

1995

Form 1040 1983

Compu-
tation

29a Check ☐ You were 65 or older, ☐ Blind, ☐ Spouse was 65 or older, ☐ Blind.

Add the number of boxes checked above and enter the total here **33a** ☐

b If your parent (or someone else) can claim you as a dependent, check here **33b** ☐

c If you are married filing separately and your spouse itemizes deductions or you are a dual-status alien, see page 23 and check here **33c** ☐

34 Enter the larger of your: **34** 159,488.

Itemized deductions from Schedule A, line 28, OR
Standard deduction shown below for your filing status. But if you checked any box on line 33a or b, go to page 23 to find your standard deduction. If you checked box 33c, your standard deduction is zero.

- Single - \$3,900 • Married filing jointly or Qualifying widow(er) - \$6,550
- Head of household - \$5,750 • Married filing separately - \$3,275

35 Subtract line 34 from line 32 **35** 1,215,642.

36 If line 32 is \$86,025 or less, multiply \$2,500 by the total number of exemptions claimed on line 6e. If line 32 is over \$86,025, see the worksheet on page 23 for the amount to enter **36** 0.

37 Taxable income. Subtract line 36 from line 35. If line 36 is more than line 35, enter -0- **37** 1,215,642.

38 Tax. Check if from **a** ☐ Tax Table, **b** ☒ Tax Rate Schedules, **c** ☐ Capital Gain Tax Worksheet, or **d** ☐ Form 8615 (see page 24). Amount from Form(s) 8814 **38** 457,083.

39 Additional taxes. Check if from **a** ☐ Form 4970 **b** ☐ Form 4972 **39**

40 Add lines 38 and 39 **40** 457,083.

Credits

41 Credit for child and dependent care expenses. Attach Form 2441 **41**

42 Credit for the elderly or the disabled. Attach Schedule R **42**

43 Foreign tax credit. Attach Form 1116 **43**

44 Other credits. Check if from **a** ☐ Form 3800 **44**

b ☐ Form 8396 **c** ☐ Form 8801 **d** ☐ Form (specify) _____

45 Add lines 41 through 44 **45**

46 Subtract line 45 from line 40. If line 45 is more than line 40, enter -0- **46** 457,083.

Other
Taxes

47 Self-employment tax. Attach Schedule SE **47** 37,798.

48 Alternative minimum tax. Attach Form 6251 **48** 0.

49 Recapture taxes. Check if from **a** ☐ Form 4255 **b** ☐ Form 8611 **c** ☐ Form 8828 **49**

50 Social security and Medicare tax on tip income not reported to employer. Attach Form 4137 **50**

51 Tax on qualified retirement plans, including IRAs. If required, attach Form 5329 **51**

52 Advance earned income credit payments from Form W-2 **52**

53 Household employment taxes. Attach Schedule H **53** 924.

54 Add lines 46 through 53. This is your total tax **54** 495,805.

Payments

55 Federal income tax withheld. If any is from Form(s) 1099, check **55** 1,638.

56 1995 estimated tax payments and amount applied from 1994 return **56** 350,000.

57 Earned income credit. Attach Schedule EIC if you have a qualifying child. Nontaxable earned income: amount **57**

and type **57**

58 Amount paid with Form 4868 (extension request) **58**

59 Excess social security and RRTA tax withheld (see page 32) **59**

60 Other payments. Check if from **a** ☐ Form 2439 **b** ☐ Form 4136 **60**

61 Add lines 55 through 60. These are your total payments **61** 351,638.

Refund or
Amount
You Owe

62 If line 61 is more than line 54, subtract line 54 from line 61. This is the amount you OVERPAID **62**

63 Amount of line 62 you want REFUNDED TO YOU **63**

64 Amount of line 62 you want APPLIED TO YOUR 1996 ESTIMATED TAX **64**

65 If line 54 is more than line 61, subtract line 61 from line 54. This is the AMOUNT YOU OWE. For details on how to pay and use Form 1040-V, Payment Voucher, see page 33 **65** 144,167.

66 Estimated tax penalty (see page 33). Also include on line 65 **66**

Sign
Here

Keep a copy
of this return
for your
records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Date

Your occupation

ATTORNEY

Spouse's signature. If a joint return, BOTH must sign.

Date

Spouse's occupation

HOUSEWIFE

Preparer's
signature

Date

Check if self-
employed ☐

Preparer's social security no.

Paid

Preparer's
Use OnlyFirm's name (or
your name if self-
employed) and address

MOORE & CUBBEDGE, LLP
366 POWDER SPRINGS ST
MARIETTA, GA

E.I. No.

30064

SCHEDULE A-1
(Form 1040)

Schedule A - Itemized Deductions
(Schedule B is on page 2)

1995

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040.

▶ See instructions for Schedule A (Form 1040).

Attachment
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

ROY E & MARIE BARNES

Medical and Dental Expenses

Caution: Do not include expenses reimbursed or paid by others.

- 1 Medical and dental expenses (see page A-1) **SEE STATEMENT 8** **524.**
- 2 Enter amount from Form 1040, line 32 **2 1,375,130.**
- 3 Multiply line 2 above by 7.5% (.075) **103,135.**
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- **0.**

Taxes You Paid

(See page A-1.)

- 5 State and local income taxes **SEE STATEMENT 5** **55,384.**
- 6 Real estate taxes (see page A-2) **7,021.**
- 7 Personal property taxes **734.**
- 8 Other taxes - List type and amount

9 Add lines 5 through 8 **63,139.**

Interest You Paid
(See page A-2.)

- 10 Home mortgage interest and points reported to you on Form 1098 **2,703.**
- 11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-3 and show that person's name, identifying no., and address
- 12 Points not reported to you on Form 1098. See page A-3 for special rules
- 13 Investment interest. If required, attach Form 4952. (See page A-3.) **STMT 7** **47,384.**
- 14 Add lines 10 through 13 **50,087.**

Gifts to Charity

If you made a gift and got a benefit for it, see page A-3.

- 15 Gifts by cash or check. If any gift of \$250 or more, see page A-3 **STMT 6** **83,288.**
- 16 Other than by cash or check. If any gift of \$250 or more, see page A-3. If over \$500, you MUST attach Form 8283
- 17 Carryover from prior year
- 18 Add lines 15 through 17 **83,288.**

Casualty and Theft Losses

- 19 Casualty or theft loss(es). Attach Form 4684. (See page A-4.)

Job Expenses and Most Other Miscellaneous Deductions

(See page A-5 for expenses to deduct here.)

- 20 Unreimbursed employee expenses - job travel, union dues, job education, etc. If required, you MUST attach Form 2106 or 2106-EZ. (See page A-5.)
- 21 Tax preparation fees **365.**
- 22 Other expenses - investment, safe deposit box, etc. List type and amount
▶ **IRA FEE**
- 23 Add lines 20 through 22 **365.**
- 24 Enter amount from Form 1040, line 32 **24 1,375,130.**
- 25 Multiply line 24 above by 2% (.02) **27,503.**
- 26 Subtract line 25 from line 23. If line 25 is more than line 23, enter -0- **0.**

Other Miscellaneous Deductions

- 27 Other - from list on page A-5. List type and amount
▶ **ESTATE TAX DEDUCTION - ESTATE OF CLYDE GOVAN** **787.**
- 27 **787.**

Total Itemized Deductions

- 28 Is Form 1040, line 32, over \$114,700 (over \$57,350 if married filing separately)? **STMT 9**
- NO. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter on Form 1040, line 34, the larger of this amount or your standard deduction. **159,488.**
- YES. Your deduction may be limited. See page A-5 for the amount to enter.

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

Your social security number

ROY E & MARIE BARNES

Schedule B - Interest and Dividend Income

Attachment
Sequence No. 08Part I
Interest
Income

Note: If you had over \$400 in taxable interest income, you must also complete Part III.

- 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 ▶

GEORGIA STATE BANK

GEORGIA STATE BANK

FROM K-1 - EFFICIENCY LODGE

FROM K-1 - ESTATE OF CLYDE GOVAN

FROM K-1 - LAWYERS REALTY ASSOC.

FROM K-1 - AUSTELL PTRS.

Amount

1,170.

1,436.

20,807.

434.

4,071.

49.

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

- 3 Excludable interest on series EE U.S. savings bonds issued after 1989 from Form 8815, line 14. You MUST attach Form 8815 to Form 1040

- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a

27,967.

27,967.

Part II
Dividend
Income

Note: If you had over \$400 in gross dividends and/or other distributions on stock, you must also complete Part III.

- 5 List name of payer. Include gross dividends and/or other distributions on stock here. Any capital gain distributions and nontaxable distributions will be deducted on lines 7 and 8 ▶

ETOWAH BANK

SMITH BARNEY

DEAN WITTER

JBC BANCSHARES

WHEAT STREET SCL

FROM K-1 - ESTATE OF CLYDE GOVAN

Amount

5,994.

15,129.

35.

324.

5,113.

2,319.

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 total dividends shown on that form.

- 6 Add the amounts on line 5

- 7 Capital gain distributions. Enter here and on Schedule D*

- 8 Nontaxable distributions

- 9 Add lines 7 and 8

- 10 Subtract line 9 from line 6. Enter the result here and on Form 1040, line 9

28,914.

28,914.

*If you do not need Schedule D to report any other gains or losses.

Part III
Foreign
Accounts
and
Trusts

If you had over \$400 of interest or dividends or had a foreign account or were a grantor of, or a transferor to, a foreign trust, you must complete this part.

- 11a At any time during 1995, 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?

b If "Yes," enter the name of the foreign country ▶

- 12 Were you the grantor of, or transferor to, a foreign trust that existed during 1995, whether or not you have any beneficial interest in it? If "Yes," you may have to file Form 3520, 3520-A, or 926

Yes

No

X

X

SCHEDULE D

Capital Gains and Losses

OMB No. 1545-0047

Form 1040

1995

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040

▶ See instructions for Schedule D (Form 1040)

Attachment
Sequence No. 12

Name(s) shown on Form 1040

Your social security number

ROY E & MARIE BARNES

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	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (e) from (d)	(g) GAIN If (d) is more than (e), subtract (e) from (d)
	(c) Date sold				
1 250 SH SCI MED LIFE	01/17/95 02/22/95	15,387.	14,895.		492.
2 Enter your short-term totals, if any	2				
3 Total short-term sales price amounts. Add column (d) of lines 1 and 2	3	15,387.			
4 Short-term gain from Forms 2119 and 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 9 of your 1994 Capital Loss Carryover Worksheet	6				
7 Add lines 1 through 6, in columns (f) and (g)	7				492.
8 Net short-term capital gain or (loss). Combine columns (f) and (g) of line 7	8				492.

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

9 500 SH ALLATOONA FEDERAL	00/00/87 05/17/95	7,800.	5,000.		2,800.
10 Enter your long-term totals, if any	10				
11 Total long-term sales price amounts. Add column (d) of lines 9 and 10	11	7,800.			
12 Gain from Form 4797; long-term gain from Forms 2119, 2439, and 6252; and long-term gain or loss from Forms 4684, 6781, and 8824	12	SEE STATEMENT 11			41,566.
13 Net long-term gain or loss from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	13				
14 Capital gain distributions	14				
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of your 1994 Capital Loss Carryover Worksheet	15		380,310.		
16 Add lines 9 through 15, in columns (f) and (g)	16		380,310.		44,366.
17 Net long-term capital gain or (loss). Combine columns (f) and (g) of line 16	17				<335,944.>

Part III Summary of Parts I and II

18 Combine lines 8 and 17. If a loss, go to line 19. If a gain, enter the gain on Form 1040, line 13. Note: If both lines 17 and 18 are gains, see the Capital Gain Tax Worksheet	18	<335,452.>
19 If line 18 is a loss, enter here and as a (loss) on Form 1040, line 13, the smaller of these losses: a The loss on line 18; or b (\$3,000) or, if married filing separately, (\$1,500) Note: See the Capital Loss Carryover Worksheet if the loss on line 18 exceeds the loss on line 19 or if Form 1040, line 35, is a loss.	19	3,000
SEE STATEMENT 10		

4952

Form
Department of the Treasury
Internal Revenue Service

Investment Interest Expense Deduction

► Attach to your tax return.

OMB No. 1545-0047

1995

Attachment
Sequence No. 12A

Name(s) shown on return

Identifying number

ROY E & MARIE BARNES

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 1995.	SEE STATEMENT 12	1	30,513.
2	Disallowed investment interest expense from 1994 Form 4952, line 7		2	66,077.
3	Total investment interest expense. Add lines 1 and 2		3	96,590.

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	SEE STATEMENT 13	4a	47,384.
b	Net gain from the disposition of property held for investment	4b		
c	Net capital gain from the disposition of property held for investment	4c		
d	Subtract line 4c from line 4b. If zero or less, enter -0-		4d	
e	Enter all or part of the amount on line 4c that you elect to include in investment income. Do not enter more than the amount on line 4b		4e	
f	Investment income. Add lines 4a, 4d, and 4e		4f	47,384.
5	Investment expenses		5	
6	Net investment income. Subtract line 5 from line 4f. If zero or less, enter -0-		6	47,384.

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 1996. Subtract line 6 from line 3. If zero or less, enter -0-	SEE STATEMENT 14	7	49,206.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6		8	47,384.

4952Form
Department of the Treasury
Internal Revenue Service**Investment Interest Expense Deduction**

▶ Attach to your tax return.

OMB No. 1545-0191

1995
Attachment
Sequence No. 12A

Name(s) shown on return

Identifying number

ROY E & MARIE BARNES

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 1995.	1	30,513.
2	Disallowed investment interest expense from 1994 Form 4952, line 7	2	66,077.
3	Total investment interest expense. Add lines 1 and 2	3	96,590.

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	47,384.
b	Net gain from the disposition of property held for investment	4b	
c	Net capital gain from the disposition of property held for investment	4c	
d	Subtract line 4c from line 4b. If zero or less, enter -0-	4d	
e	Enter all or part of the amount on line 4c that you elect to include in investment income. Do not enter more than the amount on line 4b	4e	
f	Investment income. Add lines 4a, 4d, and 4e	4f	47,384.
5	Investment expenses	5	
6	Net investment income. Subtract line 5 from line 4f. If zero or less, enter -0-	6	47,384.

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 1996. Subtract line 6 from line 3. If zero or less, enter -0-	7	49,206.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6	8	47,384.

REGULAR FORM 4952, LINE 8
 LESS RECOMPUTED FORM 4952, LINE 8
 INTEREST ADJUSTMENT - FORM 6251 LINE 7

47,384.
 47,384.

SCHEDULE E

Supplemental Income and Loss

OMB No. 1545-0047

(Form 1040)

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

1995

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040 or Form 1041.

▶ See instructions for Schedule E (Form 1040).

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

ROY E & MARIE BARNES

Part I Income or Loss From Rental Real Estate and Royalties Note: Report income and expenses from your business of renting personal property on Schedule C or C-EZ. Report farm rental income or loss from Form 4835 on page 2, line 39.

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 for personal purposes for more than the greater of 14 days or 10% of the total days rented at fair rental value during the tax year?	Yes	No
A	RENTAL BUILDINGS & HOUSES				X
B					
C					

Income:		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3	Rents received	41,079.			41,079.
4	Royalties received				
Expenses:					
5	Advertising				
6	Auto and travel				
7	Cleaning and maintenance				
8	Commissions				
9	Insurance	2,333.			
10	Legal and other professional fees				
11	Management fees				
12	Mortgage interest paid to banks, etc.	4,602.			4,602.
13	Other interest				
14	Repairs	16,156.			
15	Supplies				
16	Taxes	525.			
17	Utilities	2,916.			
18	Other (list) ▶ SEE STATEMENT 15	3,783.			
19	Add lines 5 through 18	30,315.			30,315.
20	Depreciation expense or depletion	16,726.			16,726.
21	Total expenses. Add lines 19 and 20	47,041.			
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-2 to find out if you must file Form 6198	<5,962.>			
23	Deductible rental real estate loss. Caution: Your rental real estate loss on line 22 may be limited. See page E-3 to find out if you must file Form 8582. Real estate professionals must complete line 42 on page 2	<5,962.>			
24	Income. Add positive amounts shown on line 22. Do not include any losses				
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter the total losses here				(5,962.)
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 39 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 40 on page 2				<5,962.>

Name(s) shown on return. Do not enter name and Social Security number if shown on Page 1.

Your social security number

ROY E & MARIE BARNES

Note: If you report amounts from farming or fishing on Schedule E, you must enter your gross income from these activities on line 41 below.

Real Estate professionals must complete line 42 below.

Part II Income or Loss From Partnerships and S Corporations Note: If you report a loss from an at-risk activity, you MUST check either column (e) or (f) of line 27 to describe your investment in the activity. If you check column (f), you must attach Form 6198.

27	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	Investment At Risk? (e) All is at risk (f) Some is not at risk
A	EFFICIENCY LODGE	S			X
B	AUSTELL PTRS.	P			X
C	LAWYERS REALTY ASSOC.	P			X
D	BARNES BROWNING TANKSLEY & CASUR	P			X
E	ARC ENTERPRISES	P			X

Passive Income and Loss			Nonpassive Income and Loss		
	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A		144,459.			
B	3,210.				
C		10,628.			
D			1,135.	2,978.	1,184,096.
E	3,112.				
28a Totals		155,087.			1,184,096.
b Totals	6,322.		1,135.	2,978.	
29 Add columns (h) and (k) of line 28a					29 1,339,183.
30 Add columns (g), (i), and (j) of line 28b					30 (10,435.)
31 Total partnership and S corporation income or (loss). Combine lines 29 and 30. Enter the result here and include in the total on line 40 below					31 1,328,748.

Part III Income or Loss From Estates and Trusts

32	(a) Name		(b) Employer identification number	
A	ESTATE OF CLYDE GOVAN		57-6161499	
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				116.
B				
33a	Totals			116.
b	Totals			
34	Add columns (d) and (f) of line 33a			34 116.
35	Add columns (c) and (e) of line 33b			35 ()
36	Total estate and trust income or (loss). Combine lines 34 and 35. Enter the result here and include in the total on line 40 below			36 116.

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

37	(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
38 Combine columns (d) and (e) only. Enter the result here and include in the total on line 40 below					38

Part V Summary

39 Net farm rental income or (loss) from Form 4835. Also, complete line 41 below		39	
40 TOTAL income or (loss). Combine lines 26, 31, 36, 38, and 39. Enter the result here and on Form 1040, line 17		40	1,322,902.
41 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 13	41		
42 Reconciliation for Real Estate Professionals. If you were a real estate professional, 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	42		

1995 Income from Passthroughs

EFFICIENCY LODGE
I.D. NUMBER: [REDACTED]
TYPE: S CORPORATION

ACTIVITY INFORMATION:

EFFICIENCY LODGE

OTHER PASSIVE ACTIVITY

ORDINARY INCOME (LOSS)	144,459
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SCHEDULE E ACTIVITY INCOME (LOSS)	144,459
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OTHER K-1 INFORMATION:

INTEREST	20,807
CONTRIBUTIONS - 50% LIMITATION	1,143
INVESTMENT INCOME	11,194

1995 Income from Passthroughs

AUSTELL PTRS.

I.D. NUMBER: [REDACTED]

TYPE: PARTNERSHIP

ACTIVITY INFORMATION:

AUSTELL PTRS.

OTHER PASSIVE ACTIVITY

RENTAL REAL ESTATE INCOME (LOSS)

-3,210

SCHEDULE E ACTIVITY INCOME (LOSS)

-3,210

PASSIVE SECTION 1231 GAIN (LOSS)

41,566

TOTAL ACTIVITY INCOME/LOSS

41,566

-3,210

ALLOWABLE PASSIVE LOSS FROM FORM 8582

-3,210

OTHER K-1 INFORMATION:

INTEREST

49

1996 Income from Passthroughs

LAWYERS REALTY ASSOC.

I.D. NUMBER: [REDACTED]

TYPE: PARTNERSHIP

ACTIVITY INFORMATION:

LAWYERS REALTY ASSOC.

RENTAL REAL ESTATE - ACTIVE PARTICIPATION

RENTAL REAL ESTATE INCOME (LOSS)	10,628
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SCHEDULE E ACTIVITY INCOME (LOSS)	10,628
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TAX PREFERENCE ITEMS:

OTHER K-1 INFORMATION:

INTEREST	4,071
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1995 Income from Passthroughs

BARNES BROWNING TANKSLEY & CASUR
I.D. NUMBER: [REDACTED]
TYPE: PARTNERSHIP

TAXABLE INCOME (LOSS) SUMMARY:

NONPASSIVE LOSS ALLOWED	-1,135
SECTION 179 DEDUCTION	-2,978
NONPASSIVE INCOME	1,184,096
NET INCOME (LOSS) FOR PASSTHROUGH ENTITY	<u>1,179,983</u>

ACTIVITY INFORMATION:

ACTIVITY NO. 1

TRADE OR BUSINESS - MATERIAL PARTICIPATION

ACTIVITY NO. 10002

TRADE OR BUSINESS - MATERIAL PARTICIPATION

FROM STATEMENT SBE -1,135

SCHEDULE E ACTIVITY INCOME (LOSS) -1,135

BARNES BROWNING TANKSLEY & CASUR

TRADE OR BUSINESS - MATERIAL PARTICIPATION

ORDINARY INCOME (LOSS)	1,186,544
DEPRECIATION/AMORTIZATION	-2,448

SCHEDULE E ACTIVITY INCOME (LOSS) 1,184,096

OTHER K-1 INFORMATION:

CONTRIBUTIONS - 50% LIMITATION	4,270
HEALTH INSURANCE PREMIUMS	748
SELF-EMPLOYMENT EARNINGS (LOSS)	1,186,544

1996 Income from Passthroughs

ARC ENTERPRISES

I.D. NUMBER: [REDACTED]

TYPE: PARTNERSHIP

ACTIVITY INFORMATION:

ARC ENTERPRISES

RENTAL REAL ESTATE - ACTIVE PARTICIPATION

RENTAL REAL ESTATE INCOME (LOSS)	-3,112	
----------------------------------	--------	--

SCHEDULE E ACTIVITY INCOME (LOSS)		-3,112
-----------------------------------	--	--------

ALLOWABLE PASSIVE LOSS FROM FORM 8582		-3,112
---------------------------------------	--	--------

1995 Income from Passthroughs

ESTATE OF CLYDE GOVAN

I.D. NUMBER: [REDACTED]

TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

ESTATE OF CLYDE GOVAN

OTHER PORTFOLIO INCOME (LOSS)	116
-------------------------------	-----

TOTAL NONPASSIVE ACTIVITY INCOME	116
----------------------------------	-----

OTHER K-1 INFORMATION:

INTEREST	434
DIVIDENDS	2,319
ESTATE TAX DEDUCTION	787

1996 Income from Passthroughs

SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

OTHER K-1 INFORMATION:

INTEREST	25,361
DIVIDENDS	2,319
SELF-EMPLOYMENT EARNINGS (LOSS) (CALCULATED)	1,179,983

DEDUCTIONS:

CONTRIBUTIONS - 50% LIMITATION	5,413
ESTATE TAX DEDUCTION	787
HEALTH INSURANCE PREMIUMS	748

INVESTMENT INTEREST EXPENSE:

INVESTMENT INCOME	11,194
-------------------	--------

TAX PREFERENCE ITEMS:

THE UNIVERSITY OF CHICAGO

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
TOTAL SCH E DEPRECIATION																																																																																																			

KZ-30005

516281
02-22-96

Name of person with self-employment income (do not include partner in partnership)

Social security number of

person with self-employment

Income ▶

ROY E BARNES

Section B - Long Schedule SE

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, skip lines 1 through 4b. Enter -0- on line 4c and go to line 5a. Income from services you performed as a minister or a member of a religious order is not church employee income. See page SE-1.

- A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I ☐

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), line 15a. Note: Skip this line if you use the farm optional method. See page SE-3	1	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a (other than farming). Ministers and members of religious orders see page SE-1 for amounts to report on this line. See page SE-2 for other income to report. Note: Skip this line if you use the nonfarm optional method. See page SE-3	2	1,185,083.
3	Combine lines 1 and 2	3	1,185,083.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter the amount from line 3	4a	1,094,424.
4b	If you elected one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
4c	Combine lines 4a and 4b. If less than \$400, do not file this schedule; you do not owe self-employment tax. Exception: If less than \$400 and you had church employee income, enter -0- and continue.	4c	1,094,424.
5a	Enter your church employee income from Form W-2. Caution: See page SE-1 for definition of church employee income	5a	
5b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	5b	
6	Net earnings from self-employment. Add lines 4c and 5b	6	1,094,424.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 1995	7	61,200.00
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation	8a	12,333.
8b	Unreported tips subject to social security tax (from Form 4137, line 9)	8b	
8c	Add lines 8a and 8b	8c	12,333.
9	Subtract line 8c from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	48,867.
10	Multiply the smaller of line 6 or line 9 by 12.4% (.124)	10	6,060.
11	Multiply line 6 by 2.9% (.029)	11	31,738.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 47.	12	37,798.
13	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.5). Enter the result here and on Form 1040, line 25	13	18,899.

Part II Optional Methods To Figure Net Earnings (See page SE-3.)

Farm Optional Method. You may use this method only if:			
• Your gross farm income ¹ was not more than \$2,400 or			
• Your gross farm income ¹ was more than \$2,400 and your net farm profits ² were less than \$1,733.			
14	Maximum income for optional methods	14	1,600.00
15	Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$1,600. Also, include this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if:			
• Your net nonfarm profits ³ were less than \$1,733 and also less than 72.189% of your gross nonfarm income, ⁴ and			
• You had net earnings from self-employment of at least \$400 in 2 of the prior 3 years.			
Caution. You may use this method no more than five times.			
16	Subtract line 15 from line 14	16	
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above	17	

¹ From Schedule F, line 11, and Schedule K-1 (Form 1065), line 15b.³ From Schedule C, line 31; Schedule C-EZ, line 3; and Schedule K-1 (Form 1065), line 15a.² From Schedule F, line 36, and Schedule K-1 (Form 1065), line 15a.⁴ From Schedule C, line 7; Schedule C-EZ, line 1; and Schedule K-1 (Form 1065), line 15c.

LHA For Paperwork Reduction Act Notice, see Form 1040 instructions.

4797

Sales of Business Property

OMB NO. 1545-0046

1995

Department of the Treasury
Internal Revenue Service

Under Sections 179 and 2061(f)(2)

▶ Attach to your tax return.

Alphabetical
Sequence No. 27

Name(s) shown on return

Identifying number

ROY E & MARIE BARNES

1 Enter here the gross proceeds from the sale or exchange of real estate reported to you for 1995 on Form(s) 1099-S (or a substitute statement) that you will be including on line 2, 11, or 22

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

(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) LOSS (f) minus the sum of (d) and (e)	(h) GAIN (d) plus (e) minus (f)
2 AUSTELL PTRS.							41,566.

- 3 Gain, if any, from Form 4684, line 39
- 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37
- 5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824
- 6 Gain, if any, from line 34, from other than casualty or theft
- 7 Add lines 2 through 6 in columns (g) and (h)
- 8 Combine columns (g) and (h) of line 7. Enter gain or (loss) here, and on the appropriate line as follows:
Partnerships - Enter the gain or (loss) on Form 1065, Schedule K, line 6. Skip lines 9, 10, 12, and 13 below.
S corporations - Report the gain or (loss) following the instructions for Form 1120S, Schedule K, lines 5 and 6. Skip lines 9, 10, 12, and 13 below, unless line 8 is a gain and the S corporation is subject to the capital gains tax.
All others - If line 8 is zero or a loss, enter the amount on line 12 below and skip lines 9 and 10. If line 8 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 as a long-term capital gain on Schedule D and skip lines 9, 10, and 13 below.
- 9 Nonrecaptured net section 1231 losses from prior years
- 10 Subtract line 9 from line 8. If zero or less, enter -0-. Also enter on the appropriate line as follows:
S corporations - Enter this amount on Schedule D (Form 1120S), line 13, and skip lines 12 and 13 below.
All others - If line 10 is zero, enter the amount from line 8 on line 13 below. If line 10 is more than zero, enter the amount from line 9 on line 13 below, and enter the amount from line 10 as a long-term capital gain on Schedule D.

Part II Ordinary Gains and Losses

11 Ordinary gains and losses not included on lines 12 through 18 (include property held 1 year or less):

- 12 Loss, if any, from line 8
- 13 Gain, if any, from line 8, or amount from line 9 if applicable
- 14 Gain, if any, from line 33
- 15 Net gain or (loss) from Form 4684, lines 31 and 38a
- 16 Ordinary gain from installment sales from Form 6252, line 25 or 36
- 17 Ordinary gain or (loss) from like-kind exchanges from Form 8824
- 18 Recapture of section 179 expense deduction for partners and S corporation shareholders from property dispositions by partnerships and S corporations
- 19 Add lines 11 through 18 in columns (g) and (h)
- 20 Combine columns (g) and (h) of line 19. Enter gain or (loss) here, and on the appropriate line as follows:
a For all except individual returns: Enter the gain or (loss) from line 20 on the return being filed.
b For individual returns:
(1) If the loss on line 12 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here and on line 22 of Schedule A (Form 1040). Identify as from "Form 4797, line 20b(1)."
(2) Redetermine the gain or (loss) on line 20, excluding the loss, if any, on line 20b(1). Enter here and on Form 1040, line 14

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

(a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
Relate lines 21A through 21D to these columns		Property A	Property B
		Property C	Property D
22	Gross sales price (Note: See line 1 before completing.)	22	
23	Cost or other basis plus expense of sale	23	
24	Depreciation (or depletion) allowed or allowable	24	
25	Adjusted basis. Subtract line 24 from line 23	25	
26	Total gain. Subtract line 25 from line 22	26	
27 If section 1245 property:			
a	Depreciation allowed or allowable from line 24	27a	
b	Enter the smaller of line 26 or 27a	27b	
28 If section 1250 property: If straight line depreciation was used, enter -0- on line 28g, except for a corporation subject to section 291.			
a	Additional depreciation after 1975	28a	
b	Applicable percentage multiplied by the smaller of line 26 or line 28a	28b	
c	Subtract line 28a from line 26. If residential rental property or line 26 is not more than line 28a, skip lines 28d and 28e	28c	
d	Additional depreciation after 1969 and before 1976	28d	
e	Enter the smaller of line 28c or 28d	28e	
f	Section 291 amount (corporations only)	28f	
g	Add lines 28b, 28e, and 28f	28g	
29 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership.			
a	Soil, water, and land clearing expenses	29a	
b	Line 29a multiplied by applicable percentage	29b	
c	Enter the smaller of line 26 or 29b	29c	
30 If section 1254 property:			
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs	30a	
b	Enter the smaller of line 26 or 30a	30b	
31 If section 1255 property:			
a	Applicable percentage of payments excluded from income under section 126	31a	
b	Enter the smaller of line 26 or 31a	31b	

Summary of Part III Gains. Complete property columns A through D, through line 31b before going to line 32.

32	Total gains for all properties. Add columns A through D, line 26	32	
33	Add columns A through D, lines 27b, 28g, 29c, 30b, and 31b. Enter here and on line 14	33	
34	Subtract line 33 from line 32. 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	34	

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)
35	Section 179 expense deduction or depreciation allowable in prior years	35
36	Recomputed depreciation	36
37	Recapture amount. Subtract line 36 from line 35	37

6251

Alternative Minimum Tax - Individuals

1995

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040, Form 1040NR, or Form 1040-T.

Attachment
Sequence No. 32

Name(s) shown on Form 1040

Your social security number

ROY E & MARIE BARNES

Part I Adjustments and Preferences

1	If you itemized deductions on Schedule A (Form 1040) (or you entered the amount from Form 1040-T, Section B, line t, on Form 1040-T, line 20), go to line 2. Otherwise, enter your standard deduction from Form 1040, line 34 (or Form 1040-T, line 20), and go to line 6	1																													
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2 1/2% of Form 1040, line 32 (Form 1040-T filers, enter the smaller of Section B, line c or 2 1/2% of Form 1040-T, line 16)	2																													
3	Taxes. Enter the amount from Schedule A (Form 1040), line 9 (or the total of lines d through g of Form 1040-T, Section B)	3	63,139.																												
4	Certain interest on a home mortgage not used to buy, build, or improve your home	4																													
5	Miscellaneous itemized deductions. Enter the amount from Schedule A (Form 1040), line 26 (or Form 1040-T, Section B, line r)	5																													
6	Refund of taxes. Enter any tax refund from Form 1040, line 10 or 21 (or Form 1040-T, line 4 or line 9)	6	<37.>																												
7	Investment interest. Enter difference between regular tax and AMT deduction	7																													
8	Post-1986 depreciation. Enter difference between regular tax and AMT depreciation	8																													
9	Adjusted gain or loss. Enter difference between AMT and regular tax gain or loss	9																													
10	Incentive stock options. Enter excess of AMT income over regular tax income	10																													
11	Passive activities. Enter difference between AMT and regular tax income or loss SEE STATEMENT 17	11	1,983.																												
12	Beneficiaries of estates and trusts. Enter the amount from Schedule K-1 (Form 1041), line 8	12																													
13	Tax-exempt interest from private activity bonds issued after 8/7/86	13																													
14	Other. Enter the amount, if any, for each item and enter the total on line 14.	14																													
	<table border="0"> <tr> <td>a Charitable contributions</td> <td></td> <td>h Loss limitations</td> <td></td> </tr> <tr> <td>b Circulation expenditures</td> <td></td> <td>i Mining costs</td> <td></td> </tr> <tr> <td>c Depletion</td> <td></td> <td>j Patron's adjustment</td> <td></td> </tr> <tr> <td>d Depreciation (pre-1987)</td> <td></td> <td>k Pollution control facilities</td> <td></td> </tr> <tr> <td>e Installment sales</td> <td></td> <td>l Research and experimental</td> <td></td> </tr> <tr> <td>f Intangible drilling costs</td> <td></td> <td>m Tax shelter farm activities</td> <td></td> </tr> <tr> <td>g Long-term contracts</td> <td></td> <td>n Related adjustments</td> <td></td> </tr> </table>	a Charitable contributions		h Loss limitations		b Circulation expenditures		i Mining costs		c Depletion		j Patron's adjustment		d Depreciation (pre-1987)		k Pollution control facilities		e Installment sales		l Research and experimental		f Intangible drilling costs		m Tax shelter farm activities		g Long-term contracts		n Related adjustments		15	65,085.
a Charitable contributions		h Loss limitations																													
b Circulation expenditures		i Mining costs																													
c Depletion		j Patron's adjustment																													
d Depreciation (pre-1987)		k Pollution control facilities																													
e Installment sales		l Research and experimental																													
f Intangible drilling costs		m Tax shelter farm activities																													
g Long-term contracts		n Related adjustments																													

15 Total Adjustments and Preferences. Combine lines 1 through 14

Part II Alternative Minimum Taxable Income

16	Enter the amount from Form 1040, line 35 (or Form 1040-T, line 21). If less than zero, enter as a (loss)	16	1,215,642.
17	Net operating loss deduction, if any, from Form 1040, line 21. Enter as a positive amount	17	
18	If Form 1040, line 32 (or Form 1040-T, line 16), is over \$114,700 (over \$57,350 if married filing separately), and you itemized deductions, enter the amount, if any, from line 9 of the worksheet for Schedule A, (Form 1040), line 28 (or line 9 of the worksheet for Section B, line t, of Form 1040-T)	18	<37,813.>
19	Combine lines 15 through 18	19	1,242,914.
20	Alternative tax net operating loss deduction.	20	
21	Alternative Minimum Taxable Income. Subtract line 20 from line 19. (If married filing separately and line 21 is more than \$165,000, see instructions.)	21	1,242,914.

Part III Exemption Amount and Alternative Minimum Tax

22	Exemption Amount. (If this form is for a child under age 14, see instructions.)	22													
	<table border="0"> <tr> <td>If your filing status is:</td> <td>And line 21 is not over:</td> <td>Enter on line 22:</td> </tr> <tr> <td>Single or head of household</td> <td>\$112,500</td> <td>\$33,750</td> </tr> <tr> <td>Married filing jointly or qualifying widow(er)</td> <td>150,000</td> <td>45,000</td> </tr> <tr> <td>Married filing separately</td> <td>75,000</td> <td>22,500</td> </tr> </table>	If your filing status is:	And line 21 is not over:	Enter on line 22:	Single or head of household	\$112,500	\$33,750	Married filing jointly or qualifying widow(er)	150,000	45,000	Married filing separately	75,000	22,500	22	0.
If your filing status is:	And line 21 is not over:	Enter on line 22:													
Single or head of household	\$112,500	\$33,750													
Married filing jointly or qualifying widow(er)	150,000	45,000													
Married filing separately	75,000	22,500													
	If line 21 is over the amount shown above for your filing status, see instructions.														
23	Subtract line 22 from line 21. If zero or less, enter -0- here and on lines 26 and 28	23	1,242,914.												
24	If line 23 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 23 by 26% (.26). Otherwise, multiply line 23 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	24	344,516.												
25	Alternative minimum tax foreign tax credit.	25													
26	Tentative minimum tax. Subtract line 25 from line 24	26	344,516.												
27	Enter your tax from Form 1040, line 38 (plus any amount from Form 4970 included on Form 1040, line 39), minus any foreign tax credit from Form 1040, line 43 (Form 1040-T filers, enter the amount from Form 1040-T, line 26)	27	457,083.												
28	Alternative Minimum Tax. (If this form is for a child under age 14, see instructions.) Subtract line 27 from line 26. If zero or less, enter -0-. Enter here and on Form 1040, line 48 (or Form 1040-T, line 31)	28	0.												

ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

[illegible]

**SCHEDULE H
(Form 1040)****Household Employment Taxes**

OMB No. 1545-0047

1995Department of the Treasury
Internal Revenue Service

For Social Security, Medicare, and Federal Unemployment (FUTA) taxes, attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, 1040-SS, or 1040-1, or 1041

See separate instructions.

Attachment
Sequence No. 44

Name of employer (as shown on return)

Social security number

Employer identification number

ROY E & MARIE BARNESBefore you begin, read **Who Must File** in the instructions.**A** Did you pay any one household employee cash wages of \$1,000 or more in 1995?

- ☒ **Yes.** Skip questions B and C and go to Part I.
☐ **No.** Go to question B.

B Did you withhold Federal income tax during 1995 for any household employee?

- ☐ **Yes.** Skip question C and go to Part I.
☐ **No.** Go to question C.

C Did you pay total cash wages of \$1,000 or more in any calendar quarter of 1994 or 1995 to household employees?

- ☐ **No.** Stop. Do not file this schedule.
☐ **Yes.** Skip Part I and go to Part II.

Part I Social Security, Medicare, and Income Taxes

1	Total cash wages subject to social security taxes	1	6,040.	
2	Social security taxes. Multiply line 1 by 12.4% (.124)	2	749.	
3	Total cash wages subject to Medicare taxes	3	6,040.	
4	Medicare taxes. Multiply line 3 by 2.9% (.029)	4	175.	
5	Federal income tax withheld, if any	5		
6	Add lines 2, 4, and 5	6	924.	
7	Advance earned income credit (EIC) payments, if any	7		
8	Total social security, Medicare, and income taxes. Subtract line 7 from line 6	8	924.	

9 Did you pay total cash wages of \$1,000 or more in any calendar quarter of 1994 or 1995 to household employees?

- ☒ **No.** Stop. Take the amount from line 8 above and enter it on Form 1040, line 53, or Form 1040A, line 27. If you are not required to file Form 1040 or 1040A, see the instructions.

- ☐ **Yes.** Go to Part II.

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule H (Form 1040) 1995

LHA

Statement SBE Supplemental Business Expenses

1995

Your name

ROY E BARNES

Social security number

[REDACTED]

Business in which expenses were incurred

ATTORNEY

Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses

	Column A Other than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 18	4	1,135.
5 Meals and entertainment expenses. (See instructions.)	5	
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	1,135.

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 13 of your Form W-2.	7	
--	---	--

STEP 3 Figure Expenses Subject to the 50% Limitation

8 Subtract line 7 from line 6	8	1,135.
Note: If both columns of line 8 are zero, stop here. If Column A is less than zero, report the amount as income.		
9 In Column A, enter the amount from line 8 (If zero or less, enter -0-). In Column B, multiply the amount on line 8 by 50% (.50)	9	1,135.
10 Add the amounts on line 9 of both columns and enter the total here. This is your supplemental business expense	10	1,135.

Part III Vehicle Expenses (Use instructions to find out which sections to complete.)

Section A - General Information

	(a) Vehicle	(b) Vehicle
11 Enter the date vehicle was placed in service	11	
12 Total miles vehicle was driven during 1995	12	miles
13 Business miles included on line 12	13	miles
14 Percent of business use. Divide line 13 by line 12	14	%
15 Average daily round trip commuting distance	15	miles
16 Commuting miles included on line 12	16	miles
17 Other personal miles. Add lines 13 and 16 and subtract the total from line 12	17	miles

18 Do you (or your spouse) have another vehicle available for personal purposes? ☐ Yes ☐ No

19 If you are provided with a vehicle, is personal use during off duty hours permitted? ☐ Yes ☐ No ☐ Not applicable

20 Do you have evidence to support your deduction? ☐ Yes ☐ No

21 If "Yes," is the evidence written? ☐ Yes ☐ No

Section B - Standard Mileage Rate (Use this section only if you own the vehicle.)

22 Multiply line 13 by 30¢ (.30). Enter the result here and on line 1. (Rural mail carriers, see instructions.) 22

Section C - Actual Expenses

	(a) Vehicle	(b) Vehicle
23 Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a Vehicle rentals	24a	
b Inclusion amount	24b	
c Subtract line 24b from line 24a	24c	
25 Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2.)	25	
26 Add lines 23, 24c, and 25	26	
27 Multiply line 26 by the percentage on line 14	27	
28 Depreciation. Enter amount from line 38 below	28	
29 Add lines 27 and 28. Enter total here and on line 1	29	

Section D - Depreciation of Vehicles (Use this section only if you own the vehicle.)

	(a) Vehicle	(b) Vehicle
30 Enter cost or other basis	30	
31 Enter amount of section 179 deduction	31	
32 Multiply line 30 by line 14	32	
33 Enter depreciation method and percentage	33	
34 Multiply line 32 by the percentage on line 33	34	
35 Add lines 31 and 34	35	
36 Enter the limitation amount from the table in the line 36 instructions	36	
37 Multiply line 36 by the percentage on line 14	37	
38 Enter the smaller of line 35 or line 37. Also, enter this amount on line 28 above	38	

4562

Depreciation and Amortization

(Including Information on Listed Property)

SUMMARY

1995

Department of the Treasury
Internal Revenue Service (90)

▶ Attach this form to your return.

Attachment
Sequence No. 07

Name(s) shown on return

Business or activity to which this form relates

Identifying number

ROY E & MARIE BARNES

ALL BUSINESS ACTIVITIES

Part I Election To Expense Certain Tangible Property (Section 179) (Note: If you have any "Listed Property," complete Part V before you complete Part I.)

1	Maximum dollar limitation (If an enterprise zone business, see instructions.)	1	17,500.
2	Total cost of section 179 property placed in service during the tax year	2	23,806.
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.	5	17,500.

6	(a) Description of property	(b) Cost	(c) Elected cost

* TOTAL ALLOWABLE PASS-THROUGH SECTION 179 IS 2,978.

7	Listed property. Enter amount from line 27	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1994	10	
11	Taxable income limitation. Enter the smaller of taxable income (not less than zero) or line 5	11	17,500.
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	2,978.
13	Carryover of disallowed deduction to 1996. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

Part II MACRS Depreciation For Assets Placed in Service ONLY During Your 1995 Tax Year (Do Not Include Listed Property)**Section A - General Asset Account Election**

- 14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See instructions ☐

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (Business/investment use only)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
--------------------------------	--------------------------------------	---	---------------------	----------------	------------	----------------------------

Section B - General Depreciation System (GDS) (See instructions)

15 a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	Residential rental property	/	27.5 yrs.	MM	S/L	
h	Nonresidential real property	/	27.5 yrs.	MM	S/L	

Section C - Alternative Depreciation System (ADS) (See instructions)

16 a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year	/	40 yrs.	MM	S/L	

Part III Other Depreciation (Do Not Include Listed Property)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 1995	17	
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

Part IV Summary

20	Listed property. Enter amount from line 26	20	
21	Total. Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	21	
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	22	

LHA For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Form 4562 (1995)

4562

Depreciation and Amortization

Including Information on Listed Property

K1-30005

1995

Department of the Treasury
Internal Revenue Service 999

▶ Attach this form to your return.

Attachment
Sequence No. 87

Name(s) shown on return

Business or activity to which this form relates

Identifying number

ROY E & MARIE BARNES

BARNES BROWNING TANKSLEY
& CASUR

Part I Election To Expense Certain Tangible Property (Section 179) (Note: If you have any "Listed Property," complete Part V before you complete Part I.)

1	Maximum dollar limitation (If an enterprise zone business, see instructions.)	1	17,500.
2	Total cost of section 179 property placed in service during the tax year	2	
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost	(c) Elected cost
7	Listed property. Enter amount from line 27	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1994	10	
11	Taxable income limitation. Enter the smaller of taxable income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 1996. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

Part II MACRS Depreciation For Assets Placed in Service ONLY During Your 1995 Tax Year (Do Not Include Listed Property)

Section A - General Asset Account Election

14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See instructions. ☐

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (Business/investment use only)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
Section B - General Depreciation System (GDS) (See instructions)						
15 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g Residential rental property	/		27.5 yrs.	MM	S/L	
h Nonresidential real property	/		27.5 yrs.	MM	S/L	
Section C - Alternative Depreciation System (ADS) (See instructions)						
16 a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part III Other Depreciation (Do Not Include Listed Property)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 1995	17	
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

Part IV Summary

20	Listed property. Enter amount from line 26	20	2,448.
21	Total. Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	21	2,448.
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	22	

LHA For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Form 4562 (1995)

Section A - Depreciation and Other Information (Caution: See instructions for limitations for automobiles.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 23a, 23b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See instructions for limitations for automobiles.)									
23a Do you have evidence to support the business/investment use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
23b If "Yes," is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/ investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
24 Property used more than 50% in a qualified business use:									
AUTO	05/09/95	80.00 %	29,757.	23,806.	5.00	200DB-HY	2,448.		
		%							
		%							
		%							
25 Property used 50% or less in a qualified business use:									
		%				S/L -			
		%				S/L -			
		%				S/L -			
		%				S/L -			
26 Add amounts in column (h). Enter the total here and on line 20, page 1							26	2,448.	
27 Add amounts in column (i). Enter the total here and on line 7, page 1								27	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
28 Total business/investment miles driven during the year (DO NOT include commuting miles)												
29 Total commuting miles driven during the year												
30 Total other personal (noncommuting) miles driven												
31 Total miles driven during the year. Add lines 28 through 30												
32 Was the vehicle available for personal use during off-duty hours?												
33 Was the vehicle used primarily by a more than 5% owner or related person?												
34 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
35 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
36 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? (See instructions for vehicles used by corporate officers, directors, or 1% or more owners.)		
37 Do you treat all use of vehicles by employees as personal use?		
38 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
39 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 35, 36, 37, 38, or 39 is "Yes," you need not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
40 Amortization of costs that begins during your 1995 tax year:					
41 Amortization of costs that began before 1995					41
42 Total. Enter here and on "Other Deductions" or "Other Expenses" line of your return					42

Department of the Treasury
Internal Revenue Service▶ See separate instructions.
▶ Attach to Form 1040 or Form 1041.

1995

Attachment
Sequence No. 88

Name(s) shown on return

Identifying number

ROY E & MARIE BARNES

Part I 1995 Passive Activity Loss

Caution: See the instructions for Worksheets 1 and 2 on page 8 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation see Active Participation in a Rental Real Estate Activity in the instructions.)

1 a Activities with net income (from Worksheet 1, column (a))	1a	10,628.	
b Activities with net loss (from Worksheet 1, column (b))	1b	<9,074.>	
c Prior year unallowed losses (from Worksheet 1, column (c))	1c		
d Combine lines 1a, 1b, and 1c	1d		1,554.
All Other Passive Activities			
2 a Activities with net income (from Worksheet 2, column (a))	2a	186,025.	
b Activities with net loss (from Worksheet 2, column (b))	2b	<3,210.>	
c Prior year unallowed losses (from Worksheet 2, column (c))	2c		
d Combine lines 2a, 2b, and 2c	2d		182,815.
3 Combine lines 1d and 2d. If the result is net income or zero, see the instructions for line 3. If this line and line 1d are losses, go to line 4. Otherwise, enter -0- on line 9 and go to line 10	3		184,369.

Part II Special Allowance for Rental Real Estate With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for examples.

4 Enter the smaller of the loss on line 1d or the loss on line 3	4	
5 Enter \$150,000. If married filing separately, see the instructions	5	
6 Enter modified adjusted gross income, but not less than zero	6	
Note: If line 6 is equal to or greater than line 5, skip lines 7 and 8, enter -0- on line 9, and then go to line 10. Otherwise, go to line 7.		
7 Subtract line 6 from line 5	7	
8 Multiply line 7 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions	8	
9 Enter the smaller of line 4 or line 8	9	

Part III Total Losses Allowed

10 Add the income, if any, on lines 1a, and 2a and enter the total	10	
11 Total losses allowed from all passive activities for 1995. Add lines 9 and 10. See the instructions to find out how to report the losses on your tax return	11	12,284.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 8582 (1995)

8582

ALTERNATIVE MINIMUM TAX

Passive Activity Loss Limitations

OMB No. 1545-0047

1995

Department of the Treasury
Internal Revenue Service▶ See separate instructions.
▶ Attach to Form 1040 or Form 1041.Attachment
Sequence No. 88

Name(s) shown on return

Identifying number

ROY E & MARIE BARNES

Part I 1995 Passive Activity Loss

Caution: See the instructions for Worksheets 1 and 2 on page 8 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation see Active Participation in a Rental Real Estate Activity in the instructions.)

1a Activities with net income (from Worksheet 1, column (a))	1a	10,628.	
b Activities with net loss (from Worksheet 1, column (b))	1b	<7,091.>	
c Prior year unallowed losses (from Worksheet 1, column (c))	1c		
d Combine lines 1a, 1b, and 1c	1d		3,537.
All Other Passive Activities			
2a Activities with net income (from Worksheet 2, column (a))	2a	186,025.	
b Activities with net loss (from Worksheet 2, column (b))	2b	<3,210.>	
c Prior year unallowed losses (from Worksheet 2, column (c))	2c		
d Combine lines 2a, 2b, and 2c	2d		182,815.
3 Combine lines 1d and 2d. If the result is net income or zero, see the instructions for line 3. If this line and line 1d are losses, go to line 4. Otherwise, enter -0- on line 9 and go to line 10	3		186,352.

Part II Special Allowance for Rental Real Estate With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for examples.

4 Enter the smaller of the loss on line 1d or the loss on line 3	4	
5 Enter \$150,000. If married filing separately, see the instructions	5	
6 Enter modified adjusted gross income, but not less than zero	6	
Note: If line 6 is equal to or greater than line 5, skip lines 7 and 8, enter -0- on line 9, and then go to line 10. Otherwise, go to line 7.		
7 Subtract line 6 from line 5	7	
8 Multiply line 7 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions	8	
9 Enter the smaller of line 4 or line 8	9	

Part III Total Losses Allowed

10 Add the income, if any, on lines 1a, and 2a and enter the total	10	
11 Total losses allowed from all passive activities for 1995. Add lines 9 and 10. See the instructions to find out how to report the losses on your tax return	11	10,301.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 8582 (1995)

FORM 1040 STATE AND LOCAL INCOME TAX REFUNDS STATEMENT 1

	1994	1993	1992
GEORGIA			
GROSS STATE/LOCAL INC TAX REFUNDS	256.		
LESS: TAX PAID IN FOLLOWING YEAR	219.		
NET TAX REFUNDS GEORGIA	37.		
TOTAL NET TAX REFUNDS	37.		

FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 2

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T GENERAL ASSY. OF GA	3,540.	708.	142.		219.	51.
T GENERAL ASSY. OF GA	8,793.	930.	205.		545.	128.
TOTALS	12,333.	1,638.	347.		764.	179.

1. MULTIPLY \$2,500 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED
ON FORM 1040, LINE 6E 10,000.
2. ENTER THE AMOUNT FROM FORM 1040, LINE 32 1,375,130.
3. ENTER THE AMOUNT FOR YOUR FILING STATUS 172,050.
 - MARRIED FILING SEPARATE \$ 86,025
 - SINGLE \$114,700
 - HEAD OF HOUSEHOLD \$143,350
 - MARRIED FILING JOINT OR WIDOW(ER) \$172,050
4. SUBTRACT LINE 3 FROM LINE 2 1,203,080.
- IF LINE 4 IS MORE THAN \$122,500 (\$61,250 IF
MARRIED FILING SEPARATE) ENTER ZERO
ON FORM 1040, LINE 36
5. DIVIDE LINE 4 BY \$2,500 (\$1,250 IF MFS)
6. MULTIPLY LINE 5 BY 2% (.02) AND ENTER THE RESULT
AS A DECIMAL
7. MULTIPLY LINE 1 BY LINE 6
8. SUBTRACT LINE 7 FROM LINE 1. TOTAL TO FORM 1040, LINE 36

	1994	1993	1992
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.	37.		
LESS: REFUNDS-NO BENEFIT DUE TO AMT			
1 NET REFUNDS FOR RECALCULATION	37.		
2 TOTAL ITEMIZED DEDUCTIONS BEFORE PHASEOUT	84,676.		
3 DEDUCTION NOT SUBJ. TO PHASEOUT	10,668.		
4 NET REFUNDS FROM LINE 1	37.		
5 LINE 2 MINUS LINES 3 AND 4	73,971.		
6 MULTIPLY LINE 5 BY 80% (.80)	59,177.		
7 PRIOR YEAR AGI	471,779.		
8 ITEM. DED. PHASEOUT THRESHOLD	111,800.		
9 SUBTRACT LINE 8 FROM LINE 7 (IF ZERO OR LESS, SKIP LINES 10 THROUGH 15, AND ENTER AMOUNT FROM LINE 1 ON LINE 16)	359,979.		
10 MULTIPLY LINE 9 BY 3% (.03)	10,799.		
11 ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10)	63,172.		
12 ITEM. DED. NOT SUBJ TO PHASEOUT	10,668.		
13A TOTAL ADJ. ITEMIZED DEDUCTIONS	73,840.		
13B PRIOR YR. STD. DED. AVAILABLE	6,350.		
14 PRIOR YR. ALLOWABLE ITEM. DED.	73,877.		
15 SUBTRACT THE GREATER OF LINE 13A OR LINE 13B FROM LINE 14	37.		
16 TAXABLE REFUNDS (LESSER OF LINE 15 OR LINE 1)	37.		
17 ALLOWABLE PRIOR YR. ITEM. DED.	73,877.		
18 PRIOR YEAR STD. DED. AVAILABLE	6,350.		
19 SUBTRACT LINE 18 FROM LINE 17	67,527.		
20 LESSER OF LINE 16 OR LINE 19	37.		
21 PRIOR YEAR TAXABLE INCOME	397,902.		
22 AMOUNT TO INCLUDE ON FORM 1040, LINE 10 * IF LINE 21 IS -0- OR MORE, USE AMOUNT FROM LINE 20 * IF LINE 21 IS A NEGATIVE AMOUNT, NET LINES 20 AND 21			37.
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 1992			
TOTAL TO FORM 1040, LINE 10			37.

SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 5

DESCRIPTION	AMOUNT
GENERAL ASSY. OF GA	142.
GENERAL ASSY. OF GA	205.
GEORGIA TAX PAYMENTS	55,256.
REDUCTION OF STATE TAX DEDUCTION - STATE REFUNDS	<219.>
TOTAL TO SCHEDULE A, LINE 5	55,384.

SCHEDULE A CASH CONTRIBUTIONS STATEMENT 6

DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT
UNION HILL UNITED METHODIST	1,000.	
CANDLER SCHOOL OF THEOLOGY	5,000.	
CASTLEWOOD CHAPEL	2,500.	
FIRST UNITED METH. CHURCH	50,000.	
LELAND METHODIST	5,000.	
MISCELLANEOUS ORGANIZED CHARITIES	3,375.	
MUST MINISTRIES	10,000.	
UNIV OF GEORGIA	1,000.	
FROM K-1 - EFFICIENCY LODGE	1,143.	
FROM K-1 - BARNES BROWNING TANKSLEY & CASUR	4,270.	
SUBTOTALS	83,288.	
TOTAL TO SCHEDULE A, LINE 15		83,288.

SCHEDULE A INVESTMENT INTEREST STATEMENT 7

DESCRIPTION	AMOUNT
GEORGIA BANKERS	22,024.
COLUMBUS BANK	8,489.
COMMUNITY BANK & TRUST	
DISALLOWED INVESTMENT INTEREST PRIOR YEARS	66,077.
DISALLOWED INVESTMENT INTEREST C/O	<49,206.>
TOTAL TO SCHEDULE A, LINE 13	47,384.

SCHEDULE A

MEDICAL AND DENTAL EXPENSES

STATEMENT 8

DESCRIPTION

AMOUNT

SELF-EMPLOYED HEALTH INSURANCE

524.

TOTAL TO SCHEDULE A, LINE 1

524.

SCHEDULE A

ITEMIZED DEDUCTIONS WORKSHEET

STATEMENT 9

1.	ADD THE AMOUNTS ON SCHEDULE A, LINES 4, 9, 14, 18, 19, 26, AND 27	197,301.
2.	ADD THE AMOUNTS ON SCHEDULE A, LINES 4, 13, AND 19, PLUS ANY GAMBLING LOSSES INCLUDED ON LINE 27	47,384.
3.	SUBTRACT LINE 2 FROM LINE 1. IF THE RESULT IS ZERO, STOP HERE; ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 28	149,917.
4.	MULTIPLY LINE 3 ABOVE BY 80% (.80)	119,934.
5.	ENTER THE AMOUNT FROM FORM 1040, LINE 32	1,375,130.
6.	ENTER \$114,700 (\$57,350 IF MARRIED FILING SEPARATELY)	114,700.
7.	SUBTRACT LINE 6 FROM LINE 5. IF THE RESULT IS ZERO OR LESS, STOP HERE; ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 28	1,260,430.
8.	MULTIPLY LINE 7 ABOVE BY 3% (.03)	37,813.
9.	ENTER THE SMALLER OF LINE 4 OR LINE 8	37,813.
10.	TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 9 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 28	159,488.

SCHEDULE D CAPITAL LOSS CARRYOVER STATEMENT 10

1. ENTER THE AMOUNT FROM FORM 1040, LINE 35	1,215,642.
2. ENTER THE LOSS FROM SCHEDULE D, LINE 19 AS A POSITIVE AMOUNT	3,000.
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-	1,218,642.
4. ENTER THE SMALLER OF LINE 2 OR LINE 3	3,000.
5. ENTER THE LOSS FROM SCHEDULE D, LINE 8 AS A POSITIVE AMOUNT	
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 17	
7. ENTER THE AMOUNT FROM LINE 4	
8. ADD LINES 6 AND 7	
9. SHORT-TERM CAPITAL LOSS CARRYOVER TO 1996. SUBTRACT LINE 8 FROM LINE 5. IF ZERO OR LESS, ENTER -0-	
10. ENTER THE LOSS FROM SCHEDULE D, LINE 17 AS A POSITIVE AMOUNT	335,944.
11. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 8	492.
12. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-	3,000.
13. ADD LINES 11 AND 12	3,492.
14. LONG-TERM CAPITAL LOSS CARRYOVER TO 1996. SUBTRACT LINE 13 FROM LINE 10. IF ZERO OR LESS, ENTER -0-	332,452.

SCHEDULE D NET LONG-TERM GAIN OR LOSS FROM FORMS 4797, 2119, 2439, 6252, 4684, 6781 AND 8824 STATEMENT 11

DESCRIPTION OF PROPERTY	LOSS	GAIN
FORM 4797		41,566.
SUBTOTALS		41,566.
TOTAL TO SCHEDULE D, PART II, LINE 12		41,566.

FORM 4952 INVESTMENT INTEREST EXPENSE STATEMENT 12

DESCRIPTION	CURRENT	CARRYOVER
GEORGIA BANKERS	22,024.	
COLUMBUS BANK	8,489.	
COMMUNITY BANK & TRUST	0.	
DISALLOWED INVESTMENT INTEREST PRIOR YEARS		66,077.
TOTALS TO FORM 4952	30,513.	66,077.

FORM 4952 INCOME FROM PROPERTY HELD FOR INVESTMENT STATEMENT 13

DESCRIPTION	AMOUNT
INTEREST INCOME	27,967.
DIVIDEND INCOME	28,914.
EFFICIENCY LODGE	<9,613.>
ESTATE OF CLYDE GOVAN	116.
TOTAL TO FORM 4952, LINE 4A	47,384.

FORM 4952 DISALLOWED INVESTMENT INTEREST EXPENSE STATEMENT 14

DESCRIPTION	AMOUNT
SCHEDULE A - C/O	49,206.
TOTAL TO FORM 4952, LINE 7	49,206.

SCHEDULE E OTHER EXPENSES STATEMENT 15

RENTAL BUILDINGS & HOUSES

DESCRIPTION	AMOUNT
PEST CONTROL	1,022.
LAWN CARE	1,830.
GARBAGE SERVICE	931.
TOTAL TO SCHEDULE E, PAGE 1, LINE 18	3,783.

SCHEDULE SE NON-FARM INCOME STATEMENT 16

DESCRIPTION	AMOUNT
FROM K-1	1,179,983.
DIRECTOR FEES	3,150.
J. MARSHALL LAW SCHOOL	1,950.
TOTAL TO SCHEDULE SE, LINE 2	1,185,083.

FORM 6251

PASSIVE ACTIVITIES

STATEMENT 17

NAME OF ACTIVITY	FORM	NET INCOME (LOSS)		ADJUSTMENT
		AMT	REGULAR	
EFFICIENCY LODGE	SCH E	144,459.	144,459.	
AUSTELL PTRS.	FORM 4797	41,566.	41,566.	
AUSTELL PTRS.	SCH E	<3,210.>	<3,210.>	
LAWYERS REALTY ASSOC.	SCH E	10,628.	10,628.	
ARC ENTERPRISES	SCH E	<3,112.>	<3,112.>	
RENTAL BUILDINGS & HOUSES	SCH E	<3,979.>	<5,962.>	1,983.
TOTAL TO FORM 6251, LINE 11				1,983.

FORM 2106/SBE

OTHER BUSINESS EXPENSES

STATEMENT 18

ATTORNEY

DESCRIPTION	AMOUNT
LEGAL & ACCOUNTING	450.
POSTAGE	100.
PARKING	30.
MISC	
INSURANCE	479.
OFFICE SUPPLIES	76.
TOTAL TO FORM 2106/SBE, PART I, LINE 4	1,135.

FORM 8582

ACTIVE RENTAL OF REAL ESTATE - WORKSHEET 1

STATEMENT 19

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
LAWYERS REALTY ASSOC.	10,628.	0.		10,628.	
ARC ENTERPRISES	0.	<3,112.>			<3,112.>
RENTAL BUILDINGS & HOUSES	0.	<5,962.>			<5,962.>
TOTALS	10,628.	<9,074.>		10,628.	<9,074.>

FORM 8582

OTHER PASSIVE ACTIVITIES - WORKSHEET 2

STATEMENT 20

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
EFFICIENCY LODGE	144,459.	0.		144,459.	
AUSTELL PTRS.	41,566.	<3,210.>		38,356.	
TOTALS	186,025.	<3,210.>		182,815.	

FORM 8582

SUMMARY OF PASSIVE ACTIVITIES

STATEMENT 21

A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
EFFICIENCY LODGE	SCH E	144,459.		144,459.		
AUSTELL PTRS.	FORM 4797	41,566.		41,566.		
AUSTELL PTRS.	SCH E	<3,210.>		<3,210.>		3,210.
X LAWYERS REALTY ASSOC.	SCH E	10,628.		10,628.		
X ARC ENTERPRISES	SCH E	<3,112.>		<3,112.>		3,112.
X RENTAL BUILDINGS & HOUSES	SCH E	<5,962.>		<5,962.>		5,962.
TOTALS		184,369.		184,369.		12,284.
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME						
TOTAL TO FORM 8582, LINE 11						12,284.

FORM 8582

ALTERNATIVE MINIMUM TAX
ACTIVE RENTAL OF REAL ESTATE - WORKSHEET 1

STATEMENT 22

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
LAWYERS REALTY ASSOC.	10,628.	0.		10,628.	
ARC ENTERPRISES	0.	<3,112.>			<3,112.>
RENTAL BUILDINGS & HOUSES	0.	<3,979.>			<3,979.>
TOTALS	10,628.	<7,091.>		10,628.	<7,091.>

OTHER PASSIVE ACTIVITIES - WORKSHEET 2

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
EFFICIENCY LODGE	144,459.	0.		144,459.	
AUSTELL PTRS.	41,566.	<3,210.>		38,356.	
TOTALS	186,025.	<3,210.>		182,815.	

FORM 8582AMT

SUMMARY OF PASSIVE ACTIVITIES - AMT

STATEMENT 24

NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
EFFICIENCY LODGE	SCH E	144,459.		144,459.		
AUSTELL PTRS.	FORM 4797	41,566.		41,566.		
AUSTELL PTRS.	SCH E	<3,210.>		<3,210.>		3,210.
X LAWYERS REALTY ASSOC.	SCH E	10,628.		10,628.		
X ARC ENTERPRISES	SCH E	<3,112.>		<3,112.>		3,112.
X RENTAL BUILDINGS & HOUSES	SCH E	<3,979.>		<3,979.>		3,979.
TOTALS		186,352.		186,352.		10,301.

PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME

TOTAL TO FORM 8582AMT, LINE 11

10,301.

500X

TAX YEAR

19 95**Amended Ga. Individual Income Tax Return**

Please answer all questions, fill in applicable items, and explain changes on page 2.

Please Print OR Type	First name and initial (if joint return, use first names and middle initials of both)		Last Name		Your Social Security Number	
	ROY E & MARIE BARNES					
	Home Address (Number and street or rural route)					Spouse's Social Security No.
	4841 BROOKWOOD					
	City, Town or Post Office		County	State	Zip Code	
	MABLETON		COBB	GA	30059	

Filing Status Claimed	Single	Married filing jointly	Married filing separately	Head of Household	Surviving Widow(er)
On original return	()	(X)	()	()	()
On this return	()	(X)	()	()	()
Residency	On original return	(X) Full year resident	() Part year resident	From _____ to _____	() Nonresident
	On this return	(X) Full year resident	() Part year resident	From _____ to _____	() Nonresident

Was a Federal Amended Return Filed? () Yes (X) No - if YES, please attach copy.

Calendar Year 19 <u>95</u> or Fiscal Year Ending _____	A As originally reported or as adjusted	B Net Change Increase or Decrease	C Correct Amount
1. Total Income (Georgia adjusted gross income) Form 500	1,361,499.	17,958.	1,379,457.
2. Deductions and Exemptions. Explain any change on page 2.	169,977.	<2,489.>	167,488.
3. Taxable Income	1,191,522.	20,447.	1,211,969.
4. Total tax	71,231.	1,227.	72,458.
PAYMENTS AND CREDITS			
5. Georgia Income Tax Withheld	347.		347.
6. Other Credits			
7. Estimated Tax Payments: Georgia Form 500	35,256.		35,256.
8. Amount paid with original return, plus additional payments made after it was filed			35,628.
9. Total of line 5 through 8, column C			71,231.
REFUND OR BALANCE DUE			
10. Overpayment, if any, shown on original return: Georgia Form 500			0.
11. Subtract line 10 from line 9, and enter result			71,231.
12. If line 4, Column C is more than line 11, enter Balance Due.			1,227.
13. Add interest (12% per annum)			
14. Total of lines 12 and 13. Pay in full with this Return			1,227.
15. If line 4, Column C is less than line 11, enter refund to be received			

Under penalties of perjury, I declare that I have filed an original return and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief this amended return is true, correct, and complete.

Sign
here

→ _____
Your signature Date

→ _____
Signature of preparer other than taxpayer, based on all information of which he has any knowledge

MOORE & CUBBEDGE, LLP
MARIETTA, GA 30064
418-52-3408 Address

→ _____
Spouse's signature (if filing jointly, BOTH must sign even if only one has income.)

MAIL COMPLETED RETURN TO: GEORGIA INCOME TAX DIVISION P.O. BOX 740385 ATLANTA, GEORGIA 30374-0385

GEORGIA PUBLIC REVENUE CODE SECTION 48-2-31 STIPULATES THAT TAXES SHALL BE PAID IN LAWFUL MONEY OF THE UNITED STATES, FREE OF ANY EXPENSE TO THE STATE OF GEORGIA.

PART I - EXEMPTIONS

1. Number of exemptions claimed on original return

2. Number of exemptions claimed on this return

3. Difference, if any

Explain any increase in exemptions in PART IV below.

4. Additional Exemptions for Yourself - and Spouse

(Check only those boxes not checked on original return and only if Standard Deduction is used)

	Regular	65 or over	Blind
Yourself	()	()	()
Spouse	()	()	()

Enter Number of boxes checked

PART II - COMPUTATION OF GEORGIA TAXABLE INCOME FOR PART-YEAR RESIDENTS AND NONRESIDENTS

	Federal Income as shown on Return COLUMN A.	Income Not Taxable to Georgia COLUMN B.	Georgia Income COLUMN C.
1. Wages, Salaries, Tips, Etc.			
2. Interest and Dividends			
3. Business Income or (loss)			
4. Other Income or (loss)			
5. Total Income: Total Lines 1 through 4			
Adjustments to Income:			
6. Total from Federal Form 1040			
7. Total Georgia Adjustments explain in PART IV below			
8. Adjusted Gross Income: line 5 plus or minus lines 6 and 7			
9. RATIO: Divide Line 8, Column C by Column A - Enter Percentage		()	(Not to exceed 100%)
10. Itemized or Standard Deduction			
11. Personal Exemption Line 7 or Line 14 page 1			
12. Total Deductions and Exemptions: Add Lines 10 and 11			
13. Multiply Line 12 by Ratio on Line 9 and enter result			
14. Georgia Taxable Income: Subtract Line 13 from Line 8. Enter on Line 3C on reverse side.			

PART III. -

Disability OR Retirement income exclusion

you

spouse

Date of birth OR disability

you

spouse

PART IV. - EXPLANATION OF CHANGES to Income, Deductions, Exemptions, and Credits. Show computations in detail. Attach applicable schedules.**DUE TO CHANGES MADE BY IRS AUDIT****ATTACH A COMPLETE COPY OF YOUR FEDERAL RETURN FOR AMENDED OR NET OPERATING LOSS.**

If you are filing an amended return to claim low income credit, the claim must be filed by the end of the 12th month following the close of the taxable year for which the credit may be claimed.

**1995
GEORGIA
FORM 500
INDIVIDUAL**

**INCOME TAX RETURN
RESIDENT, PART-YEAR
RESIDENT AND NONRESIDENT**

Calendar year or fiscal year beginning

19

and ending

19

STEP 1 USE GEORGIA LABEL IF CORRECT OTHERWISE PRINT OR TYPE	1 Your first name and initial ROY E BARNES		last name		Your Social Security No. [REDACTED]	
	If a joint return, spouse's first name and initial MARIE BARNES		last name		Spouse's Social Security No. [REDACTED]	
	2 Home address (number and street) 4841 BROOKWOOD		Apt. no.		Telephone Number Optional ()	
3 City, town or post office, state, and ZIP code MABLETON GA 30059		County COBB				
STEP 2 RES. EXEMPTIONS AND DEPENDENTS	4 Check one block only <input checked="" type="checkbox"/> FULL-YEAR RESIDENT <input type="checkbox"/> PART-YEAR RESIDENT FROM [] TO [] <input type="checkbox"/> NONRESIDENT PART-YEAR RESIDENTS AND NONRESIDENTS MUST OMIT LINES 8 THROUGH 14 OF STEPS 3 AND 4 AND USE SCHEDULE 3 PAGE 2 TO COMPUTE INCOME					
	5 Check one block only A <input type="checkbox"/> Single C <input type="checkbox"/> Married filing separate Spouse's Social Security No. must be entered above. B <input checked="" type="checkbox"/> Married filing joint D <input type="checkbox"/> Head of household or qualifying widow(er)					
	6 Yourself Spouse if Line 5b above is used, enter 1500 Enter number of dependents listed on Federal Return 2 X 2500 DO NOT INCLUDE SELF AND SPOUSE					
7 Total of Lines 6a, 6b, and 6c. Enter here and on Line 14		6a		1500		
		6b		1,500.		
		6c		5,000.		
		7		8,000.		
IF THE AMOUNT ON LINE 8 ABOVE IS \$40,000 OR MORE YOU ARE REQUIRED TO ATTACH A COPY OF YOUR FEDERAL 1040 OR 1040A PAGES 1 & 2. DO NOT ATTACH OTHER FEDERAL SCHEDULES.						
STEP 3 INCOME	8 Federal Adjusted Gross Income (From Federal Form 1040 or 1040A or 1040EZ)		8		1,375,130.	
	9 Adjustments from Schedule 1, page 2. (See instructions pages 5, Line 9)		9		4,327.	
	10 Georgia adjusted gross income (Net total of Line 8 and Line 9)		10		1,379,457.	
STEP 4 DEDUCTIONS	11 STANDARD Deduction (SEE INSTRUCTIONS - LINE 11) b. Are YOU 65 or over <input type="checkbox"/> blind <input type="checkbox"/> SPOUSE 65 or over <input type="checkbox"/> blind <input type="checkbox"/> X 700 = 11a c. TOTAL STANDARD deduction (Line 11a + Line 11b) 11b		11c		Use EITHER Line 11c or Line 12 (DO NOT WRITE ON BOTH)	
	12 TOTAL ITEMIZED deductions used in computing federal taxable income Schedule A - Form 1040 159,488. Less: See Line 12 instructions Page 6		12		159,488.	
	13 Subtract either line 11c or line 12 from line 10; enter balance		13		1,219,969.	
14 Enter exemption from Line 7		14		8,000.		
15 Georgia taxable income (Line 13 less Line 14 or Line 14, Schedule 3, page 2)		15		1,211,969.		
STEP 5 TAX COMPUTATION	16 Tax (Use Tax Table on page 7)		16		72,458.	
	17 Credits (Enter total but not more than the amount shown on line 16) From schedule 2 page 2		17			
	18 Balance (Line 16 less line 17) If zero or less enter zero		18		72,458.	
	19 GEORGIA INCOME TAX WITHHELD (attach withholding statements)		19		347.	
	20 Payments and credits on estimated tax for 1995 and Form 560		20		35,256.	
	21 Low Income Credit (See worksheet on page 8) 21a [] X 21b []		21c			
	22 Departmental use only		22			
	23 Total prepayment credits (Add lines 19, 20 and 21c)		23		35,603.	
	24 If line 18 exceeds line 23 enter BALANCE DUE TO STATE		24		36,855.	
	25 If line 23 exceeds line 18 enter OVERPAYMENT amount		25			
26 Amount to be credited to 1996 ESTIMATED TAX		26				
27 Georgia Wildlife Conservation Fund (No gift of less than \$1.00 can be processed)		27				
28 Georgia Children And Elderly Fund (No gift of less than \$1.00 can be processed)		28				
29 Form 500 UET (Estimated Tax Penalty)		29				
30 Add lines 24, 27, 28 and 29. (Balance due) Make check for this amount to GEORGIA INCOME TAX DIVISION		30		36,855.		
31 Amount to be refunded. Line 25 minus lines 26, 27, 28 and 29 if applicable		31				

Have you filed an intangible tax return for the year covered by this return? ☐ YES ☐ NO ☐ N/A If not, why not?

Under penalty of perjury, I declare that I examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

**SIGN
HERE**

your signature

date

spouse's signature

date

signature of preparer other than taxpayer

date

ATTORNEY

occupation

HOUSEWIFE

MOORE & CUBBEDGE, LLP

MARIETTA, GA 30064

social security or FEI number of preparer **418-52-3408**

SCHEDULE 1 - ADJUSTMENTS TO INCOME BASED ON GEORGIA LAW (see page 5 of instructions)

ADDITIONS TO INCOME

1. Interest on Non-Georgia Municipal and State Bonds	\$	
2. Lump Sum Distributions	\$	
3. Other (Specify) FIDUCIARY ADDITION	\$	4,327
4. Total Additions (enter sum of Lines 1-3 here.)	\$	4,327

SUBTRACTIONS FROM INCOME

5. Retirement Income Exclusion		
A. Self: Date of Birth _____ Type of Disability: _____ Date of Disability: _____	\$	
B. Spouse: Date of Birth _____ Type of Disability: _____ Date of Disability: _____	\$	
6. Social Security Benefits (Taxable Portion)	\$	
7. Railroad Retirement Benefits (Taxable Portion)	\$	
8. Interest on United States Obligations	\$	
9. Other (specify)	\$	
10. Total Subtractions (enter sum of Lines 5-9 here.)	\$	
11. Net Adjustments (Line 4 less Line 10, enter net total here and on Line 9 of Page 1.) (+ or -)	\$	4,327

SCHEDULE 2 CREDITS FOR LINE 17 PAGE 1

1. Other State Credit	\$	
2. Employer's Credit for Basic Skills Education	\$	
3. Employer's Credit for approved Employee Retraining	\$	
4. Employer's New Jobs Credit	\$	
5. Employer's Credit for providing or sponsoring Child Care for employees	\$	
6. Manufacturer's Investment Tax Credit	\$	
7. Enter the Total of Lines 1 through 6 here and on Line 17 page 1	\$	

SCHEDULE 3 COMPUTATION OF GEORGIA TAXABLE INCOME FOR PART-YEAR RESIDENTS AND NONRESIDENTS

DO NOT USE LINES 8 THROUGH 14 - PAGE 1, FORM 500				Federal Income as shown on Return COLUMN A.	Income Not Taxable to Georgia COLUMN B.	Georgia Income COLUMN C.
1. Wages, Salaries, Tips, Etc.						
2. Interest and Dividends						
3. Business Income or (loss)						
4. Other Income or (loss)						
5. Total Income: Total Lines 1 through 4						
Adjustments to Income:						
6. Total from Federal Form 1040						
7. Total from Form 500, Schedule 1 (see instructions line 9, page 5)						
8. Adjusted Gross Income: line 5 plus or minus lines 6 and 7						
9. RATIO: Divide Line 8, Column C by Line 8 Column A - Enter Percentage					() (Not to exceed 100%)	
10. Itemized or Standard Deduction (see Instructions for Line 10 page 9)						
11. Personal Exemption from Form 500, page 1, line 7						
12. Total Deductions and Exemptions: Add Lines 10, and 11						
13. Multiply Line 12 by Ratio on Line 9 and enter result						
14. Georgia Taxable Income: Subtract Line 13 from Line 8. Enter here and on Line 15, Page 1 of Form 500						

OVERPAYMENTS
GEORGIA INCOME TAX DIVISION
P.O. BOX 740380
ATLANTA, GEORGIA 30374-0380

PAYMENTS
AND
OTHER
GEORGIA INCOME TAX DIVISION
P.O. BOX 740399
ATLANTA, GEORGIA 30374-0399

Georgia Public Revenue Code Section 48-2-31 stipulates that taxes shall be paid in lawful money of the United States, free of any expense to the State of Georgia.

Department of the Treasury
Internal Revenue ServiceSee separate instructions.
Attach to Form 1040 or Form 1041.1995
Attachment
Sequence No. 88

Name(s) shown on return

Identifying number

ROY E & MARIE BARNES

Part I 1995 Passive Activity Loss

Caution: See the instructions for Worksheets 1 and 2 on page 8 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation see Active Participation in a Rental Real Estate Activity in the instructions.)

1a Activities with net income (from Worksheet 1, column (a))	1a	10,628.	
b Activities with net loss (from Worksheet 1, column (b))	1b	<9,074.>	
c Prior year unallowed losses (from Worksheet 1, column (c))	1c		
d Combine lines 1a, 1b, and 1c	1d		1,554.
All Other Passive Activities			
2a Activities with net income (from Worksheet 2, column (a))	2a	186,025.	
b Activities with net loss (from Worksheet 2, column (b))	2b	<3,210.>	
c Prior year unallowed losses (from Worksheet 2, column (c))	2c		
d Combine lines 2a, 2b, and 2c	2d		182,815.
3 Combine lines 1d and 2d. If the result is net income or zero, see the instructions for line 3. If this line and line 1d are losses, go to line 4. Otherwise, enter -0- on line 9 and go to line 10	3		184,369.

Part II Special Allowance for Rental Real Estate With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for examples.

4 Enter the smaller of the loss on line 1d or the loss on line 3	4	
5 Enter \$150,000. If married filing separately, see the instructions	5	
6 Enter modified adjusted gross income, but not less than zero	6	
Note: If line 6 is equal to or greater than line 5, skip lines 7 and 8, enter -0- on line 9, and then go to line 10. Otherwise, go to line 7.		
7 Subtract line 6 from line 5	7	
8 Multiply line 7 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions	8	
9 Enter the smaller of line 4 or line 8	9	

Part III Total Losses Allowed

10 Add the income, if any, on lines 1a, and 2a and enter the total	10	
11 Total losses allowed from all passive activities for 1995. Add lines 9 and 10. See the instructions to find out how to report the losses on your tax return	11	12,284.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 8582 (1995)

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

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
LAWYERS REALTY ASSOC.	10,628.	0.		10,628.	
ARC ENTERPRISES	0.	<3,112.>			<3,112.>
RENTAL BUILDINGS & HOUSES	0.	<5,962.>			<5,962.>
TOTALS	10,628.	<9,074.>		10,628.	<9,074.>

FORM 8582 OTHER PASSIVE ACTIVITIES - WORKSHEET 2 STATEMENT 2

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
EFFICIENCY LODGE	144,459.	0.		144,459.	
AUSTELL PTRS.	41,566.	<3,210.>		38,356.	
TOTALS	186,025.	<3,210.>		182,815.	

FORM 8582 SUMMARY OF PASSIVE ACTIVITIES STATEMENT 3

R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
EFFICIENCY LODGE	SCH E	144,459.		144,459.		
AUSTELL PTRS.	FORM 4797	41,566.		41,566.		
AUSTELL PTRS.	SCH E	<3,210.>		<3,210.>		3,210.
X LAWYERS REALTY ASSOC.	SCH E	10,628.		10,628.		
X ARC ENTERPRISES	SCH E	<3,112.>		<3,112.>		3,112.
X RENTAL BUILDINGS & HOUSES	SCH E	<5,962.>		<5,962.>		5,962.
TOTALS		184,369.		184,369.		12,284.