2017 TAX RETURN FILING INSTRUCTIONS

U.S. HOMEOWNERS ASSOCIATION INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2017

Prepared For:			
	HUGUENOT HUNDRED COMM c/o WENDY AUSTIN 3951 DARBY DRIVE MIDLOTHIAN, VA 23113	MUNITY ASSOCIATION	
Prepared By:			
	Cherry Bekaert LLP 200 South 10th St., Ste. 900 Richmond, VA 23219 804-673-5700		
To be Signed	and Dated By:		
	The appropriate corporate office	er(s).	
Amount of Tax	(:		
	Total tax Less: payments and credits Plus: interest and penalties No payment required	\$ \$ \$ \$	0 0 0
Overpayment:	Not applicable		
Make Check P	ayable To:		
	Not Applicable		
Mail Tax Retur	n and Check (if applicable) To:		
	Department of the Treasury Internal Revenue Service Cente Cincinnati, OH 45999-0012	r	
Return Must b	e Mailed on or Before:		
	April 17, 2018		
Special Instruc	ctions:		

If applicable, we have enclosed mailing envelopes for your convenience in filing your returns. We recommend that you use certified mail with postmarked receipt for proof of timely filing.

Name

Employer Identification Number

HUGUENOT HUNDRED COMMUNITY ASSOCIATION C/O WENDY AUSTIN

54-1606438

C/O WENDY AUSTIN		34-	L606438
Description	Prior Year	Current Year	Increase (Decrease)
GROSS INCOME:			
INTEREST GROSS INCOME	38. 38.	19. 19.	-19. -19.
DEDUCTIONS:			
OTHER DEDUCTIONS TOTAL DEDUCTIONS	153. 153.	0.	-153. -153.
TAXABLE INCOME:			
TAXABLE INCOME BEFORE SPECIFIC DEDUCTION OF \$100 SPECIFIC DEDUCTION OF \$100 TAXABLE INCOME	-115. 100. -215.	19. 100. -81.	134. 0. 134.
TAX COMPUTATION:			
TAX BEFORE CREDITS	0.	0.	0.
QUALIFIED ELECTRIC VEHICLE CREDIT TAX AFTER CREDITS	0.	0.	0.
TOTAL TAX	0.	0.	0.
PAYMENTS AND CREDITS:			
BALANCE DUE OR REFUND:			

***** THIS IS NOT A FILEABLE COPY *****

Form 8879-C

IRS e-file Signature Authorization for Form 1120

OMB	No.	1545-0	123

Department of the Treasury Internal Revenue Service

For calendar year 2017, or tax year beginning , 2017, ending Do not send to the IRS. Keep for your records.

2017

► Go to www.irs.gov/Form8879C for the latest information.

Name of corporation HUGUENOT HUNDRED COMMUNITY ASSOCIATION	Employer	identification number
C/O WENDY AUSTIN	54-1	606438
Part I Tax Return Information (Whole dollars only)		
1 Total income (Form 1120, line 11)	1	6,729.
2 Taxable income (Form 1120, line 30)	2	-81.
3 Total tax (Form 1120, line 31)	3	
4 Amount owed (Form 1120, line 34)	4	
5 Overpayment (Form 1120, line 35)	. 5	
Part II Declaration and Signature Authorization of Officer. Be sure to get a copy of	he cor	poration's return.
income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is trudeclare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in project the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the first the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic importance.	IRS and ocessing to electronic poration? U.S. Treamancial in and reso	I. I consent to allow my to receive from the the return or refund, and ic funds withdrawal is federal taxes owed asury Financial institutions involved blve issues related to
Officer's PIN: check one box only X I authorize CHERRY BEKAERT LLP	o enter m	ny PIN 99045
ERO firm name as my signature on the corporation's 2017 electronically filed income tax return.		do not enter all zeros
As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2017 electronical	filed inco	ome tax return.
Officer's stightature ■ HIS IS NOT A FILEABLE COPY Date ► TRI	ASUR	ER
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 54567899063 do not enter all zeros		
certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed income tax returns above. I confirm that I am submitting this return in accordance with the requirements of Pub. 3112, IRS e-file Applicant Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.		
ERO's signature Date		

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form 8879-C (2017)

LHA

U.S. Income Tax Return for Homeowners Associations OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form1120H for instructions and the latest information.

For cal	endar y	year 2017 or tax year beginning			, and endin	The second second			
		Name HUGUENOT HU		MUNITY AS	SOCIAT	ION	Employer ide	ntification	number
TYP	E	C/O WENDY A Number, street, and room or suite no.					F4 16	06426	
OR PRII	ΝΤ			ictions.			54-16 Date associat		
FAII	N I	3951 DARBY City or town, state or province, countr		stal code			Date associat	ion tormet	ı
1		MIDLOTHIAN,					06/08	/1070	0
Chack	if: (1)		Name change	(3)	Addraga	change	(4)		
		type of homeowners association:		- \-					nended return Timeshare association
		xempt function income. Must me						- D	
C	Total e	xpenditures made for purposes de	scribed in 90% exn	enditure test	SEE S	TATEMI	ENT 2		4,823.
		ation's total expenditures for the ta							4,823.
E	Tax-ex	empt interest received or accrued	during the tax year					E	0.
			Gross	Income (excluding	g exempt fund	ction income)		
1	Divider	nds						. 1	
2	Taxable	e interest			SEE S'	TATEM	ENT 3	2	19.
		rents						. 3	
4	Gross	royalties						. 4	
		gain net income (attach Schedule							
		n or (loss) from Form 4797, Part I							
		ncome (excluding exempt function							10
_8	Gross	income (excluding exempt functio							19.
-	0.1.			ed to the production o					
		s and wages							
		s and maintenance							
		and lineages							
		and licenses							
		t (attach Form 4562)							
		iation (attach Form 4562)							
		leductions (attach statement) eductions. Add lines 9 through 15							0.
17	Taxable	income before specific deduction	of \$100 Subtract	line 16 from line 8				17	1.0
	0,000	c deduction of \$100		Tax and Pa	yments				
		e income. Subtract line 18 from li							-81.
20	Enter 3	0% (0.30) of line 19. (Timeshare a	ssociations, enter 3	32% (0.32) of line 19.))			20	0.
		dits							
		ax. Subtract line 21 from line 20.							0.
23	a 201	6 overpayment credited to 2017	23a						
	b 201	7 estimated tax payments	23b	с	Total 23	Bc		0.	
		deposited with Form 7004			23			_	
		dit for tax paid on undistributed ca				_		_	
1		dit for federal tax paid on fuels (att	ach Form 4136)		23	Bf			0
	•							23g	0.
		t owed. Subtract line 23g from lin		ns				24	
		yment. Subtract line 22 from line	• • • • • • • • • • • • • • • • • • • •				Defunded b	25	
26		mount of line 25 you want; Credit ender penalties of perjury, I declare that I h			ng schedules and	1 statements a	Refunded >		
	ar	nd belief, it is true, correct, and complete.							May the IRS discuss this
Sign	1 10			1	► TRE	ASURE	R		return with the preparer shown below (see instr.)?
Here		Signature of officer		Date	Title	OILE			X Yes No
	Pi	rint/Type preparer's name	Prepr	arer's signature	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date		Check	PTIN
								if self- employed	
Paid		irm's name						Firm's EIN	>
Prepar	er's								
Use On	l ly	irm's address						Phone no.	
710591	11.87	A Fra Danamada Daduation Ant	Mada sassas	at Instructions					Form 1120-H (2017)

FORM 1120-H EXEMPT FUNCTION INCO	ME	STATEMENT 1
DESCRIPTION		AMOUNT
HOA MEMBERSHIP DUES		6,710.
TOTAL TO FORM 1120-H, ITEM B		6,710.
FORM 1120-H EXPENDITURES DESCRIBED IN	90% TEST	STATEMENT 2
DESCRIPTION		AMOUNT
ALLOCABLE ADMINISTRATIVE INSURANCE KEYS		1,645.
MAINTENANCE		614.
OTHER PORTOPOTTY RENTAL		347. 544.
REAL ESTATE TAX		1,673.
TOTAL TO FORM 1120-H, ITEM C		4,823.
FORM 1120-H INTEREST INCOME		STATEMENT 3
DESCRIPTION	US	OTHER
UNION BANK		19.
TOTAL TO FORM 1120-H, LINE 2	,	19.

2017 TAX RETURN FILING INSTRUCTIONS

VIRGINIA FORM 500

FOR THE YEAR ENDING

December 31, 2017

Prepared For:			
	HUGUENOT HUNDRED CO c/o WENDY AUSTIN 3951 DARBY DRIVE MIDLOTHIAN, VA 23113	MMUNITY ASSO	OCIATION
Prepared By:			
	Cherry Bekaert LLP 200 South 10th St., Ste. 900 Richmond, VA 23219 804-673-5700		
To Be Signed	and Dated By:		
	The appropriate corporate of	ficer(s).	
Amount of Tax	c :		
	Total tax Less: payments and credits Plus: other amount Plus: interest and penalties No payment required	\$	0 0 0 0
Overpayment:	Not applicable		
Make Check P	ayable to:		
	Not applicable		
Mail Tax Retur	n and Check (if applicable) t	:0:	
	This return has been prepare VADOT, please sign, date an return to the VADOT. Do not	d return VA-887	iling. If you wish to have it transmitted to the 9C to our office. We will then submit the by of the return.
Return Must b	e Mailed On or Before:		
	Return VA-8879C to us by Ap	oril 16, 2018.	
Special Instru	ctions:		

If applicable, we have enclosed mailing envelopes for your convenience in filing your returns. We recommend that you use certified mail with postmarked receipt for proof of timely filing.

Form 500

Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

2017 Virginia Corporation Income Tax Return



	tronically. Use this form only if you have an approve ; Ending Date			Official Use	Only
Short Year Return Change in Accounting					
By checking the box to the right, I (we) authorize	•	undersigned	preparer.	$\rightarrow X$	
FEIN					
54-1606438			Chec	ck all that apply:	
Name				Initial Filer	
HUGUENOT HUNDRED COMMUNI	TTY ASSOCIATION			Name Change	
C/O WENDY AUSTIN				Mailing Addres	s Change
Mailing Address				Physical Addre	ss Change
3951 DARBY DRIVE				State ZIP Code	
City or Town					2
MIDLOTHIAN Physical Address (if different from Mailing Address)			Entity	VA 2311 Type Code	3
Physical Address (if different from Mailing Address)			Entity	Type Code	
Physical City or Town		State ZI	P Code	NAICS	
				5313	0.0
Date Incorporated State or Country of Incorporation	Description of Business Activity			3313	30
06/08/1978 VIRGINIA					
		T		21	ZUZZLANI TROKILLANI. A
Check Applicable Boxes	Final Return	Cor	rporate Tek	ecommunication	Company
Consolidated - Sch. 500AC Enclosed	Final Return - Check here and applicate	ole Ente	r amount fro	om Form 500T, Lir	ne 7:
Combined - Sch. 500AC Enclosed	boxes below.	Litto	amount no	o r o o o o r, =	.00
Change in Filing Status	Withdrawn			Pelecommunicat	
Multistate Sch. 500A Enclosed	Dissolved - No longer liable for tax.	1. 11 2000	0-180 × 11, 10-24	heck box and ente	
Schedule 500AB Enclosed	Dissolved Date	- 70,500		orm 500T, Line 10	
Nonprofit Corporation	Merged				.00
	Merger Date	Ele	etric Suppl	or Congany	
Enter number of affiliates	Merged FEIN #	_	r amount fro	om Sch. 500EL, Li	ne 7 or 14:
	S Corp Effective				.00
Amended Return	Amended Return - Check here a	nd	Nonrefun	dable or Refunda	ble
Complete Form 500 and Schedule 500ADJ.	other applicable boxes.		Credit Ch	ange	
Enclose an explanation of changes to income and modifications.	Federal Audit - Enclose		7	500AB Changes	
and modifications.	copy of IRS final determination.		1	oss Carryback	
DO NOT FILE THIS FORM TO CARRY BAC	_		Other - En	close explanation	
NET OPERATING LOSS. File Form 500NOL	D. Schedule 500ADJ Changes				
Questions and Related Information					
	and the state of t	d and the fami	:		
A Have you made any payments to an affiliated					
related to intangible property (patents, traden	narks, copyrights, and similar intangible propert Enter Exception amount from Sched				.00
B DESERVED FOR ELITIDE LISE	Enter exception amount from Sched	ule SOUAD,		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
B RESERVED FOR FUTURE USE. C If a net operating loss deduction was claimed	in computing federal taxable income on the	(1) Ye	ar of loss	***************************************	
U.S. Corporation Income Tax Return, provide		. ,	deral NOL		.00
	y generating the NOL prior to the merger date.		ercent of fed		
	y generating the NOL phot to the morger date.		OL used this		%
FEIN	a schedule for each year with the information request				
D If Pass-Through Entity Withholding is claimed			,		
VK-1 and complete and enclose Schedule 50				D	
E Has your federal income tax liability been red		or year(s) tha	at		
has not previously been reported to the Depa		,(2)		Year	
F Location of corporation's books	, , , , , , , , , , , , , , , , , , , ,			Year	
Contact for corporation's books	Contact	phone num	ber		

2017 Virginia Form 500

Page 2

FEIN 54-1606438



NGOME		
Federal taxable income (from enclosed federal return)	1.	-81 .00
Total additions from Schedule 500ADJ, Section A, Line 7		.00
3. Total (add Lines 1 and 2)		-81 .00
Total subtractions from Schedule 500ADJ, Section B, Line 10		.00
5. Balance (subtract Line 4 from Line 3)		-81 .00
6. Savings and Loan Association's Bad Debt Deduction (see instructions)		.00
7. Virginia taxable income (subtract Line 6 from Line 5)		-81 .00
TAX COMPUTATION		
8. Multistate Corporation - If business conducted within and without Virginia (Multistate Corporation), enclose		
Schedule 500A and complete Lines 8(a) through 8(d). If entire business conducted in Virginia, skip to Line 9.		
(a) Income subject to Virginia tax from Schedule 500A, Section B, Line 3(j)	, 8(a)	.00
(b) Apportionment factor percentage from Schedule 500A, Section B, Line 1 or Line 2(g)	8(b)	%
(c) Nonapportionable investment function income from Schedule 500A, Section B, Line 3(c)	8(c)	.00
(d) Nonapportionable investment function loss from Schedule 500A, Section B, Line 3(e)	8(d)	.00
9. Income tax (6% of Line 7 or 6% of Line 8(a))	9.	0 .00
PAYMENTS AND CREDITS		
10. Nonrefundable tax credits: Enter the amount from Schedule 500CR, Section 2, Part 1, Line 1B	10.	.00
11. Adjusted corporate tax (subtract Line 10 from Line 9)	, 11.	.00
12. 2017 estimated Virginia income tax payments including overpayment credit from 2016		.00
13. Extension payment	13.	.00
14. Refundable tax credits from Schedule 500CR, Section 4, Part 1, Line 1A		.00
15. Pass-through entity total withholding from Schedule 500ADJ, Section D	15.	.00
16. Total payments and credits (add Lines 12 through 15)	, 16.	.00
RESUNDIOR TAX DUE		
17. Tax owed (if Line 11 is greater than Line 16, subtract Line 16 from Line 11)		.00
18. Penalty (see instructions)	18.	.00
19. Interest (see instructions)	19.	.00
20. Additional charge from Form 500C, Line 17 (enclose Form 500C)	20.	.00
21. Total due (add Lines 17 through 20)	, 21.	.00
22. Overpayment (if Line 16 is greater than Line 11, subtract Line 11 from Line 16)	22.	.00
23. Amount to be credited to 2018 estimated tax	23.	.00
24. Amount to be refunded (subtract Line 23 from Line 22)	24.	.00
, the undersigned president, vice-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly authorized to act on behalf of the or under the penalties provided by law that this return (including any accompanying schedules and statements) has been examined by me and is, to the best complete return, made in good faith, for the taxable year stated, pursuant to the income tax laws of the Commonwealth of Virginia. If prepared by a person passed on all information of which he or she has any knowledge.	t of my knowledge and b	elief, a true, correct, and

Date Signature of Officer Title
TREASURER

Printed Name of Officer Phone Number

Print Preparer's Name and Firm Name Preparer

Date Individual or Firm, Signature of Preparer Address of Preparer

Preparer's FEIN, PTIN, or SSN

Approved Vendor Code

1019

IMPORTANT: INCLUDE A COPY OF YOUR FEDERAL RETURN WITH THIS RETURN

2017 Virginia Schedule 500FED

Schedule of Federal Line Items



Enclose Schedule 500FED with your Virginia Corporation Income Tax Return, Form 500.

Schedule 500FED does not replace the requirement to enclose a complete federal Form 1120 with your Virginia return.

Name as shown on Virginia return HUGUENOT HUNDRED COMMUNITY ASSOCIATION FEIN 54-1606438 Form 1120 - Deductions and Taxable Income Domestic Production Activities Deduction00 Federal Taxable Income before NOL and Special Deductions .00 3. Net Operating Loss Deduction .00 .00 4. Special Deductions 5. Federal Taxable Income after NOL and Special Deductions .00 Form 1120, Schedule C - Dividends and Special Deductions 6. Subpart F Income 6. .00 7. Foreign Dividend Gross-Up .00 Form 1120, Schedule K or M-3 8. Tax Exempt Interest .00 THE PROPERTY OF THE PROPERTY O 9. Salaries and Wages not deducted due to the WOTC Form 4562 - Special Depreciation Allowance and Other Depreciation 10. Special depreciation allowance for qualified property placed in service during the .00 11. Property subject to 168(f)(1) election .00 .00 12. Other depreciation Form 1118, Schedule A - Income or Loss Before Adjustments - Gross Income or Loss 13. Total: Deemed Dividends (Exclude Gross-up) .00 .00 14. Total: Deemed Dividend (Gross-up) .00 15. Total: Other Dividends (Exclude Gross-up) 16. Total: Other Dividends (Gross-up) .00 .00 18. Total: Gross Rents, Royalties, and License Fees .00 .00 19. Total: Gross Income from Performance of Services 20 Total: Other 20. .00 .00 21. Total: Total Gross Income or Loss from Outside the US 21. Form 1118, Schedule A - Income or Loss Before Adjustments - Deductions 22. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses -.00 Depreciation, Depletion, and Amortization .00 23. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses - Other Expenses 24. Total: Definitely Allocable - Expenses Related to Gross Income from Performance of Services .00 25. Total: Definitely Allocable - Other Definitely Allocable Deductions .00 26. Total: Total Definitely Allocable Deductions .00 27. Total: Apportioned Share of Deductions not Definitely Allocable .00 .00 28. Total: Net Operating Loss Deduction .00 29. Total: Total Deductions Form 1118, Schedule A - Income or Loss Before Adjustments - Total Income 30. Total: Total Income or (Loss) Before Adjustments

VA-8879C

Virginia Department of Taxation

Virginia Corporation Income Tax e-file Signature Authorization

Tax Year 2017

DO NOT SEND THIS VA-8879C TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Corporation Name	Federal ID Number
	factorial and the
UGUENOT HUNDRED COMMUNITY ASSOCIATION C/O WENDY AUS	54-1606438
Part I Tax Return Information	
1. Federal Taxable Income (Form 500, Page 2, Line 1)	181.
2. Virginia Taxable Income (Form 500, Page 2, Line 7)	281.
3. Income tax (Form 500, Page 2, Line 9)	3.
4. Total payments and credits (Form 500, Page 2, Line 16)	4.
5. Total due (Form 500, Page 2, Line 21)	5.
6. Amount to be refunded (Form 500, Page 2, Line 24)	6.
Part II Declaration and Signature Authorization of Officer	
return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, that the information provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service in Part I above agrees with the information and amounts shown on the corresponding lines of the corporate balance due return, I authorize the Virginia Department of Taxation (Virginia Tax) and its designated Financia funds withdrawal entry to the financial institution account indicated on the 2017 Virginia income tax return freturn. I also authorize the financial institutions involved in the processing of the electronic payment of taxes necessary to answer inquiries and resolve issues related to the payment. I certify that the transaction does no outside of the territorial jurisdiction of the United States at any point in the process. I understand that if Virginia Tax does not receive full and timely payment of the tax liability, the corporation all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to trail have selected a personal identification number (PIN) as my signature for the corporation's electronic incommodification income tax return. Officer's e-File PIN: check one box only I authorize the ERO named below to enter my e-File PIN 99045 Do not enter all zeros as my signature on the concorporation income tax return.	Provider including the amounts shown electronic income tax return. If filing a all Agent to initiate an ACH electronic or payment of state taxes owed on this is to receive confidential information not directly involve a financial institution will remain liable for the tax liability and insmit the complete return to Virginia Tax.
I will enter my e-File PIN as my signature on the corporation's 2017 electronic Virginia corporation ir if you are entering your own e-File PIN and the return is filed using the Practitioner PIN method. The Your Signature	
Part III Certification and Authentication	
ERO's EFIN/PIN: Enter your six digit EFIN followed by your five digit self-selected PIN. 545678990 Do not enter all ze	
I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2017 Virginia corpo	pration income tax return for the
corporation indicated above. I confirm that I am submitting this return in accordance with the requirements	
have followed all other requirements as specified by Virginia Tax. ERO's may sign the form using a rubber s	
a signature pen, or computer software program.	
ERO's Signature	Date
	Form VA-8879C (REV 08/17)

OMB# 1545-0112 Page 1 12/31/17 Federal ID 800463989

RETURN SERVICE REQUESTED 060073 - 000074 - 001 H801 99I

RECIPIENT'S name and address **HUGUENOT HUNDRED COMMUNITY** 3951 DARBY DR **MIDLOTHIAN VA 23113-1320**

FATCA filing requirement NO

Tax ID XXXXX6438 Recipient Statement Form 1099-INT (Copy B For Recipient) For Tax Year 2017 Interest Income

Year-end Summary

Interest Inc Erly Wd Penalty Account Fed Tax W/H Type Number Investmt Exp TE Interest SPA Bond Int Market Disc Bond Premium BP on Trs Obl BP on TE Bond St Tax W/H 1 St Tax W/H 2 TIME DEPOSITS 7700054030 19.17 (1) .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00

INTEREST Reported to the Internal Revenue Service for 2017

The state of the s		
Interest on U.S. Savings Bonds and Treas. obligations FEDERAL INCOME TAX WITHHELD Investment expenses Foreign tax paid Foreign country or U.S. possession Tax-exempt interest Specified private activity bond interest Market discount	(Box 1) 1 (Box 2) (Box 3) (Box 4) (Box 5) (Box 6) (Box 7) (Box 8) (Box 9) (Box 10)	19.17 .00 .00 .00 .00
Bond premium Bond premium on Treasury obligations Bond premium on tax-exempt bond	(Box 11) (Box 12) (Box 13) (Box 14) State tax w	.00

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.



