
<p>b Earned income credit, additional child tax credit, and credits from Form 4136 and Form 8885</p>	13b	
<p>c Total 2004 estimated tax. Subtract line 13b from line 13a. If zero or less, enter -0-</p>	13c	30204.
<p>14a Multiply line 13c by 90% (66 2/3% for farmers and fishermen)</p>	14a	27184.
<p>b Enter the tax shown on your 2003 tax return (110% of that amount if you are not a farmer or fisherman and the adjusted gross income shown on line 35 of that return is more than \$150,000 or, if married filing separately for 2004, more than \$75,000)</p>	14b	48708.
<p>c Required annual payment to avoid a penalty. Enter the smaller of line 14a or 14b</p> <p>Caution: Generally, if you do not prepay (through income tax withholding and estimated tax payments) at least the amount on line 14c, you may owe a penalty for not paying enough estimated tax. To avoid a penalty, make sure your estimate on line 13c is as accurate as possible. Even if you pay the required annual payment, you may still owe tax when you file your return. If you prefer, you may pay the amount shown on line 13c. For details, see Pub. 505.</p>	14c	27184.
<p>15 Income tax withheld and estimated to be withheld during 2004 (including income tax withholding on pensions, annuities, certain deferred income, etc.)</p>	15	10471.
<p>16 Subtract line 15 from line 14c. (Note: If zero or less or line 13c minus line 15 is less than \$1,000, stop here. You are not required to make estimated tax payments.)</p> <p align="right">ADJUSTED TO:</p>	16	16716.
<p>17 If the first payment you are required to make is due April 15, 2004, enter 1/4 of line 16 (minus any 2003 overpayment that you are applying to this installment) here, and on your payment voucher(s) if you are paying by check or money order. (Note: Household employers, see instructions.)</p>	17	

CUT HERE

Form **1040-ES**
Department of the Treasury
Internal Revenue Service

2004 Payment Voucher 1

OMB No. 1545-0087

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2004 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due April 15, 2004

Amount of estimated tax you are paying by check or money order.

\$ []

Type or print	Your first name and initial	Your last name	Your social security number
	If joint payment, complete for spouse		
	Spouse's first name and initial	Spouse's last name	Spouse's social security number
	Address (number, street, and apt. no.)		
City, state, and ZIP code (If a foreign address, enter city, province or state, postal code, and country.)			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 5.

CUT HERE

Form **1040-ES**
Department of the Treasury
Internal Revenue Service

2004 Payment Voucher 2

OMB No. 1545-0087

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2004 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due June 15, 2004

Amount of estimated tax you are paying by check or money order.

\$ 8358.

Type or print	Your first name and initial	Your last name	Your social security number
	ALFRED	HAMILTON	458-24-4617
	If joint payment, complete for spouse		
	Spouse's first name and initial	Spouse's last name	Spouse's social security number
MAURINE P.	HAMILTON	459-20-2593	
Address (number, street, and apt. no.)			
9008 EAST DR.			
City, state, and ZIP code (If a foreign address, enter city, province or state, postal code, and country.)			
AUSTIN, TX 78753-5112			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 5.

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Form **1040-ES**
Department of the Treasury
Internal Revenue Service

2004 Payment Voucher 3

OMB No. 1545-0087

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2004 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due Sept. 15, 2004

Amount of estimated tax you are paying
by check or
money order.

\$ **4179.**

Type or print	Your first name and initial ALFRED	Your last name HAMILTON	Your social security number 458-24-4617
	If joint payment, complete for spouse		
	Spouse's first name and initial MAURINE P.	Spouse's last name HAMILTON	Spouse's social security number 459-20-2593
	Address (number, street, and apt. no.) 9008 EAST DR.		
City, state, and ZIP code (If a foreign address, enter city, province or state, postal code, and country.) AUSTIN, TX 78753-5112			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 5.

CUT HERE

Form **1040-ES**
Department of the Treasury
Internal Revenue Service

2004 Payment Voucher 4

OMB No. 1545-0087

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the "United States Treasury." Write your social security number and "2004 Form 1040-ES" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Calendar year - Due Jan. 18, 2005

Amount of estimated tax you are paying
by check or
money order.

\$ **4179.**

Type or print	Your first name and initial ALFRED	Your last name HAMILTON	Your social security number 458-24-4617
	If joint payment, complete for spouse		
	Spouse's first name and initial MAURINE P.	Spouse's last name HAMILTON	Spouse's social security number 459-20-2593
	Address (number, street, and apt. no.) 9008 EAST DR.		
City, state, and ZIP code (If a foreign address, enter city, province or state, postal code, and country.) AUSTIN, TX 78753-5112			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 5.

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CITY OF AUSTIN

STATE OF TEXAS CERTIFICATE OF DEATH STATE FILE NUMBER

1 NAME OF DECEASED (a) FIRST Alfred		(b) MIDDLE Hamilton		(c) LAST Hamilton		(d) MAIDEN	2 SEX Male	3 DATE OF DEATH April 8, 2004
4 DATE OF BIRTH May 12, 1914		5 AGE (IN YEARS) 89	IF UNDER 1 YR. MO DAYS HOURS MIN	6 BIRTH PLACE (CITY & STATE OR FOREIGN COUNTRY) Belton, Texas		7 SOCIAL SECURITY NO. 458-24-4617		
8 RACE Caucasian		9a. WAS THE DECEASED OF HISPANIC ORIGIN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		9b. IF YES, SPECIFY (MEXICAN, CUBAN, PUERTO RICAN, ETC.)		10. WAS DECEASED EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		11. EDUCATION (SPECIFY HIGHEST GRADE COMPLETED, ELEM. OR SECONDARY (0-12) COLLEGE (13-16, 17+) 17+
12 MARITAL STATUS <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> DIVORCED		13 SURVIVING SPOUSE (IF WIFE, GIVE MAIKEN NAME) Maurine Pulkrabek		14a. DECEASED'S USUAL OCCUPATION Physician		14b. KIND OF BUSINESS OR INDUSTRY Medical		
15a. RESIDENCE STREET ADDRESS 9902 Childress Dr.						15b. CITY OR TOWN Austin		
15c. COUNTY Travis		15d. STATE Texas		15e. ZIP CODE 78753-		15f. INSIDE CITY LIMITS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
16 FATHER'S NAME Ruben Hamilton				17. MOTHER'S MAIDEN NAME Lee Hattley				
18. PLACE OF DEATH (CHECK ONLY ONE)								
HOSPITAL: <input type="checkbox"/> INPATIENT <input checked="" type="checkbox"/> ER/OUTPATIENT <input type="checkbox"/> DOA OTHER: <input type="checkbox"/> NURSING HOME <input type="checkbox"/> RESIDENCE <input type="checkbox"/> OTHER (SPECIFY)								
19. COUNTY OF DEATH Travis			20. CITY OR TOWN (IF OUTSIDE CITY LIMITS, GIVE PRECINCT NO.) Austin			21. NAME OF HOSPITAL OR INSTITUTION (If not in institution, show street address) North Austin Medical Center		
22. INFORMANT - SIGNATURE & RELATIONSHIP Alan Hamilton Son				23. MAILING ADDRESS OF INFORMANT 9902 Childress Dr. Austin, Texas 78753-				
24. METHOD OF DISPOSITION <input type="checkbox"/> BURIAL <input checked="" type="checkbox"/> CREMATION <input type="checkbox"/> REMOVAL FROM STATE <input type="checkbox"/> DONATION <input type="checkbox"/> OTHER (SPECIFY)		25a. PLACE OF DISPOSITION (NAME OF CEMETERY, CREMATORY OR OTHER PLACE) Onion Creek Memorial Park		25b. LOCATION (CITY, STATE) Austin, TX		25c. SIGNATURE OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH <i>[Signature]</i> #19207		29. NAME & ADDRESS OF FUNERAL HOME All Faiths Funeral Service-North 8507 North IH 35 Austin, Texas 78753-
30. CERTIFIER <input type="checkbox"/> CERTIFYING PHYSICIAN <input checked="" type="checkbox"/> MEDICAL EXAMINER <input type="checkbox"/> JUSTICE OF THE PEACE		TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE TIME, DATE, AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER AS STATED. ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION, IN MY OPINION, DEATH OCCURRED AT THE TIME, DATE, PLACE, AND DUE TO THE CAUSE(S) AND MANNER AS STATED.						
31. SIGNATURE & TITLE OF CERTIFIER <i>[Signature]</i> Deputy Medical Examiner				32. DATE SIGNED NO 04 DAY 12 YEAR 2004		33. TIME OF DEATH 11:14 P.M.		
34. PRINTED NAME & ADDRESS OF CERTIFIER Vladimir Parungao, M.D. P.O. Box 1748 Austin, TX 78767								
35. PART 1 ENTER THE DISEASES, INJURIES OR COMPLICATIONS THAT CAUSED THE DEATH. DO NOT ENTER THE MODE OF DYING SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. IMMEDIATE CAUSE (Final disease or condition resulting in death) → Atherosclerotic Cardiovascular Disease DUE TO (OR AS A LIKELY CONSEQUENCE OF): a. Atherosclerotic Cardiovascular Disease b. _____ c. _____ d. _____ Approximate Interval Between Onset and Death YEARS							36. AUTOPSY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
37. DID TOBACCO USE CONTRIBUTE TO DEATH <input type="checkbox"/> YES <input type="checkbox"/> PROBABLY <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNKNOWN							38. DID ALCOHOL USE CONTRIBUTE TO DEATH <input type="checkbox"/> YES <input type="checkbox"/> PROBABLY <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNKNOWN	
40. MANNER OF DEATH <input checked="" type="checkbox"/> NATURAL <input type="checkbox"/> ACCIDENT <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED			41a. DATE OF INJURY		41b. TIME OF INJURY M. <input type="checkbox"/> YES <input type="checkbox"/> NO		41c. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO	
42a. REGISTRAR FILE NO. 02-01258			42b. DATE RECEIVED BY LOCAL REGISTRAR APR 13 2004			42c. SIGNATURE OF LOCAL REGISTRAR <i>Raguel Moreno</i>		

Texas Department of Health - Bureau of Vital Statistics
 WARNING: The penalty for knowingly making a false statement in this form can be 2-10 years in prison and a fine of up to \$10,000. (Health and Safety Code, Sec. 195, 1989)
 CAUSE OF DEATH
 APR 14 2004
 VS-112 REV. 9/95 72556

S260148

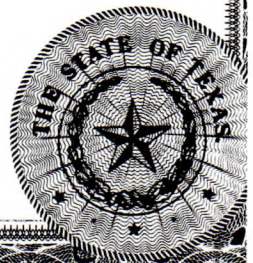
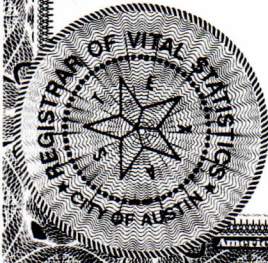
This is to certify that this is a true and correct reproduction of the original record as recorded in this office. Issued under authority of Section 191.051, Health & Safety Code.

APR 14 2004

ISSUED

Raguel Moreno
Local Registrar

WARNING: IT IS ILLEGAL TO DUPLICATE THIS COPY.



Label (See instructions on page 19.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign (See page 19.)	For the year Jan. 1-Dec. 31, 2003, or other tax year beginning _____, 2003, ending _____, 20	OMB No. 1545-0074	
	Your first name and initial ALFRED	Last name (DEC. 04/08/04) HAMILTON	Your social security number 458 24 4617
	If a joint return, spouse's first name and initial MAURINE P.	Last name HAMILTON	Spouse's social security number 459 20 2593
	Home address (number and street). If you have a P.O. box, see page 19. 9008 EAST DR.		Apt. no. _____
City, town or post office, state, and ZIP code. If you have a foreign address, see page 19. AUSTIN, TX 78753-5112		▲ Important! ▲ You must enter your SSN(s) above.	

Note. Checking "Yes" will not change your tax or reduce your refund.

Do you, or your spouse if filing a joint return, want \$3 to go to this fund? Yes No Yes No

Filing Status

1 Single

2 Married filing jointly (even if only one had income)

3 Married filing separately. Enter spouse's SSN above and full name here. ▶

4 Head of household (with qualifying person). (See page 20.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5 Qualifying widow(er) with dependent child. (See page 20.)

Exemptions

6a Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, **do not** check box 6a

6b Spouse

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) If qualifying child for child tax credit (see page 21)	No. of children on 6c who:
					<input type="checkbox"/> lived with you <input type="checkbox"/> did not live with you due to divorce or separation (see page 21)

Dependents on 6c not entered above

Add numbers on lines above ▶ **2**

d Total number of exemptions claimed

Control number RET1232312	<input type="checkbox"/> CORRECTED (if checked)	12/10/03	
PAYER'S name, street address, city, state, and ZIP code DEFENSE FINANCE AND ACCOUNTING SERVICE US MILITARY RETIREMENT PAY PO BOX 7130 LONDON KY 40742-7130	1 Gross distribution \$ 72180.00	OMB No. 1545-0119 2003 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
	2a Taxable amount \$ 72180.00		
PAYER'S Federal identification number 34-0727612	RECIPIENT'S identification number 458-24-4617	2b Total distribution <input type="checkbox"/>	
RECIPIENT'S name, address and ZIP code ALFRED HAMILTON 580 CO RD 329 YOAKUM TX 77995-0000	4 Federal income tax withheld \$ 10471.37	7 Distribution code 7	Copy C For Recipient's records. This information is being furnished to the Internal Revenue Service.
	9 Your percentage of total distribution %		
	10 State income tax withheld \$	11 State/Payer's state number	
	RETIRED		01012003-12312003

42 *37210* 00006147 00001537 000A096 11-531740-4 RET

Income	25 Student loan interest deduction (see page 31)	25	
	26 Tuition and fees deduction (see page 32)	26	
	27 Moving expenses. Attach Form 3903	27	
	28 One-half of self-employment tax. Attach Schedule SE	28	
	29 Self-employed health insurance deduction (see page 33)	29	
	30 Self-employed SEP, SIMPLE, and qualified plans	30	
	31 Penalty on early withdrawal of savings	31	
	32a Alimony paid b Recipient's SSN ▶	32a	
	33 Add lines 23 through 32a	33	
	34 Subtract line 33 from line 22. This is your adjusted gross income	34	224849.

Label (See instructions on page 19.) Use the IRS label. Otherwise, please print or type.

Header section containing personal information: Name (ALFRED HAMILTON), Social Security Number (458 24 4617), Home Address (9008 EAST DR., AUSTIN, TX 78753-5112), and Spouse information (MAURINE P. HAMILTON).

Election Campaign section: Note. Checking "Yes" will not change your tax or reduce your refund. Do you, or your spouse if filing a joint return, want \$3 to go to this fund? [] Yes [X] No

Filing Status section: 1 [] Single, 2 [X] Married filing jointly, 3 [] Married filing separately, 4 [] Head of household, 5 [] Qualifying widow(er) with dependent child.

Exemptions section: 6a [X] Yourself, 6b [X] Spouse, 6c Dependents table, 6d Total number of exemptions claimed: 2

Income section: 7 Wages, salaries, tips, etc. 8a Taxable interest 8b Tax-exempt interest 9a Ordinary dividends 9b Qualified dividends 10 Taxable refunds, credits, or offsets of state and local income taxes 11 Alimony received 12 Business income or (loss) 13a Capital gain or (loss) 13b If box on 13a is checked, enter post-May 5 capital gain distributions 14 Other gains or (losses) 15a IRA distributions 15b Taxable amount (see page 25) 16a Pensions and annuities 16b Taxable amount (see page 25) 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 18 Farm income or (loss) Attach Schedule F 19 Unemployment compensation 20a Social security benefits 20b Taxable amount (see page 27) 21 Other income. List type and amount (see page 27) SEE STATEMENT -4118. 22 Add the amounts in the far right column for lines 7 through 21. This is your total income 224849.

Adjusted Gross Income section: 23 Educator expenses (see page 29) 24 IRA deduction (see page 29) 25 Student loan interest deduction (see page 31) 26 Tuition and fees deduction (see page 32) 27 Moving expenses. Attach Form 3903 28 One-half of self-employment tax. Attach Schedule SE 29 Self-employed health insurance deduction (see page 33) 30 Self-employed SEP, SIMPLE, and qualified plans 31 Penalty on early withdrawal of savings 32a Alimony paid b Recipient's SSN 33 Add lines 23 through 32a 34 Subtract line 33 from line 22. This is your adjusted gross income 224849.

Control number RET1232312		<input type="checkbox"/> CORRECTED (if checked)		12/10/03	
PAYER'S name, street address, city, state, and ZIP code DEFENSE FINANCE AND ACCOUNTING SERVICE US MILITARY RETIREMENT PAY PO BOX 7130 LONDON KY 40742-7130		1 Gross distribution \$ 72180.00	OMBNo. 1545-0119	2003 Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
PAYER'S Federal identification number 34-0727612		2a Taxable amount \$ 72180.00	Form 1099-R		
RECIPIENT'S name, address and ZIP code ALFRED HAMILTON 580 CO RD 329 YOAKUM TX 77995-0000		2b Total distribution <input type="checkbox"/>	4 Federal income tax withheld \$ 10471.37	7 Distribution code 7	Copy C For Recipient's records. This information is being furnished to the Internal Revenue Service.
RECIPIENT'S identification number 458-24-4617		9 Your percentage of total distribution %	10 State income tax withheld \$	11 State/Payer's state number	
			RETIRE	01012003-12312003	Keep this copy for your records. 52848

Form **1099-R**

Department of the Treasury-Internal Revenue Service

02 *37210* 00006147 00001537 000A096 11-531740-4 RET

Tax and Credits

Table with 35 rows for tax and credits. Line 35: Amount from line 34 (adjusted gross income) 224849. Line 36a: Check boxes for 'You were born before January 2, 1939' and 'Spouse was born before January 2, 1939'. Line 37: Itemized deductions 11400. Line 38: Subtract line 37 from line 35 213449. Line 39: If line 35 is \$104,625 or less, multiply \$3,050 by the total number of exemptions claimed on line 6d. Line 40: Taxable income 208203. Line 41: Tax 44280. Line 42: Alternative minimum tax 0. Line 43: Add lines 41 and 42 44280. Line 44-52: Credits (Foreign tax credit, child and dependent care expenses, elderly/disabled, education, retirement savings, child tax, adoption, Form 8396, Form 8859, Form 3800, Form 8801, etc.). Line 53: Add lines 44 through 52. Line 54: Subtract line 53 from line 43. Line 55: Self-employment tax. Line 56: Social security and Medicare tax on tip income. Line 57: Tax on qualified plans. Line 58: Advance earned income credit payments. Line 59: Household employment taxes. Line 60: Add lines 54 through 59. Total tax 44280.

Other Taxes

Table with 6 rows for other taxes. Line 55: Self-employment tax. Line 56: Social security and Medicare tax on tip income. Line 57: Tax on qualified plans. Line 58: Advance earned income credit payments. Line 59: Household employment taxes. Line 60: Add lines 54 through 59. Total tax 44280.

Payments

Table with 8 rows for payments. Line 61: Federal income tax withheld from Forms W-2 and 1099 10471. Line 62: 2003 estimated tax payments and amount applied from 2002 return 18580. Line 63: Earned income credit (EIC). Line 64: Excess social security and tier 1 RRTA tax withheld. Line 65: Additional child tax credit. Line 66: Amount paid with request for extension to file. Line 67: Other payments from: Form 2439, Form 4136, Form 8885. Line 68: Add lines 61 through 67. Total payments 29051.

Refund

Table with 2 rows for refund. Line 69: If line 68 is more than line 60, subtract line 60 from line 68. This is the amount you overpaid. Line 70a: Amount of line 69 you want refunded to you. Line 71: Amount of line 69 you want applied to your 2004 estimated tax.

Amount You Owe

Table with 2 rows for amount you owe. Line 72: Amount you owe. Subtract line 68 from line 60. For details on how to pay, see page 57. Line 73: Estimated tax penalty (see page 58) 9.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 58)? [X] Yes. Complete the following. [] No. Designee's name: PREPARER. Phone no. Personal identification number (PIN).

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature: FILING AS SURVIVING SPOUSE. Occupation: RETIRED. Spouse's signature: RETIRED. Spouse's occupation: RETIRED.

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 7-12-04 Check if self-employed: [] Preparer's SSN or PTIN: P00088773 Firm's name (or yours if self-employed), address, and ZIP code: DAVILA, BUSCHHORN & ASSOC., PC 7207 MCNEIL DR. AUSTIN, TEXAS 78729-7610 EIN: 74-2528044 Phone no: (512) 258-6637

** INTEREST NOT INCLUDED 256. ** PENALTY NOT INCLUDED 305.

**** TOTAL DUE 15799.

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

▶ See separate instructions.
▶ Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

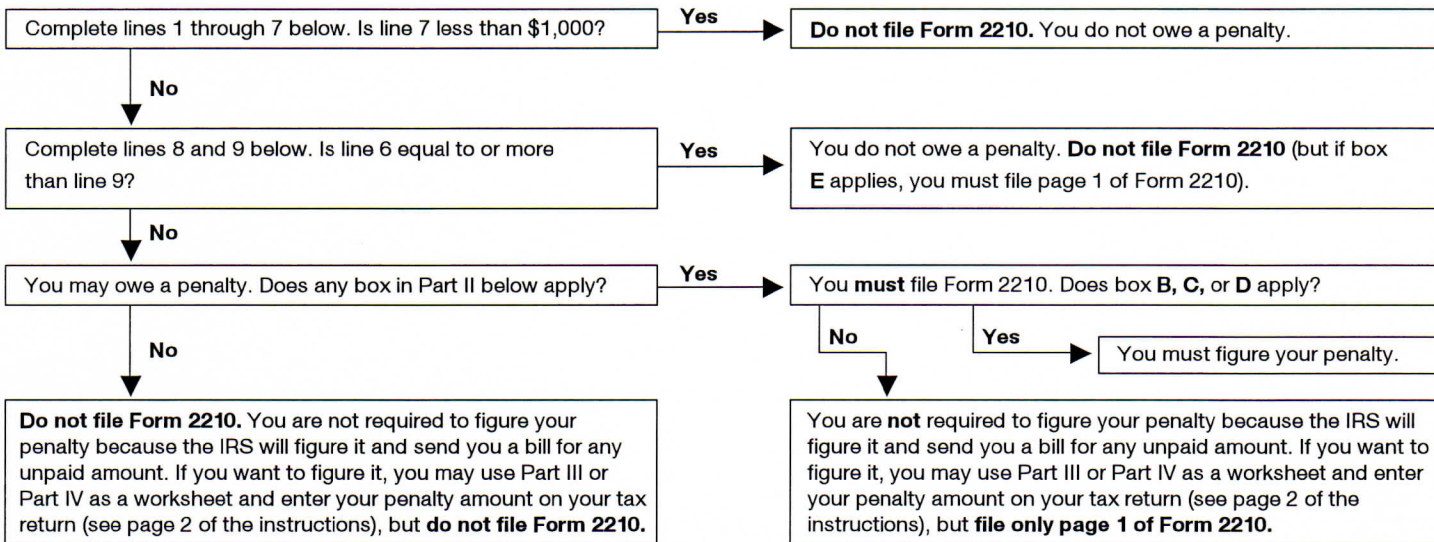
Name(s) shown on tax return

Identifying number

ALFRED & MAURINE P. HAMILTON

458-24-4617

Do You Have To File Form 2210?



Part I Required Annual Payment (see page 2 of the instructions)

1	Enter your 2003 tax after credits from Form 1040, line 54 (or comparable line of your return)	1	44280.
2	Other taxes, including self-employment tax (see page 2 of the instructions)	2	
3	Refundable credits. Enter the total of your earned income credit, additional child tax credit, credit for Federal tax paid on fuels, and health coverage tax credit for eligible individuals	3	()
4	Current year tax. Combine lines 1, 2, and 3	4	44280.
5	Multiply line 4 by 90% (.90)	5	39852.
6	Withholding taxes. Do not include estimated tax payments. See page 2 of the instructions	6	10471.
7	Subtract line 6 from line 4. If less than \$1,000, you do not owe a penalty; do not file Form 2210	7	33809.
8	Maximum required annual payment based on prior year's tax (see page 2 of the instructions)	8	28930.
9	Required annual payment. Enter the smaller of line 5 or line 8	9	28930.

Next: Is line 9 more than line 6?

- No. You do not owe a penalty. Do not file Form 2210 unless box E below applies.
- Yes. You may owe a penalty, but do not file Form 2210 unless one or more boxes in Part II below applies.
- If box B, C, or D applies, you must figure your penalty and file Form 2210.
 - If only box A or E (or both) applies, file only page 1 of Form 2210. You are not required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or Part IV as a worksheet and enter your penalty on your tax return (see page 2 of the instructions), but file only page 1 of Form 2210.

Part II Reasons for Filing. Check applicable boxes. If none apply, do not file Form 2210.

- A You request a **waiver** (see page 1 of the instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you are not required to figure your penalty.
- B You request a waiver (see page 1 of the instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method**. You must figure the penalty using Schedule AI and file Form 2210.
- D Your penalty is lower when figured by treating the Federal income tax withheld from your wages as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E You filed or are filing a joint return for either 2002 or 2003, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you are not required to figure your penalty (unless box B, C, or D applies).

Part IV Regular Method (See page 2 of the instructions if you are filing Form 1040NR or 1040NR-EZ.)

Section A - Figure Your Underpayment	Payment Due Dates				
	(a) 4/15/03	(b) 6/15/03	(c) 9/15/03	(d) 1/15/04	
18 Required installments. If box C in Part II applies, enter the amounts from Schedule AI, line 25. Otherwise, enter 25% (.25) of line 9, Form 2210, in each column	18	7233.	7233.	7233.	7231.
19 Estimated tax paid and tax withheld. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 18 for all payment periods, stop here; you do not owe a penalty. Do not file Form 2210 unless you checked a box in Part II	19	7078.	7078.	7278.	7617.
20 Enter the amount, if any, from line 26 in previous column	20				
21 Add lines 19 and 20	21		7078.	7278.	7617.
22 Add the amounts on lines 24 and 25 in previous column	22		155.	310.	265.
23 Subtract line 22 from line 21. If zero or less, enter -0-. For column (a) only, enter the amount from line 19	23	7078.	6923.	6968.	7352.
24 If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0-	24		0.	0.	
25 Underpayment. If line 18 is equal to or more than line 23, subtract line 23 from line 18. Then go to line 20 of the next column. Otherwise, go to line 26	25	155.	310.	265.	
26 Overpayment. If line 23 is more than line 18, subtract line 18 from line 23. Then go to line 20 of the next column	26				121.

Section B - Figure the Penalty (Complete lines 27 through 32 of one column before going to the next column.)

Rate Period 1	April 16, 2003 - September 30, 2003				
	4/15/03	6/15/03	9/15/03		
27 Number of days from the date shown above line 27 to the date the amount on line 25 was paid or 9/30/03, whichever is earlier	Days:	Days:	Days:		
28 Underpayment on line 25 x $\frac{\text{Number of days on line 27}}{365} \times .05$	28	\$	\$	\$	
Rate Period 2	October 1, 2003 - December 31, 2003				
	9/30/03	9/30/03	9/30/03		
29 Number of days from the date shown above line 29 to the date the amount on line 25 was paid or 12/31/03, whichever is earlier	Days:	Days:	Days:		
30 Underpayment on line 25 x $\frac{\text{Number of days on line 29}}{365} \times .04$	30	\$	\$	\$	
Rate Period 3	January 1, 2004 - April 15, 2004				
	12/31/03	12/31/03	12/31/03	1/15/04	
31 Number of days from the date shown above line 31 to the date the amount on line 25 was paid or 4/15/04, whichever is earlier	Days:	Days:	Days:	Days:	
32 Underpayment on line 25 x $\frac{\text{Number of days on line 31}}{366} \times .04$	32	\$	\$	\$	
33 Penalty. Add all amounts on lines 28, 30, and 32 in all columns. Enter the total here and on Form 1040, line 73; Form 1040A, line 48; Form 1040NR, line 72; Form 1040NR-EZ, line 26; or Form 1041, line 26, but do not file Form 2210 unless you checked a box in Part II	33	\$		\$	9.

UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)					Identifying Number
ALFRED & MAURINE P. HAMILTON					458-24-4617
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
04/15/03	7233.	7233.			
04/15/03	-2618.	4615.			
04/15/03	-4460.	155.	61	.000136986	1.
06/15/03	7233.	7388.			
06/15/03	-2618.	4770.			
06/15/03	-4460.	310.	92	.000136986	4.
09/15/03	7233.	7543.			
09/15/03	-2618.	4925.			
09/15/03	-4660.	265.	15	.000136986	1.
09/30/03	0.	265.	92	.000109589	3.
12/31/03	0.	265.	15	.000109290	
01/15/04	7231.	7496.			
01/15/04	-2617.	4879.			
01/15/04	-5000.	-121.			
Penalty Due (Sum of Column F)					9.

* Date of estimated tax payment, withholding credit date or installment due date.

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

Your social security number

ALFRED & MAURINE P. HAMILTON

458 24 4617

Schedule B - Interest and Ordinary Dividends

Attachment Sequence No. **08**

Part I Interest

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶

YOAKUM NATL BANK
YOAKUM NATL BANK
BANK OF AMERICA
GUARANTY BANK

Amount
 617.
 110.
 911.
 396.

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

2 Add the amounts on line 1 **2034.**
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 **3**
4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a **2034.**

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

Part II Ordinary Dividends

5 List name of payer ▶

Amount

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

6 Add the amounts on line 5. Enter the total here and on Form 1040, line 9a **6**

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

Part III Foreign Accounts and Trusts

You must complete this part if you **(a)** had over \$1,500 of taxable interest or ordinary dividends; or **(b)** had a 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 2003, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? **X**
b If "Yes," enter the name of the foreign country ▶
8 During 2003, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See page B-2 **X**

Yes	No
	X
	X

**SCHEDULE D
(Form 1040)**

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

Capital Gains and Losses

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

OMB No. 1545-0074

2003

Attachment
Sequence No. **12**

Your social security number

458 24 4617

ALFRED & MAURINE P. HAMILTON

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) for the entire year Subtract (e) from (d)	(g) Post-May 5 gain or (loss)* (see below)
1						
2 Enter your short-term totals			2			
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)			3			
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824					4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your 2002 Capital Loss Carryover Worksheet					6 ()	
7a Combine lines 1 through 5 in column (g). If the result is a loss, enter the result. Otherwise, enter -0-. Do not enter more than zero					7a	()
b Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f).					7b	

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) for the entire year Subtract (e) from (d)	(g) Post-May 5 gain or (loss)* (see below)
8						
9 Enter your long-term totals			9			
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)			10			
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 SEE STATEMENT 9					11 63311.	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					12	
13 Capital gain distributions					13	
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your 2002 Capital Loss Carryover Worksheet					14 ()	
15 Combine lines 8 through 13 in column (g). If zero or less, enter -0-					15	
16 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f) Next: Go to Part III on page 2.					16 63311.	

* Include in column (g) all gains and losses from column (f) from sales, exchanges, or conversions (including installment payments received) after May 5, 2003. However, do not include gain attributable to unrecaptured section 1250 gain, "collectibles gains and losses" (as defined on page D-8 of the instructions) or eligible gain on qualified small business stock (see page D-4 of the instructions).

Part III Taxable Gain or Deductible Loss

17 a	Combine lines 7b and 16 and enter the result. If a loss, enter -0- on line 17b and go to line 18. If a gain, enter the gain on Form 1040, line 13a, and go to line 17b below	17a	63311.
b	Combine lines 7a and 15. If zero or less, enter -0-. Then complete Form 1040 through line 40 Next: • If line 16 of Schedule D is a gain or you have qualified dividends on Form 1040, line 9b, complete Part IV below. • Otherwise, skip the rest of Schedule D and complete the rest of Form 1040.	17b	
18	If line 17a is a loss, enter here and on Form 1040, line 13a, the smaller of (a) that loss or (b) (\$3,000) (or, if married filing separately, (\$1,500)) (see page D-7 of the instructions) Next: • If you have qualified dividends on Form 1040, line 9b, complete Form 1040 through line 40, and then complete Part IV below (but skip lines 19 and 20). • Otherwise, skip Part IV below and complete the rest of Form 1040.	18	()

Part IV Tax Computation Using Maximum Capital Gains Rates

If line 16 or line 17a is zero or less, skip lines 19 and 20 and go to line 21. Otherwise, go to line 19.

19	Enter your unrecaptured section 1250 gain, if any, from line 18 of the worksheet STMT 10	19	17361.
20	Enter your 28% rate gain, if any, from line 7 of the worksheet	20	

If lines 19 and 20 are zero, go to line 21. Otherwise, complete the worksheet on page D-11 of the instructions to figure the amount to enter on lines 35 and 53 below, and skip all other lines below.

21	Enter your taxable income from Form 1040, line 40	21	
22	Enter the smaller of line 16 or line 17a, but not less than zero	22	
23	Enter your qualified dividends from Form 1040, line 9b	23	
24	Add lines 22 and 23	24	
25	Amount from line 4g of Form 4952 (investment interest expense)	25	
26	Subtract line 25 from line 24. If zero or less, enter -0-	26	
27	Subtract line 26 from line 21. If zero or less, enter -0-	27	
28	Enter the smaller of line 21 or: • \$56,800 if married filing jointly or qualifying widow(er); • \$28,400 if single or married filing separately; or • \$38,050 if head of household	28	
If line 27 is more than line 28, skip lines 29-39 and go to line 40.			
29	Enter the amount from line 27	29	
30	Subtract line 29 from line 28. If zero or less, enter -0- and go to line 40	30	
31	Add lines 17b and 23*	31	
32	Enter the smaller of line 30 or line 31	32	
33	Multiply line 32 by 5% (.05)	33	
If lines 30 and 32 are the same, skip lines 34-39 and go to line 40.			
34	Subtract line 32 from line 30	34	
35	Enter your qualified 5-year gain, if any, from line 8 of the worksheet	35	
36	Enter the smaller of line 34 or line 35	36	
37	Multiply line 36 by 8% (.08)	37	
38	Subtract line 36 from line 34	38	
39	Multiply line 38 by 10% (.10)	39	
If lines 26 and 30 are the same, skip lines 40-49 and go to line 50.			
40	Enter the smaller of line 21 or line 26	40	
41	Enter the amount from line 30 (if line 30 is blank, enter -0-)	41	
42	Subtract line 41 from line 40	42	
43	Add lines 17b and 23*	43	
44	Enter the amount from line 32 (if line 32 is blank, enter -0-)	44	
45	Subtract line 44 from line 43	45	
46	Enter the smaller of line 42 or line 45	46	
47	Multiply line 46 by 15% (.15)	47	
48	Subtract line 46 from line 42	48	
49	Multiply line 48 by 20% (.20)	49	
50	Figure the tax on the amount on line 27. Use the Tax Table or Tax Rate Schedules, whichever applies	50	
51	Add lines 33, 37, 39, 47, 49, and 50	51	
52	Figure the tax on the amount on line 21. Use the Tax Table or Tax Rate Schedules, whichever applies	52	
53	Tax on all taxable income. Enter the smaller of line 51 or line 52 here and on Form 1040, line 41	53	44280.

**SCHEDULE D
(Form 1040)**

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

**ALTERNATIVE MINIMUM TAX
Capital Gains and Losses**

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

OMB No. 1545-0074

2003

Attachment
Sequence No. **12**

Your social security number

458 24 4617

ALFRED & MAURINE P. HAMILTON

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) for the entire year Subtract (e) from (d)	(g) Post-May 5 gain or (loss)* (see below)
1						
2 Enter your short-term totals			2			
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)			3			
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824					4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your 2002 Capital Loss Carryover Worksheet					6	()
7a Combine lines 1 through 5 in column (g). If the result is a loss, enter the result. Otherwise, enter -0-. Do not enter more than zero					7a	()
b Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f).					7b	

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) for the entire year Subtract (e) from (d)	(g) Post-May 5 gain or (loss)* (see below)
8						
9 Enter your long-term totals			9			
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)			10			
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 SEE STATEMENT 11					11	57885.
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					12	
13 Capital gain distributions.					13	
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your 2002 Capital Loss Carryover Worksheet					14	()
15 Combine lines 8 through 13 in column (g). If zero or less, enter -0-					15	
16 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f)					16	57885.

Next: Go to Part III on page 2.

* Include in column (g) all gains and losses from column (f) from sales, exchanges, or conversions (including installment payments received) after May 5, 2003. However, do not include gain attributable to unrecaptured section 1250 gain, "collectibles gains and losses" (as defined on page D-8 of the instructions) or eligible gain on qualified small business stock (see page D-4 of the instructions).

ALTERNATIVE MINIMUM TAX

Part III Taxable Gain or Deductible Loss

<p>17 a Combine lines 7b and 16 and enter the result. If a loss, enter -0- on line 17b and go to line 18. If a gain, enter the gain on Form 1040, line 13a, and go to line 17b below</p>	17a	57885.
<p>b Combine lines 7a and 15. If zero or less, enter -0-. Then complete Form 1040 through line 40</p> <p>Next:</p> <ul style="list-style-type: none"> • If line 16 of Schedule D is a gain or you have qualified dividends on Form 1040, line 9b, complete Part IV below. • Otherwise, skip the rest of Schedule D and complete the rest of Form 1040. 	17b	
<p>18 If line 17a is a loss, enter here and on Form 1040, line 13a, the smaller of (a) that loss or (b) (\$3,000) (or, if married filing separately, (\$1,500)) (see page D-7 of the instructions)</p> <p>Next:</p> <ul style="list-style-type: none"> • If you have qualified dividends on Form 1040, line 9b, complete Form 1040 through line 40, and then complete Part IV below (but skip lines 19 and 20). • Otherwise, skip Part IV below and complete the rest of Form 1040. 	18	()

Part IV Tax Computation Using Maximum Capital Gains Rates

If line 16 or line 17a is zero or less, skip lines 19 and 20 and go to line 21. Otherwise, go to line 19.

<p>19 Enter your unrecaptured section 1250 gain, if any, from line 18 of the worksheet STMT 12</p>	19	11935.
<p>20 Enter your 28% rate gain, if any, from line 7 of the worksheet</p>	20	

If lines 19 and 20 are zero, go to line 21. Otherwise, complete the worksheet on page D-11 of the instructions to figure the amount to enter on lines 35 and 53 below, and skip all other lines below.

<p>21 Enter your taxable income from Form 1040, line 40</p>	21	
<p>22 Enter the smaller of line 16 or line 17a, but not less than zero</p>	22	57885.
<p>23 Enter your qualified dividends from Form 1040, line 9b</p>	23	
<p>24 Add lines 22 and 23</p>	24	57885.
<p>25 Amount from line 4g of Form 4952 (investment interest expense)</p>	25	
<p>26 Subtract line 25 from line 24. If zero or less, enter -0-</p>	26	45950.
<p>27 Subtract line 26 from line 21. If zero or less, enter -0-</p>	27	
<p>28 Enter the smaller of line 21 or:</p> <ul style="list-style-type: none"> • \$56,800 if married filing jointly or qualifying widow(er); • \$28,400 if single or married filing separately; or • \$38,050 if head of household 	28	
<p>If line 27 is more than line 28, skip lines 29-39 and go to line 40.</p>		
<p>29 Enter the amount from line 27</p>	29	
<p>30 Subtract line 29 from line 28. If zero or less, enter -0- and go to line 40</p>	30	
<p>31 Add lines 17b and 23*</p>	31	
<p>32 Enter the smaller of line 30 or line 31</p>	32	
<p>33 Multiply line 32 by 5% (.05)</p>	33	
<p>If lines 30 and 32 are the same, skip lines 34-39 and go to line 40.</p>		
<p>34 Subtract line 32 from line 30</p>	34	
<p>35 Enter your qualified 5-year gain, if any, from line 8 of the worksheet</p>	35	
<p>36 Enter the smaller of line 34 or line 35</p>	36	
<p>37 Multiply line 36 by 8% (.08)</p>	37	
<p>38 Subtract line 36 from line 34</p>	38	
<p>39 Multiply line 38 by 10% (.10)</p>	39	
<p>If lines 26 and 30 are the same, skip lines 40-49 and go to line 50.</p>		
<p>40 Enter the smaller of line 21 or line 26</p>	40	
<p>41 Enter the amount from line 30 (if line 30 is blank, enter -0-)</p>	41	
<p>42 Subtract line 41 from line 40</p>	42	
<p>43 Add lines 17b and 23*</p>	43	
<p>44 Enter the amount from line 32 (if line 32 is blank, enter -0-)</p>	44	
<p>45 Subtract line 44 from line 43</p>	45	
<p>46 Enter the smaller of line 42 or line 45</p>	46	
<p>47 Multiply line 46 by 15% (.15)</p>	47	
<p>48 Subtract line 46 from line 42</p>	48	
<p>49 Multiply line 48 by 20% (.20)</p>	49	
<p>50 Figure the tax on the amount on line 27. Use the Tax Table or Tax Rate Schedules, whichever applies</p>	50	
<p>51 Add lines 33, 37, 39, 47, 49, and 50</p>	51	
<p>52 Figure the tax on the amount on line 21. Use the Tax Table or Tax Rate Schedules, whichever applies</p>	52	
<p>53 Tax on all taxable income. Enter the smaller of line 51 or line 52 here and on Form 1040, line 41</p>	53	

1. Enter your taxable income from Form 1040, line 40	1. <u>208203.</u>
2. Enter your qualified dividends from Form 1040, line 9b	2. _____
3. Form 4952, line 4g ...	3. _____
4. Form 4952, line 4e ...	4. _____
5. Subtract line 4 from line 3. If zero or less, enter -0-	5. _____
6. Subtract line 5 from line 2. If zero or less, enter -0-	6. _____
7. Enter the smaller of line 16 or line 17a of Sch. D ...	7. <u>63311.</u>
8. Enter the smaller of line 3 or line 4	8. _____
9. Subtract line 8 from line 7. If zero or less, enter -0-	9. <u>63311.</u>
10. Add lines 6 and 9	10. <u>63311.</u>
11. Add lines 19 and 20 of Schedule D	11. <u>17361.</u>
12. Enter the smaller of line 9 or line 11	12. <u>17361.</u>
13. Subtract line 12 from line 10	13. <u>45950.</u>
14. Subtract line 13 from line 1. If zero or less, enter -0-	14. <u>162253.</u>
15. Enter the smaller of line 1 or: <small>• \$56,800 if married filing jointly or qualifying widow(er); • \$28,400 if single or married filing separately; or • \$38,050 if head of household.</small>	15. <u>56800.</u>
16. Enter the smaller of line 14 or line 15	16. <u>56800.</u>
17. Subtract line 10 from line 1. If zero or less, enter -0-	17. <u>144892.</u>
18. Enter the larger of line 16 or line 17	▶ 18. <u>144892.</u>
If lines 15 and 16 are the same, skip lines 19 through 28 and go to line 29. Otherwise, go to line 19.	
19. Subtract line 16 from line 15	▶ 19. _____
20. Add the amounts on Schedule D, line 17b, and line 6 above	20. _____
21. Enter the smaller of line 19 or line 20	21. _____
22. Multiply line 21 by 5% (.05)	22. _____
If lines 19 and 21 are the same, skip lines 23 through 28 and go to line 29. Otherwise, go to line 23.	
23. Subtract line 21 from line 19	23. _____
24. Qualified 5-year gain. Also enter on Schedule D, line 35	24. _____
25. Enter the smaller of line 23 or line 24	25. _____
26. Multiply line 25 by 8% (.08)	26. _____
27. Subtract line 25 from line 23	27. _____
28. Multiply line 27 by 10% (.10)	28. _____
If lines 1 and 15 are the same, skip lines 29 through 47 and go to line 48. Otherwise, go to line 29.	
29. Enter the smaller of line 1 or line 13	29. <u>45950.</u>
30. Enter the amount from line 19 (if line 19 is blank, enter -0-)	30. <u>0.</u>
31. Subtract line 30 from line 29. If zero or less, enter -0-	▶ 31. <u>45950.</u>
32. Add the amounts on Schedule D, line 17b, and line 6 above	32. _____
33. Enter the amount from line 21 (if line 21 is blank, enter -0-)	33. <u>0.</u>
34. Subtract line 33 from line 32	34. _____
35. Enter the smaller of line 31 or line 34	35. _____
36. Multiply line 35 by 15% (.15)	36. _____
37. Subtract line 35 from line 31	37. <u>45950.</u>
38. Multiply line 37 by 20% (.20)	38. <u>9190.</u>
If Schedule D, line 19, is zero or blank, skip lines 39 through 44 and go to line 45. Otherwise, go to line 39.	
39. Enter the smaller of line 9 above or Schedule D, line 19	39. <u>17361.</u>
40. Add lines 10 and 18	40. <u>208203.</u>
41. Enter the amount from line 1 above	41. <u>208203.</u>
42. Subtract line 41 from line 40. If zero or less, enter -0-	42. <u>0.</u>
43. Subtract line 42 from line 39. If zero or less, enter -0-	▶ 43. <u>17361.</u>
44. Multiply line 43 by 25% (.25)	44. <u>4340.</u>
If Schedule D, line 20, is zero or blank, skip lines 45 through 47 and go to line 48. Otherwise, go to line 45.	
45. Add lines 18, 19, 31, and 43	45. _____
46. Subtract line 45 from line 1	46. _____
47. Multiply line 46 by 28% (.28)	47. _____
48. Figure the tax on the amount on line 18 . Use the Tax Table or Tax Rate Schedules, whichever applies	48. <u>30750.</u>
49. Add lines 22, 26, 28, 36, 38, 44, 47, and 48	49. <u>44280.</u>
50. Figure the tax on the amount on line 1 . Use the Tax Table or Tax Rate Schedules, whichever applies	50. <u>50152.</u>
51. Tax on all taxable income (including capital gains and qualified dividends). Enter the smaller of line 49 or line 50. Also enter this amount on Schedule D, line 53, and Form 1040, line 41	51. <u>44280.</u>

3201615 10-27-03

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040 or Form 1041.

▶ See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

2003

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

ALFRED & MAURINE P. HAMILTON

458-24-4617

Part I Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-2). Report farm rental income or loss from Form 4835 on page 2, line 40.

1	Show the kind and location of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:	Yes	No
A	HOUSE 9862 CHILDRESS DR., AUSTIN, TX				X
B					
C					

Income:	Properties			Totals (Add columns A, B, and C.)
	A	B	C	
3 Rents received	3	800.		3 800.
4 Royalties received	4			4
Expenses:				
5 Advertising	5			
6 Auto and travel (see page E-4)	6			
7 Cleaning and maintenance	7	360.		
8 Commissions	8			
9 Insurance	9	32.		
10 Legal and other professional fees	10	125.		
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see page E-4)	12	59.		12 59.
13 Other interest	13			
14 Repairs	14	324.		
15 Supplies	15			
16 Taxes	16	560.		
17 Utilities	17	254.		
18 Other (list) ▶ <u>SEE STATEMENT 14</u>	18	81.		
19 Add lines 5 through 18	19	1795.		19 1795.
20 Depreciation expense or depletion (see page E-4)	20	276.		20 276.
21 Total expenses. Add lines 19 and 20	21	2071.		
22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-4 to find out if you must file Form 6198	22	-1271.		
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-4 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23	ENTIRE DISP 1271.)		
24 Income. Add positive amounts shown on line 22. Do not include any losses	24			24
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25			25 (1271.)
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17. Otherwise, include this amount in the total on line 41 on page 2	26			26 -1271.

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

Your social security number

ALFRED & MAURINE P. HAMILTON

458-24-4617

Part II Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See page E-1.

27 Are you reporting losses not allowed in prior years due to the at-risk or basis limitations, passive losses not reported on Form 8582, or unreimbursed partnership expenses? Yes No
 If you answered "Yes," see page E-5 before completing this section.
Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

28	(a) Name	(b) Enter P for partnership, S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A					
B					
C					
D					

Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4582	(j) Nonpassive income from Schedule K-1
A				
B				
C				
D				
29a	Totals			
b	Totals			
30	Add columns (g) and (j) of line 29a			30
31	Add columns (f), (h), and (i) of line 29b			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 below			32

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a	Totals		
b	Totals		
35	Add columns (d) and (f) of line 34a		35
36	Add columns (c) and (e) of line 34b		36 ()
37	Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below		37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	-353.
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17	41	-1624.
42	Reconciliation of Farming and Fishing Income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), line 15b; Schedule K-1 (Form 1120S), line 23; and Schedule K-1 (Form 1041), line 14 (see page E-6)	42	570.
43	Reconciliation for Real Estate Professionals. If you were a real estate professional, (see page E-1), enter the net income or (loss) you reported anywhere on Form 1040 from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

2003 DEPRECIATION AND AMORTIZATION REPORT
 HOUSE - 9862 CHILDRESS DR., AUSTIN, TX

SCHEDULE E- 1

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	(D) LAND	02/01/90	L			6375.			6375.			0.
2	(D) HOUSE	02/01/90	SL	27.50	17	36490.			36490.	17085.		276.
	TOTAL SCH E DEPRECIATION					42865.			42865.	17085.		276.

Sales of Business Property
 (Also Involuntary Conversions and Recapture Amounts
 Under Sections 179 and 280F(b)(2))

▶ **Attach to your tax return.** ▶ **See separate instructions.**

Name(s) shown on return

Identifying number

ALFRED & MAURINE P. HAMILTON

458-24-4617

1 Enter the gross proceeds from sales or exchanges reported to you for 2003 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 **1**

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (See instructions.)

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) for entire year. Subtract (f) from the sum of (d) and (e).	(h) Post-May 5, 2003, gain or (loss)* (see below)
2 *LAND	02/01/90	03/31/03	15000.		8053.	6947.	

3 Gain, if any, from Form 4684, line 39	3	
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	56364.
7 Combine lines 2 through 6 in columns (g) and (h). Enter the gain or (loss) here and on the appropriate line as follows:	7	63311.

Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 6, or Form 1120S, Schedule K, line 5. Skip lines 8, 9, 11, and 12 below.
All others. If line 7, column (g), is zero or a loss, enter that amount on line 11 below and skip lines 8, 9, and 12. If line 7, column (g), is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain or (loss) in each column as a long-term capital gain or (loss) on Schedule D and skip lines 8, 9, 11, and 12 below.

8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8	
9 Subtract line 8 from line 7. If line 9, column (g), is zero or less, enter -0- in column (g). If line 9, column (g), is zero, enter the gain from line 7, column (g), on line 12 below. If line 9, column (g), is more than zero, enter the amount from line 8, column (g), on line 12 below and include the gain or (loss) in each column of line 9 as a long-term capital gain or (loss) on Schedule D (see instructions)	9	

*Corporations (other than S corporations) should not complete column (h). Partnerships and S corporations must complete column (h). All others must complete column (h) only if line 7, column (g), is a gain and the amount, if any, on line 8, column (g), does not equal or exceed the gain on line 7, column (g). Include in column (h) all gains and losses from column (g) from sales, exchanges, or conversions (including installment payments received) after May 5, 2003. However, do not include gain attributable to unrecaptured section 1250 gain.

Part II Ordinary Gains and Losses

10 Ordinary gains and losses not included on lines 11 through 17 (include property held 1 year or less):

11 Loss, if any, from line 7, column (g)	11	
12 Gain, if any, from line 7, column (g), or amount from line 8, column (g), if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Recapture of section 179 expense deduction for partners and S corporation shareholders for property dispositions from 2002-2003 fiscal year partnerships and S corporations	17	
18 Combine lines 10 through 17. Enter the gain or (loss) here and on the appropriate line as follows:	18	

a For all except individual returns. Enter the gain or (loss) from line 18 on the return being filed.

b For individual returns:

(1) If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 27, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 22. Identify as from "Form 4797, line 18b(1)." See instructions

(2) Redetermine the gain or (loss) on line 18 excluding the loss, if any, on line 18b(1). Enter here and on Form 1040, line 14

18b(1)

18b(2)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
* A	HOUSE	02/01/90	03/31/03
B			
C			
D			
These columns relate to the properties on lines 19A through 19D.		Property A	Property B
20	Gross sales price (Note: See line 1 before completing.)	84999.	
21	Cost or other basis plus expense of sale	45996.	
22	Depreciation (or depletion) allowed or allowable	17361.	
23	Adjusted basis. Subtract line 22 from line 21	28635.	
24	Total gain. Subtract line 23 from line 20	56364.	
25 If section 1245 property:			
a	Depreciation allowed or allowable from line 22	25a	
b	Enter the smaller of line 24 or 25a	25b	
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.			
a	Additional depreciation after 1975 (see instructions)	26a	
b	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b	
c	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c	
d	Additional depreciation after 1969 and before 1976	26d	
e	Enter the smaller of line 26c or 26d	26e	
f	Section 291 amount (corporations only)	26f	
g	Add lines 26b, 26e, and 26f	26g	
27 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).			
a	Soil, water, and land clearing expenses	27a	
b	Line 27a multiplied by applicable percentage	27b	
c	Enter the smaller of line 24 or 27b	27c	
28 If section 1254 property:			
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs (see instructions)	28a	
b	Enter the smaller of line 24 or 28a	28b	
29 If section 1255 property:			
a	Applicable percentage of payments excluded from income under section 126 (see instructions)	29a	
b	Enter the smaller of line 24 or 29a (see instructions)	29b	

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	56364.
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6, column (g), and if applicable, column (h)	32	56364.

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less

(See instructions.)

		(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33	
34	Recomputed depreciation. See instructions	34	
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

ALTERNATIVE MINIMUM TAX
Sales of Business Property
 (Also Involuntary Conversions and Recapture Amounts
 Under Sections 179 and 280F(b)(2))
 ▶ Attach to your tax return. ▶ See separate instructions.

ALFRED & MAURINE P. HAMILTON

1 Enter the gross proceeds from sales or exchanges reported to you for 2003 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 **1**

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (See instructions.)

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) for entire year. Subtract (f) from the sum of (d) and (e)	(h) Post-May 5, 2003, gain or (loss)* (see below)
2 *LAND	02/01/90	03/31/03	15000.		8053.	6947.	

3 Gain, if any, from Form 4684, line 39	3	
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	50938.
7 Combine lines 2 through 6 in columns (g) and (h). Enter the gain or (loss) here and on the appropriate line as follows:	7	57885.

Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 6, or Form 1120S, Schedule K, line 5. Skip lines 8, 9, 11, and 12 below.
All others. If line 7, column (g), is zero or a loss, enter that amount on line 11 below and skip lines 8, 9, and 12. If line 7, column (g), is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain or (loss) in each column as a long-term capital gain or (loss) on Schedule D and skip lines 8, 9, 11, and 12 below.

8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8	
9 Subtract line 8 from line 7. If line 9, column (g), is zero or less, enter -0- in column (g). If line 9, column (g), is zero, enter the gain from line 7, column (g), on line 12 below. If line 9, column (g), is more than zero, enter the amount from line 8, column (g), on line 12 below and include the gain or (loss) in each column of line 9 as a long-term capital gain or (loss) on Schedule D (see instructions)	9	

*Corporations (other than S corporations) should not complete column (h). Partnerships and S corporations must complete column (h). All others must complete column (h) only if line 7, column (g), is a gain and the amount, if any, on line 8, column (g), does not equal or exceed the gain on line 7, column (g). Include in column (h) all gains and losses from column (g) from sales, exchanges, or conversions (including installment payments received) after May 5, 2003. However, do not include gain attributable to unrecaptured section 1250 gain.

Part II Ordinary Gains and Losses

10 Ordinary gains and losses not included on lines 11 through 17 (include property held 1 year or less):

11 Loss, if any, from line 7, column (g)	11	
12 Gain, if any, from line 7, column (g), or amount from line 8, column (g), if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Recapture of section 179 expense deduction for partners and S corporation shareholders for property dispositions from 2002-2003 fiscal year partnerships and S corporations	17	
18 Combine lines 10 through 17. Enter the gain or (loss) here and on the appropriate line as follows:	18	

a For all except individual returns. Enter the gain or (loss) from line 18 on the return being filed.

b For individual returns:

- (1) If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 27, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 22. Identify as from "Form 4797, line 18b(1)." See instructions
- (2) Redetermine the gain or (loss) on line 18 excluding the loss, if any, on line 18b(1). Enter here and on Form 1040, line 14

18b(1)

18b(2)

ALTERNATIVE MINIMUM TAX

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)		
* A HOUSE	02/01/90	03/31/03		
B				
C				
D				
These columns relate to the properties on lines 19A through 19D.	Property A	Property B	Property C	Property D
20 Gross sales price (Note: See line 1 before completing.)	20 84999.			
21 Cost or other basis plus expense of sale	21 45996.			
22 Depreciation (or depletion) allowed or allowable	22 11935.			
23 Adjusted basis. Subtract line 22 from line 21	23 34061.			
24 Total gain. Subtract line 23 from line 20	24 50938.			
25 If section 1245 property:				
a Depreciation allowed or allowable from line 22	25a			
b Enter the smaller of line 24 or 25a	25b			
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.				
a Additional depreciation after 1975 (see instructions)	26a			
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b			
c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c			
d Additional depreciation after 1969 and before 1976	26d			
e Enter the smaller of line 26c or 26d	26e			
f Section 291 amount (corporations only)	26f			
g Add lines 26b, 26e, and 26f	26g			
27 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).				
a Soil, water, and land clearing expenses	27a			
b Line 27a multiplied by applicable percentage	27b			
c Enter the smaller of line 24 or 27b	27c			
28 If section 1254 property:				
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs (see instructions)	28a			
b Enter the smaller of line 24 or 28a	28b			
29 If section 1255 property:				
a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a			
b Enter the smaller of line 24 or 29a (see instructions)	29b			

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	50938.
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6, column (g), and if applicable, column (h)	32	50938.

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less

(See instructions.)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation. See instructions	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Alternative Minimum Tax - Individuals

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040

Your social security number

ALFRED & MAURINE P. HAMILTON

458 24 4617

Part I Alternative Minimum Taxable Income

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 38, and go to line 2. Otherwise, enter the amount from Form 1040, line 35, and go to line 7. (If zero or less, enter as a negative amount.)	1	224849.
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2 1/2% of Form 1040, line 35	2	
3	Taxes from Schedule A (Form 1040), line 9	3	
4	Certain interest on a home mortgage not used to buy, build, or improve your home	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 26	5	
6	If Form 1040, line 35, is over \$139,500 (over \$69,750 if married filing separately), enter the amount from line 9 of the worksheet for Schedule A (Form 1040), line 28	6	
7	Tax refund from Form 1040, line 10 or line 21	7	
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Interest from specified private activity bonds exempt from the regular tax	11	
12	Qualified small business stock (see instructions)	12	
13	Exercise of incentive stock options (excess of AMT income over regular tax income)	13	
14	Estates and trusts (amount from Schedule K-1 (Form 1041), line 9)	14	
15	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	15	
16	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)	17	
18	Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 15	18	-4987.
19	Loss limitations (difference between AMT and regular tax income or loss)	19	
20	Circulation costs (difference between regular tax and AMT)	20	
21	Long-term contracts (difference between AMT and regular tax income)	21	
22	Mining costs (difference between regular tax and AMT)	22	
23	Research and experimental costs (difference between regular tax and AMT)	23	
24	Income from certain installment sales before January 1, 1987	24	
25	Intangible drilling costs preference	25	
26	Other adjustments, including income-based related adjustments	26	
27	Alternative tax net operating loss deduction	27	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$191,000, see instructions)	28	219862.

Part II Alternative Minimum Tax

29	Exemption. (If this form is for a child under age 14, 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 \$40,250 Married filing jointly or qualifying widow(er) 150,000 58,000 Married filing separately 75,000 29,000 If line 28 is over the amount shown above for your filing status, see instructions. STMT 16	29	40534.
30	Subtract line 29 from line 28. If zero or less, enter -0- here and on lines 33 and 35 and stop here	30	179328.
31	• If you reported capital gain distributions directly on Form 1040, line 13a; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 16 and 17a of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 65 here. • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	31	43749.
32	Alternative minimum tax foreign tax credit (see instructions)	32	
33	Tentative minimum tax. Subtract line 32 from line 31	33	43749.
34	Tax from Form 1040, line 41 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 44)	34	44280.
35	Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 42	35	0.

Part III Tax Computation Using Maximum Capital Gains Rates

Caution: If you did not complete Part IV of Schedule D (Form 1040), see the instructions before you complete this part.

36	Enter the amount from Form 6251, line 30		36	179328.
37	Enter the amount from Schedule D (Form 1040), line 26, or line 13 of the Schedule D Tax Worksheet on page D-11 of the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions)	37	45950.	
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions)	38	11935.	
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	57885.	
40	Enter the smaller of line 36 or line 39	40	57885.	
41	Subtract line 40 from line 36	41	121443.	
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	42	31575.	
43	Enter the amount from Schedule D (Form 1040), line 30, or line 19 of the Schedule D Tax Worksheet on page D-11 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax) (see instructions)	43		
44	Enter the smaller of line 36 or line 37	44	45950.	
45	Enter the smaller of line 43 or line 44	45		
46	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from Schedule D (Form 1040), line 43 (or if that line is blank, the amount from Schedule D (Form 1040), line 31). Otherwise, enter the amount from line 32 of the Schedule D Tax Worksheet on page D-11 of the instructions for Schedule D (Form 1040) (or if that line is blank, the amount from line 20 of that worksheet). Refigure all amounts for the AMT, if necessary (see instructions)	46		
47	Enter the smaller of line 45 or line 46. If line 45 is zero, go to line 55	47		
48	Multiply line 47 by 5% (.05)	48		
49	Subtract line 47 from line 45. If zero or less, enter -0- and go to line 55	49		
50	Enter your qualified 5-year gain, if any, from Schedule D (Form 1040), line 35 (as refigured for the AMT, if necessary) (see instructions)	50		
51	Enter the smaller of line 49 or line 50	51		
52	Multiply line 51 by 8% (.08)	52		
53	Subtract line 51 from line 49	53		
54	Multiply line 53 by 10% (.10)	54		
55	Subtract line 47 from line 46	55		
56	Subtract line 45 from line 44	56	45950.	
57	Enter the smaller of line 55 or line 56	57		
58	Multiply line 57 by 15% (.15)	58		
59	Subtract line 57 from line 56	59	45950.	
60	Multiply line 59 by 20% (.20)	60	9190.	
If line 38 is zero or blank, skip lines 61 and 62 and go to line 63. Otherwise, go to line 61.				
61	Subtract line 44 from line 40	61	11935.	
62	Multiply line 61 by 25% (.25)	62	2984.	
63	Add lines 42, 48, 52, 54, 58, 60, and 62	63	43749.	
64	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	64	46712.	
65	Enter the smaller of line 63 or line 64 here and on line 31	65	43749.	

ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s)	Social Security Number
ALFRED & MAURINE P. HAMILTON	458-24-4617

Form Name	Description	Income	Adjustment					
			Form 6251, Line 16	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251 Other Adjustment	
4797	LAND 100% DISPOSITION							
	* REGULAR INCOME	6947.						
	* AMT NET INCOME	6947.						
4797	HOUSE 100% DISPOSITION							
	* REGULAR INCOME	56364.						
	AMT ADJUSTMENTS	-5426.			-5426.			
	* AMT NET INCOME	50938.			-5426.			
E-	HOUSE - 9862 CHILDRESS DR., AUSTIN, TX 100%							
	* REGULAR INCOME	-1271.						
	AMT ADJUSTMENTS	86.			86.			
	* AMT NET INCOME	-1185.			86.			
4835	ALFRED HAMILTON (DEC. 04/08/04)							
	* REGULAR INCOME	-353.						
	FARM LOSS ADJ	353.			353.			
	* AMT NET INCOME	0.			353.			
	** TOTAL ADJ & PREF **				-4987.			

ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

Asset No.	Description	Date Acquired	AMT Method	AMT Life	AMT Cost Or Basis	AMT Accumulated	Regular Depreciation	AMT Depreciation	AMT Adjustment
	HOUSE - 9862 CHILDRESS DR., AUSTIN, TX								
2	HOUSE	02/01/90	SL	40.00	36490.	11745.	276.	190.	86.
	** SUBTOTAL **				36490.	11745.	276.	190.	86.
	*** GRAND TOTAL ***				36490.	11745.	276.	190.	86.

Form **4835**

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0187

2003

Attachment
Sequence No. **37**

Name(s) shown on Form 1040

ALFRED HAMILTON (DEC. 04/08/04)

Your social security number

458-24-4617

Employer ID number (EIN), if any

A Did you actively participate in the operation of this farm during 2003? Yes No

Part I Gross Farm Rental Income - Based on Production. Include amounts converted to cash or the equivalent.

1 Income from production of livestock, produce, grains, and other crops			1	
2a Cooperative distributions (Form(s) 1099-PATR)	2a	2b Taxable amount	2b	
3a Agricultural program payments	3a	3b Taxable amount	3b	
4 Commodity Credit Corporation (CCC) loans:				
a CCC loans reported under election			4a	
b CCC loans forfeited	4b	4c Taxable amount	4c	
5 Crop insurance proceeds and certain disaster payments:				
a Amount received in 2003	5a	5b Taxable amount	5b	
c If election to defer to 2004 is attached, check here <input type="checkbox"/>		5d Amount deferred from 2002	5d	
6 Other income, including Federal and state gasoline or fuel tax credit or refund		SEE STATEMENT 17	6	570.
7 Gross farm rental income. Add amounts in the right column for lines 1 through 6. Enter the total here and on Schedule E (Form 1040), line 42			7	570.

Part II Expenses - Farm Rental Property. Do not include personal or living expenses.

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>8 Car and truck expenses. Also attach Form 4562</td><td>8</td><td></td></tr> <tr><td>9 Chemicals</td><td>9</td><td></td></tr> <tr><td>10 Conservation expenses</td><td>10</td><td></td></tr> <tr><td>11 Custom hire (machine work)</td><td>11</td><td></td></tr> <tr><td>12 Depreciation and section 179 expense deduction not claimed elsewhere</td><td>12</td><td></td></tr> <tr><td>13 Employee benefit programs other than on line 21 (see Schedule F instructions)</td><td>13</td><td></td></tr> <tr><td>14 Feed purchased</td><td>14</td><td></td></tr> <tr><td>15 Fertilizers and lime</td><td>15</td><td></td></tr> <tr><td>16 Freight and trucking</td><td>16</td><td></td></tr> <tr><td>17 Gasoline, fuel, and oil</td><td>17</td><td></td></tr> <tr><td>18 Insurance (other than health)</td><td>18</td><td style="text-align: right;">89.</td></tr> <tr><td>19 Interest:</td><td></td><td></td></tr> <tr><td> a Mortgage (paid to banks, etc.)</td><td>19a</td><td></td></tr> <tr><td> b Other</td><td>19b</td><td></td></tr> <tr><td>20 Labor hired (less employment credits)</td><td>20</td><td></td></tr> </table>	8 Car and truck expenses. Also attach Form 4562	8		9 Chemicals	9		10 Conservation expenses	10		11 Custom hire (machine work)	11		12 Depreciation and section 179 expense deduction not claimed elsewhere	12		13 Employee benefit programs other than on line 21 (see Schedule F instructions)	13		14 Feed purchased	14		15 Fertilizers and lime	15		16 Freight and trucking	16		17 Gasoline, fuel, and oil	17		18 Insurance (other than health)	18	89.	19 Interest:			a Mortgage (paid to banks, etc.)	19a		b Other	19b		20 Labor hired (less employment credits)	20		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>21 Pension and profit-sharing plans</td><td>21</td><td></td></tr> <tr><td colspan="3">22 Rent or lease:</td></tr> <tr><td> a Vehicles, machinery, and equipment</td><td>22a</td><td></td></tr> <tr><td> b Other (land, animals, etc.)</td><td>22b</td><td></td></tr> <tr><td>23 Repairs and maintenance</td><td>23</td><td></td></tr> <tr><td>24 Seeds and plants purchased</td><td>24</td><td></td></tr> <tr><td>25 Storage and warehousing</td><td>25</td><td></td></tr> <tr><td>26 Supplies purchased</td><td>26</td><td></td></tr> <tr><td>27 Taxes</td><td>27</td><td style="text-align: right;">420.</td></tr> <tr><td>28 Utilities</td><td>28</td><td style="text-align: right;">289.</td></tr> <tr><td>29 Veterinary, breeding, and medicine</td><td>29</td><td></td></tr> <tr><td colspan="3">30 Other expenses (specify):</td></tr> <tr><td> a <u>PROFESSIONAL FEES</u></td><td>30a</td><td style="text-align: right;">125.</td></tr> <tr><td> b _____</td><td>30b</td><td></td></tr> <tr><td> c _____</td><td>30c</td><td></td></tr> <tr><td> d _____</td><td>30d</td><td></td></tr> <tr><td> e _____</td><td>30e</td><td></td></tr> <tr><td> f _____</td><td>30f</td><td></td></tr> <tr><td> g _____</td><td>30g</td><td></td></tr> </table>	21 Pension and profit-sharing plans	21		22 Rent or lease:			a Vehicles, machinery, and equipment	22a		b Other (land, animals, etc.)	22b		23 Repairs and maintenance	23		24 Seeds and plants purchased	24		25 Storage and warehousing	25		26 Supplies purchased	26		27 Taxes	27	420.	28 Utilities	28	289.	29 Veterinary, breeding, and medicine	29		30 Other expenses (specify):			a <u>PROFESSIONAL FEES</u>	30a	125.	b _____	30b		c _____	30c		d _____	30d		e _____	30e		f _____	30f		g _____	30g	
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g _____	30g																																																																																																						
31 Total expenses. Add lines 8 through 30g	31	923.																																																																																																					
32 Net farm rental income or (loss). Subtract line 31 from line 7. If the result is income, enter it here and on Schedule E, line 40. If the result is a loss, you must go on to line 33	32	-353.																																																																																																					
33 If line 32 is a loss, you must check the box that describes your investment in this activity (see instructions)	33a	<input checked="" type="checkbox"/> All investment is at risk.																																																																																																					
	33b	<input type="checkbox"/> Some investment is not at risk.																																																																																																					
You may need to complete Form 8582 to determine your deductible loss, regardless of which box you check (see instructions). However, if you checked 33b, you must complete Form 6198 before going to Form 8582. In either case, enter the deductible loss here and on Schedule E, line 40	33c	-353.																																																																																																					

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4835** (2003)

Passive Activity Loss Limitations

▶ See separate instructions.
▶ Attach to Form 1040 or Form 1041.

Name(s) shown on return

Identifying number

ALFRED & MAURINE P. HAMILTON

458-24-4617

Part I 2003 Passive Activity Loss Caution: See the instructions for Worksheets 1, 2, and 3 on pages 7 and 8 before completing Part I.

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, column (a))	1a	63311.	
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	-1624.	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c		
d Combine lines 1a, 1b, and 1c	1d		61687.

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a		
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b		
c Add lines 2a and 2b	2c		

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a		
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b		
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c		
d Combine lines 3a, 3b, and 3c	3d		

4 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 8582. Report the losses on the forms and schedules normally used	4		61687.
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- 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 lived 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 Estate With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	
6 Enter \$150,000. If married filing separately, see the instructions	6	
7 Enter modified adjusted gross income, but not less than zero (see the instr.)	7	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
8 Subtract line 7 from line 6	8	
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see the instructions	9	
10 Enter the smaller of line 5 or line 9	10	
If line 2c is a loss, go to Part 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.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12 Enter the loss from line 4	12	
13 Reduce line 12 by the amount on line 10	13	
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15	
16 Total losses allowed from all passive activities for 2003. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return	16	1624.

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.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
	SEE ATTACHED STATEMENT FOR WORKSHEET 1				
Total. Enter on Form 8582, lines 1a, 1b, and 1c	63311.	-1624.			

Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
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.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total					

Worksheet 5 - Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total				

Passive Activity Loss Limitations

See separate instructions. Attach to Form 1040 or Form 1041.

Name(s) shown on return: ALFRED & MAURINE P. HAMILTON
Identifying number: 458-24-4617

Part I 2003 Passive Activity Loss Caution: See the instructions for Worksheets 1, 2, and 3 on pages 7 and 8 before completing Part I.

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.)

Table with 4 rows: 1a Activities with net income (57885), 1b Activities with net loss (-1185), 1c Prior years unallowed losses, 1d Combine lines 1a, 1b, and 1c (56700).

Table with 3 rows: 2a Commercial revitalization deductions from Worksheet 2, column (a), 2b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b), 2c Add lines 2a and 2b.

Table with 4 rows: 3a Activities with net income, 3b Activities with net loss, 3c Prior years unallowed losses, 3d Combine lines 3a, 3b, and 3c.

4 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 8582. Report the losses on the forms and schedules normally used. 4 56700.

- 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 lived 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 Estate With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 for an example.

Table with 5 rows: 5 Enter the smaller of the loss on line 1d or the loss on line 4, 6 Enter \$150,000, 7 Enter modified adjusted gross income, 8 Subtract line 7 from line 6, 9 Multiply line 8 by 50% (.5), 10 Enter the smaller of line 5 or line 9.

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.

Table with 4 rows: 11 Enter \$25,000 reduced by the amount, if any, on line 10, 12 Enter the loss from line 4, 13 Reduce line 12 by the amount on line 10, 14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13.

Part IV Total Losses Allowed

Table with 2 rows: 15 Add the income, if any, on lines 1a and 3a and enter the total, 16 Total losses allowed from all passive activities for 2003. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return. 16 1185.

ALTERNATIVE MINIMUM TAX

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.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
	SEE ATTACHED STATEMENT FOR WORKSHEET 1				
Total. Enter on Form 8582, lines 1a, 1b, and 1c	57885.	-1185.			

Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
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.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total					

Worksheet 5 - Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total				

FOOTNOTES

STATEMENT 1

PAGE 1, LINE 21, OTHER INCOME

THE FOLLOWING PAYMENTS WERE MADE TO
THE BENEFICIARIES OF THE MAURINE
HAMILTON ESTATE IN ACCORDANCE WITH
A COURT ORDERED SETTLEMENT. THE
PAYMENTS REPRESENT ONE-HALF OF THE
ANNUITY RECEIVED FROM THE STATE OF
TEXAS DEFERRED COMPENSATION PLAN.

CAMERON MILZER SSN 229-80-2822

2059.

SCOTT MILZER SSN 003-36-8855

2059.

TOTAL

4118.

FORM 1040	PENSIONS AND ANNUITIES	STATEMENT	2
JEFFERSON NATIONAL			
AMOUNT RECEIVED THIS YEAR	7548.		
NONTAXABLE AMOUNT	4117.		
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D			
AMOUNT INCLUDED IN FORM 1040, LINE 16B			3431.
DEFENSE FINANCE			
AMOUNT RECEIVED THIS YEAR	72180.		
NONTAXABLE AMOUNT			
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D			
AMOUNT INCLUDED IN FORM 1040, LINE 16B			72180.
EMPLOYEES RETIREMENT SYSTEM			
AMOUNT RECEIVED THIS YEAR	22701.		
NONTAXABLE AMOUNT	1142.		
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D			
AMOUNT INCLUDED IN FORM 1040, LINE 16B			21559.
UNITED OF OMAHA			
AMOUNT RECEIVED THIS YEAR	6519.		
NONTAXABLE AMOUNT			
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D			
AMOUNT INCLUDED IN FORM 1040, LINE 16B			6519.
UNITED OF OMAHA			
AMOUNT RECEIVED THIS YEAR	13375.		
NONTAXABLE AMOUNT	1848.		
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D			
AMOUNT INCLUDED IN FORM 1040, LINE 16B			11527.
UNITED OF OMAHA			
AMOUNT RECEIVED THIS YEAR	10339.		
NONTAXABLE AMOUNT			
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D			
AMOUNT INCLUDED IN FORM 1040, LINE 16B			10339.
ST. OF TEXAS DEFERRED COMP.			
AMOUNT RECEIVED THIS YEAR	8235.		
NONTAXABLE AMOUNT			
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D			
AMOUNT INCLUDED IN FORM 1040, LINE 16B			8235.
TOTAL INCLUDED IN FORM 1040, LINE 16B			133790.

CHECK ONLY ONE BOX:

- A. SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)
- X B. MARRIED FILING JOINTLY
- C. MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE AT ANY TIME DURING 2003
- D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE FOR ALL OF 2003

1. ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR FORMS SSA-1099 AND RRB-1099.	32980.
2. ENTER ONE HALF OF LINE 1	16490.
3. ADD THE AMOUNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 12, 13A, 14, 15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099	196816.
4. ENTER THE AMOUNT OF ANY EXCLUSIONS FROM FOREIGN EARNED INCOME, FOREIGN HOUSING, INCOME FROM U.S. POSSESSIONS, OR INCOME FROM PUERTO RICO BY BONA FIDE RESIDENTS OF PUERTO RICO THAT YOU CLAIMED	
5. ADD LINES 2, 3, AND 4.	213306.
6. ADD THE AMOUNTS ON FORM 1040, LINES 23, 24 AND 27 THRU 32A, AND ANY AMOUNT YOU ENTERED ON THE DOTTED LINE NEXT TO LINE 33.	0.
7. SUBTRACT LINE 6 FROM LINE 5	213306.
8. ENTER: \$25,000 IF YOU CHECKED BOX A OR D, OR \$32,000 IF YOU CHECKED BOX B, OR \$-0- IF YOU CHECKED BOX C.	32000.
9. IS THE AMOUNT ON LINE 8 LESS THAN THE AMOUNT ON LINE 7? [] NO. STOP. NONE OF YOUR SOCIAL SECURITY BENEFITS ARE TAXABLE. YOU DO NOT HAVE TO ENTER ANY AMOUNTS ON LINES 20A OR 20B OF FORM 1040. BUT IF YOU ARE MARRIED FILING SEPARATELY AND YOU LIVED APART FROM YOUR SPOUSE FOR ALL OF 2003, ENTER -0- ON LINE 20B. BE SURE YOU ENTERED 'D' TO THE LEFT OF LINE 20A. [X] YES. SUBTRACT LINE 8 FROM LINE 7	181306.
10. ENTER \$9,000 IF YOU CHECKED BOX A OR D, \$12,000 IF YOU CHECKED BOX B \$-0- IF YOU CHECKED BOX C	12000.
11. SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0-.	169306.
12. ENTER THE SMALLER OF LINE 9 OR LINE 10	12000.
13. ENTER ONE HALF OF LINE 12.	6000.
14. ENTER THE SMALLER OF LINE 2 OR LINE 13	6000.
15. MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-	143910.
16. ADD LINES 14 AND 15.	149910.
17. MULTIPLY LINE 1 BY 85% (.85)	28033.
18. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17	28033.
* ENTER THE AMOUNT FROM LINE 1 ABOVE ON FORM 1040, LINE 20A	
* ENTER THE AMOUNT FROM LINE 18 ABOVE ON FORM 1040, LINE 20B	

FORM 1040

PERSONAL EXEMPTION WORKSHEET

STATEMENT 4

1. IS THE AMOUNT ON FORM 1040, LINE 35, MORE THAN THE AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR FILING STATUS?
 NO. STOP. MULTIPLY \$3,050 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 39.
 YES. GO TO LINE 2.
2. MULTIPLY \$3,050 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D 6100.
3. ENTER THE AMOUNT FROM FORM 1040, LINE 35 224849.
4. ENTER THE AMOUNT FOR YOUR FILING STATUS 209250.
 MARRIED FILING SEPARATE \$104,625
 SINGLE \$139,500
 HEAD OF HOUSEHOLD \$174,400
 MARRIED FILING JOINT OR WIDOW(ER) \$209,250
5. SUBTRACT LINE 4 FROM LINE 3 15599.
 IF LINE 5 IS MORE THAN \$122,500 (\$61,250 IF MARRIED FILING SEPARATE) ENTER ZERO ON FORM 1040, LINE 39.
6. DIVIDE LINE 5 BY \$2,500 (\$1,250 IF MFS) 7.
7. MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT AS A DECIMAL 0.14
8. MULTIPLY LINE 2 BY LINE 7 854.
9. SUBTRACT LINE 8 FROM LINE 2. TOTAL TO FORM 1040, LINE 39. 5246.

FORM 1040

IRA DISTRIBUTIONS

STATEMENT 5

NAME OF PAYER	GROSS DISTRIBUTION	TAXABLE AMOUNT
UNITED OF OMAHA	3423.	3423.
TOTAL TO FORM 1040, LINE 15	<u>3423.</u>	<u>3423.</u>

FORM 1040

FEDERAL INCOME TAX WITHHELD

STATEMENT 6

T S DESCRIPTION	AMOUNT
T DEFENSE FINANCE	10471.
TOTAL TO FORM 1040, LINE 61	<u>10471.</u>

FORM 1040		LATE PAYMENT INTEREST				STATEMENT	7
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST	
TAX DUE	04/15/04	15229.	15229.	.0500	122	256.	
DATE FILED	08/15/04		15485.				
TOTAL LATE PAYMENT INTEREST						256.	

FORM 1040		LATE PAYMENT PENALTY				STATEMENT	8
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY		
TAX DUE	04/15/04	15229.	15229.	4	305.		
DATE FILED	08/15/04						
TOTAL LATE PAYMENT PENALTY					305.		

SCHEDULE D		NET LONG-TERM GAIN OR LOSS FROM FORMS 4797, 2439, 6252, 4684, 6781 AND 8824		STATEMENT	9
DESCRIPTION OF PROPERTY	GAIN OR LOSS	POST MAY 5 GAIN OR LOSS	28% GAIN		
FORM 4797	63311.				
TOTAL TO SCHEDULE D, PART II, LINE 11	63311.				

SCHEDULE D UNRECAPTURED SECTION 1250 GAIN STATEMENT 10

1. IF YOU HAVE A SECTION 1250 PROPERTY IN PART III OF FORM 4797 FOR WHICH YOU MADE AN ENTRY IN PART I OF FORM 4797, ENTER THE SMALLER OF LINE 22 OR LINE 24 OF FORM 4797 FOR THAT PROPERTY. IF YOU DID NOT HAVE ANY SUCH PROPERTY, GO TO LINE 4	17361.
2. ENTER THE AMOUNT FROM FORM 4797, LINE 26G, FOR THE PROPERTY FOR WHICH YOU MADE AN ENTRY ON LINE 1	
3. SUBTRACT LINE 2 FROM LINE 1	17361.
4. ENTER THE TOTAL UNRECAPTURED SECTION 1250 GAIN INCLUDED ON LINE 26 OR LINE 37 OF FORM(S) 6252 FROM INSTALLMENT SALES OF TRADE OR BUSINESS PROPERTY HELD MORE THAN 1 YEAR . .	
5. ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1 FROM A PARTNERSHIP OR AN S CORPORATION AS "UNRECAPTURED SECTION 1250 GAIN"	
6. ADD LINES 3 THROUGH 5	17361.
7. ENTER THE SMALLER OF LINE 6 OR THE GAIN FROM FORM 4797, LINE 7, COLUMN(G)	17361.
8. ENTER THE AMOUNT, IF ANY, FROM FORM 4797, LINE 8, COLUMN(G)	
9. SUBTRACT LINE 8 FROM LINE 7. IF ZERO OR LESS, ENTER -0-	17361.
10. ENTER THE AMOUNT OF ANY GAIN FROM THE SALE OR EXCHANGE OF AN INTEREST IN A PARTNERSHIP ATTRIBUTABLE TO UNRECAPTURED SECTION 1250 GAIN	
11. ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1, FORMS 1099-DIV, OR FORM 2439 AS "UNRECAPTURED SECTION 1250 GAIN" FROM AN ESTATE, TRUST, REAL ESTATE INVESTMENT TRUST, OR MUTUAL FUND (OR OTHER REGULATED INVESTMENT COMPANY)	
12. ENTER THE TOTAL OF ANY UNRECAPTURED SECTION 1250 GAIN FROM SALES (INCLUDING INSTALLMENT SALES) OR OTHER DISPOSITIONS OF SECTION 1250 PROPERTY HELD MORE THAN 1 YEAR FOR WHICH YOU DID NOT MAKE AN ENTRY IN PART I OF FORM 4797 FOR THE YEAR OF SALE . .	
13. ADD LINES 9 THROUGH 12	17361.
14. IF YOU HAD ANY SECTION 1202 GAIN OR COLLECTIBLE GAIN OR (LOSS), ENTER THE TOTAL OF LINES 1 THROUGH 4 OF THE 28% RATE GAIN WORKSHEET	
15. ENTER THE (LOSS), IF ANY, FROM SCH D, LINE 7B. IF SCH D, LINE 7B, IS ZERO OR A GAIN ENTER -0-	0.
16. ENTER YOUR LONG-TERM CAPITAL LOSS CARRYOVERS FROM SCHEDULE D, LINE 14, AND SCHEDULE K-1 (FORM 1041), LINE 13C	
17. COMBINE LINES 14 THROUGH 16. IF THE RESULT IS ZERO OR A GAIN, ENTER -0-. IF THE RESULT IS A (LOSS), ENTER IT AS A POSITIVE AMOUNT	0.
18. SUBTRACT LINE 17 FROM LINE 13. IF ZERO OR LESS, ENTER -0-. ENTER THE RESULT ON SCHEDULE D, LINE 19	17361.

SCHEDULE D	ALTERNATIVE MINIMUM TAX		STATEMENT 11
NET LONG-TERM GAIN OR LOSS FROM FORMS 4797, 2439, 6252, 4684, 6781 AND 8824			
DESCRIPTION OF PROPERTY	GAIN OR LOSS	POST MAY 5 GAIN OR LOSS	28% GAIN
FORM 4797 AMT	57885.		
TOTAL TO SCHEDULE D, PART II, LINE 11	57885.		

SCHEDULE D	UNRECAPTURED SECTION 1250 GAIN - AMT	STATEMENT 12
1. IF YOU HAVE A SECTION 1250 PROPERTY IN PART III OF FORM 4797 FOR WHICH YOU MADE AN ENTRY IN PART I OF FORM 4797, ENTER THE SMALLER OF LINE 22 OR LINE 24 OF FORM 4797 FOR THAT PROPERTY. IF YOU DID NOT HAVE ANY SUCH PROPERTY, GO TO LINE 4		11935.
2. ENTER THE AMOUNT FROM FORM 4797, LINE 26G, FOR THE PROPERTY FOR WHICH YOU MADE AN ENTRY ON LINE 1		11935.
3. SUBTRACT LINE 2 FROM LINE 1		11935.
4. ENTER THE TOTAL UNRECAPTURED SECTION 1250 GAIN INCLUDED ON LINE 26 OR LINE 37 OF FORM(S) 6252 FROM INSTALLMENT SALES OF TRADE OR BUSINESS PROPERTY HELD MORE THAN 1 YEAR . .		
5. ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1 FROM A PARTNERSHIP OR AN S CORPORATION AS "UNRECAPTURED SECTION 1250 GAIN"		
6. ADD LINES 3 THROUGH 5		11935.
7. ENTER THE SMALLER OF LINE 6 OR THE GAIN FROM FORM 4797, LINE 7, COLUMN(G)	11935.	
8. ENTER THE AMOUNT, IF ANY, FROM FORM 4797, LINE 8, COLUMN(G)		
9. SUBTRACT LINE 8 FROM LINE 7. IF ZERO OR LESS, ENTER -0- . . .		11935.
10. ENTER THE AMOUNT OF ANY GAIN FROM THE SALE OR EXCHANGE OF AN INTEREST IN A PARTNERSHIP ATTRIBUTABLE TO UNRECAPTURED SECTION 1250 GAIN		
11. ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1, FORMS 1099-DIV, OR FORM 2439 AS "UNRECAPTURED SECTION 1250 GAIN" FROM AN ESTATE, TRUST, REAL ESTATE INVESTMENT TRUST, OR MUTUAL FUND (OR OTHER REGULATED INVESTMENT COMPANY)		
12. ENTER THE TOTAL OF ANY UNRECAPTURED SECTION 1250 GAIN FROM SALES (INCLUDING INSTALLMENT SALES) OR OTHER DISPOSITIONS OF SECTION 1250 PROPERTY HELD MORE THAN 1 YEAR FOR WHICH YOU DID NOT MAKE AN ENTRY IN PART I OF FORM 4797 FOR THE YEAR OF SALE . .		
13. ADD LINES 9 THROUGH 12		11935.
14. IF YOU HAD ANY SECTION 1202 GAIN OR COLLECTIBLE GAIN OR (LOSS), ENTER THE TOTAL OF LINES 1 THROUGH 4 OF THE 28% RATE GAIN WORKSHEET		
15. ENTER THE (LOSS), IF ANY, FROM SCH D, LINE 7B. IF SCH D, LINE 7B, IS ZERO OR A GAIN ENTER -0-	0.	
16. ENTER YOUR LONG-TERM CAPITAL LOSS CARRYOVERS FROM SCHEDULE D, LINE 14, AND SCHEDULE K-1 (FORM 1041), LINE 13C	0.	
17. COMBINE LINES 14 THROUGH 16. IF THE RESULT IS ZERO OR A GAIN, ENTER -0-. IF THE RESULT IS A (LOSS), ENTER IT AS A POSITIVE AMOUNT		0.
18. SUBTRACT LINE 17 FROM LINE 13. IF ZERO OR LESS, ENTER -0-. ENTER THE RESULT ON SCHEDULE D, LINE 19		11935.

SCHEDULE D	ALTERNATIVE MINIMUM TAX SCHEDULE D TAX WORKSHEET	STATEMENT 13
1	ENTER YOUR TAXABLE INCOME FROM FORM 1040, LINE 40	
2	ENTER YOUR QUALIFIED DIVIDENDS FROM FORM 1040, LINE 9B	
3	IF YOU ARE FILING FORM 4952, ENTER THE AMOUNT FROM FORM 4952, LINE 4G.	
4	ENTER THE AMOUNT FROM FORM 4952, LINE 4E	
5	SUBTRACT LINE 4 FROM LINE 3	
6	SUBTRACT LINE 5 FROM LINE 2	
7	ENTER THE SMALLER OF LINE 16 OR 17A OF SCHEDULE D AMT	57885.
8	ENTER THE SMALLER OF LN 3 OR LN 4 .	
9	SUBTRACT LINE 8 FROM LINE 7. IF ZERO OR LESS, ENTER -0-	57885.
10	ADD LINES 6 AND 9	57885.
11	ADD LINES 19 AND 20 OF SCHEDULE D AMT	11935.
12	ENTER THE SMALLER LINE 9 OR LINE 11	11935.
13	SUBTRACT LINE 12 FROM LINE 10. IF ZERO OR LESS, ENTER -0-.	
	TOTAL TO SCHEDULE D, LINE 26	45950.

SCHEDULE E	OTHER EXPENSES	STATEMENT 14
HOUSE - 9862 CHILDRESS DR., AUSTIN, TX		
DESCRIPTION		AMOUNT
PEST CONTROL		81.
TOTAL TO SCHEDULE E, PAGE 1, LINE 18		81.

FORM 6251	PASSIVE ACTIVITIES	STATEMENT 15		
NAME OF ACTIVITY	FORM	NET INCOME (LOSS)		ADJUSTMENT
		AMT	REGULAR	
LAND	FORM 4797	6947.	6947.	
HOUSE	FORM 4797	50938.	56364.	-5426.
HOUSE - 9862 CHILDRESS DR., AUSTIN, TX	SCH E	-1185.	-1271.	86.
ALFRED HAMILTON (DEC. 04/08/04)	FORM 4835		-353.	353.
TOTAL TO FORM 6251, LINE 18				-4987.

FORM 6251

EXEMPTION WORKSHEET

STATEMENT 16

1	ENTER: \$40,250 IF SINGLE OR HEAD OF HOUSEHOLD; \$58,000 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$29,000 IF MARRIED FILING SEPARATELY.	58000.
2	ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 28	219862.
3	ENTER: \$112,500 IF SINGLE OR HEAD OF HOUSEHOLD; \$150,000 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$75,000 IF MARRIED FILING SEPARATELY	150000.
4	SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS ENTER -0-	69862.
5	MULTIPLY LINE 4 BY 25% (.25).	17466.
6	SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0-. IF THIS FORM IS FOR A CHILD UNDER AGE 14, GO TO LINE 7 BELOW. OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30	40534.
7	CHILD'S MINIMUM EXEMPTION AMOUNT.	
8	ENTER THE CHILD'S EARNED INCOME, IF ANY	
9	ADD LINES 7 AND 8	
10	ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30	

FORM 4835

OTHER INCOME

STATEMENT 17

DESCRIPTION	AMOUNT
RENTS	570.
TOTAL TO FORM 4835, PART I, LINE 6	570.

FORM 8582 ACTIVE RENTAL OF REAL ESTATE - WORKSHEET 1 STATEMENT 18

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
HOUSE - 9862 CHILDRESS DR., AUSTIN, TX ALFRED HAMILTON (DEC. 04/08/04)	63311.	-1271.		62040.	
	0.	-353.			-353.
TOTALS	63311.	-1624.		62040.	-353.

FORM 8582 SUMMARY OF PASSIVE ACTIVITIES STATEMENT 19

RENTAL E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
X LAND	FORM 4797	6947.		6947.		
X HOUSE	FORM 4797	56364.		56364.		
X HOUSE - 9862 CHILDRESS DR., AUSTIN, TX	SCH E	-1271.		-1271.		1271.
X ALFRED HAMILTON (DEC. 04/08/04)	FORM 4835	-353.		-353.		353.
TOTALS		61687.		61687.		1624.

PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME

TOTAL TO FORM 8582, LINE 16

1624.

FORM 8582

ALTERNATIVE MINIMUM TAX
ACTIVE RENTAL OF REAL ESTATE - WORKSHEET 1

STATEMENT 20

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
HOUSE - 9862 CHILDRESS DR., AUSTIN, TX	57885.	-1185.		56700.	
TOTALS	57885.	-1185.		56700.	

FORM 8582AMT

SUMMARY OF PASSIVE ACTIVITIES - AMT

STATEMENT 21

RE A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
X LAND	FORM 4797	6947.		6947.		
X HOUSE	FORM 4797	50938.		50938.		
X HOUSE - 9862 CHILDRESS DR., AUSTIN, TX	SCH E	-1185.		-1185.		1185.
TOTALS		56700.		56700.		1185.
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME						
TOTAL TO FORM 8582AMT, LINE 16						1185.



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Your Future, Our Business

