
**File Specifications, Validation Criteria,
and Record Layouts for Electronic and
Magnetic Media Filing of
U.S. Income Tax Returns for Estates and
Trusts, Form 1041, for Tax Year 2001**

Internal Revenue Service
Electronic Tax Administration



Department of the Treasury
Internal Revenue Service

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**FILE SPECIFICATIONS,
VALIDATION CRITERIA, AND RECORD LAYOUTS
FOR ELECTRONIC AND MAGNETIC MEDIA FILING
OF U.S. INCOME TAX RETURNS FOR ESTATES AND
TRUSTS, FORM 1041**

FOR

TAX YEAR 2001

INTERNAL REVENUE SERVICE

PUBLICATION 1438

DECEMBER 2001

INTERNAL REVENUE SERVICE

MISSION STATEMENT

**PROVIDE AMERICA'S TAXPAYERS TOP QUALITY SERVICE BY
HELPING THEM UNDERSTAND AND MEET THEIR TAX
RESPONSIBILITIES AND BY APPLYING THE TAX LAW WITH
INTEGRITY AND FAIRNESS TO ALL.**

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IMPORTANT NOTICE

CENTURY DATE CHANGE - Y2K

The Century Date Compliance Project (Y2K) in the IRS was implemented in January 1998. The IRS processing system has been changed to reflect the standard format established by the National Institute of Standards and Technology (NIST) for Century Date. Year 2000 compliance is defined as all instances of date-related data utilizing the full four position year field (YYYY). This is applicable to, but not limited to, electronic transfers of data and physical data fields.

The Century Date Standard is for all electronic year dates, whether exchanged with non-IRS organizations or part of the internal IRS systems. Guidelines are as follows:

All year date formats have expanded representations from 2-digits to 4-digits, and must be contiguous (i.e. YYYYMMDD, or 12312001).

No special characters are to be stored in any fields to represent the century (i.e. Roman Numerals).

All electronically prepared and transmitted tax returns submitted to the IRS after January 1, 1998, must be developed in compliance with the above standards. This requirement also applies to tax preparation using Commercial-off-the-Shelf (COTS) software. Compliance to the standard is a requirement for participation in the Electronic Filing Program and will be included in all test scenarios.

INTRODUCTION

This publication outlines the communications procedures, transmission format, character sets, validation criteria, and reject codes for filing tax returns electronically, using magnetic media or telephone lines to the Philadelphia Submission Processing Center. This publication should be used in conjunction with Publication 1437, Procedures for Electronic and Magnetic Media Filing of U.S. Income Tax Returns for Estates and Trusts, Form 1041.

These publications are available from the Electronic Filing Unit at the Philadelphia Submission Processing Center and are mailed automatically as appropriate to applicants based on their intended participation. You may also call 1-800-829-3676 for additional copies of publications.

The Electronic Filing System Bulletin Board operates seven days a week. The system is unavailable at 4:00 a.m. Eastern Time for approximately 30 - 60 minutes for maintenance. This system provides general Electronic Filing Program information as well as specific information concerning changes to this and other publications. If any changes are made to this document between publication of complete revisions, change pages may be issued. Changes will be denoted by a single vertical bar in the right hand margin (|).

Filers using an asynchronous modem (14.4 or less) and communication software can access the bulletin board by dialing:

(606) 292-0137

The communication software should be set as follows:

Duplex	Full
Parity	None
Data Bite	8
Stop Bit	1
Terminal Emulation	ANSI

If you need assistance with accessing the bulletin board, you may call the bulletin board help line on (859) 292-5031.

NOTE: At the time of printing this publication some of the tax forms/schedules for Tax Year 2001 may not have been finalized. Therefore, the forms and schedules in the Record Layout Section of this publication may be subject to change. If there are any changes to the forms/schedules record layout or validation criteria, we will issue a change page(s), as well as display the change on the Electronic Filing Systems Bulletin Board.

MAILING INSTRUCTIONS

ALL MAIL THAT INCLUDES A REMITTANCE FOR PAYMENT OF ELECTRONICALLY FILED FORM 1041 BALANCE DUE RETURNS **MUST** BE MAILED TO THE FOLLOWING ADDRESS:

Internal Revenue Service
P O Box 21028 DP 2720
Philadelphia, Pa. 19114-0528

NOTE: THE ABOVE ADDRESS WILL NOT ACCEPT FEDERAL EXPRESS MAIL. FOR FEDERAL EXPRESS MAIL YOU MUST USE THE MAILING ADDRESS BELOW:

FOR MAIL THAT DOES NOT INCLUDE A REMITTANCE YOU MUST USE THE FOLLOWING ADDRESS:

Philadelphia Submission Processing Center
ELF Processing Support Section DP 2720
11601 Roosevelt Blvd.
Philadelphia, Pa. 19154

CHANGES FOR TAX YEAR 2001

RECORD LAYOUTS - (Please see individual form/schedule Record Layouts for details of changes identified below.)

1. The Date Format for all date fields in each form and schedule has been changed from MMDDYYYY to YYYYMMDD or MMYYYY to YYYYMM.
2. The following Identifying Number fields have been deleted as part of the ongoing IMF/BMF Standardization effort:
 - Field #0009 – Schedule(s) E, F, Form(s) 4255, 8271
 - Field #0010 – Schedule(s) D, J, Form(s) 1116, 3468, 4562, 4684, 4797, 4952, 6198, 6252, 8271, 8582, 8582-CR, 8824
 - Field #0020 – Form 4835 Field #0060 – Schedule F
 - Field #0500 – Form 4684 Field #1009 – Schedule E
3. **FORM 1041:**
 - a) **Schedule G:** Fields # 1243 and 1246 have been deleted. The identification for Field # 1250 is now “Other nonbusiness credits”.
 - b) The computation in **Part IV** has changed significantly. As a result the Identification of following fields has changed: Field # (s)1367, 2190, 2200, 2220, 2260, 2280, 2290, 2300, 2310, 2320, 2330, 2340, 2360, 2370, 2380, 2390; the following **new fields** have been added: Field # (s)1840, 2400, 2410, 2420, 2430.
 - c) **Paid Preparer Authorization** check boxes have been provided by adding new Fields #0825 and 0826.
 - d) The literal “SEC641(c)” has been added to the Identification and Field Description for Field #1367.
4. **SCHEDULE D:**
 - a) **Part V** has been revised. As a result the Identification and Form References have changed for the following fields: Field #(s)1810, 1820, 1830, 1850, 1860, 1870, 1880, 1890, 1900, 1910, 1920, 1930, 1940, 1950, 1960, 1970. The following fields have been **deleted**: Field #(s)1980, 1990, 2000, 2010, 2020, 2030, 2040, 2050, 2060, 2070, 2080, 2090, 2100, 2110, 2120, 2130.
 - b) The literal “Like-Kind-Ex” has been removed from the following fields: Field #(s)0060, 0120, 0180, 0240, 0300, 0360, 0830, 0890, 0950, 1010, 1070, 1130.
5. **SCHEDULE H (FORM 1040):** The Identification for Field #0040 and #0045 has changed increasing the dollar amount to \$1300.

CHANGES FOR TAX YEAR 2001 (cont'd)

RECORD LAYOUTS:

6. **SCHEDULE K-1:** A **new** numeric field has been added, Field #0239 (Qualified 5-Year Gain) and the Identification and Form References for Fields #(s)0235, 0237, 0240 have changed accordingly.
7. **FORM 2439:** A **new** numeric field has been added for Line 1c, Field #0205 (Qualified 5-Year Gain) and the Form References for Field #0210 and #0220 have changed accordingly.
8. **FORM 3468:** Field #0045 changed from Reserved to "X" or Blank, Field #0280 has changed from Numeric to NO ENTRY, and 6 new fields have been added.
9. **FORM 4136:** This form has been extensively revised and renumbered.
10. **FORM 4255:** A new statement Field #*0375 has been added and Field #0010 is no longer a statement field.
11. **FORM 4797:** The literal "Like-Kind-Ex" has been removed from the following fields: Field #(s)0070, 0150, 0120, 0310.
12. **FORM 8824:** Page 2 has been revised and renumbered. Please see the new Record layouts.

VALIDATION

1. **REJECT CODE 160:** The validation for this reject code has been removed.
2. **REJECT CODE 162:** Additional District Office Codes 10, 12, 20, 26, 27, 30, 32, 40, 50, 60, 69, 70, 80, 90 have been included.
3. **REJECT CODE 170:** EINs with all of the same digits are not allowed.
4. **REJECT CODE 192:** The valid range for YYYY is now 2002 or less. The exception for the Entity Created Date has been eliminated.
5. **REJECT CODE 270:** Numerous fields have been added to this validation process: Please see the record layouts for Form 1041, Schedule D, Form 2439 and Form 4136.
6. **REJECT CODE 272:** Schedule E, Field #(s) 1070 and 1810 have been added.

CHANGES FOR TAX YEAR 2001 (cont'd)

VALIDATION:

7. **REJECT CODE 318:**
 Form 1041 - Field #1243 and #1246 have been deleted.
 Form 3468 - Field #0280 has been added to this process.

8. **REJECT CODE 322:** The following fields have been added to this process:
 Form 1041 – Field #0825 and #0826
 Form 3468 – Field #0045

9. **REJECT CODE 615:** This reject code was revised to include validation for all fields from #0030 - #0130, necessitated by addition of fields: #0071, and #0074 - #0077.

10. **REJECT CODE 690:** The dollar amount has increased from \$1,000,000 to \$10,000,000.

11. **REJECT CODE 730:** Form 1041, Field #1365 has been added to this process.

12. **REJECT CODE 790:** This reject code has been deleted.

13. As a result of the **Form 4136** revision and subsequent renumbering, all of the field numbers in the existing reject codes have changed. Please refer to the Validation Criteria in Section 6 for specifics. The affected Reject Codes are 303, 812, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861.

14. The following new Reject Codes have been added:
 - a) **REJECT CODE 682:** “If Form 1041 Page 1, Field #0710 is significant, then Form 2439 must be present and Field #0230, Form 2439, must equal Field #0710, Form 1041”.
 - b) **REJECT CODE 683:** If Form 1041 Page 1, Field #0720 is significant, then Form 4136 must be present and Field #0820, Form 4136, must equal Field #0720, Form 1041”.
 - c) **REJECT CODE 721:** “If Form 1041 Page 2, Field #1365 (Household Employment Taxes) is significant then Schedule H must be present”.

CHANGES FOR TAX YEAR 2001, (Continued)

- d) **REJECT CODE 732:** "If Form 1041 Page 2, Field #1367 contains the literal "SEC641(c)", then Field #1366 (Computation Schedule) must equal "STMbnn" and Field #1368 (Tax or Interest Due) must be significant".
- e) **REJECT CODE 745:** "If Form 1041 Page 1, Field #0825 (Paid Preparer Authorization Yes Box) equals "X", then Form 1041 Page 1, Field #0830 (Preparer's Name) must be significant".
- f) **REJECT CODE 746:** Form 1041 Page 1, Field #0825 (Paid Preparer Authorization Yes Box) and Form 1041 Page 1, Field #0826 (Paid Preparer Authorization No Box) cannot both equal "X".

LEGEND FOR RECORD LAYOUTS

1. IF SIGNIFICANT, MONEY AMOUNT FIELDS MARKED WITH THREE ASTERISKS (***), MUST CONTAIN POSITIVE AMOUNTS.
2. A "b" IN THE FORMAT OF ANY FIELD REPRESENTS A BLANK SPACE.
3. A FIELD NUMBER PRECEDED BY AN "@" SIGN INDICATES THAT THIS FIELD MUST CONTAIN A STATEMENT REFERENCE, WHEN SIGNIFICANT.

A FIELD NUMBER PRECEDED BY AN "*" SIGN INDICATES THAT THIS FIELD MAY CONTAIN A STATEMENT REFERENCE, WHEN SIGNIFICANT.

FIELDS WITH EITHER ONE OF THESE SIGNS ARE THE ONLY FIELDS THAT ARE ALLOWED STATEMENT RECORDS.
4. A FIELD NUMBER PRECEDED BY A "+" SIGN INDICATES THAT THIS IS A RELATED FIELD THAT MUST BE INCLUDED ON THE STATEMENT RECORD WITH THE CORRESPONDING ASTERISKED FIELD.
5. FIELDS MAY BE BLANK FILLED IF THE INFORMATION THAT IS REQUESTED DOES NOT APPLY.

GLOSSARY

1. **ACKNOWLEDGMENT REPORT** - A hardcopy acknowledgment issued by the IRS and sent to all Form 1041 electronic/magnetic media transmitters. The Acknowledgment Report contains information specifying the status of each return within a return file. It specifies which returns were accepted or rejected by the IRS programs or which returns were duplicate. The acknowledgment also includes information describing the transmitter and counts of the returns processed.
2. **ALPHANUMERIC (A/N)** - Pertains to the format value of specific fields included in the record layouts. Alphanumeric format includes A-Z (UPPER CASE ONLY), 0-9 and certain special characters where specified.
3. **ASCII** - American Standard Code for Information Interchange
4. **BLOCK** - A group of several records
5. **BYTE COUNT** - The first field in any record. The Byte Count field has four characters and its value must include the total count of the record as shown in the record layouts.
6. **EBCDIC** - Extended Binary Coded Decimal Interchange Code
7. **EIN** - Employer Identification Number. A nine (9) digit numeric which identifies an entity or taxpayer.
8. **END OF RECORD** - Delimiter represented by a pound sign ("#"), marking the end of any record. Also referred to as the Record Terminus Character.
9. **ETIN** - Electronic Transmitter's Identification Number. An 8 digit identification number assigned by the Philadelphia Submission Processing Center to all participants in the electronic/magnetic media filing program who have been tested and accepted as transmitters. This number identifies an accepted transmitter in the TRANS Record and the RECAP Record.
10. **LOGICAL RECORD** - A record within a block
11. **RECAP RECORD** - The RECAP Record is the final record within a Transmission and contains the count for all the returns submitted within the file. (1 RECAP Record per file is REQUIRED)

GLOSSARY (CONT'D)

12. **RECORD CONTROL INFORMATION** - The Record Control Information contains specific information describing each type of record (e.g. type of form or schedule, page number, EIN, tax period, etc.)
13. **RECORD SENTINEL** - The second field on all records represented by four asterisks ("****").
14. **RECORD TERMINUS CHARACTER** - The last field on all records represented by a pound sign ("#") marking the end of a logical record.
15. **REJECT CODE** - A three character number representing an invalid condition within a Form 1041 return record or a transmission. Reject codes are set by the IRS validation programs and are listed in the Acknowledgment Report.
16. **SIGNIFICANT ENTRIES** - Fields that contain numeric or alphanumeric values other than blanks or zeros.
17. **SPECIAL (DATA) CHARACTERS** - Characters (other than alpha, alphanumeric or numeric) allowed in certain cases.
18. **SUMMARY RECORD (SUM)** - The Summary Record is the final record within a return. This record will contain magnetic tape filer identification data; counts of the schedules, forms and statements included in one return; and indicators for paper documents retained by the magnetic tape filer for subsequent submission to the IRS. REQUIRED
19. **TRANSMISSION OR TRANS RECORD** - The first record of a transmission which identifies the electronic/magnetic media transmitter. (1 TRANS RECORD PER FILE IS REQUIRED)
20. **TRANSMISSION** - Submission of tax returns for Form 1041 via telephone lines or using magnetic media (magnetic diskettes or magnetic tape).
21. **TRANSMITTER** - Submits Form 1041 tax returns to the IRS via telephone lines or on magnetic media, in a format that IRS can process, as specified in this publication.

SECTION 1 DATA COMMUNICATIONS

.01 MAGNETIC TAPE FILE SPECIFICATIONS

In most instances, the Philadelphia Submission Processing Center will be able to process any compatible tape files. Tape files must meet the following criteria:

- | | | | |
|------|-------------------|---|---|
| (1) | Type of Tape | - | 0.5 inch (12.7mm) wide, computer-grade, magnetic tape on reels of up to 2400 feet (731.52m) |
| (2) | Tape Thickness | - | 1.0 or 1.5 mils |
| (3) | Reel Diameter | - | 10.5 inch (26.67cm), 8.5 inch (21.59cm), or 7 inch (17.78cm) |
| (4) | Recording Density | - | 6250 or 1600 BPI (bits per inch) density |
| (5) | Parity | - | Odd |
| (6) | Interrecord Gap | - | 3/4 inch |
| (7) | Recording Mode | - | 9 channel EBCDIC (Extended Binary Coded Decimal Interchange Code) or ASCII (American Standard Code for Information Interchange) |
| (8) | Track | - | 9 Track unlabeled tape |
| (9) | Recording Format | - | Fixed or variable |
| (10) | File Format | - | Standard Interchange (Variable blocks format) - Records cannot span reels or volumes |

A physical label (**see Exhibit 5**) should be affixed to the exterior of the tape with the following information:

- (1) NAME OF TRANSMITTER
- (2) ELECTRONIC TRANSMITTERS IDENTIFICATION NUMBER (ETIN)
- (3) KIND OF RETURN - FORM 1041 DATA

- (4) CHARACTER CODE (ASCII OR EBCDIC)
- (5) RECORDING DENSITY (6250 BPI OR 1600 BPI)
- (6) DATA DESCRIPTION (TEST DATA, LIVE DATA, OR ENTITY DATA)
- (7) NUMBER OF TAPES (Indicate sequence number (e.g. "1 of 3", "1 of 2", etc.))
- (8) NUMBER OF RETURNS
NUMBER OF RETURNS WITH REMITTANCES

.02 FLOPPY DISKETTE SPECIFICATIONS

In most instances, the Philadelphia Submission Processing Center will be able to process any compatible floppy disk file. Floppy disk files must meet the following criteria:

- (1) 5 1/4 - Soft sectored, double sided, double density, 360 KB capacity; or

double sided, high density, 1.2 MB capacity
- (2) 3 1/2 - Double sided, double density, 720 KB capacity; or

double sided, high density, 1.44 MB capacity
- (3) Diskette Format - Standard MSDOS 2.1 or higher
- (4) Record Format - Fixed or variable
- (5) File Format - Variable blocked format Records cannot span diskettes.
- (6) Character Code - ASCII (American Standard Code for Information Interchange)

A physical label (**see Exhibit 5**) should be affixed to the exterior of the diskette with the following information:

- (1) NAME OF TRANSMITTER
- (2) ELECTRONIC TRANSMITTERS IDENTIFICATION NUMBER (ETIN)

- (3) KIND OF RETURN - FORM 1041 DATA
- (4) CHARACTER CODE (ASCII)
- (5) DATA DESCRIPTION (LIVE, TEST, ENTITY)
- (6) NUMBER OF DISKETTES (Indicate sequence number (e.g. "1 of 3", "1 of 2", etc.))
- (7) NUMBER OF RETURNS
NUMBER OF RETURNS WITH REMITTANCES

.03 TRANSMISSIONS VIA TELEPHONE LINES

Form 1041's can be transmitted to the IRS using the IRS Bulletin Board and can be accessed via dial-up telephone lines at speeds from 2,400 to 56,000 bps. The speed is automatically negotiated for connection at the speed of the calling modem. Standard Asynchronous protocols that may be used are:

- P - Prompted ASCII
- C - ASCII, XON after <CR> rcvd
- A - ASCII, XOFF/XON flow control
- X - XMODEM
- O - XMODEM-1k
- Y - YMODEM (Batch)
- G - YMODEM-g (Batch)
- S - SEALink
- K - KERMIT
- W - SuperKERMIT (Sliding Windows)
- Z - ZMODEM-90(Tm)

Filers who wish to transmit via modem must coordinate a test transmission with the Philadelphia Submission Processing Center. Please call the ELF Processing Support Section at (215) 516-7533 (not toll free) or 1-800-829-6945 (toll free) for additional information.

The Philadelphia Submission Processing Center will upload the Acknowledgment Report for those filers who have transmitted their returns via modem. Allow at least 48 hours for processing and generation of the Acknowledgment Report before checking for a mail message notifying you that the report is in your file.

SECTION 2 FILE FORMAT

.01 GENERAL DESCRIPTION

All transmission data must be in ASCII or EBCDIC format. Do not transmit binary fields.

- (1) All logical records must be transmitted (via magnetic tape, diskette or electronically) in a series of logical blocks. A four-byte counter must precede each logical record within a block (maximum size of a block is 28,672 characters per block). The byte count must include the length of the record plus the length of the byte count, the Start of Record Sentinel 4 asterisks ("****") and the Record Terminus Character pound sign or hash mark ("#").

NOTE: If transmitting electronically, utilize space compression to decrease transmission time.

- (2) Every logical record must have the Record Terminus character ("#") as its last significant byte. We have made provisions in the IRS programs to allow for non-significant padding following the Record Terminus character only within an UNBLOCKED (one record per block) format. Blanks may be added after the Record Terminus Character to fill up a physical block size (blank padding should never separate logical records within a block). This padding (within the UNBLOCKED record format) is permitted to accommodate all the different computer systems being used to format the data.
- (3) Records must be fixed (all records within the return are the same length) or variable (each record within the return is of the length as specified in **Section 9**).

The following data structures are acceptable:

1. variable length, unblocked records
2. variable length, blocked records
3. fixed length, unblocked records

A fixed length blocked record data structure is unacceptable, as this format will produce blank padding between logical records within the block.

- (4) Files must not contain more than 5,000 Form 1041 tax returns. Large return files (with up to a maximum of 5,000 returns, including attached forms and schedules) may be transmitted on more than one magnetic tape or floppy disk. It is important to remember that a tax return must never be spanned between magnetic tapes or floppy disks.
- (5) In magnetic tape and diskette files, the recognition of the Record Terminus Character ("#") followed by an End of Volume (EOV) marker (one tape mark), will indicate that there are still more tapes/floppy disks to be read. A return cannot be split between tapes. Otherwise, the recognition of the Record Terminus character followed by End of File (EOF) marker (two tape marks), will indicate the last record of the tape file.
- (6) The first record on a transmitted file (the TRANS Record) contains information regarding the transmitter and file format. This record should be followed by the records comprising a tax return being transmitted. The last record on a transmitted file (the RECAP Record) provides a total return count (Field #0010) which is compared to the IRS computer count.
- (7) The TRANS Record also uniquely identifies each file transmitted. Field #0090 (Transmission Sequence Number) of the TRANS Record is used for this purpose.
- (8) A tax return will consist of a variable number of fixed-field records. The size and format of the logical record for each page of each form, schedule etc., are specified in the Record Layouts (**Section 9**). In addition, a variable field/record format option is acceptable. See details under Variable Length Option.
- (9) Each logical record should contain all data fields pertaining to one printed page of an official form or schedule or to a line of a statement. Therefore, the logical record contains an entire form or schedule; or a logical part (i.e., PG01 or PG02 of a form or schedule; or a line of a statement).

EXCEPTION: **The variable length option REQUIRES significant fields only.**

.02 RETURN SEQUENCE ORDER

The sequence of a complete Form 1041 tax return file submission is as follows:

- (1) Transmission or TRANS Record (REQUIRED)
- (2) Return (RET) Record (REQUIRED)
- (3) Schedule (SCH) Records - transmit in ascending alpha sequence.
- (4) Form (FRM) Records - transmit in ascending numeric sequence.
- (5) Statement (STMbnn) Records for forms and schedules other than Schedule K-1.
- (6) Schedule K-1 records - transmit in ascending numeric sequence.
- (7) Statement K1 - must follow the corresponding Schedule K-1.
- (8) Federal/State Requirements
- (9) Summary Record (REQUIRED)
- (10) RECAP Record - (REQUIRED)

.03 SEQUENCE AND DESCRIPTION OF A TAX RETURN

A complete tax return of Form 1041 must consist of all logical records pertaining to it in the following sequence:

- (1) Form 1041 (U.S. Income Tax Return for Estates and Trusts)
Page 1 and 2 (REQUIRED) Page 3 and 4 (OPTIONAL)
- (2) Schedule C (Form 1040) (Profit or Loss From Business)
Page 1 and 2; more than 1 schedule may be present.
- (3) Schedule C-EZ (Form 1040) (Net Profit From Business)
Page 1; more than 1 schedule may be present.

- (4) Schedule D (Form 1041) (Capital Gains and Losses)
Page 1 and 2; only one allowed.
- (5) Schedule E (Form 1040) (Supplemental Income and Loss)
Page 1 and 2 (page 1 is not required if page 2 is present); more than 1 schedule may be present.
- (6) Schedule F (Form 1040) (Profit or Loss From Farming)
Page 1 and 2; more than 1 schedule may be present.
- (7) Schedule H (Form 1040) (Household Employment Taxes)
Page 1 and 2; more than 1 schedule may be present.
- (8) Schedule J (Form 1041) (Trust Allocation of an Accumulation Distribution)
Page 1 and 2; more than 1 schedule may be present.
- (9) Form 1116 (Foreign Tax Credit)
Page 1 and 2; more than 1 form may be present.
- (10) Form 2210 (Underpayment of Estimated Tax by Individuals, Estates and Trusts)
Page 1, 2, 3 (page 2 is required when page 3 is filed); only one allowed.
- (11) Form 2210F (Underpayment of Estimated Tax by Farmers and Fishermen)
Page 1; only one allowed.
- (12) Form 2439 (Notice to Shareholder of Undistributed Long-Term Capital Gains)
Page 1; more than 1 form may be present.
- (13) Form 3468 (Investment Credit) Page 1; only one allowed.
- (14) Form 4136 (Credit for Federal Tax Paid on Fuels)
Page 1 and 2; only one allowed.
- (15) Form 4255 (Recapture of Investment Credit)
Page 1; more than 1 form may be present.
- (16) Form 4562 (Depreciation and Amortization)
Page 1 and 2 (page 2 is not required, but page 1 is required when page 2 is present); more than one form may be present.

- (17) Form 4684 (Casualties and Theft)
Page 1 and 2; more than 1 form may be present.
- (18) Form 4797 (Sale of Business Property)
Page 1 and 2; only one allowed.
- (19) Form 4835 (Farm Rental Income and Expenses);
Page 1; more than 1 form may be present.
- (20) Form 4952 (Investment Interest Expense Deduction)
Page 1; only one allowed.
- (21) Form 4970 (Tax on Accumulation Distribution of Trusts)
Page 1; only one allowed.
- (22) Form 4972 (Tax on Lump-Sum Distributions)
Page 1; more than one form may be present.
- (23) Form 6198 (At Risk Limitation) Page 1; more than 1 form may be present.
- (24) Form 6252 (Installment Sale Income)
Page 1; more than 1 form may be present.
- (25) Form 8271 (Investor Reporting of Tax Shelter Registration Number)
Page 1; more than 1 form may be present.
- (26) Form 8582 (Passive Activity Loss Limitation) Page 1; only one allowed.
- (27) Form 8582-CR (Passive Activity Credit Limitations)
Page 1 and 2; only one allowed.
- (28) Form 8801 (Credit for Prior Year Minimum Tax Individuals, Estates and Trusts)
Page 1 and 2; only one allowed.
- (29) Form 8824 (Like Kind Exchanges)
Page 1 and 2; more than 1 form may be present.
- (30) Form 8829 (Expenses for Business Use of Your Home)
Page 1; more than 1 form may be present.

- (31) Statement ("STMbnn", "STMb97" and "STMb98") statement records for forms/schedules other than Schedule K-1; more than 1 STM98 may be present.
- (32) Schedule K-1 (Beneficiary's Share of Income, Credits, Deductions, etc.); more than 1 Schedule K-1 may be present.
- (33) Statement for Schedule K-1 (STMb99) - must follow the corresponding Schedule K-1.
- (34) Summary Record
1 Summary record per tax return (REQUIRED).

NOTE: For any of the forms or schedules listed above having more than 1 page, Pages 2, 3 and/or 4 do not have to be submitted if there are no entries. However, if a Page 2, 3 and/or 4 have entries, a Page 1 must also be present.

EXCEPTION: Only Pages 1 & 2 of the Form 1041 are required. If Page 4 of Form 1041 is needed, Page 3 is always required. Page 1 of Schedule E is not always required when Page 2 is filed.

.04 FILER INFORMATION: (Information relating to a file submitted by a filer.)

- (1) The file should be unlabeled (no standard header or trailer records).
- (2) Each file must contain only complete returns.
- (3) Do not generate a page of a form or schedule if there are no entries on the page record. A blank page (Record ID only) will cause the return to be rejected. (Except in cases where multiple forms require that one page be present if the other is.)
- (4) The first record of a transmission is the TRANS Record.
 - 1. The first series of records of a tax return consists of Form 1041 Page 1, Form 1041 Page 2, and optional Form 1041 Page 3, and/or Page 4.
 - 2. The second series of records are the Schedule Records (excluding Schedule K-1). **See Section 9 Record Layouts for format.** They must be in ascending alpha sequence.

3. The third series of records are the Form Records. **See Section 9 Record Layouts for format.** They must be in ascending numeric sequence.
 4. Statements are the fourth series of records (excluding statement for Schedule K-1). They can be used by the electronic filer only when the number of data items exceeds the number that can be contained in the space provided on the printed form or schedule or when a statement of explanation is required for a specific condition.
 5. Schedule K-1 records are the fifth series of records. They must be in ascending numeric sequence.
 6. Statements for Schedule K-1's should follow the corresponding Schedule K-1 in ascending numeric sequence.
- (5) A Summary Record will be the final record for each tax return. This record will contain electronic filer identification data and counts of the Schedules, Forms and Statements included in the return.
- (6) The end of a logical transmission (magnetic tape, floppy diskette or electronic) will be signaled by the literal "RECAP" (Field #0000 in the Record ID) followed by the RECAP Record data, the Record Terminus Character and the (EOF, End of File marker (two tape marks)).

.05 FIXED LENGTH OPTIONS

The fixed record length option requires that the complete tax form be transmitted exactly as defined in **Section 9** and all fields must be present. The fixed format will be indicated by an "F" in the Data Field Indicator field (#0030) of the Transmission "TRANS" record.

.06 VARIABLE LENGTH OPTIONS

The variable length option provides for the transmission of only key fields and significant data fields within a return record. The TRANS, Statement, Summary & RECAP records must be transmitted in a fixed format and data must appear in the correct byte positions and be blank-filled when data is not present.

- (1) The variable format will be indicated by a "V" in the Data Field Indicator field (#0030) of the Transmission "TRANS" record. In variable format, the data field is preceded by the applicable field identification number shown in specific record layouts. The field identification number is enclosed within square bracket field delimiters ([]).

NOTE: The Record Control Information must precede any variable format but must not be presented with Field numbers. See example on page 13.

- (2) The beginning of Record Control Information (the first 42 characters including the Byte Count plus Start of Record Sentinel) and the Record Terminus Character remain in the same fixed format shown; the individual data fields need only contain the significant data (i.e. no leading zeros or trailing spaces). The TRANS, Statement, Summary and RECAP records, which are not keyed to field numbers, must be full length expanded records.
- (3) **IMPORTANT:** THE FOLLOWING THREE CHARACTERS left bracket "[", right bracket "]", and pound sign or hash mark "#" ARE RESERVED AS DELIMITERS AND MAY NOT APPEAR AS DATA CHARACTERS.
- (4) For variable length records the following data field conventions must be followed:
 1. For unsigned numeric fields, leading zeros may be dropped, except for date and percentage fields.
 2. For signed numeric fields, the leading zeros may be dropped as well as the trailing blank sign character for positive values. For negative values in a gain/loss field, the minus sign ("-") must be present, trailing the number.
 3. For alphanumeric fields, there cannot be leading blanks. Trailing blanks may be dropped, i.e., left justified.
 4. For fields defined as having literal values, only the literal value (including embedded blanks) must be supplied.
 5. The field identification number may contain four characters. If the field identification number in the record layouts contain three (3) characters, a leading zero may be inserted.

6. Data with no intervening spaces is linked together to the field identification number.

NOTE: THE BYTE COUNT MUST INCLUDE THE FOUR CHARACTER BYTE COUNT FIELD, THE RECORD SENTINEL FIELD AND ALL LEFT/RIGHT BRACKETS INCLUDING THE FIELD NUMBERS. THE BYTE COUNT FOR VARIABLE FORMAT RECORDS IS AN ACTUAL BYTE COUNT, NOT THE BYTE COUNTS SPECIFIED IN SECTION 9, RECORD LAYOUTS.

EXAMPLE OF VARIABLE RETURN RECORD:

0162****RETbbb1041bbPG01b123459679b200105b[07]01[0010]06011999[0020]20010531[0030]BELM[0040]123459679[0060]BELMONT[0090]1020bSLUGUARD[0100]HYBLAbVALLEY[0110]GA[0120]22734#0123****RETbbb1041bbPG02b123459679b200105b01[0928]STMb01[0940]2500[0945]STMb02[0950]1500[1190]X[1200]X[1280]3468[1410]Y[1450]Y#

- | | |
|----------------------------------|---|
| 1. Byte count (0162) | 9. Filler (b) |
| 2. Start Record Sentinel (****) | 10. Form 8453-F Indicator (01) |
| 3. Record - ID (RETbbb) | 11. Field Number (0010) |
| 4. Type (1041bb) | 12. Date (20010601) |
| 5. Page Number (PG01b) | 13. Record Terminus Char. (#) |
| 6. Employer ID (EIN) (123459679) | 14. Byte Count of Page 2 and beginning of next record ID (0123) |
| 7. Filler (b) | |
| 8. Tax Period (200105) | |

EXAMPLE OF VARIABLE SCHEDULE RECORD:

0129****SCHbbbDbbbbPG01b123456789b0000001[0010]173056789[0030]WHIT EHOUSE[0040]20010525[0050]20010930[1130]LIKE-KIND-EX[1210]150000#

- | | |
|----------------------------------|---|
| 1. Byte count (0129) | 7. Filler (b) |
| 2. Start Record Sentinel (****) | 8. Schedule Occurrence Number (0000001) |
| 3. Record - ID (SCHbbb) | 9. Field Number (0010) |
| 4. Type (Dbbbb) | 10. Data (173056789) |
| 5. Page Number (PG01b) | 11. Record Terminus Char. (#) |
| 6. Employer ID (EIN) (123456789) | |

EXAMPLE OF VARIABLE FORM RECORD:

0079****FRMbbb1116bbPG01b223457889b0000001[0010]123344789[0030]X[0090]X[0290]WAGES#

- | | |
|----------------------------------|-------------------------------------|
| 1. Byte count (0079) | 7. Filler (b) |
| 2. Start Record Sentinel (****) | 8. Form Occurrence Number (0000001) |
| 3. Record - ID (FRMbbb) | 9. Field Number (0010) |
| 4. Type (Dbbbb) | 10. Data (123344789) |
| 5. Page Number (PG01b) | 11. Record Terminus Char. (#) |
| 6. Employer ID (EIN) (223457889) | |

SECTION 3 TYPES OF RECORDS

.01 TRANSMISSION RECORD (REQUIRED)

The first record on each file must be the Transmission Record (TRANS) which will identify the Transmitter, the file format, and the specific file being transmitted. The Transmitter is the firm transmitting directly to the IRS.

.02 TAX RETURN RECORD (Form 1041) (REQUIRED)

The second record is the Return Record. Each tax return must start with a Form 1041 page 1 and be followed by a Form 1041 page 2 and if needed, Form 1041, page 3 and/or 4.

.03 SCHEDULE RECORD

If Schedule Records are included in the return they should follow the Return Record and should be the second series of records. Each Schedule Record within a Form 1041 return contains a Schedule Occurrence Number. This number increases within the schedule itself. If a return contains a Schedule D (only one allowed) and several Schedule K-1's the Schedule D Schedule Occurrence Number would be 0000001 on both pages 1 and 2. The first Schedule K-1 Schedule Occurrence Number would also begin with 0000001 but would increase by one for each succeeding Schedule K-1 (i.e., 0000002, 0000003, 0000004, etc). Each schedule should appear in ascending alphabetic order by schedule type. For each schedule filed the appropriate summary count should be increased.

.04 FORM RECORD

If Form Records are included in the return they should follow the schedules and should be the third series of records. Each Form Record within a Form 1041 return contains a Form Occurrence Number. This number increments within the form itself. If a return contains several Form 1116's and a Form 2210 (only one allowed) the Form 2210 Form Occurrence Number would be 0000001 on all three pages (if all three pages are present). The first Form 1116 Form Occurrence Number would also begin with 0000001 on both pages 1 and 2 but would increase by one for each succeeding Form 1116 (i.e., 0000002, 0000003, 0000004, etc). Forms must be in ascending numeric sequence order. For each form filed the appropriate summary count should be increased.

.05 STATEMENT RECORD

(1) The Statement Record (excluding K-1) is the fourth series of records after Returns, Schedules and Forms and can be used only where the Record Layout specifies "STM nn". To determine how the data is to be formatted, consult the Record Layouts. Statement Records are used ONLY WHEN:

1. The number of data items exceeds the number that can be contained in the space provided on the printed form or schedule. Data must be provided on a separate Statement (STM) Record or a statement of explanation is required for a specific condition. (OPTIONAL)

NOTE: References to this type of statement are marked with an "*" in Section 9, Record Layouts.

2. A statement of explanation is necessary under certain conditions. (REQUIRED)

NOTE: References to this type of statement are marked with an "@" in Section 9, Record Layouts.

(2) An optional statement (marked with an asterisk '*' sign in the record layout) or a required statement (marked with a commercial at '@' sign in record layout) will contain at least one statement line record if corresponding fields contain significant data, otherwise the fields should contain blanks.

(3) Each line of a statement must contain the EIN of the primary taxpayer and is considered a record itself.

(4) After the EIN, each line of the statement data must equal 80 characters or bytes. The total bytes for each line must equal 136.

(5) Each Statement Record is given a sequential number from 01 to 96 (with 97, 98 and 99 reserved for Schedule D, J and K-1 respectively). References to statements on the tax return must be in ascending numeric sequence and must be referenced in the same sequence as they appear on the forms and schedules.

NOTE: Although Statement Record reference numbers must be in ascending sequence, they do not have to be in consecutive numerical sequence.

- (6) A statement for a return, schedule or form record will consist of at least one Statement Record. There is a maximum of 4 pages with 50 lines per statement reference. (Exception: "STMb97" for Schedule D, "STMb98" for Schedule J, and "STMb99" for Schedule K-1 have a limit of 99 pages per statement.)
- (7) The 80 character literal description of data corresponding to any Statement Record within the return, containing non-tabular data (e.g. Field #0380 Form 1041), will begin with line 1. Data should appear left-justified as a continuous print line. The same statement may be continued with additional lines, consecutively numbered, until a maximum of 50 lines have been formatted for the first page or the end of the information needed to be formatted as a statement has been reached, whichever comes first. If additional lines are needed to complete a statement, an additional page with a maximum of 50 lines may be formatted with the line numbering sequence starting with line one.
- (8) The Statement Record with tabular data may contain column headings (tabular column titles) spaced with the headings as they would appear on the printed form. If the statement data does not require tabulation, free format is allowed.
- (9) Statement (STM 97) - Free form Statement Records specified for Schedule D. The Statement Record for a Schedule D is used in place of paper attachments to the Schedule D. Statement Records for Schedule D (STM 97) must have the same Employer Identification Number (EIN) as the corresponding Schedule D.
- (10) Statement (STM 98) - Free form Statement Records specified for Schedule J. The Statement Record for a Schedule J is used in place of paper attachments to the Schedule J. Statement Records for Schedule J (STM 98) must have the same Employer Identification Number (EIN) and Schedule J sequence number as the corresponding Schedule J.
- (11) Statement (STM 99) - Free form Statement Record for Schedule K-1. The Statement Record for a Schedule K-1 is used in place of paper attachments to the Schedule K-1. There is a limit of 999 Statement Records allowed for each Schedule K-1. Statements related to each Schedule K-1 must have the same sequence number and Employer Identification Number (EIN) as the related Schedule K-1. Schedule K-1 Statement Records must trail each corresponding Schedule K-1. Each statement can consist of 99 pages with 50 lines each.

(12) Statement (Global) - Free form Statement Record used for part, or all of a schedule/form.

.06 SUMMARY RECORD (REQUIRED)

The Summary Record will be the final record for each Form 1041 tax return. This record will contain filer identification data; counts of the schedules, forms and statements included in one return; and indicators for paper documents retained by the magnetic tape filer for subsequent submission to the IRS. **(See Section 9 Record Layouts for more information)**

.07 RECAP RECORD (REQUIRED)

The RECAP Record is the final record in a return file. Fields in this record cross reference the transmitters information from the first record of the transmission, the TRANS Record. The RECAP Record contains a field that specifies the total return count for all the records submitted within the transmission. **(See Section 9 Record Layouts.)**

SECTION 4 TYPES OF CHARACTERS

The following will illustrate the various characters that are allowed in electronically filed returns.

.01 ALPHA (A) A - Z Upper case alpha characters only. (Literals - must be in the exact character string as shown in the **Section 9 Record Layouts**)

.02 NUMERIC (N) 0 - 9 Numeric characters only - must be right-justified, zero-filled (except as noted below)

(1) Money amount field - 12 characters - 11 numeric characters followed by a minus sign to represent a negative amount, or followed by a blank space to represent a positive amount.

Whole dollars only are accepted, no cents.

Significant entries (not all zeros) - must be right-justified, zero-filled.

Non-significant entries - zero or blank-filled;

No dollar signs, decimal points, or other non-numeric characters are allowed.

- (2) Percentage fields for Form 1041 - 6 numerics
Percentage fields for Schedule K-1 - 6 numerics

Must be left-justified, zero-filled, no decimal points entered. (assumed to be between the left-most and the second left-most position).

Non-significant percentage fields - zero-filled or blank.

EXAMPLE: 25.32% = 025320, 105% = 105000
If less than 100% - precede with 1 zero

- (3) Zip code (N) 12 character numeric field, must be left justified. If using only 5 ZIP Code characters, the last 7 remaining digits must be either blank or zero filled. If using only 9 zip code characters, the last 3 remaining digits must be blank or zero filled.

EXAMPLE: nnnnnbbbbbbb
nnnnnnnnnnbbb
nnnnnnnnnnnn

- (4) Other (N) - If present - must be all numeric, right-justified, zero-filled;

If not present - blank-fill unless otherwise specified in the Record Layout for that field.

- (5) Dates (DT) - M = Month, D = Day, Y = Year (YYYYMM or YYYYMMDD) If date is not known or covers various dates, blank-filled.

.03 ALPHANUMERIC (AN) A - Z (Uppercase), 0 - 9 and special characters as listed below. Literals - must be exact character string as shown in **Section 9** Record Layouts.

- (1) Special Data Characters - Only the following characters can be used in certain cases: Ampersand (&); Blank () - often shown as "b"; Comma (,); Hyphen (-); Percent (%); Slash (/)
- (2) Special Delimiters - Only used to delimit:
Field numbers - Brackets - Left ([), Right (]);
End of Records - Pound Sign (#)
Beginning of Record - Asterisk (****)

- (3) Special Symbols and their hexadecimal conversion characters for ASCII and EBCDIC are below:

Symbol	ASCII	EBCDIC	Symbol	ASCII	EBCDIC
	Hex	Hex		Hex	Hex
[	5B	4A	-	2D	60
]	5D	5A	&	26	50
#	23	7B	/	2F	61
			%	25	6C

NOTE: Some of the above symbols are not permitted in certain fields.

.04 SPECIAL CASES FOR SPECIAL FIELDS

(1) TAX PERIOD:

1. For the purpose of this publication the valid tax periods for tax year 2001, are:
 - (a) Calendar year returns - 200112.
 - (b) Fiscal year returns - 200201, 200202, 200203, 200204, 200205, 200206, 200207, and 200208.

2. The Tax Period, Field #0005 in the Return Record is composed of a numeric month and year of the Calendar/Fiscal Year Ending for which the return is being filed. The format is YYYYMM (YYYY = year and MM = month). For example, a return with a Calendar/Fiscal Year Ending of February 15, 2002 will be assigned a Tax Period of 200202. Returns filed under the 52 - 53 week rule may end not more than 6 days before or more than 3 days after the close of the month. They should be assigned a Calendar/Fiscal Year Ending based on that month (i.e. if the ending date is August 3, 2002, the Tax Period field will be 200207 or if the ending date is August 25, 2002, the Tax Period is 200208).

(2) NAME CONTROL:

1. The Name Control (Field #0030) in the Return Record for a trust should be determined from the information specified on the name of the estate or trust line (Field #0060). The Name Control consists of the first four characters of the surname, corporation, trust name or number. The Name Control field for estates should be derived from the first four characters of the last name of the decedent.

EXAMPLES:

<u>Trusts/Estates</u>	<u>Name Control</u>
Appletree Trust Co. Trustees U/W of Kate B. Crabapple Dec'd (FBO Edna M. Rose)	CRAB
Treas. of the State of NC in Tr. for Jasmine Ins. Co.	JASM
GNMA Pool No. 008619 Chicago Bank TTEE	8619
Welfare Fund of International/Union of Operating Engineers/Locals 436 & 436B AFL-CIO Locals 436 & 436B TTEE	WELF
Tstmtry. Trust UW Maggie Plum for Claudia Ivy & Warren Iris W. Verbena & Charles Plum c/o Willow & Plum	PLUM

2. Disregard blanks between letters in the last name. Omit punctuation marks, titles and suffixes. Exclude the word "the" when followed by more than one word.
3. For Indian tribes, use the name of the tribe.

4. For FNMA or GNMA Mortgage Backed Securities, use the first four digits of the trust number, disregarding any leading zeros. If there are fewer than four numbers, use the letters "GNMA" or "FNMA" for GNMA and FNMA Pools respectively to complete the name control.

EXAMPLES:

GNMA Pool No. 00100, use 100G as the Name Control.

FNMA Pool No. 00100, use 100F as the Name Control.

5. Before you determine the name control, take the following into consideration.
 - (a) The first position can only be alpha and numeric characters, A-Z and 0-9.
 - (b) Positions 2, 3, and 4 can be alpha and numeric characters A-Z and 0-9; the ampersand (&), hyphen (-) and blanks are the only special characters allowed.
 - (c) Intervening spaces between characters are not allowed.

EXAMPLES:

<u>INDIVIDUAL NAME</u>	<u>PRIMARY NAME CONTROL</u>
John Brown	BROW
John Lea-Smith	LEA-
John Di Angelo	DIAN
John O'Neil	ONEI
John En, Sr.	EN
Joe McCarty	MCCA
Mary Smith & John Jones	SMIT

Consider certain foreign suffixes as part of the last name (i.e., Armah-Bey, Paz-Ayala, Allar-Sid). Give particular attention to those names which incorporate a mother's maiden name as a suffix to the last name. This practice is common in names of Spanish extraction. Consider the mother's maiden name as part of the surname for Name Control purposes.

EXAMPLES:

<u>INDIVIDUAL NAME</u>	<u>PRIMARY NAME CONTROL</u>
Pedro Paz-Ayala	PAZ-
Abdullah Allar-Sid	ALLA
Juan de la Rosa Y Obregon	DELA
Jose Alvarado Nogales	ALVA
Donald Vander Neut	VAND
Otto Von Wodtke	VONW

Below are examples of Indo-Chinese last names and the derivative Name Control. Some Indo-Chinese names have only two characters. Indo-Chinese names often have a middle name of "Van" (male) or "Thi" (female). The last name Nguyen is common.

EXAMPLES:

<u>INDIVIDUAL NAME</u>	<u>PRIMARY NAME CONTROL</u>
Binh To La	LA
Kim Van Nguyen	NGUY
Nhat Thi Pham	PHAM
Jin-Zhang Qui & Yen-Yin Chiu	QUI

(3) NAME LINE 1:

1. DO NOT ENTER MORE THAN 35 CHARACTERS! You must abbreviate the name to fit within the allotted space.
2. No leading or consecutive embedded blanks. The only characters allowed are alpha, numbers, blank, and the special characters ampersand (&) and hyphen (-). The left most position must be alpha.
3. All apostrophes (') and any other punctuation characters, except the hyphen (-), and ampersand (&) must be omitted from names and the alphabetic characters must be shifted to the left in their place (e.g., O'Shea = OSHEA).
4. Numeric Characters in name components must be replaced by alphabetic Roman Numerals (e.g., Charles 3rd = CHARLES III)

(4) NAME LINE 2:

1. Will be used for street addresses that require two lines or "In Care Of" address. An "In Care of" address must be indicated by a percent character (%) followed by a space and the name which is in care of delivery.

**EXAMPLE: Mr. John Jones
In Care of Alice B. Smith
801 Brown St.**

**ENTER AS: JOHN JONES (Primary First Name,
Primary Last Name)
% ALICE SMITH (Name Line 2)
801 BROWN ST (Street Address)**

2. Is alphanumeric left justified and can have no leading or consecutive embedded spaces. The only special characters allowed are space, ampersand (&), hyphen (-), slash (/) and percent (%) for in care of address.

(5) EIN: Must be 9 numeric characters, left justified 0 - 9.

(6) STREET ADDRESS:

1. Is alphanumeric and can have no leading or consecutive embedded spaces. The only special characters allowed are space, hyphen (-), and slash (/).
2. Only one intervening space may separate any two components. Periods should be deleted from these lines.
3. The first position or character must be alphabetic or numeric.
4. Enter the house number and street, route number, post office box, or box number. The literal "NONE" must be entered in the street address if there is no data.

5. Special Instructions for Foreign Addresses: Enter street address, including province and or mailing code in Field #0090.

EXAMPLE:

Field #0090 - "20 CHAMPS ELYSEE 75307 PARIS (7 blanks)"
Field #0100 - "FRANCE (16 blanks)"
Field #0110 - ". "
Field #0120 - "(12 blanks)"

If Field #0090 requires more than 35 characters, abbreviate whenever possible.

6. Special Instructions for Schedule K-1 Foreign Addresses: Enter street address in Field #0090, Name Line 2 (Beneficiary's).

EXAMPLE:

Field #0090 - "20 CHAMPS ELYSEE (19 blanks)"
Field #0100 - "PARIS 75307 (24 blanks)"
Field #0110 - "FRANCE (16 blanks)"
Field #0120 - ". (1 blank)"
Field #0130 - "(12 blanks)"

7. Words may be abbreviated, using the standard abbreviations in **Exhibit 1**, unless the word is a proper name.

EXAMPLES

ENTER AS

South Court Street	S COURT ST
Circle Drive	CIRCLE DR
Lane Building	LANE BLDG
Northeast Street	NORTHEAST ST
Third Street	THIRD ST
3 Ave.	3RD AVE

8. If two addresses are present, enter the address shown immediately above or before the city and state in the Street Address field. The remaining address should be entered in the Name Line 2 field.

EXAMPLE 1: Mr. John Jones
801 N. Erie Street
P.O. Box 1502
Toledo, OH 43603

ENTER AS: **JOHN JONES (Primary First Name,
Primary Last Name)
801 N ERIE ST (Second Name Line)
PO BOX 1502 (Street Address)**

EXAMPLE 2: **Mr. John Jones
P.O. Box 1502
801 N. Erie St., Toledo, OH 43603**

ENTER AS: **JOHN JONES (Primary First Name,
Primary Last Name)
PO BOX 1502 (Second Name Line)
801 N ERIE ST (Street Address)**

9. Enter college, building, post office branch as the address if no mailing address is given.
10. Do not use "#" symbol, "No.", or "Number" as a prefix to a house, apartment, route, or P.O. Box.
11. Always add ST, ND, RD, TH, to a numbered street or avenue.

EXAMPLES: **1 = 1ST; 2 = 2ND; 3 = 3RD, etc.**

12. Enter 1/2 as 1/2 (no spaces).
13. Plurals for street, road, avenue, apartment, etc., will be entered as STS, RDS, AVES, APTS, etc.
14. For a military overseas address, enter the letters "APO" or "FPO" in the first three leftmost positions of the City field. **(See Exhibit 3 for list of valid APO/FPO City/State/Zip Codes).**

(7) CITY

The City field will be invalid if it contains characters other than alpha or blank. (The only special character allowed is the blank, but it must never be the first character.) If the name of a city contains two words or more, only one intervening space is allowed between consecutive words (e.g., NEW YORK). **For foreign addresses:** Enter name of country in this field, left-justified and blank-filled. Valid characters are alpha, numeric, and blank. Only one intervening space is allowed between consecutive words.

(8) STATE

The State Abbreviation must be alpha and consistent with the standard state abbreviations issued by the Postal Service. **Exhibit 2** contains the standard Postal Service state abbreviations and **Exhibit 3** contains the valid City/State/Zip Code combinations for military personnel with an overseas address. These abbreviations must be used for the State Abbreviation field and must correspond with the valid range of the three high order zip code digits for each state.

NOTE: For foreign addresses, enter a period and a blank (".b") in the State Code field ".b"

(9) ZIP CODE

Zip Code should be left justified. If there are only 5 zip code characters, the last 7 remaining digits may be either blank or zero filled. If there are only 9 zip code characters the last 3 remaining digits may be either blank or zero filled. Zip codes must be within the valid range for that state. A valid entry for foreign addresses will be spaces.

SECTION 5 ACKNOWLEDGMENT REPORT

The IRS will acknowledge all transmissions by sending an Acknowledgment Report (**see Exhibit 4**) to the transmitter. IRS computer programs will generate an acknowledgment (ACK) record set for each recognizable return received. The Acknowledgment Report is produced using the following components:

.01 ACKNOWLEDGMENT FILE

- (1) An acknowledgment file has the following components:
 1. The original Transmission (TRANS) Record.
 2. An ACK Record Set for each recognizable return received.
 3. The RECAP Acknowledgment Record that includes counts for accepted and rejected returns.
- (2) If the entire transmission is rejected, the acknowledgment file will contain the original Transmitter (TRANS) Record, (If TRANS is present).
- (3) The first records on the acknowledgment file will be the same Transmission Record (TRANS) as the first record of the tax return file being acknowledged. (**See Section 9 Record Layouts for TRANS format.**) An ACK Record will be generated for each recognizable tax return in the transmission.

- (4) Up to 96 three-position Reject Codes may be furnished to the electronic filer per return. Filers should use these codes to determine the source of the error causing the return or transmission to reject. If more than the maximum number of reject conditions are identified, the last reject code will be "999".
- (5) The Reject Codes and references to validation criteria that caused the codes to be assigned are listed in **Section 6**. Filers should use this information to resolve reject conditions. When a condition cannot be resolved with the information provided, the filer should contact the Electronic Filing Unit at the Philadelphia Service Center for assistance.

.02 THE ACKNOWLEDGMENT RECORD SET

An ACK Record set will always have at least one ACK Key Record and up to 96 ACK Error Records associated with it.

.03 THE ACKNOWLEDGMENT KEY RECORD

The ACK Key Record will contain all of the identifying information for the returns it represents in the order in which they were transmitted. It will also contain the Document Locator Number (DLN) assigned to each return by the IRS.

.04 THE ACKNOWLEDGMENT ERROR RECORD

Each ACK Error Record will contain data defining the form, the page number for multi-page entries, the error record number, the field sequence number, and the 3 position error code defining the specific error encountered - for up to 96 unique errors per ACK report. In addition, a 50 character error code explanation will appear on the hard copy Acknowledgment Report.

- (1) If an ACK Key Record contains an "R" in the Acceptance code field, the return has either been:
 - (a) rejected due to errors involving the return format, inconsistency, or data errors in a key field and must be corrected and resubmitted to the IRS, **OR**;
 - (b) identified as a duplicate record, (i.e., a return record has previously been transmitted and accepted for that Primary EIN or 2 or more returns with the same Primary EIN have been submitted on one transmission).

- (2) Any tax return with an "A" in the Acceptance code field has been accepted as a filed tax return and will be processed in the same manner as a return submitted as a paper document. This does not imply that the return will pass all IRS service center validity checks or post to the IRS Master File without delays.

NOTE: If you elect to receive the acknowledgment report in an ASCII file via the Philadelphia Submission Processing Center bulletin board, you must indicate this selection in the TRANS Record, Field #0200, "Electronic Acknowledgment Indicator".

.05 CLIENT ID

Utilizing the CLIENT ID (Field #0005) in the Summary Record will generate multiple Acknowledgment Listings for one transmission. Each listing will be identified by the Client ID. This is beneficial for a transmitter who requires a listing for each client, or a bank that needs listings for different departments.

VALIDATION CRITERIA

SECTION 6 VALIDATION - TRANSMISSION AND RETURN (GENERAL)

The numbers in the left margin indicate the Error Reject Code (ERC) for Transmission Rejection Criteria, General Rejection Criteria, and Specific Criteria by form. The error reject code values will be generated and listed on the Acknowledgment Report whenever an invalid condition is met.

.01 TRANSMISSION AND RETURN REJECTION CONDITIONS

TRANSMISSION REJECTION CONDITIONS: The following conditions must exist or the entire transmission will be rejected.

REJECT CODE	VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)
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=====

- | | |
|-----|---|
| 002 | A duplicate Transmission (TRANS) is not allowed. |
| 004 | If the Julian date (Field #0080) on the Transmission (TRANS) Record is not between the valid range of 001 and 366. |
| 006 | The following fields on the Transmission (TRANS) Record must be numeric and not equal to zeros (Field #0020, 0070, 0090) and Field #0040 must be significant. |
| 010 | If the Transmission (TRANS) Record is out of sequence or missing. (This should be the first record in the transmission). |
| 012 | If the transmission date (Field #0060) on the Transmission (TRANS) Record is not valid. |
| | VALID FORMAT: YYYYMMDD |
| 014 | If the Return Form Type (Field #0120) on the Transmission Record is not equal to "1041bb". |
| 016 | If the File Location Code on the Transmission Record (Field #0050) is not valid. |

VALID: 1, 2 or 3.

REJECT CODE VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)

- =====
- 022** If the RECAP Record is out of sequence or missing. **(The RECAP Record should be the last record submitted on the transmission).**

 - 026** If the Electronic Transmitter Identification Number (ETIN) (Field #0070) on the Transmission (TRANS) Record is not equal to the ETIN (Field #0020) on the RECAP Record.

 - 028** If the Julian date (Field #0080) on the Transmission (TRANS) Record is not equal to the Julian date (Field #0030) on the RECAP Record.

 - 030** If the Sequence Number (Field #0090) on the Transmission (TRANS) Record is not equal to the Sequence Number (Field #0040) on the RECAP Record.

 - 036** If Field #0030 on the TRANS record is not equal to "V" for variable or "F" for fixed length data.

RETURN REJECTION CONDITIONS: If the following conditions exist, the entire return will be rejected.

- 032** If the Field Number does not exist.
(VARIABLE LENGTH DATA ONLY)

- 034** If Record ID or TYPE or Page Number are not valid on all records within the return.
(FIXED AND VARIABLE LENGTH DATA)

- 038** Cannot recognize records transmitted.
(FIXED AND VARIABLE LENGTH DATA)

- 040** If record has invalid record length
(FIXED LENGTH DATA ONLY)

- 042** If record is missing the Record Terminus Character(#).
(FIXED AND VARIABLE LENGTH DATA)

- 044** Byte count not numeric.
(FIXED AND VARIABLE LENGTH DATA)

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- =====
- 048** First character after Record-Control-Information (position 43) is not "[" or "#".
(VARIABLE LENGTH DATA ONLY)

 - 050** If a delimiter character is found within the Record-Control-Information (first
42 characters).
(VARIABLE LENGTH DATA ONLY)

 - 052** Field number not three or four characters in length.
(VARIABLE LENGTH DATA ONLY)

 - 054** Unmatched Left bracket ("[" found.
(VARIABLE LENGTH DATA ONLY)

 - 056** Duplicate field number.
(VARIABLE LENGTH DATA ONLY)

 - 058** Data too large for field.
(VARIABLE LENGTH DATA ONLY)

 - 060** Missing data.
(VARIABLE LENGTH DATA ONLY)

 - 062** Unmatched right bracket ("]" found.
(VARIABLE LENGTH DATA ONLY)

 - 064** The field number is for data within Record-Control-Information.
(VARIABLE LENGTH DATA ONLY)

.02 RETURN REJECTION - GENERAL CONDITIONS

The following general data control conditions pertain to the logical records included in a Form 1041 return.

- 102** If the Tax Period (Field #0005) on Form 1041 is not in the valid format.
(Follow the specifications in Section 4.04(1) of this publication.)

- 104** If the Tax Period (Field #0005) on Form 1041 is equal to 200112 and the
Fiscal Year Ending (Field #0020) on the Return Record is not equal to
December 31, 2001 (20011231) or spaces.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

- 106** If the Tax Period (Field #0005) on Form 1041 is equal to 200201 through 200208 and the Fiscal Year Ending (Field #0020) on the Return Record is not equal to 20020101 through 20020831.

- 108** If the Tax Period (Field #0005) on Form 1041 is equal to 200201 through 200208 and the Fiscal Year Beginning (Field #0010) or the Fiscal Year Ending (Field #0020) is equal to blanks.

- 110** If the Tax Period (Field #0005) on Form 1041 is greater than or equal to the transmission date.

- 120** A Short Period return due to a change in the accounting period will be rejected.

- 124** The following Forms/Schedules must be submitted in the proper sequence as illustrated below:

Form 1041	Page 1 & 2	REQUIRED
	Page 3 & 4	Optional
Schedule C	Page 1 & 2	Optional **
Schedule C-EZ	Page 1	Optional
Schedule D	Page 1 & 2	Optional **
Schedule E	Page 1 & 2	Optional
Schedule F	Page 1 & 2	Optional **
Schedule H	Page 1 & 2	Optional **
Schedule J	Page 1 & 2	Optional **
Form 1116	Page 1 & 2	Optional **
Form 2210	Page 1, 2 & 3	Optional **
Form 2210F	Page 1	Optional
Form 2439	Page 1	Optional
Form 3468	Page 1	Optional
Form 4136	Page 1 & 2	Optional
Form 4255	Page 1	Optional
Form 4562	Page 1 & 2	Optional **
Form 4684	Page 1 & 2	Optional **
Form 4797	Page 1 & 2	Optional **
Form 4835	Page 1	Optional
Form 4952	Page 1	Optional
Form 4970	Page 1	Optional

REJECT CODE VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)

124	Form 4972	Page 1	Optional
	Form 6198	Page 1	Optional
	Form 6252	Page 1	Optional
	Form 8271	Page 1	Optional
	Form 8582	Page 1	Optional
	Form 8582-CR	Page 1 & 2	Optional **
	Form 8801	Page 1 & 2	Optional **
	Form 8824	Page 1 & 2	Optional **
	Form 8829	Page 1	Optional
	Statement Records		Optional
	Schedule K-1	Page 1	Optional
	Schedule K-1	Statement Records	Optional
	State Records		Optional
	Summary Record		REQUIRED

**** IF PAGE 2 IS PRESENT THEN PAGE 1 IS REQUIRED EXCEPT FOR SCHEDULE E. (SCHEDULE E, PAGE 1 IS NOT REQUIRED EVEN IF PAGE 2 IS FILED.)**

128 Duplicate return submitted.

132 If page one (1) of Form 1041 is not present.

134 If page two (2) of Form 1041 is not present.

148 If the Schedule Occurrence Number (Field #0005) on page 1 of a schedule is not in ascending, numeric sequence and within the valid range.

If the Form Occurrence Number (Field #0005) on page 1 of a form is not in ascending, numeric sequence and within the valid range.

150 If the Schedule Occurrence Number on page 2 of a schedule is not equal to the Schedule Occurrence Number (Field #0005) on page 1 of a schedule.

If the Form Occurrence Number on page 2 or 3 of a form is not equal to the Form Occurrence Number (Field #0005) on page 1 of a form.

158 If the Employer Identification Number (EIN) is not numeric.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

160 This validation criteria has been removed.

162 If the Employer Identification Number (EIN) is not nine numeric characters.
The first two (2) positions of the EIN must represent a valid District Office
Code equal to one of the following:

01, 02, 03, 04, 05, 06, 10, 11, 12, 13, 14, 15, 16, 20, 21, 22, 23, 24, 25, 26,
27, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48,
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, 80, 81, 82, 83, 84, 85, 86, 87, 88, 90, 91, 92,
93, 94, 95, 96, 97, 98, 99

164 The Employer Identification Number (EIN) in the Record ID Section of each
Form/Return/Record listed below must equal the EIN in the Record ID
Section of Form 1041, Page 1 (Field #0003).

FORM/RETURN/RECORD		FIELD NUMBER(S)
Form 1041	Page 2, 3, 4	0923, 1513, 2054
Schedule C	Page 1, 2	0003, 0583
Schedule C-EZ	Page 1	0003
Schedule D	Page 1, 2	0003,1753
Schedule E	Page 1, 2	0003,1003
Schedule F	Page 1, 2	0003, 0773
Schedule H	Page 1, 2	0003, 0163
Schedule J	Page 1, 2	0003, 0733
Schedule K-1	Page 1	0003
Form 1116	Page 1, 2	0003,1003
Form 2210	Page 1, 2, 3	0003, 0223, 1273
Form 2210F	Page 1	0003
Form 2439	Page 1	0003
Form 3468	Page 1	0003
Form 4136	Page 1, 2	0003, 0453
Form 4255	Page 1	0003
Form 4562	Page 1, 2	0003, 0803
Form 4684	Page 1, 2	0003, 0493
Form 4797	Page 1, 2	0003, 1383
Form 4835	Page 1	0003
Form 4952	Page 1	0003

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

- | | | | |
|------------|------------------|-----------|------------|
| 164 | Form 4970 | Page 1 | 0003 |
| | Form 4972 | Page 1 | 0003 |
| | Form 6198 | Page 1 | 0003 |
| | Form 6252 | Page 1 | 0003 |
| | Form 8271 | Page 1 | 0003 |
| | Form 8582 | Page 1 | 0003 |
| | Form 8582-CR | Page 1, 2 | 0003, 0253 |
| | Form 8801 | Page 1, 2 | 0003, 0293 |
| | Form 8824 | Page 1, 2 | 0003, 0373 |
| | Form 8829 | Page 1 | 0003 |
| | Statement Record | | 0003 |
| | Summary Record | | 0007 |
-
- 170** All digits of the Employer Identification Number (EIN) cannot be the same numbers. (e.g. 999999999, 888888888, 777777777, etc.)
-
- 174** The Beneficiary's Identifying Number (Field #0070) on the Schedule K-1 page 1, must be numeric or equal to the literal "FOREIGNUS".
-
- 175** The Preparer's Tax Identification Number (SSN or PTIN), Field #0850 on Form 1041 must be in the following format if significant:
 SSN - must be numeric and cannot be all nines (999999999) or all zeroes (000000000).
 PTIN - must be **Pnnnnnnnn**. The first position must always contain a "P" followed by 8 numerics (cannot be all nines or zeros).
-
- 192** All date fields must be in the valid format and fall within the valid range. |
- VALID FORMAT: YYYYMMDD, YYYYMM**
- VALID RANGE: MM = 01-12, DD = 01-31, YYYY = 2002 or less**
-
- 193** If the Fiscal Year Beginning (Field #0010) is not valid.
-
- 194** If the Fiscal Year Ending (Field #0020) is not valid.
-
- 196** If the Fiscal Year Beginning (Field #0010) and the Fiscal Year Ending (Field #0020) on Form 1041 is significant and the year digits of the Fiscal Year Ending is less than the year digit of the Fiscal Beginning.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

NAME CONTROL:

198 The Name Control (Field #0030) on Form 1041, page 1 must be present.

200 The first position of the Name Control (Field #0030) must be valid and left-justified.

VALID CHARACTERS: A-Z (Alpha), 0-9 (Numeric)

202 The second, third and fourth positions of the Name Control (Field #0030) must be valid.

**VALID CHARACTERS: A-Z (Alpha), 0-9 (Numeric)
 Ampersand (&), Hyphen (-)
 or Spaces.**

204 The Name Control (Field #0030) on Form 1041, page 1 must not have 2 consecutive spaces.

206 The Name Control (Field #0030) on Form 1041, page 1 must not be equal to zeros if the name line (Field #0060) on the return record is equal to "GNMA", "GINNIE MAE", "FNMA" or "FANNIE MAE".

NAME LINE 1:

208 The first Name Line (Field #0060) on Form 1041, page 1 must be present.

The first Name Line (Field #0080, #0150) on the Schedule K-1 must be present.

210 The first Name Line (Field #0060) on Form 1041, page 1 must be left-justified and significant.

The first Name Line (Field #0080) on the Schedule K-1 must be left-justified and significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

212 The first Name Line (Field #0060) on Form 1041, page 1 must contain only valid characters.

The first Name Line (Field #0080) on the Schedule K-1 must contain only valid characters.

**VALID CHARACTERS: A-Z (Alpha), 0-9 (Numeric)
 Ampersand (&), Hyphen (-)
 or Spaces**

214 The first Name Line (Field #0060) on Form 1041, page 1 must have less than two (2) consecutive embedded spaces.

The first Name Line (Field #0080) on the Schedule K-1 must have less than two (2) consecutive embedded spaces.

NAME LINE 2:

216 The second Name Line (Field #0080) on Form 1041, page 1 must be present.

218 The second Name Line (Field #0080) on Form 1041, page 1 must be left-justified.

221 The second Name Line (Field #0080) on Form 1041, page 1 must contain only valid characters.

**VALID CHARACTERS: A-Z (Alpha), 0-9 (Numeric)
 Ampersand (&), Hyphen (-)
 Slash (/), In Care Of (%)
 or Spaces**

222 The second Name Line (Field #0080) on Form 1041, page 1 must not have two (2) or more consecutive embedded spaces.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

STREET ADDRESS:

224 The Street Address (Field #0090) on Form 1041, page 1 must be significant.

 The Street Address (Field #0100, #0170) on the Schedule K-1 must be significant.

226 The Street Address (Field #0090) on Form 1041, page 1 must be left-justified.

 The Street Address (Field #0100) on the Schedule K-1 must be left-justified.

228 The Street Address (Field #0090) on Form 1041, page 1 must contain at least 3 or more characters.

 The Street Address (Field #0100) on the Schedule K-1 must contain at least 3 or more characters.

230 The Street Address (Field #0090) on Form 1041, page 1 must contain only valid characters.

 The Street Address (Field #0100) on the Schedule K-1 must contain only valid characters.

**VALID CHARACTERS: A-Z (Alpha), 0-9 (Numeric)
 Hyphen (-), Slash (/)
 or Spaces**

232 The Street Address (Field #0090) on Form 1041, page 1 must not have two (2) or more consecutive embedded spaces.

 The Street Address (Field #0100) on the Schedule K-1 must not have two (2) or more consecutive embedded spaces.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

CITY:

234 The City (Field #0100) on Form 1041, page 1 must be left-justified.

The City (Field #0110) on the Schedule K-1 must be left-justified.

236 The City (Field #0100) on Form 1041, page 1 must contain only valid characters.

The City (Field #0110) on the Schedule K-1 must contain only valid characters.

VALID CHARACTERS: A-Z (Alpha) or blanks

238 The City (Field #0100) on Form 1041, page 1 must not contain two (2) or more consecutive embedded spaces.

The City (Field #0110) on the Schedule K-1 must not contain two (2) or more consecutive embedded spaces.

240 The City (Field #0100) on Form 1041, page 1 must be present.

The City (Field #0110, #0180) on the Schedule K-1 must be present.

STATE:

246 The State Code (Field #0110) on Form 1041, page 1 must be a valid state code if the Location Code (Field #0050) on the Transmission Record is equal to 1 or 2.

The State Code (Field #0120) on the Schedule K-1 must be a valid state code if the Location Code (Field #0050) on the Transmission Record is equal to 1 or 2.

248 The State Code (Field #0110) on Form 1041, page 1 must be equal to "." if the Location Code (Field #0050) on the Transmission Record is equal to 3.

The State Code (Field #0120) on the Schedule K-1 must be equal to "." if the Location Code (Field #0050) on the Transmission Record is equal to 3.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

250 The State Code (Field #0110) on Form 1041, page 1 must be valid or equal to ". ". It may not be blank.

The State Code (Field #0120, #0190) on the Schedule K-1 must be valid or equal to ". ". It may not be blank.

ZIP CODE:

254 The Zip Code (Field #0120) on Form 1041, page 1 must be equal to blanks if the State Code (Field #0110) is equal to ".b".

The Zip Code (Field #0130) on the Schedule K-1 must be equal to blanks if the State Code (Field #0120) is equal to ".b".

256 The Zip code (Field #0120) on Form 1041, page 1 must be numeric.

The Zip Code (Field #0130, #0200) on the Schedule K-1 must be numeric.

The Zip Code is a 12 character numeric field (which must contain 5, 9 or 12 digits, left justified and blank - filled). Spaces will be accepted only in the last seven characters.

**VALID FORMAT: nnnnnnnnnnnn
 nnnnnnnnnbbb
 nnnnnbbbbbbb**

258 The Zip Code must be valid and the state/zip code must be a valid combination. **(For valid Zip Codes please refer to Exhibits 2 and 3.)**

NOTE: The last two (2) digits in a five (5) digit Zip Code must be 01 - 99.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- =====
- 270** If significant, money amount fields must be numeric. Refer to the record layout for specific field numbers.
- 272** All money amount fields marked with 3 asterisks (***) on the record layouts (Field Description) must be numeric and contain only positive money amounts.

FORMS/SCHEDULES

FIELD NUMBERS

Form 1041	0310, 0320, 0420, 0430, 0440, 0450, 0460, 0480, 0490, 0510, 0550, 0560, 0590, 0620, 0700, 0750, 0770, 0800, 0810, 1000, 1030, 1225, 1240, 1370, 1530, 1580, 1820, 1850, 1960, 1970, 2120
Schedule D	0780, 1600-1625, 1760
Schedule E	0930, 0940, 0950, 0970, 1070, 1770, 1810, 2020
Schedule K-1	0210, 0220, 0480
Form 4684	0060, 0150, 0240, 0330, 0550, 0640, 0730, 0820, 0900, 0910, 0940, 0950, 0970, 0980, 1060, 1070, 1100, 1110, 1130, 1140
Form 4797	1250
Form 6198	0100, 0350
Form 8582	0030, 0040, 0070, 0080
Form 8801	0040

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

=====

STATEMENT RECORDS AND STATEMENT FIELDS:

- 274 If a Statement Record is present there must be a corresponding "STM nn" reference.

- 276 If a statement reference is used there must be a corresponding statement record.

- 278 Statement Records must be in ascending numeric order. **(Statement numbers do not have to be in consecutive order)**

- 282 A field marked with an "@" or a "*" must be equal to "STM nn" (nn = 01 - 99), blanks or literal as stated in the record layouts.

- 284 The page number (Field #0002) on the Statement Record must be equal to "PG01" - "PG04". **(Exception for Schedule D, Schedule J and Schedule K-1)**

- 286 The page number (Field #0002) on the Statement Record must be in ascending, numeric, consecutive order.

- 288 The line number (Field #0010) on the Statement Record must be in consecutive ascending numeric sequence starting with 01 and incremented by one but not exceed 50.

- 290 A significant entry in a statement field must be left-justified.

- 296 A Statement number must be valid:

 Schedule D.....STM 97
 Schedule J.....STM 98
 Schedule K-1...STM 99

- 298 Duplicate Statement Records are not allowed.

- 300 Duplicate statement references are not allowed.

REJECT CODE VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)

=====

301 If any of the following fields of the Schedule C record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn".

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
---	---

0610 (If "X")	0620
0630 (If "X")	0640

302 If any of the following fields of the Schedule F record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn":

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
---	---

0190	0200
0260 (If "X")	0250

303 If any of the following fields of the Form 4136 record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn".

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
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0250 (If "X")	0240
0360 (If "X")	0350
0570 (If "X")	0560
0640 (If "X")	0630

304 If any of the following fields of the Form 4835 record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn":

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
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0090	0100
0160 (If "X")	0165

REJECT CODE VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)

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306 If any of the following fields of the Form 4562 record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn":

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
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0720	0730
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308 If any of the following fields of the Form 1041 record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn":

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
---	---

0190 (If "X")	0200
0550	0540
0695 (If "X")	0690
1390 (If "X")	1380
1455 (If "X")	1458

312 If any of the following fields of the Form 1116 record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn":

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
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0140	0150
0170	0180
0310	0320
0340	0350
0480	0490
0510	0520
1020	1030
1050	1055
1080	1085

REJECT CODE VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)

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314 If any of the following fields of the Form 6252 record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn".

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
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0360 (If "X")	0370
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316 If any of the following fields of the Form 8824 record contain a valid entry other than zeros or spaces, the corresponding field must contain "STM nn":

SIGNIFICANT ENTRY (FIELD NUMBER)	CORRESPONDING STM REFERENCE (FIELD NUMBER)
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0220 (If "X")	0225
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318 The following fields on the Return, Schedules and Forms must be blank-filled **(NO ENTRY FIELDS)**.

Form 1041	0170, 0180, 0230, 0630, 0650, 0670, 1250, 1260, 1340	
Schedule C	0010	
Schedule C-EZ	0010	
Schedule E	0750-0780	
Schedule F	0010, 0340	
Schedule H	0015, 0020, 0175, 0185, 0195, 0250-0510, 0550	
Schedule K-1	0050	
Form 2210	1380, 1590, 1820, 2050, 2170-2600	
Form 2439	0050	

REJECT CODE VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)

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318	Form 3468	0280
	Form 4797	1350, 1360, 1550, 1790, 2030, 2270
	Form 4835	0010, 0220
320	Validation Criteria Removed.	
321	Validation Criteria Removed.	
322	The following fields are designated as "X" or blank fields and must contain either an "X" or a blank.	
	Form 1041	0025, 0130-0160, 0190, 0210, 0220, 0250, 0260, 0280-0300, 0303, 0305, 0410, 0660, 0695, 0825, 0826, 0840, 1190, 1200, 1270, 1330, 1390, 1395, 1420, 1425, 1430, 1435, 1450, 1452, 1455, 1460, 1470-1490, 1500, 1505
	Schedule C	0080, 0090, 0100, 0120, 0125, 0130, 0140, 0550, 0560, 0590, 0600, 0610, 0630, 0635, 0780, 0785, 0790, 0795, 0800, 0805, 0810, 0815
	Schedule C-EZ	0080, 0170, 0175, 0180, 0185, 0190, 0195, 0200, 0205
	Schedule E	0070, 0075, 0080, 0085, 0090, 0095, 1030, 1050, 1060, 1170, 1190, 1200, 1310, 1330, 1340, 1450, 1470, 1480, 1590, 1610, 1620
	Schedule F	0040, 0050, 0080, 0085, 0260, 0740, 0750
	Schedule H	0040-0065, 0150, 0155, 0170, 0180, 0190, 0540
	Schedule K-1	0060
	Form 1116	0020-0095, 0650, 0660
	Form 2210	0012-0016, 0019
	Form 2210F	0013, 0016

REJECT CODE VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL RECORDS)

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322	Form 2439	0010, 0020
	Form 3468	0020, 0045
	Form 4136	0250, 0360, 0570, 0640
	Form 4562	0185, 0810-0825, 1390-1415, 1460-1485, 1530-1555, 1600-1625, 1670-1695, 1740-1765, 1770-1815
	Form 4835	0030, 0035, 0160, 0640, 0650
	Form 4970	0070, 0080
	Form 4972	0024-0202
	Form 6198	0220, 0230, 0250, 0260, 0290, 0300
	Form 6252	0050, 0055, 0060, 0065, 0300, 0305, 0310, 0330, 0340, 0350, 0360
	Form 8582-CR	0470
	Form 8824	0080, 0090, 0100, 0180, 0185, 0190, 0195, 0200-0220
	Summary	0070

- 324** A Summary Record must be present with every return.
- 328** If the total number of logical records on the Summary Record (to include the Summary Record) (Field #0130) is not equal to the IRS count of logical records within the return.
- 330** If the total number of Schedule C records on the Summary Record (Field #0364 and #0366) is not equal to the IRS count of Schedule C records within the return.
- 331** If the total number of Schedule C-EZ records on the Summary Record (Field #0368) is not equal to the IRS count of Schedule C-EZ records within the return.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 332** If the total number of Schedule D records on the Summary Record (Field #0370 and #0375) is not equal to the IRS count of Schedule D records within the return.

 - 334** If the count for Schedule H (Form 1040), Page 1 on the Summary Record (Field #0388) is not equal to the IRS count for Schedule H (Form 1040), Page 1 records within the return.

 - 335** If the count for Schedule H (Form 1040), Page 2 on the Summary Record (Field #0389) is not equal to the IRS count for Schedule H (Form 1040), Page 2 records within the return.

 - 336** If the total number of Schedule E records on the Summary Record (Field #0380 and #0385) is not equal to the IRS count of Schedule E records within the return.

 - 338** If the total number of Schedule F records on the Summary Record (Field #0386 and #0387) is not equal to the IRS count of Schedule F records within the return.

 - 340** If the total number of Schedule J records on the Summary Record (Field #0390 and #0395) is not equal to the IRS count of Schedule J records within the return.

 - 342** If the total number of Statements on the Summary Record (Field #0400) is not equal to the IRS count of Number of Statement Records (excluding Schedules D, J and K-1 Statement Records).

 - 344** If the total number of Schedule K-1 records on the Summary Record (Field #0430) is not equal to the IRS count of Schedule K-1 records within the return.

 - 346** If the total number of STM 97 records which correspond to Schedule D records on the Summary Record (Field #0410) is not equal to the IRS count of STM 97 records within the return.

 - 348** If the total number of STM 98 records which correspond to Schedule J records on the Summary Record (Field #0420) is not equal to the IRS count of STM 98 records within the return.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- 350** If the total number of STM 99 records which correspond to Schedule K-1 records on the Summary Record (Field #0440) is not equal to the IRS count of STM 99 records within the return.

- 352** If the count for Form 1116, Page 1 on the Summary Record (Field #0150) is not equal to the IRS count for Form 1116, Page 1 records within the return.

- 354** If the count for Form 1116, Page 2 on the Summary Record (Field #0160) is not equal to the IRS count for Form 1116, Page 2 records within the return.

- 356** If the count for Form 2210, Page 1 on the Summary Record (Field #0170) is not equal to the IRS count for Form 2210, Page 1 records within the return.

- 358** If the count for Form 2210, Page 2 on the Summary Record (Field #0180) is not equal to the IRS count for Form 2210, Page 2 records within the return.

- 360** If the count for Form 2210, Page 3 on the Summary Record (Field #0190) is not equal to the IRS count for Form 2210, Page 3 records within the return.

- 362** If the count for Form 2210-F, Page 1 on the Summary Record (Field #0194) is not equal to the IRS count for Form 2210-F records within the return.

- 363** If the count for Form 2439, Page 1 on the Summary Record (Field #0196) is not equal to the IRS count for Form 2439, Page 1 records within the return.

- 364** If the count for Form 3468, Page 1 on the Summary Record (Field #0200) is not equal to the IRS count for Form 3468, Page 1 records within the return.

- 365** If the count for Form 4255, Page 1 on the Summary Record (Field #0210) is not equal to the IRS count for Form 4255 records within the return.

- 366** If the count for Form 4562, Page 1 on the Summary Record (Field #0220) is not equal to the IRS count for Form 4562, Page 1 records within the return.

- 368** If the count for Form 4562, Page 2 on the Summary Record (Field #0230) is not equal to the IRS count for Form 4562, Page 2 records within the return.

- 370** If the count for Form 4684, Page 1 on the Summary Record (Field #0240) is not equal to the IRS count for Form 4684, Page 1 records within the return.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- 372** If the count for Form 4684, Page 2 on the Summary Record (Field #0250) is not equal to the IRS count for Form 4684, Page 2 records within the return.

- 374** If the count for Form 4797, Page 1 on the Summary Record (Field #0260) is not equal to the IRS count for Form 4797, Page 1 records within the return.

- 376** If the count for Form 4797, Page 2 on the Summary Record (Field #0270) is not equal to the IRS count for Form 4797, Page 2 records within the return.

- 377** If the count for Form 4835, Page 1 on the Summary Record (Field #0275) is not equal to the IRS count for Form 4835, Page 1 records within the return.

- 378** If the count for Form 4952, Page 1 on the Summary Record (Field #0280) is not equal to the IRS count for Form 4952, Page 1 records within the return.

- 380** If the count for Form 6198, Page 1 on the Summary Record (Field #0290) is not equal to the IRS count for Form 6198, Page 1 records within the return.

- 381** If the count for Form 6252, Page 1 on the Summary Record (Field #0295) is not equal to the IRS count for Form 6252, Page 1 records within the return.

- 382** If the count for Form 8271, Page 1 on the Summary Record (Field #0300) is not equal to the IRS count for Form 8271, Page 1 records within the return.

- 384** If the count for Form 4136, Page 1 on the Summary Record (Field #0204) is not equal to the IRS count for Form 4136, Page 1 records within the return.

- 385** If the count for Form 4136, Page 2 on the Summary Record (Field #0206) is not equal to the IRS count for Form 4136, Page 2 records within the return.

- 386** If the count for Form 8582, Page 1 on the Summary Record (Field #0310) is not equal to the IRS count for Form 8582, Page 1 records within the return.

- 387** If the count for Form 4970, Page 1 on the Summary Record (Field #0282) is not equal to the IRS count for Form 4970, Page 1 records within the return.

- 388** If the count for Form 4972, Page 1 on the Summary Record (Field #0284) is not equal to the IRS count for Form 4972, Page 1 records within the return.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 390** If the count for Form 8582-CR, Page 1 on the Summary Record (Field #0320) is not equal to the IRS count for Form 8582-CR, Page 1 records within the return.

 - 391** If the count for Form 8582-CR, Page 2 on the Summary Record (Field #0330) is not equal to the IRS count for Form 8582-CR, Page 2 records within the return.

 - 392** If the count for Form 8801, Page 1 on the Summary Record (Field #0340) is not equal to the IRS count for Form 8801, Page 1 records within the return.

 - 393** If the count for Form 8801, Page 2 on the Summary Record (Field #0345) is not equal to the IRS count for Form 8801, Page 2 records within the return.

 - 394** If the count for Form 8824, Page 1 on the Summary Record (Field #0350) is not equal to the IRS count for Form 8824, Page 1 records within the return.

 - 396** If the count for Form 8824, Page 2 on the Summary Record (Field #0355) is not equal to the IRS count for Form 8824, Page 2 records within the return.

 - 398** If the count for Form 8829, Page 1 on the Summary Record (Field #0357) is not equal to the IRS count for Form 8829 records within the return.

 - 584** If Form 6252 is present and Field #0055 (Property Sold to Related Party – No Box) equals "X", Field #0060 (Market Security – Yes Box) and Field #0065 (Market Security – No Box) must both be blank.

 - 602** At least one of the following fields (Field #'s 0130, 0140, 0150, 0160 or 0190) on Form 1041 Page 1 must equal "X".

 - 604** If Form 1041 Page 1, Field #0130 (Decedent Estate) is equal to "X" then Field #0140 (Simple Trust) and Field #0150 (Complex Trust) and Field #0160 (Grantor Type Trust) must be equal to spaces.

 - 608** If Form 1041 Page 1, Field #0140 (Simple Trust) is equal to "X" then Field #0130 (Decedent Estate) and Field #0150 (Complex Trust) must be equal to blanks.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 612** If Form 1041 Page 1, Field #0150 (Complex Trust) is equal to "X" then Field #0130 (Decedent Estate) and Field #0140 (Simple Trust) must be equal to blanks.
- 613** If Form 3468 is present and Field #0020 equals "X", then either Field #0040, or Field #0060 or Field #0080 must be significant and Field #0025 must equal "STMbnn".
- 614** If Form 3468 is present and either Field #0040, or Field #0060 or Field #0080 is significant, then Field #0025 must equal "STMbnn".
- 615** If Form 3468 is present and Field #(s) 0030 – 0130 are blank, then Field #0140 must equal "TRAbSEC", and Field #0150 and Field #0160 must contain data and Field #0165 must equal "STMbnn".
- 616** If Form 1041 Page 1, Field 0160 (Grantor Type Trust) is equal to "X" then Field #0130 (Decedent Estate) must be equal to blanks.
- 617** If Form 3468 is present and Field #0180 (Alternative Minimum Tax) is significant, then Form 1041 Page 4, Field #2170 (Alternative Minimum Tax) must also be significant.
- 618** If Form 1041 Page 1, Field #0220 (Final Return Box) is equal to "X" then Field #0800 (Credited to 2001 Estimated Tax) must be zero or less.
- 619** If Form 3468 is present and Field #0330 (Tentative Minimum Tax) is significant, then Form 1041 Page 4, Field #2130 (Tentative Minimum Tax) must also be significant.
- 620** If Form 1041 Page 1, Field #0340 (Capital Gain or Loss) is greater than zero then Schedule D must be present.
- 621** If Form 3468 is present and Field #0380 (Investment Credit Allowed for Current Year) is significant, then Form 1041 Page 2, Field #1270 must equal "X" and Field #1280 must equal "3468" and Field #1290 must be significant.
- 632** If Form 1041 Page 1, Field #0340 (Capital Gain or Loss) is a negative amount and is not equal to the amount entered on Schedule D Page 2, Field #1760 (Net Loss From Line 16 or \$3000).

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 634** If Form 1041 Page 1, Field #0340 (Capital Gain or Loss) is a positive amount and is not equal to the amount entered on Schedule D Page 1, Field #1730 (Total Net Gain or Loss).

 - 636** If Form 1041 Page 1, Field #0340 (Capital Gain or Loss) is equal to zeros or spaces and the amount entered on Schedule D Page 1, Field #1730 (Total Net Gain or Loss) is a significant amount, **EXCEPT** when Form 1041, Field #0220 (Final Return Box) is significant.

 - 638** If Form 1041 Page 1, Field #0370 (Ordinary Gain or Loss) is significant then Form 4797 must be present.

 - 640** If Form 1041 Page 1, Field #0400 (Total Income) is significant, then at least one of the following fields (Field #'s 0310, 0320, 0330, 0340, 0350, 0360, 0370 or 0390) must also be significant.

 - 642** If Form 1041 Page 1, Field #0450 (Charitable Deductions) is significant then Field #1000 (Charitable Deduction) on Form 1041 Page 2 must be equal to Field #0450.

 - 648** If any one of the following fields (Field #'s 0420, 0430, 0440, 0450, 0460, 0480, or 0490) on Form 1041 Page 1 contains a significant entry then Field #0510 (Total) must be significant.

 - 652** If Form 1041 Page 1, Field #0530 (Income Distribution Deduction Schedule B) has an entry then it must be equal to Field #1180 (Income Distribution Deduction), **EXCEPT** when Field #0025 ("Section 642(i) Trust") is significant.

 - 654** If Form 1041 Page 1, Field #0530 (Income Distribution Deduction) is significant then Field #0270 (Number of Schedules K-1 Attached) must be significant, **EXCEPT** when Field #0025 ("Section 642(i) Trust") is significant.

 - 658** If Form 1041 Page 1, Field #0130 (Decedent Estate) is equal to "X", then Field #0560 (Exemption Amount) must equal 0 - 600.

 - 660** If Form 1041 Page 1, Field #0140 (Simple Trust) is equal to "X", then Field #0560 (Exemption Amount) must equal 0 - 300.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 662** If Form 1041 Page 1, Field #0150 (Complex Trust) is equal to "X", then Field #0560 (Exemption Amount) must equal 0 - 300.

 - 664** If Form 1041 Page 1, Field #0160 (Grantor Type Trust) is equal to "X" and Field #0580 (Taxable Income of Fiduciary) is greater than zero, then Field #0560 (Exemption Amount) must equal 0 - 300.

 - 666** If Form 1041 Page 1, Field #0160 (Grantor Type Trust) is equal to "X" and Field #0580 (Income of Fiduciary) is equal to zeros, blanks or a negative amount, then Field #0560 (Exemption Amount) must equal zeros or blanks.

 - 668** If Form 1041 Page 1, Field #0300 (Nonexempt Charitable and Split Interest Trusts Sec 4947(a)(2)) equals "X", then Field #0010 (Fiscal Year Beginning) and Field #0020 (Fiscal Year Ending) must be blank.

 - 670** If any one of the following fields (Field #'s 0530, 0550 or 0560) on Form 1041 Page 1 contains a significant entry then Field #0570 (Total Deductions) must be significant.

 - 672** If Form 1041 Page 1, Field #0590 (Total Tax Schedule G) is not equal to Field #1370 (Total Tax) on Form 1041 Page 2.

 - 674** If Form 1041 Page 1, Field #0620 (2001 Estimated Tax Payments and Amount From 2000) is significant then Field #0640 (Line 24A Minus Line 24B) must be equal to Field #0620.

 - 675** If Form 1041 Page 1, Field #0680 (Taxes Paid Amount) is significant, then Field #0660 (Tax Paid With Extension of Time to File Form 8736 Box) must equal "X".

 - 676** If either Form 2210 or Form 2210F is present, then Field #0700 (Federal Income Tax Withheld) on Form 1041 Page 1 and either Field #0100 (Withholding Taxes) Form 2210 or Field #0100 (Withholding Taxes) Form 2210F must be equal.

 - 677** If Form 1041 Page 1, Field #0740 (Total) is significant, then either Form 1041 Page 1, Field #0710 (Form 2439 Amount) or Field #0720 (Form 4136 Amount) must be significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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680 If any one of the following fields (Field #0640, #0680 or #0700) on Form 1041 Page 1 contains a significant entry then Total Payments (Field #0750) must be significant.

682 If Form 1041 Page 1, Field #0710 (Form 2439 Amount) is significant, then Form 2439 must be present and Field #0230 (Tax Paid by RIC/REIT) Form 2439 must equal Field #0710 Form 1041.

683 If Form 1041 Page 1, Field #0720 (Form 4136 Amount) is significant, then Form 4136 must be present and Field #0820 (Total Income Tax Credit Amount) Form 4136 must equal Field #0720 Form 1041.

684 If Form 1041 Page 1, Field #0780 (Tax Due) and Field #0790 (Overpayment) are greater than zeros.

686 If Form 1041 Page 1, Field #0780 (Tax Due) is significant and Field #0590 (Total Tax Schedule G) is either zeros or spaces.

690 If Form 1041 Page 1, Field #0810 (Amount Refunded) is \$10,000,000 or greater.

692 If Form 1041 Page 1, Field #0040 (EIN) matches Field #0850 (Preparer's TIN) or Field #0870 (Preparer's Firm EIN).

695 If Form 1041 Page 1, Field #0007 (Form 8453-F Indicator) is not equal to 00 or 01.

696 If any one of the following fields (Field #0975 or #0980) on Form 1041 Page 2 contains a significant entry then Field #1000 (Charitable Deductions) on Form 1041 Page 2 must be significant.

700 If Form 1041 Page 2, Field #1030 (Net Gain Schedule D) is a significant, positive amount then it must equal Schedule D Page 1, Field #1710 (Total Net Gain or Loss Beneficiaries), **EXCEPT** when Form 1041 Page 1, Field #0220 (Final Return Box) is significant.

702 If Form 1041 Page 2, Field #1040 (Amount From Schedule A) is numeric and greater than zero then Field #0970 (Capital Gains for Tax Year Allocated and Paid or Permanently Set Aside) must equal Field #1040.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 704** If Schedule J Page 1 (Form 1041) is present then Field #0030 (Distributable Net Income Schedule B) must equal Field #1090 (Distributable Net Income) on Form 1041 Page 2 if Field #1090 is significant.

 - 706** If Form 1041 Page 2, Field #1090 (Distributable Net Income) is significant, at least one of the following fields (Field #1010 through #1070) must also be significant.

 - 708** If Schedule J Page 1 (Form 1041) is present then Field #0040 (Income Required Schedule B) must be equal to Form 1041 Page 2, Field #1120 (Income to be Distributed Currently) if Field #1120 is significant.

 - 710** If Schedule J Page 1 (Form 1041) is present then Field #0020 (Amounts Required Schedule B) must equal Form 1041 Page 2, Field #1130 (Other Amounts Paid/Credited).

 - 712** If Form 1041 Page 2, Field #1120 (Income to be Distributed Currently) or Field #1130 (Other Amounts Paid/Credited) is significant then Field #1140 (Total Distributions) must also be significant.

 - 714** If Form 1041 Page 2, Field #1240 (Foreign Tax Credit) is significant then Form 1116 must be present and Field #1250 (Foreign Tax Credit) on the first Form 1116 must be significant.

 - 716** If Form 1041 Page 4, Field #2120 (Alternative Minimum Foreign Tax Credit) is significant, then Form 1116, Field #0007 (Alt Min Tax Literal) and Field #1250 (Foreign Tax Credit) must also be significant.

 - 718** If Form 1041 Page 2, Field #1290 (General Business Credit) is greater than zeros then Form 3468 Page 1, Field #0380 (Investment Credit Allowed for Current Year) must be equal to Field #1290.

 - 720** If Form 1041 Page 2, Field #1300 (Credit for Prior Year) is significant then Form 8801 must be present.

 - 721** If Form 1041 Page 2, Field #1365 (Household Employment Taxes) is significant, then Schedule H must be present.

 - 722** If any one of the following fields (Field #1240, #1290 or #1300) on Form 1041 Page 2 contains a significant entry then Field #1310 (Total Credits) must be significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 726** If either Form 2210 or Form 2210F is present, then Field #1320 (Line 1c Minus Line 3) on Form 1041, Page 2 and either Field #0020 (Tax After Credits) Form 2210, Page 1 or Field #0020 (Current Year Tax After Credits) Form 2210F must be equal if Field #1320 is significant.

- 728** Form 1041 Page 2, Field #1225 (Alternative Minimum Tax, Schedule I) must equal Form 1041 Page 4, Field #2170 (Schedule I, Alternative Minimum Tax).

- 729** If Form 1041 Page 2, Field #1367 contains the literal "SECTION453A(C) INTEREST", then Form 1041 Page 2, Field #1366 (Computation Schedule) must equal "STMbNN".

- 730** If any one of the following fields, Field #1320 (Line 1d Minus Line 3), or Field #1350 (Recapture Taxes) or Field #1365 (Household Employment Taxes) on Form 1041 Page 2, contains a significant entry, then Field #1370 (Total Tax) must be significant.

- 732** If Form 1041 Page 2, Field #1367 contains the literal "SEC641(c)", then Field #1366 (Computation Schedule) must equal "STMbnn" and Field #1368 (Tax or Interest Due) must be significant.

- 734** If Form 1041 Page 1, Field #0220 (Final Return Box) is spaces and Schedule D Page 2, Field #1760 (Net Loss From Line 16 or \$3000) is greater than \$3,000.

- 738** If Form 4684 Page 2, Field #1210 (Loss on Line 37 is Equal to or Less than Gain on Line 36) is greater than zero then Form 4797 Page 1, Field #0600 (Gain Form 4684 Line 39) must be equal to Field #1210.

- 740** If Form 1041 Page 1, Field # 0370 (Ordinary Gain or Loss) is not equal to Form 4797 Page 1, Field #1340 (Combine Lines 10-17).

- 744** Form 1041 Page 1, Field #0270 (Number of Schedule K-1's Attached) must be numeric or blank.

- 745** If Form 1041 Page 1, Field #0825 (Paid Preparer Authorization Yes Box) equals "X", then Form 1041 Page 1, Field #0830 (Preparer's Name) must be significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 746** Form 1041 Page 1, Field #0825 (Paid Preparer Authorization Yes Box) and Form 1041 Page 1, Field #0826 (Paid Preparer Authorization No Box) cannot both equal "X".

 - 748** Form 1041 Page 2, Field #0925 (Tax Period) must equal Form 1041 Page 1, Field #0005 (Tax Period).

 - 750** Form 1041 Page 1, Field #0600 (Estax Credited to Trust Literal) must be equal to "SECT 643(G)" if significant.

 - 752** Form 1041 Page 2, Field #1280 (Form Specify) must be equal to the literal "3468" if significant.

 - 754** If Form 1041 Page 2, Field #1210 (Tax on Lump-Sum Distributions) is other than blank or zero, and Form 4972 is not present, Field #1220 (Other Tax Description) must equal "FORM8621ONLY".

 - 755** Either Schedule F (Form 1040), Field #0040 (Accounting Method Cash) or Field #0050 (Accounting Method Accrual) must equal "X".
Both must not equal "X".

 - 756** If Form 1041 Page 1, Field #0360 (Net Farm Profit/Loss) is significant, then Schedule F (Form 1040) must be present.

 - 758** If Schedule F (Form 1040) is present and Field #0300 is significant then one of the following Fields #0130-0190, #0210-0240, #0270-0290 or #0950 must contain a valid entry.

 - 759** If Schedule F (Form 1040) is present and Field #0950 is significant then Field #0300 must be equal to Field #0950.

 - 760** If Schedule F (Form 1040), Field #0040 (Accounting Method Cash) equals "X", then Field #0300 or Field #0710 must also be significant.

 - 762** If Schedule F (Form 1040), Field #0050 (Accounting Method Accrual) equals "X", then Field #0710 or Field #0950 must also be significant.

 - 764** If Schedule F (Form 1040), or Form 4835 are present, then either Schedule F, Field #0720 (PAL Indicator) or Form 4835, Field #0620 (PAL Indicator) must be "PAL" if significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- =====
- 766** If Schedule D Page 1, Field #0750 (Short Term Capital Gain or Loss Entire Year) is significant, either Form 4684, Form 6252 or Form 8824 must be present.
- 768** If Schedule D Page 1, Field #1580 (Long Term Capital Gain or Loss Entire Year) is significant, either Form 4684, Form 6252 or Form 8824 must be present.
- 770** If Form 1041 Page 2, Field #1220 (Other Tax Description) is significant, then it must contain the literal "FORM8621ONLY".
- 772** If Schedule D Page 2, Field #1790 (Amount From Form 4952, Line 4e) is significant, then Form 4952 must be present and Field #0090 (Line 4c Investment Income) Form 4952 must be significant.
- 776** If Form 1041 Page 1, Field #0330 (Business Income or Loss Schedule C) is significant, then Schedule C or Schedule C-EZ must be present, and either Schedule C, Field #0540 (Net Profit/Loss) or Schedule C-EZ, Field #0120 (Net Profit) must be significant.
- 778** If Schedule C Page 1 (Form 1040), Field #0190 (Cost of Goods Sold) is significant, then Schedule C Page 2, Field #0730 (Cost of Goods Sold) must also be significant.
- 780** Form 1041 Page 1, Field #0535 (Section 642i Number of Gravesites) must be numeric or blank.
- 782** If Schedule C Page 1 (Form 1040), Field #0490 (Other Expenses) is significant, then Schedule C Page 2, Field 1010 (Total Other Expenses) must also be significant.
- 784** If either Schedule C (Form 1040), Field #0560 (Some Investment Not at Risk) or Schedule F (Form 1040), Field #0750 (Some Investment is Not at Risk) or Form 4835, Field #0650 (Some Investment is Not at Risk) is equal to "X", then Form 6198 must be present.
- 786** If Form 4797, Field #0610 (Sec 1231 Gain) or Field #1300 (Ordinary Gain From Installment Sales) is significant, then Form 6252 must be present.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- =====
- 788** If Form 4684 is present and Field #1040 (Casualty or Theft Gains From Form 4797) is significant, then Form 4797, Field #2380 (Subtract Line 31 From Line 30) must also be significant.
- 792** If Form 6252 is present and **either** Field #0280 (Line 24 Minus Line 25) **or** Field #0450 (Line 35 Minus Line 36) is significant, then **either** Schedule D **or** Form 4797 must be present.
- 794** If Form 6252 is present and either Field #0270 (Ordinary Income Under Recapture Rules) or Field #0440 (Ordinary Income Line 35) is significant, then Form 4797, Field #1300 (Ordinary Gain From Installment Sales) must be significant.
- 795** If Form 1041 Page 2, Field #1350 (Recapture Taxes) is significant, then Form 4255 must be present and Field #1330 (Recapture Taxes Form 4255) on Form 1041 Page 2 must equal "X".
- 796** If Schedule C (Form 1040), Field #0520 (Home Business Expense) is significant, then Form 8829, Field #0450 (Schedule C Allowable Expenses) must also be significant.
- 797** Form 8829, Field #0065 (Total Hours Available) cannot exceed the maximum number of available hours (24 hours x the number of days in the year).
- 798** If Form 8824 is present and Field #(s)0020 through #0330 are blank, and Field #0340 (Recognized Gain) is significant, then Field #0345 (Total Recognized Gain Statement) must equal "STMbnn".
- 799** If Form 8824 is present and Field #(s)0230 through #0290 are blank, and Field #0300 (Realized Gain or Loss) is significant, then Field #0305 (Multi Asset Gain Statement) must equal "STMbnn".
- 800** If Schedule H (Form 1040) Page 1, Field #0140 (Total Taxes Less Advance EIC Payments) is significant, and Field #0150 (Cash Wages Over \$1000 Paid Quarterly – No Box) equals "X", then Form 1041 Page 2, Field #1365 (Household Employment Taxes) must be significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- =====
- 801** If Schedule H (Form 1040) Page 2, Field #0530 (Total Combined Taxes Plus FUTA Taxes) is significant, and Field #0540 (Required to File Form 1040 – Yes) equals “X”, then Form 1041 Page 2, Field #1365 (Household Employment Taxes) must be significant.

 - 802** Schedule H (Form 1040) Page 1, Field #0040 (Cash Wage Over \$1300 Paid Yearly – Yes Box) and Field #0045 (Cash Wage Over \$1300 Paid Yearly – No Box) cannot both equal “X”.

 - 803** Schedule H (Form 1040) Page 1, Field #0040 (Cash Wage Over \$1300 Paid Yearly – Yes Box) and Field #0045 (Cash Wage Over \$1300 Paid Yearly –No Box) cannot both equal blank.

 - 804** Schedule H (Form 1040) Page 2, Field #0200 (Name of State Where Contributions Paid) must equal a standard postal state abbreviations.

 - 805** Schedule H (Form 1040) Page 1, Field #0050 (Federal Income Tax Withheld – Yes Box) and Field #0055 (Federal Income Tax Withheld – No Box) cannot both equal “X”.

 - 806** Schedule H (Form 1041) Page 1, Field #0060 (Cash Wage Over \$1000 Paid Quarterly – No Box) and Field #0065 (Cash Wage Over \$1000 Paid Quarterly – Yes Box) cannot both equal “X”.

 - 807** Schedule H (Form 1041) Page 1, Field #0150 (Cash Wage Over \$1000 Paid Quarterly – No Box) and Field #0155 (Cash Wage Over \$1000 Paid Quarterly – Yes Box) cannot both equal “X”.

 - 808** If Schedule H (Form 1040) Page 1, Field #0045 (Cash Wage Over \$1300 Paid Yearly – No Box) and Field #0055 (Federal Income Tax Withheld – No Box) and Field #0065 (Cash Wage Over \$1000 Paid Quarterly – Yes Box) all equal “X”, then Schedule H (Form 1040) Page 2 must be present.

 - 809** If Schedule H (Form 1040) Page 1, Field #0045 (Cash Wage Over \$1300 Paid Yearly – No Box) and Field #0055 (Federal Income Tax Withheld – No Box) and Field #0060 (Cash Wage Over \$1000 Paid Quarterly – No Box) all equal “X”, then Schedule H cannot be filed.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 810** If Schedule H (Form 1040) Page 1, Field #0050 (Federal Income Tax Withheld – Yes Box) equals “X”, then Field #0110 (Federal Income Tax Withheld) must be significant.

 - 811** If Schedule H (Form 1040) Page 1, Field #0045 (Cash Wage Over \$1300 Paid Yearly – No Box) and Field #0050 (Federal Income Tax Withheld – Yes Box) both equal “X”, then Field #0060 (Cash Wage Over \$1000 Paid Quarterly – No Box) and Field #0065 (Cash Wage Over \$1000 Paid Quarterly – Yes Box) both must be blank.

 - 812** If Schedule H (Form 1040) Page 1, Field #0040 (Cash Wage Over \$1300 Paid Yearly – Yes Box) equals “X”, then Field #0070 (Social Security Wages) and Field #0090 (Medicare Wages) each must be equal to or greater than \$1300.

 - 813** If Schedule H (Form 1040) Page 1, Field #0040 (Cash Wage Over \$1300 Paid Yearly – Yes Box) equals “X”, then Field #0050 (Federal Income Tax Withheld – Yes Box), and Field #0055 (Federal Income Tax Withheld – No Box), and Field #0060 (Cash Wage Over \$1000 Paid Quarterly – No Box) and Field #0065 (Cash Wage Over \$1000 Paid Quarterly – Yes Box) all must be blank.

 - 814** If Schedule H (Form 1040) Page 2 is present, then Field #0150 (Cash Wage Over \$1000 Paid Quarterly – No Box) cannot equal “X”.

 - 815** If Schedule H (Form 1040), Page 2 is not present, then Field #0155 (Cash Wages Over \$1000 Paid Quarterly - Yes Box) cannot equal "X".

 - 816** Schedule H (Form 1040), Page 1, Field #0070 (Social Security Wages) cannot be greater than Field #0090 (Medicare Wages).

 - 817** If Schedule H (Form 1040), Page 2 is present, then Field 0520 (Total Taxes from Line 8) must equal Schedule H (Form 1040), Page 1, Field #0140 (Total Taxes Less Advance EIC Payments).

 - 818** If Schedule H (Form 1040), Page 2 is present, then Field #0230 (Total Taxable Wages for FUTA Section A) must be significant.

 - 820** If Form 1116 is present either Field #0020, #0030, #0040, #0050, #0060, #0070, #0080, #0085, #0090 or #0095 must equal “X”. More than one may not equal “X” on any individual Form 1116.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 821** If Form 1116 is present either Field #0650 (Foreign Taxes Paid or Accrued – Paid) or Field #0660 (Foreign Taxes Paid or Accrued – Accrued) must equal “X”. Both may not equal “X” on any individual Form 1116.

 - 825** If Form 2439, Field #0190 (Total Undistributed LT Capital Gains) is significant, then Schedule D, Field #1580 (Long Term Capital Gain or Loss Entire Year), must also be significant.

 - 826** If Form 2439, Field #0200 (28% Rate Gain) is significant, then Schedule D, Field #1585 (Long Term 28% Rate Capital Gain or Loss), must also be significant.

 - 827** If Form 2439, Field #0230 (Tax Paid by RIC/REIT) is significant, then Form 1041, Field #0710 (Form 2439 Amount), must also be significant.

 - 835** If Form 4136 Page 2, Field #0820 (Total Income Tax Credit Amount) is significant, then Form 1041 Page 1, Field #0720 (Form 4136 Amount) and Field #0740 (Total) must be significant. |

 - 836** If Form 4136 Page 1, Field #0070 (Nontaxable Use of Gasoline Credit Amount) is significant, then either Form 4136 Page 1, Field #0010, or Field #0020, or Field #0040, or Field #0060 must also be significant. |

 - 837** If Form 4136 Page 1, Field #0100 (Nontaxable Use of Gasohol 10% Credit Amount) is significant, then Field #0090 (Gasohol 10% Alcohol Gallons) must also be significant. |

 - If Form 4136 Page 1, Field #0130 (Nontaxable Use of Gasohol 7.7% Credit Amount) is significant, then Field #0120 (Gasohol 7.7% Alcohol Gallons) must also be significant.

 - If Form 4136 Page 1, Field #0160 (Nontaxable Use of Gasohol 5.7% Credit Amount) is significant, then Field #0150 (Gasohol 5.7% Alcohol Gallons) must also be significant.

 - 838** If Form 4136 Page 1, Field #0180 (Nontaxable Use of Commercial Aviation Gas Credit Amount) is significant, then Field #0170 (Commercial Aviation Gasoline Gallons) must also be significant. |

 - If Form 4136 Page 1, Field #0230 (Nontaxable Use of Aviation Gas Tax Credit Amount) is significant, then either Field #0200 (Nontaxable Use of Aviation Gasoline Gallons – 1) or Field #0220 (Nontaxable Use of Aviation Gasoline Gallons - 2) must also be significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

839 If Form 4136 Page 1, Field #0300 (Nontaxable Use of Diesel Fuel Credit Amount) is significant, then either Field #0270 (Nontaxable Use of Diesel Fuel Gallons 1) or Field #0290 (Nontaxable Use of Diesel Fuel Gallons 2) must also be significant.

If Form 4136 Page 1, Field #0410 (Nontaxable Use of Kerosene Credit Amount) is significant, then either Field #0380 (Nontaxable Use of Kerosene Gallons 1) or Field #0400 (Nontaxable Use of Kerosene Gallons 2) must also be significant.

840 If Form 4136 Page 1, Field #0320 (Nontaxable Diesel Fuel Train Use Credit Amount) is significant, then Field #0310 (Diesel Fuel Train Use Gallons) must also be significant.

If Form 4136 Page 1, Field #0430 (Nontaxable Kerosene Train Use Credit Amount) is significant, then Field #0420 (Kerosene Train Use Gallons) must also be significant.

841 If Form 4136 Page 1, Field #0340 (Diesel Fuel Certain Intercity and Local Bus Use Credit Amount) is significant, then Field #0330 (Diesel Fuel Certain Intercity and Local Bus Use Gallons) must also be significant.

If Form 4136 Page 1, Field #0445 (Kerosene Certain Intercity and Local Bus Use Credit Amount) is significant, then Field #0440 (Kerosene Certain Intercity and Local Bus Use Gallons) must also be significant.

842 If Form 4136 Page 2, Field #0470 (Nontaxable Use of Commercial Aviation Fuel Credit Amount) is significant, then Field #0460 (Commercial Aviation Fuel Gasoline Gallons) must also be significant.

If Form 4136 Page 2, Field #0500 (Nontaxable Use of Aviation Fuel Other \$.219 Credit Amount) is significant, then Field #0490 (Nontaxable Use of Aviation Fuel Gallons – 1) must also be significant.

If Form 4136 Page 2, Field #0530 (Nontaxable Use of Aviation Fuel Tax Credit Amount) is significant, then Field #0520 (Nontaxable Use of Aviation Fuel Gallons – 2) must also be significant.

843 If Form 4136 Page 2, Field #0600 (Sales by Vendors of Undyed Diesel Credit Amount) is significant, then either Field #0580 (Use of Undyed Diesel for Farming Purpose Gallons), or Field #0590 (Use of Undyed Diesel by State or Local Government Gallons) must also be significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 844 If Form 4136 Page 2, Field #0680 (Sales by Vendors of Undyed Kerosene Credit Amount) is significant, then either Field #0650 (Use of Kerosene for Farming Purpose Gallons), or Field #0660 (Use of Undyed Kerosene by State or Local Government Gallons), or Field #0670 (Other Sales of Undyed Kerosene Gallons) must also be significant. |

 - 845 If Form 4136 Page 2, Field #0700 (Use of LPG in Certain Intercity and Local Buses Credit Amount) is significant, then Field #0690 (Intercity and Local Buses Gallons) must also be significant. |

 - If Form 4136 Page 2, Field #0720 (Use of LPG in Qualified Local and School Buses Credit Amount) is significant, then Field #0710 (Qualified Local and School Buses Gallons) must also be significant.

 - 846 If Form 4136 Page 2, Field #0750 (Gasohol Blenders 10% Credit Amount) is significant, then Field #0730 (Gasoline gallons) and Field #0740 (Alcohol Gallons) must also be significant. |

 - If Form 4136 Page 2, Field #0780 (Gasohol Blenders 7.7% Credit Amount) is significant, then Field #0760 (Gasoline Gallons) and Field #0770 (Alcohol Gallons) must also be significant.

 - If Form 4136 Page 2, Field #0810 (Gasohol Blenders 5.7% Credit Amount) is significant, then Field #0790 Gasoline Gallons) and Field #0800 (Alcohol Gallons) must also be significant.

 - 847 If Form 4136 Page 2, Field #0570 (Undyed Diesel Fuel Box) equals "X", then Field #0560 (Undyed Diesel Fuel Explanation) must equal "STMbnn" and Field #0550 (Undyed Diesel Fuel UV Registration Number) must be significant. |

 - 848 If Form 4136 Page 2, Field #0640 (Vendors of Undyed Kerosene Box) equals "X", then Field #0630 (Vendors of Undyed Kerosene Explanation) must equal "STMbnn" and either Field #0610 (Undyed Kerosene UV Registration Number) or Field #0620 (Undyed Kerosene UP Registration Number) must be significant. |

 - 849 If Form 4136 Page 1, Field #0040 (Nontaxable Use of Gasoline Gallons - 1) is significant, then Field #0030 (Nontaxable Use of Gasoline Type - 1) must also be significant.

 - 850 If Form 4136 Page 1, Field #0060 (Nontaxable Use of Gasoline Gallons - 2) is significant, then Field #0050 (Nontaxable use of Gasoline Type - 2) must also be significant.

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

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- 851 If Form 4136 Page 1, Field #0090 (Gasohol 10% Alcohol Gallons) is significant, then Field #0080 (Gasohol 10% Alcohol Type) must also be significant. |

 - 852 If Form 4136 Page 1, Field #0120 (Gasohol 7.7% Alcohol Gallons) is significant, then Field #0110 (Gasohol 7.7% Alcohol Type) must also be significant. |

 - 853 If Form 4136 Page 1, Field #0150 (Gasohol 5.7% Alcohol Gallons) is significant, then Field #0140 (Gasohol 5.7% Alcohol Type) must also be significant. |

 - 854 If Form 4136 Page 1, Field #0200 (Nontaxable Use of Aviation Gasoline Gallons - 1) is significant, then Field #0190 (Nontaxable Use of Aviation Gasoline Type - 1) must also be significant. |

 - 855 If Form 4136 Page 1, Field #0220 (Nontaxable Use of Aviation Gasoline Gallons - 2) is significant, then Field #0210 (Nontaxable Use of Aviation Gasoline Type - 2) must also be significant. |

 - 856 If Form 4136 Page 1, Field #0270 (Nontaxable Use of Diesel Fuel Gallons 1) is significant, then Field #0260 (Nontaxable Use of Diesel Fuel Type 1) must also be significant. |

 - If Form 4136 Page 1, Field #0380 (Nontaxable Use of Kerosene Gallons 1) is significant, then Field #0370 (Nontaxable Use of Kerosene Type 1) must also be significant

 - 857 If Form 4136 Page 1, Field #0290 (Nontaxable Use of Diesel Fuel Gallons 2) is significant, then Field #0280 (Nontaxable Use of Diesel Fuel Type 2) must also be significant. |

 - If Form 4136 Page 1, Field #0400 (Nontaxable Use of Kerosene Gallons 2) is significant, then Field #0390 (Nontaxable Use of Kerosene Type 2) must also be significant.

 - 858 If Form 4136 Page 2, Field 0490 (Nontaxable Use of Aviation Fuel Gallons - 1) is significant, then Field #0480 (Nontaxable Use of Aviation Fuel Type - 1) must also be significant. |

 - 859 If Form 4136 Page 2, Field 0520 (Nontaxable Use of Aviation Fuel Gallons - 2) is significant, then Field #0510 (Nontaxable Use of Aviation Fuel Type - 2) must also be significant. |

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- =====
- 860 If Form 4136 Page 2, Field #0550 (Undyed Diesel Fuel UV Registration Number) is significant, **and** Field #0570 (Undyed Diesel Fuel Box) is equal to "X", then either Field #0580 (Use of Undyed Diesel for Farming Purpose Gallons) **or** Field #0590 (Use of Undyed Diesel by State or Local Government Gallons) must be significant.

 - 861 If either Form 4136, Page 2, Field #0610 (Undyed Kerosene UV Registration Number) **or** Field #0620 (Undyed Kerosene UP Registration Number) is significant **and** Field #0640 (Undyed Kerosene Box) is equal to "X", then either Field #0650 (Use of Kerosene for Farming Purpose Gallons) **or** Field #0660 (Use of Undyed Kerosene by State or Local Government Gallons) **or** Field #0670 (Other Sales of Undyed Kerosene Gallons) must be significant.

 - 865 If Form 4970, Field #0110 (Prior Years Distribution Amount) is significant, then Schedule J Page 2, Form 1041, Field #1750 (Total - Add Lines 32-36) must also be significant.

 - 866 If Form 4970, Field #0140 (Tax on Trust Amount From Line 3) is significant, then Schedule J Page 2, Form 1041, Field #1760 (Total - Add Lines 32-36) must also be significant.

 - 867 If Form 4970, Field #0160 (Tax Exempt Interest) is significant, then Schedule J Page 2, Form 1041, Field #1770 (Total - Add Lines 32-36) must also be significant.

 - 868 If Form 4970 is present and Field #0670 is significant, then Form 1041 Page 2, Field #1367 must equal "FromForm4970" and Field #1368 and Field #1370 must be significant.

 - 870 If Form 4972 is present and either Field #0220 (Capital Gain Election) or Field #0705 (Total Tax on Lump Sum Distribution) is significant, then Form 1041 Page 2, Field #1210 (Tax on Lump Sum Distributions) must also be significant.

 - 871 If Form 4972 is present, Field #0026 (Distribution of Qualified Plan No Box) and Field #0030 (Rollover Yes Box) and Field #0190 (Prior Year Distribution Yes Box) and Field #0201 (Beneficiary Distribution Yes Box) must be blank.

 - 872 If Form 4972 is present, Field #0024 (Distribution of Qualified Plan Yes Box) and Field #0040 (Rollover No Box) and Field #0200 (Prior Year Distribution No Box) must equal "X".

**REJECT VALIDATION (GENERAL FIELD SPECIFICATIONS FOR ALL LOGICAL
CODE RECORDS)**

- 873** If Form 4972 is present, either Field #0044 (Beneficiary of Qual Participant No Box) or Field #0086 (Qual Age - Five Yr Member No Box) must equal "X". Both must not equal "X".

- 874** If Form 4972 is present either Field #0220 (Capital Gain Election) or Field #0240 (Ordinary Income) or Field #0690 (10 Yr Method Average Tax) must be significant.

- 875** If Form 4972 is present either Field #0042 (Beneficiary of Qual Participant Yes Box) or Field #0044 (Beneficiary of Qual Participant No Box) must equal "X". Both must not equal "X".

- 876** If Form 4972 is present either Field #0084 (Qual Age - Five Yr Member Yes Box) or Field #0086 (Qual Age - Five Yr Member No Box) must equal "X". Both must not equal "X".

- 999** Exceeded maximum number of errors (96).

SECTION 7 VALIDATION - FORM 1041 REQUIRED FIELD ENTRIES
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.01 The following fields must be equal

LINE FROM FORM 1041

<u>Field</u>	<u>Title</u>	<u>Ln#</u>	=	<u>Form/Sch</u>	<u>Field</u>	<u>Title</u>	<u>Ln#</u>
0370	Ord Gain or Loss	7	=	Form 4797	1340	Combine Lines 10-17	PT II 18
0450	Charitable Deductions	13	=	Sch A	1000	Total Deductions	A-7
0530	Inc Dis Ded (Note: This is true only when Field 025 is significant.)	18	=	Sch B	1180	Inc Dis Ded	B-15
0590	Total Tax	23	=	Sch G	1370	Total Tax (lines 4 - 6)	7
0620	Payments	24a	=	Form 1041	0640	Subtract line 24b from 24a	24c
1030	Net Gain (Note: This is true only if Field 1030 is positive.)	B3	=	Sch D	1710	Net Gain	PT III 16(1)
1090	Distributable Net Income	B7	=	Sch J	0030	Amt from Sch B line 7	PT I 2
1120	Income to be Distributed Currently	B9	=	Sch J	0040	Amt from Sch B line 9	PT I 3
1130	Other Amt Paid/Cred	B10	=	Sch J	0020	Amt from Sch B line 10	PT I 1
1225	Alternative Minimum Tax	G1c	=	Sch I	2170	Alternative Min Tax	PT III 42
1290	General Business Cred	G2c	=	Form 3468	0380	Investment Credit Allowed for Current Year	PT II 16

SECTION 7 VALIDATION - FORM 1041 REQUIRED FIELD ENTRIES
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.01 The following fields must be equal (Cont'd)

LINE FROM FORM 4684

<u>Field</u>	<u>Title</u>	<u>Ln#</u>	=	<u>Form/Sch</u>	<u>Field</u>	<u>Title</u>	<u>Ln#</u>
1210	Loss equal or smaller than gain	Ln 39	=	Form 4797	0600	Gain from 4684	PT I 3(g)

SECTION 8 VALIDATION - SPECIFIC TYPES OF FIELDS
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.01 FIELDS WHICH MAY CONTAIN 'STM nn':

The following fields are asterisked "*" in Section 9 Record Layouts to indicate that they may contain the literal "STMbnn".

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	0070	GRANTOR NAME IF APPLICABLE	
	0380	SOURCE OF OTHER INCOME	8
	0470	NATURE OF OTHER DEDUCTIONS	15
	0830	PREPARER'S NAME	
	0928	ELECTION TO TREAT CONTRIBUTION AS PAID IN PRECEDING TAX YEAR	A-1
	1100	SEPARATE SHARE RULE	B-7
SCH C	0110	OTHER METHOD TYPE	F (3)
	0310	FORM 1098 EXPLANATION	PT II 16a
	0330	FORM 1098 NAME/ADDRESS	PT II 16b
SCH D	0020	SHORT TERM/LONG TERM CAPITAL GAINS AND LOSSES	PT I PT II
SCH E	0360	MORTGAGE INT PAID TO BANKERS	12
	0590	OTHER DESCRIPTION	18
	1010	PART/S-CORP NAME A	27A(a)
	1790	ESTATE/TRUST NAME	32A(a)
	2060	REMIC NAME	37(a)

.01 FIELDS WHICH MAY CONTAIN 'STM nn': (CONT'D)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
SCH F	0450	FORM 1098 EXPLANATION	PT II 24
	0460	FORM 1098 NAME/ADDRESS	PT II 24
	0580	OTHER EXPENSES	PT II 34
SCH J	1780	STATEMENT FOR SCHEDULE J	
SCH K-1	0620	K-1 STATEMENT (STM b99)	
1116	0670	FOREIGN TAXES	PT II A(m)
	0980	STATEMENT (CREDITS FOR ADDT'L TAXES PAID OR ACCRUED)	
	1055	REDUCTION IN FOREIGN TAX STATEMENT	PT III 12
	1085	ADJUSTMENTS STATEMENT	PT III 15
3468	0165	ALLOWABLE CREDIT STATEMENT ATTACHED	PT I 5
4255	0375	ADDITIONAL PROPERTY DESCRIPTION	D
	0495	RECAPTURE TAX STATEMENT	10
4562	0115	EXPENSE ELECTION	PT I 6
	0705	MACRS DEPRECIATION	PT II 15
	0790	50 YR PROPERTY	
	1105	LISTED PROPERTY LINE 24	PT V SEC A
	1325	LISTED PROPERTY LINE 25	PT V SEC A
	1735	LISTED PROPERTY LINES 28-31	PT V SEC B
	1768	LISTED PROPERTY LINES 32-34	PT V SEC B
	1965	AMORTIZATION LINE 40	PT VI 40
4684	0020	PERSONAL USE PROPERTY STATEMENT	
	0510	BUSINESS AND INC PRODUCING PROP	

.01 FIELDS WHICH MAY CONTAIN 'STM nn': (CONT'D)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
4797	0345	(A) DESCRIPTION OF PROPERTY	PT I
	0995	DESCRIPTION OF PROPERTY	PT II
	2195	GAIN FROM DISPOSITION OF PROP	PT III 19
	2475	RECAPTURE STATEMENT	PT IV
4835	0330	FORM 1098 EXPLANATION	PT II 20
	0340	FORM 1098 NAME/ADDRESS	PT II 20
	0460	OTHER EXPENSES	PT II 30
6198	0060	GAIN (LOSS) FROM ASSSETS (OTHER FORM OR SCHEDULE)	PT I 2C
6252	0075	GAIN COMPUTATION STATEMENT	5
8824	0025	PROPERTY GIVEN STATEMENT	PT I 1
	0035	PROPERTY RECEIVED STATEMENT	PT I 2
	0305	MULTI ASSET GAIN STATEMENT	19
	0345	TOTAL RECOGNIZED GAIN STATEMENT	23
	0395	DIVESTED PROPERTY ATTACHMENT	PT IV 26
	0405	REPLACEMENT PROPERTY ATTACHMENT	PT IV 27
8829	0075	COMPUTATION ATTACHED	7

.02 FIELDS WHICH MUST CONTAIN 'STM nn':

The following "@" sign fields must contain the Literal "**STMbnn**" if significant.

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	0200	POOLED INC FUND STATEMENT	A
	0540	ESTATE TAX DEDUCTION	19
	0690	FED INC TAX WITHHOLD DESC	24E
	1366	COMPUTATION SCHEDULE	G7
	1380	TAX EXEMPT EXPENSE ALLOCATION 1 COMPUTATION	
	1458	IF YES, REQUIRED ATTACHMENT	5

.02 FIELDS WHICH MUST CONTAIN 'STM nn': (CONT'D)

The following "@" sign fields must contain the Literal "STMbnn" if significant.

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
SCH C	0160	GROSS RECEIPTS/SALES EXPLANATION	PT I 1
	0620	OTHER METHOD EXPLANATION	PT III 33c
	0640	CHANGE INVENTORY EXPLANATION	PT III 34
	0660	BEGINNING INVENTORY EXPLANATION	PT III 35
	0820	OTHER EXPENSES	PT V
SCH C-EZ	0100	GROSS RECEIPTS EXPLANATION	PT II 1
SCH F	0200	CCC LOANS STATEMENT	PT I 7b
	0250	ELECTION TO DEFER	PT I 8c
1116	0150	EXPENSES DIRECTLY ALLOCABLE	PT I 2A
	0180	PRO RATA SHARE OF OTHER DED	PT I 3(b)A
	0320	EXPENSES DIRECTLY ALLOCABLE TO THE INCOME ON LINE 1	PT I 2B
	0350	PRO RATA SHARE OF OTHER DED	PT I 3(b)B
	0490	EXPENSES DIRECTLY ALLOCABLE TO THE INCOME ON LINE 1	PT I 2C
	0520	PRO RATA SHARE OF OTHER DED	PT I 3(b)C
	1030	COMP OF FOREIGN TAX	PT III 10
2210F	0177	WAIVER EXPLANATION	19
3468	0025	REHABILITATION CREDIT ATTACHED STATEMENT	PT I 1(a)
4136	0240	DIESEL FUEL EXPLANATION	3
	0350	KEROSENE EXPLANATION	5
	0560	UNDYED DIESEL FUEL EXPLANATION ⁶	
	0605	CUSTOMER INFORMATION ATTACHMENT	6
	0630	VENDORS OF UNDYED KEROSENE EXPLANATION	7
	0665	CUSTOMER INFORMATION ATTACHMENT	6
4562	0730	PROPERTY SUBJECT TO SECTION 168(F)(1) ELECTION	PT III 18

.02 FIELDS WHICH MUST CONTAIN 'STM nn': (CONT'D)

The following "@" sign fields must contain the Literal "STMbnn" if significant.

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
4835	0100	CCC LOANS STATEMENT	PT I 4b
	0165	CROP INSURANCE PROCEEDS STMNT	PT I 5b
6252	0370	EXPLANATION OF DISPOSITION NOT TO AVOID TAX	29e
8824	0225	EXPLANATION	PT II 11
8829	0517	COMPUTATION SCHEDULE	40

.03 FIELDS WHICH CONTAIN POSITIVE ENTRIES:

The following fields are numeric fields followed by "****" (3 asterisks) in the field description. These "****" indicate that this field is a positive numeric field only.

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	0310	INTEREST INCOME	1
	0320	DIVIDENDS	2
	0420	INTEREST	10
	0430	TAXES	11
	0440	FIDUCIARY FEES	12
	0450	CHARITABLE DEDUCTION	13
	0460	ATTORNEY ACCT RET PREP FEES	14
	0480	OTHER DEDUCTIONS	15a
	0490	ALLOWABLE MISC ITEMIZED DED	15b
	0510	TOTAL (LINES 10-15B)	16
	0550	TOTAL ESTATE TAX DEDUCT	19
	0560	EXEMPTION AMT	20
	0590	TOTAL TAX (SCH G)	23
	0620	2001 ESTIMATED TAX PAYMENTS AND AMOUNT FROM 2000	24a
	0700	FEDERAL INC TAX WITHHOLD AMOUNT	24e
	0750	TOTAL (ADD LINES 24C-24E AND 24H)	25
	0770	FORM 2210 PENALTY AMOUNT	26
	0800	AMOUNT CREDITED TO 2002	29a
	0810	REFUNDED AMOUNT	29b
	1000	TOTAL CHARITABLE DEDUCTION	A-7
	1030	NET GAIN	B-3

.03 FIELDS WHICH CONTAIN POSITIVE ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	1225	ALTERNATIVE MINIMUM TAX, SCH I	G-1c
	1240	FOREIGN TAX CREDIT (FORM 1116)	G-2a
	1370	TOTAL TAX (ADD LINES 4-6)	G7
	1530	NET OPERATING LOSS DEDUCTION	PT I I2
	1580	REFUND TAXES	PT I I4d
	1820	ALT TAX NET OPERATING LOSS DED	PT I I7
	1850	INCOME DISTRIBUTION DEDUCTION	PT I I9
	1960	CAPITAL GAINS COMPUTED ON A MINIMUM TAX BASIS	PT II I18
	1970	CAPITAL LOSSES COMPUTED ON A MINIMUM TAX BASIS	PT II I19
	2120	ALT MINIMUM FOREIGN TAX CREDIT	PT III I36
SCH D	0780	SHORT-TERM CAPITAL LOSS CARRYOVER	PT I 4
	1600	CAPITAL GAIN DISTRB ENTIRE YEAR	PT II 9(f)
	1605	CAPITAL GAIN DISTRB 28% RATE GAIN	PT II 9(g)
	1610	GAIN FROM FORM 4797 ENTIRE YEAR	PT II 10(f)
	1615	GAIN FROM FORM 4797 28%RATE GAIN	PT II 10(g)
	1620	LONG-TERM CAPITAL LOSS CARRYOVER (SCH D) ENTIRE YEAR	PT II 11(f)
	1625	LONG-TERM CAPITAL LOSS CARRYOVER (SCHEDULE D) 28% RATE	PT II 11(g)
	1760	NET LOSS FROM LINE 16 OR \$3,000	PT IV 17
SCH E	0930	DEDUCTIBLE RENTAL REAL ESTATE (LOSS) A	A-23
	0940	DEDUCTIBLE RENTAL REAL ESTATE (LOSS) B	B-23
	0950	DEDUCTIBLE RENTAL REAL ESTATE (LOSS) C	C-23
	0970	TOTAL LOSSES	25
	1070	PART/S-CORP PASSIVE SCH K-1 INCOME	27A(g)
	1770	TOT PART/S-CORP LOSS AND SEC 179 DEDUCTION	30
	1810	PASSIVE F8582 LOSS	32A(c)
	2020	TOT ESTATE/TRUST LOSS	35

.03 FIELDS WHICH CONTAIN POSITIVE ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
SCH K-1	0210	INTEREST SCHEDULE B PT I	1(b)
	0220	DIVIDENDS SCHEDULE B PT II	2(b)
	0480	OTHER TRUST PAYMENTS OF ESTIMATED TAXES CREDITED TO YOU	14a(b)
4684	0060	GAIN FROM CASUALTY OR THEFT	4A
	0150	GAIN FROM CASUALTY OR THEFT	4B
	0240	GAIN FROM CASUALTY OR THEFT	4C
	0330	GAIN FROM CASUALTY OR THEFT	4D
	0550	GAIN FROM CASUALTY OR THEFT	22A
	0640	GAIN FROM CASUALTY OR THEFT	22B
	0730	GAIN FROM CASUALTY OR THEFT	22C
	0820	GAIN FROM CASUALTY OR THEFT	22D
	0900	TRADE BUSINESS RENTAL ROYALTY PROPERTY	PT II 29(b)(i)
	0910	SHORT-INCOME PRODUCING PROPERTY	PT II 29(b)(ii)
	0940	TRADE BUSINESS RENTAL ROYALTY PROPERTY	PT II 29(b)(i)
	0950	SHORT-INCOME PRODUCING PROPERTY	PT II 29(b)(ii)
	0970	SHORT-TOTALS TRADE, BUSINESS, RENTAL, ROYALTY	PT II 30(b)(i)
	0980	SHORT-TOTALS INCOME PRODUCING PROPERTY	PT II 30(b)(ii)
	1060	TRADE, BUSINESS, RENTAL, ROYALTY PROPERTY	PT II 34(a)
	1070	LONG-GAINS FROM CASUALTIES OR THEFTS	PT II 34(b)(ii)
	1100	TRADE, BUSINESS, RENTAL ROYALTY PROPERTY	PT II 34(b)(i)
	1110	INCOMING PRODUCING PROPERTY	PT II 34(b)(ii)
	1130	LONG-TOTAL LOSSES TRADE, BUSINESS, RENTAL, ROYALTY	PT II 35(b)(i)
	1140	LONG-TOTAL LOSSES INCOME PRODUCING PROPERTY	PT II 35(b)(ii)
4797	1250	LOSS FROM LINE 7	PT II 11

.03 FIELDS WHICH CONTAIN POSITIVE ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
6198	0100	OTHER DEDUCTIONS OR LOSSES INCLUDING INVESTMENT INTEREST EXPENSE	PT I 5
	0350	DEDUCTIBLE LOSS FROM SMALLER OF LINE 5 OR 20	PT IV 21
8582	0030	PASSIVE ACTIVITY LOSS NET LOSS	PT I 1b
	0040	PASSIVE ACTIVITY LOSS PRIOR YEAR UNALLOWED LOSSES	PT I 1c
	0070	OTHER PASSIVE ACTIVITIES NET LOSS	PT I 2b
	0080	OTHER PASSIVE ACTIVITIES PRIOR YEAR UNALLOWED LOSSES	PT I 2c
8801	0040	NET MINIMUM TAX MIN TAX CREDIT	PT I 3

.04 FIELDS DESIGNATED "NO ENTRY" FIELDS (ZEROS ARE NOT ALLOWED IN "NO ENTRY" FIELDS):

The following fields are designated as **NO ENTRY** fields on the record layouts under the heading Field Description. No entry is allowed in these fields.

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	0170	BANKRUPTCY ESTATE - CHAPTER 7	A
	0180	BANKRUPTCY ESTATE - CHAPTER 11	A
	0230	AMENDED RETURN BOX	F
	0630	TREATED AS CREDITED TO BENEFICIARY	24b
	0650	TAX PAID WITH EXTENSION OF TIME TO FILE FORM 2758	24d
	0670	TAX PAID WITH EXTENSION OF TIME TO FILE FORM 8800	24d
	1250	OTHER NONBUSINESS CREDITS	G-2b
	1260	GENERAL BUSINESS CHECK FORM 3800	G-2c
	1340	RECAPTURE TAXES FORM 8611	G-5
SCH C	0010	SOCIAL SECURITY NUMBER	
SCH C-EZ	0010	SOCIAL SECURITY NUMBER	

.04 FIELDS DESIGNATED "NO ENTRY" FIELDS (ZEROS ARE NOT ALLOWED IN "NO ENTRY" FIELDS): (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
SCH E	0750	OTHER-DESCRIPTION 5	18
	0760	OTHER AMOUNT A	A-18
	0770	OTHER AMOUNT B	B-18
	0780	OTHER AMOUNT C	C-18
SCH F	0010	SOCIAL SECURITY NUMBER	
	0340	CONSERVATION EXPENSES	PT II 14
SCH H	0015	EMPLOYER NAME CONTROL	
	0020	EMPLOYER SSN	
	0175	ONE STATE ONLY CONTRIBUTIONS NO BOX	10
	0185	TOTAL CONTRIBUTIONS PAID BY APRIL 15 NO BOX	11
	0195	TAXABLE WAGES FOR FUTA ALSO TAXABLE FOR STATE NO BOX	12
	0250	STATE NAME 1	18(a)
	0260	STATE REPORTING NUMBER 1	18(b)
	0270	TAXABLE PAYROLL FOR CONTR 1	18(c)
	0280	BEGINNING DATE OF STATE EXPERIENCE RATE PERIOD 1	18(d)
	0285	ENDING DATE OF STATE EXPERIENCE RATE PERIOD 1	18(e)
	0290	STATE EXPERIENCE RATE 1	18(e)
	0300	UNEMPLOYMENT TAX CREDIT AT .054 – 1	18(f)
	0310	UNEMPLOYMENT TAX CREDIT AT MAXIMUM PERCENT – 1	18(g)
	0320	ADDITIONAL TAX CREDIT – 1	18(h)
	0330	CONTRIBUTIONS PAID TO STATE FUND – 1	18(i)
	0340	STATE NAME – 2	18(a)
	0350	STATE REPORTING NUMBER – 2	18(b)
	0360	TAXABLE PAYROLL FOR CONTRIBUTIONS – 2	18(c)
	0370	BEGINNING DATE OF STATE EXPERIENCE RATE PERIOD – 2	18(d)
	0375	ENDING DATE OF STATE EXPERIENCE RATE PERIOD – 2	18(d)

.04 FIELDS DESIGNATED "NO ENTRY" FIELDS (ZEROS ARE NOT ALLOWED IN "NO ENTRY" FIELDS): (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>	
SCH H	0380	STATE EXPERIENCE RATE – 2	18(e)	
	0390	UNEMPLOYMENT TAX CREDIT AT .054 – 2	18(f)	
	0400	UNEMPLOYMENT TAX CREDIT AT MAXIMUM PERCENT – 2	18(g)	
	0410	ADDITIONAL TAX CREDIT – 2	18(h)	
	0420	CONTRIBUTIONS PAID TO STATE FUND – 2	18(i)	
	0440	TOTAL ADDITIONAL TAX CREDIT	19)h)	
	0450	TOTAL CONTRIBUTIONS TO STATE FUNDS	19(i)	
	0460	TENTATIVE TOTAL TAX CREDIT	20	
	0470	TOTAL TAXABLE WAGES FOR FUTA (SECTION B)	21	
	0480	GROSS FUTA TAX AMOUNT	22	
	0490	MAXIMUM TAX CREDIT AMOUNT	23	
	0500	TOTAL TAX CREDIT ALLOWED	24	
	0510	FUTA TAX (SUBTRACT LINE 24 FROM LINE 22	25	
	0550	REQUIRED TO FILE FORM 1040 – NO	28	
	SCH K-1	0050	AMENDED K-1	
	2210	1380	SELF-EMPLOYMENT TAX AMOUNT	PT I 13a
		1590	SELF-EMPLOYMENT TAX AMOUNT	PT I 13b
1820		SELF-EMPLOYMENT TAX AMOUNT	PT I 13c	
2050		SELF-EMPLOYMENT TAX AMOUNT	PT I 13d	
2170		NET SELF-EMPLOYMENT	PT II 27a	
2190		WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 29a	
2210		LINE 28 MINUS LINE 29	PT II 30a	
2220		MULTIPLY LINE 31 BY THE SMALLER OF LINE 27 OR LINE 30	PT II 32a	
2260		MULTIPLY LINE 27 BY LINE 33	PT II 34a	
2270		ADD LINES 32 AND 34	PT II 35a	
2280		NET SELF-EMPLOYMENT	PT II 27b	
2300		WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 29b	

.04 FIELDS DESIGNATED "NO ENTRY" FIELDS (ZEROS ARE NOT ALLOWED IN "NO ENTRY" FIELDS): (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>	
2210	2320	LINE 28 MINUS LINE 29	PT II 30b	
	2330	MULTIPLY LINE 31 BY THE SMALLER OF LINE 27 OR LINE 30	PT II 32b	
	2370	MULTIPLY LINE 27 BY LINE 33 27c OR LINE 38 BY .029	PT II 34b	
	2380	ADD LINES 32 AND 34	PT II 35b	
	2390	NET SELF-EMPLOYMENT	PT II 27c	
	2410	WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 29c	
	2430	LINE 28 MINUS LINE 29	PT II 30c	
	2440	MULTIPLY LINE 31 BY THE SMALLER OF LINE 27 OR LINE 30	PT II 32c	
	2480	MULTIPLY LINE 27 BY LINE 33	PT II 34c	
	2490	ADD LINES 32 AND 34	PT II 35c	
	2500	NET SELF-EMPLOYMENT	PT II 27d	
	2520	WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 29d	
	2540	LINE 28 MINUS LINE 29	PT II 30d	
	2550	MULTIPLY LINE 31 BY THE SMALLER OF LINE 27 OR LINE 30	PT II 32d	
	2590	MULTIPLY LINE 27 BY LINE 33	PT II 34d	
	2600	ADD LINES 32 AND 34	PT II 35d	
	2439	0050	NAME CONTROL	
	3468	0280	POSSESSIONS TAX CREDIT (FORM 5735)	PT II 9l
4797	1350	INDIVIDUAL RETURN FORM 4684 SEC B PT II (LOSS)	PT II 18b(1)	
	1360	INDIVIDUAL RETURN GAIN OR LOSS	PT II 18b(2)	
	1550	SEC 291 AMOUNT PROPERTY A	PT III 26f A	
	1790	SEC 291 AMOUNT PROPERTY B	PT III 26f B	
	2030	SEC 291 AMOUNT PROPERTY C	PT III 26f C	
	2270	SEC 291 AMOUNT PROPERTY D	PT III 26f D	
4835	0010	SOCIAL SECURITY NUMBER		
	0220	CONSERVATION EXPENSES	PT II 10	

.05 FIELDS WHICH REPRESENT "X" OR BLANK ENTRIES:

The following fields are designated as "X" or **BLANK** fields on the Record Layouts.
Only "X"s or **Blanks** are allowed.

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	0025	"SECTION 642(I)TRUST" INDICATOR	
	0130	DECEDENT ESTATE	A
	0140	SIMPLE TRUST	A
	0150	COMPLEX TRUST	A
	0160	GRANTOR TYPE TRUST	A
	0190	POOLED INCOME FUND	A
	0210	INITIAL RETURN BOX	F
	0220	FINAL RETURN BOX	F
	0250	CHANGE IN FIDUCIARY'S NAME	F
	0260	CHANGE IN FIDUCIARY'S ADDRESS	F
	0280	NON EXEMPT CHARITABLE AND SPLIT INTEREST TRUSTS	E
	0290	NON EXEMPT CHARITABLE AND SPLIT INTEREST TRUSTS	E
	0300	NON EXEMPT CHARITABLE AND SPLIT INTEREST TRUSTS	E
	0303	POOLED MORTGAGE BOUGHT	G
	0305	POOLED MORTGAGE SOLD	G
	0410	FORM 4952 ATTACHED	10
	0660	TAX PAID WITH EXTENSION OF TIME TO FILE FORM 8736	24d
	0695	IF ANY IS FROM FORM(S)1099 CHECK	24e
	0825	PAID PREPARER AUTH YES BOX	
	0826	PAID PREPARER AUTH NO BOX	
	0840	PREPARED SELF-EMPLOYED	
	1190	TAX RATE SCHEDULE	G-1a
	1200	TAX SCHEDULE D	G-1
	1270	GENERAL BUS CHECK FORM (SPECIFY)	G-2c
	1330	RECAPTURE TAXES FORM 4255	G-5
	1390	TAX EXEMPT INCOME – YES BOX	1
	1395	TAX EXEMPT INCOME – NO BOX	1
	1420	INDIVIDUAL EARNINGS – YES BOX	2
	1425	INDIVIDUAL EARNINGS – NO BOX	2
	1430	FOREIGN ACCOUNT – YES BOX	3
	1435	FOREIGN ACCOUNT – NO BOX	3
	1450	FOREIGN TRUST – YES BOX	4
	1452	FOREIGN TRUST – NO BOX	4

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	1455	SELLER-FINANCED MORTGAGE INTEREST – YES BOX	5
	1460	SELLER-FINANCED MORTGAGE INTEREST – NO BOX	5
	1470	COMPLEX TRUST	I-6
	1480	SEC 643(E)(3) ELEC (SCHEDULE)	I-7
	1490	DECEDENT'S ESTATE 2-YEARS OR MORE	I-8
	1500	ANY TRUST BENEFICIARIES SKIP PERSONS – YES BOX	9
	1505	ANY TRUST BENEFICIARIES SKIP PERSONS – NO BOX	9
SCH C	0080	CASH ACCOUNTING METHOD	F(1)
	0090	ACCRUAL ACCOUNTING METHOD	F(2)
	0100	OTHER ACCOUNTING METHOD	F(3)
	0120	MATERIALLY PARTICIPATE DURING CURRENT TAX YEAR – YES BOX	G
	0125	MATERIALLY PARTICIPATE DURING CURRENT TAX YEAR – NO BOX	G
	0130	BUSINESS STARTED DURING CURRENT TAX YEAR	H
	0140	STATUTORY EMPLOYEE EARNINGS INDICATOR	1
	0550	ALL INVESTMENT AT RISK	32a
	0560	SOME INVESTMENT NOT AT RISK	32b
	0590	CLOSING INVENTORY COST METHOD	33a
	0600	LOWER COST/MARKET	33b
	0610	OTHER CLOSING INVENTORY METHOD	33c
	0630	CHANGE INVENTORY – YES BOX	34
	0635	CHANGE INVENTORY – NO BOX	34
	0780	ANOTHER VEHICLE – YES BOX	45
	0785	ANOTHER VEHICLE – NO BOX	45
	0790	OFF-DUTY HOURS – YES BOX	46
	0795	OFF-DUTY HOURS – NO BOX	46
	0800	EVIDENCE TO SUPPORT DEDUCTION – YES BOX	47a
	0805	EVIDENCE TO SUPPORT DEDUCTION – NO BOX	47a
	0810	EVIDENCE WRITTEN – YES BOX	47b
	0815	EVIDENCE WRITTEN – NO BOX	47b

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
SCH C-EZ	0080	STATUTORY EMPLOYEE EARNINGS INDICATOR	1
	0170	ANOTHER VEHICLE – YES BOX	6
	0175	ANOTHER VEHICLE – NO BOX	6
	0180	OFF-DUTY HOURS – YES BOX	7
	0185	OFF-DUTY HOURS – NO BOX	7
	0190	EVIDENCE TO SUPPORT DEDUCTION – YES BOX	8a
	0195	EVIDENCE TO SUPPORT DEDUCTION – NO BOX	8a
	0200	EVIDENCE WRITTEN – YES BOX	8b
	0205	EVIDENCE WRITTEN – NO BOX	8b
SCH E	0070	PERSONAL USE – YES BOX	A-2
	0075	PERSONAL USE – NO BOX	A-2
	0080	PERSONAL USE 14 DAYS – YES BOX	B-2
	0085	PERSONAL USE 14 DAYS – NO BOX	B-2
	0090	PERSONAL USE 10% - YES BOX	C-2
	0095	PERSONAL USE 10% - NO BOX	C-2
	1030	FOREIGN PARTNER	27A(c)
	1050	ALL IS AT RISK	27A(e)
	1060	SOME IS NOT AT RISK	27A(f)
	1170	FOREIGN PARTNER	27B(c)
	1190	ALL IS AT RISK	27B(e)
	1200	SOME IS NOT AT RISK	27B(f)
	1310	FOREIGN PARTNER	27C(c)
	1330	ALL IS AT RISK	27C(e)
	1340	SOME IS NOT AT RISK	27C(f)
	1450	FOREIGN PARTNER	27D(c)
	1470	ALL IS AT RISK	27D(e)
	1480	SOME IS NOT AT RISK	27D(f)
	1590	FOREIGN PARTNER	27E(c)
	1610	ALL IS AT RISK	27E(e)
	1620	SOME IS NOT AT RISK	27E(f)

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
SCH F	0040	ACCOUNTING METHOD (CASH)	C1
	0050	ACCOUNTING METHOD (ACCRUAL)	C2
	0080	MATERIALLY PARTICIPATE – YES BOX	E
	0085	MATERIALLY PARTICIPATE – NO BOX	E
	0260	ELECTION TO DEFER TO 2001	PT I 8c
	0740	ALL INVESTMENT IS AT RISK	PT II 37a
	0750	SOME INVESTMENT IS NOT AT RISK	PT II 37b
SCH H	0040	CASH WAGE OVER \$1300 PAID YEARLY – YES BOX	A
	0045	CASH WAGE OVER \$1300 PAID YEARLY – NO BOX	A
	0050	FED INC TAX WITHHELD – YES BOX	B
	0055	FED INC TAX WITHHELD – NO BOX	B
	0060	CASH WAGE OVER \$1000 PAID QUARTERLY – NO BOX	C
	0065	CASH WAGE OVER \$1000 PAID QUARTERLY – YES BOX	C
	0150	CASH WAGES OVER \$1000 PAID QUARTERLY – NO BOX	9
	0155	CASH WAGES OVER \$1000 PAID QUARTERLY – YES BOX	9
	0170	ONE STATE CONTR – YES BOX	10
	0180	TOTAL CONTRIBUTIONS PAID BY APRIL 15 – YES BOX	11
	0190	TAXABLE WAGES FOR FUTA ALSO TAXABLE FOR STATE – YES BOX	12
	0540	REQUIRED TO FILE FORM 1040 – NO	28
	SCH K-1	0060	FINAL K-1
1116	0020	PASSIVE INCOME	a
	0030	HIGH WITHHOLDING TAX INTEREST	b
	0040	FINANCIAL SERVICES INCOME	c
	0050	SHIPPING INCOME	d
	0060	DIV FROM DISC OR FORMER DISC	e
	0070	DISTRIBUTIONS FROM FSC/FORMER FSC	f

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1116	0080	LUMP-SUM DISTRIBUTIONS	g
	0085	SECTION 901(j) INCOME	h
	0090	INCOME RE-SOURCED BY TREATY	i
	0095	GENERAL LIMITATION INCOME	j
	0650	FRGN TAXES PAID OR ACCRUED:(PAID)	PT II m
	0660	FRGN TAXES PAID OR ACCRUED:(ACCRD)	PT II n
2210	0012	WAIVER	PT I 1a
	0014	ANNUALIZED INCOME INSTALL METHOD	PT I 1b
	0016	FED INC TAX WITHHOLD FROM WAGES	PT I 1c
	0019	ONE OR MORE REQ INSTALLMENTS	PT I 1f
2210F	0013	WAIVER OF PENALTY BOX	1a
	0016	FILING STATUS CHANGED BOX	1b
2439	0010	VOID INDICATOR BOX	
	0020	CORRECTED INDICATOR BOX	
3468	0020	SECTION 47(d)(5) ELECTION	1a
	0045	HISTORIC STRUCTURE CERTIFICATION ON FILE	1c
4136	0250	DIESEL FUEL BOX	3
	0360	KEROSENE BOX	4
	0570	UNDYED DIESEL FUEL BOX	6
	0640	VENDORS OF UNDYED KEROSENE BOX	7
4562	0185	GROUP ANY ASSETS	14
	0810	EVIDENCE FOR BUSINESS USE OF LISTED PROPERTY – YES BOX	PT V SEC A 23(a)
	0815	EVIDENCE FOR BUSINESS USE OF LISTED PROPERTY – NO BOX	PT V SEC A 23(a)
	0820	EVIDENCE WRITTEN – YES BOX	PT V SEC A 23(b)
	0825	EVIDENCE WRITTEN – NO BOX	PT V SEC A 23(b)
	1390	VEHICLE 1 AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 32(a)

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
4562	1395	VEHICLE 1 AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 32(a)
	1400	VEHICLE 1 USED MORE THAN 5% OWNER/RELATED PERSON – YES BOX	PT V SEC B 33(a)
	1405	VEHICLE 1 USED MORE THAN 5% OWNER/RELATED PERSON – NO BOX	PT V SEC B 33(a)
	1410	VEHICLE 1 ANOTHER AVAILABLE FOR PERSONAL USE - YES BOX	PT V SEC B 34(a)
	1415	VEHICLE 1 ANOTHER AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 34(a)
	1460	VEHICLE 2 AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 32(b)
	1465	VEHICLE 2 AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 32(b)
	1470	VEHICLE 2 USED MORE THAN 5% OWNER/RELATED PERSON – YES BOX	PT V SEC B 33(b)
	1475	VEHICLE 2 USED MORE THAN 5% OWNER/RELATED PERSON – NO BOX	PT V SEC B 33(b)
	1480	VEHICLE 2 ANOTHER AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 34(b)
	1485	VEHICLE 2 ANOTHER AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 34(b)
	1530	VEHICLE 3 AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 32(c)
	1535	VEHICLE 3 AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 32(c)
	1540	VEHICLE 3 USED MORE THAN 5% OWNER/RELATED PERSON – YES BOX	PT V SEC B 33(c)
	1545	VEHICLE 3 USED MORE THAN 5% OWNER/RELATED PERSON – NO BOX	PT V SEC B 33(c)
	1550	VEHICLE 3 ANOTHER AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 34(c)
	1555	VEHICLE 3 ANOTHER AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 34(c)
	1600	VEHICLE 4 AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 32(d)
	1605	VEHICLE 4 AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 32(d)

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
4562	1610	VEHICLE 4 USED MORE THAN 5% OWNER/RELATED PERSON – YES BOX	PT V SEC B 33(d)
	1615	VEHICLE 4 USED MORE THAN 5% OWNER/RELATED PERSON – NO BOX	PT V SEC B 33(d)
	1620	VEHICLE 4 ANOTHER AVAILABLE FOR PERSONAL USE - YES BOX	PT V SEC B 34(d)
	1625	VEHICLE 4 ANOTHER AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 34(d)
	1670	VEHICLE 5 AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 32(e)
	1675	VEHICLE 5 AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 32(e)
	1680	VEHICLE 5 USED MORE THAN 5% OWNER/RELATED PERSON – YES BOX	PT V SEC B 33(e)
	1685	VEHICLE 5 USED MORE THAN 5% OWNER/RELATED PERSON – NO BOX	PT V SEC B 33(e)
	1690	VEHICLE 5 ANOTHER AVAILABLE FOR PERSONAL USE - YES BOX	PT V SEC B 34(e)
	1695	VEHICLE 5 ANOTHER AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 34(e)
	1740	VEHICLE 6 AVAILABLE FOR PERSONAL USE – YES BOX	PT V SEC B 32(f)
	1745	VEHICLE 6 AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 32(f)
	1750	VEHICLE 6 USED MORE THAN 5% OWNER/RELATED PERSON – YES BOX	PT V SEC B 33(f)
	1755	VEHICLE 6 USED MORE THAN 5% OWNER/RELATED PERSON – NO BOX	PT V SEC B 33(f)
	1760	VEHICLE 6 ANOTHER AVAILABLE FOR PERSONAL USE - YES BOX	PT V SEC B 34(f)
	1765	VEHICLE 6 ANOTHER AVAILABLE FOR PERSONAL USE – NO BOX	PT V SEC B 34(f)
	1770	MAINTAIN WRITTEN STATEMENT INCLUDING COMMUTING – YES BOX	PT V SEC C 35
	1775	MAINTAIN WRITTEN STATEMENT INCLUDING COMMUTING – NO BOX	PT V SEC C 35

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
4562	1780	MAINTAIN WRITTEN STATEMENT PROHIBITING PERSONAL USE – YES BOX	PT V SEC C 36
	1785	MAINTAIN WRITTEN STATEMENT PROHIBITING PERSONAL USE – NO BOX	PT V SEC C 36
	1790	TREAT USE BY EMPLOYEES AS PERSONAL USE – YES BOX	PT V SEC C 37
	1795	TREAT USE BY EMPLOYEES AS PERSONAL USE – NO BOX	PT V SEC C 37
	1800	PROVIDE MORE THAN 5 VEHICLES - YES BOX	PT V SEC C 38
	1805	PROVIDE MORE THAN 5 VEHICLES - NO BOX	PT V SEC C 38
	1810	MEET REQUIREMENTS CONCERNING FLEET VEHICLE OR QUALIFIED AUTO DEMO USE – YES BOX	PT V SEC C 39
	1815	MEET REQUIREMENTS CONCERNING FLEET VEHICLE OR QUALIFIED AUTO DEMO USE – NO BOX	PT V SEC C 39
	4835	0030	ACTIVELY PARTICIPATE – YES BOX	A
0035		ACTIVELY PARTICIPATE – NO BOX	A
0160		IF ELECT TO DEFER TO 19XX ATT	PT I 5c
0640		ALL INVESTMENT IS AT RISK	33a
0650		SOME INVESTMENT IS NOT AT RISK	33b
4970	0070	DOMESTIC TRUST INDICATOR	E
	0080	FOREIGN TRUST INDICATOR	E
4972	0024	DISTR OF QUAL PLAN – YES BOX	1
	0026	DISTR OF QUAL PLAN – NO BOX	1
	0030	ROLLOVER – YES BOX	2
	0040	ROLLOVER – NO BOX	2
	0042	BENEFICIARY OF QUALIFIED PARTICIPANT – YES BOX	3
	0044	BENEFICIARY OF QUALIFIED PARTICIPANT – NO BOX	3
	0084	QUAL AGE – FIVE YR MEMBER – YES BOX	4
	0086	QUAL AGE – FIVE YR MEMBER – NO BOX	4

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
4972	0190	PRIOR YEAR DISTRIBUTION – YES BOX	5a
	0200	PRIOR YEAR DISTRIBUTION – NO BOX	5a
	0201	BENEFICIARY DISTRIBUTION – YES BOX	5b
	0202	BENEFICIARY DISTRIBUTION – NO BOX	5b
6198	0220	AT RISK EFFECTIVE DATE BOX	PT III 15a
	0230	PRIOR YEAR F6198, LINE 19 BOX	PT III 15b
	0250	INCREASES SINCE EFFECT DATE BOX	PT III 16a
	0260	INCREASES END OF PRIOR TAX YR BOX	PT III 16b
	0290	DECREASES SINCE EFFECT DATE BOX	PT III 18a
	0300	DECR SINCE END OF PRIOR YR BOX	PT III 18b
6252	0050	PROPERTY SOLD TO RELATED PARTY – YES BOX	3
	0055	PROPERTY SOLD TO RELATED PARTY – NO BOX	3
	0060	MARKET SECURITY – YES BOX	4
	0065	MARKET SECURITY – NO BOX	4
	0300	SECOND DISPOSITION – YES BOX	28
	0305	SECOND DISPOSITION – NO BOX	28
	0310	2ND DISP MORE THAN 2 YEARS AFTER 1ST DISP	29a
	0330	1ST DISP SALE/EXCHANGE	29b
	0340	2ND DISP INVOLUNTARY CONVERSION	29c
	0350	2ND DISP AFTER DEATH OF ORIGINAL SELLER/BUYER	29d
	0360	DISPOSITION NOT TO AVOID TAX	29e
8582-CR	0470	ELECTION TO INCREASE BASIS OF CREDIT PROPERTY BOX	38
8824	0080	WAS THE EXCH MADE WITH A RELATED PARTY. YES, THIS TAX YEAR	PT I 7a
	0090	WAS THE EXCH MADE WITH A RELATED PARTY. YES, PRIOR YEAR	PT I 7b
	0100	WAS THE EXCH MADE WITH A RELATED PARTY. NO	PT I 7c

.05 FIELDS WHICH REPRESENT 'X' OR BLANK ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
8824	0180	DURING YEAR DID RELATED PARTY SELL OR DISPOSE OF PROPERTY – YES BOX	PT II 9
	0185	DURING YEAR DID RELATED PARTY SELL OR DISPOSE OF PROPERTY – NO BOX	PT II 9
	0190	DURING YEAR DID YOU SELL OR DISPOSE OF PROPERTY – YES BOX	PT II 10
	0195	DURING YEAR DID YOU SELL OR DISPOSE OF PROPERTY – NO BOX	PT II 10
	0200	DISPOSITION AFTER DEATH OF EITHER RELATED PARTIES	PT II 11a
	0210	DISPOSITION WAS AN INVOLUNTARY CONVERSION	PT II 11b
	0220	YOU CAN ESTABLISH TO SATISFACTION THAT NEITHER HAD TAX AVOIDANCE	PT II 11c
	SUMMARY	0070	PREPARER'S SELF-EMPLOYMENT INDICATOR

.06 FIELDS WHICH REPRESENT "LITERALS" ENTRIES

The following fields represent fields that can contain literals. The Field Description on the record layout will indicate the approved "LITERAL".

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
1041	0060	ESTATE/TRUST NAME LINE	
	0375	FORM 4684	7
	0470	NATURE OF OTHER DEDUCTIONS	15
	0600	ESTAX CREDITED TO TRUST "SECT 643(G)"	25a
	1220	FORM8621ONLYbbbbbbbbb	G-2b
	1280	FORM (SPECIFY) "3468"	G-2c
	1367	"FROMFORM4970bbbbbbbbb" OR "SECTION453A(C)INTEREST" OR "SEC641(C)bbbbbbbbb"	G-7
	SCH E	1020	PART/S-CORP IND "P" OR "S"	27A(b)
1090		PYA INDICATOR "PYA"	27A(h)
1110		PYA INDICATOR "PYA"	27A(i)
1140		PYA INDICATOR "PYA"	27A(k)

.06 FIELDS WHICH REPRESENT "LITERALS" ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
SCH E	1160	PART/S-CORP IND "P" OR "S"	27B(b)
	1230	PYA INDICATOR "PYA"	27B(h)
	1250	PYA INDICATOR "PYA"	27B(i)
	1280	PYA INDICATOR "PYA"	27B(k)
	1300	PART/S-CORP IND "P" OR "S"	27C(b)
	1370	PYA INDICATOR "PYA"	27C(h)
	1390	PYA INDICATOR "PYA"	27C(i)
	1420	PYA INDICATOR "PYA"	27C(k)
	1440	PART/S-CORP IND "P" OR "S"	27D(b)
	1510	PYA INDICATOR "PYA"	27D(h)
	1530	PYA INDICATOR "PYA"	27D(i)
	1560	PYA INDICATOR "PYA"	27D(k)
	1580	PART/S-CORP IND "P" OR "S"	27E(b)
	1650	PYA INDICATOR "PYA"	27E(h)
	1670	PYA INDICATOR "PYA"	27E(i)
	1700	PYA INDICATOR "PYA"	27E(k)
	2030	SCH K1 ES PYMT "ES PYMNT CLAIMED"	36
SCH F	0720	PAL INDICATOR "PAL"	36
SCH J	1490	BENEFICIARY'S NAME "SEE STATEMENT ATTACHED"	PT IV
SCH K-1	0070	BENEFICIARY'S IDENTIFYING NUMBER "FOREIGNUS"	
1116	0007	ALT MIN TAX	
	0120	GROSS INCOME SOURCE "WAGES " "DIVIDENDS"	PT I 1A
	0290	GROSS INCOME SOURCE "WAGES " "DIVIDENDS"	PT I 1B
	0460	GROSS INCOME SOURCE "WAGES " "DIVIDENDS"	PT I 1C
3468	0140	TAX REFORM ACT LITERAL	PT I 5
4255	0483	"TAX FROM ATTACHED"	9

.06 FIELDS WHICH REPRESENT "LITERALS" ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>	
4562	0210	MACRS 3-YR PROPERTY CONVENTION "HY", "MQ", "MM"	PT II 15a(e)	
	0260	MACRS 5-YR PROPERTY CONVENTION "HY", "MQ", "MM"	PT II 15b(e)	
	0310	MACRS 7-YR PROPERTY CONVENTION "HY", "MQ", "MM"	PT II 15c(e)	
	0360	MACRS 10-YR PROPERTY CONVENTION "HY", "MQ", "MM"	PT II 15d(e)	
	0410	MACRS 15-YR PROPERTY CONVENTION "HY", "MQ", "MM"	PT II 15e(e)	
	0460	MACRS 20-YR PROPERTY CONVENTION "HY", "MQ", "MM"	PT II 15f(e)	
	0630	ADS (CLASS LIFE) CONVENTION "HY", "MQ", "MM"	PT II 16a(e)	
	0660	ADS (12 YEAR) CONVENTION "HY", "MQ", "MM"	PT II 16b(e)	
	1175	DEPRECIATION ITEM 1 METHOD/ CONV "HY", "MQ", "MM", "PRE"	PT V SEC A 25(g)	
	1245	DEPRECIATION ITEM 2 METHOD/ CONV "HY", "MQ", "MM", "PRE"	PT V SEC A 25(g)	
	1315	DEPRECIATION ITEM 3 METHOD/ CONV "HY", "MQ", "MM", "PRE"	PT V SEC A 25(g)	
	4684	1000	PAL INDICATOR "PAL"	PT II 31
		1020	PAL INDICATOR "PAL"	PT II 32
1170		PAL INDICATOR "PAL"	PT II 38(a)	
1190		PAL INDICATOR "PAL"	PT II 38(b)	
4797	0050	DATE ACQUIRED ITEM 1 "INHERIT"	PT I 2(b)	
	0130	DATE ACQUIRED ITEM 2 "INHERIT"	PT I 2(b)	
	0200	DATE ACQUIRED ITEM 3 "INHERIT"	PT I 2(b)	
	0280	DATE ACQUIRED ITEM 4 "INHERIT"	PT I 2(b)	
	0700	ORD G/L DATE ACQ ITEM 1 "INHERIT"	PT II 10(b)	
	0780	ORD G/L DATE ACQ ITEM 2 "INHERIT"	PT II 10(b)	
	0860	ORD G/L DATE ACQ ITEM 3 "INHERIT"	PT II 10(b)	
	0940	ORD G/L DATE ACQ ITEM 4 "INHERIT"	PT II 10(b)	
	1275	PAL INDICATOR "PAL"	PT II 14	

.06 FIELDS WHICH REPRESENT "LITERALS" ENTRIES: (CON'T)

<u>FORM/SCH</u>	<u>FIELD</u>	<u>IDENTIFICATION</u>	<u>LINE REF</u>
4835	0620	PAL INDICATOR "PAL"	32
8271	0040	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	1(b)
	0080	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	2(b)
	0120	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	3(b)
	0160	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	4(b)
	0200	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	5(b)
	0240	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	6(b)
	0280	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	7(b)
	0320	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	8(b)
	0360	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	9(b)
	0400	TAX SHELTER REGISTRATION NUMBER "APPLIEDbFOR" OR "NObNOTIFICA"	10(b)
8824	0100	RELATED ID "APPLD FOR"	PT II 8
8829	0515	"SEE ATTACHED"	40

RECORD LAYOUTS

SECTION 9 .00 ENTITY RECORD

A new format for the Entity Record Layouts was made effective October 1, 1998.

The ELF Processing Support Section will work with you in resolving any entity discrepancies and, if necessary, will mail you a copy of the paper report. An automated acknowledgment report will not be available.

The data must be submitted in an ASCII format with no header or trailer information included and must be in a fixed format (one record per block).

TRANSMISSION RECORD

<u>Field</u>	<u>Identification</u>	<u>Length</u>	<u>Char-Pos</u>	<u>Field Desc</u>
0000	Record ID	6	1 - 6	"TRANSE"
0010	Transmitter's ETIN	8	7 - 14	NNNNNNnn
0020	Julian Date	3	15 - 17	Numeric
0030	Transmitter's Sequence Number	2	18 - 19	Numeric
0040	File ID	12	20 - 31	Blank
9999	Record Terminus Character	1	32	"#"

ENTITY RECORD

<u>Field</u>	<u>Identification</u>	<u>Length</u>	<u>Char-Pos</u>	<u>Field Desc</u>
0010	Employer Identification Number	9	1 - 9	Numeric
0020	Name Control	4	10 - 13	Alphanumeric
0030	Name of Estate / Trust / Grantor	35	14 - 48	Alphanumeric
0040	*Client Information	35	49 - 83	Alphanumeric
9999	Record Terminus Character	1	84	"#"

*Note: This field can be used by transmitter for their tracking purposes (i.e. account number, second name line, etc.)

RECAP RECORD

<u>Field</u>	<u>Identification</u>	<u>Length</u>	<u>Char-Pos</u>	<u>Field Desc</u>
0000	Record ID	6	1 - 6	"RECAPb"
0010	Total Entity Count	6	7 - 12	Numeric (000001-999999)
0020	Transmitter?s ETIN	8	13 - 20	NNNNNNnn
0030	Julian Date	3	21 - 23	Numeric
0040	Transmitter?s Sequence Number	2	24 - 25	Numeric
9999	Record Terminus Character	1	26	"#"

SECTION 9 .005 REMITTANCE REGISTER

Form 1041 Payments - Regular

Electronic Remittance Register

With the submission of every Form 1041 balance due return a Remittance Register and its related payment must be submitted to the ELF Processing Support Section (see Page ix for mailing information).

Make all payments for balance due returns by the due date of the return regardless of an extension of time being filed for the return. If the return is due on April 15th, payments must be postmarked by April 15th of that year.

One paper check payment may cover up to 5,000 accounts from the same transmission.

The Remittance Register must be submitted on the same medium as the return, using the following format:

Transmittal record (This record identifies the transmitter).

Remittance records (each record contains corresponding taxpayer's information from the 1041 return tape). Money fields - 12 characters - 11 numeric characters followed by a blank space to represent a positive amount.

Recap record (This record contains the total of amounts owed (remitted) and the total number of remittance records).

If the file is transmitted via modem or on diskette it must be in an ASCII text file format with a carriage return and line feed at the end of each record.

If transmitted on tape, data must be ASCII or EBCDIC.

One check per register. One check for multiple registers may delay processing.

NOTE: The amount of the paper check MUST match the dollar amount in the Remittance RECAP Record, Field #0235, Total \$ Amount of remittances.

Trans Record

<u>Field</u>	<u>Identification</u>	<u>Length</u>	<u>Char-Pos</u>	<u>Field Desc</u>
0010	Byte Count	4	1 - 4	"0088"
0015	Start of Record Sentinel	4	5 - 8	Value = "*****"
0020	Record Name	5	9 - 13	Value = "TRANR"
0025	Transmitter's EIN	9	14 - 22	Numeric
0030	Transmitter's Name	35	23 - 57	Alphanumeric
0035	Julian Date of Transmission	3	58 - 60	Numeric
0040	Trans Sequence Number of Julian Date	2	61 - 62	Numeric
0045	Electronic Transmitters's ID Number Plus Filer's User Code	8	63 - 70	Numeric Value = NNNNNNnn, NNNNNN = ETIN, **nn = Transmitters User Code; may zero fill

** Note: "nn" value assigned by transmitter to identify branch office with the same ETIN, EIN and Transmission Date.

0050	Payment Code	1	71	Value = "1"
0055	File ID	12	72 - 83	Blanks
0060	Filler	4	84 - 87	Blanks
0065	Record Terminus Character	1	88	"#"

Remittance Record

<u>Field</u>	<u>Identification</u>	<u>Length</u>	<u>Char-Pos</u>	<u>Field Desc</u>
0110	Byte Count	4	1 - 4	"0048"
0115	Start of Record Sentinel	4	5 - 8	Value = "*****"
0120	Record Name	5	9 - 13	Value = "REMIT"
0125	Name Control	4	14 - 17	Alphanumeric (Field #0030 on Form 1041)
0130	TIN (EIN)	9	18 - 26	Numeric (Field #0040 on Form 1041)
0135	Tax Period	6	27 - 32	Numeric YYYYMM (Field #0005 on Record ID of Form 1041)
0140	Tax Due Amount	12	33 - 44	Numeric (Field #0780 on Form 1041)
0145	Payment Code	1	45	VALUE = "1"
0150	Filler	2	46 - 47	Blanks
0155	Record Terminus Character	1	48	"#"

Recap Record

<u>Field</u>	<u>Identification</u>	<u>Length</u>	<u>Char-Pos</u>	<u>Field Desc</u>
0210	Byte Count	4	1 - 4	"0040"
0215	Start of Record Sentinel	4	5 - 8	Value = "*****"
0220	Record Name	5	9 - 13	Value = "RECAP"
0225	Electronic Transmitters Id # Plus Filer's User Code	8	14 - 21	Numeric Value = NNNNNNnn, NNNNNN = ETIN, nn = Filer's User Code; may be zero filled
0230	Total Number of Remittance Records	4	22 - 25	Numeric (Cannot exceed 5000)
0235	Total \$ Amount of Remittances	12	26 - 37	Numeric (Whole Dollars Only)
0240	Filler	2	38 - 39	Blank
0245	Record Terminus Character	1	40	"#"

SECTION 9.01 TRANSMISSION (TRANS) RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0202
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"TRANSb"
0010	FILLER		11	15 -	25	BLANK
0020	TRANSMITTER'S EIN		9	26 -	34	N nnnnnnnnn
0030	DATA FIELD INDICATOR		1	35 -	35	"V" OR "F"
0040	TRANSMITTER'S NAME		35	36 -	70	A/N
0050	LOCATION CODE (MUST BE ENTERED OR TRANSMISSION WILL BE REJECTED)		1	71 -	71	N "1" = DOMESTIC RETURNS, THE VIRGIN ISLANDS AND OTHER U.S. TERRITORIES, FPO AND APO ADDRESSES (EXCEPT PUERTO RICO) "2" = PUERTO RICO RETURNS "3" = FOREIGN RETURNS
0060	TRANSMISSION DATE		8	72 -	79	N FORMAT: YYYYMMDD
0070	ELECTRONIC TRANSMITTER'S IDENTIFICATION NUMBER PLUS FILER'S USER CODE (MUST BE ENTERED, MUST BE THE SAME AS ETIN ON RECAP RECORD)		8	80 -	87	NNNNNNnn NNNNNN = ETIN ** nn = TRANSMITTER'S USER CODE; MAY BE ZERO FILLED
	** NOTE: "nn" VALUE ASSIGNED BY TRANSMITTER TO IDENTIFY BRANCH, OFFICE WITH THE SAME ETIN, EIN AND TRANSMISSION DATE.					
0080	JULIAN DATE OF TRANSMISSION		3	88 -	90	N
0090	TRANSMISSION SEQUENCE NUMBER FOR JULIAN DAY IN (080)		2	91 -	92	N
	NOTE: Sequence number must be unique for every transmission.					
0100	FILER IDENTIFICATION		6	93 -	98	A/N or Blank
0110	PAPER CHECK INDICATOR (FOR BALANCE DUE RETURNS WITH REMITTANCE REGISTER AND PAPER CHECKS ATTACHED).		1	99 -	99	"1" OR BLANK 1 = BALANCE DUE PAYMENT ATTACHED
0120	RETURN FORM TYPE		6	100 -	105	"1041bb" LEFT JUSTIFIED
0130	TRANSMITTER'S ADDRESS		35	106 -	140	A/N
0140	TRANSMITTER'S CITY		22	141 -	162	A/N
0150	TRANSMITTER'S STATE		2	163 -	164	A/N

SECTION 9.01 TRANSMISSION (TRANS) RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0160	TRANSMITTER'S ZIP CODE		12	165 -	176	N OR nnnnnbbbbbb OR nnnnnnnnbbb
0170	AREA CODE TELEPHONE NUMBER (TRANSMITTER'S)		10	177 -	186	N
0180	FORM 8453-F INDICATOR		2	187 -	188	A/N "00" = ONE FORM 8453-F PER RETURN; "01" = ONE FORM 8453-F FOR MULTIPLE RETURNS
0190	ELECTRONIC TRACKING INDICATOR		12	189 -	200	RESERVED
0200	ELECTRONIC ACKNOWLEDGEMENT INDICATOR		1	201 -	201	"X" OR BLANK
	RECORD TERMINUS CHARACTER		1	202 -	202	"#"

For calendar year 2001 or fiscal year beginning , 2001 and ending , 20 OMB No. 1545-0092

A Type of entity: Decedent's estate, Simple trust, Complex trust, Grantor type trust, Bankruptcy estate-Ch. 7, Bankruptcy estate-Ch. 11, Pooled income fund. B Number of Schedules K-1 attached. C Employer identification number. D Date entity created. E Nonexempt charitable and split-interest trusts.

F Check applicable boxes: Initial return, Final return, Amended return, Change in fiduciary's name, Change in fiduciary's address. G Pooled mortgage account: Bought, Sold, Date.

Income section table with rows 1-9: Interest income, Ordinary dividends, Business income or (loss), Capital gain or (loss), Rents, royalties, partnerships, other estates and trusts, etc., Farm income or (loss), Ordinary gain or (loss), Other income, Total income.

Deductions section table with rows 10-21: Interest, Taxes, Fiduciary fees, Charitable deduction, Attorney, accountant, and return preparer fees, Other deductions, Total, Adjusted total income or (loss), Income distribution deduction, Estate tax deduction, Exemption, Total deductions.

Tax and Payments section table with rows 22-29: Taxable income, Total tax, Payments (a-e), Total payments, Estimated tax penalty, Tax due, Overpayment, Amount of line 28 to be.

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

Sign Here section: Signature of officer, Date, EIN of fiduciary if a financial institution, and a box for 'May the IRS discuss this return with the preparer shown below?'.

Paid Preparer's Use Only section: Preparer's signature, Date, Check if self-employed, Preparer's SSN or PTIN, Firm's name, address, and ZIP code, EIN, Phone no.

Schedule A Charitable Deduction. Do not complete for a simple trust or a pooled income fund.			
1	Amounts paid or permanently set aside for charitable purposes from gross income (see page 16)	1	
2	Tax-exempt income allocable to charitable contributions (see page 16 of the instructions)	2	
3	Subtract line 2 from line 1	3	
4	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes	4	
5	Add lines 3 and 4	5	
6	Section 1202 exclusion allocable to capital gains paid or permanently set aside for charitable purposes (see page 16 of the instructions)	6	
7	Charitable deduction. Subtract line 6 from 5. Enter here and on page 1, line 13	7	

Schedule B Income Distribution Deduction			
1	Adjusted total income (from page 1, line 17) (see page 17 of the instructions)	1	
2	Adjusted tax-exempt interest	2	
3	Total net gain from Schedule D (Form 1041), line 16, column (1) (see page 17 of the instructions)	3	
4	Enter amount from Schedule A, line 4 (reduced by any allocable section 1202 exclusion)	4	
5	Capital gains for the tax year included on Schedule A, line 1 (see page 17 of the instructions)	5	
6	Enter any gain from page 1, line 4, as a negative number. If page 1, line 4, is a loss, enter the loss as a positive number	6	
7	Distributable net income (DNI). Combine lines 1 through 6. If zero or less, enter -0-	7	
8	If a complex trust, enter accounting income for the tax year as determined under the governing instrument and applicable local law	8	
9	Income required to be distributed currently	9	
10	Other amounts paid, credited, or otherwise required to be distributed	10	
11	Total distributions. Add lines 9 and 10. If greater than line 8, see page 18 of the instructions	11	
12	Enter the amount of tax-exempt income included on line 11	12	
13	Tentative income distribution deduction. Subtract line 12 from line 11	13	
14	Tentative income distribution deduction. Subtract line 2 from line 7. If zero or less, enter -0-	14	
15	Income distribution deduction. Enter the smaller of line 13 or line 14 here and on page 1, line 18	15	

Schedule G Tax Computation (see page 18 of the instructions)			
1	Tax: a <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	1a	
	b Tax on lump-sum distributions (attach Form 4972)	1b	
	c Alternative minimum tax (from Schedule I, line 39)	1c	
	d Total. Add lines 1a through 1c	1d	
2a	Foreign tax credit (attach Form 1116)	2a	
b	Check: <input type="checkbox"/> Nonconventional source fuel credit <input type="checkbox"/> Form 8834	2b	
c	General business credit. Enter here and check which forms are attached: <input type="checkbox"/> Form 3800 or <input type="checkbox"/> Forms (specify) ▶	2c	
d	Credit for prior year minimum tax (attach Form 8801)	2d	
3	Total credits. Add lines 2a through 2d. If zero or less, enter -0-	3	
4	Subtract line 3 from line 1d	4	
5	Recapture taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611.	5	
6	Household employment taxes. Attach Schedule H (Form 1040)	6	
7	Total tax. Add lines 4 through 6. Enter here and on page 1, line 23	7	

Other Information		Yes	No
1	Did the estate or trust receive tax-exempt income? If "Yes," attach a computation of the allocation of expenses Enter the amount of tax-exempt interest income and exempt-interest dividends ▶ \$		
2	Did the estate or trust receive all or any part of the earnings (salary, wages, and other compensation) of any individual by reason of a contract assignment or similar arrangement?		
3	At any time during calendar year 2001, did the estate or trust have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶		
4	During the tax year, did the estate or trust receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the estate or trust may have to file Form 3520. See page 20 of the instructions		
5	Did the estate or trust receive, or pay, any qualified residence interest on seller-provided financing? If "Yes," see page 20 for required attachment		
6	If this is an estate or a complex trust making the section 663(b) election, check here (see page 20) ▶ <input type="checkbox"/>		
7	To make a section 643(e)(3) election, attach Schedule D (Form 1041), and check here (see page 20). ▶ <input type="checkbox"/>		
8	If the decedent's estate has been open for more than 2 years, attach an explanation for the delay in closing the estate, and check here ▶ <input type="checkbox"/>		
9	Are any present or future trust beneficiaries skip persons? See page 20 of the instructions		

Schedule I Alternative Minimum Tax (see pages 20 through 25 of the instructions)

Part I—Estate's or Trust's Share of Alternative Minimum Taxable Income

1	Adjusted total income or (loss) (from page 1, line 17)		1	
2	Net operating loss deduction. Enter as a positive amount		2	
3	Add lines 1 and 2		3	
4	Adjustments and tax preference items:			
a	Interest	4a		
b	Taxes	4b		
c	Miscellaneous itemized deductions (from page 1, line 15b)	4c		
d	Refund of taxes	4d ()		
e	Depreciation of property placed in service after 1986	4e		
f	Circulation and research and experimental expenditures	4f		
g	Mining exploration and development costs	4g		
h	Long-term contracts entered into after February 28, 1986	4h		
i	Amortization of pollution control facilities	4i		
j	Installment sales of certain property	4j		
k	Adjusted gain or loss (including incentive stock options)	4k		
l	Certain loss limitations	4l		
m	Tax shelter farm activities	4m		
n	Passive activities	4n		
o	Beneficiaries of other trusts or decedent's estates	4o		
p	Tax-exempt interest from specified private activity bonds	4p		
q	Depletion	4q		
r	Accelerated depreciation of real property placed in service before 1987	4r		
s	Accelerated depreciation of leased personal property placed in service before 1987	4s		
t	Intangible drilling costs	4t		
u	Other adjustments	4u		
5	Combine lines 4a through 4u		5	
6	Add lines 3 and 5		6	
7	Alternative tax net operating loss deduction (see page 23 of the instructions for limitations)		7	
8	Adjusted alternative minimum taxable income. Subtract line 7 from line 6. Enter here and on line 13 Note: Complete Part II below before going to line 9.		8	
9	Income distribution deduction from line 27 below	9		
10	Estate tax deduction (from page 1, line 19)	10		
11	Add lines 9 and 10		11	
12	Estate's or trust's share of alternative minimum taxable income. Subtract line 11 from line 8 If line 12 is:		12	

- \$22,500 or less, stop here and enter -0- on Schedule G, line 1c. The estate or trust is not liable for the alternative minimum tax.
- Over \$22,500, but less than \$165,000, go to line 28.
- \$165,000 or more, enter the amount from line 12 on line 34 and go to line 35.

Part II—Income Distribution Deduction on a Minimum Tax Basis

13	Adjusted alternative minimum taxable income (from line 8)	13	
14	Adjusted tax-exempt interest (other than amounts included on line 4p)	14	
15	Total net gain from Schedule D (Form 1041), line 16, column (1). If a loss, enter -0-	15	
16	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Schedule A, line 4)	16	
17	Capital gains paid or permanently set aside for charitable purposes from gross income (see page 24 of the instructions)	17	
18	Capital gains computed on a minimum tax basis included on line 8	18 ()	
19	Capital losses computed on a minimum tax basis included on line 8. Enter as a positive amount	19	
20	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 13 through 19. If zero or less, enter -0-	20	
21	Income required to be distributed currently (from Schedule B, line 9)	21	
22	Other amounts paid, credited, or otherwise required to be distributed (from Schedule B, line 10)	22	
23	Total distributions. Add lines 21 and 22	23	
24	Tax-exempt income included on line 23 (other than amounts included on line 4p)	24	
25	Tentative income distribution deduction on a minimum tax basis. Subtract line 24 from line 23	25	
26	Tentative income distribution deduction on a minimum tax basis. Subtract line 14 from line 20. If zero or less, enter -0-	26	
27	Income distribution deduction on a minimum tax basis. Enter the smaller of line 25 or line 26. Enter here and on line 9	27	

Part III—Alternative Minimum Tax

28	Exemption amount		28	\$22,500	00
29	Enter the amount from line 12	29			
30	Phase-out of exemption amount	30	\$75,000	00	
31	Subtract line 30 from line 29. If zero or less, enter -0-	31			
32	Multiply line 31 by 25% (.25)		32		
33	Subtract line 32 from line 28. If zero or less, enter -0-		33		
34	Subtract line 33 from line 29		34		
35	If the estate or trust completed Schedule D (Form 1041) and has an amount on line 15b, col. (2) or line 21 (if you did not complete either line, see page 25 of the instructions) (as figured for the AMT, if necessary), go to Part IV below to figure line 35. All others: If line 34 is— <ul style="list-style-type: none"> • \$175,000 or less, multiply line 34 by 26% (.26). • Over \$175,000, multiply line 34 by 28% (.28) and subtract \$3,500 from the result 		35		
36	Alternative minimum foreign tax credit (see page 24 of instructions)		36		
37	Tentative minimum tax. Subtract line 36 from line 35		37		
38	Enter the tax from Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)		38		
39	Alternative minimum tax. Subtract line 38 from line 37. If zero or less, enter -0-. Enter here and on Schedule G, line 1c		39		

Part IV—Line 35 Computation Using Maximum Capital Gains Rates

Caution: If the estate or trust did not complete Part V of Schedule D (Form 1041), complete lines 19 through 21 of Schedule D (as figured for the AMT, if necessary) before completing this part.

40	Enter the amount from line 34		40		
41	Enter the amount from Schedule D (Form 1041), line 21 or worksheet line 9 (as figured for AMT, if necessary)	41			
42	Enter the amount from Schedule D (Form 1041), line 15b, column (2) (as figured for AMT, if necessary)	42			
43	Add lines 41 and 42. If zero or less, enter -0-	43			
44	Enter the amount from Schedule D (Form 1041), line 21 or worksheet line 4 (as figured for AMT, if necessary)	44			
45	Enter the smaller of line 43 or line 44		45		
46	Subtract line 45 from line 40. If zero or less, enter -0-		46		
47	If line 46 is \$175,000 or less, multiply line 46 by 26% (.26). Otherwise, multiply line 46 by 28% (.28) and subtract \$3,500 from the result		47		
48	Enter the amount from Schedule D (Form 1041), line 26, or line 16 of the Schedule D Tax Worksheet (as figured for the regular tax)		48		
49	Enter the smallest of line 40, line 41, or line 48		49		
50	Enter your qualified 5-year gain, if any, from Schedule D (Form 1041) line 27 (as figured for the AMT, if necessary). See page 25 of the 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	Enter the smaller of line 40 or line 41		55		
56	Enter the amount from line 49		56		
57	Subtract line 56 from line 55. If zero or less, enter -0-		57		
58	Multiply line 57 by 20% (.20)		58		
59	Enter the amount from line 40		59		
60	Add lines 46, 49, and 57		60		
61	Subtract line 60 from line 59		61		
62	Multiply line 61 by 25% (.25)		62		
63	Add lines 47, 52, 54, 58, and 62		63		
64	If line 40 is \$175,000 or less, multiply line 40 by 26% (.26). Otherwise, multiply line 40 by 28% (.28) and subtract \$3,500 from the result		64		
65	Enter the smaller of line 63 or line 64 here and on line 35		65		



SECTION 9.03 FORM 1041 - PAGE 1

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	1003
		4	5 -	8	*****
0000		6	9 -	14	"RETbbb"
0001		6	15 -	20	"1041bb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnnn
0004		1	35 -	35	BLANK
0005		6	36 -	41	N FORMAT: YYYYMM
0006		1	42 -	42	BLANK
0007		2	43 -	44	N "00" OR "01"
NOTE: VALUE = "00" IF A SINGLE RETURN IS RELATED TO A FORM 8453-F. VALUE = "01" IF THE RETURN IS PART OF A SERIES OF RETURNS RELATED TO A FORM 8453-F.					
0010		8	45 -	52	FORMAT: YYYYMMDD OR BLANK
0020		8	53 -	60	FORMAT: YYYYMMDD OR BLANK
0025		1	61 -	61	"X" OR BLANK
0030		4	62 -	65	A/N
0040	C	9	66 -	74	N
0050	D	8	75 -	82	FORMAT: YYYYMMDD
0060		35	83 -	117	A/N or "GNMA" or "GINNIE MAE" or "FNMA" or "FANNIE MAE"
*0070		35	118 -	152	A/N OR "STMbnn" OR BLANK
0080		35	153 -	187	A/N
0090		35	188 -	222	A/N
0100		22	223 -	244	A/N
0110		2	245 -	246	A/N

NOTE: FOR FOREIGN COUNTRIES ".b" (PERIOD AND A BLANK SPACE) IS ALLOWED

SECTION 9.03 FORM 1041 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0120	ZIP CODE		12	247 -	258	N OR nnnnnnnnnbbb OR nnnnnbbbbbbb OR BLANK
0130	DECEDENT ESTATE	A	1	259 -	259	"X" OR BLANK
0140	SIMPLE TRUST	A	1	260 -	260	"X" OR BLANK
0150	COMPLEX TRUST	A	1	261 -	261	"X" OR BLANK
0160	GRANTOR TYPE TRUST	A	1	262 -	262	"X" OR BLANK
0170	BANKRUPTCY ESTATE-CHPT. 7	A	1	263 -	263	NO ENTRY
0180	BANKRUPTCY ESTATE-CHPT. 11	A	1	264 -	264	NO ENTRY
0190	POOLED INCOME FUND	A	1	265 -	265	"X" OR BLANK
@0200	POOLED INCOME FUND STATEMENT	A	6	266 -	271	"STMbnn" OR BLANK
0210	INITIAL RETURN BOX	F	1	272 -	272	"X" OR BLANK
0220	FINAL RETURN BOX	F	1	273 -	273	"X" OR BLANK
0230	AMENDED RETURN BOX	F	1	274 -	274	NO ENTRY
0250	CHANGE IN FIDUCIARY'S NAME	F	1	275 -	275	"X" OR BLANK
0260	CHANGE IN FIDUCIARY'S ADDRESS	F	1	276 -	276	"X" OR BLANK
0270	NUMBER OF SCHEDULES K-1 ATTACHED	B	7	277 -	283	N OR BLANK RANGE 0000000 - 9999999
0280	NONEXEMPT CHARITABLE AND SPLIT INTEREST TRUSTS (SEC. 4947 (a) (1))	E	1	284 -	284	"X" OR BLANK
0290	NONEXEMPT CHARITABLE AND SPLIT INTEREST TRUSTS NOT A PRIVATE FOUNDATION	E	1	285 -	285	"X" OR BLANK
0300	NONEXEMPT CHARITABLE AND SPLIT INTEREST TRUSTS (SEC. 4947(a)(2))	E	1	286 -	286	"X" OR BLANK
0303	POOLED MORTGAGE BOUGHT	G	1	287 -	287	"X" OR BLANK
0305	POOLED MORTGAGE SOLD	G	1	288 -	288	"X" OR BLANK
0307	POOLED MORTGAGE DATE	G	8	289 -	296	FORMAT: YYYYMMDD OR BLANK
0310	INTEREST INCOME	1	12	297 -	308	N ***
0320	DIVIDENDS	2	12	309 -	320	N ***

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0330	BUSINESS INCOME OR (LOSS) (SCHEDULE C)	3	12	321 -	332	N
0340	CAPITAL GAIN OR LOSS (SCHEDULE D)	4	12	333 -	344	N
0350	RENTS ROYALTY PARTNERSHIP OTHER ESTATES/TRUST	5	12	345 -	356	N
0360	FARM INCOME (LOSS) (SCHEDULE F)	6	12	357 -	368	N
0370	ORDINARY GAIN OR LOSS (FORM 4797)	7	12	369 -	380	N
0375	FORM 4684	7	9	381 -	389	"FORM 4684" OR BLANK
*0380	SOURCE OF OTHER INCOME	8	30	390 -	419	A/N OR "STMbnn" OR BLANK
0390	OTHER INCOME	8	12	420 -	431	N
0400	TOTAL INCOME COMBINE LINES 1 - 8	9	12	432 -	443	N
0410	FORM 4952 ATTACHED	10	1	444 -	444	"X" OR BLANK
0420	INTEREST	10	12	445 -	456	N ***
0430	TAXES	11	12	457 -	468	N ***
0440	FIDUCIARY FEES	12	12	469 -	480	N ***
0450	CHARITABLE DEDUCTIONS	13	12	481 -	492	N ***
0460	ATTORNEY ACCOUNTANT RETURN PREPARER FEES	14	12	493 -	504	N ***
*0470	NATURE OF OTHER DEDUCTIONS	15	6	505 -	510	"STMbnn" OR "SCHK-1" OR BLANK
NOTE: NON-TAXABLE GRANTOR TRUST MAY USE THIS STATEMENT TO PROVIDE INFORMATION AS AN ATTACHMENT TO THE RETURN. IF THE SPACE PROVIDED IN THIS FIELD IS NOT SUFFICIENT, PLEASE USE THE SCHEDULE K-1 RECORD TO COMPLY WITH THE NECESSARY INFORMATION REQUIRED BY FIELD #470. IF THE SCHEDULE K-1 IS USED, STATEMENT FOR FIELD #470 MUST SAY: "SCHK-1".						
0480	OTHER DEDUCTIONS	15a	12	511 -	522	N ***
0490	ALLOWABLE MISCELLANEOUS ITEMIZED DEDUCTIONS	15b	12	523 -	534	N ***
0510	TOTAL (LINES 10 - 15b)	16	12	535 -	546	N ***
0520	ADJUSTED TOTAL INCOME OR (LOSS) LINE 16 MINUS LINE 9	17	12	547 -	558	N
0530	INCOME DISTRIBUTION DEDUCTION (SCHEDULE B)	18	12	559 -	570	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0535	SECTION 642i NUMBER OF GRAVESITES		7	571 - 577	N	
@0540	ESTATE TAX DEDUCTION	19	6	578 - 583	"STMbnn" OR BLANK	
0550	TOTAL ESTATE TAX DEDUCTION	19	12	584 - 595	N ***	
0560	EXEMPTION AMOUNT	20	12	596 - 607	N ***	
0570	TOTAL DEDUCTIONS (ADD LINES 18 - 20)	21	12	608 - 619	N	
0580	TAXABLE INCOME OF FIDUCIARY LINE 17 MINUS LINE 21	22	12	620 - 631	N	
0590	TOTAL TAX (SCHEDULE G)	23	12	632 - 643	N ***	
0600	ESTAX CREDITED TO TRUST LITERAL	24a	11	644 - 654	"SECTb643(G)" OR BLANK	
0610	ESTAX CREDITED TO TRUST AMOUNT	24a	12	655 - 666	N	
0620	2001 ESTIMATED TAX PAYMENTS AND AMOUNT FROM 2000	24a	12	667 - 678	N ***	
0630	ESTIMATED TAX PAYMENTS TO BENEFICIARIES	24b	12	679 - 690	NO ENTRY	
0640	LINE 24A MINUS LINE 24B	24c	12	691 - 702	N	
0650	TAX PAID WITH EXTENSION OF TIME TO FILE FORM 2758 BOX	24d	1	703 - 703	NO ENTRY	
0660	TAX PAID WITH EXTENSION OF TIME TO FILE FORM 8736 BOX	24d	1	704 - 704	X OR BLANK	
0670	TAX PAID WITH EXTENSION OF TIME TO FILE FORM 8800 BOX	24d	1	705 - 705	NO ENTRY	
0680	TAXES PAID AMOUNT	24d	12	706 - 717	N	
@0690	FEDERAL INCOME TAX WITHHELD DESCRIPTION	24e	6	718 - 723	"STMbnn" OR BLANK	
0695	IF ANY IS FROM FORM(S) 1099 CHECK	24e	1	724 - 724	"X" or blank	
0700	FEDERAL INCOME TAX WITHHELD AMOUNT	24e	12	725 - 736	N ***	
0710	FORM 2439 AMOUNT	24f	12	737 - 748	N	
0720	FORM 4136 AMOUNT	24g	12	749 - 760	N	
0740	TOTAL	24h	12	761 - 772	N	
0750	TOTAL (ADD LINES 24c - 24e AND 24h)	25	12	773 - 784	N ***	
0770	ESTIMATED TAX PENALTY	26	12	785 - 796	N ***	

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0780	TAX DUE	27	12	797	-	808	N
0790	OVERPAYMENT	28	12	809	-	820	N
0800	AMOUNT CREDITED TO 2002	29a	12	821	-	832	N ***
0810	REFUNDED AMOUNT	29b	12	833	-	844	N ***
0820	FIDUCIARY EIN (TAXABLE TRUSTS ONLY)		9	845	-	853	N OR BLANK
	TO BE COMPLETED BY FINANCIAL INSTITUTIONS THAT FILE FROM 1041ES ON MAGNETIC TAPE						
0825	PAID PREPARER AUTHORIZATION YES BOX		1	854	-	854	"X" OR BLANK
0826	PAID PREPARER AUTHORIZATION NO BOX		1	855	-	855	"X" OR BLANK
*0830	PREPARER'S NAME		35	856	-	890	A/N OR "STMBnn" OR BLANK
0840	PREPARER SELF-EMPLOYED		1	891	-	891	"X" OR BLANK
0850	PREPARER'S TIN		9	892	-	900	A/N OR BLANK
+0860	PREPARER'S FIRM		27	901	-	927	A/N OR BLANK
0870	PREPARER'S FIRM EIN		9	928	-	936	N OR BLANK
+0880	PREPARER'S FIRM ADDRESS AND ZIP CODE		39	937	-	975	A/N OR BLANK
0890	PREPARER'S FIRM TELEPHONE NUMBER		10	976	-	985	N OR BLANK
0900	BANK ACCOUNT NUMBER		17	986	-	1002	A/N OR BLANK
	RECORD TERMINUS CHARACTER		1	1003	-	1003	"#"

SECTION 9.04 FORM 1041 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0619
	START RECORD SENTINEL		4	5 -	8	*****
0920	RECORD ID		6	9 -	14	"RETbbb"
0921	TYPE		6	15 -	20	"1041bb"
0922	PAGE NUMBER		5	21 -	25	"PG02b"
0923	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0924	FILLER		1	35 -	35	BLANK
0925	TAX PERIOD		6	36 -	41	N FORMAT: YYYYMM
0926	FILLER		1	42 -	42	BLANK
0927	FORM 8453-F INDICATOR		2	43 -	44	N "00" OR "01"
*0928	ELECTION TO TREAT CONTRIBUTION A-1 AS PAID IN PRECEDING TAX YEAR		6	45 -	50	"STMbnn" OR BLANK
0940	AMOUNTS PAID OR PERMANENTLY ALLOCATED FOR CHARITABLE PURPOSES	A-1	12	51 -	62	N
0950	TAX EXEMPT INCOME ALLOCABLE TO CHARITABLE CONTRIBUTIONS	A-2	12	63 -	74	N
0960	SUBTRACT LINE 2 FROM LINE 1	A-3	12	75 -	86	N
0970	CAPITAL GAINS FOR TAX YEAR ALLOCATED AND PAID OR PERMANENTLY SET ASIDE	A-4	12	87 -	98	N
0975	ADD LINE 3 AND LINE 4	A-5	12	99 -	110	N
0980	SECTION 1202 EXCLUSION	A-6	12	111 -	122	N
1000	CHARITABLE DEDUCTION LINES 5 MINUS LINE 6	A-7	12	123 -	134	N ***
1010	ADJUSTED TOTAL INCOME	B-1	12	135 -	146	N
1020	ADJUSTED TAX EXEMPT INTEREST	B-2	12	147 -	158	N
1030	NET GAIN (SCHEDULE D)	B-3	12	159 -	170	N ***
1040	AMOUNT SCHEDULE A	B-4	12	171 -	182	N
1050	CAPITAL GAINS (SCHEDULE A)	B-5	12	183 -	194	N
1070	CAPITAL GAIN PAGE 1, LINE 4	B-6	12	195 -	206	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1090	DISTRIBUTABLE NET INCOME COMBINE LINE 1 - 6	B-7	12	207 -	218	N
*1100	SEPARATE SHARE RULE	B-7	6	219 -	224	"STMbnn" OR BLANK
1110	ACCOUNTING INCOME	B-8	12	225 -	236	N
1120	INCOME TO BE DISTRIBUTED CURRENTLY	B-9	12	237 -	248	N
1130	OTHER AMOUNTS PAID/CREDITED	B-10	12	249 -	260	N
1140	TOTAL DISTRUBUTIONS ADD LINES 9 & 10	B-11	12	261 -	272	N
1150	TAX EXEMPT INCOME	B-12	12	273 -	284	N
1160	TENTATIVE INCOME (LINE 11 MINUS LINE 12)	B-13	12	285 -	296	N
1170	TENTATIVE INCOME (LINE 7 MINUS LINE 2)	B-14	12	297 -	308	N
1180	INCOME DISTRIBUTION DEDUCTION	B-15	12	309 -	320	N
1190	TAX RATE SCHEDULE	G-1a	1	321 -	321	"X" OR BLANK
1200	TAX SCHEDULE D	G-1a	1	322 -	322	"X" OR BLANK
1205	SCHEDULE D AMOUNT	G-1a	12	323 -	334	N
1210	TAX ON LUMP SUM DISTRIBUTIONS	G-1b	12	335 -	346	N
1220	OTHER TAX DESCRIPTION	G-1b	20	347 -	366	"FORM8621ONLYbbbbbb b" or BLANK
1225	ALTERNATIVE MINIMUM TAX, SCHEDULE I	G-1c	12	367 -	378	N***
1230	TOTAL TAX	G-1d	12	379 -	390	N
1240	CREDIT FORM 1116	G-2a	12	391 -	402	N ***
1250	OTHER NONBUSINESS CREDITS	G-2b	12	403 -	414	NO ENTRY
1260	GENERAL BUSINESS CHECK FORM 3800	G-2c	1	415 -	415	NO ENTRY
1270	GENERAL BUSINESS CHECK FORM (SPECIFY)	G-2c	1	416 -	416	"X" OR BLANK
1280	FORM (SPECIFY)	G-2c	4	417 -	420	"3468" OR BLANK
1290	GENERAL BUSINESS CREDIT	G-2c	12	421 -	432	N
1300	CREDIT FOR PRIOR YEAR MINIMUM TAX (FORM 8801)	G-2d	12	433 -	444	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
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1310	TOTAL CREDITS ADD LINES G-2a - G-2d	G-3	12	445 -	456	N
1320	LINE 1c MINUS LINE 3	G-4	12	457 -	468	N
1330	RECAPTURE TAXES FORM 4255	G-5	1	469 -	469	"X" OR BLANK
1340	RECAPTURE TAXES FORM 8611	G-5	1	470 -	470	NO ENTRY
1350	RECAPTURE TAXES	G-5	12	471 -	482	N
1365	HOUSEHOLD EMPLOYMENT TAXES	G-6	12	483 -	494	N
@1366	COMPUTATION SCHEDULE	G-7	6	495 -	500	"STMbnn" OR BLANK
1367	F 4970, OR SECT 453A(c) ADDITIONAL TAX OR INTEREST OR SEC641(c) LITERAL	G-7	22	501 -	522	"FROMFORM4970bbbbbb bbbb" "SECTION453A (C)INTEREST" "SEC 641(C)bbbbbbbbbbbb OR BLANK"
1368	TAX OR INTEREST DUE	G-7	12	523 -	534	N
1370	TOTAL TAX (ADD LINES 4 - 6)	G-7	12	535 -	546	N ***
@1380	TAX EXEMPT EXPENSE ALLOCATION COMPUTATION	1	6	547 -	552	"STMbnn" OR BLANK
1390	TAX EXEMPT INCOME - YES BOX	1	1	553 -	553	"X" OR BLANK
1395	TAX EXEMPT INCOME - NO BOX	1	1	554 -	554	"X" OR BLANK
1400	TAX INTEREST INCOME AND DIVIDENDS	1	12	555 -	566	N
1420	INDIVIDUAL EARNINGS - YES BOX	2	1	567 -	567	"X" OR BLANK
1425	INDIVIDUAL EARNINGS - NO BOX	2	1	568 -	568	"X" OR BLANK
1430	FOREIGN ACCOUNT - YES BOX	3	1	569 -	569	"X" OR BLANK
1435	FOREIGN ACCOUNT NO BOX	3	1	570 -	570	"X" OR BLANK
1440	NAME OF FOREIGN COUNTRY	3	33	571 -	603	A/N
1450	FOREIGN TRUST - YES BOX	4	1	604 -	604	"X" OR BLANK
1452	FOREIGN TRUST NO BOX	4	1	605 -	605	"X" OR BLANK
1455	SELLER-FINANCED MORTGAGE INTEREST - YES BOX	5	1	606 -	606	"X" OR BLANK
@1458	IF YES, REQUIRED ATTACHMENT	5	6	607 -	612	"STMbnn" OR BLANK
1460	SELLER-FINANCED MORTGAGE INTEREST NO BOX	5	1	613 -	613	"X" OR BLANK
1470	COMPLEX TRUST	6	1	614 -	614	"X" OR BLANK

SECTION 9.04 FORM 1041 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1480	SEC. 643 (e)(3) ELECTION (SCHEDULE D)	7	1	615	615	"X" OR BLANK
1490	DECEDENT'S ESTATE 2-YEARS OR MORE	8	1	616	616	"X" OR BLANK
1500	ANY TRUST BENEFICIARIES SKIP PERSONS - YES BOX	9	1	617	617	"X" OR BLANK
1505	ANY TRUST BENEFICIARIES SKIP PERSONS - NO BOX	9	1	618	618	"X" OR BLANK
	RECORD TERMINUS CHARACTER		1	619	619	"#"

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0609
	START RECORD SENTINEL		4	5 -	8	*****
1510	RECORD ID		6	9 -	14	"RETbbb"
1511	TYPE		6	15 -	20	"1041bb"
1512	PAGE NUMBER		5	21 -	25	"PG03b"
1513	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
1514	FILLER		1	35 -	35	BLANK
1515	TAX PERIOD		6	36 -	41	FORMAT: YYYYMM
1516	FILLER		1	42 -	42	BLANK
1517	FORM 8453-F INDICATOR		2	43 -	44	N "00" OR "01"
1520	ADJUSTED TOTAL INCOME	PT I I1	12	45 -	56	N
1530	NET OPERATING LOSS DEDUCTION	PT I I2	12	57 -	68	N ***
1540	ADD LINES 1 AND 2	PT I I3	12	69 -	80	N
1550	INTEREST	PT I I4a	12	81 -	92	N
1560	TAXES	PT I I4b	12	93 -	104	N
1570	MISCELLANEOUS ITEMIZED DEDUCTIONS	PT I I4c	12	105 -	116	N
1580	REFUND TAXES	PT I I4d	12	117 -	128	N ***
1600	DEPRECIATION OF PREPROPERTY PLACED IN SERVICE AFTER 1986	PT I I4e	12	129 -	140	N
1610	CIRCULATION AND RESEARCH PAID OR INCURRED AFTER 1986	PT I I4f	12	141 -	152	N
1620	MINING EXPLORATION AND DEVELOPMENT PAID OR INCURRED AFTER 1986	PT I I4g	12	153 -	164	N
1630	LONG TERM CONTRACTS AFTER FEB 1986	PT I I4h	12	165 -	176	N
1640	POLLUTION CONTROLS PLACED IN SERVICE AFTER 1986	PT I I4i	12	177 -	188	N
1650	INSTALLMENT SALES OF PROPERTY	PT I I4j	12	189 -	200	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1660	ADJUSTMENT GAIN OR LOSS	PT I I4k	12	201 -	212	N
1670	CERTAIN LOSS LIMITATIONS	PT I I4l	12	213 -	224	N
1680	TAX SHELTER FARM ACTIVITIES	PT I I4m	12	225 -	236	N
1690	PASSIVE ACTIVITIES	PT I I4n	12	237 -	248	N
1700	BENEFICIARIES OF OTHER ESTATES OR TRUSTS	PT I I4o	12	249 -	260	N
1730	TAX-EXEMPT INTEREST FROM SPECIFIED BONDS	PT I I4p	12	261 -	272	N
1740	DEPLETION	PT I I4q	12	273 -	284	N
1760	ACCELERATED DEPRECIATION OF REAL PROPERTY IN SERVICE BEFORE 1987	PT I I4r	12	285 -	296	N
1770	ACCELERATED DEPRECIATION OF LEASED PERSONAL PROPERTY	PT I I4s	12	297 -	308	N
1780	INTANGIBLE DRILLING COSTS	PT I I4t	12	309 -	320	N
1790	RELATED ADJUSTMENTS	PT I I4u	12	321 -	332	N
1800	COMBINE LINES 4A THROUGH 4U	PT I I5	12	333 -	344	N
1810	ADD LINES 3 AND 5	PT I I6	12	345 -	356	N
1820	ALTERNATIVE TAX NET OPERATING LOSS DEDUCTION	PT I I7	12	357 -	368	N ***
1840	ADJUSTED ALTERNATIVE MINIMUM TAXABLE INCOME	PT I I8	12	369 -	380	N
1850	INCOME DISTRIBUTION DEDUCTION	PT I I9	12	381 -	392	N***
1860	ESTATE TAX DEDUCTION	PT I I10	12	393 -	404	N
1870	ADD LINES 9 THRU 10	PT I I11	12	405 -	416	N
1890	ESTATE'S OR TRUSTS'S SHARE OF ALTERNATIVE MINIMUM TAXABLE INCOME	PT I I12	12	417 -	428	N
1910	ADJUSTED ALTERNATIVE MINIMUM TAXABLE INCOME	PT II I13	12	429 -	440	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1920	ADJUSTED TAX EXEMPT INTEREST	PT II I14	12	441 -	452	N
1930	NET CAPITAL GAIN (SCHEDULE D)	PT II I15	12	453 -	464	N
1940	CAPITAL GAINS ALLOCABLE FOR CHARITABLE PURPOSES (SCHEDULE A)	PT II I16	12	465 -	476	N
1950	CAPITAL GAINS PAID FOR CHARITABLE PURPOSES (SCHEDULE A)	PT II I17	12	477 -	488	N
1960	CAPITAL GAINS COMPUTED ON A MINIMUM TAX BASIS	PT II I18	12	489 -	500	N ***
1970	CAPITAL LOSSES COMPUTED ON A MINIMUM TAX BASIS	PT II I19	12	501 -	512	N ***
1980	DISTRIBUTABLE NET ALTERNATIVE (DNAMT) COMBINE LINES 13 - 19	PT II I20	12	513 -	524	N
1990	INCOME DISTRIBUTED CURRENTLY	PT II I21	12	525 -	536	N
2000	OTHER AMOUNTS PAID CREDITED OR DISTRIBUTED	PT II I22	12	537 -	548	N
2010	TOTAL DISTRIBUTION (ADD LINES 21 AND 22)	PT II I23	12	549 -	560	N
2020	TAX-EXEMPT INCOME INCLUDED ON LINE 23	PT II I24	12	561 -	572	N
2030	TENTATIVE INCOME DISTRIBUTION DEDUCTION (LINE 23 MINUS LINE 24)	PT II I25	12	573 -	584	N
2040	TENTATIVE INCOME DISTRIBUTION DEDUCTION (LINE 20 MINUS LINE 14)	PT II I26	12	585 -	596	N
2050	INCOME DISTRIBUTION DEDUCTION (SMALLER OF LINE 25 OR 26)	PT II I27	12	597 -	608	N
	RECORD TERMINUS CHARACTER		1	609 -	609	"#"

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0477
	START RECORD SENTINEL		4	5 -	8	*****
2051	RECORD ID		6	9 -	14	"RETbbb"
2052	TYPE		6	15 -	20	"1041bb"
2053	PAGE NUMBER		5	21 -	25	"PG04b"
2054	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
2055	FILLER		1	35 -	35	BLANK
2056	TAX PERIOD		6	36 -	41	FORMAT: YYYYMM
2057	FILLER		1	42 -	42	BLANK
2058	FORM 8453-F INDICATOR		2	43 -	44	"00" OR "01"
2060	ALTERNATIVE MINIMUM TAXABLE INCOME (ENTER AMOUNT FROM LINE 12)	PT III I29	12	45 -	56	N
2070	LINE 29 MINUS LINE 30	PT III I31	12	57 -	68	N
2080	MULTIPLY LINE 31 BY 25% (.25)	PT III I32	12	69 -	80	N
2090	LINE 28 MINUS LINE 32	PT III I33	12	81 -	92	N
2100	LINE 29 MINUS LINE 33	PT III I34	12	93 -	104	N
2110	MULTIPLY LINE 34 BY 26% (.26) IF LINE 34 IS > \$175,000 OTHERWISE MULTIPLY LINE 34 BY 28% (.28) AND SUBTRACT \$3,500	PT III I35	12	105 -	116	N
2120	ALTERNATIVE MINIMUM FOREIGN TAX CREDIT	PT III I36	12	117 -	128	N ***
2130	TENTATIVE MINIMUM TAX (LINE 35 MINUS LINE 36)	PT III I37	12	129 -	140	N
2140	REGULAR TAX BEFORE CREDITS	PT III I38	12	141 -	152	N
2170	ALTERNATIVE MINIMUM TAX (LINE 37 MINUS LINE 38)	PT III I39	12	153 -	164	N
2180	AMOUNT FROM LINE 34	PT III I40	12	165 -	176	N
2190	AMOUNT FROM SCH D LINE 21 OR WORKSHEET LINE 9	PT IV I41	12	177 -	188	N
2200	AMT FROM SCH D LINE 15b COLUMN (2)	PT IV I42	12	189 -	200	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2210	ADD LINES 41 AND 42	PT IV I43	12	201 -	212	N
2220	AMT FROM SCH D LINE 21 OR WORKSHEET LINE 4	PT IV I44	12	213 -	224	N
2230	SMALLER OF LINE 43 OR 44	PT IV I45	12	225 -	236	N
2240	LINE 40 MINUS LINE 45	PT IV I46	12	237 -	248	N
2250	MULTIPLY LINE 46 BY 26% (.26) IF LINE 46 IS > \$175,000 OTHERWISE MULTIPLY 46 BY 28% (.28) AND SUBTRACT \$3,500	PT IV I47	12	249 -	260	N
2260	AMOUNT FROM SCH D LINE 26 OR WORKSHEET LINE 16	PT IV I48	12	261 -	272	N
2270	SMALLEST OF LINE 40, 41 OR 48	PT IV I49	12	273 -	284	N
2280	QUALIFIED 5-YEAR GAIN	PT IV I50	12	285 -	296	N
2290	SMALLER OF LINE 49 OR 50	PT IV I51	12	297 -	308	N
2300	MULTIPLY LINE 51 BY 8% (.08)	PT IV I52	12	309 -	320	N
2310	LINE 49 MINUS 51	PT IV I53	12	321 -	332	N
2320	MULTIPLY LINE 53 BY 10% (.10)	PT IV I54	12	333 -	344	N
2330	SMALLER OF LINE 40 OR LINE 41	PT IV I55	12	345 -	356	N
2340	AMOUNT FROM LINE 49	PT IV I56	12	357 -	368	N
2350	LINE 55 MINUS LINE 56	PT IV I57	12	369 -	380	N
2360	MULTIPLY LINE 57 BY 20% (.20)	PT IV I58	12	381 -	392	N
2370	AMOUNT FROM LINE 40	PT IV I59	12	393 -	404	N
2380	ADD LINES 46, 49 AND 57	PT IV I60	12	405 -	416	N
2390	LINE 59 MINUS LINE 60	PT IV I61	12	417 -	428	N
2400	MULTIPLY LINE 61 BY 25% (.25)	PT IV I 62	12	429 -	440	N

SECTION 9.06 FORM 1041 - PAGE 4

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2410 ADD LINES 47, 52, 54, 58 AND 62	PT IV I 63	12	441 -	452	N
2420 MULTIPLY LINE 40 BY 26% (.26) IF LINE 40 IS > \$175,000 OTHERWISE MULTIPLY LINE 40 BY 28% (.28) AND SUBTRACT \$3,500	PT IV I 64	12	453 -	464	N
2430 SMALLER OF LINE 63 OR LINE 64	PT IV I 65	12	465 -	476	N
RECORD TERMINUS CHARACTER		1	477 -	477	"#"

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

► Partnerships, joint ventures, etc., must file Form 1065 or Form 1065-B.
► Attach to Form 1040 or Form 1041. ► See instructions for Schedule C (Form 1040).

OMB No. 1545-0074

2001
Attachment
Sequence No. **09**

Name of proprietor _____ Social security number (SSN) _____

A Principal business or profession, including product or service (see page C-1 of the instructions) _____

B Enter code from pages C-7 & 8

C Business name. If no separate business name, leave blank. _____

D Employer ID number (EIN), if any _____

E Business address (including suite or room no.) _____
City, town or post office, state, and ZIP code _____

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) _____

G Did you "materially participate" in the operation of this business during 2001? If "No," see page C-2 for limit on losses Yes No

H If you started or acquired this business during 2001, check here

Part I Income

1	Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-2 and check here <input type="checkbox"/>	1		
2	Returns and allowances	2		
3	Subtract line 2 from line 1	3		
4	Cost of goods sold (from line 42 on page 2)	4		
5	Gross profit. Subtract line 4 from line 3	5		
6	Other income, including Federal and state gasoline or fuel tax credit or refund (see page C-3)	6		
7	Gross income. Add lines 5 and 6	7		

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8	Advertising	8			19	Pension and profit-sharing plans	19		
9	Bad debts from sales or services (see page C-3)	9			20	Rent or lease (see page C-4):	20		
10	Car and truck expenses (see page C-3)	10			20a	a Vehicles, machinery, and equipment	20a		
11	Commissions and fees	11			20b	b Other business property	20b		
12	Depletion	12			21	21 Repairs and maintenance	21		
13	Depreciation and section 179 expense deduction (not included in Part III) (see page C-3)	13			22	22 Supplies (not included in Part III)	22		
14	Employee benefit programs (other than on line 19)	14			23	23 Taxes and licenses	23		
15	Insurance (other than health)	15			24	24 Travel, meals, and entertainment:	24		
16	Interest:				24a	a Travel	24a		
16a	a Mortgage (paid to banks, etc.)	16a				b Meals and entertainment			
16b	b Other	16b				c Enter nondeductible amount included on line 24b (see page C-5)			
17	Legal and professional services	17			24d	d Subtract line 24c from line 24b	24d		
18	Office expense	18			25	25 Utilities	25		
28	Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28			26	26 Wages (less employment credits)	26		
29	Tentative profit (loss). Subtract line 28 from line 7	29			27	27 Other expenses (from line 48 on page 2)	27		
30	Expenses for business use of your home. Attach Form 8829	30			31		31		
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on Form 1040, line 12 , and also on Schedule SE, line 2 (statutory employees, see page C-5). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.								
32	If you have a loss, check the box that describes your investment in this activity (see page C-6). • If you checked 32a, enter the loss on Form 1040, line 12 , and also on Schedule SE, line 2 (statutory employees, see page C-5). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198 .				32a	<input type="checkbox"/> All investment is at risk.	32a	<input type="checkbox"/> All investment is at risk.	
					32b	<input type="checkbox"/> Some investment is not at risk.	32b	<input type="checkbox"/> Some investment is not at risk.	

SECTION 9.08 SCHEDULE C - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0714
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"SCHbbb"
0001	SCHEDULE TYPE		6	15 -	20	"Cbbbb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER		9	26 -	34	N nnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0009	NAME OF PROPRIETOR		35	43 -	77	A/N
0010	SOCIAL SECURITY NUMBER		9	78 -	86	NO ENTRY
0020	PRINCIPAL BUSINESS	A	25	87 -	111	A/N
0030	BUSINESS CODE	B	6	112 -	117	N
0040	BUSINESS NAME	C	35	118 -	152	A/N
0050	EMPLOYER ID NUMBER	D	9	153 -	161	N
0060	BUSINESS ADDRESS	E	35	162 -	196	A/N
0070	BUSINESS CITY/STATE/ZIP CODE	E	30	197 -	226	A/N
0080	CASH ACCOUNTING METHOD	F(1)	1	227 -	227	"X" OR BLANK
0090	ACCRUAL ACCOUNTING METHOD	F(2)	1	228 -	228	"X" OR BLANK
0100	OTHER ACCOUNTING METHOD	F(3)	1	229 -	229	"X" OR BLANK
*0110	OTHER METHOD TYPE	F(3)	25	230 -	254	A/N OR "STMbnn" OR BLANK
0120	MATERIALLY PARTICIPATE DURING CURRENT TAX YEAR - YES BOX	G	1	255 -	255	"X" OR BLANK
0125	MATERIALLY PARTICIPATE DURING CURRENT TAX YEAR - NO BOX	G	1	256 -	256	"X" OR BLANK
0130	BUSINESS STARTED DURING CURRENT TAX YEAR	H	1	257 -	257	"X" OR BLANK
0140	STATUTORY EMPLOYEE EARNINGS INDICATOR	1	1	258 -	258	"X" OR BLANK
0150	GROSS RECEIPTS/SALES	1	12	259 -	270	N
@0160	GROSS RECEIPTS/SALES EXPLANATION	1	6	271 -	276	"STMbnn" OR BLANK
0170	RETURNS/ALLOWANCES	2	12	277 -	288	N

SECTION 9.08 SCHEDULE C - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0180	GROSS RECEIPTS LESS RETURNS ALLOWANCES	3	12	289 -	300	N
0190	COST OF GOODS SOLD	4	12	301 -	312	N
0200	GROSS PROFIT	5	12	313 -	324	N
0210	OTHER INCOME	6	12	325 -	336	N
0220	GROSS INCOME	7	12	337 -	348	N
0230	ADVERTISING	8	12	349 -	360	N
0240	BAD DEBTS	9	12	361 -	372	N
0250	CAR/TRUCK EXPENSES	10	12	373 -	384	N
0260	COMMISSIONS/FEEES	11	12	385 -	396	N
0270	DEPLETION	12	12	397 -	408	N
0280	DEPRECIATION/SECTION 179 EXPENSE DEDUCTION	13	12	409 -	420	N
0290	EMPLOYEE BENEFIT PROGRAMS	14	12	421 -	432	N
0300	INSURANCE	15	12	433 -	444	N
*0310	FORM 1098 EXPLANATION	16a	6	445 -	450	"STMbnn" OR BLANK
0320	MORTGAGE INTEREST	16a	12	451 -	462	N
*0330	FORM 1098 NAME/ADDRESS	16b	6	463 -	468	"STMbnn" OR BLANK
0340	OTHER INTEREST	16b	12	469 -	480	N
0350	LEGAL/PROFESSIONAL SERVICES	17	12	481 -	492	N
0360	OFFICE EXPENSE	18	12	493 -	504	N
0370	PENSION/PROFIT SHARING	19	12	505 -	516	N
0380	RENT ON MACHINERY/EQUIPMENT	20a	12	517 -	528	N
0390	RENT ON OTHER BUSINESS PROPERTY	20b	12	529 -	540	N
0400	REPAIRS/MAINTENANCE	21	12	541 -	552	N
0410	SUPPLIES	22	12	553 -	564	N
0420	TAXES/LICENSES	23	12	565 -	576	N
0430	TRAVEL	24a	12	577 -	588	N
0440	MEALS/ENTERTAINMENT	24b	12	589 -	600	N
0450	MEALS/ENTERTAINMENT LIMIT	24c	12	601 -	612	N
0460	ALLOWABLE MEALS/ENTERTAINMENT	24d	12	613 -	624	N
0470	UTILITIES	25	12	625 -	636	N

SECTION 9.08 SCHEDULE C - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
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0480	WAGES	26	12	637	-	648	N
0490	OTHER EXPENSES	27	12	649	-	660	N
0500	TOTAL EXPENSES	28	12	661	-	672	N
0510	TENTATIVE PROFIT/LOSS	29	12	673	-	684	N
0520	HOME BUSINESS EXPENSE	30	12	685	-	696	N
0530	PAL INDICATOR	31	3	697	-	699	"PAL" OR BLANK
0540	NET PROFIT/LOSS	31	12	700	-	711	N
0550	ALL INVESTMENT AT RISK	32a	1	712	-	712	"X" OR BLANK
0560	SOME INVESTMENT NOT AT RISK	32b	1	713	-	713	"X" OR BLANK
	RECORD TERMINUS CHARACTER		1	714	-	714	"#"

SECTION 9.09 SCHEDULE C - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0457
	START RECORD SENTINEL		4	5 -	8	*****
0580	RECORD ID		6	9 -	14	"SCHbbb"
0581	SCHEDULE TYPE		6	15 -	20	"Cbbbbb"
0582	PAGE NUMBER		5	21 -	25	"PG02b"
0583	EMPLOYER IDENTIFICATION NUMBER		9	26 -	34	N nnnnnnnn
0584	FILLER		1	35 -	35	BLANK
0585	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001- 9999999
0590	CLOSING INVENTORY COST METHOD	33a	1	43 -	43	"X" OR BLANK
0600	LOWER COST/MARKET	33b	1	44 -	44	"X" OR BLANK
0610	OTHER CLOSING INVENTORY METHOD	33c	1	45 -	45	"X" OR BLANK
@0620	OTHER METHOD EXPLANATION	33c	6	46 -	51	"STMbnn" OR BLANK
0630	CHANGE INVENTORY - YES BOX	34	1	52 -	52	"X" OR BLANK
0635	CHANGE INVENTORY - NO BOX	34	1	53 -	53	"X" OR BLANK
@0640	CHANGE INVENTORY EXPLANATION	34	6	54 -	59	"STMbnn" OR BLANK
0650	BEGINNING INVENTORY	35	12	60 -	71	N
@0660	BEGINNING INVENTORY EXPLANATION	35	6	72 -	77	"STMbnn" OR BLANK
0670	PURCHASES	36	12	78 -	89	N
0680	COST OF LABOR	37	12	90 -	101	N
0690	MATERIALS/SUPPLIES	38	12	102 -	113	N
0700	OTHER COSTS	39	12	114 -	125	N
0710	TOTAL COSTS	40	12	126 -	137	N
0720	ENDING INVENTORY	41	12	138 -	149	N
0730	COST OF GOODS SOLD	42	12	150 -	161	N
0740	VEHICLE SERVICE DATE	43	8	162 -	169	YYYYMMDD OR BLANK
0750	BUSINESS MILES	44a	6	170 -	175	N
0760	COMMUTING MILES	44b	6	176 -	181	N
0770	OTHER MILES	44c	6	182 -	187	N

SECTION 9.09 SCHEDULE C - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0780	ANOTHER VEHICLE - YES BOX	45	1	188	188	"X" OR BLANK
0785	ANOTHER VEHICLE - NO BOX	45	1	189	189	"X" OR BLANK
0790	OFF-DUTY HOURS - YES BOX	46	1	190	190	"X" OR BLANK
0795	OFF-DUTY HOURS - NO BOX	46	1	191	191	"X" OR BLANK
0800	EVIDENCE TO SUPPORT DEDUCTION YES BOX	47a	1	192	192	"X" OR BLANK
0805	EVIDENCE TO SUPPORT DEDUCTION NO BOX	47a	1	193	193	"X" OR BLANK
0810	EVIDENCE WRITTEN - YES BOX	47b	1	194	194	"X" OR BLANK
0815	EVIDENCE WRITTEN - NO BOX	47b	1	195	195	"X" OR BLANK
@0820	OTHER EXPENSES NOTE: IF MORE THAN (9) EXPLANATIONS FOR PART V ARE NECESSARY OR THE SPACE ALLOWED IS INSUFFICIENT USE FIELD @0820 AS A STATEMENT (STM) REFERENCE. THE STM RECORDS MUST BEGIN WITH THE FIRST EXPLANATION.	PT V	6	196	201	"STMbnn" OR BLANK
0830	OTHER EXPENSES (SPECIFY)	PT V	15	202	216	A/N
0840	OTHER EXPENSES	PT V	12	217	228	N
0850	OTHER EXPENSES (SPECIFY)	PT V	15	229	243	A/N
0860	OTHER EXPENSES	PT V	12	244	255	N
0870	OTHER EXPENSES (SPECIFY)	PT V	15	256	270	A/N
0880	OTHER EXPENSES	PT V	12	271	282	N
0890	OTHER EXPENSES (SPECIFY)	PT V	15	283	297	A/N
0900	OTHER EXPENSES	PT V	12	298	309	N
0910	OTHER EXPENSES (SPECIFY)	PT V	15	310	324	A/N
0920	OTHER EXPENSES	PT V	12	325	336	N
0930	OTHER EXPENSES (SPECIFY)	PT V	15	337	351	A/N
0940	OTHER EXPENSES	PT V	12	352	363	N
0950	OTHER EXPENSES (SPECIFY)	PT V	15	364	378	A/N
0960	OTHER EXPENSES	PT V	12	379	390	N
0970	OTHER EXPENSES (SPECIFY)	PT V	15	391	405	A/N
0980	OTHER EXPENSES	PT V	12	406	417	N
0990	OTHER EXPENSES (SPECIFY)	PT V	15	418	432	A/N
1000	OTHER EXPENSES	PT V	12	433	444	N
1010	TOTAL OTHER EXPENSES	48	12	445	456	N
	RECORD TERMINUS CHARACTER		1	457	457	"#"

**SCHEDULE C-EZ
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Name of proprietor

Net Profit From Business

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

▶ Attach to Form 1040 or 1041. ▶ See instructions on back.

OMB No. 1545-0074

2001

Attachment
Sequence No. **09A**

Social security number (SSN)

Part I General Information

**You May Use
Schedule C-EZ
Instead of
Schedule C
Only If You:**

- Had business expenses of \$2,500 or less.
- Use the cash method of accounting.
- Did not have an inventory at any time during the year.
- Did not have a net loss from your business.
- Had only one business as a sole proprietor.

And You:

- Had no employees during the year.
- Are not required to file **Form 4562**, Depreciation and Amortization, for this business. See the instructions for Schedule C, line 13, on page C-3 to find out if you must file.
- Do not deduct expenses for business use of your home.
- Do not have prior year unallowed passive activity losses from this business.

<p>A Principal business or profession, including product or service</p>	<p>B Enter code from pages C-7 & 8</p>
<p>C Business name. If no separate business name, leave blank.</p>	<p>D Employer ID number (EIN), if any</p>
<p>E Business address (including suite or room no.). Address not required if same as on Form 1040, page 1.</p> <p>City, town or post office, state, and ZIP code</p>	

Part II Figure Your Net Profit

<p>1 Gross receipts. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see Statutory Employees in the instructions for Schedule C, line 1, on page C-2 and check here <input type="checkbox"/></p>	1	
<p>2 Total expenses. If more than \$2,500, you must use Schedule C. See instructions</p>	2	
<p>3 Net profit. Subtract line 2 from line 1. If less than zero, you must use Schedule C. Enter on Form 1040, line 12, and also on Schedule SE, line 2. (Statutory employees do not report this amount on Schedule SE, line 2. Estates and trusts, enter on Form 1041, line 3.)</p>	3	

Part III Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 2.

4 When did you place your vehicle in service for business purposes? (month, day, year) ▶/...../.....

5 Of the total number of miles you drove your vehicle during 2001, enter the number of miles you used your vehicle for:

a Business **b** Commuting **c** Other

6 Do you (or your spouse) have another vehicle available for personal use? **Yes** **No**

7 Was your vehicle available for personal use during off-duty hours? **Yes** **No**

8a Do you have evidence to support your deduction? **Yes** **No**

b If "Yes," is the evidence written? **Yes** **No**

SECTION 9.11 SCHEDULE CEZ - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0304
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"SCHbbb"
0001	SCHEDULE TYPE		6	15 -	20	"C-EZbb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001- 9999999
0009	NAME OF PROPRIETOR		35	43 -	77	A/N
0010	SOCIAL SECURITY NUMBER		9	78 -	86	NO ENTRY
0020	PRINCIPAL BUSINESS	A	25	87 -	111	A/N
0030	BUSINESS CODE	B	6	112 -	117	N
0040	BUSINESS NAME	C	35	118 -	152	A/N
0050	EMPLOYER ID NUMBER	D	9	153 -	161	N
0060	BUSINESS ADDRESS	E	35	162 -	196	A/N
0070	BUSINESS CITY/STATE/ZIP CODE	E	30	197 -	226	A/N
0080	STATUTORY EMPLOYEE EARNINGS INDICATOR	1	1	227 -	227	"X" OR BLANK
0090	GROSS RECEIPTS	1	12	228 -	239	N
@0100	GROSS RECEIPTS EXPLANATION	1	6	240 -	245	"STMbnn" OR BLANK
0110	TOTAL EXPENSES	2	12	246 -	257	N
0120	NET PROFIT	3	12	258 -	269	N
0130	VEHICLE SERVICE DATE	4	8	270 -	277	YYYYMMDD OR BLANK
0140	BUSINESS MILES	5a	6	278 -	283	N
0150	COMMUTING MILES	5b	6	284 -	289	N
0160	OTHER MILES	5c	6	290 -	295	N
0170	ANOTHER VEHICLE - YES BOX	6	1	296 -	296	"X" OR BLANK
0175	ANOTHER VEHICLE - NO BOX	6	1	297 -	297	"X" OR BLANK
0180	OFF-DUTY HOURS - YES BOX	7	1	298 -	298	"X" OR BLANK
0185	OFF-DUTY HOURS - NO BOX	7	1	299 -	299	"X" OR BLANK

SECTION 9.11 SCHEDULE CEZ - PAGE 1

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0190 EVIDENCE TO SUPPORT DEDUCTION YES BOX	8a	1	300	300	"X" OR BLANK
0195 EVIDENCE TO SUPPORT DEDUCTION NO BOX	8a	1	301	301	"X" OR BLANK
0200 EVIDENCE WRITTEN - YES BOX	8b	1	302	302	"X" OR BLANK
0205 EVIDENCE WRITTEN - NO BOX	8b	1	303	303	"X" OR BLANK
RECORD TERMINUS CHARACTER		1	304	304	"#"

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041 (or Form 5227). See the separate instructions for Form 1041 (or Form 5227).

OMB No. 1545-0092

2001

Name of estate or trust

Employer identification number

Note: Form 5227 filers need to complete **only** Parts I and II.

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

(a) Description of property (Example, 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 27)	(f) Gain or (Loss) (col. (d) less col. (e))	
1						
2	Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . .				2	
3	Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				3	
4	Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2000 Capital Loss Carryover Worksheet				4	()
5	Net short-term gain or (loss). Combine lines 1 through 4 in column (f). Enter here and on line 14 below ▶				5	

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

(a) Description of property (Example, 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 27)	(f) Gain or (Loss) (col. (d) less col. (e))	(g) 28% Rate Gain or (Loss) *(see instr. below)
6						
7	Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . .				7	
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . .				8	
9	Capital gain distributions				9	
10	Gain from Form 4797, Part I				10	
11	Long-term capital loss carryover. Enter in both columns (f) and (g) the amount, if any, from line 14, of the 2000 Capital Loss Carryover Worksheet				11	() ()
12	Combine lines 6 through 11 in column (g)				12	
13	Net long-term gain or (loss). Combine lines 6 through 11 in column (f). Enter here and on line 15 below ▶				13	

*28% rate gain or loss includes all "collectibles gains and losses" (as defined on page 28 of the instructions) and up to 50% of the eligible gain on qualified small business stock (see page 26 of the instructions).

Part III Summary of Parts I and II

	(1) Beneficiaries' (see page 28)	(2) Estate's or trust's	(3) Total
14 Net short-term gain or (loss) (from line 5 above)	14		
15 Net long-term gain or (loss):			
a 28% rate gain or (loss) (from line 12 above)	15a		
b Unrecaptured section 1250 gain (see line 17 of the worksheet on page 29)	15b		
c Total for year (from line 13 above)	15c		
16 Total net gain or (loss). Combine lines 14 and 15c ▶	16		

Note: If line 16, column (3), is a net gain, enter the gain on Form 1041, line 4. If lines 15c and 16, column (2), are net gains, go to Part V, and do not complete Part IV. If line 16, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

17 Enter here and enter as a (loss) on Form 1041, line 4, the **smaller** of:
 a The loss on line 16, column (3) or
 b \$3,000 **17** ()

*If the loss on line 16, column (3), is more than \$3,000, or if Form 1041, page 1, line 22, is a loss, complete the **Capital Loss Carryover Worksheet** on page 30 of the instructions to determine your capital loss carryover.*

Part V Tax Computation Using Maximum Capital Gains Rates (Complete this part **only** if both lines 15c and 16 in column (2) are gains, and Form 1041, line 22 is more than zero.)

Note: *If line 15a, column (2) or line 15b, column (2) is more than zero, complete the worksheet on page 32 to figure the amount to enter on lines 20, 27, and 38 below and skip all other lines below.*

18	Enter taxable income from Form 1041, line 22	18			
19	Enter the smaller of line 15c or 16 in column (2)	19			
20	If the estate or trust is claiming investment interest expense on Form 4952, enter the amount from line 4e; otherwise, enter -0-	20			
21	Subtract line 20 from line 19. If zero or less, enter -0-	21			
22	Subtract line 21 from line 18. If zero or less, enter -0-	22			
23	Figure the tax on the amount on line 22. Use the 2001 Tax Rate Schedule	23			
24	Enter the smaller of the amount on line 18 or \$1,800	24			
If line 24 is greater than line 22, go to line 25. Otherwise, skip lines 25 through 31 and go to line 32.					
25	Enter the amount from line 22	25			
26	Subtract line 25 from line 24. If zero or less, enter -0- and go to line 32	26			
27	Enter the estate's or trust's portion of qualified 5-year gain, if any, from line 5c of the worksheet on page 31	27			
28	Enter the smaller of line 26 or line 27	28			
29	Multiply line 28 by 8% (.08)	29			
30	Subtract line 28 from line 26	30			
31	Multiply line 30 by 10% (.10)	31			
If the amounts on lines 21 and 26 are the same, skip lines 32 through 35 and go to line 36.					
32	Enter the smaller of line 18 or line 21	32			
33	Enter the amount, if any, from line 26	33			
34	Subtract line 33 from line 32	34			
35	Multiply line 34 by 20% (.20)	35			
36	Add lines 23, 29, 31, and 35	36			
37	Figure the tax on the amount on line 18. Use the 2001 Tax Rate Schedule	37			
38	Tax on all taxable income (including capital gains). Enter the smaller of line 36 or line 37 here and on line 1a of Schedule G, Form 1041	38			



SECTION 9.13 SCHEDULE D - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 - 4	1357	
	START RECORD SENTINEL		4	5 - 8	*****	
0000	RECORD ID		6	9 - 14	"SCHbbb"	
0001	SCHEDULE TYPE		6	15 - 20	"Dbbbbb"	
0002	PAGE NUMBER		5	21 - 25	"PG01b"	
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 - 34	N nnnnnnnnn	
0004	FILLER		1	35 - 35	BLANK	
0005	SCHEDULE OCCURRENCE NUMBER		7	36 - 42	N 0000001	
*0020	SHORT TERM/LONG TERM CAPITAL GAIN AND LOSSES	PT I PT II	6	43 - 48	"STMb97" OR BLANK	
<p>NOTE: IF MORE THAN SIX (6) SHORT TERM AND/OR SIX (6) LONG TERM PROPERTIES NEED TO BE DESCRIBED OR ADDITIONAL INFORMATION NEEDS TO BE PROVIDED, USE FIELD #020 AS A STATEMENT (STMb97) REFERENCE FOR PART I AND II. THE STATEMENT RECORD MUST BEGIN WITH THE FIRST PROPERTY.</p>						
0030	TRANSACTION 1 DESCRIPTION OF PROPERTY	PT I 1(a)	20	49 - 68	A/N	
0040	TRANSACTION 1 DATE ACQUIRED	PT I 1(b)	8	69 - 76	FORMAT: YYYYMMDD OR "A" OR BLANK	|
0050	TRANSACTION 1 DATE SOLD	PT I 1(c)	8	77 - 84	FORMAT: YYYYMMDD OR BLANK	|
0060	TRANSACTION 1 GROSS SALES PRICE	PT I 1(d)	12	85 - 96	N	|
0070	TRANSACTION 1 COST OR OTHER BASIS	PT I 1(e)	12	97 - 108	N	
0080	TRANSACTION 1 GAIN OR LOSS ENTIRE YEAR	PT I 1(f)	12	109 - 120	N	
0090	TRANSACTION 2 DESCRIPTION OF PROPERTY	PT I 1(a)	20	121 - 140	A/N	
0100	TRANSACTION 2 DATE ACQUIRED	PT I 1(b)	8	141 - 148	FORMAT: YYYYMMDD OR "A" OR BLANK	|
0110	TRANSACTION 2 DATE SOLD	PT I 1(c)	8	149 - 156	FORMAT: YYYYMMDD OR BLANK	|
0120	TRANSACTION 2 GROSS SALES PRICE	PT I 1(d)	12	157 - 168	N	|
0130	TRANSACTION 2 COST OR OTHER BASIS	PT I 1(e)	12	169 - 180	N	
0140	TRANSACTION 2 GAIN OR LOSS ENTIRE YEAR	PT I 1(f)	12	181 - 192	N	

SECTION 9.13 SCHEDULE D - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0150	TRANSACTION 3 DESCRIPTION OF PROPERTY	PT I 1(a)	20	193 -	212	A/N
0160	TRANSACTION 3 DATE ACQUIRED	PT I 1(b)	8	213 -	220	FORMAT: YYYYMMDD OR "A" OR BLANK
0170	TRANSACTION 3 DATE SOLD	PT I 1(c)	8	221 -	228	FORMAT: YYYYMMDD OR BLANK
0180	TRANSACTION 3 GROSS SALES PRICE	PT I 1(d)	12	229 -	240	N
0190	TRANSACTION 3 COST OR OTHER BASIS	PT I 1(e)	12	241 -	252	N
0200	TRANSACTION 3 GAIN AND LOSS ENTIRE YEAR	PT I 1(f)	12	253 -	264	N
0210	TRANSACTION 4 DESCRIPTION OF PROPERTY	PT I 1(a)	20	265 -	284	A/N
0220	TRANSACTION 4 DATE ACQUIRED	PT I 1(b)	8	285 -	292	FORMAT: YYYYMMDD OR "A" OR BLANK
0230	TRANSACTION 4 DATE SOLD	PT I 1(c)	8	293 -	300	FORMAT: YYYYMMDD OR BLANK
0240	TRANSACTION 4 GROSS SALES PRICE	PT I 1(d)	12	301 -	312	N
0250	TRANSACTION 4 COST OR OTHER BASIS	PT I 1(e)	12	313 -	324	N
0260	TRANSACTION 4 GAIN OR LOSS ENTIRE YEAR	PT I 1(f)	12	325 -	336	N
0270	TRANSACTION 5 DESCRIPTION OF PROPERTY	PT I 1(a)	20	337 -	356	A/N
0280	TRANSACTION 5 DATE ACQUIRED	PT I 1(b)	8	357 -	364	FORMAT: YYYYMMDD OR "A" OR BLANK
0290	TRANSACTION 5 DATE SOLD	PT I 1(c)	8	365 -	372	FORMAT: YYYYMMDD OR BLANK
0300	TRANSACTION 5 GROSS SALES PRICE	PT I 1(d)	12	373 -	384	N
0310	TRANSACTION 5 COST OR OTHER BASIS	PT I 1(e)	12	385 -	396	N
0320	TRANSACTION 5 GAIN OR LOSS ENTIRE YEAR	PT I 1(f)	12	397 -	408	N
0330	TRANSACTION 6 DESCRIPTION OF PROPERTY	PT I 1(a)	20	409 -	428	A/N
0340	TRANSACTION 6 DATE ACQUIRED	PT I 1(b)	8	429 -	436	FORMAT: YYYYMMDD OR "A" OR BLANK
0350	TRANSACTION 6 DATE SOLD	PT I 1(c)	8	437 -	444	FORMAT: YYYYMMDD OR BLANK

SECTION 9.13 SCHEDULE D - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0360	TRANSACTION 6 GROSS SALES PRICE	PT I 1(d)	12	445 - 456	N	
0370	TRANSACTION 6 COST OR OTHER BASIS	PT I 1(e)	12	457 - 468	N	
0380	TRANSACTION 6 GAIN OR LOSS ENTIRE YEAR	PT I 1(f)	12	469 - 480	N	
0750	SHORT-TERM CAPITAL GAIN OR LOSS ENTIRE YEAR	PT I 2(f)	12	481 - 492	N	
0760	SHORT-TERM GAIN OR LOSS FROM PARTNERSHIPS, S CORP. AND OTHER FIDUCIARIES ENTIRE YEAR	PT I 3(f)	12	493 - 504	N	
0780	SHORT-TERM CAPITAL LOSS CARRYOVER ENTIRE YEAR	PT I 4(f)	12	505 - 516	N ***	
0790	NET SHORT-TERM GAIN OR LOSS ENTIRE YEAR	PT I 5(f)	12	517 - 528	N	
0800	TRANSACTION 1 DESCRIPTION OF PROPERTY	PT II 6(a)	20	529 - 548	A/N	
0810	TRANSACTION 1 DATE ACQUIRED	PT II 6(b)	8	549 - 556	FORMAT: YYYYMMDD OR "A" OR BLANK	
0820	TRANSACTION 1 DATE SOLD	PT II 6(c)	8	557 - 564	FORMAT: YYYYMMDD OR BLANK	
0830	TRANSACTION 1 GROSS SALES PRICE	PT II 6(d)	12	565 - 576	N	
0840	TRANSACTION 1 COST OR OTHER BASIS	PT II 6(e)	12	577 - 588	N	
0850	TRANSACTION 1 GAIN OR LOSS ENTIRE YEAR	PT II 6(f)	12	589 - 600	N	
0855	TRANSACTION 1 28% RATE GAIN OR LOSS	PT II 6(g)	12	601 - 612	N	
0860	TRANSACTION 2 DESCRIPTION OF PROPERTY	PT II 6(a)	20	613 - 632	A/N	
0870	TRANSACTION 2 DATE ACQUIRED	PT II 6(b)	8	633 - 640	FORMAT: YYYYMMDD OR "A" OR BLANK	
0880	TRANSACTION 2 DATE SOLD	PT II 6(c)	8	641 - 648	FORMAT: YYYYMMDD OR BLANK	
0890	TRANSACTION 2 GROSS SALES PRICE	PT II 6(d)	12	649 - 660	N	
0900	TRANSACTION 2 COST OR OTHER BASIS	PT II 6(e)	12	661 - 672	N	
0910	TRANSACTION 2 GAIN OR LOSS ENTIRE YEAR	PT II 6(f)	12	673 - 684	N	

SECTION 9.13 SCHEDULE D - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0915	TRANSACTION 2 28% RATE GAIN OR LOSS	PT II 6(g)	12	685 -	696	N
0920	TRANSACTION 3 DESCRIPTION OF PROPERTY	PT II 6(a)	20	697 -	716	A/N
0930	TRANSACTION 3 DATE ACQUIRED	PT II 6(b)	8	717 -	724	FORMAT: YYYYMMDD OR "A" OR BLANK
0940	TRANSACTION 3 DATE SOLD	PT II 6(c)	8	725 -	732	FORMAT: YYYYMMDD OR BLANK
0950	TRANSACTION 3 GROSS SALES PRICE	PT II 6(d)	12	733 -	744	N
0960	TRANSACTION 3 COST OR OTHER BASIS	PT II 6(e)	12	745 -	756	N
0970	TRANSACTION 3 GAIN OR LOSS ENTIRE YEAR	PT II 6(f)	12	757 -	768	N
0975	TRANSACTION 3 28% RATE GAIN OR LOSS	PT II 6(g)	12	769 -	780	N
0980	TRANSACTION 4 DESCRIPTION OF PROPERTY	PT II 6(a)	20	781 -	800	A/N
0990	TRANSACTION 4 DATE ACQUIRED	PT II 6(b)	8	801 -	808	FORMAT: YYYYMMDD OR "A" OR BLANK
1000	TRANSACTION 4 DATE SOLD	PT II 6(c)	8	809 -	816	FORMAT: YYYYMMDD OR BLANK
1010	TRANSACTION 4 GROSS SALES PRICE	PT II 6(d)	12	817 -	828	N
1020	TRANSACTION 4 COST OR OTHER BASIS	PT II 6(e)	12	829 -	840	N
1030	TRANSACTION 4 GAIN OR LOSS ENTIRE YEAR	PT II 6(f)	12	841 -	852	N
1035	TRANSACTION 4 28% RATE GAIN OR LOSS	PT II 6(g)	12	853 -	864	N
1040	TRANSACTION 5 DESCRIPTION OF PROPERTY	PT II 6(a)	20	865 -	884	A/N
1050	TRANSACTION 5 DATE ACQUIRED	PT II 6(b)	8	885 -	892	FORMAT: YYYYMMDD OR "A" OR BLANK
1060	TRANSACTION 5 DATE SOLD	PT II 6(c)	8	893 -	900	FORMAT: YYYYMMDD OR BLANK
1070	TRANSACTION 5 GROSS SALES PRICE	PT II 6(d)	12	901 -	912	N
1080	TRANSACTION 5 COST OR OTHER BASIS	PT II 6(e)	12	913 -	924	N
1090	TRANSACTION 5 GAIN OR LOSS ENTIRE YEAR	PT II 6(f)	12	925 -	936	N

SECTION 9.13 SCHEDULE D - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
----	-----	----	-----	----	----	-----
1095	TRANSACTION 5 28% RATE GAIN OR LOSS	PT II 6(g)	12	937 -	948	N
1100	TRANSACTION 6 DESCRIPTION OF PROPERTY	PT II 6(a)	20	949 -	968	A/N
1110	TRANSACTION 6 DATE ACQUIRED	PT II 6(b)	8	969 -	976	FORMAT: YYYYMMDD OR "A" OR BLANK
1120	TRANSACTION 6 DATE SOLD	PT II 6(c)	8	977 -	984	FORMAT: YYYYMMDD OR BLANK
1130	TRANSACTION 6 GROSS SALES PRICE	PT II 6(d)	12	985 -	996	N
1140	TRANSACTION 6 COST OR OTHER BASIS	PT II 6(e)	12	997 -	1008	N
1150	TRANSACTION 6 GAIN OR LOSS ENTIRE YEAR	PT II 6(f)	12	1009 -	1020	N
1155	TRANSACTION 6 28% RATE GAIN OR LOSS	PT II 6(g)	12	1021 -	1032	N
1580	LONG TERM CAPITAL GAIN OR LOSS ENTIRE YEAR	PT II 7(f)	12	1033 -	1044	N
1585	LONG TERM 28% RATE CAPITAL GAIN OR LOSS	PT II 7(g)	12	1045 -	1056	N
1590	LONG TERM CAPITAL GAIN OR LOSS FROM PARTNERSHIPS, S CORP. AND OTHER FIDUCIARIES ENTIRE YEAR	PT II 8(f)	12	1057 -	1068	N
1595	LONG TERM 28% GAIN OR LOSS FROM PARTNERSHIPS, ETC.	PT II 8(g)	12	1069 -	1080	N
1600	CAPITAL GAIN DISTRIBUTION ENTIRE YEAR	PT II 9(f)	12	1081 -	1092	N ***
1605	CAPITAL GAIN DISTRIBUTIONS 28% RATE GAIN	PT II 9(g)	12	1093 -	1104	N ***
1610	GAIN FROM FORM 4797 ENTIRE YEAR	PT II 10(f)	12	1105 -	1116	N ***
1615	GAIN FROM FORM 4797 28% RATE GAIN	PT II 10(g)	12	1117 -	1128	N ***
1620	LONG TERM CAPITAL LOSS CARRYOVER (SCHEDULE D) ENTIRE YEAR	PT II 11(f)	12	1129 -	1140	N ***
1625	LONG TERM CAPITAL LOSS CARRYOVER (SCHEDULE D) 28% RATE GAIN	PT II 11(g)	12	1141 -	1152	N ***
1630	NET GAIN OR LOSS 28% RATE COMBINE LINES 6 - 11	PT II 12(g)	12	1153 -	1164	N
1640	NET LONG TERM GAIN OR LOSS ENTIRE YEAR	PT II 13(f)	12	1165 -	1176	N

SECTION 9.13 SCHEDULE D - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1650	NET SHORT TERM GAIN OR LOSS (BENEFICIARIES) ENTIRE YEAR	PT III 14(1)	12	1177	- 1188	N
1660	NET SHORT TERM GAIN OR LOSS (ESTATES OR TRUSTS) ENTIRE YEAR	PT III 14(2)	12	1189	- 1200	N
1670	NET SHORT TERM GAIN OR LOSS (TOTAL) ENTIRE YEAR	PT III 14(3)	12	1201	- 1212	N
1671	NET LONG TERM GAIN OR LOSS (BENEFICIARIES) 28% RATE	PT III 15a(1)	12	1213	- 1224	N
1672	NET LONG TERM GAIN OR LOSS (ESTATES OR TRUSTS) 28% RATE	PT III 15a(2)	12	1225	- 1236	N
1673	NET LONG TERM GAIN OR LOSS (TOTAL) 28% RATE	PT III 156a(3)	12	1237	- 1248	N
1677	NET LONG TERM GAIN (BENEFICIARIES) UNRECAPTURED	PT III 15b(1)	12	1249	- 1260	N
1678	NET LONG TERM GAIN (ESTATES OR TRUSTS) UNRECAPTURED	PT III 15b(2)	12	1261	- 1272	N
1679	NET LONG TERM GAIN (TOTAL) UNRECAPTURED	PT III 15b(3)	12	1273	- 1284	N
1680	NET LONG TERM GAIN OR LOSS (BENEFICIARIES)	PT III 15c(1)	12	1285	- 1296	N
1690	NET LONG TERM GAIN OR LOSS (ESTATES OR TRUSTS)	PT III 15c(2)	12	1297	- 1308	N
1700	NET LONG-TERM GAIN OR LOSS (TOTAL)	PT III 15c(3)	12	1309	- 1320	N
1710	TOTAL NET GAIN OR LOSS (BENEFICIARIES)	PT III 16(1)	12	1321	- 1332	N
1720	TOTAL NET GAIN OR LOSS (ESTATES OR TRUSTS)	PT III 16(2)	12	1333	- 1344	N
1730	TOTAL NET GAIN OR LOSS (TOTAL)	PT III 16(3)	12	1345	- 1356	N
	RECORD TERMINUS CHARACTER		1	1357	- 1357	"#"

SECTION 9.14 SCHEDULE D - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0307
	START RECORD SENTINEL		4	5 -	8	*****
1750	RECORD ID		6	9 -	14	"SCHbbb"
1751	SCHEDULE TYPE		6	15 -	20	"Dbbbbb"
1752	PAGE NUMBER		5	21 -	25	"PG02b"
1753	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
1754	FILLER		1	35 -	35	BLANK
1755	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001
1760	NET LOSS FROM LINE 16 OR \$3,000	PT IV 17	12	43 -	54	N ***
1770	TAXABLE INCOME FROM FORM 1041, LINE 22	PT V 18	12	55 -	66	N
1780	SMALLER OF LINE 15c OR 16 COLUMN (2)	PT V 19	12	67 -	78	N
1790	AMOUNT FROM FORM 4952, LINE 4e	PT V 20	12	79 -	90	N
1800	LINE 19 MINUS 20	PT V 21	12	91 -	102	N
1810	LINE 18 MINUS LINE 21	PT V 22	12	103 -	114	N
1820	TAX ON AMOUNT ON LINE 22 FROM 2001 TAX RATE SCHEDULE	PT V 23	12	115 -	126	N
1830	SMALLER OF LINE 18 OR \$1800	PT V 24	12	127 -	138	N
1840	AMOUNT FROM LINE 22	PT V 25	12	139 -	150	N
1850	LINE 24 MINUS LINE 25	PT V 26	12	151 -	162	N
1860	QUALIFIED 5-YEAR GAIN	PT V 27	12	163 -	174	N
1870	SMALLER OF LINE 26 OR LINE 27	PT V 28	12	175 -	186	N
1880	MULTIPLY LINE 28 BY 8% (.08)	PT V 29	12	187 -	198	N
1890	LINE 26 MINUS LINE 28	PT V 30	12	199 -	210	N
1900	MULTIPLY LINE 30 BY 10% (.10)	PT V 31	12	211 -	222	N

SECTION 9.14 SCHEDULE D - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
1910	SMALLER OF LINE 18 OR LINE 21	PT V 32	12	223	-	234	N
1920	AMOUNT FROM LINE 26	PT V 33	12	235	-	246	N
1930	LINE 32 MINUS LINE 33	PT V 34	12	247	-	258	N
1940	MULTIPLY LINE 34 BY 20% (.20)	PT V 35	12	259	-	270	N
1950	ADD LINES 23, 29, 31 AND 35	PT V 36	12	271	-	282	N
1960	TAX ON AMOUNT ON LINE 36 FROM 2001 TAX RATE SCHEDULE	PT V 37	12	283	-	294	N
1970	TAX ON ALL TAXABLE INCOME, SMALLER OF LINE 36 OR LINE 37	PT V 38	12	295	-	306	N
	RECORD TERMINUS CHARACTER		1	307	-	307	"#"

**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.)

OMB No. 1545-0074

2001

Attachment
Sequence No. **13**

▶ Attach to Form 1040 or Form 1041. ▶ See Instructions for Schedule E (Form 1040).

Name(s) shown on return

Your social security number

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-1). 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 during the tax year for personal purposes for more than the greater of: • 14 days or • 10% of the total days rented at fair rental value? (See page E-1.)	Yes	No
A		A	
B		B	
C		C	

Income:	Properties			Totals (Add columns A, B, and C.)
	A	B	C	
3 Rents received	3			3
4 Royalties received	4			4
Expenses:				
5 Advertising	5			
6 Auto and travel (see page E-2)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see page E-2)	12			12
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			
17 Utilities	17			
18 Other (list) ▶	18			
.....				
.....				
19 Add lines 5 through 18	19			19
20 Depreciation expense or depletion (see page E-3)	20			20
21 Total expenses. Add lines 19 and 20	21			
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-3 to find out if you must file Form 6198.	22			
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	23	() () (
24 Income. Add positive amounts shown on line 22. Do not include any losses	24			
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25	()	
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	26			

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

Your social security number

Note. If you report amounts from farming or fishing on Schedule E, you must enter your gross income from those 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) on line 27 to describe your investment in the activity. See page E-5. If you check column (f), you must attach Form 6198.

Table with 5 columns: (a) Name, (b) Enter P for partnership; S for S corporation, (c) Check if foreign partnership, (d) Employer identification number, and Investment At Risk? (e) All is at risk, (f) Some is not at risk. Rows A through E.

Table with 5 columns: (g) Passive loss allowed, (h) Passive income from Schedule K-1, (i) Nonpassive loss from Schedule K-1, (j) Section 179 expense deduction from Form 4562, and (k) Nonpassive income from Schedule K-1. Includes rows for Totals and summary lines 29, 30, 31.

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name and (b) Employer identification number. Rows A and B.

Table with 4 columns: (c) Passive deduction or loss allowed, (d) Passive income from Schedule K-1, (e) Deduction or loss from Schedule K-1, and (f) Other income from Schedule K-1. Includes rows for Totals and summary lines 34, 35, 36.

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

Table with 5 columns: (a) Name, (b) Employer identification number, (c) Excess inclusion from Schedules Q, line 2c, (d) Taxable income (net loss) from Schedules Q, line 1b, and (e) Income from Schedules Q, line 3b. Includes summary line 38.

Part V Summary

Summary table with 2 columns: Description and Amount. Includes lines 39, 40, 41, and 42.



SECTION 9.16 SCHEDULE E - PAGE 1

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	1398
		4	5 -	8	*****
0000		6	9 -	14	"SCHbbb"
0001		6	15 -	20	"Ebbbb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnn
0004		1	35 -	35	BLANK
0005		7	36 -	42	N 0000001 - 9999999
0010	A-1	37	43 -	79	A/N
0020	A-1	37	80 -	116	A/N
0030	B-1	37	117 -	153	A/N
0040	B-1	37	154 -	190	A/N
0050	C-1	37	191 -	227	A/N
0060	C-1	37	228 -	264	A/N
0070	A-2	1	265 -	265	"X" OR BLANK
0075	A-2	1	266 -	266	"X" OR BLANK
0080	B-2	1	267 -	267	"X" OR BLANK
0085	B-2	1	268 -	268	"X" OR BLANK
0090	C-2	1	269 -	269	"X" OR BLANK
0095	C-2	1	270 -	270	"X" OR BLANK
0100	A-3	12	271 -	282	N
0110	B-3	12	283 -	294	N
0120	C-3	12	295 -	306	N
0130	3	12	307 -	318	N
0140	A-4	12	319 -	330	N
0150	B-4	12	331 -	342	N
0160	C-4	12	343 -	354	N
0170	4	12	355 -	366	N
0180	A-5	12	367 -	378	N
0190	B-5	12	379 -	390	N

SECTION 9.16 SCHEDULE E - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
----	-----	----	-----	----	----	-----
0200	ADVERTISING C	C-5	12	391 -	402	N
0210	AUTO-TRAVEL A	A-6	12	403 -	414	N
0220	AUTO-TRAVEL B	B-6	12	415 -	426	N
0230	AUTO-TRAVEL C	C-6	12	427 -	438	N
0240	CLEANING-MAINT A	A-7	12	439 -	450	N
0250	CLEANING-MAINT B	B-7	12	451 -	462	N
0260	CLEANING-MAINT C	C-7	12	463 -	474	N
0270	COMMISSIONS A	A-8	12	475 -	486	N
0280	COMMISSIONS B	B-8	12	487 -	498	N
0290	COMMISSIONS C	C-8	12	499 -	510	N
0300	INSURANCE A	A-9	12	511 -	522	N
0310	INSURANCE B	B-9	12	523 -	534	N
0320	INSURANCE C	C-9	12	535 -	546	N
0330	LEGAL-PRO FEES A	A-10	12	547 -	558	N
0340	LEGAL-PRO FEES B	B-10	12	559 -	570	N
0350	LEGAL-PRO FEES C	C-10	12	571 -	582	N
0352	MANAGEMENT FEES A	A-11	12	583 -	594	N
0354	MANAGEMENT FEES B	B-11	12	595 -	606	N
0356	MANAGEMENT FEES C	C-11	12	607 -	618	N
*0360	MORTGAGE INTEREST PAID TO BANKERS	12	6	619 -	624	"STMbnn" OR BLANK
0370	MORTGAGE INTEREST A	A-12	12	625 -	636	N
0380	MORTGAGE INTEREST B	B-12	12	637 -	648	N
0390	MORTGAGE INTEREST C	C-12	12	649 -	660	N
0400	TOTAL MORT INTEREST	12	12	661 -	672	N
0410	OTHER INTEREST A	A-13	12	673 -	684	N
0420	OTHER INTEREST B	B-13	12	685 -	696	N
0430	OTHER INTEREST C	C-13	12	697 -	708	N
0440	REPAIRS A	A-14	12	709 -	720	N
0450	REPAIRS B	B-14	12	721 -	732	N
0460	REPAIRS C	C-14	12	733 -	744	N
0470	SUPPLIES A	A-15	12	745 -	756	N

SECTION 9.16 SCHEDULE E - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0480	SUPPLIES B	B-15	12	757 - 768	N	
0490	SUPPLIES C	C-15	12	769 - 780	N	
0500	TAXES A	A-16	12	781 - 792	N	
0510	TAXES B	B-16	12	793 - 804	N	
0520	TAXES C	C-16	12	805 - 816	N	
0530	UTILITIES A	A-17	12	817 - 828	N	
0540	UTILITIES B	B-17	12	829 - 840	N	
0550	UTILITIES C	C-17	12	841 - 852	N	
*0590	OTHER-DESCRIPTION 1	18	25	853 - 877	A/N OR "STMbnn"	
+0600	OTHER AMOUNT A	A-18	12	878 - 889	N	
+0610	OTHER AMOUNT B	B-18	12	890 - 901	N	
+0620	OTHER AMOUNT C	C-18	12	902 - 913	N	
0630	OTHER-DESCRIPTION 2	18	25	914 - 938	A/N	
0640	OTHER AMOUNT A	A-18	12	939 - 950	N	
0650	OTHER AMOUNT B	B-18	12	951 - 962	N	
0660	OTHER AMOUNT C	C-18	12	963 - 974	N	
0670	OTHER-DESCRIPTION 3	18	25	975 - 999	A/N	
0680	OTHER AMOUNT A	A-18	12	1000 - 1011	N	
0690	OTHER AMOUNT B	B-18	12	1012 - 1023	N	
0700	OTHER AMOUNT C	C-18	12	1024 - 1035	N	
0710	OTHER-DESCRIPTION 4	A-18	25	1036 - 1060	A/N	
0720	OTHER AMOUNT A	A-18	12	1061 - 1072	N	
0730	OTHER AMOUNT B	B-18	12	1073 - 1084	N	
0740	OTHER AMOUNT C	C-18	12	1085 - 1096	N	
0750	OTHER-DESCRIPTION 5	18	25	1097 - 1121	NO ENTRY	
0760	OTHER AMOUNT A	A-18	12	1122 - 1133	NO ENTRY	
0770	OTHER AMOUNT B	B-18	12	1134 - 1145	NO ENTRY	
0780	OTHER AMOUNT C	C-18	12	1146 - 1157	NO ENTRY	
0790	TOT EXPENSES LESS DEPREC A	A-19	12	1158 - 1169	N	
0800	TOT EXPENSES LESS DEPREC B	B-19	12	1170 - 1181	N	

SECTION 9.16 SCHEDULE E - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
----	-----	----	-----	-----	-----	-----
0810	TOT EXPENSES LESS DEPREC C	C-19	12	1182	- 1193	N
0820	TOT EXPENSES LESS DEPREC	19	12	1194	- 1205	N
0830	DEPREC EXPENSE A	A-20	12	1206	- 1217	N
0840	DEPREC EXPENSE B	B-20	12	1218	- 1229	N
0850	DEPREC EXPENSE C	C-20	12	1230	- 1241	N
0860	TOTAL DEPRECIATION	20	12	1242	- 1253	N
0870	TOTAL EXPENSES A	A-21	12	1254	- 1265	N
0880	TOTAL EXPENSES B	B-21	12	1266	- 1277	N
0890	TOTAL EXPENSES C	C-21	12	1278	- 1289	N
0900	NET RENTAL INCOME A	A-22	12	1290	- 1301	N
0910	NET RENTAL INCOME B	B-22	12	1302	- 1313	N
0920	NET RENTAL INCOME C	C-22	12	1314	- 1325	N
0930	DEDUCTIBLE RENTAL REAL ESTATE (LOSS) A	A-23	12	1326	- 1337	N ***
0940	DEDUCTIBLE RENTAL REAL ESTATE (LOSS) B	B-23	12	1338	- 1349	N ***
0950	DEDUCTIBLE RENTAL REAL ESTATE (LOSS) C	C-23	12	1350	- 1361	N ***
0960	TOTAL INCOME	24	12	1362	- 1373	N
0970	TOTAL LOSSES	25	12	1374	- 1385	N ***
0980	TOTAL INCOME OR LOSSES	26	12	1386	- 1397	N
	RECORD TERMINUS CHARACTER		1	1398	- 1398	"#"

SECTION 9.17 SCHEDULE E - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	1184
	START RECORD SENTINEL		4	5 -	8	*****
1000	RECORD ID		6	9 -	14	"SCHbbb"
1001	SCHEDULE TYPE		6	15 -	20	"Ebbbb"
1002	PAGE NUMBER		5	21 -	25	"PG02b"
1003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnn
1004	FILLER		1	35 -	35	BLANK
1005	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
*1010	PART/S-CORP NAME A	27A(a)	34	43 -	76	A/N OR "STMbnn"
+1020	PART/S-CORP IND	27A(b)	1	77 -	77	"P" OR "S" OR BLANK
+1030	FOREIGN PARTNER	27A(c)	1	78 -	78	"X" OR BLANK
+1040	PART/S-CORP EIN	27A(d)	9	79 -	87	N
+1050	ALL IS AT RISK	27A(e)	1	88 -	88	"X" OR BLANK
+1060	SOME IS NOT AT RISK	27A(f)	1	89 -	89	"X" OR BLANK
1070	PART/S-CORP PASSIVE F8582 LOSS	27A(g)	12	90 -	101	N ***
+1080	PART/S-CORP PASSIVE SCH K-1 INCOME	27A(h)	12	102 -	113	N
+1090	PYA INDICATOR	27A(h)	3	114 -	116	"PYA" OR BLANK
+1100	PART/S-CORP NONPASSIVE SCH K-1 LOSS	27A(i)	12	117 -	128	N
+1110	PYA INDICATOR	27A(i)	3	129 -	131	"PYA" OR BLANK
+1120	PART/S-CORP NONPASSIVE SEC 179 DEDUCTION	27A(j)	12	132 -	143	N
+1130	PART/S-CORP NONPASSIVE SCH K-1 INCOME	27A(k)	12	144 -	155	N
+1140	PYA INDICATOR	27A(k)	3	156 -	158	"PYA" OR BLANK
1150	PART/S-CORP NAME B	27B(a)	34	159 -	192	A/N
1160	PART/S-CORP IND	27B(b)	1	193 -	193	"P" OR "S" OR BLANK
1170	FOREIGN PARTNER	27B(c)	1	194 -	194	"X" OR BLANK
1180	PART/S-CORP EIN	27B(d)	9	195 -	203	N

SECTION 9.17 SCHEDULE E - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1190	ALL IS AT RISK	27B(e)	1	204	- 204	"X" OR BLANK
1200	SOME IS NOT AT RISK	27B(f)	1	205	- 205	"X" OR BLANK
1210	PART/S-CORP PASSIVE F8582 LOSS	27B(g)	12	206	- 217	N
1220	PART/S-CORP PASSIVE SCH K-1 INCOME	27B(h)	12	218	- 229	N
1230	PYA INDICATOR	27B(h)	3	230	- 232	"PYA" OR BLANK
1240	PART/S-CORP NONPASSIVE SCH K-1 LOSS	27B(i)	12	233	- 244	N
1250	PYA INDICATOR	27B(i)	3	245	- 247	"PYA" OR BLANK
1260	PART/S-CORP NONPASSIVE SEC 179 DEDUCTION	27B(j)	12	248	- 259	N
1270	PART/S-CORP NONPASSIVE SCH K-1 INCOME	27B(k)	12	260	- 271	N
1280	PYA INDICATOR	27B(k)	3	272	- 274	"PYA" OR BLANK
1290	PART/S-CORP NAME C	27C(a)	34	275	- 308	A/N
1300	PART/S-CORP IND	27C(b)	1	309	- 309	"P" OR "S" OR BLANK
1310	FOREIGN PARTNER	27C(c)	1	310	- 310	"X" OR BLANK
1320	PART/S-CORP EIN	27C(d)	9	311	- 319	N
1330	ALL IS AT RISK	27C(e)	1	320	- 320	"X" OR BLANK
1340	SOME IS NOT AT RISK	27C(f)	1	321	- 321	"X" OR BLANK
1350	PART/S-CORP PASSIVE F8582 LOSS	27C(g)	12	322	- 333	N
1360	PART/S-CORP PASSIVE SCH K-1 INCOME	27S(h)	12	334	- 345	N
1370	PYA INDICATOR	27C(h)	3	346	- 348	"PYA" OR BLANK
1380	PART/S-CORP NONPASSIVE SCH K-1 LOSS	27C(i)	12	349	- 360	N
1390	PYA INDICATOR	27C(i)	3	361	- 363	"PYA" OR BLANK
1400	PART/S-CORP NONPASSIVE SEC 179 DEDUCTION	27B(j)	12	364	- 375	N
1410	PART/S-CORP NONPASSIVE SCH K-1 INCOME	27C(k)	12	376	- 387	N
1420	PYA INDICATOR	27C(k)	3	388	- 390	"PYA" OR BLANK
1430	PART/S-CORP NAME D	27D(a)	34	391	- 424	A/N
1440	PART/S-CORP IND	27D(b)	1	425	- 425	"P" OR "S" OR BLANK

SECTION 9.17 SCHEDULE E - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1450	FOREIGN PARTNER	27D(c)	1	426	- 426	"X" OR BLANK
1460	PART/S-CORP EIN	27D(d)	9	427	- 435	N
1470	ALL IS AT RISK	27D(e)	1	436	- 436	"X" OR BLANK
1480	SOME IS NOT AT RISK	27D(f)	1	437	- 437	"X" OR BLANK
1490	PART/S-CORP PASSIVE F8582 LOSS	27D(g)	12	438	- 449	N
1500	PART/S-CORP PASSIVE SCH K-1 INCOME	27D(h)	12	450	- 461	N
1510	PYA INDICATOR	27D(h)	3	462	- 464	"PYA" OR BLANK
1520	PART/S-CORP NONPASSIVE SCH K-1 LOSS	27D(i)	12	465	- 476	N
1530	PYA INDICATOR	27D(i)	3	477	- 479	"PYA" OR BLANK
1540	PART/S-CORP NONPASSIVE SEC 179 DEDUCTION	27B(j)	12	480	- 491	N
1550	PART/S-CORP NONPASSIVE SCH K-1 INCOME	27D(k)	12	492	- 503	N
1560	PYA INDICATOR	27D(k)	3	504	- 506	"PYA" OR BLANK
1570	PART/S-CORP NAME E	27E(a)	34	507	- 540	A/N
1580	PART/S-CORP IND	27E(b)	1	541	- 541	"P" OR "S" OR BLANK
1590	FOREIGN PARTNER	27E(c)	1	542	- 542	"X" OR BLANK
1600	PART/S-CORP EIN	27E(d)	9	543	- 551	N
1610	ALL IS AT RISK	27E(e)	1	552	- 552	"X" OR BLANK
1620	SOME IS NOT AT RISK	27E(f)	1	553	- 553	"X" OR BLANK
1630	PART/S-CORP PASSIVE F8582 LOSS	27E(g)	12	554	- 565	N
1640	PART/S-CORP PASSIVE SCH K-1 INCOME	27E(h)	12	566	- 577	N
1650	PYA INDICATOR	27E(h)	3	578	- 580	"PYA" OR BLANK
1660	PART/S-CORP NONPASSIVE SCH K-1 LOSS	27E(i)	12	581	- 592	N
1670	PYA INDICATOR	27E(i)	3	593	- 595	"PYA" OR BLANK
1680	PART/S-CORP NONPASSIVE SEC 179 DEDUCTION	27E(j)	12	596	- 607	N
1690	PART/S-CORP NONPASSIVE SCH K-1 INCOME	27E(k)	12	608	- 619	N
1700	PYA INDICATOR	27E(k)	3	620	- 622	"PYA" OR BLANK

SECTION 9.17 SCHEDULE E - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1710	TOTAL PART/S-CORP SCH K-1 PASSIVE INC	28a(h)	12	623 -	634	N
1720	TOTAL PART/S-CORP SCH K-1 NONPASSIVE INC	28a(k)	12	635 -	646	N
1730	TOTAL PASSIVE F8582 LOSS	28b(g)	12	647 -	658	N
1740	TOTAL NONPASSIVE SCH K-1 LOSS	28b(i)	12	659 -	670	N
1750	TOTAL NONPASSIVE SEC 179 DEDUCTION	28b(j)	12	671 -	682	N
1760	TOT PART/S-CORP INCOME	29	12	683 -	694	N
1770	TOT PART/S-CORP LOSS AND SEC 179 DEDUCTION	30	12	695 -	706	N ***
1780	NET PART/S-CORP INCOME OR LOSS	31	12	707 -	718	N
*1790	ESTATE/TRUST NAME A	32A(a)	56	719 -	774	A/N OR "STMbnn"
+1800	ESTATE/TRUST EIN	32A(b)	9	775 -	783	N
1810	PASSIVE F8582 LOSS	32A(c)	12	784 -	795	N ***
+1820	PASSIVE SCH K-1 INCOME	32A(d)	12	796 -	807	N
+1830	NONPASSIVE SCH K-1 LOSS	32A(e)	12	808 -	819	N
+1840	NONPASSIVE SCH K-1 INC	32A(f)	12	820 -	831	N
1850	ESTATE/TRUST NAME B	32B(a)	56	832 -	887	A/N
1860	ESTATE/TRUST EIN	32B(b)	9	888 -	896	N
1870	PASSIVE F8582 LOSS	32B(c)	12	897 -	908	N
1880	PASSIVE SCH K-1 INCOME	32B(d)	12	909 -	920	N
1890	NONPASSIVE SCH K-1 LOSS	32B(e)	12	921 -	932	N
1900	NONPASSIVE SCH K-1 INC	32B(f)	12	933 -	944	N
1970	TOTAL PASSIVE SCH K-1 INCOME	33a(d)	12	945 -	956	N
1980	TOTAL NONPASSIVE SCH K-1 INCOME	33a(f)	12	957 -	968	N
1990	TOTAL PASSIVE F8582 LOSS	33b(c)	12	969 -	980	N
2000	TOTAL NONPASSIVE SCH K-1 LOSS	33b(e)	12	981 -	992	N
2010	TOT ESTATE/TRUST INCOME	34	12	993 -	1004	N
2020	TOT ESTATE/TRUST LOSS	35	12	1005 -	1016	N ***

SECTION 9.17 SCHEDULE E - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2030	SCH K-1 ES PAYMENTS LITERAL	36	18	1017	- 1034	"ESbPAYMENTbCLAIMED" OR BLANK
2040	SCH K-1 ES PAYMENTS AMOUNT	36	12	1035	- 1046	N
2050	TOTAL ESTATE/TRUST NET INCOME/LOSS	36	12	1047	- 1058	N
*2060	REMIC NAME	37(a)	20	1059	- 1078	A/N OR "STMbnn"
+2070	REMIC EIN	37(b)	9	1079	- 1087	N
+2080	REMIC EXCESS INCLUSION	37(c)	12	1088	- 1099	N
+2090	REMIC SCH Q TAXABLE INCOME NET LOSS	37(d)	12	1100	- 1111	N
+2100	REMIC SCH Q LINE 3 INCOME	37(e)	12	1112	- 1123	N
2110	TOTAL REMIC INCOME	38	12	1124	- 1135	N
2120	NET FARM RENTAL INCOME/LOSS	39	12	1136	- 1147	N
2130	TOTAL INCOME (LOSS)	40	12	1148	- 1159	N
2140	FARMING/FISHING INCOME	41	12	1160	- 1171	N
2150	REAL ESTATE PROFESSIONALS	42	12	1172	- 1183	N
	RECORD TERMINUS CHARACTER		1	1184	- 1184	"#"

**SCHEDULE F
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Farming

▶ Attach to Form 1040, Form 1041, Form 1065, or Form 1065-B.
▶ See Instructions for Schedule F (Form 1040).

OMB No. 1545-0074

2001

Attachment
Sequence No. **14**

Name of proprietor _____ Social security number (SSN) _____

A Principal product. Describe in one or two words your principal crop or activity for the current tax year. **B Enter code from Part IV**

C Accounting method: (1) Cash (2) Accrual **D Employer ID number (EIN), if any**

E Did you "materially participate" in the operation of this business during 2001? If "No," see page F-2 for limit on passive losses. Yes No

Part I Farm Income—Cash Method. Complete Parts I and II (Accrual method taxpayers complete Parts II and III, and line 11 of Part I.)
Do not include sales of livestock held for draft, breeding, sport, or dairy purposes; report these sales on Form 4797.

1	Sales of livestock and other items you bought for resale	1				
2	Cost or other basis of livestock and other items reported on line 1	2				
3	Subtract line 2 from line 1	3				
4	Sales of livestock, produce, grains, and other products you raised	4				
5a	Total cooperative distributions (Form(s) 1099-PATR) 5a				5b Taxable amount	
6a	Agricultural program payments (see page F-2) 6a				6b Taxable amount	
7	Commodity Credit Corporation (CCC) loans (see page F-3):					
a	CCC loans reported under election				7a	
b	CCC loans forfeited 7b				7c Taxable amount	
8	Crop insurance proceeds and certain disaster payments (see page F-3):					
a	Amount received in 2001 8a				8b Taxable amount	
c	If election to defer to 2002 is attached, check here <input type="checkbox"/> 8d Amount deferred from 2000				8d	
9	Custom hire (machine work) income	9				
10	Other income, including Federal and state gasoline or fuel tax credit or refund (see page F-3)	10				
11	Gross income. Add amounts in the right column for lines 3 through 10. If accrual method taxpayer, enter the amount from page 2, line 51 ▶	11				

Part II Farm Expenses—Cash and Accrual Method. Do not include personal or living expenses such as taxes, insurance, repairs, etc., on your home.

12	Car and truck expenses (see page F-4—also attach Form 4562)	12				
13	Chemicals	13				
14	Conservation expenses (see page F-4)	14				
15	Custom hire (machine work)	15				
16	Depreciation and section 179 expense deduction not claimed elsewhere (see page F-4)	16				
17	Employee benefit programs other than on line 25	17				
18	Feed purchased	18				
19	Fertilizers and lime	19				
20	Freight and trucking	20				
21	Gasoline, fuel, and oil	21				
22	Insurance (other than health)	22				
23	Interest:					
a	Mortgage (paid to banks, etc.) 23a					
b	Other 23b					
24	Labor hired (less employment credits) 24					
25	Pension and profit-sharing plans	25				
26	Rent or lease (see page F-5):					
a	Vehicles, machinery, and equipment 26a					
b	Other (land, animals, etc.) 26b					
27	Repairs and maintenance	27				
28	Seeds and plants purchased	28				
29	Storage and warehousing	29				
30	Supplies purchased	30				
31	Taxes	31				
32	Utilities	32				
33	Veterinary, breeding, and medicine	33				
34	Other expenses (specify):					
a	..... 34a					
b	..... 34b					
c	..... 34c					
d	..... 34d					
e	..... 34e					
f	..... 34f					

35 **Total expenses.** Add lines 12 through 34f ▶ **35**

36 **Net farm profit or (loss).** Subtract line 35 from line 11. If a profit, enter on Form 1040, line 18, and also on Schedule SE, line 1. If a loss, you must go on to line 37 (estates, trusts, and partnerships, see page F-6) **36**

37 If you have a loss, you must check the box that describes your investment in this activity (see page F-6).
 • If you checked 37a, enter the loss on Form 1040, line 18, and also on Schedule SE, line 1.
 • If you checked 37b, you must attach Form 6198. } **37a** All investment is at risk.
37b Some investment is not at risk.

Part III Farm Income—Accrual Method (see page F-6)

Do not include sales of livestock held for draft, breeding, sport, or dairy purposes; report these sales on Form 4797 and do not include this livestock on line 46 below.

38	Sales of livestock, produce, grains, and other products during the year			38		
39a	Total cooperative distributions (Form(s) 1099-PATR)	39a		39b	Taxable amount	
40a	Agricultural program payments	40a		40b	Taxable amount	
41	Commodity Credit Corporation (CCC) loans:					
a	CCC loans reported under election			41a		
b	CCC loans forfeited	41b		41c	Taxable amount	
42	Crop insurance proceeds			42		
43	Custom hire (machine work) income			43		
44	Other income, including Federal and state gasoline or fuel tax credit or refund			44		
45	Add amounts in the right column for lines 38 through 44			45		
46	Inventory of livestock, produce, grains, and other products at beginning of the year	46				
47	Cost of livestock, produce, grains, and other products purchased during the year	47				
48	Add lines 46 and 47	48				
49	Inventory of livestock, produce, grains, and other products at end of year	49				
50	Cost of livestock, produce, grains, and other products sold. Subtract line 49 from line 48*			50		
51	Gross income. Subtract line 50 from line 45. Enter the result here and on page 1, line 11 ▶			51		

*If you use the unit-livestock-price method or the farm-price method of valuing inventory and the amount on line 49 is larger than the amount on line 48, subtract line 48 from line 49. Enter the result on line 50. Add lines 45 and 50. Enter the total on line 51.

Part IV Principal Agricultural Activity Codes

Caution. File **Schedule C** (Form 1040), Profit or Loss From Business, or **Schedule C-EZ** (Form 1040), Net Profit From Business, instead of Schedule F if:

- Your principal source of income is from providing agricultural services such as soil preparation, veterinary, farm labor, horticultural, or management for a fee or on a contract basis or
- You are engaged in the business of breeding, raising, and caring for dogs, cats, or other pet animals.

These codes for the Principal Agricultural Activity classify farms by the type of activity they are engaged in to facilitate the administration of the Internal Revenue Code. These six-digit codes are based on the North American Industry Classification System (NAICS).

Select one of the following codes and enter the six-digit number on page 1, line B.

Crop Production

- 111100 Oilseed and grain farming
- 111210 Vegetable and melon farming
- 111300 Fruit and tree nut farming

- 111400 Greenhouse, nursery, and floriculture production
- 111900 Other crop farming

Animal Production

- 112111 Beef cattle ranching and farming
- 112112 Cattle feedlots
- 112120 Dairy cattle and milk production
- 112210 Hog and pig farming
- 112300 Poultry and egg production
- 112400 Sheep and goat farming
- 112510 Animal aquaculture
- 112900 Other animal production

Forestry and Logging

- 113000 Forestry and logging (including forest nurseries and timber tracts)



SECTION 9.19 SCHEDULE F - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0826
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"SCHbbb"
0001	SCHEDULE TYPE		6	15 -	20	"Fbbbb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER		9	26 -	34	N nnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0010	SOCIAL SECURITY NUMBER		9	43 -	51	NO ENTRY
0020	PRINCIPAL PRODUCT	A	50	52 -	101	A/N
0030	PRINCIPAL AGRICULTURAL CODE	B	6	102 -	107	A/N
0040	ACCOUNTING METHOD (CASH)	C 1	1	108 -	108	"X" OR BLANK
0050	ACCOUNTING METHOD (ACCRUAL)	C 2	1	109 -	109	"X" OR BLANK
0080	MATERIALLY PARTICIPATE YES BOX	E	1	110 -	110	"X" OR BLANK
0085	MATERIALLY PARTICIPATE - NO BOX	E	1	111 -	111	"X" OR BLANK
0110	SALES OF LIVESTOCK	PT I 1	12	112 -	123	N
0120	COST OF LIVESTOCK	PT I 2	12	124 -	135	N
0130	LINE 1 MINUS LINE 2	PT I 3	12	136 -	147	N
0140	SALES OF LIVESTOCK, PRODUCE, GRAINS AND OTHER PRODUCTS	PT I 4	12	148 -	159	N
0150	TOTAL COOPERATIVE DISTRIBUTIONS	PT I 5a	12	160 -	171	N
0160	TOTAL COOPERATIVE TAXABLE AMOUNT	PT I 5b	12	172 -	183	N
0170	AGRICULTURAL PROGRAM PAYMENTS	PT I 6a	12	184 -	195	N
0180	AGRICULTURAL PROGRAM TAXABLE AMOUNT	PT I 6b	12	196 -	207	N
0190	CCC LOANS REPORTED UNDER ELECTION	PT I 7a	12	208 -	219	N

SECTION 9.19 SCHEDULE F - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
----	-----	----	-----	----	----	-----
@0200	CCC LOANS STATEMENT	PT I 7a	6	220	- 225	"STMbnn" OR BLANK
0210	CCC LOANS FORFEITED OR REPAID	PT I 7b	12	226	- 237	N
0220	CCC LOANS TAXABLE AMOUNT	PT I 7c	12	238	- 249	N
0230	CROP INSURANCE PROCEEDS AMOUNT RECEIVED	PT I 8a	12	250	- 261	N
0240	CROP INSURANCE PROCEEDS TAXABLE AMOUNT	PT I 8b	12	262	- 273	N
@0250	ELECTION TO DEFER	PT I 8c	6	274	- 279	"STMbnn" OR BLANK
0260	ELECTION TO DEFER	PT I 8c	1	280	- 280	"X" OR BLANK
0270	AMOUNT DEFERRED	PT I 8d	12	281	- 292	N
0280	CUSTOM HIRE	PT I 9	12	293	- 304	N
0290	OTHER INCOME, INCLUDING FEDERAL AND STATE GASOLINE	PT I 10	12	305	- 316	N
0300	ADD AMOUNTS IN COL 3-10	PT I 11	12	317	- 328	N
0320	CAR AND TRUCK EXPENSES (FORM 4562)	PT II 12	12	329	- 340	N
0330	CHEMICAL	PT II 13	12	341	- 352	N
0340	CONSERVATION EXPENSES	PT II 14	12	353	- 364	NO ENTRY
0350	CUSTOM HIRE	PT II 15	12	365	- 376	N
0360	DEPRECIATION AND SEC 179 EXPENSE DEDUCTION	PT II 16	12	377	- 388	N
0370	EMPLOYEE BENEFIT PROGRAMS	PT II 17	12	389	- 400	N
0380	FEED PURCHASED	PT II 18	12	401	- 412	N
0390	FERTILIZERS AND LIME	PT II 19	12	413	- 424	N
0400	FREIGHT AND TRUCKING	PT II 20	12	425	- 436	N
0410	GASOLINE, FUEL AND OIL	PT II 21	12	437	- 448	N

SECTION 9.19 SCHEDULE F - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0420	INSURANCE	PT II 22	12	449 -	460	N
0430	MORTGAGE	PT II 23a	12	461 -	472	N
0440	OTHER	PT II 23b	12	473 -	484	N
*0450	FORM 1098 EXPLANATION	PT II 23a	6	485 -	490	"STMbnn" OR BLANK
*0460	FORM 1098 NAME/ADDRESS	PT II 23b	6	491 -	496	"STMbnn" OR BLANK
0470	LABOR HIRED	PT II 24	12	497 -	508	N
0480	PENSION AND PROFIT- SHARING PLANS	PT II 25	12	509 -	520	N
0490	RENT OR LEASE VEHICLES, MACHINERY AND EQUIP	PT II 26a	12	521 -	532	N
0500	OTHER (LAND, ANIMALS, ETC)	PT II 26b	12	533 -	544	N
0510	REPAIRS AND MAINTENANCE	PT II 27	12	545 -	556	N
0520	SEEDS AND PLANTS PURCHASED	PT II 28	12	557 -	568	N
0530	STORAGE AND WAREHOUSING	PT II 29	12	569 -	580	N
0540	SUPPLIES PURCHASED	PT II 30	12	581 -	592	N
0550	TAXES	PT II 31	12	593 -	604	N
0560	UTILITIES	PT II 32	12	605 -	616	N
0570	VETERINARY FEES AND MEDICINE	PT II 33	12	617 -	628	N
*0580	OTHER EXPENSES	PT II 34	6	629 -	634	"STMbnn" OR BLANK
NOTE: IF MORE THAN SIX (6) EXPLANATIONS FOR PART II ARE NECESSARY OR THE SPACE ALLOWED IS INSUFFICIENT USE FIELD *0580 AS A STATEMENT (STM) REFERENCE. THE STM RECORDS MUST BEGIN WITH THE FIRST EXPLANATION.						
0590	OTHER EXPENSES (SPECIFY)	PT II 34a	15	635 -	649	A/N
0600	OTHER EXPENSES	PT II 34a	12	650 -	661	N

SECTION 9.19 SCHEDULE F - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0610	OTHER EXPENSES (SPECIFY)	PT II 34b	15	662 -	676	A/N
0620	OTHER EXPENSES	PT II 34b	12	677 -	688	N
0630	OTHER EXPENSES (SPECIFY)	PT II 34c	15	689 -	703	A/N
0640	OTHER EXPENSES	PT II 34c	12	704 -	715	N
0650	OTHER EXPENSES (SPECIFY)	PT II 34d	15	716 -	730	A/N
0660	OTHER EXPENSES	PT II 34d	12	731 -	742	N
0670	OTHER EXPENSES (SPECIFY)	PT II 34e	15	743 -	757	A/N
0680	OTHER EXPENSES	PT II 34e	12	758 -	769	N
0690	OTHER EXPENSES (SPECIFY)	PT II 34f	15	770 -	784	A/N
0700	OTHER EXPENSES	PT II 34f	12	785 -	796	N
0710	ADD AMOUNTS ON LINE 12 - 34f	PT II 35	12	797 -	808	N
0720	PAL INDICATOR	36	3	809 -	811	"PAL" OR BLANK
0730	NET FARM PROFIT OR (LOSS)	PT II 36	12	812 -	823	N
0740	ALL INVESTMENT IS AT RISK	PT II 37a	1	824 -	824	"X" OR BLANK
0750	SOME INVESTMENT IS NOT AT RISK	PT II 37b	1	825 -	825	"X" OR BLANK
	RECORD TERMINUS CHARACTER		1	826 -	826	"#"

SECTION 9.20 SCHEDULE F - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0259
	START RECORD SENTINEL		4	5 -	8	*****
0770	RECORD ID		6	9 -	14	"SCHbbb"
0771	SCHEDULE TYPE		6	15 -	20	"Fbbbb"
0772	PAGE NUMBER		5	21 -	25	"PG02b"
0773	EMPLOYER IDENTIFICATION NUMBER		9	26 -	34	N nnnnnnnn
0774	FILLER		1	35 -	35	BLANK
0775	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0780	SALES OF LIVESTOCK, PRODUCE, GRAINS AND OTHER PRODUCTS	PT III 38	12	43 -	54	N
0790	TOTAL COOPERATIVE DISTRIBUTIONS	PT III 39a	12	55 -	66	N
0800	TOTAL COOPERATIVE TAXABLE AMOUNT	PT III 39b	12	67 -	78	N
0810	AGRICULTURAL PROGRAM PAYMENTS	PT III 40a	12	79 -	90	N
0820	AGRICULTURAL PROGRAM TAXABLE AMOUNT	PT III 40b	12	91 -	102	N
0830	CCC LOANS REPORTED UNDER ELECTION	PT III 41a	12	103 -	114	N
0840	CCC LOANS FORFEITED OR REPAID WITH CERTIFICATES	PT III 41b	12	115 -	126	N
0850	CCC LOANS FORFEITED TAXABLE AMOUNT	PT III 41c	12	127 -	138	N
0860	CROP INSURANCE PROCEEDS	PT III 42	12	139 -	150	N
0870	CUSTOM HIRE INCOME	PT III 43	12	151 -	162	N
0880	OTHER INCOME INCLUDING FEDERAL AND STATE GASOLINE OR FUEL TAX	PT III 44	12	163 -	174	N
0890	ADD AMOUNTS FOR LINES 38-44	PT III 45	12	175 -	186	N
0900	INVENTORY OF LIVESTOCK, PRODUCE, GRAINS AND OTHER PRODUCTS BEGINNING OF YEAR	PT III 46	12	187 -	198	N
0910	COST OF LIVESTOCK, PRODUCE, GRAINS AND OTHER PRODUCTS DURING OF YEAR	PT III 47	12	199 -	210	N

SECTION 9.20 SCHEDULE F - PAGE 2

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
-----	-----	-----	-----	-----	-----	-----
0920 ADD LINES 46 AND 47	PT III 48	12	211	-	222	N
0930 INVENTORY OF LIVESTOCK, PRODUCE, GRAINS AND OTHER PRODUCTS END OF YEAR	PT III 49	12	223	-	234	N
0940 COST OF LIVESTOCK, PRODUCE, GRAINS AND OTHER PRODUCTS SOLD (LINE 48 MINUS LINE 49)	PT III 50	12	235	-	246	N
0950 LINE 45 MINUS LINE 50	PT III 51	12	247	-	258	N
RECORD TERMINUS CHARACTER		1	259	-	259	"#"

**SCHEDULE H
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Name of employer

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

▶ **Attach to Form 1040, 1040NR, 1040NR-EZ, 1040-SS, or 1041.**

▶ **See separate instructions.**

OMB No. 1545-0074

2001

Attachment
Sequence No. **44**

Social security number

Employer identification number

A Did you pay **any one** household employee cash wages of \$1,300 or more in 2001? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions on page 3 before you answer this question.)

- Yes.** Skip lines B and C and go to line 1.
- No.** Go to line B.

B Did you withhold Federal income tax during 2001 for any household employee?

- Yes.** Skip line C and go to line 5.
- No.** Go to line C.

C Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2000 or 2001 to household employees? (**Do not** count cash wages paid in 2000 or 2001 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Do not file this schedule.
- Yes.** Skip lines 1-9 and go to line 10 on the back.

Part I Social Security, Medicare, and Income Taxes

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

9 Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2000 or 2001 to household employees? (**Do not** count cash wages paid in 2000 or 2001 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Enter the amount from line 8 above on Form 1040, line 56. If you are not required to file Form 1040, see the line 9 instructions on page 4.
- Yes.** Go to line 10 on the back.

Part II Federal Unemployment (FUTA) Tax

	Yes	No
10 Did you pay unemployment contributions to only one state?	10	
11 Did you pay all state unemployment contributions for 2001 by April 15, 2002? Fiscal year filers, see page 4	11	
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?	12	

Next: If you checked the "Yes" box on **all** the lines above, complete Section A.
 If you checked the "No" box on **any** of the lines above, skip Section A and complete Section B.

Section A

13 Name of the state where you paid unemployment contributions ▶			
14 State reporting number as shown on state unemployment tax return ▶			
15 Contributions paid to your state unemployment fund (see page 4)	15		
16 Total cash wages subject to FUTA tax (see page 4)		16	
17 FUTA tax. Multiply line 16 by .008. Enter the result here, skip Section B, and go to line 26			17

Section B

18 Complete all columns below that apply (if you need more space, see page 4):

(a) Name of state	(b) State reporting number as shown on state unemployment tax return	(c) Taxable wages (as defined in state act)	(d) State experience rate period		(e) State experience rate	(f) Multiply col. (c) by .054	(g) Multiply col. (c) by col. (e)	(h) Subtract col. (g) from col. (f). If zero or less, enter -0-.	(i) Contributions paid to state unemployment fund
			From	To					
19 Totals							19		
20 Add columns (h) and (i) of line 19						20			
21 Total cash wages subject to FUTA tax (see the line 16 instructions on page 4)							21		
22 Multiply line 21 by 6.2% (.062)							22		
23 Multiply line 21 by 5.4% (.054)						23			
24 Enter the smaller of line 20 or line 23							24		
25 FUTA tax. Subtract line 24 from line 22. Enter the result here and go to line 26							25		

Part III Total Household Employment Taxes

26 Enter the amount from line 8	26		
27 Add line 17 (or line 25) and line 26		27	
28 Are you required to file Form 1040? <input type="checkbox"/> Yes. Stop. Enter the amount from line 27 above on Form 1040, line 56. Do not complete Part IV below. <input type="checkbox"/> No. You may have to complete Part IV. See page 4 for details.			

Part IV Address and Signature—Complete this part only if required. See the line 28 instructions on page 4.

Address (number and street) or P.O. box if mail is not delivered to street address	Apt., room, or suite no.
City, town or post office, state, and ZIP code	

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees.

Employer's signature _____ Date _____



SECTION 9.22 SCHEDULE H - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0216
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"SCHbbb"
0001	SCHEDULE TYPE		6	15 -	20	"Hbbbbbb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001-9999999
0010	EMPLOYER NAME		35	43 -	77	A/N
0015	EMPLOYER NAME CONTROL		4	78 -	81	NO ENTRY
0020	EMPLOYER SSN		9	82 -	90	NO ENTRY
0030	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	91 -	99	N
0040	CASH WAGE OVER \$1300 PAID YEARLY - YES BOX	A	1	100 -	100	"X" OR BLANK
0045	CASH WAGE OVER \$1300 PAID YEARLY - NO BOX	A	1	101 -	101	"X" OR BLANK
0050	FEDERAL INCOME TAX WITHHELD - YES BOX	B	1	102 -	102	"X" OR BLANK
0055	FEDERAL INCOME TAX WITHHELD - NO BOX	B	1	103 -	103	"X" OR BLANK
0060	CASH WAGE OVER \$1000 PAID QUARTERLY - NO BOX	C	1	104 -	104	"X" OR BLANK
0065	CASH WAGE OVER \$1000 PAID QUARTERLY - YES BOX	C	1	105 -	105	"X" OR BLANK
0070	SOCIAL SECURITY WAGES	1	12	106 -	117	N
0080	SOCIAL SECURITY TAX	2	12	118 -	129	N
0090	MEDICARE WAGES	3	12	130 -	141	N
0100	MEDICARE TAX	4	12	142 -	153	N
0110	FEDERAL INCOME TAX WITHHELD	5	12	154 -	165	N
0115	DISABILITY AMOUNT	6	12	166 -	177	N
0120	TOTAL SOCIAL SECURITY, MEDICARE AND INCOME TAXES	6	12	178 -	189	N
0130	ADVANCE EIC PAYMENT	7	12	190 -	201	N

SECTION 9.22 SCHEDULE H - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
----	-----	----	-----	----	-	----	-----
0140	TOTAL TAXES LESS ADVANCE EIC PAYMENTS	8	12	202	-	213	N
0150	CASH WAGES OVER \$1000 PAID QUARTERLY - NO BOX	9	1	214	-	214	"X" OR BLANK
0155	CASH WAGES OVER \$1000 PAID QUARTERLY - YES BOX	9	1	215	-	215	"X" OR BLANK
	RECORD TERMINUS CHARACTER		1	216	-	216	"#"

SECTION 9.23 SCHEDULE H - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0422
	START RECORD SENTINEL		4	5 -	8	*****
0160	RECORD ID		6	9 -	14	"SCHbbb"
0161	SCHEDULE TYPE		6	15 -	20	"Hbbbbbb"
0162	PAGE NUMBER		5	21 -	25	"PG02b"
0163	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0164	FILLER		1	35 -	35	BLANK
0165	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001-9999999
0170	ONE STATE ONLY CONTRIBUTIONS YES BOX	10	1	43 -	43	"X" OR BLANK
0175	ONE STATE ONLY CONTRIBUTIONS NO BOX	10	1	44 -	44	NO ENTRY
0180	TOTAL CONTRIBUTIONS PAID BY APRIL 15 YES BOX	11	1	45 -	45	"X" OR BLANK
0185	TOTAL CONTRIBUTIONS PAID BY APRIL 15 NO BOX	11	1	46 -	46	NO ENTRY
0190	TAXABLE WAGES FOR FUTA ALSO TAXABLE FOR STATE YES BOX	12	1	47 -	47	"X" OR BLANK
0195	TAXABLE WAGES FOR FUTA ALSO TAXABLE FOR STATE NO BOX	12	1	48 -	48	NO ENTRY
0200	NAME OF STATE WHERE CONTRIBUTIONS PAID	13	2	49 -	50	STANDARD POSTAL STATE ABBREVIATIONS
0210	STATE REPORTING NUMBER	14	15	51 -	65	A/N
0220	CONTRIBUTIONS PAID TO STATE FUND	15	12	66 -	77	N OR "0%bRATE"
0230	TOTAL TAXABLE WAGES FOR FUTA (SECTION A)	16	12	78 -	89	N
0240	FUTA TAX	17	12	90 -	101	N
0250	STATE NAME 1	18(a)	2	102 -	103	NO ENTRY
0260	STATE REPORTING NUMBER 1	18(b)	15	104 -	118	NO ENTRY
0270	TAXABLE PAYROLL FOR CONTRIBUTIONS 1	18(c)	12	119 -	130	NO ENTRY
0280	BEGINNING DATE OF STATE EXPERIENCE RATE PERIOD 1	18(d)	8	131 -	138	NO ENTRY
0285	ENDING DATE OF STATE EXPERIENCE RATE PERIOD 1	18(d)	8	139 -	146	NO ENTRY
0290	STATE EXPERIENCE RATE 1	18(e)	6	147 -	152	NO ENTRY

SECTION 9.23 SCHEDULE H - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0300	UNEMPLOYMENT TAX CREDIT AT .054 - 1	18(f)	12	153 -	164	NO ENTRY
0310	UNEMPLOYMENT TAX CREDIT AT MAXIMUM PERCENT - 1	18(g)	12	165 -	176	NO ENTRY
0320	ADDITIONAL TAX CREDIT 1	18(h)	12	177 -	188	NO ENTRY
0330	CONTRIBUTIONS PAID TO STATE FUND - 1	18(i)	12	189 -	200	NO ENTRY
0340	STATE NAME 2	18(a)	2	201 -	202	NO ENTRY
0350	STATE REPORTING NUMBER 2	18(b)	15	203 -	217	NO ENTRY
0360	TAXABLE PAYROLL FOR CONTRIBUTIONS 2	18(c)	12	218 -	229	NO ENTRY
0370	BEGINNING DATE OF STATE EXPERIENCE RATE PERIOD 2	18(d)	8	230 -	237	NO ENTRY
0375	ENDING DATE OF STATE EXPERIENCE RATE PERIOD 2	18(d)	8	238 -	245	NO ENTRY
0380	STATE EXPERIENCE RATE 2	18(e)	6	246 -	251	NO ENTRY
0390	UNEMPLOYMENT TAX CREDIT AT .054 - 2	18(f)	12	252 -	263	NO ENTRY
0400	UNEMPLOYMENT TAX CREDIT AT MAXIMUM PERCENT - 2	18(g)	12	264 -	275	NO ENTRY
0410	ADDITIONAL TAX CREDIT 2	18(h)	12	276 -	287	NO ENTRY
0420	CONTRIBUTIONS PAID TO STATE FUND - 2	18(i)	12	288 -	299	NO ENTRY
0440	TOTAL ADDITIONAL TAX CREDIT	19(h)	12	300 -	311	NO ENTRY
0450	TOTAL CONTRIBUTIONS TO STATE FUNDS	19(i)	12	312 -	323	NO ENTRY
0460	TENTATIVE TOTAL TAX CREDIT	20	12	324 -	335	NO ENTRY
0470	TOTAL TAXABLE WAGES FOR FUTA (SECTION B)	21	12	336 -	347	NO ENTRY
0480	GROSS FUTA TAX AMOUNT	22	12	348 -	359	NO ENTRY
0490	MAXIMUM TAX CREDIT AMOUNT	23	12	360 -	371	NO ENTRY
0500	TOTAL TAX CREDIT ALLOWED	24	12	372 -	383	NO ENTRY
0510	FUTA TAX (SUBTRACT LINE 24 FROM LINE 22)	25	12	384 -	395	NO ENTRY
0520	TOTAL TAXES FROM LINE 8	26	12	396 -	407	N
0530	TOTAL COMBINED TAXES PLUS FUTA TAXES	27	12	408 -	419	N
0540	REQUIRED TO FILE FORM 1040 - YES	28	1	420 -	420	"X" OR BLANK

SECTION 9.23 SCHEDULE H - PAGE 2

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0550	REQUIRED TO FILE FORM 1040 - NO	28	1	421 - 421	NO ENTRY
	RECORD TERMINUS CHARACTER		1	422 - 422	"#"

**SCHEDULE J
(Form 1041)**

Accumulation Distribution for Certain Complex Trusts

OMB No. 1545-0092

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1041.
▶ See the Instructions for Form 1041.

2001

Name of trust

Employer identification number

Part I Accumulation Distribution in 2001

Note: See the Form 4970 instructions for certain income that minors may exclude and special rules for multiple trusts.

1	Other amounts paid, credited, or otherwise required to be distributed for 2001 (from Schedule B of Form 1041, line 10)	1	
2	Distributable net income for 2001 (from Schedule B of Form 1041, line 7)	2	
3	Income required to be distributed currently for 2001 (from Schedule B of Form 1041, line 9)	3	
4	Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Accumulation distribution for 2001. Subtract line 4 from line 1	5	

Part II Ordinary Income Accumulation Distribution (Enter the applicable throwback years below.)

Note: If the distribution is thrown back to more than five years (starting with the earliest applicable tax year beginning after 1968), attach additional schedules. (If the trust was a simple trust, see Regulations section 1.665(e)-1A(b).)

	Throwback year ending	Throwback year ending	Throwback year ending	Throwback year ending	Throwback year ending
	-----	-----	-----	-----	-----
6	Distributable net income (see page 31 of the instructions)	6			
7	Distributions (see page 31 of the instructions)	7			
8	Subtract line 7 from line 6	8			
9	Enter amount from page 2, line 25 or line 31, as applicable	9			
10	Undistributed net income Subtract line 9 from line 8	10			
11	Enter amount of prior accumulation distributions thrown back to any of these years	11			
12	Subtract line 11 from line 10	12			
13	Allocate the amount on line 5 to the earliest applicable year first. Do not allocate an amount greater than line 12 for the same year (see page 31 of the instructions)	13			
14	Divide line 13 by line 10 and multiply result by amount on line 9	14			
15	Add lines 13 and 14	15			
16	Tax-exempt interest included on line 13 (see page 31 of the instructions)	16			
17	Subtract line 16 from line 15	17			

Part III Taxes Imposed on Undistributed Net Income (Enter the applicable throwback years below.) (See page 31 of the instructions.)

Note: If more than five throwback years are involved, attach additional schedules. If the trust received an accumulation distribution from another trust, see Regulations section 1.665(d)-1A.

If the trust elected the alternative tax on capital gains (repealed for tax years beginning after 1978), skip lines 18 through 25 and complete lines 26 through 31.

	Throwback year ending				
	-----	-----	-----	-----	-----
18 Regular tax	18				
19 Trust's share of net short-term gain	19				
20 Trust's share of net long-term gain.	20				
21 Add lines 19 and 20.	21				
22 Taxable income	22				
23 Enter percent. Divide line 21 by line 22, but do not enter more than 100%	23	%	%	%	%
24 Multiply line 18 by the percentage on line 23.	24				
25 Tax on undistributed net income. Subtract line 24 from line 18. Enter here and on page 1, line 9.	25				
Do not complete lines 26 through 31 unless the trust elected the alternative tax on long-term capital gain.					
26 Tax on income other than long-term capital gain	26				
27 Trust's share of net short-term gain	27				
28 Trust's share of taxable income less section 1202 deduction.	28				
29 Enter percent. Divide line 27 by line 28, but do not enter more than 100%	29	%	%	%	%
30 Multiply line 26 by the percentage on line 29.	30				
31 Tax on undistributed net income. Subtract line 30 from line 26. Enter here and on page 1, line 9	31				

Part IV Allocation to Beneficiary

Note: Be sure to complete Form 4970, Tax on Accumulation Distribution of Trusts.

Beneficiary's name		Identifying number		
Beneficiary's address (number and street including apartment number or P.O. box)		(a) This beneficiary's share of line 13	(b) This beneficiary's share of line 14	(c) This beneficiary's share of line 16
City, state, and ZIP code				
32 Throwback year	32			
33 Throwback year	33			
34 Throwback year	34			
35 Throwback year	35			
36 Throwback year	36			
37 Total. Add lines 32 through 36. Enter here and on the appropriate lines of Form 4970.	37			



SECTION 9.25 SCHEDULE J - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0843
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"SCHbbb"
0001	SCHEDULE TYPE		6	15 -	20	"Jbbbb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0020	AMOUNTS REQUIRED (SCHEDULE B)	PT I 1	12	43 -	54	N
0030	DISTRIBUTABLE NET INCOME (SCHEDULE B)	PT I 2	12	55 -	66	N
0040	INCOME REQUIRED (SCHEDULE B)	PT I 3	12	67 -	78	N
0050	LINE 2 MINUS LINE 3	PT I 4	12	79 -	90	N
0060	ACCUMULATION DISTRIBUTION	PT I 5	12	91 -	102	N
0070	THROWBACK YEAR ENDING	PT II (a)	4	103 -	106	YYYY
0080	DISTRIBUTABLE NET INCOME	PT II 6(a)	12	107 -	118	N
0090	DISTRIBUTIONS	PT II 7(a)	12	119 -	130	N
0100	LINE 6 MINUS LINE 7	PT II 8(a)	12	131 -	142	N
0110	AMOUNT FROM PAGE 2 LINE 25 OR 31 AS APPLICABLE	PT II 9(a)	12	143 -	154	N
0120	UNDISTRIBUTED NET INCOME LINE 8 MINUS LINE 9	PT II 10(a)	12	155 -	166	N
0130	AMOUNT OF PRIOR ACCUMULATION DISTRIBUTIONS	PT II 11(a)	12	167 -	178	N
0140	LINE 10 MINUS LINE 11	PT II 12(a)	12	179 -	190	N
0150	ALLOCATE THE AMOUNT ON LINE 5 TO THE EARLIEST APPLICABLE YEAR	PT II 13(a)	12	191 -	202	N

SECTION 9.25 SCHEDULE J - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0160	DIVIDE LINE 13 BY LINE 10 AND MULTIPLY RESULT BY AMOUNT OF LINE 9	PT II 14(a)	12	203	- 214	N
0170	ADD LINES 13 AND 14	PT II 15(a)	12	215	- 226	N
0180	TAX-EXEMPT INTEREST INCLUDED ON LINE 13	PT II 16(a)	12	227	- 238	N
0190	LINE 15 MINUS LINE 16	PT II 17(a)	12	239	- 250	N
0200	THROWBACK YEAR ENDING	PT II (b)	4	251	- 254	YYYY
0210	DISTRIBUTABLE NET INCOME	PT II 6(b)	12	255	- 266	N
0220	DISTRIBUTIONS	PT II 7(b)	12	267	- 278	N
0230	LINE 6 MINUS LINE 7	PT II 8(b)	12	279	- 290	N
0240	AMOUNT FROM PAGE 2 LINE 25 OR 31 AS APPLICABLE	PT II 9(b)	12	291	- 302	N
0250	UNDISTRIBUTED NET INCOME LINE 8 MINUS LINE 9	PT II 10(b)	12	303	- 314	N
0260	AMOUNT OF PRIOR ACCUMULATION DISTRIBUTIONS	PT II 11(b)	12	315	- 326	N
0270	LINE 10 MINUS LINE 11	PT II 12(b)	12	327	- 338	N
0280	ALLOCATE THE AMOUNT ON LINE 5 TO EARLIEST APPLICABLE YEAR	PT II 13(b)	12	339	- 350	N
0290	DIVIDE LINE 13 BY LINE 10 AND MULTIPLY RESULT BY AMOUNT ON LINE 9	PT II 14(b)	12	351	- 362	N
0300	ADD LINES 13 AND 14	PT II 15(b)	12	363	- 374	N
0310	TAX-EXEMPT INTEREST INCLUDED ON LINE 13	PT II 16(b)	12	375	- 386	N
0320	LINE 15 MINUS LINE 16	PT II 17(b)	12	387	- 398	N
0330	THROWBACK YEAR ENDING	PT II (c)	4	399	- 402	YYYY
0340	DISTRIBUTABLE NET INCOME	PT II 6(c)	12	403	- 414	N
0350	DISTRIBUTIONS	PT II 7(c)	12	415	- 426	N

SECTION 9.25 SCHEDULE J - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0360	LINE 6 MINUS LINE 7	PT II 8(c)	12	427 -	438	N
0370	AMOUNT FROM PAGE 2 LINE 25 OR 31 AS APPLICABLE	PT II 9(c)	12	439 -	450	N
0380	UNDISTRIBUTED NET INCOME LINE 8 MINUS LINE 9	PT II 10(c)	12	451 -	462	N
0390	AMOUNT OF PRIOR ACCUMULATION DISTRIBUTIONS	PT II 11(c)	12	463 -	474	N
0400	LINE 10 MINUS LINE 11	PT II 12(c)	12	475 -	486	N
0410	ALLOCATE THE AMOUNT ON LINE 5 TO EARLIEST APPLICABLE YEAR	PT II 13(c)	12	487 -	498	N
0420	DIVIDE LINE 13 BY LINE 10 AND MULTIPLY RESULT BY AMOUNT ON LINE 9	PT II 14(c)	12	499 -	510	N
0430	ADD LINES 13 AND 14	PT II 15(c)	12	511 -	522	N
0440	TAX-EXEMPT INTEREST INCLUDED ON LINE 13	PT II 16(c)	12	523 -	534	N
0450	LINE 15 MINUS LINE 16	PT II 17(c)	12	535 -	546	N
0460	THROWBACK YEAR ENDING	PT II (d)	4	547 -	550	YYYY
0470	DISTRIBUTABLE NET INCOME	PT II 6(d)	12	551 -	562	N
0480	DISTRIBUTIONS	PT II 7(d)	12	563 -	574	N
0490	LINE 6 MINUS LINE 7	PT II 8(d)	12	575 -	586	N
0500	AMOUNT FROM PAGE 2 LINE 25 OR 31 AS APPLICABLE	PT II 9(d)	12	587 -	598	N
0510	UNDISTRIBUTED NET INCOME LINE 8 MINUS LINE 9	PT II 10(d)	12	599 -	610	N
0520	AMOUNT OF PRIOR ACCUMULATION DISTRIBUTIONS	PT II 11(d)	12	611 -	622	N
0530	LINE 10 MINUS LINE 11	PT II 12(d)	12	623 -	634	N
0540	ALLOCATE THE AMOUNT ON LINE 5 TO EARLIEST APPLICABLE YEAR	PT II 13(d)	12	635 -	646	N
0550	DIVIDE LINE 13 BY LINE 10 AND MULTIPLY RESULT BY AMOUNT ON LINE 9	PT II 14(d)	12	647 -	658	N

SECTION 9.25 SCHEDULE J - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0560	ADD LINES 13 AND 14	PT II 15(d)	12	659 -	670	N
0570	TAX-EXEMPT INTEREST INCLUDED ON LINE 13	PT II 16(d)	12	671 -	682	N
0580	LINE 15 MINUS LINE 16	PT II 17(d)	12	683 -	694	N
0590	THROWBACK YEAR ENDING	PT II (e)	4	695 -	698	YYYY
0600	DISTRIBUTABLE NET INCOME	PT II 6(e)	12	699 -	710	N
0610	DISTRIBUTIONS	PT II 7(e)	12	711 -	722	N
0620	LINE 6 MINUS LINE 7	PT II 8(e)	12	723 -	734	N
0630	AMOUNT FROM PAGE 2 LINE 25 OR 31 AS APPLICABLE	PT II 9(e)	12	735 -	746	N
0640	UNDISTRIBUTED NET INCOME LINE 8 MINUS LINE 9	PT II 10(e)	12	747 -	758	N
0650	AMOUNT OF PRIOR ACCUMULATION DISTRIBUTIONS	PT II 11(e)	12	759 -	770	N
0660	LINE 10 MINUS LINE 11	PT II 12(e)	12	771 -	782	N
0670	ALLOCATE THE AMOUNT ON LINE 5 TO EARLIEST APPLICABLE YEAR	PT II 13(e)	12	783 -	794	N
0680	DIVIDE LINE 13 BY LINE 10 AND MULTIPLY RESULT BY AMOUNT ON LINE 9	PT II 14(e)	12	795 -	806	N
0690	ADD LINES 13 AND 14	PT II 15(e)	12	807 -	818	N
0700	TAX-EXEMPT INTEREST INCLUDED ON LINE 13	PT II 16(e)	12	819 -	830	N
0710	LINE 15 MINUS LINE 16	PT II 17(e)	12	831 -	842	N
	RECORD TERMINUS CHARACTER		1	843 -	843	"#"

SECTION 9.26 SCHEDULE J - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	1200
	START RECORD SENTINEL		4	5 -	8	*****
0730	RECORD ID		6	9 -	14	"SCHbbb"
0731	SCHEDULE TYPE		6	15 -	20	"Jbbbb"
0732	PAGE NUMBER		5	21 -	25	"PG02b"
0733	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnn
0734	FILLER		1	35 -	35	BLANK
0735	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0740	THROWBACK YEAR ENDING	PT III (a)	4	43 -	46	YYYY
0750	TAX	PT III 18(a)	12	47 -	58	N
0760	NET SHORT-TERM GAIN	PT III 19(a)	12	59 -	70	N
0770	NET LONG-TERM GAIN	PT III 20(a)	12	71 -	82	N
0780	TOTAL NET CAPITAL GAIN (ADD LINE 19 AND LINE 20)	PT III 21(a)	12	83 -	94	N
0790	TAXABLE INCOME	PT III 22(a)	12	95 -	106	N
0800	ENTER PERCENT (DIVIDE LINE 21 BY LINE 22)	PT III 23(a)	6	107 -	112	N
0810	MULTIPLY AMOUNT ON LINE 18 BY THE PERCENTAGE ON LINE 23	PT III 24(a)	12	113 -	124	N
0820	TAX ON UNDISTRIBUTED NET INCOME (LINE 18 MINUS LINE 24)	PT III 25(a)	12	125 -	136	N
0830	TAX ON INCOME OTHER THAN LONG-TERM CAPITAL GAIN	PT III 26(a)	12	137 -	148	N
0840	NET SHORT-TERM GAIN	PT III 27(a)	12	149 -	160	N
0850	TAXABLE INCOME LESS SECTION 1202 DEDUCTION	PT III 28(a)	12	161 -	172	N
0860	ENTER PERCENT (DIVIDE LINE 27 BY LINE 28)	PT III 29(a)	6	173 -	178	N
0870	MULTIPLY AMOUNT ON LINE 26 BY THE PERCENT ON LINE 29	PT III 30(a)	12	179 -	190	N

SECTION 9.26 SCHEDULE J - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0880	TAX ON UNDISTRIBUTED NET INCOME (LINE 26 MINUS LINE 30)	PT III 31(a)	12	191	- 202	N
0890	THROWBACK YEAR ENDING	PT III (b)	4	203	- 206	YYYY
0900	TAX	PT III 18(b)	12	207	- 218	N
0910	NET SHORT-TERM GAIN	PT III 19(b)	12	219	- 230	N
0920	NET LONG-TERM GAIN	PT III 20(b)	12	231	- 242	N
0930	TOTAL NET CAPITAL GAIN	PT III 21(b)	12	243	- 254	N
0940	TAXABLE INCOME	PT III 22(b)	12	255	- 266	N
0950	ENTER PERCENT (DIVIDE LINE 21 BY LINE 22)	PT III 23(b)	6	267	- 272	N
0960	MULTIPLY AMOUNT ON LINE 18 BY THE PERCENT ON LINE 23	PT III 24(b)	12	273	- 284	N
0970	TAX ON UNDISTRIBUTED NET INCOME (LINE 18 MINUS LINE 24)	PT III 25(b)	12	285	- 296	N
0980	TAX ON INCOME OTHER THAN LONG-TERM CAPITAL GAIN	PT III 26(b)	12	297	- 308	N
0990	NET SHORT-TERM GAIN	PT III 27(b)	12	309	- 320	N
1000	TAXABLE INCOME LESS SECTION 1202 DEDUCTION	PT III 28(b)	12	321	- 332	N
1010	ENTER PERCENT (DIVIDE LINE 27 BY LINE 28)	PT III 29(b)	6	333	- 338	N
1020	MULTIPLY AMOUNT ON LINE 26 BY THE PERCENT ON LINE 29	PT III 30(b)	12	339	- 350	N
1030	TAX ON UNDISTRIBUTED NET INCOME (LINE 26 MINUS LINE 30)	PT III 31(b)	12	351	- 362	N
1040	THROWBACK YEAR ENDING	PT III (c)	4	363	- 366	YYYY
1050	TAX	PT III 18(c)	12	367	- 378	N
1060	NET SHORT-TERM GAIN	PT III 19(c)	12	379	- 390	N
1070	NET LONG-TERM GAIN	PT III 20(c)	12	391	- 402	N

SECTION 9.26 SCHEDULE J - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1080	TOTAL NET CAPITAL GAIN	PT III 21(c)	12	403	- 414	N
1090	TAXABLE INCOME	PT III 22(c)	12	415	- 426	N
1100	ENTER PERCENT (DIVIDE LINE 21 BY LINE 22)	PT III 23(c)	6	427	- 432	N
1110	MULTIPLY AMOUNT ON LINE 18 BY THE PERCENT ON LINE 23	PT III 24(c)	12	433	- 444	N
1120	TAX ON UNDISTRIBUTED NET INCOME (LINE 18 MINUS LINE 24)	PT III 25(c)	12	445	- 456	N
1130	TAX ON INCOME OTHER THAN LONG-TERM CAPITAL GAIN	PT III 26(c)	12	457	- 468	N
1140	NET SHORT-TERM GAIN	PT III 27(c)	12	469	- 480	N
1150	TAXABLE INCOME LESS SECTION 1202 DEDUCTION	PT III 28(c)	12	481	- 492	N
1160	ENTER PERCENT	PT III 29(c)	6	493	- 498	N
1170	MULTIPLY AMOUNT ON LINE 26 BY THE PERCENT ON LINE 29	PT III 30(c)	12	499	- 510	N
1180	TAX ON UNDISTRIBUTED NET INCOME (LINE 26 MINUS LINE 30)	PT III 31(c)	12	511	- 522	N
1190	THROWBACK YEAR ENDING	PT III (d)	4	523	- 526	YYYY
1200	TAX	PT III 18(d)	12	527	- 538	N
1210	NET SHORT-TERM GAIN	PT III 19(d)	12	539	- 550	N
1220	NET LONG-TERM GAIN	PT III 20(d)	12	551	- 562	N
1230	TOTAL NET CAPITAL GAIN	PT III 21(d)	12	563	- 574	N
1240	TAXABLE INCOME	PT III 22(d)	12	575	- 586	N
1250	ENTER PERCENT (DIVIDE LINE 21 BY LINE 22)	PT III 23(d)	6	587	- 592	N
1260	MULTIPLY AMOUNT ON LINE 18 BY THE PERCENT ON LINE 23	PT III 24(d)	12	593	- 604	N
1270	TAX ON UNDISTRIBUTED NET INCOME (LINE 18 MINUS LINE 24)	PT III 25(d)	12	605	- 616	N

SECTION 9.26 SCHEDULE J - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
----	-----	----	-----	----	----	----	-----
1280	TAX ON INCOME OTHER THAN LONG-TERM CAPITAL GAIN	PT III 26(d)	12	617	-	628	N
1290	NET SHORT-TERM GAIN	PT III 27(d)	12	629	-	640	N
1300	TAXABLE INCOME LESS SECTION 1202 DEDUCTION	PT III 28(d)	12	641	-	652	N
1310	ENTER PERCENT	PT III 29(d)	6	653	-	658	N
1320	MULTIPLY AMOUNT ON LINE 26 BY THE PERCENT ON LINE 29	PT III 30(d)	12	659	-	670	N
1330	TAX ON UNDISTRIBUTED NET INCOME (LINE 26 MINUS LINE 30)	PT III 31(d)	12	671	-	682	N
1340	THROWBACK YEAR ENDING	PT III (e)	4	683	-	686	YYYY
1350	TAX	PT III 18(e)	12	687	-	698	N
1360	NET SHORT-TERM GAIN	PT III 19(e)	12	699	-	710	N
1370	NET LONG-TERM GAIN	PT III 20(e)	12	711	-	722	N
1380	TOTAL NET CAPITAL GAIN	PT III 21(e)	12	723	-	734	N
1390	TAXABLE INCOME	PT III 22(e)	12	735	-	746	N
1400	ENTER PERCENT (DIVIDE LINE 21 BY LINE 22)	PT III 23(e)	6	747	-	752	N
1410	MULTIPLY AMOUNT ON LINE 18 BY THE PERCENT ON LINE 23	PT III 24(e)	12	753	-	764	N
1420	TAX ON UNDISTRIBUTED NET INCOME (LINE 18 MINUS LINE 24)	PT III 25(e)	12	765	-	776	N
1430	TAX ON INCOME OTHER THAN LONG-TERM CAPITAL GAIN	PT III 26(e)	12	777	-	788	N
1440	NET SHORT-TERM GAIN	PT III 27(e)	12	789	-	800	N
1450	TAXABLE INCOME LESS SECTION 1202 DEDUCTION	PT III 28(e)	12	801	-	812	N
1460	ENTER PERCENT	PT III 29(e)	6	813	-	818	N
1470	MULTIPLY AMOUNT ON LINE 26 BY THE PERCENT ON LINE 29	PT III 30(e)	12	819	-	830	N

SECTION 9.26 SCHEDULE J - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1480	TAX ON UNDISTRIBUTED NET INCOME (LINE 26 MINUS LINE 30)	PT III 31(e)	12	831	- 842	N
1490	BENEFICIARY'S NAME	PT IV	35	843	- 877	A/N OR ENTER "SEE STATEMENT ATTACHED" (LEFT-JUSTIFIED AND BLANK FILLED)
NOTE: IF REPORTING FOR MORE THAN 1 BENEFICIARY, USE FIELD #1780 (STATEMENT FOR SCHEDULE J) BELOW, TO ATTACH THE INFORMATION CORRESPONDING TO ALL OF THE BENEFICIARIES. SEE SEC. 3 IN THIS PUBLICATION FOR SPECIFIC INFORMATION ABOUT HOW TO USE "STMB98".						
1500	(BENEFICIARY'S) IDENTIFYING NUMBER	PT IV	9	878	- 886	N
1510	BENEFICIARY'S ADDRESS	PT IV	35	887	- 921	A/N
1520	BENEFICIARY'S CITY	PT IV	22	922	- 943	A/N
1530	BENEFICIARY'S STATE	PT IV	2	944	- 945	A/N
1540	ZIP CODE (BENEFICIARY'S)	PT IV	12	946	- 957	N OR nnnnnbbbbbb OR nnnnnnnbbbbbb OR BLANK
1550	THROWBACK YEAR END	PT IV 32	4	958	- 961	YYYY
1560	AMOUNT FROM LINE 13 ALLOCATED TO THIS BENEFICIARY	PT IV 32(a)	12	962	- 973	N
1570	AMOUNT FROM LINE 14 ALLOCATED TO THIS BENEFICIARY	PT IV 32(b)	12	974	- 985	N
1580	AMOUNT FROM LINE 16 ALLOCATED TO THIS BENEFICIARY	PT IV 32(c)	12	986	- 997	N
1590	THROWBACK YEAR END	PT IV 33	4	998	- 1001	YYYY
1600	AMOUNT FROM LINE 13 ALLOCATED TO THIS BENEFICIARY	PT IV 33(a)	12	1002	- 1013	N
1610	AMOUNT FROM LINE 14 ALLOCATED TO THIS BENEFICIARY	PT IV 33(b)	12	1014	- 1025	N
1620	AMOUNT FROM LINE 16 ALLOCATED TO THIS BENEFICIARY	PT IV 33(c)	12	1026	- 1037	N
1630	THROWBACK YEAR END	PT IV 34	4	1038	- 1041	YYYY
1640	AMOUNT FROM LINE 13 ALLOCATED TO THIS BENEFICIARY	PT IV 34(a)	12	1042	- 1053	N
1650	AMOUNT FROM LINE 14 ALLOCATED TO THIS BENEFICIARY	PT IV 34(b)	12	1054	- 1065	N

SECTION 9.26 SCHEDULE J - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1660	AMOUNT FROM LINE 16 ALLOCATED TO THIS BENEFICIARY	PT IV 34(c)	12	1066	- 1077	N
1670	THROWBACK YEAR END	PT IV 35	4	1078	- 1081	YYYY
1680	AMOUNT FROM LINE 13 ALLOCATED TO THIS BENEFICIARY	PT IV 35(a)	12	1082	- 1093	N
1690	AMOUNT FROM LINE 14 ALLOCATED TO THIS BENEFICIARY	PT IV 35(b)	12	1094	- 1105	N
1700	AMOUNT FROM LINE 16 ALLOCATED TO THIS BENEFICIARY	PT IV 35(c)	12	1106	- 1117	N
1710	THROWBACK YEAR END	PT IV 36	4	1118	- 1121	YYYY
1720	AMOUNT FROM LINE 13 ALLOCATED TO THIS BENEFICIARY	PT IV 36(a)	12	1122	- 1133	N
1730	AMOUNT FROM LINE 14 ALLOCATED TO THIS BENEFICIARY	PT IV 36(b)	12	1134	- 1145	N
1740	AMOUNT FROM LINE 16 ALLOCATED TO THIS BENEFICIARY	PT IV 36(c)	12	1146	- 1157	N
1750	TOTAL (ADD LINES 32 - 36)	PT IV 37(a)	12	1158	- 1169	N
1760	TOTAL (ADD LINES 32 - 36)	PT IV 37(b)	12	1170	- 1181	N
1770	TOTAL (ADD LINES 32 - 36)	PT IV 37(c)	12	1182	- 1193	N
*1780	STATEMENT FOR SCHEDULE J		6	1194	- 1199	"STMb98" OR BLANK
	RECORD TERMINUS CHARACTER		1	1200	- 1200	"#"

**SCHEDULE K-1
(Form 1041)**

Beneficiary's Share of Income, Deductions, Credits, etc.

OMB No. 1545-0092

Department of the Treasury
Internal Revenue Service

for the calendar year 2001, or fiscal year
beginning , 2001, ending , 20
▶ **Complete a separate Schedule K-1 for each beneficiary.**

2001

Name of trust or decedent's estate

Amended K-1
 Final K-1

Beneficiary's identifying number ▶

Estate's or trust's EIN ▶

Beneficiary's name, address, and ZIP code

Fiduciary's name, address, and ZIP code

(a) Allocable share item		(b) Amount	(c) Calendar year 2001 Form 1040 filers enter the amounts in column (b) on:
1	Interest	1	Schedule B, Part I, line 1
2	Ordinary dividends	2	Schedule B, Part II, line 5
3	Net short-term capital gain	3	Schedule D, line 5
4	Net long-term capital gain: a Total for year	4a	Schedule D, line 12, column (f)
	b 28% rate gain	4b	Schedule D, line 12, column (g)
	c Qualified 5-year gain	4c	Line 4 of the worksheet for Schedule D, line 29
	d Unrecaptured section 1250 gain	4d	Line 11 of the worksheet for Schedule D, line 19
5a	Annuities, royalties, and other nonpassive income before directly apportioned deductions	5a	Schedule E, Part III, column (f)
	b Depreciation	5b	} Include on the applicable line of the appropriate tax form
	c Depletion	5c	
	d Amortization	5d	
6a	Trade or business, rental real estate, and other rental income before directly apportioned deductions (see instructions)	6a		Schedule E, Part III
	b Depreciation	6b	} Include on the applicable line of the appropriate tax form
	c Depletion	6c	
	d Amortization	6d	
7	Income for minimum tax purposes	7	
8	Income for regular tax purposes (add lines 1, 2, 3, 4a, 5a, and 6a)	8	
9	Adjustment for minimum tax purposes (subtract line 8 from line 7)	9	Form 6251, line 12
10	Estate tax deduction (including certain generation-skipping transfer taxes)	10	Schedule A, line 27
11	Foreign taxes.	11	Form 1116 or Schedule A (Form 1040), line 8
12	Adjustments and tax preference items (itemize):		
	a Accelerated depreciation	12a	} Include on the applicable line of Form 6251
	b Depletion	12b	
	c Amortization	12c	
	d Exclusion items	12d	
13	Deductions in the final year of trust or decedent's estate:		
	a Excess deductions on termination (see instructions)	13a	Schedule A, line 22
	b Short-term capital loss carryover	13b ()	Schedule D, line 5
	c Long-term capital loss carryover	13c ()	Schedule D, line 12, columns (f) and (g)
	d Net operating loss (NOL) carryover for regular tax purposes	13d ()	Form 1040, line 21
	e NOL carryover for minimum tax purposes	13e	See the instructions for Form 6251, line 20
	f	13f	} Include on the applicable line of the appropriate tax form
	g	13g	
14	Other (itemize):		
	a Payments of estimated taxes credited to you	14a	Form 1040, line 60
	b Tax-exempt interest	14b	Form 1040, line 8b
	c	14c	} Include on the applicable line of the appropriate tax form
	d	14d	
	e	14e	
	f	14f	
	g	14g	
	h	14h	

SECTION 9.28 SCHEDULE K-1 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0990
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"SCHbbb"
0001	SCHEDULE TYPE		6	15 -	20	"K1bbbb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	SCHEDULE OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0020	FISCAL YEAR BEGINNING		8	43 -	50	FORMAT: YYYYMMDD IF CALENDAR bbbbbbbb
0030	FISCAL YEAR ENDING		8	51 -	58	FORMAT: YYYYMMDD IF CALENDAR bbbbbbbb
0040	NAME OF ESTATE OR TRUST		35	59 -	93	A/N
0050	AMENDED K-1		1	94 -	94	NO ENTRY
0060	FINAL K-1		1	95 -	95	"X" OR BLANK
0070	BENEFICIARY'S IDENTIFYING NUMBER		9	96 -	104	N OR "FOREIGNUS"
0080	NAME LINE 1 (BENEFICIARY'S)		35	105 -	139	A/N
	(IF BENEFICIARY IS AN INDIVIDUAL ENTER FIRST NAME, INITIAL(WHEN APPROPRIATE), THEN LAST NAME USING UPPER CASE LEFT JUSTIFIED)					
0090	NAME LINE 2 (BENEFICIARY'S)		35	140 -	174	A/N OR BLANK
0100	STREET ADDRESS (BENEFICIARY'S)		35	175 -	209	A/N
0110	CITY (BENEFICIARY'S)		22	210 -	231	A/N
0120	STATE CODE (BENEFICIARY'S)		2	232 -	233	A/N
0130	ZIP CODE (BENEFICIARY'S)		12	234 -	245	N OR nnnnnbbbb OR nnnnnnnnbbbb
0140	ESTATE/TRUST IDENTIFICATION NUMBER		9	246 -	254	N
0150	NAME LINE 1 (FIDUCIARY'S)		35	255 -	289	A/N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0160	NAME LINE 2 (FIDUCIARY'S)		35	290	- 324	A/N
0170	STREET ADDRESS (FIDUCIARY'S)		35	325	- 359	A/N
0180	CITY (FIDUCIARY'S)		22	360	- 381	A/N
0190	STATE (FIDUCIARY'S)		2	382	- 383	A/N
0200	ZIP CODE (FIDUCIARY'S)		12	384	- 395	N OR nnnnnbbbb OR nnnnnnnnbbb
0210	INTEREST SCHEDULE B PT I	1(b)	12	396	- 407	N ***
0220	DIVIDENDS SCHEDULE B PT II	2(b)	12	408	- 419	N ***
0230	NET SHORT-TERM CAPITAL GAIN (SCHEDULE D) ENTIRE YEAR	3(b)	12	420	- 431	N
0235	NET LONG TERM CAPITAL GAIN TOTAL FOR YEAR	4a(b)	12	432	- 443	N
0237	28% RATE GAIN	4b(b)	12	444	- 455	N
0239	QUALIFIED 5-YEAR GAIN	4c(b)	12	456	- 467	N
0240	UNRECAPTURED SECTION 1250 GAIN	4d(b)	12	468	- 479	N
0250	BUSINESS NON PASSIVE INCOME SCHEDULE E PT III	5a(b)	12	480	- 491	N
0260	BUSINESS NON PASSIVE INCOME DEPRECIATION	5b(b)	12	492	- 503	N
0270	BUSINESS NON PASSIVE INCOME DEPLETION	5c(b)	12	504	- 515	N
0280	BUSINESS NON PASSIVE INCOME AMORTIZATION	5d(b)	12	516	- 527	N
0290	RENTAL, RENTAL REAL ESTATE PASSIVE INCOME	6a(b)	12	528	- 539	N
0300	RENTAL, RENTAL REAL ESTATE PASSIVE INCOME (DEPRECIATION)	6b(b)	12	540	- 551	N
0310	RENTAL, RENTAL REAL ESTATE PASSIVE INCOME (DEPLETION)	6c(b)	12	552	- 563	N
0320	RENTAL, RENTAL REAL ESTATE PASSIVE INCOME (AMORTIZATION)	6d(b)	12	564	- 575	N

SECTION 9.28 SCHEDULE K-1 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0330	INCOME FOR MINIMUM TAX PURPOSES	7(b)	12	576 -	587	N
0340	INCOME FOR REGULAR TAX PURPOSES	8b	12	588 -	599	N
0350	ADJUSTMENT FOR MINIMUM TAX PURPOSES	9(b)	12	600 -	611	N
0360	ESTATE TAX DEDUCTION (SCHEDULE A)	10(b)	12	612 -	623	N
0370	FOREIGN TAXES (SCHEDULE A OR FORM 1116)	11(b)	12	624 -	635	N
0380	TAX PREFERENCE ITEMS ACCELERATED DEPRECIATION	12a(b)	12	636 -	647	N
0390	TAX PREFERENCE ITEMS DEPLETION	12b(b)	12	648 -	659	N
0400	TAX PREFERENCE ITEMS AMORTIZATION	12c(b)	12	660 -	671	N
0410	TAX PREFERENCE ITEMS EXCLUSION ITEMS (FORM 8801)	12d(b)	12	672 -	683	N
0420	EXCESS DEDUCTIONS ON TERMINATION (SCHEDULE A)	13a(b)	12	684 -	695	N
0430	SHORT TERM CAPITAL LOSS CARRYOVER (SCHEDULE D)	13b(b)	12	696 -	707	N
0440	LONG TERM CAPITAL LOSS CARRYOVER (SCHEDULE D)	13c(b)	12	708 -	719	N
0450	NET OPERATING LOSS (NOL) CARRYOVER (FORM 1040)	13d(b)	12	720 -	731	N
0455	NET OPERATING LOSS FOR MINIMUM TAX PURPOSES	13e(b)	12	732 -	743	N
0460	OTHER DISTRIBUTIONS IN FINAL YEAR OF ESTATE OR TRUST	13f(b)	12	744 -	755	N
0470	OTHER DISTRIBUTIONS IN FINAL YEAR OF ESTATE OR TRUST	13g(b)	12	756 -	767	N
0480	OTHER TRUST PAYMENTS OF ESTIMATED TAXES CREDITED TO YOU (FORM 1040)	14a(b)	12	768 -	779	N ***
0490	OTHER TAX-EXEMPT INTEREST (form 1040)	14b(b)	12	780 -	791	N

SECTION 9.28 SCHEDULE K-1 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0500	OTHER (ITEMIZE)	14c	20	792 - 811	A/N	
0510	OTHER (ITEMIZE) AMOUNT	14c(b)	12	812 - 823	N	
0520	OTHER (ITEMIZE)	14d	20	824 - 843	A/N	
0530	OTHER (ITEMIZE) AMOUNT	14d(b)	12	844 - 855	N	
0540	OTHER (ITEMIZE)	14e	20	856 - 875	A/N	
0550	OTHER (ITEMIZE) AMOUNT	14e(b)	12	876 - 887	N	
0560	OTHER (ITEMIZE)	14f	20	888 - 907	A/N	
0570	OTHER (ITEMIZE) AMOUNT	14f(b)	12	908 - 919	N	
0580	OTHER (ITEMIZE)	14g	20	920 - 939	A/N	
0590	OTHER (ITEMIZE) AMOUNT	14g(b)	12	940 - 951	N	
0600	OTHER (ITEMIZE)	14h	20	952 - 971	A/N	
0610	OTHER (ITEMIZE) AMOUNT	14h(b)	12	972 - 983	N	
*0620	K-1 STATEMENT (STMb99)		6	984 - 989	"STMbnn" OR BLANK	
	RECORD TERMINUS CHARACTER		1	990 - 990	VALUE "#"	

Foreign Tax Credit
(Individual, Estate, Trust, or Nonresident Alien Individual)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.
▶ See separate instructions.

Name _____ Identifying number as shown on page 1 of your tax return _____

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** on page 3 of the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Passive income
- b High withholding tax interest
- c Financial services income
- d Shipping income
- e Dividends from a DISC or former DISC
- f Certain distributions from a foreign sales corporation (FSC) or former FSC
- g Lump-sum distributions
- h Section 901(j) income
- i Certain income re-sourced by treaty
- j General limitation income

k Resident of (name of country) ▶ _____

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
1 Enter the name of the foreign country or U.S. possession ▶				
1 Gross income from sources within country shown above and of the type checked above. See page 8 of the instructions:				1
Deductions and losses (Caution: See pages 8 and 9 of the instructions):				
2 Expenses definitely related to the income on line 1 (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction. See instructions				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income. See instructions				
e Gross income from all sources. See instructions				
f Divide line 3d by line 3e. See instructions				
g Multiply line 3c by line 3f.				
4 Pro rata share of interest expense. See instructions:				
a Home mortgage interest (use worksheet on page 9 of the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1. Enter the result here and on line 14, page 2 ▶				7

Part II Foreign Taxes Paid or Accrued (See page 9 of the instructions.)

Country	Credit is claimed for taxes (you must check one) (m) <input type="checkbox"/> Paid (n) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued							(x) Total foreign taxes paid or accrued (add cols. (t) through (w))
		In foreign currency				In U.S. dollars			
		Taxes withheld at source on:			(s) Other foreign taxes paid or accrued	Taxes withheld at source on:				(w) Other foreign taxes paid or accrued
	(o) Date paid or accrued	(p) Dividends	(q) Rents and royalties	(r) Interest		(t) Dividends	(u) Rents and royalties	(v) Interest	
A									
B									
C									

8 Add lines A through C, column (x). Enter the total here and on line 9, page 2 ▶ **8**

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9		
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11		
12	Reduction in foreign taxes. See page 10 of the instructions	12		
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit	13		
14	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See page 10 of the instructions	14		
15	Adjustments to line 14. See page 10 of the instructions	15		
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.)	16		
17	Individuals: Enter the amount from Form 1040, line 37. If you are a nonresident alien, enter the amount from Form 1040NR, line 36. Estates and trusts: Enter your taxable income without the deduction for your exemption <i>Caution: If you figured your tax using the special rates on capital gains, see page 12 of the instructions.</i>	17		
18	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"	18		
19	Individuals: Enter the amount from Form 1040, line 40. If you are a nonresident alien, enter the amount from Form 1040NR, line 39. Estates and trusts: Enter the total of Form 1041, Schedule G, lines 1a and 1b, or the total of Form 990-T, lines 36 and 37.	19		
20	Multiply line 19 by line 18 (maximum amount of credit)	20		
21	Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV. See page 12 of the instructions ▶	21		

Part IV Summary of Credits From Separate Parts III (See page 12 of the instructions.)

22	Credit for taxes on passive income	22		
23	Credit for taxes on high withholding tax interest	23		
24	Credit for taxes on financial services income	24		
25	Credit for taxes on shipping income	25		
26	Credit for taxes on dividends from a DISC or former DISC and certain distributions from a FSC or former FSC	26		
27	Credit for taxes on lump-sum distributions	27		
28	Credit for taxes on certain income re-sourced by treaty	28		
29	Credit for taxes on general limitation income	29		
30	Add lines 22 through 29	30		
31	Enter the smaller of line 19 or line 30	31		
32	Reduction of credit for international boycott operations. See instructions for line 12 on page 10	32		
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Form 1040, line 43; Form 1040NR, line 42; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a ▶	33		



SECTION 9.30 FORM 1116 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	1113
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"1116bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0007	ALT MIN TAX LITERAL		3	43 -	45	"AMT" OR BLANK
0020	PASSIVE INCOME	a	1	46 -	46	"X" OR BLANK
0030	HIGH WITHHOLDING TAX INTEREST	b	1	47 -	47	"X" OR BLANK
0040	FINANCIAL SERVICES INCOME	c	1	48 -	48	"X" OR BLANK
0050	SHIPPING INCOME	d	1	49 -	49	"X" OR BLANK
0060	DIVIDENDS FROM DISC OR FORMER DISC	e	1	50 -	50	"X" OR BLANK
0070	DISTRIBUTIONS FROM FSC OR FORMER FSC	f	1	51 -	51	"X" OR BLANK
0080	LUMP-SUM DISTRIBUTIONS	g	1	52 -	52	"X" OR BLANK
0085	SECTION 901 (j) INCOME	h	1	53 -	53	"X" OR BLANK
0090	INCOME RE-SOURCED BY TREATY	i	1	54 -	54	"X" OR BLANK
0095	GENERAL LIMITATION INCOME	j	1	55 -	55	"X" OR BLANK
0100	RESIDENT OF: (NAME OF COUNTRY)	k	35	56 -	90	A/N
0110	NAME OF FOREIGN COUNTRY OR U. S. POSSESSION	PT I 1A	35	91 -	125	A/N
0120	GROSS INCOME SOURCE	PT I 1A	9	126 -	134	"WAGESbbbb" "DIVIDENDS" OR BLANK
0130	GROSS INCOME	PT I 1A	12	135 -	146	N
0140	EXPENSES DIRECTLY ALLOCABLE TO THE INCOME ON LINE 1	PT I 2A	12	147 -	158	N
@0150	EXPENSES ALLOCABLE TO INCOME ON LINE 1 (STMT)	PT I 2A	6	159 -	164	"STMbnn" OR BLANK
0160	PRO RATA SHARE CERTAIN ITEMIZED OR STANDARD DEDUCTIONS	PT I 3(a) A	12	165 -	176	N

SECTION 9.30 FORM 1116 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0170	PRO RATA SHARE OTHER DEDUCTIONS	PT I 3(b) A	12	177 -	188	N
@0180	PRO RATA SHARE OF OTHER DEDUCTIONS: OTHER DEDUCTIONS;	PT I 3(b) A	6	189 -	194	"STMbnn" OR BLANK
0190	PRO RATA SHARE OF OTHER DEDUCTIONS: ADD LINES 3a AND 3b	PT I 3(c) A	12	195 -	206	N
0200	PRO RATA SHARE TOTAL FOREIGN SOURCE INCOME	PT I 3(d) A	12	207 -	218	N
0210	PRO RATA SHARE GROSS INCOME FROM ALL SOURCES	PT I 3(e) A	12	219 -	230	N
0220	PRO RATA SHARE DIVIDE LINE 3d BY LINE 3e	PT I 3(f) A	6	231 -	236	N
0230	PRO RATA SHARE MULTIPLY LINE 3c BY LINE 3f	PT I 3(g) A	12	237 -	248	N
0240	PRO RATA SHARE HOME MORTGAGE INTEREST	PT I 4(a) A	12	249 -	260	N
0250	PRO RATA SHARE OTHER INTEREST	PT I 4(b) A	12	261 -	272	N
0260	LOSSES FROM FOREIGN SOURCES	PT I 5 A	12	273 -	284	N
0270	ADD LINES 2, 3g, 4a, 4b, AND 5	PT I 6 A	12	285 -	296	N
0280	NAME OF FOREIGN COUNTRY OR U. S. POSSESSION	PT I 1B	35	297 -	331	A/N
0290	GROSS INCOME SOURCE	PT I 1 B	9	332 -	340	"WAGESbbbb" "DIVIDENDS" OR BLANK
0300	GROSS INCOME	PT I 1B	12	341 -	352	N
0310	EXPENSES DIRECTLY ALLOCABLE TO THE INCOME ON LINE 1	PT I 2 B	12	353 -	364	N
@0320	EXPENSES DIRECTLY ALLOCABLE TO THE INCOME ON LINE 1	PT I 2 B	6	365 -	370	"STMbnn" OR BLANK
0330	PRO RATA SHARE CERTAIN ITEMIZED OR STANDARD DEDUCTIONS	PT I 3(a) B	12	371 -	382	N

SECTION 9.30 FORM 1116 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0340	PRO RATA SHARE OTHER DEDUCTIONS	PT I 3(b) B	12	383 -	394	N
@0350	PRO RATA SHARE OF OTHER DEDUCTIONS OTHER DEDUCTIONS	PT I 3(b) B	6	395 -	400	"STMbnn" OR BLANK
0360	PRO RATA SHARE OF OTHER DEDUCTIONS ADD LINES 3a AND 3b	PT I 3(c) B	12	401 -	412	N
0370	PRO RATA SHARE TOTAL FOREIGN SOURCE INCOME	PT I 3(d) B	12	413 -	424	N
0380	PRO RATA SHARE GROSS INCOME FROM ALL SOURCES	PT I 3(e) B	12	425 -	436	N
0390	PRO RATA SHARE DIVIDE LINE 3d BY LINE 3e	PT I 3(f) B	6	437 -	442	N
0400	PRO RATA SHARE MULTIPLY LINE 3c BY LINE 3f	PT I 3(g) B	12	443 -	454	N
0410	PRO RATA SHARE HOME MORTGAGE INTEREST	PT I 4(a) B	12	455 -	466	N
0420	PRO RATA SHARE OTHER INTEREST	PT I 4(b) B	12	467 -	478	N
0430	LOSSES FROM FOREIGN SOURCES	PT I 5 B	12	479 -	490	N
0440	ADD LINES 2, 3g, 4a, 4b, AND 5	PT I 6 B	12	491 -	502	N
0450	NAME OF FOREIGN COUNTRY OR U. S. POSSESSION	PT I 1C	35	503 -	537	A/N
0460	GROSS INCOME SOURCE	PT I 1 C	9	538 -	546	"WAGESbbbb" "DIVIDENDS" OR BLANK
0470	GROSS INCOME	PT I 1 C	12	547 -	558	N
0480	EXPENSES DIRECTLY ALLOCABLE TO THE INCOME ON LINE 1	PT I 2 C	12	559 -	570	N
@0490	EXPENSES DIRECTLY ALLOCABLE TO THE INCOME ON LINE 1	PT I 2 C	6	571 -	576	"STMbnn" OR BLANK
0500	PRO RATA SHARE CERTAIN ITEMIZED OR STANDARD DEDUCTIONS	PT I 3(a) C	12	577 -	588	N

SECTION 9.30 FORM 1116 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
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0510	PRO RATA SHARE OTHER DEDUCTIONS	PT I 3(b) C	12	589 -	600	N
@0520	PRO RATA SHARE OF OTHER DEDUCTIONS: OTHER DEDUCTIONS	PT I 3(b) C	6	601 -	606	"STMbnn" OR BLANK
0530	PRO RATA SHARE OF OTHER DEDUCTIONS: ADD LINES 3a AND 3b	PT I 3(c) C	12	607 -	618	N
0540	PRO RATA SHARE TOTAL FOREIGN SOURCE INCOME	PT I 3(d) C	12	619 -	630	N
0550	PRO RATA SHARE GROSS INCOME FROM ALL SOURCES	PT I 3(e) C	12	631 -	642	N
0560	PRO RATA SHARE DIVIDE LINE 3d BY LINE 3e	PT I 3(f) C	6	643 -	648	N
0570	PRO RATA SHARE MULTIPLY LINE 3c BY LINE 3f	PT I 3(g) C	12	649 -	660	N
0580	PRO RATA SHARE HOME MORTGAGE INTEREST	PT I 4(a) C	12	661 -	672	N
0590	PRO RATA SHARE OTHER INTEREST	PT I 4(b) C	12	673 -	684	N
0600	LOSSES FROM FOREIGN SOURCES	PT I 5 C	12	685 -	696	N
0610	ADD LINES 2, 3g, 4a, 4b, AND 5	PT I 6 C	12	697 -	708	N
0620	TOTAL (ADD COLUMNS 1A, 1B, AND 1C)	PT I 1	12	709 -	720	N
0630	TOTAL (ADD COLUMNS 6A, 6B, AND 6C)	PT I 6	12	721 -	732	N
0640	LINE 1 MINUS LINE 6	PT I 7	12	733 -	744	N
0650	FOREIGN TAXES PAID OR ACCRUED: (PAID)	PT II (m)	1	745 -	745	"X" OR BLANK
0660	FOREIGN TAXES PAID OR ACCRUED: (ACCRUED)	PT II (n)	1	746 -	746	"X" OR BLANK
NOTE: IF MORE SPACE IS NEEDED FOR ADDITIONAL TAXES PAID OR ACCRUED AS A RESULT OF AN AUDIT, USE FIELD #980 AT THE END OF THIS RECORD.						
*0670	FOREIGN TAXES DATE PAID OR ACCRUED	PT II A(o)	8	747 -	754	FORMAT: YYYYMMDD "STMbnnnn" OR BLANK

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
----	-----	----	-----	----	----	----	-----
+0680	FOREIGN TAXES WITHHELD AT SOURCE ON DIV	PT II A(p)	12	755	-	766	N
+0690	FOREIGN TAXES WITHHELD AT SOURCE ON RENTS AND ROYALTIES	PT II A(q)	12	767	-	778	N
+0700	FOREIGN TAXES WITHHELD AT SOURCE ON (INTEREST)	PT II A(r)	12	779	-	790	N
+0710	FOREIGN TAXES PAID OTHER FOREIGN TAXES PAID OR ACCRUED	PT II A(s)	12	791	-	802	N
+0720	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON DIV	PT II A(t)	12	803	-	814	N
+0730	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON (RENTS AND ROYALTIES)	PT II A(u)	12	815	-	826	N
+0740	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON INTEREST	PT II A(v)	12	827	-	838	N
+0750	FOREIGN TAXES PAID U.S. OTHER FOREIGN TAXES PAID OR ACCRUED	PT II A(w)	12	839	-	850	N
+0760	FOREIGN TAXES U.S. TOTAL FOREIGN TAXES PAID OR ACCRUED (ADD COLS. (t) - (w))	PT II A(x)	12	851	-	862	N
+0770	FOREIGN TAXES DATE PAID OR ACCRUED	PT II B(o)	8	863	-	870	FORMAT: YYYYMMDD OR BLANK
+0780	FOREIGN TAXES FOREIGN TAXES WITHHELD AT SOURCE ON (DIVIDENDS)	PT II B(p)	12	871	-	882	N
+0790	FOREIGN TAXES TAXES WITHHELD AT SOURCE ON (RENTS AND ROYALTIES)	PT II B(q)	12	883	-	894	N
+0800	FOREIGN TAXES WITHHELD AT SOURCE ON (INTEREST)	PT II B(r)	12	895	-	906	N
+0810	FOREIGN TAXES PAID OTHER FOREIGN TAXES PAID OR ACCRUED.	PT II B(s)	12	907	-	918	N
+0820	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON (DIVIDENDS)	PT II B(t)	12	919	-	930	N
+0830	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON (RENTS AND ROYALTIES)	PT II B(u)	12	931	-	942	N
+0840	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON (INTEREST)	PT II B(v)	12	943	-	954	N
+0850	FOREIGN TAXES PAID U.S. OTHER FOREIGN TAXES PAID OR ACCRUED.	PT II B(w)	12	955	-	966	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
+0860	FOREIGN TAXES U.S. TOTAL FOREIGN TAXES PAID OR ACCRUED (ADD COLS. (t) - (w))	PT II B(x)	12	967 -	978	N
+0870	FOREIGN TAXES DATE PAID OR ACCRUED	PT II C(o)	8	979 -	986	FORMAT: YYYYMMDD OR BLANK
+0880	FOREIGN TAXES WITHHELD AT SOURCE ON (DIVIDENDS)	PT II C(p)	12	987 -	998	N
+0890	FOREIGN TAXES WITHHELD AT SOURCE ON RENTS AND ROYALTIES	PT II C(q)	12	999 -	1010	N
+0900	FOREIGN TAXES WITHHELD AT SOURCE ON (INTEREST)	PT II C(r)	12	1011 -	1022	N
+0910	FOREIGN TAXES PAID OTHER FOREIGN TAXES ON SOURCE PAID OR ACCRUED.	PT II C(s)	12	1023 -	1034	N
+0920	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON (DIVIDENDS)	PT II C(t)	12	1035 -	1046	N
+0930	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON (RENTS AND ROYALTIES)	PT II C(u)	12	1047 -	1058	N
+0940	FOREIGN TAXES PAID U.S. TAXES WITHHELD AT SOURCE ON (INTEREST)	PT II C(v)	12	1059 -	1070	N
+0950	FOREIGN TAXES PAID U.S. OTHER FOREIGN TAXES PAID OR ACCRUED.	PT II C(w)	12	1071 -	1082	N
+0960	FOREIGN TAXES PAID U.S. TOTAL FOREIGN TAXES PAID OR ACCRUED.	PT II C(x)	12	1083 -	1094	N
0970	TOTAL FOREIGN TAXES ADD COL x (a-c)	PT II 8	12	1095 -	1106	N
*0980	STATEMENT - (CREDITS FOR ADDITIONAL TAXES PAID OR ACCRUED)		6	1107 -	1112	"STMbnn" OR BLANK
	RECORD TERMINUS CHARACTER		1	1113 -	1113	"#"

SECTION 9.31 FORM 1116 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0355
	START RECORD SENTINEL		4	5 -	8	*****
1000	RECORD ID		6	9 -	14	"FRMbbb"
1001	FORM NUMBER		6	15 -	20	"1116bb"
1002	PAGE NUMBER		5	21 -	25	"PG02b"
1003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
1004	FILLER		1	35 -	35	BLANK
1005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
1010	COMPUTATION OF FOREIGN TAX CREDIT: ENTER AMOUNT FROM PART II, LINE 8.	PT III 9	12	43 -	54	N
1020	COMPUTATION OF FOREIGN TAX CREDIT: CARRYBACK OR CARRYOVER	PT III 10	12	55 -	66	N
@1030	COMPUTATION OF FOREIGN TAX CREDIT: CARRYBACK OR CARRYOVER	PT III 10	6	67 -	72	"STMbnn" OR BLANK
1040	COMPUTATION OF FOREIGN TAX CREDIT: COMBINE LINES 9 AND 10	PT III 11	12	73 -	84	N
1050	COMPUTATION OF FOREIGN TAX CREDIT: REDUCTION IN FOREIGN TAXES	PT III 12	12	85 -	96	N
*1055	REDUCTION IN FOREIGN TAX STATEMENT	PT III L 12	6	97 -	102	"STMbnn" OR BLANK
1060	COMPUTATION OF FOREIGN TAX CREDIT LINE 11 MINUS LINE 12	PT III 13	12	103 -	114	N
1070	COMPUTATION OF FOREIGN TAX CREDIT: ENTER AMOUNT FROM PART I, LINE 7.	PT III 14	12	115 -	126	N
1080	COMPUTATION OF FOREIGN TAX CREDIT: ADJUSTMENTS TO LINE 14	PT III 15	12	127 -	138	N
*1085	ADJUSTMENTS STATEMENT	PT III L 15	6	139 -	144	"STMbnn" OR BLANK
1090	COMPUTATION OF FOREIGN TAX CREDIT: COMBINE LINES 14 AND 15	PT III 16	12	145 -	156	N
1100	COMPUTATION OF FOREIGN TAX CREDIT: (ESTATES AND TRUSTS)	PT III 17	12	157 -	168	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1110	COMPUTATION OF FOREIGN TAX CREDIT: DIVIDE LINE 16 BY LINE 17	PT III 18	6	169	- 174	N
1120	COMPUTATION OF FOREIGN TAX CREDIT: INDIVIDUALS (ESTATES AND TRUSTS)	PT III 19	12	175	- 186	N
1130	COMPUTATION OF FOREIGN TAX CREDIT: MULTIPLY LINE 19 BY LINE 18.	PT III 20	12	187	- 198	N
1140	COMPUTATION OF FOREIGN TAX CREDIT: ENTER THE AMOUNT FROM LINE 13 OR LINE 20, WHICHEVER IS SMALLER.	PT III 21	12	199	- 210	N
1150	SUMMARY OF CREDITS CREDIT FOR TAXES ON PASSIVE INCOME	PT IV 22	12	211	- 222	N
1160	SUMMARY OF CREDITS CREDIT FOR TAXES ON HIGH WITHHOLDING TAX INTEREST	PT IV 23	12	223	- 234	N
1170	SUMMARY OF CREDITS CREDIT FOR TAXES ON FINANCIAL SERVICES INCOME	PT IV 24	12	235	- 246	N
1180	SUMMARY OF CREDITS CREDIT FOR TAXES ON SHIPPING INCOME	PT IV 25	12	247	- 258	N
1190	SUMMARY OF CREDITS CREDIT FOR TAXES ON DIVIDENDS FROM A DISC OR FORMER DISC, AND DISTRIBUTIONS FROM A FSC OR FORMER FSC	PT IV 26	12	259	- 270	N
1200	SUMMARY OF CREDITS CREDIT FOR TAXES ON LUMP SUM DISTRIBUTIONS	PT IV 27	12	271	- 282	N
1210	SUMMARY OF CREDITS CREDIT FOR TAXES ON INCOME RE-SOURCED BY TREATY	PT IV 28	12	283	- 294	N
1220	SUMMARY OF CREDITS CREDIT FOR TAXES ON GENERAL LIMITATION INCOME	PT IV 29	12	295	- 306	N
1230	SUMMARY OF CREDITS COMBINE LINES 22 - 29	PT IV 30	12	307	- 318	N
1235	SUMMARY OF CREDITS SMALLER OF LINE 19 OR 30	PT IV 31	12	319	- 330	N
1240	SUMMARY OF CREDITS REDUCTION OF CREDIT FOR INTERNATIONAL BOYCOTT OPERATIONS	PT IV 32	12	331	- 342	N

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
1250 FOREIGN TAX CREDIT LINE 31 MINUS LINE 32	PT IV 33	12	343	-	354	N
RECORD TERMINUS CHARACTER		1	355	-	355	"#"

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

In most cases, you do not need to file Form 2210. The IRS will figure any penalty you owe and send you a bill. File Form 2210 only if one or more boxes in Part I apply to you. If you do not need to file Form 2210, you still may use it to figure your penalty. Enter the amount from Part III, line 21, or Part IV, line 35, on the penalty line of your return, but do not attach Form 2210.

Part I Reasons for Filing—If 1a, 1b, or 1c below applies to you, you may be able to lower or eliminate your penalty. But you **must** check the boxes that apply and file Form 2210 with your tax return. If 1d below applies to you, check that box and file Form 2210 with your tax return.

- 1** Check whichever boxes apply (if none apply, see the text above Part I and **do not file Form 2210**):
- a** You request a **waiver**. In certain circumstances, the IRS will waive all or part of the penalty. See **Waiver of Penalty** on page 1 of the instructions.
 - b** You use the **annualized income installment method**. If your income varied during the year, this method may reduce the amount of one or more required installments. See page 5 of the instructions.
 - c** You had Federal income tax withheld from wages and, for estimated tax purposes, you treat the withheld tax as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. See the instructions for line 23 on page 3.
 - d** Your required annual payment (line 14 below) is based on your 2000 tax and you filed or are filing a joint return for either 2000 or 2001 but not for both years.

Part II Required Annual Payment

2 Enter your 2001 tax after credits (see page 2 of the instructions)	2	
3 Other taxes (see page 2 of the instructions)	3	
4 Add lines 2 and 3	4	
5 Earned income credit	5	
6 Additional child tax credit	6	
7 Credit for Federal tax paid on fuels	7	
8 Add lines 5, 6, and 7	8	
9 Current year tax. Subtract line 8 from line 4	9	
10 Multiply line 9 by 90% (.90)	10	
11 Withholding taxes. Do not include any estimated tax payments on this line (see page 3 of the instructions)	11	
12 Subtract line 11 from line 9. If less than \$1,000, stop here; you do not owe the penalty. Do not file Form 2210	12	
13 Enter the tax shown on your 2000 tax return (110% of that amount if the adjusted gross income shown on that return is more than \$150,000, or, if married filing separately for 2001, more than \$75,000). Caution: See page 3 of the instructions	13	
14 Required annual payment. Enter the smaller of line 10 or line 13 If line 11 is equal to or more than line 14, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked box 1d above.	14	

Part III Short Method (Caution: See page 3 of the instructions to find out if you can use the short method. If you checked box 1b or 1c in Part I, skip this part and go to Part IV.)

15 Enter the amount, if any, from line 11 above	15	
16 Enter the total amount, if any, of estimated tax payments you made	16	
17 Add lines 15 and 16	17	
18 Total underpayment for year. Subtract line 17 from line 14. If zero or less, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked box 1d above	18	
19 Multiply line 18 by .04397	19	
20 • If the amount on line 18 was paid on or after 4/15/02, enter -0-. • If the amount on line 18 was paid before 4/15/02, make the following computation to find the amount to enter on line 20.	20	
Amount on line 18 × Number of days paid before 4/15/02 × .00016		
21 Penalty. Subtract line 20 from line 19. Enter the result here and on Form 1040, line 71; Form 1040A, line 46; Form 1040NR, line 69; Form 1040NR-EZ, line 26; or Form 1041, line 26, but do not file Form 2210 unless you checked one or more of the boxes in Part I above	21	

Part IV Regular Method (See page 3 of the instructions if you are filing Form 1040NR or 1040NR-EZ.)

Section A—Figure Your Underpayment		Payment Due Dates			
		(a) 4/15/01	(b) 6/15/01	(c) 9/24/01	(d) 1/15/02
22	Required installments. If box 1b applies, enter the amounts from Schedule AI, line 26. Otherwise, enter 25% (.25) of line 14, Form 2210, in each column				
23	Estimated tax paid and tax withheld (see page 3 of the instructions). For column (a) only, also enter the amount from line 23 on line 27. If line 23 is equal to or more than line 22 for all payment periods, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked a box in Part I				
24	Complete lines 24 through 30 of one column before going to the next column. Enter amount, if any, from line 30 of previous column				
25	Add lines 23 and 24				
26	Add amounts on lines 28 and 29 of the previous column				
27	Subtract line 26 from line 25. If zero or less, enter -0-. For column (a) only, enter the amount from line 23				
28	If the amount on line 27 is zero, subtract line 25 from line 26. Otherwise, enter -0-				
29	Underpayment. If line 22 is equal to or more than line 27, subtract line 27 from line 22. Then go to line 24 of next column. Otherwise, go to line 30 . . . ▶				
30	Overpayment. If line 27 is more than line 22, subtract line 22 from line 27. Then go to line 24 of next column				

Section B—Figure the Penalty (Complete lines 31 through 36 of one column before going to the next column.)

		4/15/01	6/15/01		
Rate Period 1	April 16, 2001—June 30, 2001				
	31 Number of days from the date shown above line 31 to the date the amount on line 29 was paid or 6/30/01, whichever is earlier	Days:	Days:		
32	Underpayment on line 29 (see page 4 of the instructions) × $\frac{\text{Number of days on line 31}}{365} \times .08$ ▶	\$	\$		
Rate Period 2	July 1, 2001—December 31, 2001				
	33 Number of days from the date shown above line 33 to the date the amount on line 29 was paid or 12/31/01, whichever is earlier	Days:	Days:	Days:	
34	Underpayment on line 29 (see page 5 of the instructions) × $\frac{\text{Number of days on line 33}}{365} \times .07$ ▶	\$	\$	\$	\$
Rate Period 3	January 1, 2002—April 15, 2002				
	35 Number of days from the date shown above line 35 to the date the amount on line 29 was paid or 4/15/02, whichever is earlier	Days:	Days:	Days:	Days:
36	Underpayment on line 29 (see page 6 of the instructions) × $\frac{\text{Number of days on line 35}}{365} \times .06$ ▶	\$	\$	\$	\$
37	Penalty. Add all amounts on lines 32 and 34 in all columns. Enter the total here and on Form 1040, line 71; Form 1040A, line 46; Form 1040NR, line 69; Form 1040NR-EZ, line 26; or Form 1041, line 26, but do not file Form 2210 unless you checked one or more of the boxes in Part I . . . ▶				\$

Schedule AI—Annualized Income Installment Method (See pages 5 and 6 of the instructions.)

Estates and trusts, **do not** use the period ending dates shown to the right. Instead, use the following: 2/28/01, 4/30/01, 7/31/01, and 11/30/01.

	(a) 1/1/01–3/31/01	(b) 1/1/01–5/31/01	(c) 1/1/01–8/31/01	(d) 1/1/01–12/31/01
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Part I Annualized Income Installments

- 1 Enter your adjusted gross income for each period (see instructions). (Estates and trusts, enter your taxable income without your exemption for each period.)
 - 2 Annualization amounts. (Estates and trusts, see instructions.)
 - 3 Annualized income. Multiply line 1 by line 2
 - 4 Enter your itemized deductions for the period shown in each column. If you do not itemize, enter -0- and skip to line 7. (Estates and trusts, enter -0-, skip to line 9, and enter the amount from line 3 on line 9.)
 - 5 Annualization amounts
 - 6 Multiply line 4 by line 5 (see instructions if line 3 is more than \$66,475)
 - 7 In each column, enter the full amount of your standard deduction from Form 1040, line 36, or Form 1040A, line 22 (Form 1040NR or 1040NR-EZ filers, enter -0-. **Exception:** Indian students and business apprentices, enter standard deduction from Form 1040NR, line 35 or Form 1040NR-EZ, line 11.)
 - 8 Enter the **larger** of line 6 or line 7.
 - 9 Subtract line 8 from line 3
 - 10 In each column, multiply \$2,900 by the total number of exemptions claimed (see instructions if line 3 is more than \$99,725). (Estates and trusts and Form 1040NR or 1040NR-EZ filers, enter the exemption amount shown on your tax return.)
 - 11 Subtract line 10 from line 9
 - 12 Figure your tax on the amount on line 11 (see instructions)
 - 13 Form 1040 filers only, complete Part II and enter your self-employment tax from line 34 below.
 - 14 Enter other taxes for each payment period (see instructions)
 - 15 Total tax. Add lines 12, 13, and 14
 - 16 For each period, enter the same type of credits as allowed on Form 2210, lines 2, 5, 6, and 7 (see instructions)
 - 17 Subtract line 16 from line 15. If zero or less, enter -0-
 - 18 Applicable percentage
 - 19 Multiply line 17 by line 18
- Caution:** Complete lines 20–25 of one column before going to the next column.
- 20 Add the amounts in all previous columns of line 25
 - 21 Subtract line 20 from line 19. If zero or less, enter -0-
 - 22 Enter 25% (.25) of line 14 on page 1 of Form 2210 in each column
 - 23 Subtract line 25 of the previous column from line 24 of the previous column
 - 24 Add lines 22 and 23 and enter the total
 - 25 Enter the **smaller** of line 21 or line 24 here and on Form 2210, line 22 ▶

1				
2	4	2.4	1.5	1
3				
4				
5	4	2.4	1.5	1
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18	22.5%	45%	67.5%	90%
19				
20				
21				
22				
23				
24				
25				

Part II Annualized Self-Employment Tax

- 26 Net earnings from self-employment for the period (see instructions)
- 27 Prorated social security tax limit
- 28 Enter actual wages for the period subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax
- 29 Subtract line 28 from line 27. If zero or less, enter -0-
- 30 Annualization amounts
- 31 Multiply line 30 by the **smaller** of line 26 or line 29
- 32 Annualization amounts
- 33 Multiply line 26 by line 32
- 34 Add lines 31 and 33. Enter the result here and on line 13 above ▶

26				
27	\$20,100	\$33,500	\$53,600	\$80,400
28				
29				
30	0.496	0.2976	0.186	0.124
31				
32	0.116	0.0696	0.0435	0.029
33				
34				

SECTION 9.33 FORM 2210 - PAGE 1

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0308
		4	5 -	8	*****
0000		6	9 -	14	"FRMbbb"
0001		6	15 -	20	"2210bb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnnn
0004		1	35 -	35	BLANK
0005		7	36 -	42	N 0000001
0010		9	43 -	51	N
0012	PT I 1a	1	52 -	52	"X" OR BLANK
0014	PT I 1b	1	53 -	53	"X" OR BLANK
0016	PT I 1c	1	54 -	54	"X" OR BLANK
0019	PT I 1f	1	55 -	55	"X" OR BLANK
0020	PT II 2	12	56 -	67	N
0030	PT II 3	12	68 -	79	N
0040	PT II 4	12	80 -	91	N
0050	PT II 5	12	92 -	103	N
0055	PT II 6	12	104 -	115	N
0060	PT II 7	12	116 -	127	N
0070	PT II 8	12	128 -	139	N
0080	PT II 9	12	140 -	151	N
0090	PT II 10	12	152 -	163	N
0100	PT II 11	12	164 -	175	N

SECTION 9.33 FORM 2210 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0110	LINE 9 MINUS LINE 11	PT II 12	12	176	- 187	N
0120	PRIOR YEAR TAX	PT II 13	12	188	- 199	N
0130	REQUIRED ANNUAL PAYMENT (ENTER SMALLER OF LINE 10 OR LINE 13)	PT II 14	12	200	- 211	N
0140	AMOUNT FROM LINE 11	PT III 15	12	212	- 223	N
0150	TOTAL AMOUNT OF ESTIMATED TAX PAYMENTS	PT III 16	12	224	- 235	N
0160	ADD LINES 15 AND 16	PT III 17	12	236	- 247	N
0170	TOTAL UNDERPAYMENTS FOR YEAR (LINE 14 MINUS LINE 17)	PT III 18	12	248	- 259	N
0180	MULTIPLY LINE 18 BY XXXXX	PT III 19	12	260	- 271	N
0190	COMPUTATION OF LINE 18 FOR TOTAL ON LINE 20	PT III 20	12	272	- 283	N
0200	PENALTY (LINE 19 MINUS LINE 20)	PT III 21	12	284	- 295	N
0210	WAIVER AMOUNT	PT III 21	12	296	- 307	N
	RECORD TERMINUS CHARACTER		1	308	- 308	"#"

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0562
		4	5 -	8	*****
0220		6	9 -	14	"FRMbbb"
0221		6	15 -	20	"2210bb"
0222		5	21 -	25	"PG02b"
0223		9	26 -	34	N nnnnnnnnn
0224		1	35 -	35	BLANK
0225		7	36 -	42	N 0000001
0240	PT IV 22(a)	12	43 -	54	N
0250	PT IV 22(b)	12	55 -	66	N
0260	PT IV 22(c)	12	67 -	78	N
0270	PT IV 22(d)	12	79 -	90	N
0280	PT IV 23(a)	12	91 -	102	N
0290	PT IV 27(a)	12	103 -	114	N
0300	PT IV 29(a)	12	115 -	126	N
0310	PT IV 30(a)	12	127 -	138	N
0320	PT IV 23(b)	12	139 -	150	N
0330	PT IV 24(b)	12	151 -	162	N
0340	PT IV 25(b)	12	163 -	174	N
0350	PT IV 26(b)	12	175 -	186	N

SECTION 9.34 FORM 2210 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0360	LINE 25 MINUS LINE 26 6/15/XXXX	PT IV 27(b)	12	187	-	198	N
0370	REMAINING UNDERPAYMENT 6/15/XXXX	PT IV 28(b)	12	199	-	210	N
0380	UNDERPAYMENT 6/15/XXXX	PT IV 29(b)	12	211	-	222	N
0390	OVERPAYMENT 6/15/XXXX	PT IV 30(b)	12	223	-	234	N
0400	ESTIMATED TAX PAID AND TAX WITHHELD 9/15/XXXX	PT IV 23(c)	12	235	-	246	N
0410	ENTER AMOUNT FROM LINE 30(b) 9/15/XXXX	PT IV 24(c)	12	247	-	258	N
0420	ADD LINES 23 AND 24 9/15/XXXX	PT IV 25(c)	12	259	-	270	N
0430	ADD LINES 28(b) AND 29(b) 9/15/XXXX	PT IV 26(c)	12	271	-	282	N
0440	LINE 25 MINUS LINE 26 9/15/XXXX	PT IV 27(c)	12	283	-	294	N
0450	REMAINING UNDERPAYMENT 9/15/XXXX	PT IV 28(c)	12	295	-	306	N
0460	UNDERPAYMENT 9/15/XXXX	PT IV 29(c)	12	307	-	318	N
0470	OVERPAYMENT 9/15/XXXX	PT IV 30(c)	12	319	-	330	N
0480	ESTIMATED TAX PAID AND TAX WITHHELD 1/15/XXXX	PT IV 23(d)	12	331	-	342	N
0490	AMOUNT FROM LINE 30(c) 1/15/XXXX	PT IV 24(d)	12	343	-	354	N
0500	ADD LINES 23 AND 24 1/15/XXXX	PT IV 25(d)	12	355	-	366	N
0510	ADD LINES 28(c) AND 29(c) 1/15/XXXX	PT IV 26(d)	12	367	-	378	N
0520	LINE 25 MINUS LINE 26 1/15/XXXX	PT IV 27(d)	12	379	-	390	N

SECTION 9.34 FORM 2210 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0540	UNDERPAYMENT 1/15/XXXX	PT IV 29(d)	12	391 -	402	N
0560	NUMBER OF DAYS FROM 4/15/XXXX	SEC B 31(a)	3	403 -	405	N
0570	PENALTY 4/15/XXXX	SEC B 32(a)	12	406 -	417	N
0580	NUMBER OF DAYS FROM 6/15/XXXX	SEC B 31(b)	3	418 -	420	N
0590	PENALTY 6/15/XXXX	SEC B 32(b)	12	421 -	432	N
0600	NUMBER OF DAYS FROM 6/30/XXXX	SEC B 33(a)	3	433 -	435	N
0610	PENALTY 6/30/XXXX	SEC B 34(a)	12	436 -	447	N
0612	NO OF DAYS FROM 6/30/XXXX	B 33(b)	3	448 -	450	N
0614	PENALTY 6/30/XXXX	B 34(b)	12	451 -	462	N
0616	NO OF DAYS FROM 9/24/XXXX	B 33(c)	3	463 -	465	N
0618	PENALTY 9/24/XXXX	B 34(c)	12	466 -	477	N
0622	NO OF DAYS FROM 12/31/XXXX	B 35(a)	3	478 -	480	N
0624	PENALTY 12/31/XXXX	B 36(a)	12	481 -	492	N
0626	NO OF DAYS FROM 12/31/XXXX	B 35(b)	3	493 -	495	N
0628	PENALTY 12/31/XXXX	B 36(b)	12	496 -	507	N
0630	NO OF DAYS FROM 12/31/XXXX	B 35(c)	3	508 -	510	N
0631	PENALTY 12/31/XXXX	B 36(c)	12	511 -	522	N
0632	NO OF DAYS FROM 1/15/XXXX	B 35(d)	3	523 -	525	N
0634	PENALTY 1/15/XXXX	B 36(d)	12	526 -	537	N
0635	WAIVER AMOUNT	SEC B 37	12	538 -	549	N
0645	PENALTY TOTAL	SEC B 37	12	550 -	561	N
	RECORD TERMINUS CHARACTER		1	562 -	562	"#"

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	1363
	START RECORD SENTINEL		4	5 -	8	*****
1270	RECORD ID		6	9 -	14	"FRMbbb"
1271	FORM NUMBER		6	15 -	20	"2210bb"
1272	PAGE NUMBER		5	21 -	25	"PG03b"
1273	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
1274	FILLER		1	35 -	35	BLANK
1275	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
1280	ADJUSTED GROSS INCOME	PT I 1a	12	43 -	54	N
1290	MULTIPLY LINE 1 BY LINE 2	PT I 3a	12	55 -	66	N
1300	ITEMIZED DEDUCTIONS	PT I 4a	12	67 -	78	N
1310	MULTIPLY LINE 4 BY LINE 5	PT I 6a	12	79 -	90	N
1320	FORM 1040, LINE 34	PT I 7a	12	91 -	102	N
1330	LARGER AMOUNT OF LINE 6 OR LINE 7	PT I 8a	12	103 -	114	N
1340	LINE 3 MINUS LINE 8	PT I 9a	12	115 -	126	N
1350	FORM 1041, LINE 20	PT I 10a	12	127 -	138	N
1360	LINE 9 MINUS LINE 10	PT I 11a	12	139 -	150	N
1370	TAX AMOUNT	PT I 12a	12	151 -	162	N
1380	SELF-EMPLOYMENT TAX AMOUNT	PT I 13a	12	163 -	174	NO ENTRY
1390	OTHER TAXES FOR EACH PAYMENT PERIOD	PT I 14a	12	175 -	186	N
1400	TOTAL TAX	PT I 15a	12	187 -	198	N
1410	ALLOWED CREDITS	PT I 16a	12	199 -	210	N

SECTION 9.35 FORM 2210 - PAGE 3

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1420	LINE 15 MINUS LINE 16	PT I 17a	12	211 -	222	N
1430	MULTIPLY LINE 17 BY LINE 18	PT I 19a	12	223 -	234	N
1440	LINE 19 MINUS LINE 20	PT I 21a	12	235 -	246	N
1450	AMOUNT OF LINE 13 ON FORM 2210, DIVIDED BY 4	PT I 22a	12	247 -	258	N
1460	ADD LINES 22 AND 23	PT I 24a	12	259 -	270	N
1480	SMALLER OF LINE 21 OR LINE 24	PT I 25a	12	271 -	282	N
1490	ADJUSTED GROSS INCOME	PT I 1b	12	283 -	294	N
1500	MULTIPLY LINE 1 BY LINE 2	PT I 3b	12	295 -	306	N
1510	ITEMIZED DEDUCTIONS	PT I 4b	12	307 -	318	N
1520	MULTIPLY LINE 4 BY LINE 5	PT I 6b	12	319 -	330	N
1530	FORM 1040, LINE 34	PT I 7b	12	331 -	342	N
1540	LARGER AMOUNT OF LINE 6 OR LINE 7	PT I 8b	12	343 -	354	N
1550	LINE 3 MINUS LINE 8	PT I 9b	12	355 -	366	N
1560	FORM 1041, LINE 20	PT I 10b	12	367 -	378	N
1570	LINE 9 MINUS LINE 10	PT I 11b	12	379 -	390	N
1580	TAX AMOUNT	PT I 12b	12	391 -	402	N
1590	SELF-EMPLOYMENT TAX AMOUNT	PT I 13b	12	403 -	414	NO ENTRY
1600	OTHER TAXES FOR EACH PAYMENT PERIOD	PT I 14b	12	415 -	426	N
1610	TOTAL TAX	PT I 15b	12	427 -	438	N
1620	ALLOWED CREDITS	PT I 16b	12	439 -	450	N
1630	LINE 15 MINUS LINE 16	PT I 17b	12	451 -	462	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1640	MULTIPLY LINE 17 BY LINE 18	PT I 19b	12	463 -	474	N
1650	COMBINED PRECEDING AMOUNTS OF LINE 26	PT I 20b	12	475 -	486	N
1660	LINE 19 MINUS LINE 20	PT I 21b	12	487 -	498	N
1670	AMOUNT OF LINE 13 ON FORM 2210, DIVIDED BY 4	PT I 22b	12	499 -	510	N
1680	LINE 24 OF PREVIOUS COL MINUS LINE 25 OF PREVIOUS COLUMN	PT I 23b	12	511 -	522	N
1690	LINE 22 PLUS LINE 23	PT I 24b	12	523 -	534	N
1710	SMALLER OF LINE 21 OR LINE 24	PT I 25b	12	535 -	546	N
1720	ADJUSTED GROSS INCOME	PT 1 1c	12	547 -	558	N
1730	MULTIPLY LINE 1 BY LINE 2	PT I 3c	12	559 -	570	N
1740	ITEMIZED DEDUCTIONS	PT I 4c	12	571 -	582	N
1750	MULTIPLY LINE 4 BY LINE 5	PT I 6c	12	583 -	594	N
1760	FORM 1040, LINE 34	PT I 7c	12	595 -	606	N
1770	LARGER AMOUNT OF LINE 6 OR LINE 7	PT I 8c	12	607 -	618	N
1780	LINE 3 MINUS LINE 8	PT I 9c	12	619 -	630	N
1790	FORM 1041, LINE 20	PT I 10c	12	631 -	642	N
1800	LINE 9 MINUS LINE 10	PT I 11c	12	643 -	654	N
1810	TAX AMOUNT	PT I 12c	12	655 -	666	N
1820	SELF-EMPLOYMENT TAX AMOUNT	PT I 13c	12	667 -	678	NO ENTRY
1830	OTHER TAXES FOR EACH PAYMENT PERIOD	PT I 14c	12	679 -	690	N
1840	TOTAL TAX	PT I 15c	12	691 -	702	N
1850	ALLOWED CREDITS	PT I 16c	12	703 -	714	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1860	LINE 15 MINUS LINE 16	PT I 17c	12	715 -	726	N
1870	LINE 17 x LINE 18	PT I 19c	12	727 -	738	N
1880	COMBINED PRECEDING AMOUNTS OF LINE 26	PT I 20c	12	739 -	750	N
1890	LINE 19 MINUS LINE 20	PT I 21c	12	751 -	762	N
1900	AMOUNT OF LINE 13 ON FORM 2210, DIVIDED BY 4	PT I 22c	12	763 -	774	N
1910	LINE 24 OF PREVIOUS COL MINUS LINE 25 OF PREVIOUS COLUMN	PT I 23c	12	775 -	786	N
1920	ADD LINES 22 AND 23	PT I 24c	12	787 -	798	N
1940	SMALLER OF LINE 21 OR LINE 24	PT I 25c	12	799 -	810	N
1950	ADJUSTED GROSS INCOME	PT I 1d	12	811 -	822	N
1960	MULTIPLY LINE 1 BY LINE 2	PT I 3d	12	823 -	834	N
1970	ITEMIZED DEDUCTIONS	PT I 4d	12	835 -	846	N
1980	MULTIPLY LINE 4 BY LINE 5	PT I 6d	12	847 -	858	N
1990	FORM 1040, LINE 34	PT I 7d	12	859 -	870	N
2000	LARGER AMOUNT OF LINE 6 OR LINE 7	PT I 8d	12	871 -	882	N
2010	LINE 3 MINUS LINE 8	PT I 9d	12	883 -	894	N
2020	FORM 1041, LINE 20	PT I 10d	12	895 -	906	N
2030	LINE 9 MINUS LINE 10	PT I 11d	12	907 -	918	N
2040	TAX AMOUNT	PT I 12d	12	919 -	930	N
2050	SELF-EMPLOYMENT TAX AMOUNT	PT I 13d	12	931 -	942	NO ENTRY
2060	OTHER TAXES FOR EACH PAYMENT PERIOD	PT I 14d	12	943 -	954	N
2070	ADD LINES 12,13, AND 14	PT I 15d	12	955 -	966	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2080	ALLOWED CREDITS	PT I 16d	12	967 -	978	N
2090	LINE 15 MINUS LINE 16	PT I 17d	12	979 -	990	N
2100	MULTIPLY LINE 17 BY LINE 18	PT I 19d	12	991 -	1002	N
2110	COMBINED PRECEDING AMOUNTS OF LINE 26	PT I 20d	12	1003 -	1014	N
2120	LINE 19 MINUS LINE 20	PT I 21d	12	1015 -	1026	N
2130	AMOUNT OF LINE 13 ON FORM 2210, DIVIDED BY 4	PT I 22d	12	1027 -	1038	N
2140	LINE 24 OF PREVIOUS COL MINUS LINE 25 OF PREVIOUS COLUMN	PT I 23d	12	1039 -	1050	N
2150	ADD LINES 22 AND 23	PT I 24d	12	1051 -	1062	N
2160	SMALLER OF LINE 21 OR LINE 24	PT I 25d	12	1063 -	1074	N
2170	NET SELF-EMPLOYMENT	PT II 26a	12	1075 -	1086	NO ENTRY
2190	WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 28a	12	1087 -	1098	NO ENTRY
2210	LINE 27 MINUS LINE 28	PT II 29a	12	1099 -	1110	NO ENTRY
2220	MULTIPLY LINE 30 BY THE SMALLER LINE 26 OR LINE 29	PT II 31a	12	1111 -	1122	NO ENTRY
2260	MULTIPLY LINE 26 BY LINE 32	PT II 33a	12	1123 -	1134	NO ENTRY
2270	ADD LINES 31 AND 33	PT II 34a	12	1135 -	1146	NO ENTRY
2280	NET SELF-EMPLOYMENT	PT II 26b	12	1147 -	1158	NO ENTRY
2300	WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 28b	12	1159 -	1170	NO ENTRY
2320	LINE 27 MINUS LINE 28	PT II 29b	12	1171 -	1182	NO ENTRY
2330	MULTIPLY LINE 30 BY THE SMALLER LINE 26 OR LINE 29	PT II 31b	12	1183 -	1194	NO ENTRY

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2370	MULTIPLY LINE 26 BY LINE 32	PT II 33b	12	1195	- 1206	NO ENTRY
2380	ADD LINES 31 AND 33	PT II 34b	12	1207	- 1218	NO ENTRY
2390	NET SELF-EMPLOYMENT	PT II 26c	12	1219	- 1230	NO ENTRY
2410	WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 28c	12	1231	- 1242	NO ENTRY
2430	LINE 27 MINUS LINE 28	PT II 29c	12	1243	- 1254	NO ENTRY
2440	MULTIPLY LINE 30 BY THE SMALLER OF LINE 26 OR LINE 29	PT II 31c	12	1255	- 1266	NO ENTRY
2480	MULTIPLY LINE 26 BY LINE 32	PT II 33c	12	1267	- 1278	NO ENTRY
2490	ADD LINES 31 AND 33	PT II 34c	12	1279	- 1290	NO ENTRY
2500	NET SELF-EMPLOYMENT	PT II 26d	12	1291	- 1302	NO ENTRY
2520	WAGES SUBJECT TO SOCIAL SECURITY OR RAILROAD RETIREMENT TAX	PT II 28d	12	1303	- 1314	NO ENTRY
2540	LINE 27 MINUS LINE 28	PT II 29d	12	1315	- 1326	NO ENTRY
2550	MULTIPLY LINE 30 BY THE SMALLER LINE 26 OR LINE 29	PT II 31d	12	1327	- 1338	NO ENTRY
2590	MULTIPLY LINE 26 BY LINE 32	PT II 33d	12	1339	- 1350	NO ENTRY
2600	ADD LINES 31 AND 33	PT II 34d	12	1351	- 1362	NO ENTRY
	RECORD TERMINUS CHARACTER		1	1363	- 1363	"#"

**Underpayment of Estimated Tax by
Farmers and Fishermen**

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 1040, Form 1040NR, or Form 1041.**
▶ **See instructions on back.**

Attachment
Sequence No. **06A**

Name(s) shown on tax return

Identifying number

In most cases, you do not need to file Form 2210-F. The IRS will figure any penalty you owe and send you a bill. File Form 2210-F only if one or both of the boxes in Part I apply to you. If you do not need to file Form 2210-F, you still may use it to figure your penalty. Enter the amount from line 19 on the penalty line of your return but do not attach Form 2210-F.

Part I Reasons for Filing—If 1a below applies to you, you may be able to lower or eliminate your penalty. But you **must** check that box and file Form 2210-F with your tax return. If 1b below applies to you, check that box and file Form 2210-F with your tax return.

- 1 Check whichever boxes apply (if neither applies, see the text above Part I and **do not file Form 2210-F**):
 - a You request a **waiver**. In certain circumstances, the IRS will waive all or part of the penalty. See the instructions for **Waiver of Penalty**.
 - b Your required annual payment (line 14 below) is based on your 2000 tax and you filed or are filing a joint return for either 2000 or 2001 but not for both years.

Part II Figure Your Underpayment

2	Enter your 2001 tax after credits from Form 1040, line 52; Form 1040NR, line 48; or Form 1041, Schedule G, line 4	2		
3	Other taxes. See instructions	3		
4	Add lines 2 and 3	4		
5	Earned income credit	5		
6	Additional child tax credit	6		
7	Credit for Federal tax paid on fuels	7		
8	Add lines 5, 6, and 7	8		
9	Current year tax. Subtract line 8 from line 4	9		
10	Multiply line 9 by 66%	10		
11	Withholding taxes. Do not include any estimated tax payments on this line. See instructions	11		
12	Subtract line 11 from line 9. If less than \$1,000, stop here; you do not owe the penalty. Do not file Form 2210	12		
13	Enter the tax shown on your 2000 tax return. Caution: See instructions	13		
14	Required annual payment. Enter the smaller of line 10 or line 13	14		
	Note: If line 11 is equal to or more than line 14, stop here; you do not owe the penalty. Do not file Form 2210-F unless you checked box 1b above.			
15	Enter the estimated tax payments you made by January 15, 2002, and any Federal income tax and excess social security or railroad retirement tax withheld during 2001.	15		
16	Underpayment. Subtract line 15 from line 14. If the result is zero or less, stop here; you do not owe the penalty. Do not file Form 2210-F unless you checked box 1b above	16		

Part III Figure the Penalty

17	Enter the date the amount on line 16 was paid or April 15, 2002, whichever is earlier	17	/	/ 02
18	Number of days from January 15, 2002, to the date on line 17	18		
19	Penalty. Underpayment on line 16 × $\frac{\text{Number of days on line 18}}{365}$ × .xx ▶	19		
	<ul style="list-style-type: none"> • Form 1040 filers, enter the amount from line 19 on Form 1040, line 71. • Form 1040NR filers, enter the amount from line 19 on Form 1040NR, line 69. • Form 1041 filers, enter the amount from line 19 on Form 1041, line 26. 			

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0275
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"2210Fb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0010	IDENTIFYING NUMBER		9	43 -	51	N
0013	WAIVER OF PENALTY BOX	1a	1	52 -	52	"X" OR BLANK
0016	FILING STATUS CHANGED BOX	1b	1	53 -	53	"X" OR BLANK
0020	CURRENT YEAR TAX AFTER CREDITS	2	12	54 -	65	N
0030	OTHER TAXES	3	12	66 -	77	N
0040	TAXES SUBTOTAL	4	12	78 -	89	N
0050	EARNED INCOME CREDIT	5	12	90 -	101	N
0055	ADDITIONAL CHILD TAX CREDIT	6	12	102 -	113	N
0060	CREDIT FOR FEDERAL TAX PAID ON FUELS	7	12	114 -	125	N
0070	CREDIT SUBTOTAL	8	12	126 -	137	N
0080	CURRENT YEAR TAX	9	12	138 -	149	N
0090	TWO THIRDS CREDIT	10	12	150 -	161	N
0100	WITHHOLDING TAXES	11	12	162 -	173	N
0110	CURRENT TAXES OWED	12	12	174 -	185	N
0120	PRIOR YEAR'S TAX	13	12	186 -	197	N
0130	REQUIRED ANNUAL PAYMENT	14	12	198 -	209	N
0140	AMOUNTS WITHHELD/ AMOUNTS PAID OR CREDITED	15	12	210 -	221	N
0150	UNDERPAYMENT	16	12	222 -	233	N
0160	EARLIER OF PAYMENT OR TAX DUE DATE	17	8	234 -	241	YYYYMMDD
0170	NUMBER OF PENALTY DAYS	18	3	242 -	244	N
0176	WAIVED AMOUNT	19	12	245 -	256	N

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
@0177	WAIVER EXPLANATION	19	6	257 - 262	"STMbnn" OR BLANK
0180	UNDERPAYMENT PENALTY FARMERS FISHERMEN	19	12	263 - 274	N
	RECORD TERMINUS CHARACTER		1	275 - 275	"#"

VOID CORRECTED

(99)

Regulated investment company or real estate investment trust's name, address, and ZIP code	OMB No. 1545-0145 2001 Form 2439	<p align="center">Notice to Shareholder of Undistributed Long-Term Capital Gains</p> <p align="center">For calendar year 2001, or other tax year of the regulated investment company or the real estate investment trust beginning, 2001, and ending, 20</p>	
Regulated investment company or real estate investment trust's identification number	1a Total undistributed long-term capital gains \$		<p align="center">Copy A</p> <p align="center">Attach to Form 1120-RIC or Form 1120-REIT</p> <p align="center">For Instructions and Paperwork Reduction Act Notice, see back of Copies A and D.</p>
Shareholder's identification number	1b 28% rate gain \$	1c Qualified 5-year gain \$	
Shareholder's name, address, and ZIP code	1d Unrecaptured sec. 1250 gain \$	1e Section 1202 gain \$	
	2 Tax paid by the regulated investment company or real estate investment trust on the box 1a gains \$		

Form **2439**

Cat. No. 11858E

Department of the Treasury - Internal Revenue Service

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0402
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"2439bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001-9999999
0010	VOID INDICATOR BOX		1	43 -	43	"X" OR BLANK
0020	CORRECTED INDICATOR BOX		1	44 -	44	"X" OR BLANK
0030	FISCAL YEAR BEGINNING		8	45 -	52	FORMAT: YYYYMMDD OR BLANK
0040	FISCAL YEAR ENDING		8	53 -	60	FORMAT: YYYYMMDD OR BLANK
0050	NAME CONTROL		4	61 -	64	NO ENTRY
0060	RIC/REIT NAME		35	65 -	99	A/N
0070	RIC/REIT NAME (2)		35	100 -	134	A/N
0080	RIC/REIT STREET ADDRESS		35	135 -	169	A/N
0090	RIC/REIT CITY		22	170 -	191	A/N
0100	RIC/REIT STATE		2	192 -	193	A/N
0110	RIC/REIT ZIP CODE		12	194 -	205	N OR nnnnnnnnnbbb OR nnnnnbbbbbbb OR BLANK
0120	EMPLOYER IDENTIFICATION NUMBER (RIC/REIT)		9	206 -	214	N
0130	EMPLOYER IDENTIFICATION NUMBER (SHAREHOLDER)		9	215 -	223	N
0140	SHAREHOLDER NAME		35	224 -	258	A/N
0150	SHAREHOLDER STREET ADDRESS		35	259 -	293	A/N
0160	SHAREHOLDER CITY		22	294 -	315	A/N
0170	SHAREHOLDER STATE		2	316 -	317	A/N
0180	SHAREHOLDER ZIP CODE		12	318 -	329	N OR nnnnnnnnnbbb OR nnnnnbbbbbbb OR BLANK

SECTION 9.39 FORM 2439 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0190	TOTAL UNDISTRIBUTED LT CAPITAL GAINS	1a	12	330	-	341	N
0200	28% RATE GAIN	1b	12	342	-	353	N
0205	QUALIFIED 5-YEAR GAIN	1c	12	354	-	365	N
0210	UNRECAPTURED SEC 1250 GAIN	1d	12	366	-	377	N
0220	SECTION 1202 GAIN	1e	12	378	-	389	N
0230	TAX PAID BY RIC/REIT	2	12	390	-	401	N
	RECORD TERMINUS CHARACTER		1	402	-	402	"#"

Investment Credit

▶ Attach to your return.
 ▶ See separate instructions.

2001

Attachment
 Sequence No. **52**

Identifying number

Part I Current Year Credit

1 Rehabilitation credit (see instructions for requirements that must be met):			
a Check this box if you are electing under section 47(d)(5) to take your qualified rehabilitation expenditures into account for the tax year in which paid (or, for self-rehabilitated property, when capitalized). See instructions. Note: <i>This election applies to the current tax year and to all later tax years. You may not revoke this election without IRS consent.</i> <input type="checkbox"/>			
Enter the amount of qualified rehabilitation expenditures and multiply by the percentage shown:			
b	Pre-1936 buildings \$ × 10% (.10)	1b	
c	Certified historic structures \$ × 20% (.20)	1c	
(1) Enter the assigned NPS project number or the pass-through entity's employer identification number (see instructions)			
(2) Enter the date that the NPS approved the Request for Certification of Completed Work (see instructions) / /			
d (1)	Enter the date on which the 24- or 60-month measuring period begins / / and ends / /		
(2) Enter the adjusted basis of the building as of the beginning date above (or the first day of your holding period, if later) \$			
(3) Enter the amount of the qualified rehabilitation expenditures incurred, or treated as incurred, during the period on line 1d(1) above \$			
e	Rehabilitation credit from an electing large partnership (Schedule K-1 (Form 1065-B), box 9)	1e	
2	Energy credit. Enter the basis of energy property placed in service during the tax year (see instructions) \$ × 10% (.10)	2	
3	Reforestation credit. Enter the amortizable basis of qualified timber property acquired during the tax year (see instructions) \$ × 10% (.10)	3	
4	Credit from cooperatives. Enter the unused investment credit from cooperatives	4	
5	Total current year investment credit. Add lines 1b through 4	5	

Part II Tax Liability Limit (See Who Must File Form 3800 to find out if you complete Part II or file Form 3800.)

6	Regular tax before credits (see instructions)	6	
7	Alternative minimum tax (see instructions)	7	
8	Add lines 6 and 7	8	
9a	Foreign tax credit	9a	
b	Credit for child and dependent care expenses (Form 2441, line 9)	9b	
c	Credit for the elderly or the disabled (Schedule R (Form 1040), line 20)	9c	
d	Education credits (Form 8863, line 18)	9d	
e	Rate reduction credit (Form 1040, line 47)	9e	
f	Child tax credit (Form 1040, line 48)	9f	
g	Mortgage interest credit (Form 8396, line 11)	9g	
h	Adoption credit (Form 8839, line 14)	9h	
i	District of Columbia first-time homebuyer credit (Form 8859, line 11)	9i	
j	Possessions tax credit (Form 5735, line 17 or 27)	9j	
k	Credit for fuel from a nonconventional source	9k	
l	Qualified electric vehicle credit (Form 8834, line 20)	9l	
m	Add lines 9a through 9l	9m	
10	Net income tax. Subtract line 9m from line 8. If zero, skip lines 11 through 14 and enter -0- on line 15	10	
11	Tentative minimum tax (see instructions)	11	
12	Net regular tax. Subtract line 9m from line 6. If zero or less, enter -0-	12	
13	Enter 25% (.25) of the excess, if any, of line 12 over \$25,000 (see instructions)	13	
14	Enter the greater of line 11 or line 13	14	
15	Subtract line 14 from line 10. If zero or less, enter -0-	15	
16	Investment credit allowed for the current year. Enter the smaller of line 5 or line 15 here and on Form 1040, line 50; Form 1120, Schedule J, line 6d; Form 1120-A, Part I, line 4a; Form 1041, Schedule G, line 2c; or the applicable line of your return	16	



FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0547
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"3468bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0020	SECTION 47(d)(5)ELECTION	1a	1	43 -	43	"X" OR BLANK
@0025	REHABILITATION CREDIT ATTACHED STATEMENT	PT I 1(a)	6	44 -	49	"STMbnn" OR BLANK
0030	QUALIFIED REHABILITATION PRE-1936 BUILDINGS	PT I 1(b)	12	50 -	61	N
0040	CALCULATED EXPENDITURES PRE-1936 BUILDINGS	PT I 1(b)	12	62 -	73	N
0045	HISTORIC STRUCTURE CERTIFICATION ON FILE	PT I 1(c)	1	74 -	74	"X" OR BLANK
0050	QUALIFIED REHABILITATION CERTIFIED HISTORIC STRUCTURES	PT I 1(c)	12	75 -	86	N
0060	CALCULATED EXPENDITURES CERTIFIED HISTORIC STRUCTURES	PT I 1(c)	12	87 -	98	N
0070	QUALIFIED REHABILITATION NPS NUMBER ASSIGNED OR FLOW-THROUGH ENTITY'S ID #	PT I 1c(1)	18	99 -	116	N
0071	NPS APPROVAL DATE	PT I 1c(2)	8	117 -	124	YYYYMMDD
0074	TEST PERIOD BEGINNING DATE	PT I 1d(1)	8	125 -	132	YYYYMMDD
0075	TEST PERIOD END DATE	PT I 1d(1)	8	133 -	140	YYYYMMDD
0076	ADJUSTED BASIS OF BUILDING AMOUNT	PT I 1d(2)	12	141 -	152	N
0077	QUALIFIED REHABILITATION EXPENDITURES AMOUNT	PT I 1d(3)	12	153 -	164	N
0080	REHABILITATION CREDIT	PT I 1e	12	165 -	176	N
0090	QUALIFIED REHABILITATION ENERGY CREDIT	PT I 2	12	177 -	188	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0100	CALCULATED EXPENDITURES ENERGY CREDIT	PT I 2	12	189 -	200	N
0110	QUALIFIED REHABILITATION REFORESTATION CREDIT	PT I 3	12	201 -	212	N
0120	CALCULATED EXPENDITURES REFORESTATION CREDIT	PT I 3	12	213 -	224	N
0130	CREDIT FROM COOPERATIVES	PT I 4	12	225 -	236	N
0140	TAX REFORM ACT LITERAL	PT I 5	7	237 -	243	"TRAbSEC" OR BLANK
0150	TAX REFORM ACT SECTION	PT I 5	9	244 -	252	A/N OR BLANK
0160	CURRENT YEAR INVESTMENT CREDIT (ADD LINES 1(b) - 4)	PT I 5	12	253 -	264	N
*0165	ALLOWABLE CREDIT STATEMENT ATTACHED	PT I 5	6	265 -	270	"STMbnn" OR BLANK
0170	REGULAR TAX BEFORE CREDITS	PT I 6	12	271 -	282	N
0180	ALTERNATIVE MINIMUM TAX	PT II 7	12	283 -	294	N
0190	REGULAR TAX PLUS ALTERNATIVE MINIMUM TAX	PT II 8	12	295 -	306	N
0200	FOREIGN TAX CREDIT (FORM 1116)	PT II 9a	12	307 -	318	N
0210	CHILD & DEPENDENT CARE CREDIT (FORM 2441)	PT II 9b	12	319 -	330	N
0220	ELDERLY OR DISABLED CREDIT (SCHEDULE R)	PT II 9c	12	331 -	342	N
0230	EDUCATION CREDIT (FORM 8863)	PT II 9d	12	343 -	354	N
0235	RATE REDUCTION CREDIT (FORM 1040, LINE 47)	9e	12	355 -	366	N
0240	CHILD TAX CREDIT (FORM 8812)	PT II 9f	12	367 -	378	N
0250	MORTGAGE INTEREST (FORM 8396)	PT II 9g	12	379 -	390	N
0260	ADOPTION CREDIT (FORM 8839)	PT II 9h	12	391 -	402	N
0270	FIRST TIME DISTRICT OF COLUMBIA HOME BUYER CREDIT FORM 8859	PT II 9i	12	403 -	414	N

SECTION 9.41 FORM 3468 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0280	POSSESSIONS TAX CREDIT (FORM 5735)	PT II 9j	12	415	-	426	NO ENTRY
0290	FUEL CREDIT NONCONVENTIONAL	PT II 9k	12	427	-	438	N
0300	ELECTRIC VEHICLE CREDIT (FORM 8834)	PT II 9L	12	439	-	450	N
0310	TOTAL CREDITS (ADD LINES 9a - 9L)	PT II 9m	12	451	-	462	N
0320	NET INCOME TAX	PT II 10	12	463	-	474	N
0330	TENTATIVE MINIMUM TAX	PT II 11	12	475	-	486	N
0340	NET REGULAR TAX	PT II 12	12	487	-	498	N
0350	ENTER \$25,000 OF EXCESS	PT II 13	12	499	-	510	N
0360	GREATER OF LINE 11 OR LINE 13	PT II 14	12	511	-	522	N
0370	SUBTRACT LINE 14 FROM LINE 10	PT II 15	12	523	-	534	N
0380	INVESTMENT CREDIT ALLOWED FOR CURRENT YEAR	PT II 16	12	535	-	546	N
	RECORD TERMINUS CHARACTER		1	547	-	547	"#"

▶ See the Instructions on page 3.
▶ Attach this form to your income tax return.

Name (as shown on your income tax return)	Taxpayer identification number
---	--------------------------------

Caution: You cannot claim any amounts on Form 4136 that you claimed on Form 8849 or Schedule C (Form 720).

1 Nontaxable Use of Gasoline and Gasohol					
Caution: Gasoline wholesale distributors cannot make claims on line 1. Use Schedule 4 (Form 8849) or Schedule C (Form 720) to make these claims.	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Off-highway business use of gasoline		\$.184		} \$	362
b Use of gasoline on a farm for farming purposes		.184			
c Other nontaxable use of gasoline		.184			
d 10% gasohol		.131		\$	359
e 7.7% gasohol		.14319			375
f 5.7% gasohol		.15379			376

2 Nontaxable Use of Aviation Gasoline					
Caution: Gasoline wholesale distributors cannot make claims on line 2. Use Schedule 4 (Form 8849) or Schedule C (Form 720) to make these claims.	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Use in commercial aviation (other than foreign trade)		\$.15		\$	354
b Other nontaxable use		.194			324

3 Nontaxable Use of Undyed Diesel Fuel

Claimant has the name and address of the person(s) who sold the diesel fuel to the claimant and the date(s) of the purchase(s) and if exported, the required proof of export.

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach a detailed explanation and check here

Caution: Claims cannot be made on line 3 for the tax on diesel fuel used on a farm for farming purposes. Only registered ultimate vendors may make those claims. See line 6.	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Nontaxable use		\$.244		\$	360
b Use in trains		.20			353
c Use in certain intercity and local buses		.17			350

4 Nontaxable Use of Undyed Kerosene

Claimant has the name and address of the person(s) who sold the kerosene to the claimant and the date(s) of the purchase(s) and if exported, the required proof of export.

Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach a detailed explanation and check here

Caution: Claims cannot be made on line 4 for the tax on kerosene used on a farm for farming purposes or for kerosene sold from a blocked pump. Only registered ultimate vendors may make those claims. See line 7.	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Nontaxable use		\$.244		\$	346
b Use in trains		.20			348
c Use in certain intercity and local buses		.17			347

5 Nontaxable Use of Aviation Fuel

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
a	Use in commercial aviation (other than foreign trade)	\$.175		\$		355
b	Other nontaxable use	.219				369
c	Other nontaxable uses	.044				377

6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel UV Registration No. ▶

Claimant sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained written consent of the buyer to take the claim; and obtained the required certificate from the buyer and has no reason to believe any information in the certificate is false. See the instructions for additional information to be submitted.

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach a detailed explanation and check here ▶

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
a	Use on a farm for farming purposes	\$.244	}	\$		360
b	Use by a state or local government	.244				

7 Sales by Registered Ultimate Vendors of Undyed Kerosene UV Registration No. ▶
UP Registration No. ▶

Claimant sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained written consent of the buyer to take the claim; and obtained the required certificate (for lines 7a and 7b) from the buyer and has no reason to believe any information in the certificate is false, or has the Regulations section 48.6427-10(e)(4) statement, if required, for line 7c. See the instructions for additional information to be submitted.

Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach a detailed explanation and check here ▶

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
a	Use on a farm for farming purposes	\$.244	}	\$		346
b	Use by a state or local government	.244				
c	Sales from a blocked pump	.244				

8 Nontaxable Use of Liquefied Petroleum Gas (LPG) in Certain Buses

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
a	Use in certain intercity and local buses	\$.062		\$		352
b	Use in qualified local and school buses	.136				361

9 Gasohol Blending

Claimant bought gasoline taxed at the full rate and blended it with alcohol to make gasohol. The gasohol was sold or used in claimant's trade or business. For **each batch** of gasohol, claimant has the required information relating to the purchase of the gasoline and alcohol used to make the gasohol and to support the amount claimed.

	(a) Rate	Gallons of		(d) Amount of credit (col. (a) × col. (b))	(e) CRN
		(b) Gasoline	(c) Alcohol		
a	10% gasohol	\$.03845		\$	356
b	7.7% gasohol	.02887			357
c	5.7% gasohol	.02092			363

10 Total income tax credit claimed. Add lines 1 through 9, column (d). Enter here and on Form 1040, line 65 (also check box b on line 65); Form 1120, line 32g; Form 1120-A, line 28g; Form 1120S, line 23c; Form 1041, line 24g; or the proper line of other returns . ▶	10	\$			
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FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0333
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"4136bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0010	OFF-HIGHWAY BUSINESS USE GALLONS	1a(c)	6	43 -	48	N
0020	USE ON FARM FOR FARMING PURPOSE GALLONS	1b(c)	6	49 -	54	N
0030	NONTAXABLE USE OF GASOLINE TYPE - 1	1c(a)	2	55 -	56	VALUES "03, 04, 05, 07" OR BLANK
0040	NONTAXABLE USE OF GASOLINE GALLONS - 1	1c(c)	6	57 -	62	N
0050	NONTAXABLE USE OF GASOLINE TYPE - 2	1c(a)	2	63 -	64	VALUES "03, 04, 05, 07" OR BLANK
0060	NONTAXABLE USE OF GASOLINE GALLONS - 2	1c(c)	6	65 -	70	N
0070	NONTAXABLE USE OF GASOLINE CREDIT AMOUNT	1c(d)	12	71 -	82	N
0080	GASOHOL 10% ALCOHOL TYPE	1d(a)	2	83 -	84	VALUES "01, 02, 03, 04, 05, 07" OR BLANK
0090	GASOHOL 10% ALCOHOL GALLONS	1d(c)	6	85 -	90	N
0100	NONTAXABLE USE OF GASOHOL 10% CREDIT AMOUNT	1d(d)	12	91 -	102	N
0110	GASOHOL 7.7% ALCOHOL TYPE	1e(a)	2	103 -	104	VALUES "01, 02, 03, 04, 05, 07" OR BLANK
0120	GASOHOL 7.7% ALCOHOL GALLONS	1e(c)	6	105 -	110	N
0130	NONTAXABLE USE OF GASOHOL 7.7% CREDIT AMOUNT	1e(d)	12	111 -	122	N
0140	GASOHOL 5.7% ALCOHOL TYPE	1f(a)	2	123 -	124	VALUES "01, 02, 03, 04, 05, 07" OR BLANK
0150	GASOHOL 5.7% ALCOHOL GALLONS	1f(c)	6	125 -	130	N
0160	NONTAXABLE USE OF GASOHOL 5.7% CREDIT AMOUNT	1f(d)	12	131 -	142	N

SECTION 9.43 FORM 4136 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0170	COMMERCIAL AVIATION GASOLINE GALLONS	2a(c)	6	143 - 148	N	
0180	NONTAXABLE USE OF COMMERCIAL AVIATION GAS CREDIT AMOUNT	2a(d)	12	149 - 160	N	
0190	NONTAXABLE USE OF AVIATION GASOLINE TYPE - 1	2b(a)	2	161 - 162		VALUES "01, 03, 09, 10" OR BLANK
0200	NONTAXABLE USE OF AVIATION GASOLINE GALLONS - 1	2b(c)	6	163 - 168	N	
0210	NONTAXABLE USE OF AVIATION GASOLINE TYPE - 2	2b(a)	2	169 - 170		VALUES "01, 03, 09, 10" OR BLANK
0220	NONTAXABLE USE OF AVIATION GASOLINE GALLONS - 2	2b(c)	6	171 - 176	N	
0230	NONTAXABLE USE OF AVIATION GAS TAX CREDIT AMOUNT	2b(d)	12	177 - 188	N	
@0240	DIESEL FUEL EXPLANATION	3	6	189 - 194		"STMbnn" OR BLANK
0250	DIESEL FUEL BOX	3	1	195 - 195		"X" OR BLANK
0260	NONTAXABLE USE OF DIESEL FUEL TYPE 1	3a(a)	2	196 - 197		VALUES "02, 03, 06, 07, 08" OR BLANK
0270	NONTAXABLE USE OF DIESEL FUEL GALLONS 1	3a(c)	6	198 - 203	N	
0280	NONTAXABLE USE OF DIESEL FUEL TYPE 2	3a(a)	3	204 - 206		VALUES "02b, 03b, 06b, 07b, 08b OR BLANK
0290	NONTAXABLE USE OF DIESEL FUEL GALLONS 2	3a(c)	6	207 - 212	N	
0300	NONTAXABLE USE OF DIESEL FUEL CREDIT AMOUNT	3a(d)	12	213 - 224	N	
0310	DIESEL FUEL TRAIN USE GALLONS	3b(c)	6	225 - 230	N	
0320	NONTAXABLE DIESEL FUEL TRAIN USE CREDIT AMOUNT	3b(d)	12	231 - 242	N	
0330	DIESEL FUEL CERTAIN INTERCITY AND LOCAL BUS USE GALLONS	3c(c)	6	243 - 248	N	
0340	DIESEL FUEL CERTAIN INTERCITY AND LOCAL BUS USE CREDIT AMOUNT	3c(d)	12	249 - 260	N	
@0350	KEROSENE EXPLANATION	4	6	261 - 266		"STMbnn" OR BLANK
0360	KEROSENE BOX	4	1	267 - 267		"X" OR BLANK
0370	NONTAXABLE USE OF KEROSENE TYPE 1	4a(a)	2	268 - 269		VALUES "02, 03, 06, 07, 08" OR BLANK
0380	NONTAXABLE USE OF KEROSENE GALLONS 1	4a(c)	6	270 - 275	N	

SECTION 9.43 FORM 4136 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0390	NONTAXABLE USE OF KEROSENE TYPE 2	4a(a)	3	276 - 278		VALUES "02b, 03b, 06b, 07b, 08b OR BLANK
0400	NONTAXABLE USE OF KEROSENE GALLONS 2	4a(c)	6	279 - 284	N	
0410	NONTAXABLE USE OF KEROSENE CREDIT AMOUNT	4a(d)	12	285 - 296	N	
0420	KEROSENE TRAIN USE GALLONS	4b(c)	6	297 - 302	N	
0430	NONTAXABLE KEROSENE TRAIN USE CREDIT AMOUNT	4b(d)	12	303 - 314	N	
0440	KEROSENE CERTAIN INTERCITY AND LOCAL BUS USE GALLONS	4c(c)	6	315 - 320	N	
0445	KEROSENE CERTAIN INTERCITY AND LOCAL BUS USE CREDIT AMOUNT	4c(d)	12	321 - 332	N	
	RECORD TERMINUS CHARACTER		1	333 - 333		"#"

SECTION 9.44 FORM 4136 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0334
	START RECORD SENTINEL		4	5 -	8	*****
0450	RECORD ID		6	9 -	14	"FRMbbb"
0451	FORM NUMBER		6	15 -	20	"4136bb"
0452	PAGE NUMBER		5	21 -	25	"PG02b"
0453	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0454	FILLER		1	35 -	35	BLANK
0455	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0460	COMMERCIAL AVIATION FUEL GASOLINE GALLONS	5a(c)	6	43 -	48	N
0470	NONTAXABLE USE OF COMMERCIAL AVIATION FUEL CREDIT AMOUNT	5a(d)	12	49 -	60	N
0480	NONTAXABLE USE OF AVIATION FUEL TYPE - 1	5b(a)	2	61 -	62	VALUES "01, 03, 09, 10, 11" OR BLANK
0490	NONTAXABLE USE OF AVIATION FUEL GALLONS - 1	5b(c)	6	63 -	68	N
0500	NONTAXABLE USE OF AVIATION FUEL OTHER \$.219 CREDIT AMOUNT	5b(d)	12	69 -	80	N
0510	NONTAXABLE USE OF AVIATION FUEL TYPE - 2	5c(a)	2	81 -	82	VALUES "01, 03, 09, 10, 11" OR BLANK
0520	NONTAXABLE USE OF AVIATION FUEL GALLONS - 2	5c(c)	6	83 -	88	N
0530	NONTAXABLE USE OF AVIATION FUEL TAX CREDIT AMOUNT	5c(d)	12	89 -	100	N
0550	UNDYED DIESEL FUEL UV REGISTRATION NUMBER	6	11	101 -	111	A/N (UVnnnnnnnnn)
@0560	UNDYED DIESEL FUEL EXPLANATION	6	6	112 -	117	"STMbnn" OR BLANK
0570	UNDYED DIESEL FUEL BOX	6	1	118 -	118	"X" OR BLANK
0580	USE OF UNDYED DIESEL FOR FARMING PURPOSE GALLONS	6a(c)	6	119 -	124	N
0590	USE OF UNDYED DIESEL BY STATE OR LOCAL GOVERNMENT GALLONS	6b(c)	6	125 -	130	N
0600	SALES BY VENDORS OF UNDYED DIESEL CREDIT AMOUNT	6b(d)	12	131 -	142	N
@0605	CUSTOMER INFORMATION ATTACH	6b	6	143 -	148	"STMbnn" OR BLANK
0610	UNDYED KEROSENE UV REGISTRATION NUMBER	7	11	149 -	159	A/N (UVnnnnnnnnn)

SECTION 9.44 FORM 4136 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0620	UNDYED KEROSENE UP REGISTRATION NUMBER	7	11	160 -	170	A/N (UPnnnnnnnnn)
@0630	VENDORS OF UNDYED KEROSENE EXPLANATION	7	6	171 -	176	"STMbnn" OR BLANK
0640	VENDORS OF UNDYED KEROSENE BOX	7	1	177 -	177	"X" OR BLANK
0650	USE OF KEROSENE FOR FARMING PURPOSE GALLONS	7a(c)	6	178 -	183	N
0660	USE OF UNDYED KEROSENE BY STATE OR LOCAL GOV'T GAL	7b(c)	6	184 -	189	N
@0665	CUSTOMER INFORMATION ATTACH	7b	6	190 -	195	"STMbnn" OR BLANK
0670	OTHER SALES OF UNDYED KEROSENE GALLONS	7c(c)	6	196 -	201	N
0680	SALES BY VENDORS OF UNDYED KEROSENE CREDIT AMOUNT	7c(d)	12	202 -	213	N
0690	INTERCITY AND LOCAL BUSES GALLONS	8a(c)	6	214 -	219	N
0700	USE OF LPG IN CERTAIN INTERCITY AND LOCAL BUSES CREDIT AMT	8a(d)	12	220 -	231	N
0710	QUALIFIED LOCAL AND SCHOOL BUSES GALLONS	8b(c)	6	232 -	237	N
0720	USE OF LPG IN QUALIFIED LOCAL AND SCHOOL BUSES CREDIT AMOUNT	8b(d)	12	238 -	249	N
0730	GASOHOL BLENDERS 10% ALCOHOL GASOLINE GALLONS	9a(b)	6	250 -	255	N
0740	GASOHOL BLENDERS 10% ALCOHOL GALLONS	9a(c)	6	256 -	261	N
0750	GASOHOL BLENDERS 10% CR AMOUNT	9a(d)	12	262 -	273	N
0760	GASOHOL BLENDERS 7.7% ALCOHOL GASOLINE GALLONS	9b(b)	6	274 -	279	N
0770	GASOHOL BLENDERS 7.7% ALCOHOL GALLONS	9b(c)	6	280 -	285	N
0780	GASOHOL BLENDERS 7.7% CR AMT	9b(d)	12	286 -	297	N
0790	GASOHOL BLENDERS 5.7% ALCOHOL GASOLINE GALLONS	9c(b)	6	298 -	303	N
0800	GASOHOL BLENDERS 5.7% ALCOHOL GALLONS	9c(c)	6	304 -	309	N
0810	GASOHOL BLENDERS 5.7% CR AMT	9c(d)	12	310 -	321	N
0820	TOTAL INCOME TAX CREDIT AMOUNT	10	12	322 -	333	N
	RECORD TERMINUS CHARACTER		1	334 -	334	"#"

Recapture of Investment Credit

▶ **Attach to your income tax return.**

Name(s) as shown on return	Identifying number
----------------------------	--------------------

Properties	Type of property—State whether rehabilitation, energy, reforestation, or transition property. (See the Instructions for Form 34 68 for the year the investment credit property was placed in service for definitions.) If rehabilitation property, also show type of building. If energy property, show type.
A	
B	
C	
D	

Original Investment Credit

Computation Steps: (see Specific Instructions)		Properties			
		A	B	C	D
1 Original rate of credit	1				
2 Cost or other basis	2				
3 Original credit. Multiply line 2 by the percentage on line 1.	3				
4 Date property was placed in service	4	/ /	/ /	/ /	/ /
5 Date property ceased to be qualified investment credit property	5	/ /	/ /	/ /	/ /
6 Number of full years between the date on line 4 and the date on line 5	6				

Recapture Tax

7 Recapture percentage (see instructions)	7				
8 Tentative recapture tax. Multiply line 3 by the percentage on line 7.	8				
9 Add all the amounts on line 8				9	
10 Enter the recapture tax from property for which there was an increase in nonqualified nonrecourse financing (attach separate computation)				10	
11 Add lines 9 and 10				11	
12 Portion of original credit (line 3) not used to offset tax in any year, plus any carryback and carryforward of credits you now can apply to the original credit year because you have freed up tax liability in the amount of the tax recaptured. Do not enter more than line 11—see instructions				12	
13 Total increase in tax. Subtract line 12 from line 11. Enter here and on the appropriate line of your tax return. See section 29(b)(4) if you claim the nonconventional source fuel credit. Electing large partnerships, see instructions.				13	

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

Use Form 4255 to figure the increase in tax for the recapture of investment credit claimed.

Who Must Refigure the Investment Credit

Generally, you must refigure the investment credit and may have to recapture all or part of it if any of the following apply.

- You disposed of investment credit property before the end of 5 full years after the property was placed in service (recapture period).

- You changed the use of the property before the end of the recapture period so that it no longer qualifies as investment credit property.
- The business use of the property decreased before the end of the recapture period so that it no longer qualifies (in whole or in part) as investment credit property.
- Any building to which section 47(d) applies will no longer be a qualified rehabilitated building when placed in service.
- Any property to which section 48(a)(5) applies will no longer qualify as investment credit property when placed in service.
- Before the end of the recapture period, your proportionate interest was reduced by more than one-third in a partnership, S corporation, estate, or trust that allocated

the cost or other basis of property to you for which you claimed a credit.

- You returned leased property (on which you claimed a credit) to the lessor before the end of the recapture period.
- A net increase in the amount of nonqualified nonrecourse financing occurred for any property to which section 49(a)(1) applied. For more details, see the instructions for line 10.

Exceptions to recapture. Recapture of the investment credit does not apply to the following.

- A transfer because of the death of the taxpayer.
- A transfer between spouses or incident to divorce under section 1041. However, a later disposition by the transferee is subject to recapture to the same extent as if the transferor had disposed of the property at the later date.

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0632
		4	5 -	8	*****
0000		6	9 -	14	"FRMbbb"
0001		6	15 -	20	"4255bb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnnn
0004		1	35 -	35	BLANK
0005		7	36 -	42	N 0000001 - 9999999
0010	A	56	43 -	98	A/N
+0020	1A	6	99 -	104	N
+0023	2A	12	105 -	116	N
+0080	3A	12	117 -	128	N
+0084	4A	8	129 -	136	YYYYMMDD
+0090	5A	8	137 -	144	YYYYMMDD
+0100	6A	2	145 -	146	N, "00" OR BLANK
+0110	7A	6	147 -	152	N
+0120	8A	12	153 -	164	N
0130	B	56	165 -	220	A/N
0140	1B	6	221 -	226	N
0143	2B	12	227 -	238	N
0200	3B	12	239 -	250	N
0204	4B	8	251 -	258	YYYYMMDD
0210	5B	8	259 -	266	YYYYMMDD
0220	6B	2	267 -	268	N, "00" OR BLANK
0230	7B	6	269 -	274	N
0240	8B	12	275 -	286	N
0250	C	56	287 -	342	A/N

SECTION 9.46 FORM 4255 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0260	ORIGINAL RATE 3	1C	6	343 - 348	N	
0263	COST OR OTHER BASIS 3	2C	12	349 - 360	N	
0320	ORIGINAL CREDIT 3	3C	12	361 - 372	N	
0324	DATE PROPERTY PLACED IN SERVICE 3	4C	8	373 - 380	YYYYMMDD	|
0330	DATE PROPERTY QUALIFICATION 3	5C	8	381 - 388	YYYYMMDD	|
0340	NUMBER OF FULL YEARS BETWEEN DATES 3	6C	2	389 - 390	N, "00" OR BLANK	
0350	RECAPTURE PERCENTAGE 3	7C	6	391 - 396	N	
0360	TENTATIVE RECAPTURE TAX 3	8C	12	397 - 408	N	
0370	PROPERTY DESCRIPTION 4	D	56	409 - 464	A/N	
*0375	ADDITIONAL PROPERTY DESCRIPTION	D	6	465 - 470	"STMbnn" OR BLANK	|
0380	ORIGINAL RATE 4	1D	6	471 - 476	N	
0383	COST OR OTHER BASIS 4	2D	12	477 - 488	N	
0440	ORIGINAL CREDIT 4	3D	12	489 - 500	N	
0444	DATE PROPERTY PLACED IN SERVICE 4	4D	8	501 - 508	YYYYMMDD	|
0450	DATE PROPERTY QUALIFICATION 4	5D	8	509 - 516	YYYYMMDD	|
0460	NUMBER OF FULL YEARS BETWEEN DATES 4	6D	2	517 - 518	N, "00" OR BLANK	
0470	RECAPTURE PERCENTAGE 4	7D	6	519 - 524	N	
0480	TENTATIVE RECAPTURE TAX 4	8D	12	525 - 536	N	
0483	"TAX FROM ATTACHED" LITERAL	9	17	537 - 553	"TAX FROM ATTACHED" OR BLANK	
0486	TAX AMOUNT	9	12	554 - 565	N	
0490	TENTATIVE TOTAL RECAPTURE TAX	9	12	566 - 577	N	
*0495	RECAPTURE TAX STATEMENT	10	6	578 - 583	"STMbnn" OR BLANK	
0500	TAX FROM PROPERTY CEASING TO BE AT RISK	10	12	584 - 595	N	
0510	TOTAL RECAPTURE TAX	11	12	596 - 607	N	
0520	PORTION OF ORIGINAL CREDIT	12	12	608 - 619	N	
0530	TOTAL TAX INCREASE	13	12	620 - 631	N	
	RECORD TERMINUS CHARACTER		1	632 - 632	"#"	

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach this form to your return.

2001

Attachment
Sequence No. **67**

Name(s) shown on return

Business or activity to which this form relates

Identifying number

Part I Election To Expense Certain Tangible Property Under 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 page 2 of the instructions	1	\$24,000
2	Total cost of section 179 property placed in service (see page 2 of the instructions)..	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 page 2 of the instructions	5	
(a) Description of property		(b) Cost (business use only)	(c) Elected cost
6			
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 2000 (see page 3 of the instructions).	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	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 2002. 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 2001 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 page 3 of the instructions

Section B—General Depreciation System (GDS) (See page 3 of the instructions.)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Alternative Depreciation System (ADS) (See page 5 of the instructions.)

16a 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.) (See page 5 of the instructions.)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 2001	17	
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

Part IV Summary (See page 6 of the instructions.)

20	Listed property. Enter amount from line 26.	20	
21	Total. Add deductions from 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	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

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 page 7 of the instructions for limits for passenger automobiles.)

23a Do you have evidence to support the business/investment use claimed? Yes No **23b** If "Yes," is the evidence written? Yes 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 (see page 6 of the instructions):									
		%							
		%							
		%							
25 Property used 50% or less in a qualified business use (see page 6 of the instructions):									
		%				S/L -			
		%				S/L -			
		%				S/L -			
26 Add amounts in column (h). Enter the total here and on line 20, page 1.							26		
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 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	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—see page 1 of the instructions)												
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 (see page 8 of the instructions).

	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 page 8 of the 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? (See page 8 of the instructions).		

Note: If your answer to 35, 36, 37, 38, or 39 is "Yes," do 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 2001 tax year (see page 8 of the instructions):					
41 Amortization of costs that began before your 2001 tax year.					41
42 Total. Add amounts in column (f). See page 9 of the instructions for where to report					42



FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0820
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"4562bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0020	BUSINESS OR ACTIVITY		30	43 -	72	A/N
0030	TOTAL COST OF SEC 179 PROPERTY PLACED IN SERVICE DURING TAX YEAR	PT I 2	12	73 -	84	N
0040	REDUCTION IN LIMITATION (LINE 2 MINUS LINE 3)	PT I 4	12	85 -	96	N
0050	DOLLAR LIMITATION FOR TAX YEAR (LINE 1 MINUS LINE 4)	PT I 5	12	97 -	108	N
0060	DESCRIPTION PROPERTY 1	PT I 6(a)	20	109 -	128	A/N
0070	DEPRECIATION COST PROPERTY 1	PT I 6(b)	12	129 -	140	N
0080	DEPRECIATION ELECTED COST PROPERTY 1	PT I 6(c)	12	141 -	152	N
0090	DESCRIPTION PROPERTY 2	PT I 6(a)	20	153 -	172	A/N
0100	DEPRECIATION COST PROPERTY 2	PT I 6(b)	12	173 -	184	N
0110	DEPRECIATION ELECTED COST PROPERTY 2	PT I 6(c)	12	185 -	196	N
*0115	EXPENSE ELECTION	PT I L 6	6	197 -	202	"STMbnn" OR BLANK
	NOTE: USE FIELD #0115 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART I, LINE 6. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.					
0120	LISTED PROPERTY (AMOUNT FROM LINE 27)	PT I 7	12	203 -	214	N
0130	TOTAL ELECTED COST OF SEC 179 PROPERTY (ADD LINES 6c AND 7c)	PT I 8	12	215 -	226	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0140	TENTATIVE DEDUCTION (LESSER OF LINE 5 OR 8)	PT I 9	12	227 -	238	N
0150	CARRYOVER OF DISALLOWED DEDUCTION	PT I 10	12	239 -	250	N
0160	TAXABLE INCOME LIMITATION FOR TAX YEAR	PT I 11	12	251 -	262	N
0170	SEC 179 EXPENSE DEDUCTION (ADD LINES 9 AND 10)	PT I 12	12	263 -	274	N
0180	CARRYOVER FORWARD OF DISALLOWED DEDUCTION (ADD LINES 9 AND 10 LESS LINE 12)	PT I 13	12	275 -	286	N
0185	GROUP ANY ASSETS	14	1	287 -	287	"X" OR BLANK
0190	MACRS 3-YR PROPERTY BASIS FOR DEPRECIATION	PT II 15a(c)	12	288 -	299	N
0200	MACRS 3-YR PROPERTY RECOVERY PERIOD	PT II 15a(d)	2	300 -	301	N
0210	MACRS 3-YR PROPERTY CONVENTION	PT II 15a(e)	2	302 -	303	"HY", "MQ" OR "MM"
0220	MACRS 3-YR PROPERTY METHOD	PT II 15 a(f)	7	304 -	310	A/N
0230	MARCS 3-YR PROPERTY DEPRECIATION DEDUCTION	PT II 15a(g)	12	311 -	322	N
0240	MACRS 5-YR PROPERTY BASIS FOR DEPRECIATION	PT II 15b(c)	12	323 -	334	N
0250	MACRS 5-YR PROPERTY RECOVERY PERIOD	PT II 15b(d)	2	335 -	336	N
0260	MACRS 5-YR PROPERTY CONVENTION	PT II 15b(e)	2	337 -	338	"HY", "MQ" OR "MM"
0270	MACRS 5-YR PROPERTY METHOD	PT II 15b(f)	7	339 -	345	A/N
0280	MACRS 5-YR PROPERTY DEPRECIATION DEDUCTION	PT II 15b(g)	12	346 -	357	N
0290	MACRS 7-YR PROPERTY BASIS FOR DEPRECIATION	PT II 15c(c)	12	358 -	369	N
0300	MACRS 7-YR PROPERTY RECOVERY PERIOD	PT II 15c(d)	2	370 -	371	N
0310	MACRS 7-YR PROPERTY CONVENTION	PT II 15c(e)	2	372 -	373	"HY", "MQ" OR "MM"
0320	MACRS 7-YR PROPERTY METHOD	PT II 15c(f)	7	374 -	380	A/N
0330	MACRS 7-YR PROPERTY DEPRECIATION DEDUCTION	PT II 15c(g)	12	381 -	392	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0340	MACRS 10-YR PROPERTY BASIS FOR DEPRECIATION	PT II 15d(c)	12	393 -	404	N
0350	MACRS 10-YR PROPERTY RECOVERY PERIOD	PT II 15d(d)	2	405 -	406	N
0360	MACRS 10-YR PROPERTY 10-YEAR PROPERTY CONVENTION	PT II 15d(e)	2	407 -	408	"HY", "MQ" OR "MM"
0370	MACRS 10-YR PROPERTY METHOD	PT II 15d(f)	7	409 -	415	A/N
0380	MACRS 10-YR PROPERTY DEPRECIATION DEDUCTION	PT II 15d(g)	12	416 -	427	N
0390	MACRS 15-YR PROPERTY BASIS FOR DEPRECIATION	PT II 15e(c)	12	428 -	439	N
0400	MACRS 15-YR PROPERTY RECOVERY PERIOD	PT II 15e(d)	2	440 -	441	N
0410	MACRS 15-YR PROPERTY CONVENTION	PT II 15e(e)	2	442 -	443	"HY", "MQ" OR "MM"
0420	MACRS 15-YR PROPERTY METHOD	PT II 15e(f)	7	444 -	450	A/N
0430	MACRS 15-YR PROPERTY DEPRECIATION DEDUCTION	PT II 15e(g)	12	451 -	462	N
0440	MACRS 20-YR PROPERTY BASIS FOR DEPRECIATION	PT II 15f(c)	12	463 -	474	N
0450	MACRS 20-YR PROPERTY RECOVERY PERIOD	PT II 15f(d)	2	475 -	476	N
0460	MACRS 20-YR PROPERTY CONVENTION	PT II 15f(e)	2	477 -	478	"HY", "MQ" OR "MM"
0470	MACRS 20-YR PROPERTY METHOD	PT II 15f(f)	7	479 -	485	A/N
0480	MACRS 20-YR PROPERTY DEPRECIATION DEDUCTION	PT II 15f(g)	12	486 -	497	N
0482	MACRS 25-YR PROPERTY BASIS FOR DEPRECIATION	PT II 15g(c)	12	498 -	509	N
0484	MACRS 25-YR PROPERTY CONVENTION	PT II 15g(e)	2	510 -	511	"HY", "MQ" OR "MM"
0486	MACRS 25-YR PROPERTY DEPRECIATION DEDUCTION	PT II 15g(g)	12	512 -	523	N
0490	MACRS RESIDENTIAL RENTAL PROPERTY 1 DATE PLACED IN SERVICE	PT II 15h(b)	6	524 -	529	FORMAT: YYYYMM OR BLANK
0500	MACRS RESIDENTIAL RENTAL PROPERTY 1 BASIS FOR DEPRECIATION	PT II 15h(c)	12	530 -	541	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0510	MACRS RESIDENTIAL RENTAL PROPERTY 1 DEPRECIATION DEDUCTION	PT II 15h(g)	12	542 -	553	N
0520	MACRS RESIDENTIAL RENTAL PROPERTY 2 DATE PLACED IN SERVICE	PT II 15h(b)	6	554 -	559	FORMAT: YYYYMM OR BLANK
0530	MACRS RESIDENTIAL RENTAL PROPERTY 2 BASIS FOR DEPRECIATION	PT II 15h(c)	12	560 -	571	N
0540	MACRS RESIDENTIAL RENTAL PROPERTY 2 DEDUCTION DEPRECIATION	PT II 15h(g)	12	572 -	583	N
0550	MACRS NONRESIDENTIAL PROPERTY 1 DATE PLACED IN SERVICE	PT II 15i(b)	6	584 -	589	FORMAT: YYYYMM OR BLANK
0560	MACRS NONRESIDENTIAL PROPERTY 1 BASIS FOR DEPRECIATION	PT II 15i(c)	12	590 -	601	N
0570	MACRS NONRESIDENTIAL PROPERTY 1 DEPRECIATION DEDUCTION	PT II 15i(g)	12	602 -	613	N
0580	MACRS NONRESIDENTIAL PROPERTY 2 DATE PLACED IN SERVICE	PT II 15i(b)	6	614 -	619	FORMAT: YYYYMM OR BLANK
0590	MACRS NONRESIDENTIAL PROPERTY 2 BASIS FOR DEPRECIATION	PT II 15i(c)	12	620 -	631	N
0595	MACRS NONRESIDENTIAL PROPERTY 2 RECOVERY PERIOD	PT II 15i(d)	2	632 -	633	N
0600	MACRS NONRESIDENTIAL PROPERTY 2 DEPRECIATION DEDUCTION	PT II 15i(g)	12	634 -	645	N
0610	ADS (CLASS LIFE) BASIS FOR DEPRECIATION	PT II 16a(c)	12	646 -	657	N
0620	ADS (CLASS LIFE) RECOVERY PERIOD	PT II 16a(d)	2	658 -	659	N
0630	ADS (CLASS LIFE) CONVENTION	PT II 16a(e)	2	660 -	661	"HY", "MQ" OR "MM"
0640	ADS (CLASS LIFE) DEDUCTION DEPRECIATION	PT II 16a(g)	12	662 -	673	N
0650	ADS (12-YR) BASIS FOR DEPRECIATION	PT II 16b(c)	12	674 -	685	N
0660	ADS (12 YEAR) CONVENTION	PT II 16b(e)	2	686 -	687	"HY", "MQ" OR "MM"

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0670	ADS (12-YEAR) DEPRECIATION DEDUCTION	PT II 16b(g)	12	688 - 699	N	
0680	ADS (40-YEAR) DATE PLACED IN SERVICE	PT II 16c(b)	6	700 - 705	N	FORMAT: YYYYMM OR BLANK
0690	ADS (40-YEAR) BASIS FOR DEPRECIATION	PT II 16c(c)	12	706 - 717	N	
0700	ADS (40-YEAR) DEPRECIATION DEDUCTION	PT II 16c(g)	12	718 - 729	N	
*0705	MACRS DEPRECIATION	PT II L 15	6	730 - 735	N	"STMbnn" OR BLANK
	NOTE: USE FIELD #0705 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART II, LINE 15. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.					
0710	GDS AND ADS DEDUCTION FOR ASSETS PLACED IN SERVICE IN PREVIOUS TAX YEARS	PT III 17	12	736 - 747	N	
0720	PROPERTY SUBJECT TO SECTION 168(f)(1) ELECTION	PT III 18	12	748 - 759	N	
@0730	PROPERTY SUBJECT TO SECTION 168(f)(1) ELECTION	PT III 18	6	760 - 765	N	"STMbnn" OR BLANK
0740	ACRS AND/OR OTHER DEPRECIATION	PT III 19	12	766 - 777	N	
0760	LISTED PROPERTY (AMOUNT FROM LINE 26)	PT IV 20	12	778 - 789	N	
0770	TOTAL	PT IV 21	12	790 - 801	N	
0780	ASSETS	PT IV 22	12	802 - 813	N	
*0790	50-YR PROPERTY		6	814 - 819	N	"STMbnn" OR BLANK
	RECORD TERMINUS CHARACTER		1	820 - 820	N	"#"

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0887
		4	5 -	8	*****
0800		6	9 -	14	"FRMbbb"
0801		6	15 -	20	"4562bb"
0802		5	21 -	25	"PG02b"
0803		9	26 -	34	N nnnnnnnnn
0804		1	35 -	35	BLANK
0805		7	36 -	42	N 0000001 - 9999999
0810	PT V SEC A 23(a)	1	43 -	43	"X" OR BLANK
0815	PT V SEC A 23(a)	1	44 -	44	"X" OR BLANK
0820	PT V SEC A 23(b)	1	45 -	45	"X" OR BLANK
0825	PT V SEC A 23(b)	1	46 -	46	"X" OR BLANK
0840	PT V SEC A 24(a)	10	47 -	56	A/N
0850	PT V SEC A 24(b)	8	57 -	64	FORMAT: YYYYMMDD OR BLANK
0860	PT V SEC A 24(c)	6	65 -	70	N
0870	PT V SEC A 24(d)	12	71 -	82	N
0880	PT V SEC A 24(e)	12	83 -	94	N
0890	PT V SEC A 24(f)	2	95 -	96	N
0900	PT V SEC A 24(g)	7	97 -	103	A/N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0910	DEPRECIATION ITEM 1 DEPRECIATION DEDUCTION	PT V SEC A 24(h)	12	104	- 115	N
0920	DEPRECIATION ITEM 1 SECTION 179 EXPENSE	PT V SEC A 24(i)	12	116	- 127	N
0930	DEPRECIATION ITEM 2 DESCRIPTION	PT V SEC A 24(a)	10	128	- 137	A/N
0940	DEPRECIATION ITEM 2 DATE PLACED IN SERVICE	PT V SEC A 24(b)	8	138	- 145	FORMAT: YYYYMMDD OR BLANK
0950	DEPRECIATION ITEM 2 BUSINESS USE PERCENTAGE	PT V SEC A 24(c)	6	146	- 151	N
0960	DEPRECIATION ITEM 2 COST OR OTHER BASIS	PT V SEC A 24(d)	12	152	- 163	N
0970	DEPRECIATION ITEM 2 BASIS-BUSINESS USE	PT V SEC A 24(e)	12	164	- 175	N
0980	DEPRECIATION ITEM 2 RECOVERY PERIOD	PT V SEC A 24(f)	2	176	- 177	N
0990	DEPRECIATION ITEM 2 METHOD/CONVENTION	PT V SEC A 24(g)	7	178	- 184	A/N
1000	DEPRECIATION ITEM 2 DEPRECIATION DEDUCTION	PT V SEC A 24(h)	12	185	- 196	N
1010	DEPRECIATION ITEM 2 SECTION 179 EXPENSE	PT V SEC A 24(i)	12	197	- 208	N
1020	DEPRECIATION ITEM 3 DESCRIPTION	PT V SEC A 24(a)	10	209	- 218	A/N
1030	DEPRECIATION ITEM 3 DATE PLACED IN SERVICE	PT V SEC A 24(b)	8	219	- 226	FORMAT: YYYYMMDD OR BLANK
1040	DEPRECIATION ITEM 3 BUSINESS USE PERCENTAGE	PT V SEC A 24(c)	6	227	- 232	N
1050	DEPRECIATION ITEM 3 COST OR OTHER BASIS	PT V SEC A 24(d)	12	233	- 244	N
1060	DEPRECIATION ITEM 3 BASIS-BUSINESS USE	PT V SEC A 24(e)	12	245	- 256	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1070	DEPRECIATION ITEM 3 RECOVERY PERIOD	PT V SEC A 24(f)	2	257 -	258	N
1080	DEPRECIATION ITEM 3 METHOD/CONVENTION	PT V SEC A 24(g)	7	259 -	265	A/N
1090	DEPRECIATION ITEM 3 DEPRECIATION DEDUCTION	PT V SEC A 24(h)	12	266 -	277	N
1100	DEPRECIATION ITEM 3 SECTION 179 EXPENSE	PT V SEC A 24(i)	12	278 -	289	N
*1105	LISTED PROPERTY LINE 24	PT V SEC A 24	6	290 -	295	"STMbnn" OR BLANK
NOTE: USE FIELD #1105 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART V, LINE 24. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.						
1120	DEPRECIATION ITEM 1 DESCRIPTION	PT V SEC A 25(a)	10	296 -	305	A/N
1130	DEPRECIATION ITEM 1 DATE PLACED IN SERVICE	PT V SEC A 25(b)	8	306 -	313	FORMAT: YYYYMMDD OR BLANK
1140	DEPRECIATION ITEM 1 BUSINESS USE PERCENTAGE	PT V SEC A 25(c)	6	314 -	319	N
1150	DEPRECIATION ITEM 1 COST OR OTHER BASIS	PT V SEC A 25(d)	12	320 -	331	N
1160	DEPRECIATION ITEM 1 BASIS-BUSINESS USE	PT V SEC A 25(e)	12	332 -	343	N
1170	DEPRECIATION ITEM 1 RECOVERY PERIOD	PT V SEC A 25(f)	2	344 -	345	N
1175	DEPRECIATION ITEM 1 METHOD/CONVENTION	PT V SEC A 25(g)	3	346 -	348	"HY", "MQ", "MM" OR "PRE"
1180	DEPRECIATION ITEM 1 DEPRECIATION DEDUCTION	PT V SEC A 25(h)	12	349 -	360	N
1190	DEPRECIATION ITEM 2 DESCRIPTION	PT V SEC A 25(a)	10	361 -	370	A/N
1200	DEPRECIATION ITEM 2 DATE PLACED IN SERVICE	PT V SEC A 25(b)	8	371 -	378	FORMAT: YYYYMMDD OR BLANK

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1210	DEPRECIATION ITEM 2 BUSINESS USE PERCENTAGE	PT V SEC A 25(c)	6	379 -	384	N
1220	DEPRECIATION ITEM 2 COST OR OTHER BASIS	PT V SEC A 25(d)	12	385 -	396	N
1230	DEPRECIATION ITEM 2 BASIS-BUSINESS USE	PT V SEC A 25(e)	12	397 -	408	N
1240	DEPRECIATION ITEM 2 RECOVERY PERIOD	PT V SEC A 25(f)	2	409 -	410	N
1245	DEPRECIATION ITEM 2 METHOD/CONVENTION	PT V SEC A 25(g)	3	411 -	413	"HY", "MQ", "MM" OR "PRE"
1250	DEPRECIATION ITEM 2 DEPRECIATION DEDUCTION	PT V SEC A 25(h)	12	414 -	425	N
1260	DEPRECIATION ITEM 3 DESCRIPTION	PT V SEC A 25(a)	10	426 -	435	A/N
1270	DEPRECIATION ITEM 3 DATE PLACED IN SERVICE	PT V SEC A 25(b)	8	436 -	443	FORMAT: YYYYMMDD OR BLANK
1280	DEPRECIATION ITEM 3 BUSINESS USE PERCENTAGE	PT V SEC A 25(c)	6	444 -	449	N
1290	DEPRECIATION ITEM 3 COST OR OTHER BASIS	PT V SEC A 25(d)	12	450 -	461	N
1300	DEPRECIATION ITEM 3 BASIS-BUSINESS USE	PT V SEC A 25(e)	12	462 -	473	N
1310	DEPRECIATION ITEM 3 RECOVERY PERIOD	PT V SEC A 25(f)	2	474 -	475	N
1315	DEPRECIATION ITEM 3 METHOD/CONVENTION	PT V SEC A 25(g)	3	476 -	478	"HY", "MQ", "MM" OR "PRE"
1320	DEPRECIATION ITEM 3 DEPRECIATION DEDUCTION	PT V SEC A 25(h)	12	479 -	490	N
*1325	LISTED PROPERTY LINE 25	PT V SEC A 25	6	491 -	496	"STMbnn" OR BLANK

NOTE: USE FIELD #1325 AS A STATEMENT (STM) REFERENCE FOR ADDITIONAL INFORMATION OR ATTACHMENTS REQUIRED IN PART V, LINE 25. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1330	TOTAL (ADD AMOUNTS COL h)	PT V SEC A 26	12	497 -	508	N
1340	TOTAL (ADD AMOUNTS COL i)	PT V SEC A 27	12	509 -	520	N
1350	TOTAL MILES DRIVEN DURING YEAR VEHICLE 1	PT V SEC B 28(a)	6	521 -	526	N
1360	TOTAL COMMUTING MILES DRIVEN DURING YEAR VEHICLE 1	PT V SEC B 29(a)	6	527 -	532	N
1370	TOTAL OTHER PERSONAL MILES DRIVEN DURING YEAR VEHICLE 1	PF V SEC B 30(a)	6	533 -	538	N
1380	TOTAL MILES DRIVEN DURING YEAR ADD LINES 28 - 30 VEHICLE 1	PT V SEC B 31(a)	6	539 -	544	N
1390	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 1 YES BOX	PT V SEC B 32(a)	1	545 -	545	"X" OR BLANK
1395	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 1 - NO BOX	PT V SEC B 32(a)	1	546 -	546	"X" OR BLANK
1400	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 1 YES BOX	PT V SEC B 33(a)	1	547 -	547	"X" OR BLANK
1405	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 1 - NO BOX	PT V SEC B 33(a)	1	548 -	548	"X" OR BLANK
1410	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 1 YES BOX	PT V SEC B 34(a)	1	549 -	549	"X" OR BLANK
1415	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 1 - NO BOX	PT V SEC B 34(a)	1	550 -	550	"X" OR BLANK
1420	TOTAL MILES DRIVEN DURING YEAR VEHICLE 2	PT V SEC B 28(b)	6	551 -	556	N
1430	TOTAL COMMUTING MILES DRIVEN DURING YEAR VEHICLE 2	PT V SEC B 29(b)	6	557 -	562	N
1440	TOTAL OTHER PERSONAL MILES DRIVEN DURING YEAR VEHICLE 2	PF V SEC B 30(b)	6	563 -	568	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1450	TOTAL MILES DRIVEN DURING YEAR ADD LINES 28 - 30 VEHICLE 2	PT V SEC B 31(b)	6	569 -	574	N
1460	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 2 YES BOX	PT V SEC B 32(b)	1	575 -	575	"X" OR BLANK
1465	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 2 - NO BOX	PT V SEC B 32(b)	1	576 -	576	"X" OR BLANK
1470	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 2 YES BOX	PT V SEC B 33(b)	1	577 -	577	"X" OR BLANK
1475	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 2 - NO BOX	PT V SEC B 33(b)	1	578 -	578	"X" OR BLANK
1480	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 2 YES BOX	PT V SEC B 34(b)	1	579 -	579	"X" OR BLANK
1485	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 2 - NO BOX	PT V SEC B 34(b)	1	580 -	580	"X" OR BLANK
1490	TOTAL MILES DRIVEN DURING YEAR VEHICLE 3	PT V SEC B 28(c)	6	581 -	586	N
1500	TOTAL COMMUTING MILES DRIVEN DURING YEAR VEHICLE 3	PT V SEC B 29(c)	6	587 -	592	N
1510	TOTAL OTHER PERSONAL MILES DRIVEN DURING YEAR VEHICLE 3	PF V SEC B 30(c)	6	593 -	598	N
1520	TOTAL MILES DRIVEN DURING YEAR ADD LINES 28 - 30 VEHICLE 3	PT V SEC B 31(c)	6	599 -	604	N
1530	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 3 YES BOX	PT V SEC B 32(c)	1	605 -	605	"X" OR BLANK
1535	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 3 - NO BOX	PT V SEC B 32(c)	1	606 -	606	"X" OR BLANK
1540	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 3 YES BOX	PT V SEC B 33(c)	1	607 -	607	"X" OR BLANK
1545	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 3 - NO BOX	PT V SEC B 33(c)	1	608 -	608	"X" OR BLANK

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1550	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 3 YES BOX	PT V SEC B 34(c)	1	609	- 609	"X" OR BLANK
1555	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 3 - NO BOX	PT V SEC B 34(c)	1	610	- 610	"X" OR BLANK
1560	TOTAL MILES DRIVEN DURING YEAR VEHICLE 4	PT V SEC B 28(d)	6	611	- 616	N
1570	TOTAL COMMUTING MILES DRIVEN DURING YEAR VEHICLE 4	PT V SEC B 29(d)	6	617	- 622	N
1580	TOTAL OTHER PERSONAL MILES DRIVEN DURING YEAR VEHICLE 4	PF V SEC B 30(d)	6	623	- 628	N
1590	TOTAL MILES DRIVEN DURING YEAR ADD LINES 28 - 30 VEHICLE 4	PT V SEC B 31(d)	6	629	- 634	N
1600	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 4 YES BOX	PT V SEC B 32(d)	1	635	- 635	"X" OR BLANK
1605	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 4 - NO BOX	PT V SEC B 32(d)	1	636	- 636	"X" OR BLANK
1610	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 4 YES BOX	PT V SEC B 33(d)	1	637	- 637	"X" OR BLANK
1615	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 4 - NO BOX	PT V SEC B 33(d)	1	638	- 638	"X" OR BLANK
1620	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 4 YES BOX	PT V SEC B 34(d)	1	639	- 639	"X" OR BLANK
1625	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 4 - NO BOX	PT V SEC B 34(d)	1	640	- 640	"X" OR BLANK
1630	TOTAL MILES DRIVEN DURING YEAR VEHICLE 5	PT V SEC B 28(e)	6	641	- 646	N
1640	TOTAL COMMUTING MILES DRIVEN DURING YEAR VEHICLE 5	PT V SEC B 29(e)	6	647	- 652	N
1650	TOTAL OTHER PERSONAL MILES DRIVEN DURING YEAR VEHICLE 5	PF V SEC B 30(e)	6	653	- 658	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1660	TOTAL MILES DRIVEN DURING YEAR ADD LINE 28 -30 VEHICLE 5	PT V SEC B 31(e)	6	659 -	664	N
1670	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 5 YES BOX	PT V SEC B 32(e)	1	665 -	665	"X" OR BLANK
1675	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 5 - NO BOX	PT V SEC B 32(e)	1	666 -	666	"X" OR BLANK
1680	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 5 YES BOX	PT V SEC B 33(e)	1	667 -	667	"X" OR BLANK
1685	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 5 - NO BOX	PT V SEC B 33(e)	1	668 -	668	"X" OR BLANK
1690	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 5 YES BOX	PT V SEC B 34(e)	1	669 -	669	"X" OR BLANK
1695	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 5 - NO BOX	PT V SEC B 34(e)	1	670 -	670	"X" OR BLANK
1700	TOTAL MILES DRIVEN DURING YEAR VEHICLE 6	PT V SEC B 28(f)	6	671 -	676	N
1710	TOTAL COMMUTING MILES DRIVEN DURING YEAR VEHICLE 6	PT V SEC B 29(f)	6	677 -	682	N
1720	TOTAL OTHER PERSONAL MILES DRIVEN DURING YEAR VEHICLE 6	PF V SEC B 30(f)	6	683 -	688	N
1730	TOTAL MILES DRIVEN DURING YEAR ADD LINES 28 - 30 VEHICLE 6	PT V SEC B 31(f)	6	689 -	694	N
*1735	LISTED PROPERTY LINES 28-31 NOTE: USE FIELD #1735 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART V, LINES 28-31. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.	PT V SEC B	6	695 -	700	"STMbnn" OR BLANK
1740	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 6 YES BOX	PT V SEC B 32(f)	1	701 -	701	"X" OR BLANK
1745	WAS VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 6 - NO BOX	PT V SEC B 32(f)	1	702 -	702	"X" OR BLANK
1750	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 6 YES BOX	PT V SEC B 33(f)	1	703 -	703	"X" OR BLANK

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1755	WAS VEHICLE USED BY MORE THAN 5% OWNER OR RELATED PERSON - VEHICLE 6 - NO BOX	PT V SEC B 33(f)	1	704	- 704	"X" OR BLANK
1760	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 6 YES BOX	PT V SEC B 34(f)	1	705	- 705	"X" OR BLANK
1765	IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE VEHICLE 6 - NO BOX	PT V SEC B 34(f)	1	706	- 706	"X" OR BLANK
*1768	LISTED PROPERTY LINES 32-34 NOTE: USE FIELD #1768 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART V, LINES 32-34. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.	PT V SEC B	6	707	- 712	"STMbnn" OR BLANK
1770	DO YOU MAINTAIN A WRITTEN STATEMENT INCLUDING COMMUTING YES BOX	PT V SEC C 35	1	713	- 713	"X" OR BLANK
1775	DO YOU MAINTAIN A WRITTEN STATEMENT INCLUDING COMMUTING NO BOX	PT V SEC C 35	1	714	- 714	"X" OR BLANK
1780	DO YOU MAINTAIN A WRITTEN STATEMENT PROHIBITING PERSONAL USE YES BOX	PT V SEC C 36	1	715	- 715	"X" OR BLANK
1785	DO YOU MAINTAIN A WRITTEN STATEMENT PROHIBITING PERSONAL USE - NO BOX	PT V SEC C 36	1	716	- 716	"X" OR BLANK
1790	DO YOU TREAT ALL USE OF VEHICLES BY EMPLOYEES AS PERSONAL USE YES BOX	PT V SEC C 37	1	717	- 717	"X" OR BLANK
1795	DO YOU TREAT ALL USE OF VEHICLES BY EMPLOYEES AS PERSONAL USE - NO BOX	PT V SEC C 37	1	718	- 718	"X" OR BLANK
1800	DO YOU PROVIDE MORE THAN 5 VEHICLES YES BOX	PT V SEC C 38	1	719	- 719	"X" OR BLANK
1805	DO YOU PROVIDE MORE THAN 5 VEHICLES - NO BOX	PT V SEC C 38	1	720	- 720	"X" OR BLANK
1810	DO YOU MEET REQUIREMENTS CONCERNING FLEET VEHICLE OR QUAL. AUTO DEMO USE YES BOX	PT V SEC C 39	1	721	- 721	"X" OR BLANK
1815	DO YOU MEET REQUIREMENTS CONCERNING FLEET VEHICLE OR QUAL. AUTO DEMO USE - NO BOX	PT V SEC C 39	1	722	- 722	"X" OR BLANK
1830	AMORTIZATION DESCRIPTION OF PROPERTY PROPERTY 1	PT VI 40(a)	20	723	- 742	A/N

SECTION 9.49 FORM 4562 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1840	AMORTIZATION DATE ACQUIRED PROPERTY 1	PT VI 40(b)	8	743	- 750	FORMAT: YYYYMMDD OR BLANK
1850	AMORTIZATION COST OR OTHER BASIS PROPERTY 1	PT VI 40(c)	12	751	- 762	N
1860	AMORTIZATION CODE SECTION PROPERTY 1	PT VI 40(d)	9	763	- 771	A/N
1870	AMORTIZATION PERIOD OR PERCENTAGE PROPERTY 1	PT VI 40(e)	6	772	- 777	N
1880	AMORTIZATION FOR THIS YEAR PROPERTY 1	PT VI 40(f)	12	778	- 789	N
1890	AMORTIZATION DESCRIPTION OF PROPERTY PROPERTY 2	PT VI 40(a)	20	790	- 809	A/N
1900	AMORTIZATION DATE ACQUIRED PROPERTY 2	PT VI 40(b)	8	810	- 817	FORMAT: YYYYMMDD OR BLANK
1910	AMORTIZATION COST OR OTHER BASIS PROPERTY 2	PT VI 40(c)	12	818	- 829	N
1920	AMORTIZATION CODE SECTION PROPERTY 2	PT VI 40(d)	9	830	- 838	A/N
1930	AMORTIZATION PERIOD OR PERCENTAGE PROPERTY 2	PT VI 40(e)	6	839	- 844	N
1940	AMORTIZATION FOR THIS YEAR PROPERTY 2	PT VI 40(f)	12	845	- 856	N
1950	AMORTIZATION FOR PROPERTY PLACED IN SERVICE PRIOR TO CURRENT YEAR	PT VI 41(f)	12	857	- 868	N
1960	TOTAL	PT VI 42(f)	12	869	- 880	N
*1965	AMORTIZATION LINE 40	PT VI 40	6	881	- 886	"STMbnn" OR BLANK
NOTE: USE FIELD #1965 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED IN PART VI, LINE 40. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.						
RECORD TERMINUS CHARACTER			1	887	- 887	"#"

Casualties and Thefts

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

▶ Use a separate Form 4684 for each casualty or theft.

Identifying number

SECTION A—Personal Use Property (Use this section to report casualties and thefts of property **not** used in a trade or business or for income-producing purposes.)

1 Description of properties (show type, location, and date acquired for each):

- Property A
- Property B
- Property C
- Property D

		Properties (Use a separate column for each property lost or damaged from the same casualty or theft.)			
		A	B	C	D
2	Cost or other basis of each property				
3	Insurance or other reimbursement (whether or not you filed a claim). See instructions Note: If line 2 is more than line 3, skip line 4.				
4	Gain from casualty or theft. If line 3 is more than line 2, enter the difference here and skip lines 5 through 9 for that column. See instructions if line 3 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year				
5	Fair market value before casualty or theft				
6	Fair market value after casualty or theft				
7	Subtract line 6 from line 5				
8	Enter the smaller of line 2 or line 7				
9	Subtract line 3 from line 8. If zero or less, enter -0-				

- 10 Casualty or theft loss. Add the amounts on line 9 in columns A through D **10**
- 11 Enter the **smaller** of line 10 or \$100 **11**
- 12 Subtract line 11 from line 10 **12**
Caution: Use only one Form 4684 for lines 13 through 18.
- 13 Add the amounts on line 12 of all Forms 4684 **13**
- 14 Add the amounts from line 4 of all Forms 4684 **14**
- 15
 - If line 14 is **more** than line 13, enter the difference here and on Schedule D. **Do not** complete the rest of this section. See instructions.
 - If line 14 is **less** than line 13, enter -0- here and go to line 16.
 - If line 14 is **equal** to line 13, enter -0- here. **Do not** complete the rest of this section.**15**
- 16 If line 14 is **less** than line 13, enter the difference **16**
- 17 Enter 10% of your adjusted gross income from Form 1040, line 34. Estates and trusts, see instructions. **17**
- 18 Subtract line 17 from line 16. If zero or less, enter -0-. Also enter result on Schedule A (Form 1040), line 19. Estates and trusts, enter on the "Other deductions" line of your tax return **18**

Name(s) shown on tax return. Do not enter name and identifying number if shown on other side.

Identifying number

SECTION B—Business and Income-Producing Property

Part I Casualty or Theft Gain or Loss (Use a separate Part I for each casualty or theft.)

19 Description of properties (show type, location, and date acquired for each):

- Property A
Property B
Property C
Property D

Properties (Use a separate column for each property lost or damaged from the same casualty or theft.)

Table with columns A, B, C, D and rows 20-27 for cost, insurance, gain, market value, and loss calculations.

Part II Summary of Gains and Losses (from separate Parts I)

(a) Identify casualty or theft

(b) Losses from casualties or thefts

(i) Trade, business, rental or royalty property

(ii) Income-producing and employee property

(c) Gains from casualties or thefts includible in income

Casualty or Theft of Property Held One Year or Less

Table for Casualty or Theft of Property Held One Year or Less, rows 29-32.

Casualty or Theft of Property Held More Than One Year

Table for Casualty or Theft of Property Held More Than One Year, rows 33-39.



FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0765
		4	5 -	8	*****
0000	RECORD ID	6	9 -	14	"FRMbbb"
0001	FORM NUMBER	6	15 -	20	"4684bb"
0002	PAGE NUMBER	5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)	9	26 -	34	N nnnnnnnn
0004	FILLER	1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER	7	36 -	42	N 0000000 - 9999999
*0020	PERSONAL USE PROPERTY STATEMENT	6	43 -	48	"STMbnn" OR BLANK
NOTE: USE FIELD # 020 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED IN PART A. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.					
0030	DESCRIPTION OF PROPERTIES	1A	56	49 - 104	A/N OR BLANK
0040	COST OR OTHER BASIS	2A	12	105 - 116	N
0050	INSURANCE	3A	12	117 - 128	N
0060	GAIN FROM CASUALTY OR THEFT	4A	12	129 - 140	N ***
0070	FAIR MARKET VALUE BEFORE CASUALTY OR THEFT	5A	12	141 - 152	N
0080	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	6A	12	153 - 164	N
0090	LINE 5 MINUS LINE 6	7A	12	165 - 176	N
0100	SMALLER OF LINE 2 OR LINE 7	8A	12	177 - 188	N
0110	LINE 8 MINUS LINE 3	9A	12	189 - 200	N
0120	DESCRIPTION OF PROPERTIES	1B	56	201 - 256	A/N OR BLANK
0130	COST OR OTHER BASIS	2B	12	257 - 268	N
0140	INSURANCE	3B	12	269 - 280	N
0150	GAIN FROM CASUALTY OR THEFT	4B	12	281 - 292	N ***
0160	FAIR MARKET VALUE BEFORE CASUALTY OR THEFT	5B	12	293 - 304	N
0170	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	6B	12	305 - 316	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0180	LINE 5 MINUS LINE 6	7B	12	317 - 328	N	
0190	SMALLER OF LINE 2 OR LINE 7	8B	12	329 - 340	N	
0200	LINE 8 MINUS LINE 3	9B	12	341 - 352	N	
0210	DESCRIPTION OF PROPERTIES	1C	56	353 - 408	A/N OR BLANK	
0220	COST OR OTHER BASIS	2C	12	409 - 420	N	
0230	INSURANCE	3C	12	421 - 432	N	
0240	GAIN FROM CASUALTY OR THEFT	4C	12	433 - 444	N ***	
0250	FAIR MARKET VALUE BEFORE CASUALTY OR THEFT	5C	12	445 - 456	N	
0260	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	6C	12	457 - 468	N	
0270	LINE 5 MINUS LINE 6	7C	12	469 - 480	N	
0280	SMALLER OF LINE 2 OR LINE 7	8C	12	481 - 492	N	
0290	LINE 8 MINUS LINE 3	9C	12	493 - 504	N	
0300	DESCRIPTION OF PROPERTIES	1D	56	505 - 560	A/N OR BLANK	
0310	COST OR OTHER BASIS	2D	12	561 - 572	N	
0320	INSURANCE	3D	12	573 - 584	N	
0330	GAIN FROM CASUALTY OR THEFT	4D	12	585 - 596	N ***	
0340	FAIR MARKET VALUE BEFORE CASUALTY OR THEFT	5D	12	597 - 608	N	
0350	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	6D	12	609 - 620	N	
0360	LINE 5 MINUS LINE 6	7D	12	621 - 632	N	
0370	SMALLER OF LINE 2 OR LINE 7	8D	12	633 - 644	N	
0380	LINE 8 MINUS LINE 3	9D	12	645 - 656	N	
0390	TOTAL CASUALTY OR THEFT LOSS	10	12	657 - 668	N	
0400	AMOUNT FROM LINE 10 OR \$100. WHICHEVER IS SMALLER	11	12	669 - 680	N	
0410	LINE 10 MINUS LINE 11	12	12	681 - 692	N	
0420	COMBINE ALL LINE 12 AMOUNTS - FORM 4684	13	12	693 - 704	N	

SECTION 9.51 FORM 4684 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
----	-----	----	-----	----	----	----	-----
0430	COMBINE ALL LINE 4 AMOUNTS - FORM 4684	14	12	705	-	716	N
0440	COMPARISON OF LINE 14 TO LINE 13	15	12	717	-	728	N
0450	COMPARISON OF LINE 14 TO LINE 13	16	12	729	-	740	N
0460	10% OF ADJUSTED GROSS INCOME (FORM 1040)	17	12	741	-	752	N
0470	LINE 16 MINUS LINE 17	18	12	753	-	764	N
	RECORD TERMINUS CHARACTER		1	765	-	765	"#"

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	1081
		4	5 -	8	*****
0490		6	9 -	14	"FRMbbb"
0491		6	15 -	20	"4684bb"
0492		5	21 -	25	"PG02b"
0493		9	26 -	34	N nnnnnnnnn
0494		1	35 -	35	BLANK
0495		7	36 -	42	N 0000001 - 9999999
*0510		6	43 -	48	"STMbnn" OR BLANK
NOTE: IF MORE SPACE IS NEEDED FOR SECTION B USE FIELD *510 AS A STATEMENT (STM) REFERENCE.					
0520	DESCRIPTION OF PROPERTIES	PT I 19	56	49 -	104 A/N OR BLANK
0530	COST OR ADJUSTED BASIS	PT I 20	12	105 -	116 N
0540	INSURANCE	PT I 21	12	117 -	128 N
0550	GAIN FROM CASUALTY OR THEFT	PT I 22	12	129 -	140 N ***
0560	FAIR MARKET VALUE BEFORE THEFT	PT I 23	12	141 -	152 N
0570	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	PT I 24	12	153 -	164 N
0580	LINE 23 MINUS LINE 24	PT I 25	12	165 -	176 N
0590	SMALLER OF LINE 22 OR LINE 25	PT I 26	12	177 -	188 N
0600	LINE 26 MINUS LINE 21	PT I 27	12	189 -	200 N
0610	DESCRIPTION OF PROPERTIES	PT I 19	56	201 -	256 A/N OR BLANK
0620	COST OR ADJUSTED BASIS	PT I 20	12	257 -	268 N
0630	INSURANCE	PT I 21	12	269 -	280 N
0640	GAIN FROM CASUALTY OR THEFT	PT I 22	12	281 -	292 N ***

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0650	FAIR MARKET VALUE BEFORE THEFT	PT I 23	12	293	- 304	N
0660	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	PT I 24	12	305	- 316	N
0670	LINE 23 MINUS LINE 24	PT I 25	12	317	- 328	N
0680	SMALLER OF LINE 22 OR LINE 25	PT I 26	12	329	- 340	N
0690	LINE 26 MINUS LINE 21	PT I 27	12	341	- 352	N
0700	DESCRIPTION OF PROPERTIES	PT I 19	56	353	- 408	A/N OR BLANK
0710	COST OR ADJUSTED BASIS	PT I 20	12	409	- 420	N
0720	INSURANCE	PT I 21	12	421	- 432	N
0730	GAIN FROM CASUALTY OR THEFT	PT I 22	12	433	- 444	N ***
0740	FAIR MARKET VALUE BEFORE THEFT	PT I 23	12	445	- 456	N
0750	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	PT I 24	12	457	- 468	N
0760	LINE 23 MINUS LINE 24	PT I 25	12	469	- 480	N
0770	SMALLER OF LINE 22 OR LINE 25	PT I 26	12	481	- 492	N
0780	LINE 26 MINUS LINE 21	PT I 27	12	493	- 504	N
0790	DESCRIPTION OF PROPERTIES	PT I 19	56	505	- 560	A/N OR BLANK
0800	COST OR ADJUSTED BASIS	PT I 20	12	561	- 572	N
0810	INSURANCE	PT I 21	12	573	- 584	N
0820	GAIN FROM CASUALTY OR THEFT	PT I 22	12	585	- 596	N ***
0830	FAIR MARKET VALUE BEFORE THEFT	PT I 23	12	597	- 608	N
0840	FAIR MARKET VALUE AFTER CASUALTY OR THEFT	PT I 24	12	609	- 620	N
0850	LINE 23 MINUS LINE 24	PT I 25	12	621	- 632	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0860	SMALLER OF LINE 22 OR LINE 25	PT I 26	12	633 -	644	N
0870	LINE 26 MINUS LINE 21	PT I 27	12	645 -	656	N
0880	TOTAL CASUALTY OR THEFT LOSS	PT I 28	12	657 -	668	N
0890	SHORT-CASUALTY OR THEFT DESCRIPTION (FIRST LINE)	PT II 29(a)	25	669 -	693	A/N OR BLANK
0900	TRADE BUSINESS RENTAL ROYALTY PROPERTY	PT II 29(b)(i)	12	694 -	705	N ***
0910	SHORT-INCOME PRODUCING PROPERTY	PT II 29(b)(ii)	12	706 -	717	N ***
0920	SHORT-GAINS FROM CASUALTIES OR THEFTS	PT II 29(c)	12	718 -	729	N
0930	SHORT-CASUALTY OR THEFT DESCRIPTION (SECOND LINE)	PT II 29(a)	25	730 -	754	A/N OR BLANK
0940	TRADE BUSINESS RENTAL ROYALTY PROPERTY	PT II 29(b)(i)	12	755 -	766	N ***
0950	SHORT-INCOME PRODUCING PROPERTY	PT II 29(b)(ii)	12	767 -	778	N ***
0960	SHORT-GAINS FROM CASUALTIES OR THEFTS	PT II 29(c)	12	779 -	790	N
0970	SHORT-TOTALS TRADE, BUSINESS, RENTAL, ROYALTY	PT II 30(b) i	12	791 -	802	N ***
0980	SHORT-TOTALS INCOME PRODUCING PROPERTY	PT II 30(b) ii	12	803 -	814	N ***
0990	SHORT-TOTALS FROM CASUALTIES OR THEFTS	PT II 30(c)	12	815 -	826	N
1000	PAL INDICATOR	PT II 31	3	827 -	829	"PAL" OR BLANK
1010	NET GAIN OR LOSS	PT II 32(c)	12	830 -	841	N
1020	PAL INDICATOR	PT II 32	3	842 -	844	"PAL" OR BLANK
1030	AMOUNT FROM LINE 30b(ii)	PT II 32(c)	12	845 -	856	N
1040	CASUALTY OR THEFT GAINS FROM FORM 4797	PT II 33(c)	12	857 -	868	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1050	LONG-CASUALTY THEFT DESCRIPTION (FIRST LINE)	PT II 34(a)	25	869 -	893	A/N OR BLANK
1060	TRADE, BUSINESS, RENTAL, ROYALTY PROPERTY	PT II 34(b) i	12	894 -	905	N ***
1070	LONG-GAINS FROM CASUALTIES OR THEFTS (1)	PT II 34(b) ii	12	906 -	917	N ***
1080	GAINS FROM CASUALTIES OR THEFTS	PT II 34(c)	12	918 -	929	N
1090	LONG-CASUALTY THEFT DESCRIPTION (SECOND LINE)	PT II 34(a)	25	930 -	954	A/N OR BLANK
1100	TRADE, BUSINESS, RENTAL ROYALTY PROPERTY	PT II 34(b) i	12	955 -	966	N ***
1110	INCOMING PRODUCING PROPERTY	PT II 34(b) ii	12	967 -	978	N ***
1120	LONG-GAINS FROM CASUALTIES OR THEFTS	PT II 34(c)	12	979 -	990	N
1130	LONG-TOTAL LOSSES TRADE, BUSINESS, RENTAL, ROYALTY	PT II 35(b) i	12	991 -	1002	N ***
1140	LONG-TOTAL LOSSES INCOME PRODUCING PROPERTY	PT II 35(b) ii	12	1003 -	1014	N ***
1150	LONG-TOTAL GAINS	PT II 36	12	1015 -	1026	N
1160	LONG-LINE 17 AMOUNTS, ADD COLS. (b)(i) AND (b)(ii)	PT II 37	12	1027 -	1038	N
1170	PAL INDICATOR	PT II 38(a)	3	1039 -	1041	"PAL" OR BLANK
1180	NET GAIN/LOSS COMBINE LINE 35(b)(i) AND LINE 36	PT II 38(a)(c)	12	1042 -	1053	N
1190	PAL INDICATOR	PT II 38(b)	3	1054 -	1056	"PAL" OR BLANK
1200	LINE 35 AMOUNT COL. (b)(ii)	PT II 38(b)(c)	12	1057 -	1068	N
1210	LOSS ON LINE 37 IS EQUAL TO OR LESS THAN THE GAIN ON LINE 36	PT II 39	12	1069 -	1080	N
	RECORD TERMINUS CHARACTER		1	1081 -	1081	"#"

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

Department of the Treasury
Internal Revenue Service (99)

Attach to your tax return. See separate instructions.

Name(s) shown on return Identifying number

1 Enter the gross proceeds from sales or exchanges reported to you for 2001 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)

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.)

Table with 7 columns: (a) Description of property, (b) Date acquired, (c) Date sold, (d) Gross sales price, (e) Depreciation allowed, (f) Cost or other basis, (g) Gain or (loss)

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 32, from other than casualty or theft

7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:
Partnerships (except electing large partnerships). Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 6. Skip lines 8, 9, 11, and 12 below.
S corporations. Report the gain or (loss) following the instructions for Form 1120S, Schedule K, lines 5 and 6. Skip lines 8, 9, 11, and 12 below, unless line 7 is a gain and the S corporation is subject to the capital gains tax.
All others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 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 from line 7 as a long-term capital gain on Schedule D and skip lines 8, 9, 11, and 12 below.

8 Nonrecaptured net section 1231 losses from prior years (see instructions)

9 Subtract line 8 from line 7. If zero or less, enter -0-. Also enter on the appropriate line as follows (see instructions):
S corporations. Enter any gain from line 9 on Schedule D (Form 1120S), line 15, and skip lines 11 and 12 below.
All others. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below, and enter the gain from line 9 as a long-term capital gain on Schedule D.

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
12 Gain, if any, from line 7 or amount from line 8, if applicable
13 Gain, if any, from line 31
14 Net gain or (loss) from Form 4684, lines 31 and 38a
15 Ordinary gain from installment sales from Form 6252, line 25 or 36
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824

17 Recapture of section 179 expense deduction for partners and S corporation shareholders from property dispositions by partnerships and S corporations (see instructions)
18 Combine lines 10 through 17. Enter the gain or (loss) here and on the appropriate line as follows:

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

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					
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			
21	Cost or other basis plus expense of sale	21			
22	Depreciation (or depletion) allowed or allowable	22			
23	Adjusted basis. Subtract line 22 from line 21	23			
24	Total gain. Subtract line 23 from line 20	24			
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 (see instructions)	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	
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	32	

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	



FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0906
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"4797bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0020	GROSS PROCEEDS FROM REAL ESTATE	1	12	43 -	54	N
0040	DESCRIPTION OF PROPERTY ITEM 1	PT I 2(a)	15	55 -	69	A/N
0050	DATE ACQUIRED ITEM 1	PT I 2(b)	8	70 -	77	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0060	DATE SOLD ITEM 1	PT I 2(c)	8	78 -	85	FORMAT: YYYYMMDD OR BLANK
0070	GROSS SALES PRICE ITEM 1	PT I 2(d)	12	86 -	97	N
0080	DEPRECIATION ALLOWED ITEM 1	PT I 2(e)	12	98 -	109	N
0090	COST OR OTHER BASIS ITEM 1	PT I 2(f)	12	110 -	121	N
0100	GAIN OR LOSS ITEM 1	PT I 2(g)	12	122 -	133	N
0120	DESCRIPTION OF PROPERTY ITEM 2	PT I 2(a)	15	134 -	148	A/N
0130	DATE ACQUIRED ITEM 2	PT I 2(b)	8	149 -	156	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0140	DATE SOLD ITEM 2	PT I 2(c)	8	157 -	164	FORMAT: YYYYMMDD OR BLANK
0150	GROSS SALES PRICE ITEM 2	PT I 2(d)	12	165 -	176	N
0160	DEPRECIATION ALLOWED ITEM 2	PT I 2(e)	12	177 -	188	N
0170	COST OR OTHER BASIS ITEM 2	PT I 2(f)	12	189 -	200	N
0180	GAIN OR LOSS ITEM 2	PT I 2(g)	12	201 -	212	N

SECTION 9.54 FORM 4797 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0200	DESCRIPTION OF PROPERTY ITEM 3	PT I 2(a)	15	213 -	227	A/N
0210	DATE ACQUIRED ITEM 3	PT I 2(b)	8	228 -	235	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0220	DATE SOLD ITEM 3	PT I 2(c)	8	236 -	243	FORMAT: YYYYMMDD OR BLANK
0230	GROSS SALES PRICE ITEM 3	PT I 2(d)	12	244 -	255	N
0240	DEPRECIATION ALLOWED ITEM 3	PT I 2(e)	12	256 -	267	N
0250	COST OR OTHER BASIS ITEM 3	PT I 2(f)	12	268 -	279	N
0260	GAIN OR LOSS ITEM 3	PT I 2(g)	12	280 -	291	N
0280	DESCRIPTION OF PROPERTY ITEM 4	PT I 2(a)	15	292 -	306	A/N
0290	DATE ACQUIRED ITEM 4	PT I 2(b)	8	307 -	314	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0300	DATE SOLD ITEM 4	PT I 2(c)	8	315 -	322	FORMAT: YYYYMMDD OR BLANK
0310	GROSS SALES PRICE ITEM 4	PT I 2(d)	12	323 -	334	N
0320	DEPRECIATION ALLOWED ITEM 4	PT I 2(e)	12	335 -	346	N
0330	COST OR OTHER BASIS ITEM 4	PT I 2(f)	12	347 -	358	N
0340	GAIN OR LOSS ITEM 4	PT I 2(g)	12	359 -	370	N
*0345	(A) DESCRIPTION OF PROPERTY	PT I	6	371 -	376	"STMbnn" OR BLANK
NOTE: USE FIELD #0345 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART I, LINE 2. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.						
0600	GAIN FORM 4684, LINE 39	PT I 3(g)	12	377 -	388	N
0610	SEC 1231 GAIN FORM 6252 LINE 26 OR 37	PT 1 4(g)	12	389 -	400	N
0615	SEC 1231 GAIN/LOSS FROM FORM 8824	PT 1 5(g)	12	401 -	412	N
0620	GAIN ON LINE 32	PT I 6(g)	12	413 -	424	N
0650	COMBINE LINES 2 - 6	PT I 7(g)	12	425 -	436	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0660	NONRECAPTURED LOSSES FROM PRIOR YEARS	PT I 8(g)	12	437 -	448	N
0670	LINE 7 MINUS LINE 8	PT I 9(g)	12	449 -	460	N
0690	ORDINARY GAINS AND LOSSES DESCRIPTION OF PROPERTY ITEM 1	PT II 10(a)	15	461 -	475	A/N
0700	ORDINARY GAINS AND LOSSES DATE ACQUIRED ITEM 1	PT II 10(b)	8	476 -	483	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0710	ORDINARY GAINS AND LOSSES DATE SOLD ITEM 1	PT II 10(c)	8	484 -	491	FORMAT: YYYYMMDD OR BLANK
0720	ORDINARY GAINS AND LOSSES GROSS SALES PRICE ITEM 1	PT II 10(d)	12	492 -	503	N
0730	ORDINARY GAINS AND LOSSES DEPRECIATION ALLOWED ITEM 1	PT II 10(e)	12	504 -	515	N
0740	ORDINARY GAINS AND LOSSES COST OR OTHER BASIS ITEM 1	PT II 10(f)	12	516 -	527	N
0750	ORDINARY GAINS AND LOSSES ITEM 1	PT II 10(g)	12	528 -	539	N
0770	ORDINARY GAINS AND LOSSES DESCRIPTION OF PROPERTY ITEM 2	PT II 10(a)	15	540 -	554	A/N
0780	ORDINARY GAINS AND LOSSES LOSSES DATE ACQUIRED ITEM 2	PT II 10(b)	8	555 -	562	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0790	ORDINARY GAINS AND LOSSES DATE SOLD ITEM 2	PT II 10(c)	8	563 -	570	FORMAT: YYYYMMDD OR BLANK
0800	ORDINARY GAINS AND LOSSES GROSS SALES PRICE ITEM 2	PT II 10(d)	12	571 -	582	N
0810	ORDINARY GAINS AND LOSSES DEPRECIATION ALLOWED ITEM 2	PT II 10(e)	12	583 -	594	N
0820	ORDINARY GAINS AND LOSSES COST OR OTHER BASIS ITEM 2	PT II 10(f)	12	595 -	606	N
0830	ORDINARY GAINS AND LOSSES ITEM 2	PT II 10(g)	12	607 -	618	N
0850	ORDINARY GAINS AND LOSSES DESCRIPTION OF PROPERTY ITEM 3	PT II 10(a)	15	619 -	633	A/N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0860	ORDINARY GAINS AND LOSSES LOSSES DATE ACQUIRED ITEM 3	PT II 10(b)	8	634 -	641	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0870	ORDINARY GAINS AND LOSSES DATE SOLD ITEM 3	PT II 10(c)	8	642 -	649	FORMAT: YYYYMMDD OR BLANK
0880	ORDINARY GAINS AND LOSSES GROSS SALES PRICE ITEM 3	PT II 10(d)	12	650 -	661	N
0890	ORDINARY GAINS AND LOSSES DEPRECIATION ALLOWED ITEM 3	PT II 10(e)	12	662 -	673	N
0900	ORDINARY GAINS AND LOSSES COST OR OTHER BASIS ITEM 3	PT II 10(f)	12	674 -	685	N
0910	ORDINARY GAINS AND LOSSES ITEM 3	PT II 10(g)	12	686 -	697	N
0930	ORDINARY GAINS AND LOSSES DESCRIPTION OF PROPERTY ITEM 4	PT II 10(a)	15	698 -	712	A/N
0940	ORDINARY GAINS AND LOSSES LOSSES DATE ACQUIRED ITEM 4	PT II 10(b)	8	713 -	720	FORMAT: YYYYMMDD "INHERIT" OR BLANK
0950	ORDINARY GAINS AND LOSSES DATE SOLD ITEM 4	PT II 10(c)	8	721 -	728	FORMAT: YYYYMMDD OR BLANK
0960	ORDINARY GAINS AND LOSSES GROSS SALES PRICE ITEM 4	PT II 10(d)	12	729 -	740	N
0970	ORDINARY GAINS AND LOSSES DEPRECIATION ALLOWED ITEM 4	PT II 10(e)	12	741 -	752	N
0980	ORDINARY GAINS AND LOSSES COST OR OTHER BASIS ITEM 4	PT II 10(f)	12	753 -	764	N
0990	ORDINARY GAINS AND LOSSES ITEM 4	PT II 10(g)	12	765 -	776	N
*0995	DESCRIPTION OF PROPERTY	PT II	6	777 -	782	"STMbnn" OR BLANK
NOTE: USE FIELD # 0995 AS A STATEMENT (STM) REFERENCE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART II, LINE 10. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.						
1250	LOSS FROM LINE 7	PT II 11	12	783 -	794	N ***
1260	GAIN FROM LINE 7 OR AMOUNT FROM LINE 8	PT II 12	12	795 -	806	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1270	NET GAIN FROM LINE 31	PT II 13	12	807 -	818	N
1275	PAL INDICATOR	PT II 14	3	819 -	821	"PAL" OR BLANK
1280	NET GAIN OR LOSS FORM 4684 SEC B LINES 31 AND 38A	PT II 14	12	822 -	833	N
1300	ORDINARY GAIN FROM INSTALLMENT SALES FORM 6252 LINE 25 OR 36	PT II 15	12	834 -	845	N
1305	ORDINARY GAIN OR LOSS FROM LIKE KIND EXCHANGE	PT II 16	12	846 -	857	N
1310	RECAPTURE OF SEC 179 DEDUCTION	PT II 17	12	858 -	869	N
1340	COMBINE LINES 10-17	PT II 18	12	870 -	881	N
1350	INDIVIDUAL RETURN FORM 4684 SEC B PT II (LOSS)	PT II 18 b(1)	12	882 -	893	NO ENTRY
1360	INDIVIDUAL RETURN GAIN OR LOSS	PT II 18 b(2)	12	894 -	905	NO ENTRY
	RECORD TERMINUS CHARACTER		1	906 -	906	"#"

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	1395
	START RECORD SENTINEL		4	5 -	8	*****
1380	RECORD ID		6	9 -	14	"FRMbbb"
1381	FORM NUMBER		6	15 -	20	"4797bb"
1382	PAGE NUMBER		5	21 -	25	"PG02b"
1383	EMPLOYER IDENTIFICATION NUMBER (PARTNERSHIP'S EIN)		9	26 -	34	N nnnnnnnnn
1384	FILLER		1	35 -	35	BLANK
1385	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
1400	DESCRIPTION OF PROPERTY PROPERTY A	PT III 19A	40	43 -	82	A/N
1410	GAIN FROM DISPOSITION DATE ACQUIRED PROPERTY A	PT III 19 A(b)	8	83 -	90	FORMAT: YYYYMMDD OR BLANK
1420	GAIN FROM DISPOSITION DATE SOLD PROPERTY A	PT III 19 A(c)	8	91 -	98	FORMAT: YYYYMMDD OR BLANK
1430	GROSS SALES PRICE PROPERTY A	PT III 20 A	12	99 -	110	N
1440	COST OR OTHER BASIS PLUS EXPENSE PROPERTY A	PT III 21 A	12	111 -	122	N
1450	DEPRECIATION PROPERTY A	PT III 22 A	12	123 -	134	N
1460	ADJUSTED BASIS LINE 21 MINUS LINE 22 PROPERTY A	PT III 23 A	12	135 -	146	N
1470	TOTAL GAIN LINE 20 MINUS LINE 23 PROPERTY A	PT III 24 A	12	147 -	158	N
1480	SEC 1245 DEPRECIATION PROPERTY A	PT III 25a A	12	159 -	170	N
1490	SEC 1245 SMALLER OF 24 OR 25a PROPERTY A	PT III 25b A	12	171 -	182	N
1500	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1975 PROPERTY A	PT III 26a A	12	183 -	194	N
1510	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF LINE 24 OR 26a PROPERTY A	PT III 26b A	12	195 -	206	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1520	SEC 1250 LINE 24 MINUS LINE 26a PROPERTY A	PT III 26c A	12	207 -	218	N
1530	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1969 BEFORE 1976 PROPERTY A	PT III 26d A	12	219 -	230	N
1540	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF 26c OR 26d PROPERTY A	PT III 26e A	12	231 -	242	N
1550	SEC 291 AMOUNT PROPERTY A	PT III 26f A	12	243 -	254	NO ENTRY
1560	ADD LINES 26b, e AND f PROPERTY A	PT III 26g A	12	255 -	266	N
1570	SEC 1252 SOIL, WATER AND LAND EXPENSES PROPERTY A	PT III 27a A	12	267 -	278	N
1580	SEC 1252 27a TIMES APPLICATION PERCENTAGE PROPERTY A	PT III 27b A	12	279 -	290	N
1590	SEC 1252 SMALLER OF LINE 24 OR 27b PROPERTY A	PT III 27c A	12	291 -	302	N
1600	SEC 1254 INTANGIBLE DRILLING AND DEVELOPMENT PROPERTY A	PT III 28a A	12	303 -	314	N
1610	SEC 1254 SMALLER OF LINE 24 OR 28a PROPERTY A	PT III 28b A	12	315 -	326	N
1620	SEC 1255 APPLICABLE PERCENTAGE PROPERTY A	PT III 29a A	12	327 -	338	N
1630	SEC 1255 SMALLER OF LINE 24 OR 29a PROPERTY A	PT III 29b A	12	339 -	350	N
1640	DESCRIPTION OF PROPERTY PROPERTY B	PT III 19 B	40	351 -	390	A/N
1650	GAIN FROM DISPOSITION DATE ACQUIRED PROPERTY B	PT III 19 B(b)	8	391 -	398	FORMAT: YYYYMMDD OR BLANK
1660	GAIN FROM DISPOSITION DATE SOLD PROPERTY B	PT III 19 B(c)	8	399 -	406	FORMAT: YYYYMMDD OR BLANK
1670	GROSS SALES PRICE PROPERTY B	PT III 20 B	12	407 -	418	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1680	COST OR OTHER BASIS PLUS EXPENSE PROPERTY B	PT III 21 B	12	419 -	430	N
1690	DEPRECIATION PROPERTY B	PT III 22 B	12	431 -	442	N
1700	ADJUSTED BASIS LINE 21 MINUS LINE 22 PROPERTY B	PT III 23 B	12	443 -	454	N
1710	TOTAL GAIN LINE 20 MINUS LINE 23 PROPERTY B	PT III 24 B	12	455 -	466	N
1720	SEC 1245 DEPRECIATION PROPERTY B	PT III 25a B	12	467 -	478	N
1730	SEC 1245 SMALLER OF 24 OR 25a PROPERTY B	PT III 25b B	12	479 -	490	N
1740	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1975 PROPERTY B	PT III 26a B	12	491 -	502	N
1750	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF LINE 24 OR 26a PROPERTY B	PT III 26b B	12	503 -	514	N
1760	SEC 1250 LINE 24 MINUS LINE 26a PROPERTY B	PT III 26c B	12	515 -	526	N
1770	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1969 BEFORE 1976 PROPERTY B	PT III 26d B	12	527 -	538	N
1780	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF 26c OR 26d PROPERTY B	PT III 26e B	12	539 -	550	N
1790	SEC 291 AMOUNT PROPERTY B	PT III 26f B	12	551 -	562	NO ENTRY
1800	ADD LINES 26b, e AND f PROPERTY B	PT III 26g B	12	563 -	574	N
1810	SEC 1252 SOIL, WATER AND LAND EXPENSES PROPERTY B	PT III 27a B	12	575 -	586	N
1820	SEC 1252 27a TIMES APPLICATION PERCENTAGE PROPERTY B	PT III 27b B	12	587 -	598	N
1830	SEC 1252 SMALLER OF LINE 24 OR 27b PROPERTY B	PT III 27c B	12	599 -	610	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1840	SEC 1254 INTANGIBLE DRILLING AND DEVELOPMENT PROPERTY B	PT III 28a B	12	611 -	622	N
1850	SEC 1254 SMALLER OF LINE 24 OR 28a PROPERTY B	PT III 28b B	12	623 -	634	N
1860	SEC 1255 APPLICABLE PERCENTAGE PROPERTY B	PT III 29a B	12	635 -	646	N
1870	SEC 1255 SMALLER OF LINE 24 OR 29a PROPERTY B	PT III 29b B	12	647 -	658	N
1880	DESCRIPTION OF PROPERTY PROPERTY C	PT III 19 C	40	659 -	698	A/N
1890	GAIN FROM DISPOSITION DATE ACQUIRED PROPERTY C	PT III 19 C(b)	8	699 -	706	FORMAT: YYYYMMDD OR BLANK
1900	GAIN FROM DISPOSITION DATE SOLD PROPERTY C	PT III 19 C(c)	8	707 -	714	FORMAT: YYYYMMDD OR BLANK
1910	GROSS SALES PRICE PROPERTY C	PT III 20 C	12	715 -	726	N
1920	COST OR OTHER BASIS PLUS EXPENSE PROPERTY C	PT III 21 C	12	727 -	738	N
1930	DEPRECIATION PROPERTY C	PT III 22 C	12	739 -	750	N
1940	ADJUSTED BASIS LINE 20 MINUS LINE 22 PROPERTY C	PT III 23 C	12	751 -	762	N
1950	TOTAL GAIN LINE 20 MINUS LINE 23 PROPERTY C	PT III 24 C	12	763 -	774	N
1960	SEC 1245 DEPRECIATION PROPERTY C	PT III 25a C	12	775 -	786	N
1970	SEC 1245 SMALLER OF 24 OR 25a PROPERTY C	PT III 25b C	12	787 -	798	N
1980	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1975 PROPERTY C	PT III 26a C	12	799 -	810	N
1990	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF LINE 24 OR 26a PROPERTY C	PT III 26b C	12	811 -	822	N
2000	SEC 1250 LINE 24 MINUS LINE 26a	PT III 26c C	12	823 -	834	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2010	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1969 BEFORE 1976 PROPERTY C	PT III 26d C	12	835 -	846	N
2020	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF LINE 26c or 26d PROPERTY C	PT III 26e C	12	847 -	858	N
2030	SEC 291 AMOUNT PROPERTY C	PT III 26f C	12	859 -	870	NO ENTRY
2040	ADD LINES 26b, e AND f PROPERTY C	PT III 26g C	12	871 -	882	N
2050	SEC 1252 SOIL, WATER AND LAND EXPENSES PROPERTY C	PT III 27a C	12	883 -	894	N
2060	SEC 1252 27a TIMES APPLICATION PERCENTAGE PROPERTY C	PT III 27b C	12	895 -	906	N
2070	SEC 1252 SMALLER OF LINE 24 OR 27b PROPERTY C	PT III 27c C	12	907 -	918	N
2080	SEC 1254 INTANGIBLE DRILLING AND DEVELOPMENT PROPERTY C	PT III 28a C	12	919 -	930	N
2090	SEC 1254 SMALLER OF LINE 24 OR 28a PROPERTY C	PT III 28b C	12	931 -	942	N
2100	SEC 1255 APPLICABLE PERCENTAGE PROPERTY C	PT III 29a C	12	943 -	954	N
2110	SEC 1255 SMALLER OF LINE 24 OR 29a PROPERTY C	PT III 29b C	12	955 -	966	N
2120	DESCRIPTION OF PROPERTY PROPERTY D	PT III 19 D	40	967 -	1006	A/N
2130	GAIN FROM DISPOSITION DATE ACQUIRED PROPERTY D	PT III 19 D(b)	8	1007 -	1014	FORMAT: YYYYMMDD OR BLANK
2140	GAIN FROM DISPOSITION DATE SOLD PROPERTY D	PT III 19 D(c)	8	1015 -	1022	FORMAT: YYYYMMDD OR BLANK
2150	GROSS SALES PRICE PROPERTY D	PT III 20 D	12	1023 -	1034	N
2160	COST OR OTHER BASIS PLUS EXPENSE PROPERTY D	PT III 21 D	12	1035 -	1046	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2170	DEPRECIATION PROPERTY D	PT III 22 D	12	1047	- 1058	N
2180	ADJUSTED BASIS LINE 21 MINUS LINE 22 PROPERTY D	PT III 23 D	12	1059	- 1070	N
2190	TOTAL GAIN LINE 20 MINUS LINE 23 PROPERTY D	PT III 24 D	12	1071	- 1082	N
*2195	GAIN FROM DISPOSITION OF PROPERTY	PT III 19	6	1083	- 1088	"STMbnn" OR BLANK
NOTE: USE FIELD # 2195 AS A STATEMENT (STM) REFERENE IF ADDITIONAL INFORMATION OR ATTACHMENTS ARE NEEDED FOR PART III. A MAXIMUM OF 4 PAGE RECORDS, 50 LINES PER PAGE ARE ALLOWED.						
2200	SEC 1245 DEPRECIATION PROPERTY D	PT III 25a D	12	1089	- 1100	N
2210	SEC 1245 SMALLER OF 24 OR 25a PROPERTY D	PT III 25b D	12	1101	- 1112	N
2220	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1975 PROPERTY D	PT III 26a D	12	1113	- 1124	N
2230	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF LINE 24 OR 26a PROPERTY D	PT III 26b D	12	1125	- 1136	N
2240	SEC 1250 LINE 24 MINUS LINE 26a PROPERTY D	PT III 26c D	12	1137	- 1148	N
2250	SEC 1250 ADDITIONAL DEPRECIATION AFTER 1969 BEFORE 1976 PROPERTY D	PT III 26d D	12	1149	- 1160	N
2260	SEC 1250 APPLICABLE PERCENTAGE SMALLER OF 26c OR 26d PROPERTY D	PT III 26e D	12	1161	- 1172	N
2270	SEC 291 AMOUNT PROPERTY D	PT III 26f D	12	1173	- 1184	NO ENTRY
2280	ADD LINES 26b, e AND f PROPERTY D	PT III 26g D	12	1185	- 1196	N
2290	SEC 1252 SOIL, WATER AND LAND EXPENSES PROPERTY D	PT III 27a D	12	1197	- 1208	N
2300	SEC 1252 27a TIMES APPLICATION PERCENTAGE PROPERTY D	PT III 27b D	12	1209	- 1220	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
2310	SEC 1252 SMALLER OF LINE 24 OR 27b PROPERTY D	PT III 27c D	12	1221 -	1232	N
2320	SEC 1254 INTANGIBLE DRILLING AND DEVELOPMENT PROPERTY D	PT III 28a D	12	1233 -	1244	N
2330	SEC 1254 SMALLER OF LINE 24 OR 28a PROPERTY D	PT III 28b D	12	1245 -	1256	N
2340	SEC 1255 APPLICABLE PERCENTAGE PROPERTY D	PT III 29a D	12	1257 -	1268	N
2350	SEC 1255 SMALLER OF LINE 24 OR 29a PROPERTY D	PT III 29b D	12	1269 -	1280	N
2360	TOTAL GAINS ALL PROPERTIES	PT III 30	12	1281 -	1292	N
2370	COLUMNS A THROUGH D	PT III 31	12	1293 -	1304	N
2380	SUBTRACT LINE 31 FROM LINE 30	PT III 32	12	1305 -	1316	N
2420	EXPENSE DEDUCTION OR RECOVERY DEDUCTION SEC 179	PT IV 33(a)	12	1317 -	1328	N
2430	EXPENSE DEDUCTION OR RECOVERY DEDUCTION SEC 280F	PT IV 33(b)	12	1329 -	1340	N
2440	DEPRECIATION OR RECOVERY SEC 179	PT IV 34(a)	12	1341 -	1352	N
2450	DEPRECIATION OR RECOVERY SEC 280F	PT IV 34(b)	12	1353 -	1364	N
2460	LINE 33 MINUS LINE 34 SEC 179	PT IV 35(a)	12	1365 -	1376	N
2470	LINE 33 MINUS LINE 34 SEC 280F	PT IV 35(b)	12	1377 -	1388	N
*2475	RECAPTURE STATEMENT	PT IV	6	1389 -	1394	"STMbnn" OR BLANK
	RECORD TERMINUS CHARACTER		1	1395 -	1395	"#"

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

Department of the Treasury Internal Revenue Service (99)

Attach to Form 1040. See instructions on back.

Name(s) shown on Form 1040

Your social security number

Employer ID number (EIN), if any

A Did you actively participate in the operation of this farm during 2001? See instructions Yes No

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

Table with 7 rows for income items: 1 Income from production of livestock, produce, grains, and other crops; 2a Total cooperative distributions; 3a Agricultural program payments; 4 Commodity Credit Corporation (CCC) loans; 5 Crop insurance proceeds; 6 Other income; 7 Gross farm rental income.

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

Table with 20 rows for expense items: 8 Car and truck expenses; 9 Chemicals; 10 Conservation expenses; 11 Custom hire; 12 Depreciation; 13 Employee benefit programs; 14 Feed; 15 Fertilizers; 16 Freight; 17 Gasoline; 18 Insurance; 19 Interest; 20 Labor hired; 21 Pension; 22 Rent or lease; 23 Repairs; 24 Seeds; 25 Storage; 26 Supplies; 27 Taxes; 28 Utilities; 29 Veterinary; 30 Other expenses.

31 Total expenses. Add lines 8 through 30g

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 39. If the result is a loss, you must go on to line 33

33 If line 32 is a loss, you must check the box that describes your investment in this activity. See instructions

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 39

SECTION 9.57 FORM 4835 - PAGE 1

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0759
		4	5 -	8	*****
0000		6	9 -	14	"FRMbbb"
0001		6	15 -	20	"4835bb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnnn
0004		1	35 -	35	BLANK
0005		7	36 -	42	N 0000001 - 9999999
0010		9	43 -	51	NO ENTRY
0030	A	1	52 -	52	"X" OR BLANK
0035	A	1	53 -	53	"X" OR BLANK
0040	PART I 1	12	54 -	65	N
0050	PART I 2a	12	66 -	77	N
0060	PART I 2b	12	78 -	89	N
0070	PART I 3a	12	90 -	101	N
0080	PART I 3b	12	102 -	113	N
0090	PART I 4a	12	114 -	125	N
@0100	PART I 4a	6	126 -	131	"STMbnn" OR BLANK
0110	PART I 4b	12	132 -	143	N
0120	PART I 4c	12	144 -	155	N
0130	PART I 5a	12	156 -	167	N
0140	PART I 5b	12	168 -	179	N
0160	PART I 5c	1	180 -	180	"X" OR BLANK

SECTION 9.57 FORM 4835 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
@0165	CROP INSURANCE PROCEEDS STATEMENT	PART I 5c	6	181 -	186	"STMbnn" OR BLANK
0170	ELECTION TO DEFER AMOUNT	PART I 5d	12	187 -	198	N
0180	OTHER INCOME	PART I 6	12	199 -	210	N
0190	GROSS FARM RENTS ADD RIGHT COLUMN LINES 1-6	PART I 7	12	211 -	222	N
0200	CAR AND TRUCK EXPENSES (FORM 4562)	PT II 8	12	223 -	234	N
0210	CHEMICAL	PT II 9	12	235 -	246	N
0220	CONSERVATION EXPENSES	PT II 10	12	247 -	258	NO ENTRY
0230	CUSTOM HIRE	PT II 11	12	259 -	270	N
0240	DEPRECIATION AND SEC 179 EXPENSE DEDUCTION	PT II 12	12	271 -	282	N
0250	EMPLOYEE BENEFIT PROGRAMS	PT II 13	12	283 -	294	N
0260	FEED PURCHASED	PT II 14	12	295 -	306	N
0270	FERTILIZERS AND LIME	PT II 15	12	307 -	318	N
0280	FREIGHT AND TRUCKING	PT II 16	12	319 -	330	N
0290	GASOLINE, FUEL AND OIL	PT II 17	12	331 -	342	N
0300	INSURANCE	PT II 18	12	343 -	354	N
0310	MORTGAGE	PT II 19a	12	355 -	366	N
0320	OTHER	PT II 19b	12	367 -	378	N
*0330	FORM 1098 EXPLANATION	PT II 19a	6	379 -	384	"STMbnn" OR BLANK
*0340	FORM 1098 NAME/ADDRESS	PT II 19b	6	385 -	390	"STMbnn" OR BLANK
0350	LABOR HIRED	PT II 20	12	391 -	402	N
0360	PENSION AND PROFIT- SHARING PLANS	PT II 21	12	403 -	414	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
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0370	RENT OR LEASE VEHICLES, MACHINERY AND EQUIP	PT II 22a	12	415	-	426	N
0380	OTHER (LAND, ANIMALS, ETC)	PT II 22b	12	427	-	438	N
0390	REPAIRS AND MAINTENANCE	PT II 23	12	439	-	450	N
0400	SEEDS AND PLANTS PURCHASED	PT II 24	12	451	-	462	N
0410	STORAGE AND WAREHOUSING	PT II 25	12	463	-	474	N
0420	SUPPLIES PURCHASED	PT II 26	12	475	-	486	N
0430	TAXES	PT II 27	12	487	-	498	N
0440	UTILITIES	PT II 28	12	499	-	510	N
0450	VETERINARY FEES AND MEDICINE	PT II 29	12	511	-	522	N
*0460	OTHER EXPENSES	PT II 30	6	523	-	528	"STMbnn" OR BLANK
<p>NOTE: IF MORE THAN SIX (6) EXPLANATIONS FOR PART II ARE NECESSARY OR THE SPACE ALLOWED IS INSUFFICIENT USE FIELD *0460 AS A STATEMENT (STM) REFERENCE. THE STM RECORDS MUST BEGIN WITH THE FIRST EXPLANATION.</p>							
0470	OTHER EXPENSES (SPECIFY)	PT II 30a	15	529	-	543	A/N
0480	OTHER EXPENSES	PT II 30a	12	544	-	555	N
0490	OTHER EXPENSES (SPECIFY)	PT II 30b	15	556	-	570	A/N
0500	OTHER EXPENSES	PT II 30b	12	571	-	582	N
0510	OTHER EXPENSES (SPECIFY)	PT II 30c	15	583	-	597	A/N
0520	OTHER EXPENSES	PT II 30c	12	598	-	609	N
0530	OTHER EXPENSES (SPECIFY)	PT II 30d	15	610	-	624	A/N
0540	OTHER EXPENSES	PT II 30d	12	625	-	636	N
0550	OTHER EXPENSES (SPECIFY)	PT II 30e	15	637	-	651	A/N

SECTION 9.57 FORM 4835 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0560	OTHER EXPENSES	PT II 30e	12	652	-	663	N
0570	OTHER EXPENSES (SPECIFY)	PT II 30f	15	664	-	678	A/N
0580	OTHER EXPENSES	PT II 30f	12	679	-	690	N
0590	OTHER EXPENSES (SPECIFY)	PT II 30g	15	691	-	705	A/N
0600	OTHER EXPENSES	PT II 30g	12	706	-	717	N
0610	TOTAL EXPENSES ADD LINES 8-30g	31	12	718	-	729	N
0620	PAL INDICATOR	32	3	730	-	732	"PAL" OR BLANK
0630	NET FARM RENTAL INCOME OR (LOSS)	32	12	733	-	744	N
0640	ALL INVESTMENT IS AT RISK	33a	1	745	-	745	"X" OR BLANK
0650	SOME INVESTMENT IS NOT AT RISK	33b	1	746	-	746	"X" OR BLANK
0660	DEDUCTIBLE LOSS	33c	12	747	-	758	N
	RECORD TERMINUS CHARACTER		1	759	-	759	"#"

Investment Interest Expense Deduction

▶ Attach to your tax return.

Identifying number

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2001. See instructions	1		
2	Disallowed investment interest expense from 2000 Form 4952, line 7	2		
3	Total investment interest expense. Add lines 1 and 2	3		

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		
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 the amount from line 4c that you elect to include in investment income. Do not enter more than the amount on line 4b. See instructions ▶	4e		
f	Investment income. Add lines 4a, 4d, and 4e. See instructions	4f		
5	Investment expenses. See instructions	5		
6	Net investment income. Subtract line 5 from line 4f. If zero or less, enter -0-	6		

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2002. Subtract line 6 from line 3. If zero or less, enter -0-	7		
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions.	8		

Section references are to the Internal Revenue Code unless otherwise noted.

General Instructions

Purpose of Form

Use Form 4952 to figure the amount of investment interest expense you can deduct for 2001 and the amount you can carry forward to future years. Your investment interest expense deduction is limited to your net investment income.

For additional information, see **Pub. 550**, Investment Income and Expenses.

Who Must File

If you are an individual, estate, or a trust and you claim a deduction for investment interest expense, you must complete Form 4952 and attach it to your tax return unless **all** of the following apply.

- Your investment interest expense is not more than your investment income from interest and ordinary dividends.
- You have no other deductible investment expenses.
- You have no disallowed investment interest expense from 2000.

Allocation of Interest Expense Under Temporary Regulations Section 1.163-8T

If you paid or accrued interest on a loan and used the loan proceeds for more than one purpose, you may have to allocate the interest. This is necessary because different rules apply to investment interest, personal interest, trade or business interest, home mortgage interest, and passive activity interest. See **Pub. 535**, Business Expenses.

Specific Instructions

Part I—Total Investment Interest Expense

Line 1

Enter the investment interest expense paid or accrued during the tax year, regardless of when you incurred the indebtedness.

Investment interest expense is interest paid or accrued on a loan or part of a loan that is allocable to property held for investment (as defined on page 2).

Include investment interest expense reported to you on Schedule K-1 from a partnership or an S corporation. Include

amortization of bond premium on taxable bonds purchased after October 22, 1986, but before January 1, 1988, unless you elected to offset amortizable bond premium against the interest payments on the bond. A taxable bond is a bond on which the interest is includible in gross income.

Investment interest expense **does not** include any of the following:

- Home mortgage interest.
- Interest expense that is properly allocable to a passive activity. Generally, a passive activity is any business activity in which you **do not** materially participate and any rental activity. See the separate instructions for **Form 8582**, Passive Activity Loss Limitations, for details.
- Any interest expense that is capitalized, such as construction interest subject to section 263A.
- Interest expense related to tax-exempt interest income under section 265.
- Interest expense, disallowed under section 264, on indebtedness with respect to life insurance, endowment, or annuity contracts issued after June 8, 1997, even if the proceeds were used to purchase any property held for investment.

SECTION 9.59 FORM 4952 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0199
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"4952bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0020	INVESTMENT INTEREST EXPENSE	PT I 1	12	43 -	54	N
0030	DISALLOWED INVESTMENT INTEREST EXPENSE	PT I 2	12	55 -	66	N
0040	TOTAL INVESTMENT INTEREST ADD LINES 1 AND 2	PT I 3	12	67 -	78	N
0050	GROSS INCOME FROM PROPERTY HELD FOR INVESTMENT	PT II 4(a)	12	79 -	90	N
0060	NET GAIN	PT II 4(b)	12	91 -	102	N
0070	NET CAPITAL GAIN	PT II 4(c)	12	103 -	114	N
0080	SUBTRACT LINE 4c FROM LINE 4b	PT II 4(d)	12	115 -	126	N
0090	LINE 4c INVESTMENT INCOME	PT II 4(e)	12	127 -	138	N
0100	INVESTMENT INCOME	PT II 4(f)	12	139 -	150	N
0110	INVESTMENT EXPENSES	PT II 5	12	151 -	162	N
0120	NET INVESTMENT INCOME	PT II 6	12	163 -	174	N
0130	INVESTMENT INT. EXPENSE CARRY FORWARD	PT III 7	12	175 -	186	N
0140	INVESTMENT INT. EXPENSE DEDUCT	PT III 8	12	187 -	198	N
	RECORD TERMINUS CHARACTER		1	199 -	199	"#"

Tax on Accumulation Distribution of Trusts

Department of the Treasury
Internal Revenue Service

▶ Attach to beneficiary's tax return.

2001
Attachment
Sequence No. **73**

▶ See instructions on back.

A Name(s) as shown on return		B Social security number
C Name and address of trust		D Employer identification number
E Type of trust (see instructions) <input type="checkbox"/> Domestic <input type="checkbox"/> Foreign	F Beneficiary's date of birth	G Enter number of trusts from which you received accumulation distributions in this tax year ▶

Part I Average Income and Determination of Computation Years

1 Amount of current distribution that is considered distributed in earlier tax years (from Schedule J (Form 1041), line 37, column (a))	1	
2 Distributions of income accumulated before you were born or reached age 21	2	
3 Subtract line 2 from line 1	3	
4 Taxes imposed on the trust on amounts from line 3 (from Schedule J (Form 1041), line 37, column (b))	4	
5 Total (add lines 3 and 4)	5	
6 Tax-exempt interest included on line 5 (from Schedule J (Form 1041), line 37, column (c))	6	
7 Taxable part of line 5 (subtract line 6 from line 5)	7	
8 Number of trust's earlier tax years in which amounts on line 7 are considered distributed	8	
9 Average annual amount considered distributed (divide line 3 by line 8)	9	
10 Multiply line 9 by .25	10	
11 Number of earlier tax years to be taken into account (see instructions)	11	
12 Average amount for recomputing tax (divide line 7 by line 11). Enter here and in each column on line 15	12	
13 Enter your taxable income before this distribution for the 5 immediately preceding tax years	(a) 2000	(b) 1999
	(c) 1998	(d) 1997
	(e) 1996	

Part II Tax Attributable to the Accumulation Distribution

		(a) -----	(b) -----	(c) -----
14 Enter the amounts from line 13, eliminating the highest and lowest taxable income years	14			
15 Enter amount from line 12 in each column	15			
16 Recomputed taxable income (add lines 14 and 15)	16			
17 Income tax on amounts on line 16	17			
18 Income tax before credits on line 14 income	18			
19 Additional tax before credits (subtract line 18 from line 17)	19			
20 Tax credit adjustment	20			
21 Subtract line 20 from line 19	21			
22 Alternative minimum tax adjustments	22			
23 Combine lines 21 and 22	23			
24 Add columns (a), (b), and (c), line 23	24			
25 Divide the line 24 amount by 3	25			
26 Multiply the amount on line 25 by the number of years on line 11	26			
27 Enter the amount from line 4	27			
28 Partial tax attributable to the accumulation distribution (subtract line 27 from 26) (If zero or less, enter -0-).	28			

SECTION 9.61 FORM 4970 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0827
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"4970bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0010	NAME OF PERSON SUBJECT TO TRUST TAX	A	35	43 -	77	A/N
0020	SSN OF PERSON SUBJECT TO TRUST TAX	B	9	78 -	86	N
0030	NAME OF TRUST	C	35	87 -	121	A/N
0040	STREET ADDRESS	C	35	122 -	156	A/N
0050	CITY/STATE/ZIP	C	33	157 -	189	A/N
0060	EMPLOYER IDENTIFICATION NUMBER (EIN)	D	9	190 -	198	N
0070	DOMESTIC TRUST INDICATOR	E	1	199 -	199	"X" OR BLANK
0080	FOREIGN TRUST INDICATOR	E	1	200 -	200	"X" OR BLANK
0090	BENEFICIARY DATE OF BIRTH	F	8	201 -	208	YYYYMMDD
0100	NUMBER OF TRUSTS	G	2	209 -	210	N
0110	PRIOR YEARS DISTRIBUTION AMOUNT	1	12	211 -	222	N
0120	PRE-BIRTH/21 DISTRIBUTION AMOUNT	2	12	223 -	234	N
0130	NET DISTRIBUTION AMOUNT	3	12	235 -	246	N
0140	TAX ON TRUST AMOUNT FROM LINE 3	4	12	247 -	258	N
0150	TOTAL AMOUNT	5	12	259 -	270	N
0160	TAX EXEMPT INTEREST	6	12	271 -	282	N
0170	TAXABLE AMOUNT	7	12	283 -	294	N
0180	NUMBER OF DISTRIBUTION YEARS	8	2	295 -	296	N
0190	AVERAGE ANNUAL AMOUNT DISTRIBUTED	9	12	297 -	308	N

SECTION 9.61 FORM 4970 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0200	MULTIPLY LINE 9 BY 25%	10	12	309 -	320	N
0210	NUMBER OF EARLIER YEARS CONSIDERED	11	2	321 -	322	N
0220	AVERAGE AMOUNT FOR RECOMPUTING TAX	12	12	323 -	334	N
0230	PRIOR YEAR PRE-DIST TAXABLE INCOME (a)	13(a)	12	335 -	346	N
0240	PRIOR YEAR PRE-DIST TAXABLE INCOME (b)	13(b)	12	347 -	358	N
0250	PRIOR YEAR PRE-DIST TAXABLE INCOME (c)	13(c)	12	359 -	370	N
0260	PRIOR YEAR PRE-DIST TAXABLE INCOME (d)	13(d)	12	371 -	382	N
0270	PRIOR YEAR PRE-DIST TAXABLE INCOME (e)	13(e)	12	383 -	394	N
0280	MID YEAR DIGITS (a)	PT II (a)	4	395 -	398	N
0290	MID YEAR PRE-DIST TAXABLE INCOME (a)	14(a)	12	399 -	410	N
0300	RECOMPUTING AVERAGE REPEATED (a)	15(a)	12	411 -	422	N
0310	RECOMPUTED TAXABLE INCOME (a)	16(a)	12	423 -	434	N
0320	INCOME TAX (a)	17(a)	12	435 -	446	N
0330	PRE-CREDIT TAX (a)	18(a)	12	447 -	458	N
0340	ADDITIONAL TAX (a)	19(a)	12	459 -	470	N
0350	TAX CREDIT (a)	20(a)	12	471 -	482	N
0360	NET TAX (a)	21(a)	12	483 -	494	N
0370	ALTERNATIVE MINIMUM TAX ADJUSTMENT (a)	22(a)	12	495 -	506	N
0380	ADJUSTED NET TAX (a)	23(a)	12	507 -	518	N
0390	MID YEAR DIGITS (b)	PT II (b)	4	519 -	522	N
0400	MID YEAR PRE-DIST TAXABLE INCOME (b)	14(b)	12	523 -	534	N
0410	RECOMPUTING AVERAGE REPEATED (b)	15(b)	12	535 -	546	N
0420	RECOMPUTED TAXABLE INCOME (b)	16(b)	12	547 -	558	N
0430	INCOME TAX (b)	17(b)	12	559 -	570	N
0440	PRE-CREDIT TAX (b)	18(b)	12	571 -	582	N
0450	ADDITIONAL TAX (b)	19(b)	12	583 -	594	N

SECTION 9.61 FORM 4970 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0460	TAX CREDIT (b)	20(b)	12	595 - 606	N	
0470	NET TAX (b)	21(b)	12	607 - 618	N	
0480	ALTERNATIVE MINIMUM TAX ADJUSTMENT (b)	22(b)	12	619 - 630	N	
0490	ADJUSTED NET TAX (b)	23(b)	12	631 - 642	N	
0500	MID YEAR DIGITS (c)	PT II (c)	4	643 - 646	N	
0510	MID YEAR PRE-DIST TAXABLE INCOME (c)	14(c)	12	647 - 658	N	
0520	RECOMPUTING AVERAGE REPEATED (c)	15(c)	12	659 - 670	N	
0530	RECOMPUTED TAXABLE INCOME (c)	16(c)	12	671 - 682	N	
0540	INCOME TAX (c)	17(c)	12	683 - 694	N	
0550	PRE-CREDIT TAX (c)	18(c)	12	695 - 706	N	
0560	ADDITIONAL TAX (c)	19(c)	12	707 - 718	N	
0570	TAX CREDIT (c)	20(c)	12	719 - 730	N	
0580	NET TAX (c)	21(c)	12	731 - 742	N	
0590	ALTERNATIVE MINIMUM TAX ADJUSTMENT (c)	22(c)	12	743 - 754	N	
0600	ADJUSTED NET TAX (c)	23(c)	12	755 - 766	N	
0610	ADJUSTED TAX	24	12	767 - 778	N	
0620	AVERAGE ADJUSTED TAX	25	12	779 - 790	N	
0630	ACCOUNTABLE EARLY YEARS TOTAL	26	12	791 - 802	N	
0640	NET AMOUNT TAX REPEATED	27	12	803 - 814	N	
0670	ACCUMULATION DIST ATTRIBUTABLE TAX	28	12	815 - 826	N	
	RECORD TERMINUS CHARACTER		1	827 - 827	"#"	

Tax on Lump-Sum Distributions
 (From Qualified Plans of Participants Born Before 1936)

▶ Attach to Form 1040 or Form 1041.

Name of recipient of distribution

Identifying number

Part I Complete this part to see if you can use Form 4972

	Yes	No
1 Was this a distribution of a plan participant's entire balance (excluding deductible voluntary employee contributions and certain forfeited amounts) from all of an employer's qualified plans of one kind (pension, profit-sharing, or stock bonus)? If "No," do not use this form	1	
2 Did you roll over any part of the distribution? If "Yes," do not use this form	2	
3 Was this distribution paid to you as a beneficiary of a plan participant who was born before 1936?	3	
4 Were you (a) a plan participant who received this distribution, (b) born before 1936, and (c) a participant in the plan for at least 5 years before the year of the distribution? If you answered "No" to both questions 3 and 4, do not use this form.	4	
5a Did you use Form 4972 after 1986 for a previous distribution from your own plan? If "Yes," do not use this form for a 2001 distribution from your own plan	5a	
b If you are receiving this distribution as a beneficiary of a plan participant who died, did you use Form 4972 for a previous distribution received for that participant after 1986? If "Yes," do not use the form for this distribution	5b	

Part II Complete this part to choose the 20% capital gain election (see instructions)

6 Capital gain part from Form 1099-R, box 3	6	
7 Multiply line 6 by 20% (.20) ▶	7	
If you also choose to use Part III, go to line 8. Otherwise, include the amount from line 7 in the total on Form 1040, line 40, or Form 1041, Schedule G, line 1b, whichever applies.		

Part III Complete this part to choose the 10-year tax option (see instructions)

8 Ordinary income from Form 1099-R, box 2a minus box 3. If you did not complete Part II, enter the taxable amount from Form 1099-R, box 2a.	8	
9 Death benefit exclusion for a beneficiary of a plan participant who died before August 21, 1996	9	
10 Total taxable amount. Subtract line 9 from line 8	10	
11 Current actuarial value of annuity from Form 1099-R, box 8. If none, enter -0-	11	
12 Adjusted total taxable amount. Add lines 10 and 11. If this amount is \$70,000 or more, skip lines 13 through 16, enter this amount on line 17, and go to line 18	12	
13 Multiply line 12 by 50% (.50), but do not enter more than \$10,000	13	
14 Subtract \$20,000 from line 12. If line 12 is \$20,000 or less, enter -0-	14	
15 Multiply line 14 by 20% (.20)	15	
16 Minimum distribution allowance. Subtract line 15 from line 13	16	
17 Subtract line 16 from line 12	17	
18 Federal estate tax attributable to lump-sum distribution	18	
19 Subtract line 18 from line 17. If line 11 is zero, skip lines 20 through 22 and go to line 23	19	
20 Divide line 11 by line 12 and enter the result as a decimal (rounded to at least three places).	20	
21 Multiply line 16 by the decimal on line 20	21	
22 Subtract line 21 from line 11	22	
23 Multiply line 19 by 10% (.10)	23	
24 Tax on amount on line 23. Use the Tax Rate Schedule in the instructions	24	
25 Multiply line 24 by ten (10). If line 11 is zero, skip lines 26 through 28, enter this amount on line 29, and go to line 30	25	
26 Multiply line 22 by 10% (.10)	26	
27 Tax on amount on line 26. Use the Tax Rate Schedule in the instructions	27	
28 Multiply line 27 by ten (10)	28	
29 Subtract line 28 from line 25. (Multiple recipients, see instructions.) ▶	29	
30 Tax on lump-sum distribution. Add lines 7 and 29. Also include this amount in the total on Form 1040, line 40, or Form 1041, Schedule G, line 1b, whichever applies ▶	30	

SECTION 9.63 FORM 4972 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0426
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"4972bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001-9999999
0010	RECIPIENT NAME		35	43 -	77	A/N
0020	RECIPIENT EIN		9	78 -	86	N
0024	DISTRIBUTION OF QUALIFIED PLAN 1 YES BOX		1	87 -	87	"X" OR BLANK
0026	DISTRIBUTION OF QUALIFIED PLAN 1 NO BOX		1	88 -	88	"X" OR BLANK
0030	ROLLOVER YES BOX	2	1	89 -	89	"X" OR BLANK
0040	ROLLOVER NO BOX	2	1	90 -	90	"X" OR BLANK
0042	BENEFICIARY OF QUAL PARTICIPANT YES BOX	3	1	91 -	91	"X" OR BLANK
0044	BENEFICIARY OF QUAL PARTICIPANT NO BOX	3	1	92 -	92	"X" OR BLANK
0084	QUAL AGE - FIVE YR MEMBER YES BOX	4	1	93 -	93	"X" OR BLANK
0086	QUAL AGE - FIVE YR MEMBER NO BOX	4	1	94 -	94	"X" OR BLANK
0190	PRIOR YEAR DISTRIBUTION YES BOX	5a	1	95 -	95	"X" OR BLANK
0200	PRIOR YEAR DISTRIBUTION NO BOX	5a	1	96 -	96	"X" OR BLANK
0201	BENEFICIARY DISTRIBUTION YES BOX	5b	1	97 -	97	"X" OR BLANK
0202	BENEFICIARY DISTRIBUTION NO BOX	5b	1	98 -	98	"X" OR BLANK
0204	NUA LITERAL	6	3	99 -	101	"NUA" OR BLANK
0206	NUA WORKSHEET AMOUNT	6	12	102 -	113	N
0210	FORM 1099R CAPITAL GAIN	6	12	114 -	125	N
0220	CAPITAL GAIN ELECTION	7	12	126 -	137	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0230	NUA LITERAL	8	3	138 -	140	"NUA" OR BLANK
0235	NUA INCLUDED AMOUNT	8	12	141 -	152	N
0240	ORDINARY INCOME	8	12	153 -	164	N
0250	DEATH BENEFIT EXCLUSION	9	12	165 -	176	N
0260	TOTAL TAXABLE AMOUNT	10	12	177 -	188	N
0270	ACTUARIAL VALUE	11	12	189 -	200	N
0280	ADJUSTED TOTAL TAXABLE AMOUNT	12	12	201 -	212	N
0290	50% OF ADJUSTED TAXABLE AMOUNT	13	12	213 -	224	N
0300	NET ADJUSTED TAXABLE AMOUNT	14	12	225 -	236	N
0310	20% OF NET ADJUSTED TAXABLE AMOUNT	15	12	237 -	248	N
0320	MINIMUM DISTRIBUTION ALLOWANCE	16	12	249 -	260	N
0330	ALLOWABLE TAXABLE AMOUNT	17	12	261 -	272	N
0340	FEDERAL ESTATE TAX	18	12	273 -	284	N
0350	NET TAXABLE AMOUNT	19	12	285 -	296	N
0351	ACTUARIAL/ADJUSTED TAXABLE AMT RATIO	20	6	297 -	302	N
0352	PERCENTAGE OF MINIMUM DISTRIBUTION ALLOWANCE	21	12	303 -	314	N
0353	ADJUSTED ACTUARIAL VALUE	22	12	315 -	326	N
0605	10 YR METHOD TAXABLE AMOUNT	23	12	327 -	338	N
0610	10 YR METHOD LUMP SUM TAX	24	12	339 -	350	N
0620	10 YR METHOD TENTATIVE AVERAGE TAX	25	12	351 -	362	N
0660	PERCENTAGE OF ADJUSTED 10 YR ACTUARIAL VALUE	26	12	363 -	374	N
0670	10 YR METHOD ADJUSTED ACTUARIAL TAX	27	12	375 -	386	N
0680	10 YR METHOD ADJUSTED AVERAGE TAX	28	12	387 -	398	N
0690	10 YR METHOD AVERAGE TAX	29	12	399 -	410	N
0695	MULTIPLE RECIPIENT DISTRIBUTION LITERAL	29	3	411 -	413	"MRD" OR BLANK
0705	TOTAL TAX ON LUMP-SUM DISTRIBUTION	30	12	414 -	425	N
	RECORD TERMINUS CHARACTER		1	426 -	426	"#"

At-Risk Limitations

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

Description of activity (See page 2 of the instructions.)

Part I Current Year Profit (Loss) From the Activity, Including Prior Year Nondeductible Amounts. See instructions.

1	Ordinary income (loss) from the activity. See page 2 of the instructions	1		
2	Gain (loss) from the sale or other disposition of assets used in the activity (or of your interest in the activity) that you are reporting on:			
a	Schedule D	2a		
b	Form 4797	2b		
c	Other form or schedule	2c		
3	Other income or gains from the activity, from Schedule K-1 of Form 1065, Form 1065-B, or Form 1120S, that were not included on lines 1 through 2c	3		
4	Other deductions or losses from the activity, including investment interest expense allowed from Form 4952, that were not included on lines 1 through 3.	4	()
5	Current year profit (loss) from the activity. Combine lines 1 through 4. See page 3 of the instructions before completing the rest of this form	5		

Part II Simplified Computation of Amount At Risk. See instructions before completing this part.

6	Adjusted basis (as defined in section 1011) in the activity (or in your interest in the activity) on the first day of the tax year. Do not enter less than zero	6		
7	Increases for the tax year. See page 4 of the instructions	7		
8	Add lines 6 and 7	8		
9	Decreases for the tax year. See page 4 of the instructions	9		
10a	Subtract line 9 from line 8 ▶ 10a			
b	If line 10a is more than zero, enter that amount here and go to line 20 (or complete Part III). Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	10b		

Part III Detailed Computation of Amount At Risk
(If you completed Part III of Form 6198 for 2000, see page 4 of the instructions.)

11	Investment in the activity (or in your interest in the activity) at the effective date. Do not enter less than zero	11		
12	Increases at effective date	12		
13	Add lines 11 and 12	13		
14	Decreases at effective date	14		
15	Amount at risk (check box that applies):			
a	<input type="checkbox"/> At effective date. Subtract line 14 from line 13. Do not enter less than zero.	15		
b	<input type="checkbox"/> From 2000 Form 6198, line 19b. Do not enter the amount from line 10b of the 2000 form.			
16	Increases since (check box that applies):			
a	<input type="checkbox"/> Effective date	16		
b	<input type="checkbox"/> The end of your 2000 tax year			
17	Add lines 15 and 16	17		
18	Decreases since (check box that applies):			
a	<input type="checkbox"/> Effective date	18		
b	<input type="checkbox"/> The end of your 2000 tax year			
19a	Subtract line 18 from line 17 ▶ 19a			
b	If line 19a is more than zero, enter that amount here and go to line 20. Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	19b		

Part IV Deductible Loss

20	Amount at risk. Enter the larger of line 10b or line 19b	20		
21	Deductible loss. Enter the smaller of the line 5 loss (treated as a positive number) or line 20. See page 8 of the instructions to find out how to report any deductible loss and any carryover.	21	()

Note: If the loss is from a passive activity, see **Form 8582, Passive Activity Loss Limitations**, or **Form 8810, Corporate Passive Activity Loss and Credit Limitations**, to find out if the loss is allowed under the passive activity rules. If only part of the loss is subject to the passive activity loss rules, report only that part on Form 8582 or Form 8810, whichever applies.



FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0467
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"6198bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0020	DESCRIPTION OF ACTIVITY		80	43 -	122	A/N
0030	ORDINARY INCOME (LOSS) FROM ACTIVITY	PT I 1	12	123 -	134	N
0040	GAIN (LOSS) FROM ASSETS (SCHEDULE D)	PT I 2a	12	135 -	146	N
0050	GAIN (LOSS) FROM ASSETS (FORM 4797)	PT I 2b	12	147 -	158	N
*0060	GAIN (LOSS) FROM ASSETS (OTHER FORM OR SCHEDULE)	PT I 2c	6	159 -	164	"STMbnn" OR BLANK
0065	CARRY FORWARD FORM NAME	PT I 2c	20	165 -	184	A/N OR BLANK
+0070	GAIN (LOSS) FROM ASSETS (OTHER FORMS OR SCHEDULE) (AMOUNT)	PT I 2c	12	185 -	196	N
0080	GAIN (LOSS) FROM ASSETS (OTHER FORM OR SCHEDULE) (TOTAL)	PT I 2c	12	197 -	208	N
0090	OTHER INCOME OR GAINS (SCHEDULE K1, FORM 1065 OR FORM 1120S)	PT I 3	12	209 -	220	N
0100	OTHER DEDUCTIONS OR LOSSES INCLUDING INVESTMENT INTEREST EXPENSE	PT I 4	12	221 -	232	N ***
0110	CURRENT YEAR PROFIT (LOSS) FROM ACTIVITY	PT I 5	12	233 -	244	N
0120	ADJUSTED BASIS FIRST DAY OF TAX YEAR	PT II 6	12	245 -	256	N
0130	TAX YEAR INCREASES	PT II 7	12	257 -	268	N
0140	ADD LINES 6 AND 7	PT II 8	12	269 -	280	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0150	TAX YEAR DECREASES	PT II 9	12	281 -	292	N
0160	LINE 8 MINUS LINE 9	PT II 10(a)	12	293 -	304	N
0170	AMOUNT AT RISK	PT II 10(b)	12	305 -	316	N
0180	INVESTMENT IN ACTIVITY	PT III 11	12	317 -	328	N
0190	EFFECTIVE DATE INCREASES	PT III 12	12	329 -	340	N
0200	ADD LINES 11 AND 12	PT III 13	12	341 -	352	N
0210	EFFECTIVE DATE DECREASES	PT III 14	12	353 -	364	N
0220	AT RISK EFFECTIVE DATE, BOX	PT III 15a	1	365 -	365	"X" OR BLANK
0230	PRIOR YEAR FORM 6198, LINE 19, BOX	PT III 15b	1	366 -	366	"X" OR BLANK
0240	AMOUNT AT RISK	PT III 15	12	367 -	378	N
0250	INCREASES SINCE EFFECTIVE DATE, BOX	PT III 16a	1	379 -	379	"X" OR BLANK
0260	INCREASES END OF PRIOR TAX YEAR, BOX	PT III 16b	1	380 -	380	"X" OR BLANK
0270	AMOUNT OF INCREASES	PT III 16	12	381 -	392	N
0280	ADD LINES 15 AND 16	PT III 17	12	393 -	404	N
0290	DECREASES SINCE EFFECTIVE DATE, BOX	PT III 18a	1	405 -	405	"X" OR BLANK
0300	DECREASES SINCE END OF PRIOR YEAR, BOX	PT III 18b	1	406 -	406	"X" OR BLANK
0310	AMOUNT OF DECREASES	PT III 18	12	407 -	418	N
0320	AMOUNT AT RISK LINE 17 MINUS LINE 18	PT III 19(a)	12	419 -	430	N
0330	AMOUNT AT RISK	PT III 19(b)	12	431 -	442	N
0340	AMOUNT AT RISK LARGER OF LINE 10 OR LINE 19	PT IV 20	12	443 -	454	N
0350	DEDUCTIBLE LOSS FROM SMALLER OF LINE 5 OR 20	PT IV 21	12	455 -	466	N ***

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
-----	-----	-----	-----	-----	-----	-----
RECORD TERMINUS CHARACTER		1	467	-	467	"#"

Installment Sale Income

Department of the Treasury
Internal Revenue Service

▶ Attach to your tax return.
▶ Use a separate form for each sale or other disposition of property on the installment method.

2001
Attachment
Sequence No. **79**

Name(s) shown on return

Identifying number

- 1 Description of property ▶
- 2a Date acquired (month, day, year) ▶ / / b Date sold (month, day, year) ▶ / /
- 3 Was the property sold to a related party (see instructions) after May 14, 1980? If "No," skip line 4 . . . Yes No
- 4 Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No," complete Part III for the year of sale and the 2 years after the year of sale . . . Yes No

Part I Gross Profit and Contract Price. Complete this part for the year of sale only.

5	Selling price including mortgages and other debts. Do not include interest whether stated or unstated								
6	Mortgages, debts, and other liabilities the buyer assumed or took the property subject to (see instructions)								
7	Subtract line 6 from line 5								
8	Cost or other basis of property sold								
9	Depreciation allowed or allowable								
10	Adjusted basis. Subtract line 9 from line 8								
11	Commissions and other expenses of sale								
12	Income recapture from Form 4797, Part III (see instructions)								
13	Add lines 10, 11, and 12								
14	Subtract line 13 from line 5. If zero or less, do not complete the rest of this form (see instructions)								
15	If the property described on line 1 above was your main home, enter the amount of your excluded gain (see instructions). Otherwise, enter -0-								
16	Gross profit. Subtract line 15 from line 14								
17	Subtract line 13 from line 6. If zero or less, enter -0-								
18	Contract price. Add line 7 and line 17								

Part II Installment Sale Income. Complete this part for the year of sale **and** any year you receive a payment or have certain debts you must treat as a payment on installment obligations.

19	Gross profit percentage. Divide line 16 by line 18. For years after the year of sale, see instructions								
20	If this is the year of sale, enter the amount from line 17. Otherwise, enter -0-								
21	Payments received during year (see instructions). Do not include interest, whether stated or unstated								
22	Add lines 20 and 21								
23	Payments received in prior years (see instructions). Do not include interest, whether stated or unstated								
24	Installment sale income. Multiply line 22 by line 19								
25	Enter the part of line 24 that is ordinary income under the recapture rules (see instructions)								
26	Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797 (see instructions)								

Part III Related Party Installment Sale Income. **Do not** complete if you received the final payment this tax year.

- 27 Name, address, and taxpayer identifying number of related party
- 28 Did the related party resell or dispose of the property ("second disposition") during this tax year? . . . Yes No
- 29 If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. Check the box that applies.
 - a The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition (month, day, year) ▶ / /
 - b The first disposition was a sale or exchange of stock to the issuing corporation.
 - c The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition.
 - d The second disposition occurred after the death of the original seller or buyer.
 - e It can be established to the satisfaction of the Internal Revenue Service that tax avoidance was not a principal purpose for either of the dispositions. If this box is checked, attach an explanation (see instructions).
- 30 Selling price of property sold by related party
- 31 Enter contract price from line 18 for year of first sale
- 32 Enter the **smaller** of line 30 or line 31
- 33 Total payments received by the end of your 2001 tax year (see instructions)
- 34 Subtract line 33 from line 32. If zero or less, enter -0-
- 35 Multiply line 34 by the gross profit percentage on line 19 for year of first sale
- 36 Enter the part of line 35 that is ordinary income under the recapture rules (see instructions)
- 37 Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797 (see instructions)

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0629
		4	5 -	8	*****
0000		6	9 -	14	"FRMbbb"
0001		6	15 -	20	"6252bb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnn
0004		1	35 -	35	BLANK
0005		7	36 -	42	N 0000001- 9999999
0020	1	65	43 -	107	A/N
0030	2a	8	108 -	115	YYYYMMDD
0040	2b	8	116 -	123	YYYYMMDD
0050		1	124 -	124	"X" OR BLANK
0055		1	125 -	125	"X" OR BLANK
0060	4	1	126 -	126	"X" OR BLANK
0065	4	1	127 -	127	"X" OR BLANK
0070	5	12	128 -	139	N
*0075	5	6	140 -	145	"STMbnn" OR BLANK
0080	6	12	146 -	157	N
0090	7	12	158 -	169	N
0100	8	12	170 -	181	N
0110	9	12	182 -	193	N
0120	10	12	194 -	205	N
0130	11	12	206 -	217	N
0140	12	12	218 -	229	N
0150	13	12	230 -	241	N
0160	14	12	242 -	253	N
0170	15	12	254 -	265	N
0180	16	12	266 -	277	N
0190	17	12	278 -	289	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0200	CONTRACT PRICE	18	12	290 - 301	N	
0210	GROSS PROFIT PERCENTAGE	19	6	302 - 307	N	
0220	YEAR OF SALE LINE 17 AMOUNT	20	12	308 - 319	N	
0230	PAYMENTS RECEIVED	21	12	320 - 331	N	
0240	ADD LINES 20 AND 21	22	12	332 - 343	N	
0250	PAYMENTS RECEIVED PRIOR YEAR	23	12	344 - 355	N	
0260	INSTALLMENT SALE INCOME	24	12	356 - 367	N	
0270	ORDINARY INCOME UNDER RECAPTURE RULES	25	12	368 - 379	N	
0280	LINE 24 MINUS LINE 25	26	12	380 - 391	N	
0290	RELATED PARTY IDENTITY	27	40	392 - 431	A/N	
0295	CONTINUATION DATA	27	80	432 - 511	A/N	
0300	SECOND DISPOSITION - YES BOX	28	1	512 - 512	"X" OR BLANK	
0305	SECOND DISPOSITION - NO BOX	28	1	513 - 513	"X" OR BLANK	
0310	2ND DISP MORE THAN 2 YEARS AFTER 1ST DISP	29a	1	514 - 514	"X" OR BLANK	
0320	DATE OF DISPOSITION	29a	8	515 - 522	YYYYMMDD OR BLANK	
0330	1ST DISP SALE/EXCHANGE	29b	1	523 - 523	"X" OR BLANK	
0340	2ND DISP INVOLUNTARY CONVERSION	29c	1	524 - 524	"X" OR BLANK	
0350	2ND DISP AFTER DEATH OF ORIGINAL SELLER/BUYER	29d	1	525 - 525	"X" OR BLANK	
0360	DISPOSITION NOT TO AVOID TAX	29e	1	526 - 526	"X" OR BLANK	
@0370	EXPLANATION OF DISP NOT TO AVOID TAX	29e	6	527 - 532	"STMbn" OR BLANK	
0380	SELLING PRICE	30	12	533 - 544	N	
0390	CONTRACT PRICE 1ST YEAR	31	12	545 - 556	N	
0400	SMALLER OF LINE 30 OR 31	32	12	557 - 568	N	
0410	TOTAL PAYMENTS RECEIVED	33	12	569 - 580	N	
0420	LINE 32 MINUS LINE 33	34	12	581 - 592	N	
0430	LINE 34 MULTIPLIED BY LINE 19 GROSS PROFIT PERCENTAGE	35	12	593 - 604	N	
0440	ORDINARY INCOME LINE 35	36	12	605 - 616	N	
0450	LINE 35 MINUS LINE 36	37	12	617 - 628	N	
	RECORD TERMINUS CHARACTER		1	629 - 629	"#"	

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0951
		4	5 -	8	*****
0000		6	9 -	14	"FRMbbb"
0001		6	15 -	20	"8271bb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnnn
0004		1	35 -	35	BLANK
0005		7	36 -	42	N 0000001 - 9999999
0020		8	43 -	50	FORMAT: YYYYMMDD OR BLANK
0030	1(a)	35	51 -	85	A/N
0040	1(b)	11	86 -	96	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0050	1(b)	35	97 -	131	A/N OR BLANK
0060	1(c)	9	132 -	140	N OR BLANK
0070	2(a)	35	141 -	175	A/N
0080	2(b)	11	176 -	186	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0090	2(b)	35	187 -	221	A/N OR BLANK
0100	2(c)	9	222 -	230	N OR BLANK
0110	3(a)	35	231 -	265	A/N
0120	3(b)	11	266 -	276	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0130	3(b)	35	277 -	311	A/N OR BLANK
0140	3(c)	9	312 -	320	N OR BLANK
0150	4(a)	35	321 -	355	A/N
0160	4(b)	11	356 -	366	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0170	4(b)	35	367 -	401	A/N OR BLANK
0180	4(c)	9	402 -	410	N OR BLANK
0190	5(a)	35	411 -	445	A/N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0200	TAX SHELTER REGISTRATION NO.	5(b)	11	446 -	456	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0210	APPLIED FOR NAME	5(b)	35	457 -	491	A/N OR BLANK
0220	TAX SHELTER ID NUMBER	5(c)	9	492 -	500	N OR BLANK
0230	TAX SHELTER NAME	6(a)	35	501 -	535	A/N
0240	TAX SHELTER REGISTRATION NO.	6(b)	11	536 -	546	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0250	APPLIED FOR NAME	6(b)	35	547 -	581	A/N OR BLANK
0260	TAX SHELTER ID NUMBER	6(c)	9	582 -	590	N OR BLANK
0270	TAX SHELTER NAME	7(a)	35	591 -	625	A/N
0280	TAX SHELTER REGISTRATION NO.	7(b)	11	626 -	636	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0290	APPLIED FOR NAME	7(b)	35	637 -	671	A/N OR BLANK
0300	TAX SHELTER ID NUMBER	7(c)	9	672 -	680	N OR BLANK
0310	TAX SHELTER NAME	8(a)	35	681 -	715	A/N
0320	TAX SHELTER REGISTRATION NO.	8(b)	11	716 -	726	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0330	APPLIED FOR NAME	8(b)	35	727 -	761	A/N OR BLANK
0340	TAX SHELTER ID NUMBER	8(c)	9	762 -	770	N OR BLANK
0350	TAX SHELTER NAME	9(a)	35	771 -	805	A/N
0360	TAX SHELTER REGISTRATION NO.	9(b)	11	806 -	816	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0370	APPLIED FOR NAME	9(b)	35	817 -	851	A/N OR BLANK
0380	TAX SHELTER ID NUMBER	9(c)	9	852 -	860	N OR BLANK
0390	TAX SHELTER NAME	10(a)	35	861 -	895	A/N
0400	TAX SHELTER REGISTRATION NO.	10(b)	11	896 -	906	N OR "APPLIEDbFOR" OR "NObNOTIFICA"
0410	APPLIED FOR NAME	10(b)	35	907 -	941	A/N OR BLANK
0420	TAX SHELTER ID NUMBER	10(c)	9	942 -	950	N OR BLANK
	RECORD TERMINUS CHARACTER		1	951 -	951	"#"

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

Name(s) shown on return

Identifying number

Part I 2001 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** on page 3 of the instructions.)

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

1a		
1b ()
1c ()

1d		

All Other Passive Activities

- 2a Activities with net income (enter the amount from Worksheet 2, column (a)).
- 2b Activities with net loss (enter the amount from Worksheet 2, column (b)).
- 2c Prior years unallowed losses (enter the amount from Worksheet 2, column (c)).
- 2d Combine lines 2a, 2b, and 2c

2a		
2b ()
2c ()

2d		

- 3 Combine lines 1d and 2d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. **Do not** complete Form 8582. Report the losses on the forms and schedules normally used.
If this line and line 1d are losses, go to Part II. Otherwise, enter -0- on line 9 and go to line 10

3		

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 examples.

Note: 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. Instead, enter -0- on line 9 and go to line 10.

- 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 page 8

5		
---	--	--

- 6 Enter modified adjusted gross income, but not less than zero (see page 8)

6		
---	--	--

Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8, enter -0- on line 9, and 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 page 9

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 2001.** Add lines 9 and 10. See page 11 to find out how to report the losses on your tax return

11		

SECTION 9.71 FORM 8582 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0247
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMb"
0001	FORM NUMBER		6	15 -	20	"8582bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0020	PASSIVE ACTIVITY LOSS NET INCOME	PT I 1a	12	43 -	54	N
0030	PASSIVE ACTIVITY LOSS NET LOSS	PT I 1b	12	55 -	66	N ***
0040	PASSIVE ACTIVITY LOSS PRIOR YEAR UNALLOWED LOSSES	PT I 1c	12	67 -	78	N ***
0050	PASSIVE ACTIVITY LOSS COMBINE LINES 1a, b and c	PT I 1d	12	79 -	90	N
0060	OTHER PASSIVE ACTIVITIES NET INCOME	PT I 2a	12	91 -	102	N
0070	OTHER PASSIVE ACTIVITIES NET LOSS	PT I 2b	12	103 -	114	N ***
0080	OTHER PASSIVE ACTIVITIES PRIOR YEAR UNALLOWED LOSSES	PT I 2c	12	115 -	126	N ***
0090	OTHER PASSIVE ACTIVITIES COMBINE LINES 2a, b and c	PT I 2d	12	127 -	138	N
0100	COMBINE LINES 1d and 2d	PT I 3	12	139 -	150	N
0110	SMALLER AMOUNT OF LINE 1d OR LOSS ON LINE 3	PT II 4	12	151 -	162	N
0120	ENTER 150,000 IF MARRIED FILING SEPARATELY	PT II 5	12	163 -	174	N
0130	MODIFIED GROSS INCOME	PT II 6	12	175 -	186	N
0140	LINE 5 MINUS LINE 6	PT II 7	12	187 -	198	N
0150	MULTIPLY LINE 7 BY 50%	PT II 8	12	199 -	210	N

SECTION 9.71 FORM 8582 - PAGE 1

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0160 SMALLER OF LINE 4 OR LINE 8	PT II 9	12	211 -	222	N
0170 TOTAL LOSSES ALLOWED ADD INCOME ON LINES 1a and 2a	PT II 10	12	223 -	234	N
0180 TOTAL LOSSES ALLOWED FROM ALL PASSIVE ACTIVITIES	PT II 11	12	235 -	246	N
RECORD TERMINUS CHARACTER		1	247 -	247	"#"

Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

▶ Attach to Form 1040 or 1041.

Name(s) shown on return

Identifying number

Part I 2001 Passive Activity Credits

Caution: If you have credits from a publicly traded partnership, see **Publicly Traded Partnerships (PTPs)** on page 15 of the instructions.

Credits From Rental Real Estate Activities With Active Participation (Other Than Rehabilitation Credits and Low-Income Housing Credits) (See Lines 1a through 1c on page 9.)

1a Credits from Worksheet 1, column (a)	1a			
b Prior year unallowed credits from Worksheet 1, column (b)	1b			
c Add lines 1a and 1b.			1c	

Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990) (See Lines 2a through 2c on page 9.)

2a Credits from Worksheet 2, column (a)	2a			
b Prior year unallowed credits from Worksheet 2, column (b)	2b			
c Add lines 2a and 2b.			2c	

Low-Income Housing Credits for Property Placed in Service After 1989 (See Lines 3a through 3c on page 9.)

3a Credits from Worksheet 3, column (a)	3a			
b Prior year unallowed credits from Worksheet 3, column (b)	3b			
c Add lines 3a and 3b.			3c	

All Other Passive Activity Credits (See Lines 4a through 4c on page 9.)

4a Credits from Worksheet 4, column (a)	4a			
b Prior year unallowed credits from Worksheet 4, column (b)	4b			
c Add lines 4a and 4b.			4c	

5 Add lines 1c, 2c, 3c, and 4c				5
6 Enter the tax attributable to net passive income (see page 9)				6
7 Subtract line 6 from line 5. If line 6 is more than or equal to line 5, enter -0- and see page 10				7

Note: 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, III, or IV. Instead, go to line 37.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Complete this part only if you have an amount on line 1c. Otherwise, go to Part III.

8 Enter the smaller of line 1c or line 7				8	
9 Enter \$150,000. If married filing separately, see page 10	9				
10 Enter modified adjusted gross income, but not less than zero (see page 10). If line 10 is equal to or more than line 9, skip lines 11 through 15 and enter -0- on line 16	10				
11 Subtract line 10 from line 9	11				
12 Multiply line 11 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 11	12				
13 Enter the amount, if any, from line 9 of Form 8582	13				
14 Subtract line 13 from line 12	14				
15 Enter the tax attributable to the amount on line 14 (see page 11)					15
16 Enter the smaller of line 8 or line 15					16

Part III Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990)

Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.

17	Enter the amount from line 7	17		
18	Enter the amount from line 16	18		
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V	19		
20	Enter the smaller of line 2c or line 19	20		
21	Enter \$250,000. If married filing separately, see page 12. (See page 12 to find out if you can skip lines 21 through 26.)	21		
22	Enter modified adjusted gross income, but not less than zero. (See instructions for line 10 on page 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30.	22		
23	Subtract line 22 from line 21	23		
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 12	24		
25	Enter the amount, if any, from line 9 of Form 8582	25		
26	Subtract line 25 from line 24	26		
27	Enter the tax attributable to the amount on line 26 (see page 12)	27		
28	Enter the amount, if any, from line 18	28		
29	Subtract line 28 from line 27	29		
30	Enter the smaller of line 20 or line 29	30		

Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989

Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V.

31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7.	31		
32	Enter the amount from line 30	32		
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33		
34	Enter the smaller of line 3c or line 33	34		
35	Tax attributable to the remaining special allowance (see page 12)	35		
36	Enter the smaller of line 34 or line 35	36		

Part V Passive Activity Credit Allowed

37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See page 12 to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) on page 15	37		
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Part VI Election To Increase Basis of Credit Property

38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the property, check this box. See page 16			<input type="checkbox"/>
39	Name of passive activity disposed of ▶			
40	Description of the credit property for which the election is being made ▶			
41	Amount of unallowed credit that reduced your basis in the property			▶ \$



FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0331
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"8582CR"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0010	RENTAL REAL ESTATE CREDITS FROM WORKSHEET 1, COL (a)	1a	12	43 -	54	N
0020	PRIOR YEAR UNALLOWED CREDITS FROM WORKSHEET 1, COL (b)	1b	12	55 -	66	N
0030	TOTAL RENTAL REAL ESTATE CREDITS	1c	12	67 -	78	N
0040	REHABILITATION CREDITS FROM WORKSHEETS 2, COL (a)	2a	12	79 -	90	N
0050	REHABILITATION PY CREDITS FROM WORKSHEETS 2, COL (b)	2b	12	91 -	102	N
0060	TOTAL REHABILITATION CREDITS	2c	12	103 -	114	N
0070	LOW-INCOME HOUSING CREDITS FROM WORKSHEETS 3, COL (a)	3a	12	115 -	126	N
0080	LOW-INCOME HOUSING PY CREDITS FROM WORKSHEETS 3, COL (b)	3b	12	127 -	138	N
0090	TOTAL LOW-INCOME HOUSING CREDITS	3c	12	139 -	150	N
0100	ALL PASSIVE ACTIVITY CREDITS, WORKSHEET 4, COL (a)	4a	12	151 -	162	N
0110	PASSIVE ACTIVITY PY CREDITS FROM WORKSHEET 4, COL (b)	4b	12	163 -	174	N
0120	TOTAL ALL PASSIVE ACTIVITY CREDITS	4c	12	175 -	186	N
0130	TOTAL CREDITS	5	12	187 -	198	N
0140	TAX ATTRIBUTABLE TO NET PASSIVE INCOME	6	12	199 -	210	N
0150	TOTAL NET CREDITS	7	12	211 -	222	N
0160	SMALLER OF REAL ESTATE OR TOTAL NET CREDITS	8	12	223 -	234	N

SECTION 9.73 FORM 8582-CR - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0170	ENTER \$150,000	9	12	235	-	246	N
0180	MODIFIED ADJUSTED GROSS INCOME	10	12	247	-	258	N
0190	LINE 9 MINUS LINE 10	11	12	259	-	270	N
0200	MULTIPLY LINE 11 BY 50%	12	12	271	-	282	N
0210	SPECIAL ALLOWANCE FOR RENTAL ACTIVITY	13	12	283	-	294	N
0220	LINE 12 MINUS LINE 13	14	12	295	-	306	N
0230	TAX ATTRIBUTABLE TO AMOUNT ON LINE 14	15	12	307	-	318	N
0240	SMALLER OF LINE 8 OR 15	16	12	319	-	330	N
	RECORD TERMINUS CHARACTER		1	331	-	331	"#"

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0423
	START RECORD SENTINEL		4	5 -	8	*****
0250	RECORD ID		6	9 -	14	"FRMbbb"
0251	FORM NUMBER		6	15 -	20	"8582CR"
0252	PAGE NUMBER		5	21 -	25	"PG02b"
0253	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0254	FILLER		1	35 -	35	BLANK
0255	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0260	TOTAL NET CREDITS	17	12	43 -	54	N
0270	SMALLER OF LINE 8 OR LINE 15	18	12	55 -	66	N
0280	LINE 17 MINUS LINE 18	19	12	67 -	78	N
0290	SMALLER OF LINE 2c OR 19	20	12	79 -	90	N
0300	ENTER \$250,000	21	12	91 -	102	N
0310	MODIFIED ADJUSTED GROSS INCOME	22	12	103 -	114	N
0320	LINE 21 MINUS LINE 22	23	12	115 -	126	N
0330	MULTIPLY LINE 23 BY 50%	24	12	127 -	138	N
0340	SPECIAL ALLOWANCE FOR RENTAL ACTIVITY	25	12	139 -	150	N
0350	LINE 24 MINUS LINE 25	26	12	151 -	162	N
0360	TAX ATTRIBUTABLE TO AMOUNT ON LINE 26	27	12	163 -	174	N
0370	AMOUNT FROM LINE 18	28	12	175 -	186	N
0380	LINE 27 MINUS 28	29	12	187 -	198	N
0390	SMALLER OF LINE 20 OR 29	30	12	199 -	210	N
0400	AMOUNT FROM LINE 19 OR LINE 7 MINUS LINE 16	31	12	211 -	222	N
0410	AMOUNT FROM LINE 30	32	12	223 -	234	N
0420	LINE 31 MINUS LINE 32	33	12	235 -	246	N
0430	SMALLER OF LINE 3c OR 33	34	12	247 -	258	N
0440	TAX ATTRIBUTABLE TO REMAINING SPECIAL ALLOWANCE	35	12	259 -	270	N
0450	SMALLER OF LINE 34 OR 35	36	12	271 -	282	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
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0460	PASSIVE ACTIVITY CREDIT ALLOWED	37	12	283	-	294	N
0470	ELECTION TO INCREASE BASIS OF CREDIT PROPERTY BOX	38	1	295	-	295	"X" OR BLANK
0480	NAME OF PASSIVE ACTIVITY DISPOSED OF	39	35	296	-	330	A/N OR BLANK
0490	DESCRIPTION OF CREDIT PROPERTY	40	80	331	-	410	A/N OR BLANK
0500	UNALLOWED CREDIT AMOUNT	41	12	411	-	422	N
	RECORD TERMINUS CHARACTER		1	423	-	423	"#"

Credit For Prior Year Minimum Tax— Individuals, Estates, and Trusts

▶ Attach to your tax return.

Identifying number

Part I Net Minimum Tax on Exclusion Items

<p>1 Combine lines 16 through 18 of your 2000 Form 6251. Estates and trusts, see instructions . . .</p> <p>2 Enter adjustments and preferences treated as exclusion items (see instructions)</p> <p>3 Minimum tax credit net operating loss deduction (see instructions)</p> <p>4 Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more than \$165,000 and you were married filing separately for 2000, see instructions</p> <p>5 Enter: \$45,000 if married filing jointly or qualifying widow(er) for 2000; \$33,750 if single or head of household for 2000; or \$22,500 if married filing separately for 2000. Estates and trusts, enter \$22,500</p> <p>6 Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2000; \$112,500 if single or head of household for 2000; or \$75,000 if married filing separately for 2000. Estates and trusts, enter \$75,000</p> <p>7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9</p> <p>8 Multiply line 7 by 25% (.25)</p> <p>9 Subtract line 8 from line 5. If zero or less, enter -0-. If this form is for a child under age 14, see instructions</p> <p>10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 1040NR filers, see instructions</p> <p>11 If for 2000 you reported capital gain distributions directly on Form 1040, line 13, or completed Schedule D (Form 1040 or 1041) and had an amount on line 25 or line 27 of Schedule D (Form 1040) (line 24 or line 26 of Schedule D (Form 1041)) or would have had an amount on either of those lines had you completed them, go to Part III of Form 8801 to figure the amount to enter on this line. All others: Multiply line 10 by 26% (.26) if line 10 is: \$175,000 or less if single, head of household, married filing jointly, qualifying widow(er), or an estate or trust for 2000; or \$87,500 or less if married filing separately for 2000. Otherwise, multiply line 10 by 28% (.28) and subtract from the result: \$3,500 if single, head of household, married filing jointly, qualifying widow(er), or an estate or trust for 2000; or \$1,750 if married filing separately for 2000</p> <p>12 Minimum tax foreign tax credit on exclusion items (see instructions)</p> <p>13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11</p> <p>14 Enter the amount from your 2000 Form 6251, line 27, or Form 1041, Schedule I, line 38</p> <p>15 Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-</p>	<p>1</p> <p>2</p> <p>3 ()</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p>	
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Part II Minimum Tax Credit and Carryforward to 2002

<p>16 Enter the amount from your 2000 Form 6251, line 28, or 2000 Form 1041, Schedule I, line 39</p> <p>17 Enter the amount from line 15 above</p> <p>18 Subtract line 17 from line 16. If less than zero, enter as a negative amount</p> <p>19 2000 minimum tax credit carryforward. Enter the amount from your 2000 Form 8801, line 26</p> <p>20 Enter the total of your 2000 unallowed nonconventional source fuel credit and 2000 unallowed qualified electric vehicle credit (see instructions)</p> <p>21 Combine lines 18, 19, and 20. If zero or less, stop here and see instructions</p> <p>22 Enter your 2001 regular income tax liability minus allowable credits (see instructions)</p> <p>23 Enter the amount from your 2001 Form 6251, line 26, or 2001 Form 1041, Schedule I, line 37</p> <p>24 Subtract line 23 from line 22. If zero or less, enter -0-</p> <p>25 Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2001 Form 1040, line 50; Form 1040NR, line 46; or Form 1041, Schedule G, line 2d</p> <p>26 Minimum tax credit carryforward to 2002. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years</p>	<p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p> <p>26</p>	
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Part III Line 11 Computation Using Maximum Capital Gains Rates

Caution: If you did not complete Schedule D (Form 1040) for 2000 because you reported capital gain distributions directly on Form 1040, line 13, see the instructions before you complete this part. If you are an individual and you did not complete Part IV of your 2000 Schedule D (Form 1040), complete lines 20 through 27 of that Schedule D before completing this part. For an estate or trust that did not complete Part V of the 2000 Schedule D (Form 1041), complete lines 19 through 26 of that Schedule D before completing this part.

27	Enter the amount from line 10			27	
28	Enter the amount from your 2000 Schedule D (Form 1040), line 27 (or 2000 Schedule D (Form 1041), line 26)	28			
29	Enter the amount from your 2000 Schedule D (Form 1040), line 25 (or 2000 Schedule D (Form 1041), line 24)	29			
30	Add lines 28 and 29	30			
31	Enter the amount from your 2000 Schedule D (Form 1040), line 22 (or 2000 Schedule D (Form 1041), line 21)	31			
32	Enter the smaller of line 30 or line 31			32	
33	Subtract line 32 from line 27. If zero or less, enter -0- ▶			33	
34	Multiply line 33 by 26% (.26) if line 33 is: \$175,000 or less if single, head of household, married filing jointly, qualifying widow(er), or an estate or trust for 2000; or \$87,500 or less if married filing separately for 2000. Otherwise , multiply line 33 by 28% (.28) and subtract from the result: \$3,500 if single, head of household, married filing jointly, qualifying widow(er), or an estate or trust for 2000; or \$1,750 if married filing separately for 2000			34	
35	Enter the amount from your 2000 Schedule D (Form 1040), line 36 (or 2000 Schedule D (Form 1041), line 35). If you did not complete Part IV of your 2000 Schedule D (Form 1040) (Part V of the 2000 Schedule D (Form 1041) for an estate or trust), enter -0-	35			
36	Enter the smallest of line 27, line 28, or line 35 ▶	36			
37	Multiply line 36 by 10% (.10)			37	
38	Enter the smaller of line 27 or line 28	38			
39	Enter the amount from line 36	39			
40	Subtract line 39 from line 38 ▶	40			
41	Multiply line 40 by 20% (.20)			41	
If line 29 is zero or blank, skip lines 42 through 45 and go to line 46.					
42	Enter the amount from line 27	42			
43	Add lines 33, 36, and 40	43			
44	Subtract line 43 from line 42	44			
45	Multiply line 44 by 25% (.25)			45	
46	Add lines 34, 37, 41, and 45			46	
47	Multiply line 27 by 26% (.26) if line 27 is: \$175,000 or less if single, head of household, married filing jointly, qualifying widow(er), or an estate or trust for 2000; or \$87,500 or less if married filing separately for 2000. Otherwise , multiply line 27 by 28% (.28) and subtract from the result: \$3,500 if single, head of household, married filing jointly, qualifying widow(er), or an estate or trust for 2000; or \$1,750 if married filing separately for 2000			47	
48	Enter the smaller of line 46 or line 47 here and on line 11			48	

SECTION 9.76 FORM 8801 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0364
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"8801bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0010	IDENTIFYING NUMBERS (EIN)		9	43 -	51	N
0020	NET MINIMUM TAX TAXABLE INCOME (LOSS)	PT I 1	12	52 -	63	N
0030	NET MINIMUM TAX ADJUSTMENTS	PT I 2	12	64 -	75	N
0040	NET MINIMUM TAX MINIMUM TAX CREDIT	PT I 3	12	76 -	87	N ***
0050	NET MINIMUM TAX COMBINE LINE 1,2 and 3	PT I 4	12	88 -	99	N
0060	NET MINIMUM TAX EXEMPTION AMOUNT	PT I 5	12	100 -	111	N
0070	NET MINIMUM TAX PHASE-OUT	PT I 6	12	112 -	123	N
0080	NET MINIMUM TAX LINE 4 MINUS LINE 6	PT I 7	12	124 -	135	N
0090	NET MINIMUM TAX MULTIPLY LINE 7 BY 25% (.25)	PT I 8	12	136 -	147	N
0100	NET MINIMUM TAX LINE 5 MINUS LINE 8	PT I 9	12	148 -	159	N
0110	NET MINIMUM TAX LINE 4 MINUS LINE 9	PT I 10	12	160 -	171	N
0120	NET MINIMUM TAX MULTILPLY LINE 10 BY 26% (.26)	PT I 11	12	172 -	183	N
0130	NET MINIMUM TAX FOREIGN TAX CREDIT ON EXCLUSION ITEMS	PT I 12	12	184 -	195	N
0140	NET MINIMUM TAX MINIMUM TAXES ON EXCLUSION ITEMS LINE 11 MINUS LINE 12	PT I 13	12	196 -	207	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0150	NET MINIMUM TAX AMOUNT FROM FORM 6251, OR FORM 1041 SCH I	PT I 14	12	208	- 219	N
0160	NET MINIMUM TAX ON EXCLUSION ITEM LINE 13 MINUS LINE 14	PT I 15	12	220	- 231	N
0170	MINIMUM TAX CREDIT AMOUNTS FROM FORM 6251, OR FORM 1041 SCH I	PT II 16	12	232	- 243	N
0180	MINIMUM TAX CREDIT AMOUNT LINE 15	PT II 17	12	244	- 255	N
0190	MINIMUM TAX CREDIT LINE 16 MINUS LINE 17	PT II 18	12	256	- 267	N
0200	MINIMUM TAX CREDIT CARRY FORWARD OF TAX CREDIT	PT II 19	12	268	- 279	N
0210	MINIMUM TAX CREDIT UNALLOWED SPECIAL CREDITS	PT II 20	12	280	- 291	N
0220	MINIMUM TAX CREDIT COMBINE LINES 18,19 and 20	PT II 21	12	292	- 303	N
0230	MINIMUM TAX CREDIT REGULAR TAX LIABILITY	PT II 22	12	304	- 315	N
0240	MINIMUM TAX CREDIT AMOUNT FROM FORMS 6251, OR FORM 1041 SCH I	PT II 23	12	316	- 327	N
0250	MINIMUM TAX CREDIT LINE 22 MINUS LINE 23	PT II 24	12	328	- 339	N
0260	MINIMUM TAX CREDIT SMALLER OF LINE 21 or 24	PT II 25	12	340	- 351	N
0270	TAX CARRYOVER CARRY FORWARD MINIMUM TAX CREDIT LINE 21 MINUS LINE 25	PT II 26	12	352	- 363	N
	RECORD TERMINUS CHARACTER		1	364	- 364	"#"

SECTION 9.77 FORM 8801 - PAGE 2

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0307
	START RECORD SENTINEL		4	5 -	8	*****
0290	RECORD ID		6	9 -	14	"FRMbbb"
0291	FORM NUMBER		6	15 -	20	"8801bb"
0292	PAGE NUMBER		5	21 -	25	"PG02b"
0293	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnn
0294	FILLER		1	35 -	35	BLANK
0295	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001
0300	AMOUNT FROM LINE 10	PT III 27	12	43 -	54	N
0310	AMOUNT FROM PRIOR YEAR SCH D, LINE 26	PT III 28	12	55 -	66	N
0320	AMOUNT FROM PRIOR YEAR SCH D, LINE 24	PT III 29	12	67 -	78	N
0330	ADD LINE 28 AND 29	PT III 30	12	79 -	90	N
0340	AMOUNT FROM PRIOR YEAR SCH D, LINE 21	PT III 31	12	91 -	102	N
0350	SMALLER OF LINE 30 OR 31	PT III 32	12	103 -	114	N
0360	LINE 27 MINUS LINE 32	PT III 33	12	115 -	126	N
0370	MULTIPLY LINE 33 BY 26% (.26) IF > \$175,000 OTHERWISE MULTIPLY LINE 33 BY 28% (.28) AND SUBTRACT \$3,500	PT III 34	12	127 -	138	N
0380	AMOUNT FROM PRIOR YEAR SCH D, LINE 35	PT III 35	12	139 -	150	N
0390	SMALLEST OF LINE 27, 28 OR 35	PT III 36	12	151 -	162	N
0400	MULTIPLY LINE 36 BY 10% (.10)	PT III 37	12	163 -	174	N
0410	SMALLER OF LINE 27 OR 28	PT III 38	12	175 -	186	N
0420	AMOUNT FROM LINE 36	PT III 39	12	187 -	198	N
0430	LINE 38 MINUS LINE 39	PT III 40	12	199 -	210	N

SECTION 9.77 FORM 8801 - PAGE 2

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0440 MULTIPLY LINE 40 BY 20% (.20)	PT III 41	12	211	-	222	N
0450 AMOUNT FROM LINE 27	PT III 42	12	223	-	234	N
0460 ADD LINES 33, 36 AND 40	PT III 43	12	235	-	246	N
0470 LINE 42 MINUS LINE 43	PT III 44	12	247	-	258	N
0480 MULTIPLY LINE 44 BY 25% (.25)	PT III 45	12	259	-	270	N
0490 ADD LINES 34, 37, 41 AND 45	PT III 46	12	271	-	282	N
0500 MULTIPLY LINE 27 BY 26% (.26) IF > \$175,000 OTHERWISE MULTIPLY LINE 27 BY 28% (.28) AND SUBTRACT \$3,500	PT III 47	12	283	-	294	N
0510 SMALLER OF LINE 46 OR 47	PT III 48	12	295	-	306	N
RECORD TERMINUS CHARACTER		1	307	-	307	"#"

Like-Kind Exchanges
(and section 1043 conflict-of-interest sales)

▶ Attach to your tax return.

Name(s) shown on tax return

Identifying number

Part I Information on the Like-Kind Exchange

Note: If the property described on line 1 or line 2 is real or personal property located outside the United States, indicate the country.

- 1 Description of like-kind property given up ▶
- 2 Description of like-kind property received ▶
- 3 Date like-kind property given up was originally acquired (month, day, year)

3	/	/
---	---	---
- 4 Date you actually transferred your property to other party (month, day, year)

4	/	/
---	---	---
- 5 Date like-kind property you received was identified (month, day, year) (see instructions)

5	/	/
---	---	---
- 6 Date you actually received the like-kind property from other party (month, day, year)

6	/	/
---	---	---
- 7 Was the exchange made with a related party (see instructions)? If "Yes," complete Part II. If "No," go to Part III.
 - a Yes, in this tax year b Yes, in a prior tax year c No

Part II Related Party Exchange Information

- 8 Name of related party Related party's identifying number

- Address (no., street, and apt., room, or suite no.)

- City or town, state, and ZIP code Relationship to you

- 9 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did the related party sell or dispose of the like-kind property received from you in the exchange? Yes No
- 10 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did you sell or dispose of the like-kind property you received? Yes No

If both lines 9 and 10 are "No" and this is the year of the exchange, go to Part III. If both lines 9 and 10 are "No" and this is **not** the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on this year's tax return the deferred gain or (loss) from line 24 **unless** one of the exceptions on line 11 applies. See **Related party exchanges** in the instructions.

- 11 If one of the exceptions below applies to the disposition, check the applicable box:
 - a The disposition was after the death of either of the related parties.
 - b The disposition was an involuntary conversion, and the threat of conversion occurred after the exchange.
 - c You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had tax avoidance as its principal purpose. If this box is checked, attach an explanation (see instructions).

Part III Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Received

Caution: If you transferred **and** received (a) more than one group of like-kind properties, or (b) cash or other (not like-kind) property, see **Reporting of multi-asset exchanges** in the instructions.

Note: Complete lines 12 through 14 **only** if you gave up property that was not like-kind. Otherwise, go to line 15.

12 Fair market value (FMV) of other property given up	12		
13 Adjusted basis of other property given up	13		
14 Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or (loss) in the same manner as if the exchange had been a sale	14		
15 Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced (but not below zero) by any exchange expenses you incurred (see instructions)	15		
16 FMV of like-kind property you received	16		
17 Add lines 15 and 16	17		
18 Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses not used on line 15 (see instructions)	18		
19 Realized gain or (loss). Subtract line 18 from line 17	19		
20 Enter the smaller of line 15 or line 19, but not less than zero	20		
21 Ordinary income under recapture rules. Enter here and on Form 4797, line 16 (see instructions)	21		
22 Subtract line 21 from line 20. If zero or less, enter -0-. If more than zero, enter here and on Schedule D or Form 4797, unless the installment method applies (see instructions)	22		
23 Recognized gain. Add lines 21 and 22	23		
24 Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions	24		
25 Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23	25		

Name(s) shown on tax return. Do not enter name and social security number if shown on other side.

Your social security number

Part IV Deferral of Gain From Section 1043 Conflict-of-Interest Sales

Note: This part is to be used **only** by officers or employees of the executive branch of the Federal Government for reporting nonrecognition of gain under section 1043 on the sale of property to comply with the conflict-of-interest requirements. This part can be used **only** if the cost of the replacement property exceeds the basis of the divested property.

26 Enter the number from the upper right corner of your certificate of divestiture (Do not attach a copy of your certificate. Keep the certificate with your records.) ▶ _____ - _____

27 Description of divested property ▶ _____

28 Description of replacement property ▶ _____

29 Date divested property was sold (month, day, year) 29 / /

30 Sales price of divested property (see instructions) 30

31 Basis of divested property 31

32 **Realized gain.** Subtract line 31 from line 30 32

33 Cost of replacement property purchased within 60 days after date of sale 33

34 **Recognized gain.** Subtract line 33 from line 30. If zero or less, enter -0- 34

35 Ordinary income under recapture rules. Enter here and on Form 4797, line 10 (see instructions) 35

36 Subtract line 35 from line 34. If zero or less, enter -0-. If more than zero, enter here and on Schedule D or Form 4797 (see instructions) 36

37 Deferred gain. Subtract line 34 from line 32 37

38 **Basis of replacement property.** Subtract line 37 from line 33 38

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

Use Parts I, II, and III of Form 8824 to report an exchange of business or investment property for property of a like kind (section 1031). Use Part IV to report the nonrecognition of gain from conflict-of-interest sales by certain members of the executive branch of the Federal Government (section 1043). **Do not** complete Part IV if you are not electing to defer any of the gain. Instead, report the sale only on Form 4797 or Schedule D (Form 1040), whichever applies.

Report each exchange on a separate Form 8824. If you wish, you may file only a summary Form 8824 and attach your own statement showing all the information requested on Form 8824 for each exchange. Include your name and identifying number at the top of each page of the statement. On the summary

Form 8824, enter **only** your name and identifying number, "Summary" on line 1, the total recognized gain from all exchanges on line 23, and the total basis of all like-kind property received on line 25.

When To File

If during the current tax year you transferred property to another party in a like-kind exchange, you must file Form 8824. Also file Form 8824 for the 2 years following the year of a related party exchange (see **Related party exchanges** on page 3).

Like-Kind Exchanges

Generally, if you exchange business or investment property solely for business or investment property of a like kind, no gain or loss is recognized under section 1031. If, as part of the exchange, you also receive other (not like-kind) property or money, gain is recognized to the extent of the other property and money received, but a loss is not recognized.

Section 1031 does not apply to exchanges of inventory, stocks, bonds, notes, other securities or evidence of indebtedness, or certain other assets. See section 1031(a)(2).

Like-kind property. Properties are of like kind if they are of the same nature or character, even if they differ in grade or quality. Personal properties of a like class are like-kind properties. However, livestock of different sexes are not like-kind properties. Also, personal property used predominantly in the United States and personal property used predominantly outside the United States are **not** like-kind properties. See Pub. 544 for more details.

Real properties generally are of like kind, regardless of whether the properties are improved or unimproved. However, real property in the United States and real property outside the United States are **not** like-kind properties.

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0513
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"FRMbbb"
0001	FORM NUMBER		6	15 -	20	"8824bb"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0020	DESCRIPTION OF LIKE-KIND PROPERTY GIVEN	PT I 1	50	43 -	92	A/N OR BLANK
*0025	PROPERTY GIVEN STATEMENT	PT I	6	93 -	98	"STMbnn" OR BLANK
0030	DESCRIPTION OF LIKE-KIND PROPERTY RECEIVED	PT I 2	50	99 -	148	A/N OR BLANK
*0035	PROPERTY RECEIVED STATEMENT	PT I	6	149 -	154	"STMbnn" OR BLANK
0040	DATE LIKE-KIND PROPERTY GIVEN UP	PT I 3	8	155 -	162	FORMAT: YYYYMMDD OR BLANK
0050	DATE PROPERTY ACTUALLY TRANSFERRED	PT I 4	8	163 -	170	FORMAT: YYYYMMDD OR BLANK
0060	DATE LIKE-KIND PROPERTY WAS IDENTIFIED	PT I 5	8	171 -	178	FORMAT: YYYYMMDD OR BLANK
0070	DATE PROPERTY ACTUALLY RECEIVED	PT I 6	8	179 -	186	FORMAT: YYYYMMDD OR BLANK
0080	WAS THE EXCHANGE MADE WITH A RELATED PARTY YES, THIS TAX YEAR	PT I 7a	1	187 -	187	"X" OR BLANK
0090	WAS THE EXCHANGE MADE WITH A RELATED PARTY YES, PRIOR YEAR	PT I 7b	1	188 -	188	"X" OR BLANK
0100	WAS THE EXCHANGE MADE WITH A RELATED PARTY NO	PT I 7c	1	189 -	189	"X" OR BLANK
0110	NAME OF RELATED PARTY	PT II 8	35	190 -	224	A/N
0120	RELATED ID	PT II 8	9	225 -	233	A/N OR "APPLD FOR"
0130	STREET ADDRESS	PT II 8	35	234 -	268	A/N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0140	CITY	PT II 8	22	269 -	290	A/N
0150	STATE CODE	PT II 8	2	291 -	292	A/N
0160	ZIP CODE	PT II 8	12	293 -	304	N OR nnnnnbbbbbbb OR nnnnnnnnnbbb
0170	RELATIONSHIP	PT II 8	15	305 -	319	A/N
0180	DURING THIS YEAR DID RELATED PARTY SELL OR DISPOSE OF PROPERTY - YES BOX	PT II 9	1	320 -	320	"X" OR BLANK
0185	DURING THIS YEAR DID RELATED PARTY SELL OR DISPOSE OF PROPERTY - NO BOX	PT II 9	1	321 -	321	"X" OR BLANK
0190	DURING THIS YEAR DID YOU SELL OR DISPOSE OF PROPERTY - YES BOX	PT II 10	1	322 -	322	"X" OR BLANK
0195	DURING THIS YEAR DID YOU SELL OR DISPOSE OF PROPERTY - NO BOX	PT II 10	1	323 -	323	"X" OR BLANK
0200	DISPOSITION AFTER DEATH OF EITHER RELATED PARTIES	PT II 11a	1	324 -	324	"X" OR BLANK
0210	DISPOSITION WAS AN INVOLUNTARY CONVERSION	PT II 11b	1	325 -	325	"X" OR BLANK
0220	YOU CAN ESTABLISH TO SATISFACTION THAT NEITHER HAD TAX AVOIDANCE	PT II 11c	1	326 -	326	"X" OR BLANK
@0225	EXPLANATION	PT II 11	6	327 -	332	"STMbnn" OR BLANK
0230	FAIR MARKET VALUE (FMV)	PT III 12	12	333 -	344	N
0240	ADJUSTED BASIS	PT III 13	12	345 -	356	N
0250	GAIN OR (LOSS) (LINE 12 MINUS LINE 13)	PT III 14	12	357 -	368	N
0260	CASH AND FMV OF OTHER PARTY	PT III 15	12	369 -	380	N
0270	FMV OF LIKE-KIND PROPERTY RECEIVED	PT III 16	12	381 -	392	N
0280	AMOUNT REALIZED (ADD LINE 15 AND 16)	PT III 17	12	393 -	404	N
0290	ADJUSTED BASIS OF LIKE-KIND PROPERTY	PT III 18	12	405 -	416	N

SECTION 9.79 FORM 8824 - PAGE 1

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0300	REALIZED GAIN OR LOSS (LINE 17 MINUS LINE 18)	PT III 19	12	417	-	428	N
*0305	ATTACH MULTI-ASSET EXCHANGE STATEMENT	PT III 19	6	429	-	434	"STMbnn" OR BLANK
0310	SMALLER OF LINES 15 OR 19	PT III 20	12	435	-	446	N
0320	ORDINARY INCOME UNDER RECAPTURE RULES	PT III 21	12	447	-	458	N
0330	LINE 20 MINUS LINE 21	PT III 22	12	459	-	470	N
0340	RECOGNIZED GAIN (ADD LINES 21 AND 22)	PT III 23	12	471	-	482	N
*0345	ATTACH SUMMARY STATEMENT	PT III 23	6	483	-	488	"STMbnn" OR BLANK
0350	DEFERRED GAIN OR (LOSS) (LINE 19 MINUS LINE 23)	PT III 24	12	489	-	500	N
0360	BASIS OF LIKE PROPERTY RECEIVED (ADD LINES 18 AND 23 MINUS LINE 15)	PT III 25	12	501	-	512	N
	RECORD TERMINUS CHARACTER		1	513	-	513	"#"

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0276
	START RECORD SENTINEL		4	5 -	8	*****
0370	RECORD ID		6	9 -	14	"FRMbbb"
0371	FORM NUMBER		6	15 -	20	"8824bb"
0372	PAGE NUMBER		5	21 -	25	"PG02b"
0373	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnn
0374	FILLER		1	35 -	35	BLANK
0375	FORM OCCURRENCE NUMBER		7	36 -	42	N 0000001 - 9999999
0380	CERTIFICATE OF DIVESTITURE NUMBER	PT IV 26	5	43 -	47	N
0390	DESCRIPTION OF DIVESTED PROPERTY	PT IV 27	50	48 -	97	A/N OR BLANK
*0395	DIVESTED PROPERTY ATTACHMENT	PT IV 27	6	98 -	103	"STMbnn" OR BLANK
0400	DESCRIPTION OF REPLACEMENT PROPERTY	PT IV 28	50	104 -	153	A/N OR BLANK
*0405	REPLACEMENT PROPERTY ATTACHMENT	PT IV 28	6	154 -	159	"STMbnn" OR BLANK
0410	DATE DIVESTED PROPERTY WAS SOLD	PT IV 29	8	160 -	167	FORMAT: YYYYMMDD OR BLANK
0420	SALES PRICE OF DIVESTED PROPERTY	PT IV 30	12	168 -	179	N
0430	BASIS OF DIVESTED PROPERTY	PT IV 31	12	180 -	191	N
0440	REALIZED GAIN	PT IV 32	12	192 -	203	N
0450	COST OF REPLACEMENT PROPERTY WITHIN 60 DAYS	PT IV 33	12	204 -	215	N
0460	RECOGNIZED GAIN	PT IV 34	12	216 -	227	N
0470	ORDINARY INCOME UNDER RECAPTURE RULES	PT IV 35	12	228 -	239	N
0480	LINE 34 MINUS LINE 35	PT IV 36	12	240 -	251	N
0490	DEFERRED GAIN	PT IV 37	12	252 -	263	N
0500	BASIS OF REPLACEMENT PROPERTY	PT IV 38	12	264 -	275	N

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
-----	-----	-----	-----	-----	-----	-----
RECORD TERMINUS CHARACTER		1	276	-	276	"#"

Expenses for Business Use of Your Home

▶ **File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.**

2001
 Attachment
 Sequence No. **66**

▶ **See separate instructions.**

Name(s) of proprietor(s)	Your social security number
--------------------------	-----------------------------

Part I Part of Your Home Used for Business

1 Area used regularly and exclusively for business, regularly for day care, or for storage of inventory or product samples. See instructions	1	
2 Total area of home	2	
3 Divide line 1 by line 2. Enter the result as a percentage	3	%
<ul style="list-style-type: none"> • For day-care facilities not used exclusively for business, also complete lines 4-6. • All others, skip lines 4-6 and enter the amount from line 3 on line 7. 		
4 Multiply days used for day care during year by hours used per day	4	hr.
5 Total hours available for use during the year (365 days × 24 hours). See instructions	5	8,760 hr.
6 Divide line 4 by line 5. Enter the result as a decimal amount	6	
7 Business percentage. For day-care facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3 ▶	7	%

Part II Figure Your Allowable Deduction

8 Enter the amount from Schedule C, line 29, plus any net gain or (loss) derived from the business use of your home and shown on Schedule D or Form 4797. If more than one place of business, see instructions. See instructions for columns (a) and (b) before completing lines 9-20.	8	
9 Casualty losses. See instructions	9	
10 Deductible mortgage interest. See instructions	10	
11 Real estate taxes. See instructions	11	
12 Add lines 9, 10, and 11	12	
13 Multiply line 12, column (b) by line 7	13	
14 Add line 12, column (a) and line 13	14	
15 Subtract line 14 from line 8. If zero or less, enter -0-	15	
16 Excess mortgage interest. See instructions	16	
17 Insurance	17	
18 Repairs and maintenance	18	
19 Utilities	19	
20 Other expenses. See instructions	20	
21 Add lines 16 through 20	21	
22 Multiply line 21, column (b) by line 7	22	
23 Carryover of operating expenses from 2000 Form 8829, line 41	23	
24 Add line 21 in column (a), line 22, and line 23	24	
25 Allowable operating expenses. Enter the smaller of line 15 or line 24	25	
26 Limit on excess casualty losses and depreciation. Subtract line 25 from line 15	26	
27 Excess casualty losses. See instructions	27	
28 Depreciation of your home from Part III below	28	
29 Carryover of excess casualty losses and depreciation from 2000 Form 8829, line 42	29	
30 Add lines 27 through 29	30	
31 Allowable excess casualty losses and depreciation. Enter the smaller of line 26 or line 30	31	
32 Add lines 14, 25, and 31	32	
33 Casualty loss portion, if any, from lines 14 and 31. Carry amount to Form 4684 , Section B	33	
34 Allowable expenses for business use of your home. Subtract line 33 from line 32. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions ▶	34	

Part III Depreciation of Your Home

35 Enter the smaller of your home's adjusted basis or its fair market value. See instructions	35	
36 Value of land included on line 35	36	
37 Basis of building. Subtract line 36 from line 35	37	
38 Business basis of building. Multiply line 37 by line 7	38	
39 Depreciation percentage. See instructions	39	%
40 Depreciation allowable. Multiply line 38 by line 39. Enter here and on line 28 above. See instructions	40	

Part IV Carryover of Unallowed Expenses to 2002

41 Operating expenses. Subtract line 25 from line 24. If less than zero, enter -0-	41	
42 Excess casualty losses and depreciation. Subtract line 31 from line 30. If less than zero, enter -0-	42	



FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	0683
		4	5 -	8	*****
0000		6	9 -	14	"FRMbbb"
0001		6	15 -	20	"8829bb"
0002		5	21 -	25	"PG01b"
0003		9	26 -	34	N nnnnnnnn
0004		1	35 -	35	BLANK
0005		7	36 -	42	N 0000001 - 9999999
0010		35	43 -	77	A/N
0020		9	78 -	86	N
0030	1	6	87 -	92	N
0040	2	6	93 -	98	N
0050	3	6	99 -	104	N
0060	4	4	105 -	108	N
0065	5	4	109 -	112	N
0070	6	6	113 -	118	N
*0075	7	6	119 -	124	"STMbnn" OR BLANK
0080	7	6	125 -	130	N
0090	8	12	131 -	142	N
0100	9(a)	12	143 -	154	N
0110	9(b)	12	155 -	166	N
0120	10(a)	12	167 -	178	N
0130	10(b)	12	179 -	190	N
0140	11(a)	12	191 -	202	N
0150	11(b)	12	203 -	214	N
0160	12(a)	12	215 -	226	N
0170	12(b)	12	227 -	238	N
0180	13(b)	12	239 -	250	N

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0190	DEDUCTIBLE NET	14	12	251 -	262	N
0200	REDUCED PROFIT/LOSS	15	12	263 -	274	N
0210	NON-DEDUCTIBLE MORTGAGE INTEREST DIRECT	16(a)	12	275 -	286	N
0220	NON-DEDUCTIBLE MORTGAGE INTEREST INDIRECT	16(b)	12	287 -	298	N
0230	INSURANCE DIRECT	17(a)	12	299 -	310	N
0240	INSURANCE INDIRECT	17(b)	12	311 -	322	N
0250	REPAIRS/MAINTENANCE DIRECT	18(a)	12	323 -	334	N
0260	REPAIRS/MAINTENANCE INDIRECT	18(b)	12	335 -	346	N
0270	UTILITIES DIRECT	19(a)	12	347 -	358	N
0280	UTILITIES INDIRECT	19(b)	12	359 -	370	N
0290	OTHER EXPENSES DIRECT	20(a)	12	371 -	382	N
0300	OTHER EXPENSES INDIRECT	20(b)	12	383 -	394	N
0310	DIRECT NON-DEDUCTED SUBTOTAL	21(a)	12	395 -	406	N
0320	INDIRECT NON-DEDUCTED SUBTOTAL	21(b)	12	407 -	418	N
0330	ALLOWABLE INDIRECT NON-DEDUCTED EXPENSES	22	12	419 -	430	N
0340	OPERATING EXPENSES CARRYOVER	23	12	431 -	442	N
0350	NON-DEDUCTIBLE NET	24	12	443 -	454	N
0360	ALLOWABLE OPERATING EXPENSES	25	12	455 -	466	N
0370	CASUALTY LOSS AND DEPRECIATION LIMIT	26	12	467 -	478	N
0380	EXCESS CASUALTY LOSSES	27(b)	12	479 -	490	N
0390	HOME DEPRECIATION	28(b)	12	491 -	502	N
0400	EXCESS CASUALTY LOSSES AND DEPRECIATION CARRYOVER	29(b)	12	503 -	514	N
0410	CASUALTY LOSSES AND DEPRECIATION NET	30	12	515 -	526	N
0420	ALLOWABLE EXCESS CASUALTY LOSSES AND DEPRECIATION	31	12	527 -	538	N
0430	TOTAL ALLOWABLE EXPENSES	32	12	539 -	550	N
0440	FORM 4684 CASUALTY LOSS	33	12	551 -	562	N
0450	SCHEDULE C ALLOWABLE EXPENSES	34	12	563 -	574	N
0460	HOME ADJUSTED BASIS OR FAIR MARKET VALUE	35	12	575 -	586	N

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0470	LAND VALUE	36	12	587 - 598	N
0480	BUILDING BASIS	37	12	599 - 610	N
0490	BUSINESS BUILDING BASIS	38	12	611 - 622	N
0500	DEPRECIATION PERCENTAGE	39	6	623 - 628	N
0510	DEPRECIATION ALLOWABLE	40	12	629 - 640	N
0515	"SEE ATTACHED" LITERAL	40	12	641 - 652	"SEE ATTACHED" OR BLANK
@0517	COMPUTATION SCHEDULE	40	6	653 - 658	"STMbnn" OR BLANK
0520	UNALLOWED OPERATING EXPENSES	41	12	659 - 670	N
0530	UNALLOWED EXCESS CASUALTY LOSSES AND DEPRECIATION	42	12	671 - 682	N
	RECORD TERMINUS CHARACTER		1	683 - 683	"#"

SECTION 9.83 STATEMENT RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
		4	1	-	4	0136
		4	5	-	8	*****
0000	RECORD ID	6	9	-	14	"STMbnn" nn = 01-96 (OTHERS) 97 FOR SCH D 98 FOR SCH J 99 FOR SCH K1
0001	RESERVED	6	15	-	20	BLANK
0002	PAGE NUMBER	5	21	-	25	"PGnrb" nn = 01-04 OR 01-99 (D, J, K1)
0003	EIN	9	26	-	34	N nnnnnnnnn
0004	FILLER	8	35	-	42	BLANK
0010	LINE NUMBER	5	43	-	47	"LNnrb" nn = 01-50
0020	SCHEDULE K OR J SEQUENCE NUMBER	7	48	-	54	MUST BE SIGNIFICANT RANGE = 0000001 - 9999999 IF SCHEDULE K OR J
0030	FILLER	1	55	-	55	BLANK
0040	DATA RECORD ***FIELD #040 IS FOR ALL STATEMENTS	80	56	-	135	SEE SEC. 3.05
	RECORD TERMINUS CHARACTER	1	136	-	136	"#"

SECTION 9.84 SUMMARY RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0466
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD IDENTIFICATION		6	9 -	14	"SUMbbb"
0005	CLIENT IDENTIFICATION		3	15 -	17	A/N
0006	FILLER		8	18 -	25	BLANK
0007	EMPLOYER IDENTIFICATION NO. (ESTATE OR TRUST EIN)		9	26 -	34	N nnnnnnnnn
0009	FILLER		8	35 -	42	BLANK
0010	RESERVED		9	43 -	51	BLANK
0030	FILLER		1	52 -	52	BLANK
0040	TRUST OR ESTATE BANK ACCOUNT NUMBER		17	53 -	69	A/N OR BLANK
0050	TRANSMITTER'S NAME		35	70 -	104	A/N
0060	TRANSMITTER'S EIN (FIELD #0020 ON TRANS RECORD) SEE PART II		9	105 -	113	N
0070	PREPARER'S SELF-EMPLOYMENT INDICATOR		1	114 -	114	"X" OR BLANK
0080	PREPARER'S FIRM EIN (FIELD #0870 ON FORM 1041)		9	115 -	123	N OR BLANK
0090	PREPARER'S FIRM NAME		35	124 -	158	A/N OR BLANK
0100	FIRM/FILER CITY		22	159 -	180	A/N OR BLANK
0110	FIRM/FILER STATE (ABBR.)		2	181 -	182	A/N OR BLANK
0120	FIRM/FILER ZIP CODE		12	183 -	194	N OR nnnnnbbbbbb OR nnnnnnnnnbbb OR BLANK
0130	NUMBER OF LOGICAL RECORDS (INCLUDING SUMMARY RECORD)		7	195 -	201	RANGE : (0000003-9999999)
0140	NUMBER OF FORM RECORDS		7	202 -	208	N
	NOTE: THIS COUNT DOES NOT INCLUDE FORM 1041.					
0150	NUMBER OF FORMS 1116 PAGE 1		7	209 -	215	RANGE : (0000000- 9999999)
0160	NUMBER OF FORMS 1116 PAGE 2		7	216 -	222	RANGE : (0000000- 9999999)
0170	NUMBER OF FORMS 2210 PAGE 1		1	223 -	223	RANGE: 0-1
0180	NUMBER OF FORMS 2210 PAGE 2		1	224 -	224	RANGE: 0-1
0190	NUMBER OF FORMS 2210 PAGE 3		1	225 -	225	RANGE: 0-1

SECTION 9.84 SUMMARY RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0194	NUMBER OF FORMS 2210F PAGE 1		1	226	- 226	RANGE: 0-1
0195	RESERVE		1	227	- 227	BLANK
0196	NUMBER OF FORMS 2439 PAGE 1		7	228	- 234	RANGE : 0000000-9999999
0200	NUMBER OF FORMS 3468 PAGE 1		1	235	- 235	RANGE: 0-1
0204	NUMBER OF FORMS 4136 PAGE 1		1	236	- 236	RANGE: 0-1
0206	NUMBER OF FORMS 4136 PAGE 2		1	237	- 237	RANGE: 0-1
0210	NUMBER OF FORMS 4255 PAGE 1		7	238	- 244	RANGE = (0000000-9999999)
0220	NUMBER OF FORMS 4562 PAGE 1		7	245	- 251	RANGE = (0000000-9999999)
0230	NUMBER OF FORMS 4562 PAGE 2		7	252	- 258	RANGE = (0000000-9999999)
0240	NUMBER OF FORMS 4684 PAGE 1		7	259	- 265	RANGE = (0000000-9999999)
0250	NUMBER OF FORMS 4684 PAGE 2		7	266	- 272	RANGE = (0000000-9999999)
0260	NUMBER OF FORMS 4797 PAGE 1		1	273	- 273	RANGE: 0-1
0270	NUMBER OF FORMS 4797 PAGE 2		1	274	- 274	RANGE: 0-1
0275	NUMBER OF FORMS 4835 PAGE 1		7	275	- 281	RANGE = (0000000-9999999)
0280	NUMBER OF FORMS 4952 PAGE 1		1	282	- 282	RANGE: 0-1
0282	NUMBER OF FORMS 4970 PAGE 1		1	283	- 283	RANGE : 0-1
0284	NUMBER OF FORMS 4972 PAGE 1		7	284	- 290	RANGE : 0000000-9999999
0290	NUMBER OF FORMS 6198 PAGE 1		7	291	- 297	RANGE = (0000000-9999999)
0295	NUMBER OF FORMS 6252 PAGE 1		7	298	- 304	RANGE = (0000000-9999999)
0300	NUMBER OF FORMS 8271 PAGE 1		7	305	- 311	RANGE = (0000000-9999999)
0310	NUMBER OF FORMS 8582 PAGE 1		1	312	- 312	RANGE: 0-1
0320	NUMBER OF FORMS 8582CR PAGE 1		1	313	- 313	RANGE: 0-1
0330	NUMBER OF FORMS 8582CR PAGE 2		1	314	- 314	RANGE: 0-1
0340	NUMBER OF FORMS 8801 PAGE 1		1	315	- 315	RANGE: 0-1
0345	NUMBER OF FORMS 8801 PAGE 2		1	316	- 316	RANGE: 0-1
0350	NUMBER OF FORMS 8824 PAGE 1		7	317	- 323	RANGE = (0000000-9999999)

SECTION 9.84 SUMMARY RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
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0355	NUMBER OF FORMS 8824 PAGE 2		7	324	-	330	RANGE = (0000000-9999999)
0357	NUMBER OF FORMS 8829 PAGE 1		7	331	-	337	RANGE = (0000000-9999999)
0360	NUMBER OF SCHEDULE RECORDS (EXCLUDING SCHEDULE K-1 RECORDS)		7	338	-	344	RANGE = (0000000-9999999)
0364	NUMBER OF SCHEDULE "C" PAGE 1 FORM 1040		7	345	-	351	RANGE = (0000000-9999999)
0366	NUMBER OF SCHEDULE "C" PAGE 2 FORM 1040		7	352	-	358	RANGE = (0000000-9999999)
0368	NUMBER OF SCHEDULE "C-EZ" PAGE 1 FORM 1040		7	359	-	365	RANGE = (0000000-9999999)
0370	NUMBER OF SCHEDULE "D" PAGE 1 FORM 1041		1	366	-	366	RANGE: 0-1
0375	NUMBER OF SCHEDULE "D" PAGE 2 FORM 1041		1	367	-	367	RANGE: 0-1
0380	NUMBER OF SCHEDULE "E" PAGE 1 FORM 1040		7	368	-	374	RANGE = (0000000-9999999)
0385	NUMBER OF SCHEDULE "E" PAGE 2 FORM 1040		7	375	-	381	RANGE = (0000000-9999999)
0386	NUMBER OF SCHEDULE "F" PAGE 1 FORM 1040		7	382	-	388	RANGE = (0000000 - 9999999)
0387	NUMBER OF SCHEDULE "F" PAGE 2 FORM 1040		7	389	-	395	RANGE = (0000000 - 9999999)
0388	NUMBER OF SCHEDULE "H" PAGE 1 FORM 1040		7	396	-	402	RANGE : 0000000-9999999
0389	NUMBER OF SCHEDULE "H" PAGE 2 FORM 1040		7	403	-	409	RANGE : 0000000-9999999
0390	NUMBER OF SCHEDULE "J" PAGE 1 FORM 1041		7	410	-	416	RANGE = (0000000-9999999)
0395	NUMBER OF SCHEDULE "J" PAGE 2 FORM 1041		7	417	-	423	RANGE = (0000000-9999999)
0400	NUMBER OF STATEMENT RECORDS (EXCLUDING SCHEDULE D, J AND K-1 STATEMENT RECORDS)		7	424	-	430	RANGE = (0000000-9999999)
0410	NUMBER OF STATEMENT "STMb97" (SCHEDULE D) RECORDS		7	431	-	437	RANGE = (0000000-9999999)
0420	NUMBER OF STATEMENT "STMb98" (SCHEDULE J) RECORDS		7	438	-	444	RANGE = (0000000-9999999)
0430	NUMBER OF SCHEDULE K-1 PAGE 1 FORM 1041		7	445	-	451	RANGE = (0000000-9999999)

SECTION 9.84 SUMMARY RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0440		7	452	-	458	RANGE = (0000000-9999999)
0442		2	459	-	460	"NY" OR "MA" OR BLANK
0444		1	461	-	461	"1" OR "0" OR BLANK
0446		2	462	-	463	"00-99" OR BLANK
0450		1	464	-	464	P = PAPER CHECK WITH REMITTANCE REGISTER ATTACHED OR BLANK
0460		1	465	-	465	1 = PAPER DOCUMENT ATTACHED W/PACKAGE OTHER THAN FORM 8453-F OR POWER ATTORNEY 0 = NO PAPER DOCUMENT ATTACHED
		1	466	-	466	"#"

SECTION 9.85 RECAP RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
		4	1	-	4	0062
		4	5	-	8	*****
0000		6	9	-	14	"RECAPb"
0009		28	15	-	42	BLANK
0010		6	43	-	48	N RANGE = (000001 - 999999)
0020		8	49	-	56	NNNNNNnn NNNNNN = ETIN nn = FILER'S USER CODE; MAY BE ZERO FILLED
0030		3	57	-	59	N JULIAN DATE OF TRANSMISSION (MUST BE THE SAME AS F #080 ON THE TRANS RECORD)
0040		2	60	-	61	N TRANSMISSION SEQUENCE (MUST BE THE SAME AS F #090 ON THE TRANS RECORD)
		1	62	-	62	"#" RECORD TERMINUS CHARACTER

SECTION 9.86 STATE ENTITY RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
	BYTE COUNT		4	1 -	4	0590
	START RECORD SENTINEL		4	5 -	8	*****
0000	RECORD ID		6	9 -	14	"STATE "
0001	TYPE (FORM NUMBER)		6	15 -	20	"AHEADR"
0002	PAGE NUMBER		5	21 -	25	"PG01b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)		9	26 -	34	N nnnnnnnnn
0004	FILLER		1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER		2	36 -	37	N 01 - 99
0006	FILLER		5	38 -	42	BLANK
0010	STATE CODE		2	43 -	44	"NY" OR "MA"
0020	STATE RETURN INDICATOR		1	45 -	45	A/N
0030	STATE NUMERIC AREA		27	46 -	72	N
0040	STATE ALPHA AREA		93	73 -	165	A/N
0050	NAME LINE		35	166 -	200	A/N
0060	NAME LINE		35	201 -	235	A/N
0070	NAME LINE		35	236 -	270	A/N
0080	ADDRESS LINE		35	271 -	305	A/N
0090	ADDRESS LINE		35	306 -	340	A/N
0100	CITY		22	341 -	362	A/N
0110	CITY CODE		5	363 -	367	N
0120	STATE ABBREVIATION		2	368 -	369	A/N
0130	ZIP CODE		12	370 -	381	NNNNN-NNNN-NNN
0140	COUNTY		20	382 -	401	A/N
0150	COUNTY CODE		5	402 -	406	N
0160	TELEPHONE NUMBER		12	407 -	418	A/N
0170	DATE CREATED		8	419 -	426	YYYYMMDD
0180	TYPE OR TRUST		28	427 -	454	A/N
0190	ORIGINAL RETURN		1	455 -	455	X OR " "
0200	AMENDED RETURN		1	456 -	456	X OR " "
0210	FINAL RETURN		1	457 -	457	X OR " "
0220	OPTIONAL		22	458 -	479	A/N OR " "

SECTION 9.86 STATE ENTITY RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	-	POS	FIELD DESCRIPTION
0230	OPTIONAL	22	480	-	501	A/N OR " "
0240	OPTIONAL	22	502	-	523	A/N OR " "
0250	OPTIONAL	22	524	-	545	A/N OR " "
0260	OPTIONAL	22	546	-	567	A/N OR " "
0270	OPTIONAL	22	568	-	589	A/N OR " "
	RECORD TERMINUS CHARACTER	1	590	-	590	"#"

SECTION 9.87 STATE ATTACHMENT B RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	2477
		4	5 -	8	*****
0000	RECORD ID	6	9 -	14	"STATE "
0001	TYPE (FORM NUMBER)	6	15 -	20	"BATCH"
0002	PAGE NUMBER	5	21 -	25	"PG02b"
0003	EMPLOYER IDENTIFICATION NUMBER (EIN)	9	26 -	34	N nnnnnnnn
0004	FILLER	1	35 -	35	BLANK
0005	FORM OCCURRENCE NUMBER	2	36 -	37	N 01 - 99
0006	FILLER	5	38 -	42	BLANK
0008	STATE CODE	2	43 -	44	"NY" OR "MA"
0010	ALPHANUMERIC FIELD	80	45 -	124	A/N
0020	ALPHANUMERIC FIELD	80	125 -	204	A/N
0030	ALPHANUMERIC FIELD	80	205 -	284	A/N
0040	ALPHANUMERIC FIELD	80	285 -	364	A/N
0050	ALPHANUMERIC FIELD	80	365 -	444	A/N
0060	ALPHANUMERIC FIELD	80	445 -	524	A/N
0070	ALPHANUMERIC FIELD	80	525 -	604	A/N
0080	ALPHANUMERIC FIELD	80	605 -	684	A/N
0090	ALPHANUMERIC FIELD	80	685 -	764	A/N
0200	ALPHANUMERIC FIELD	80	765 -	844	A/N
0210	NUMERIC FIELD	12	845 -	856	N
0220	NUMERIC FIELD	12	857 -	868	N
0230	NUMERIC FIELD	12	869 -	880	N
0240	NUMERIC FIELD	12	881 -	892	N
0250	NUMERIC FIELD	12	893 -	904	N
0260	NUMERIC FIELD	12	905 -	916	N
0270	NUMERIC FIELD	12	917 -	928	N
0280	NUMERIC FIELD	12	929 -	940	N
0290	NUMERIC FIELD	12	941 -	952	N
0300	NUMERIC FIELD	12	953 -	964	N
0310	NUMERIC FIELD	12	965 -	976	N

SECTION 9.87 STATE ATTACHMENT B RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0320	NUMERIC FIELD		12	977 -	988	N
0330	NUMERIC FIELD		12	989 -	1000	N
0340	NUMERIC FIELD		12	1001 -	1012	N
0350	NUMERIC FIELD		12	1013 -	1024	N
0360	NUMERIC FIELD		12	1025 -	1036	N
0370	NUMERIC FIELD		12	1037 -	1048	N
0380	NUMERIC FIELD		12	1049 -	1060	N
0390	NUMERIC FIELD		12	1061 -	1072	N
0400	NUMERIC FIELD		12	1073 -	1084	N
0410	NUMERIC FIELD		12	1085 -	1096	N
0420	NUMERIC FIELD		12	1097 -	1108	N
0430	NUMERIC FIELD		12	1109 -	1120	N
0440	NUMERIC FIELD		12	1121 -	1132	N
0450	NUMERIC FIELD		12	1133 -	1144	N
0460	NUMERIC FIELD		12	1145 -	1156	N
0470	NUMERIC FIELD		12	1157 -	1168	N
0480	NUMERIC FIELD		12	1169 -	1180	N
0490	NUMERIC FIELD		12	1181 -	1192	N
0500	NUMERIC FIELD		12	1193 -	1204	N
0510	NUMERIC FIELD		12	1205 -	1216	N
0520	NUMERIC FIELD		12	1217 -	1228	N
0530	NUMERIC FIELD		12	1229 -	1240	N
0540	NUMERIC FIELD		12	1241 -	1252	N
0550	NUMERIC FIELD		12	1253 -	1264	N
0560	NUMERIC FIELD		12	1265 -	1276	N
0570	NUMERIC FIELD		12	1277 -	1288	N
0580	NUMERIC FIELD		12	1289 -	1300	N
0590	NUMERIC FIELD		12	1301 -	1312	N
0600	NUMERIC FIELD		12	1313 -	1324	N
0610	NUMERIC FIELD		12	1325 -	1336	N
0620	NUMERIC FIELD		12	1337 -	1348	N
0630	NUMERIC FIELD		12	1349 -	1360	N

SECTION 9.87 STATE ATTACHMENT B RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0640	NUMERIC FIELD		12	1361	- 1372	N
0650	NUMERIC FIELD		12	1373	- 1384	N
0660	NUMERIC FIELD		12	1385	- 1396	N
0670	NUMERIC FIELD		12	1397	- 1408	N
0680	NUMERIC FIELD		12	1409	- 1420	N
0690	NUMERIC FIELD		12	1421	- 1432	N
0700	NUMERIC FIELD		12	1433	- 1444	N
0710	NUMERIC FIELD		12	1445	- 1456	N
0720	NUMERIC FIELD		12	1457	- 1468	N
0730	NUMERIC FIELD		12	1469	- 1480	N
0740	NUMERIC FIELD		12	1481	- 1492	N
0750	NUMERIC FIELD		12	1493	- 1504	N
0760	NUMERIC FIELD		12	1505	- 1516	N
0770	NUMERIC FIELD		12	1517	- 1528	N
0780	NUMERIC FIELD		12	1529	- 1540	N
0790	NUMERIC FIELD		12	1541	- 1552	N
0800	NUMERIC FIELD		12	1553	- 1564	N
0810	NUMERIC FIELD		12	1565	- 1576	N
0820	NUMERIC FIELD		12	1577	- 1588	N
0830	NUMERIC FIELD		12	1589	- 1600	N
0840	NUMERIC FIELD		12	1601	- 1612	N
0850	NUMERIC FIELD		12	1613	- 1624	N
0860	NUMERIC FIELD		12	1625	- 1636	N
0870	NUMERIC FIELD		12	1637	- 1648	N
0880	NUMERIC FIELD		12	1649	- 1660	N
0890	NUMERIC FIELD		12	1661	- 1672	N
0900	NUMERIC FIELD		12	1673	- 1684	N
0910	NUMERIC FIELD		12	1685	- 1696	N
0920	NUMERIC FIELD		12	1697	- 1708	N
0930	NUMERIC FIELD		12	1709	- 1720	N
0940	NUMERIC FIELD		12	1721	- 1732	N
0950	NUMERIC FIELD		12	1733	- 1744	N

SECTION 9.87 STATE ATTACHMENT B RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0960	NUMERIC FIELD		12	1745	- 1756	N
0970	NUMERIC FIELD		12	1757	- 1768	N
0980	NUMERIC FIELD		12	1769	- 1780	N
0990	NUMERIC FIELD		12	1781	- 1792	N
1000	NUMERIC FIELD		12	1793	- 1804	N
1010	NUMERIC FIELD		12	1805	- 1816	N
1020	NUMERIC FIELD		12	1817	- 1828	N
1030	NUMERIC FIELD		12	1829	- 1840	N
1040	NUMERIC FIELD		12	1841	- 1852	N
1050	NUMERIC FIELD		12	1853	- 1864	N
1060	NUMERIC FIELD		12	1865	- 1876	N
1070	NUMERIC FIELD		12	1877	- 1888	N
1080	NUMERIC FIELD		12	1889	- 1900	N
1090	NUMERIC FIELD		12	1901	- 1912	N
1100	NUMERIC FIELD		12	1913	- 1924	N
1110	NUMERIC FIELD		12	1925	- 1936	N
1120	NUMERIC FIELD		12	1937	- 1948	N
1130	NUMERIC FIELD		12	1949	- 1960	N
1140	NUMERIC FIELD		12	1961	- 1972	N
1150	NUMERIC FIELD		12	1973	- 1984	N
1160	NUMERIC FIELD		12	1985	- 1996	N
1170	NUMERIC FIELD		12	1997	- 2008	N
1180	NUMERIC FIELD		12	2009	- 2020	N
1190	NUMERIC FIELD		12	2021	- 2032	N
1200	NUMERIC FIELD		12	2033	- 2044	N
1210	NUMERIC FIELD		12	2045	- 2056	N
1220	NUMERIC FIELD		12	2057	- 2068	N
1230	NUMERIC FIELD		12	2069	- 2080	N
1240	NUMERIC FIELD		12	2081	- 2092	N
1250	NUMERIC FIELD		12	2093	- 2104	N
1260	NUMERIC FIELD		12	2105	- 2116	N
1270	NUMERIC FIELD		12	2117	- 2128	N

SECTION 9.87 STATE ATTACHMENT B RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1280	NUMERIC FIELD		12	2129 - 2140	N	
1290	NUMERIC FIELD		12	2141 - 2152	N	
1300	NUMERIC FIELD		12	2153 - 2164	N	
1310	NUMERIC FIELD		12	2165 - 2176	N	
1320	NUMERIC FIELD		12	2177 - 2188	N	
1330	NUMERIC FIELD		12	2189 - 2200	N	
1340	NUMERIC FIELD		12	2201 - 2212	N	
1350	NUMERIC FIELD		12	2213 - 2224	N	
1360	NUMERIC FIELD		12	2225 - 2236	N	
1370	NUMERIC FIELD		12	2237 - 2248	N	
1380	NUMERIC FIELD		12	2249 - 2260	N	
1390	NUMERIC FIELD		12	2261 - 2272	N	
1400	NUMERIC FIELD		12	2273 - 2284	N	
1410	NUMERIC FIELD		12	2285 - 2296	N	
1420	NUMERIC FIELD		12	2297 - 2308	N	
1430	NUMERIC FIELD		12	2309 - 2320	N	
1440	NUMERIC FIELD		12	2321 - 2332	N	
1450	NUMERIC FIELD		12	2333 - 2344	N	
1460	NUMERIC FIELD		12	2345 - 2356	N	
1470	NUMERIC FIELD		12	2357 - 2368	N	
1480	NUMERIC FIELD		12	2369 - 2380	N	
1490	NUMERIC FIELD		12	2381 - 2392	N	
1500	NUMERIC FIELD		12	2393 - 2404	N	
1510	NUMERIC FIELD		12	2405 - 2416	N	
1520	NUMERIC FIELD		12	2417 - 2428	N	
1530	NUMERIC FIELD		12	2429 - 2440	N	
1540	NUMERIC FIELD		12	2441 - 2452	N	
1550	NUMERIC FIELD		12	2453 - 2464	N	
1560	NUMERIC FIELD		12	2465 - 2476	N	
	RECORD TERMINUS CHARACTER		1	2477 - 2477	"#"	

SECTION 9.88 STATE ATTACHMENT C RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	2481
		4	5 -	8	*****
0000		6	9 -	14	"STATE "
0001		6	15 -	20	"CATCH"
0002		5	21 -	25	"PG03b"
0003		9	26 -	34	N nnnnnnnnn
0004		1	35 -	35	BLANK
0005		2	36 -	37	N 01 - 99
0006		5	38 -	42	BLANK
0008		2	43 -	44	"NY" OR "MA"
0010		80	45 -	124	A/N
0020		80	125 -	204	A/N
0030		80	205 -	284	A/N
0040		80	285 -	364	A/N
0050		80	365 -	444	A/N
0060		80	445 -	524	A/N
0070		80	525 -	604	A/N
0080		80	605 -	684	A/N
0090		80	685 -	764	A/N
0100		80	765 -	844	A/N
0110		80	845 -	924	A/N
0120		80	925 -	1004	A/N
0130		80	1005 -	1084	A/N
0140		80	1085 -	1164	A/N
0150		80	1165 -	1244	A/N
0160		80	1245 -	1324	A/N
0170		80	1325 -	1404	A/N
0180		80	1405 -	1484	A/N
0190		80	1485 -	1564	A/N
0200		80	1565 -	1644	A/N
0210		80	1645 -	1724	A/N

SECTION 9.88 STATE ATTACHMENT C RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0220	FORM DATA (LINE 022)	80	1725 - 1804	A/N	
0230	FORM DATA (LINE 023)	80	1805 - 1884	A/N	
0240	FORM DATA (LINE 024)	80	1885 - 1964	A/N	
0250	FORM DATA (LINE 025)	80	1965 - 2044	A/N	
0260	FORM DATA (LINE 026)	80	2045 - 2124	A/N	
0270	FORM DATA (LINE 027)	80	2125 - 2204	A/N	
0280	FORM DATA (LINE 028)	80	2205 - 2284	A/N	
0290	FORM DATA (LINE 029)	80	2285 - 2364	A/N	
0300	FORM DATA (LINE 030)	80	2365 - 2444	A/N	
0310	NUMERIC FIELD	12	2445 - 2456	N	
0320	NUMERIC FIELD	12	2457 - 2468	N	
0330	NUMERIC FIELD	12	2469 - 2480	N	
	RECORD TERMINUS CHARACTER	1	2481 - 2481	"#"	

SECTION 9.89 STATE ATTACHMENT D RECORD

FIELD IDENTIFICATION NO.	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
		4	1 -	4	2477
		4	5 -	8	*****
0000		6	9 -	14	"STATE "
0001		6	15 -	20	"DATTC"
0002		5	21 -	25	"PG04b"
0003		9	26 -	34	N nnnnnnnn
0004		1	35 -	35	BLANK
0005		2	36 -	37	N 01 - 99
0006		5	38 -	42	BLANK
0008		2	43 -	44	"NY" OR "MA"
0010		80	45 -	124	A/N
0020		80	125 -	204	A/N
0030		80	205 -	284	A/N
0040		80	285 -	364	A/N
0050		80	365 -	444	A/N
0060		80	445 -	524	A/N
0070		80	525 -	604	A/N
0080		80	605 -	684	A/N
0090		80	685 -	764	A/N
0200		80	765 -	844	A/N
0210		12	845 -	856	N
0220		12	857 -	868	N
0230		12	869 -	880	N
0240		12	881 -	892	N
0250		12	893 -	904	N
0260		12	905 -	916	N
0270		12	917 -	928	N
0280		12	929 -	940	N
0290		12	941 -	952	N
0300		12	953 -	964	N
0310		12	965 -	976	N

SECTION 9.89 STATE ATTACHMENT D RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0320	NUMERIC FIELD		12	977 - 988	N	
0330	NUMERIC FIELD		12	989 - 1000	N	
0340	NUMERIC FIELD		12	1001 - 1012	N	
0350	NUMERIC FIELD		12	1013 - 1024	N	
0360	NUMERIC FIELD		12	1025 - 1036	N	
0370	NUMERIC FIELD		12	1037 - 1048	N	
0380	NUMERIC FIELD		12	1049 - 1060	N	
0390	NUMERIC FIELD		12	1061 - 1072	N	
0400	NUMERIC FIELD		12	1073 - 1084	N	
0410	NUMERIC FIELD		12	1085 - 1096	N	
0420	NUMERIC FIELD		12	1097 - 1108	N	
0430	NUMERIC FIELD		12	1109 - 1120	N	
0440	NUMERIC FIELD		12	1121 - 1132	N	
0450	NUMERIC FIELD		12	1133 - 1144	N	
0460	NUMERIC FIELD		12	1145 - 1156	N	
0470	NUMERIC FIELD		12	1157 - 1168	N	
0480	NUMERIC FIELD		12	1169 - 1180	N	
0490	NUMERIC FIELD		12	1181 - 1192	N	
0500	NUMERIC FIELD		12	1193 - 1204	N	
0510	NUMERIC FIELD		12	1205 - 1216	N	
0520	NUMERIC FIELD		12	1217 - 1228	N	
0530	NUMERIC FIELD		12	1229 - 1240	N	
0540	NUMERIC FIELD		12	1241 - 1252	N	
0550	NUMERIC FIELD		12	1253 - 1264	N	
0560	NUMERIC FIELD		12	1265 - 1276	N	
0570	NUMERIC FIELD		12	1277 - 1288	N	
0580	NUMERIC FIELD		12	1289 - 1300	N	
0590	NUMERIC FIELD		12	1301 - 1312	N	
0600	NUMERIC FIELD		12	1313 - 1324	N	
0610	NUMERIC FIELD		12	1325 - 1336	N	
0620	NUMERIC FIELD		12	1337 - 1348	N	
0630	NUMERIC FIELD		12	1349 - 1360	N	

SECTION 9.89 STATE ATTACHMENT D RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0640	NUMERIC FIELD		12	1361	- 1372	N
0650	NUMERIC FIELD		12	1373	- 1384	N
0660	NUMERIC FIELD		12	1385	- 1396	N
0670	NUMERIC FIELD		12	1397	- 1408	N
0680	NUMERIC FIELD		12	1409	- 1420	N
0690	NUMERIC FIELD		12	1421	- 1432	N
0700	NUMERIC FIELD		12	1433	- 1444	N
0710	NUMERIC FIELD		12	1445	- 1456	N
0720	NUMERIC FIELD		12	1457	- 1468	N
0730	NUMERIC FIELD		12	1469	- 1480	N
0740	NUMERIC FIELD		12	1481	- 1492	N
0750	NUMERIC FIELD		12	1493	- 1504	N
0760	NUMERIC FIELD		12	1505	- 1516	N
0770	NUMERIC FIELD		12	1517	- 1528	N
0780	NUMERIC FIELD		12	1529	- 1540	N
0790	NUMERIC FIELD		12	1541	- 1552	N
0800	NUMERIC FIELD		12	1553	- 1564	N
0810	NUMERIC FIELD		12	1565	- 1576	N
0820	NUMERIC FIELD		12	1577	- 1588	N
0830	NUMERIC FIELD		12	1589	- 1600	N
0840	NUMERIC FIELD		12	1601	- 1612	N
0850	NUMERIC FIELD		12	1613	- 1624	N
0860	NUMERIC FIELD		12	1625	- 1636	N
0870	NUMERIC FIELD		12	1637	- 1648	N
0880	NUMERIC FIELD		12	1649	- 1660	N
0890	NUMERIC FIELD		12	1661	- 1672	N
0900	NUMERIC FIELD		12	1673	- 1684	N
0910	NUMERIC FIELD		12	1685	- 1696	N
0920	NUMERIC FIELD		12	1697	- 1708	N
0930	NUMERIC FIELD		12	1709	- 1720	N
0940	NUMERIC FIELD		12	1721	- 1732	N
0950	NUMERIC FIELD		12	1733	- 1744	N

SECTION 9.89 STATE ATTACHMENT D RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
0960	NUMERIC FIELD		12	1745	- 1756	N
0970	NUMERIC FIELD		12	1757	- 1768	N
0980	NUMERIC FIELD		12	1769	- 1780	N
0990	NUMERIC FIELD		12	1781	- 1792	N
1000	NUMERIC FIELD		12	1793	- 1804	N
1010	NUMERIC FIELD		12	1805	- 1816	N
1020	NUMERIC FIELD		12	1817	- 1828	N
1030	NUMERIC FIELD		12	1829	- 1840	N
1040	NUMERIC FIELD		12	1841	- 1852	N
1050	NUMERIC FIELD		12	1853	- 1864	N
1060	NUMERIC FIELD		12	1865	- 1876	N
1070	NUMERIC FIELD		12	1877	- 1888	N
1080	NUMERIC FIELD		12	1889	- 1900	N
1090	NUMERIC FIELD		12	1901	- 1912	N
1100	NUMERIC FIELD		12	1913	- 1924	N
1110	NUMERIC FIELD		12	1925	- 1936	N
1120	NUMERIC FIELD		12	1937	- 1948	N
1130	NUMERIC FIELD		12	1949	- 1960	N
1140	NUMERIC FIELD		12	1961	- 1972	N
1150	NUMERIC FIELD		12	1973	- 1984	N
1160	NUMERIC FIELD		12	1985	- 1996	N
1170	NUMERIC FIELD		12	1997	- 2008	N
1180	NUMERIC FIELD		12	2009	- 2020	N
1190	NUMERIC FIELD		12	2021	- 2032	N
1200	NUMERIC FIELD		12	2033	- 2044	N
1210	NUMERIC FIELD		12	2045	- 2056	N
1220	NUMERIC FIELD		12	2057	- 2068	N
1230	NUMERIC FIELD		12	2069	- 2080	N
1240	NUMERIC FIELD		12	2081	- 2092	N
1250	NUMERIC FIELD		12	2093	- 2104	N
1260	NUMERIC FIELD		12	2105	- 2116	N
1270	NUMERIC FIELD		12	2117	- 2128	N

SECTION 9.89 STATE ATTACHMENT D RECORD

FIELD NO.	IDENTIFICATION	FORM REF.	LENGTH	CHAR	POS	FIELD DESCRIPTION
1280	NUMERIC FIELD		12	2129 - 2140	N	
1290	NUMERIC FIELD		12	2141 - 2152	N	
1300	NUMERIC FIELD		12	2153 - 2164	N	
1310	NUMERIC FIELD		12	2165 - 2176	N	
1320	NUMERIC FIELD		12	2177 - 2188	N	
1330	NUMERIC FIELD		12	2189 - 2200	N	
1340	NUMERIC FIELD		12	2201 - 2212	N	
1350	NUMERIC FIELD		12	2213 - 2224	N	
1360	NUMERIC FIELD		12	2225 - 2236	N	
1370	NUMERIC FIELD		12	2237 - 2248	N	
1380	NUMERIC FIELD		12	2249 - 2260	N	
1390	NUMERIC FIELD		12	2261 - 2272	N	
1400	NUMERIC FIELD		12	2273 - 2284	N	
1410	NUMERIC FIELD		12	2285 - 2296	N	
1420	NUMERIC FIELD		12	2297 - 2308	N	
1430	NUMERIC FIELD		12	2309 - 2320	N	
1440	NUMERIC FIELD		12	2321 - 2332	N	
1450	NUMERIC FIELD		12	2333 - 2344	N	
1460	NUMERIC FIELD		12	2345 - 2356	N	
1470	NUMERIC FIELD		12	2357 - 2368	N	
1480	NUMERIC FIELD		12	2369 - 2380	N	
1490	NUMERIC FIELD		12	2381 - 2392	N	
1500	NUMERIC FIELD		12	2393 - 2404	N	
1510	NUMERIC FIELD		12	2405 - 2416	N	
1520	NUMERIC FIELD		12	2417 - 2428	N	
1530	NUMERIC FIELD		12	2429 - 2440	N	
1540	NUMERIC FIELD		12	2441 - 2452	N	
1550	NUMERIC FIELD		12	2453 - 2464	N	
1560	NUMERIC FIELD		12	2465 - 2476	N	
	RECORD TERMINUS CHARACTER		1	2477 - 2477	"#"	

FEDERAL / STATE

SECTION 10 FEDERAL / STATE REQUIREMENTS

.01 GENERAL DESCRIPTION

- (1) The general concept is to emulate current operations used for the electronic filing of federal tax returns and modify these operations where necessary to accommodate the transmission of state tax return data to the state. The tax return data must be placed into a format for transmission as specified by the IRS and the state. It is the intent of the IRS to function primarily as a data conduit with respect to state tax data. The term "data conduit" is used to define a process to receive, temporarily store, and then make available for state retrieval the state return packet associated with a federal return that has been accepted by the IRS as processable.
- (2) If the federal tax return is rejected due to error conditions specified in Publication 1438, the associated state return packet will be rejected. If a state return packet is rejected, then the associated federal return will also be rejected. If the error(s) is of such a nature that it can be corrected and the return(s) processed, both return documents may be retransmitted to the IRS service center. The transmitter may elect to retransmit the federal tax portion of a rejected return and then file the state return using state tax paper forms.
- (3) After the receipt acknowledgment has been provided to the transmitter, the IRS is responsible for making the accepted return packet available to the state agency. Once the state agency has successfully completed the transmission session and received the return packet, the responsibility for data integrity is that of the state agency. Should subsequent errors of any type be detected during state processing, they are resolved between the state agency and the fiduciary using normal state paper procedures.
- (4) Form 8821, Tax Information Authorization, allows the state to retrieve the Federal Form 1041 and attachments along with the state return from the bulletin board and must be filed with the IRS. One form must accompany each transmission.

(5) Requirements for Electronic Filing

In order to file a state electronic Fiduciary Income Tax Return the following conditions **must** be met:

1. The state return must be electronically filed with the federal return through the Philadelphia Submission Processing Center.
2. The return must be filed between January 15, 2002 and April 15, 2002.
3. When preparing electronic returns, fiduciaries may elect to have their overpayments:
 - (a) applied to their 2002 estimated tax,
 - (b) sent to them in the form of a refund check, or
 - (c) split - part applied to their 2002 estimated tax and the remainder issued in the form of a refund check.

(6) Exclusions from Electronic Filing

Returns meeting **any** of the following criteria may **not** be filed electronically:

1. amended returns,
2. returns filed for a tax period other than January 1, 2001 through December 31, 2001,
3. returns for part-year residents of a state, or cities associated with that particular state,
4. returns reporting liabilities for nonresident earnings tax for cities associated with that particular state,
5. returns for decedents with Social Security Numbers in the following ranges:

000-00-0000 through 001-00-9999
691-00-0000 through 699-99-9999
764-00-0000 through 999-99-9999

6. returns with a Power of Attorney currently in effect in which the refund is to be sent to a third party, or
7. returns with any correspondence requesting special consideration or procedures.

.02 RETURN SEQUENCE ORDER

A state return must be received immediately following the federal return and preceding the Summary Record.

.03 LENGTH OPTIONS

The format may be fixed or variable.

.04 RECORD TYPES

A header
B attach
C attach
D attach

.05 ACKNOWLEDGMENT REPORT

IRS acknowledges receipt of state data with federal Form 1041 and passes this data on to the appropriate state for further validation.

.06 RECORD LAYOUTS

Section 9 contains the Federal/State record layouts as follows:

Section 9.86 State Entity Record
Section 9.87 State Attachment B Record
Section 9.88 State Attachment C Record
Section 9.89 State Attachment D Record

.07 REJECTION CONDITIONS

Reject codes in the 900 series are used for Federal/State BMF Electronic Filing. They identify specific errors resulting from entity and consistency checks.

REJECT CODE	ERROR CONDITION
900	The Employer Identification Number (EIN) on the Federal Form 1041 does not match the EIN on the state return.
901	The state return count in the Summary Record does not match the IRS Record Count.
902	The "State Attachment" count does not match the IRS Record Count.
903	Reserved
904	Reserved
905	State Code is invalid.
906	No recognizable state records are attached but the Summary Record is equal to a valid State Code.
907	A valid State Code does not appear in the Summary Record but there are state records attached.
911	Invalid State Code on state return.

NOTE: ALL OTHER FEDERAL FORM 1041 REQUIREMENTS APPLY TO FED/STATE.

EXHIBITS

EXHIBIT 1

Acceptable Street Address Abbreviations

Word	Abbreviation
and	&
Air Force Base	AFB
Apartment	APT
Avenue	AVE
Boulevard	BLVD
Building	BLDG
Care of, or In care of	%
Circle	CIR
Court	CT
Drive	DR
East	E
Fort	FT
General Delivery	GEN DEL
Heights	HTS
Highway	HWY
Island	IS
Junction	JCT
Lane	LN
Lodge	LDG
North	N
Northeast, N.E.	NE
Northwest, N.W.	NW
One-fourth, One-quarter	1/4 (all fractions, space
One-half	1/2 before & after the number, e.g., 1012 1/2 ST)
Parkway	PKY
Place	PL
Post Office Box, P.O. Box	PO BOX
Route, Rte.	RT
Road	RD
R.D., Rural Delivery, RFD, R.F.D., R.R., Rural Route	RR
South	S
Southeast, S.E.	SE
Southwest, S.W.	SW
Square	SQ
Street	ST
Terrace	TER
West	W

NOTE:

For a complete listing of acceptable address abbreviations, see Publication 7475, State Abbreviations, Major City Codes and Address Abbreviations.

EXHIBIT 2

Standard Postal State Abbreviations and Valid Zip Code ranges.

State	Abbrev	Zip Code
Alabama	AL	350nn-369nn
Alaska	AK	995nn-999nn
American Samoa	AS	967nn
Arizona	AZ	850nn-865nn
Arkansas	AR	716nn-729nn, 75502
California	CA	900nn-908nn, 910nn-966nn
Colorado	CO	800nn-816nn
Connecticut	CT	060nn-069nn
Delaware	DE	197nn-199nn
District of Columbia	DC	200nn-205nn
Fed. States of Micronesia	FM	969nn
Florida	FL	320nn-342nn, 344nn,346nn, 347nn,349nn
Georgia	GA	300nn-319nn, 399nn
Guam	GU	969nn
Hawaii	HI	967nn-968nn
Idaho	ID	832nn-838nn
Illinois	IL	600nn-629nn
Indiana	IN	460nn-479nn
Iowa	IA	500nn-528nn
Kansas	KS	660nn-679nn
Kentucky	KY	400nn-427nn, 45275
Louisiana	LA	700nn-714nn, 71749
Maine	ME	03801,039nn-049nn
Marshall Islands	MH	969nn
Maryland	MD	20331, 206nn-219nn
Massachusetts	MA	010nn-027nn, 055nn
Michigan	MI	480nn-499nn
Minnesota	MN	550nn-567nn
Mississippi	MS	386nn-397nn
Missouri	MO	630nn-658nn
Montana	MT	590nn-599nn
Nebraska	NE	680nn-693nn
Nevada	NV	889nn-898nn
New Hampshire	NH	030nn-038nn
New Jersey	NJ	070nn-089nn
New Mexico	NM	870nn-884nn
New York	NY	004nn,005nn, 100nn-149nn, 06390

*The last two (2) digits of a five (5) digit Zip Code must be 01 - 99.

**For Military Addresses, see Exhibit 3.

EXHIBIT 2 (CON'T)

Standard Postal State Abbreviations and Valid Zip Code ranges.

State	Abbrev	Zip Code
North Carolina	NC	270nn-289nn
North Dakota	ND	580nn-588nn
Northern Mariana Islands	MP	969nn
Ohio	OH	430nn-459nn
Oklahoma	OK	730nn-732nn, 734nn-749nn
Oregon	OR	970nn-979nn
Pennsylvania	PA	150nn-196nn
Puerto Rico	PR	006nn,007nn, 009nn
Rhode Island	RI	027nn-029nn
South Carolina SC		290nn-299nn
South Dakota	SD	570nn-577nn
Tennessee	TN	370nn-385nn
Texas	TX	733nn, 73949, 750nn-799nn
Utah	UT	840nn-847nn
Vermont	VT	050nn-054nn, 056nn-059nn
Virginia	VA	20041,201nn, 20301,20370, 220nn-246nn
Virgin Islands	VI	008nn
Washington	WA	980nn-994nn
West Virginia	WV	247nn-268nn
Wisconsin	WI	49936, 530nn-549nn
Wyoming	WY	820nn-831nn

*The last two (2) digits of a five (5) digit Zip Code must be 01 - 99.

**For Military Addresses, see Exhibit 3.

EXHIBIT 3

APO/FPO City/State/Zip Codes For Military Addresses Overseas

CITY	STATE	ZIP CODE
APO or FPO	AA	340nn (AA = Americas)
APO or FPO	AE	090nn-098nn (AE = Europe)
APO or FPO	AP	962nn-966nn (AP = Pacific)

EXHIBIT 4

ELECTRONIC FILING SYSTEMS
MAGNETIC MEDIA
ACKNOWLEDGMENT REPORT

PAGE: 99999
DATE: YYYY/MM/DD

TRANSMITTER NAME: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX TRANSMITTER EIN: 999999999 CLIENT ID: 999
TRANSMITTER ADDR: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX TRANSMITTER ETIN: 999999999 FILER ID: 9999999
XX

TELEPHONE NUMBER: (999)999-9999 ELECTRONIC TRACKING IND: ELECTRONIC ACKNOWLEDGE IND:
TRANSMISSION DATE YYYY/MM/DD JULIAN DATE: 999 SEQ NUM FOR JULIAN DATE: 99 FORM TYPE: 9999

DOCUMENT LOCATOR #	EMPLOYER ID #	ACCOUNT NUMBER	RETURN SEQ #	ACCEPTANCE CODE	STATE CODE
999999999999999	999999999	99999999999999999	9999999	X	99

ACKNOWLEDGMENT RECAP		TRANSMISSION RECAP	
TOTAL RETURN COUNT:	9999999	NUMBER OF RETURNS:	9
TOTAL ACCEPTED RETURNS:	9999999	NUMBER OF RETURNS DROPPED:	9
TOTAL REJECTED RETURNS:	9999999	NUMBER OF RECORDS DROPPED:	9
*DUPLICATE RETURNS:	9999999		
TOTAL STATE RETURNS ACCEPTED:	9999999		
TOTAL STATE RETURNS REJECTED:	9999999		

*TOTAL REJECTED RETURN INCLUDES THE DUPLICATE RETURNS

EXHIBIT 5

.01 MAGNETIC TAPE LABEL (EXAMPLE)

```
*****
* BACON MORTGAGE *
* ETIN: 900101 EBCDIC *
* FORM 1041 RETURNS 6250 *
* * *
* NUMBER OF TAPES: 1 OF 1 *
* NUMBER OF RETURNS (750) *
* NUMBER OF RETURNS WITH REMITTANCES: (NONE) LIVE DATA *
*****
```

.02 FLOPPY DISKETTE LABEL (EXAMPLE)

```
*****
* BACON MORTGAGE *
* ETIN: 900101 ASCII *
* FORM 1041 DATA *
* * *
* NUMBER OF TAPES: 1 OF 3 *
* NUMBER OF RETURNS (150) *
* NUMBER OF RETURNS WITH REMITTANCES: (NONE) TEST DATA *
*****
```

.03 ENTITY LABEL (EXAMPLE)

```
*****
* BACON MORTGAGE *
* ETIN: 900101 EBCDIC *
* FORM 1041 RETURNS 6250 *
* * *
* TOTAL NUMBER OF RECORDS: 3,000 ENTITY DATA *
*****
```

.04 REMITTANCE REGISTER LABEL (EXAMPLE)

```
*****
* BACON MORTGAGE *
* ETIN: 900101 EBCDIC *
* FORM 1041 REMITTANCE REGISTER 6250 *
* * *
* NUMBER OF TAPES: 1 OF 1 TEST DATA OR *
* NUMBER OF REMITTANCES: 3,000 LIVE DATA *
*****
```

EXHIBIT 6

8453-F Multiple Listing on Magnetic Tape

A Form 8453-F signature document must accompany every submitted Form 1041 return tape or transmission. This document may be submitted for every Form 1041 return filed or one document may be submitted with an attached Multiple Listing for up to 5,000 returns.

The Form 8453-F Multiple Listing should be submitted on the same medium as the original return or on paper.

If the filer decides to submit the Multiple Listing on the same medium as the original return, the transmission must accompany a copy of the listing on paper.

The following is the format for the paper listing:

DATE : 04-12-2001
PAGE #: 001
ETIN: 521234
TELEPHONE (508) 123-4567

MULTIPLE TAX RETURN LISTING
FOR FORM 8453-F

NAME and TITLE of FIDUCIARY: John Jones, Pres.

EIN	NAME CONT	TAX PERIOD	TOTAL INCOME	INCOME DIST	TAXABLE INCOME	TOTAL TAX	TAX DUE / OVRPYMNT
16-9999991	SMIT	XXXX12	32,779.00	32,779.00	0	0	0
16-9999992	GREE	XXXX12	20,908.00	20,908.00	0	0	0
16-9999993	DOWN	XXXX12	2,500.00	2,500.00	0	0	0
16-9999994	BART	XXXX12	10,117.00	10,117.00	0	0	0
16-9999995	PAST	XXXX12	889.00	889.00	0	0	0
16-9999996	WOOD	XXXX12	232,155.00	232,155.00	0	0	0

EXHIBIT 6.1

The following is the format for mag media submissions:

1. Transmittal record (This record identifies the transmitter and the associated 1041 return tape reel file).
2. Signature records (Each record contains corresponding taxpayer's information from the 1041 return tape file.)
3. Recap record (This record contains the tape recap information.)

TRANS Record

<u>Identification</u>	<u>Length</u>	<u>Char Desc</u>	<u>Format</u>
Byte Count	4	1 - 4	"0100"
Start of Record Sentinel	4	5 - 8	Value = "****"
Record Name	5	9 - 13	Value = "TRANS"
Transmitter's EIN	9	14 - 22	Numeric
Transmitter's Name	35	23 - 57	Alphanumeric
Julian Date of Transmission	3	58 - 60	Numeric
Trans Sequence Number of Julian Date	2	61 - 62	Numeric
Electronic Transmitter's Identification Number Plus Filer's User Code	8	63 - 70	Numeric Value = NNNNNNnn, NNNNNN = ETIN, **nn = Transmitters User Code; may zero fill
** Note: "nn" value assigned by transmitter to identify branch office with the same ETIN, EIN and Transmission Date.			
Report Title	27	71 - 97	Value = "8453-F FOR MULTIPLE RETURNS"
Filler	2	98 - 99	Numeric
Record Terminus Char	1	100	"#"

EXHIBIT 6.2

8453-F Signature Record

<u>Identification</u>	<u>Length</u>	<u>Char Desc</u>	<u>Format</u>
Byte Count	4	1 - 4	"0182"
Start of Record Sentinel	4	5 - 8	Value = "*****"
Record Name	6	9 - 14	Value = "8453-F"
Name of Estate or Trust	35	15 - 49	Alphanumeric (Field #0060 on Form 1041)
Name of Estate or Trust Fiduciary	35	50 - 84	Alphanumeric (Field #0080 on Form 1041)
EIN	9	85 - 93	Numeric (Field #0040 on Form 1041)
Name Control	4	94 - 97	Alphanumeric (Field #0030 on Form 1041)
Fiscal Year Beginning	8	98 - 105	Numeric YYYYMMDD (Field #0010 on Form 1041, If Calendar then Blank)
Fiscal Year Ending	8	106 - 113	Numeric YYYYMMDD (Field #0020 on Form 1041, If Calendar then Blank)
Tax Period	6	114 - 119	Numeric YYYYMM
Total Income	12	120 - 131	Numeric (Field #0400 on Form 1041)
Income Distribution	12	132 - 143	Numeric (Field #0530 on Form 1041)
Taxable Income of Fiduciary	12	144 - 155	Numeric (Field #0580 on Form 1041)
Total Tax	12	156 - 167	Numeric (Field #0590 on Form 1041)
Tax Due or Overpayment	12	168 - 179	Numeric (Field #0780 or #0790 on Form 1041)
Filler	2	180 - 181	Blank
Record Terminus Char	1	182	"#"

EXHIBIT 6.3

8453-F RECAP Record

<u>Identification</u>	<u>Length</u>	<u>Char Desc</u>	<u>Format</u>
Byte Count	4	1 - 4	"0028"
Start of Record Sentinel	4	5 - 8	Value = "*****"
Record Name	5	9 - 13	Value = "RECAP"
Electronic Transmitters ID # plus Filer's User Code	8	14 - 21	Numeric Value = NNNNNNnn, NNNNNN = ETIN, nn = Filer's User
Total Number of Signature Records	4	22 - 25	Numeric (Cannot exceed 5000)
Filler	2	26 - 27	Blank
Record Terminus Character	1	28	"#"

EXHIBIT 7

PAPER REMITTANCE REGISTER FOR BALANCE DUE RETURNS

When remittances are sent with balance due Form 1041 returns, special instructions must be followed.

.01 Make all payments for balance due returns by the due date regardless of an extension of time being filed for the return. If the return due date is April 15th, payments must be postmarked by April 15th of that year.

.02 All balance due returns (with or without remittances) must be transmitted separately from returns with no balance due. Remittances may not be split between returns on separate tapes. A maximum of 5,000 balance due returns may be transmitted in one transmission.

.03 Remittances and all appropriate backup material must accompany the magnetic media transmission. A paper check may cover up to 5,000 returns from the same transmission.

.04 Prior to submitting a LIVE paper remittance register, a copy of the paper remittance register must be submitted to the ELF Processing Support Section for review of the registers format.

.05 For each transmission, a Paper Remittance Register document containing information pertaining to the balance due returns transmitted electronically / magnetically, must be submitted in duplicate.

.06 The Paper Remittance Register must be exactly as shown in **Exhibit 7.2**.

.07 The sequence number should begin with 00 thru 99, and then begin again with 00. The register should include subtotals for every 100 documents (or less if fewer than 100 items are included on a page). The last sheet of the register should include subtotals of all the pages. The sum of the subtotals on the last sheet should be equal to the amount on the paper check attached to the register.

EXHIBIT 7.1

PAPER REMITTANCE REGISTER FOR BALANCE DUE RETURNS

<u>Identification</u>	<u>Length</u>	<u>Char Desc</u>	<u>Format</u>
Report Title	27	1 - 27	Value = "BAL DUE-REMITTANCE REGISTER"
Current Date	8	28 - 35	Value = YYYYMMDD
Page Number	3	36 - 38	Numeric
Transmitter's EIN	9	39 - 47	Numeric
Transmitter's Name	35	48 - 82	Alphanumeric
Julian Date of Trans	3	83 - 85	Numeric
Trans Sequence Number of Julian Date	2	86 - 87	Numeric
Electronic Transmitter's ID Number Plus Filer's User Code	8	88 - 95	Numeric Value = NNNNNNnn, NNNNNN=ETIN, **nn = Transmitters User Code; may zero fill

**** Note: "nn" value assigned by transmitter to identify branch office with the same ETIN, EIN and Transmission Date.**

Sequence Number	2	96 - 97	Must increment from 00 - 99
Name Control	4	98 - 101	Alphanumeric
EIN	9	102 - 110	Numeric
Tax Period	6	111 - 116	Numeric
MFT	2	117 - 118	Numeric Value = "05"
Code 1	3	119 - 121	Numeric Value "670"
Tax Due Amount	12	122 - 133	Numeric
M/S Indicator	1	134 - 134	Alpha Character ="S"
Filler	1	135 - 135	Blank
Record Terminus Char	1	136	"#"

EXHIBIT 7.2

REMITTANCE REGISTER

TRANSMITTER'S ETIN: 33333300

1 OF 3

TAPE TRANSMISSION DATE: 04/08/2002

TAPE ID: JULIAN DATE: 098 SEQ NUM FOR JULIAN DATE: 01

<u>SEQ NUM</u>	<u>NAME CTRL</u>	<u>EIN</u>	<u>TAX PD</u>	<u>MFT</u>	<u>CODE 1</u>	<u>TAX DUE</u> <u>AMT</u>	<u>M/S</u> <u>IND</u>
00	KREI	111111111	200112	05	670	\$ 45	S
01	GIOR	111111111	200112	05	670	\$ 35	S
02	MCKE	111111111	200112	05	670	\$ 88	S
03	WIRE	111111111	200112	05	670	\$ 467	S
04	CLAR	111111111	200112	05	670	\$4,552	S
05	BAGL	111111111	200112	05	670	\$ 557	S
06	BLEA	111111111	200112	05	670	\$ 456	S
07	HAGA	111111111	200112	05	670	\$ 885	S
08	BING	111111111	200112	05	670	\$ 45	S
09	LIND	111111111	200112	05	670	\$ 75	S
10	MAYE	111111111	200112	05	670	\$ 18	S
11	SHEP	111111111	200112	05	670	\$ 26	S
12	RIZZ	111111111	200112	05	670	\$ 10	S
13	SMEL	111111111	200112	05	670	\$ 17	S
14	MILL	111111111	200112	05	670	\$ 27	S
15	FEFA	111111111	200112	05	670	\$ 25	S
16	MOHN	111111111	200112	05	670	\$ 36	S
17	ERRA	111111111	200112	05	670	\$ 10	S
18	EWIN	111111111	200112	05	670	\$ 30	S
19	STON	111111111	200112	05	670	\$ 21	S
20	SHAL	111111111	200112	05	670	\$ 11	S
21	PIER	111111111	200112	05	670	\$ 31	S
22	KRAS	111111111	200112	05	670	\$ 33	S
23	SERB	111111111	200112	05	670	\$ 32	S
SUB TOTAL						\$7,532	