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**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortonham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 APR -4 PM 7:01**

**DOCUMENT # P94000064562 (9)**

1. Corporation Name  
**BRANDVOLD APPRAISAL ASSOCIATES, P.A.**

Principal Place of Business      Mailing Address  
**127 MOCKINGBIRD LANE      127 MOCKINGBIRD LANE  
MARATHON FL 33050      MARATHON FL 33050**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**08/29/1994**

4. FEI Number      Applied For  
**65-0526785**      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Election Campaign Financing       **\$5.00 May Be Added to Fees**

7. Trust Fund Contribution     

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes       Yes       No

2. Principal Place of Business      2a. Mailing Address

21      26

Suite, Apt. #, etc.      Suite, Apt. #, etc.

22      27

City & State      City & State

23      28

Zip      Country      Zip      Country

24      25      29      30

9. Name and Address of Current Registered Agent

**GREENMAN, FRANKLIN D  
5800 OVERSEAS HIGHWAY  
SUITE 40  
MARATHON FL 33050**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City      FL      85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Maria Brandvold

DATE: 3/30/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>D</b>
NAME	<b>BRANDVOLD, MARIA A</b>
STREET ADDRESS	<b>P.O. BOX 501524 N/A</b>
CITY - ST - ZIP	<b>MARATHON FL 33050</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Maria Brandvold, President      3/30/95      305-289-  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      (Type)      (Typed Name)  
**MARIA BRANDVOLD**      **7220**

P. 2051  
AJT BRANDFL. S94  
Form 1120S

**U.S. Income Tax Return for an S Corporation**

OMB No. 1545-0130

Department of Treasury  
Internal Rev. Service

Do not file this form unless the corporation has timely filed  
Form 2543 to elect to be an S corporation.

**1994**

See separate instructions.

For calendar year 1994, or tax year beginning

1994, & end.

19

<b>A</b> Date of election as an S corporation 11/01/94	Use IRS label. Otherwise, please print or type.	Name <b>BRANDVOLD APPRAISAL ASSOCIATES, PA</b>	Number, street, & room/suite no. <b>PO BOX 1524</b>	City/town, state, & ZIP code <b>MARATHON, FL 33050</b>	<b>C</b> Employer identification no. <b>65-0526785</b>
<b>B</b> Business code no. (see Specific Inst.) 8980					<b>D</b> Date incorporated <b>09/01/94</b>
					<b>E</b> Total assets (see Specific Inst.) <b>15,512.</b>

**F** Check applicable boxes: (1)  Initial return (2)  Final return (3)  Change in address (4)  Amended return

**G** Check this box if this S corp. is subject to the consolidated audit procedures of sec. 6241 through 6245 (see inst. before checking this box)

**H** Enter number of shareholders in the corporation at end of the tax year **1**

Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	<b>1a</b> Gross receipts/sales <b>500.</b>	<b>b</b> Less rtms. & allowances	<b>1c</b> <b>500.</b>
	<b>2</b> Cost of goods sold (Schedule A, line 8)		<b>2</b>
	<b>3</b> Gross profit. Subtract line 2 from line 1c		<b>3</b> <b>500.</b>
	<b>4</b> Net gain (loss) from Form 4797, Part II, line 20 (attach Form 4797)		<b>4</b>
	<b>5</b> Other income (loss) (see instructions) (attach schedule)		<b>5</b>
	<b>6</b> Total income (loss). Combine lines 3 through 5		<b>6</b> <b>500.</b>
Deductions (See instructions for limitations.)	<b>7</b> Compensation of officers		<b>7</b>
	<b>8</b> Salaries and wages (less employment credits)		<b>8</b>
	<b>9</b> Repairs and maintenance		<b>9</b> <b>80.</b>
	<b>10</b> Bad debts		<b>10</b>
	<b>11</b> Rents		<b>11</b>
	<b>12</b> Taxes and licenses		<b>12</b>
	<b>13</b> Interest		<b>13</b> <b>39.</b>
	<b>14a</b> Depreciation (see instructions)	<b>14a</b>	
	<b>b</b> Depreciation claimed on Schedule A and elsewhere on return	<b>14b</b>	
	<b>c</b> Subtract line 14b from line 14a		<b>14c</b>
	<b>15</b> Depletion (Do not deduct oil and gas depletion.)		<b>15</b>
	<b>16</b> Advertising		<b>16</b>
	<b>17</b> Pension, profit-sharing, etc., plans		<b>17</b>
	<b>18</b> Employee benefit programs		<b>18</b>
	<b>19</b> Other deductions (see instructions) (attach schedule)		<b>19</b> <b>4,204.</b>
<b>20</b> Total deductions. Add the amounts shown in the far right column for lines 7 through 19		<b>20</b> <b>4,323.</b>	
<b>21</b> Ordinary income (loss) from trade or business activities. Subtract line 20 from line 6		<b>21</b> <b>(3,823.)</b>	
Tax and Payments	<b>22</b> Tax: <b>a</b> Excess net passive income tax (attach schedule)	<b>22a</b>	
	<b>b</b> Tax from Schedule D (Form 1120S)	<b>22b</b>	
	<b>c</b> Add lines 22a and 22b (see instructions for additional taxes)		<b>22c</b>
	<b>23</b> Payments: <b>a</b> 1994 estimated tax payments and amount applied from 1993 return	<b>23a</b>	
	<b>b</b> Tax deposited with Form 7004	<b>23b</b>	
	<b>c</b> Credit for Federal tax paid on fuels (attach Form 4136)	<b>23c</b>	
	<b>d</b> Add lines 23a through 23c		<b>23d</b>
	<b>24</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		<b>24</b>
	<b>25</b> Tax due. If the total of lines 22c and 24 is larger than line 23d, enter amount owed. See instructions for depository method of payment		<b>25</b>
	<b>26</b> Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid		<b>26</b>
<b>27</b> Enter amount of line 26 you want: Credited to 1995 est. tax <input type="checkbox"/> Refunded <input type="checkbox"/>		<b>27</b>	

**Please Sign Here**

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. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

*Maria Brandvold* Signature of officer      Date      **PRESIDENT** Title

<b>Paid Preparer's Use Only</b>	Preparer's signature	Date 03/22/95	Check if self-employed <input type="checkbox"/>	Preparer's SSN 313-52-0297
	Firm's name (or yours if self-employed) and address <b>ALAN J TREETER CPA, CMA, PA PO BOX 8273 GREENWOOD, SC</b>	E.I. No. <b>57-0967159</b>	ZIP code <b>29648</b>	

**Schedule A** Cost of Goods Sold (See instructions.)

1	Inventory at beginning of year	1
2	Purchases	2
3	Cost of labor	3
4	Additional section 263A costs (see instructions) (attach schedule)	4
5	Other costs (attach schedule)	5
6	Total. Add lines 1 through 5	6
7	Inventory at end of year	7
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2.	8

9a Check all methods used for valuing closing inventory:

- (i)  Cost
- (ii)  Lower of cost or market as described in Regulations section 1.471-4
- (iii)  Writedown of "subnormal" goods as described in Regulations section 1.471-2(c)
- (iv)  Other (specify method used and attach explanation) ▶

b Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) .....

c If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO ..... 9c

d Do the rules of section 263A (for property produced or acquired for resale) apply to the corporation? .....  Yes  No

e Was there any change in determining quantities, cost, or valuations between opening and closing inventory? .....  Yes  No  
If "Yes," attach explanation.

**Schedule B** Other Information

	Yes	No
1 Check method of accounting: (a) <input checked="" type="checkbox"/> Cash (b) <input type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) ▶		
2 Refer to the list in the instructions and state the corporation's principal: (a) Business activity ▶ <u>SERVICE</u> (b) Product or service ▶ <u>APPRAISAL</u>		
3 Did the corporation at the end of the tax year own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) If "Yes," attach a schedule showing: (a) name, address, and employer identification number and (b) percentage owned		X
4 Was the corporation a member of a controlled group subject to the provisions of section 1561?		X
5 At any time during calendar year 1994, did the corporation have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See instructions for exceptions and filing requirements for Form TD F 90-22.1.) If "Yes," enter the name of the foreign country ▶		X
6 Was the corporation the grantor of, or transferor to, a foreign trust that existed during the current tax year, whether or not the corporation has any beneficial interest in it? If "Yes," the corporation may have to file Forms 3520, 3520-A, or 926		X
7 Check this box if the corporation has filed or is required to file Form 8264, Application for Registration of a Tax Shelter		<input type="checkbox"/>
8 Check this box if the corporation issued publicly offered debt instruments with original issue discount. If so, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.		<input type="checkbox"/>
9 If the corporation: (a) filed its election to be an S corporation after 1986, (b) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to its basis (or the basis of any other property) in the hands of a C corporation, and (c) has net unrealized built-in gain (defined in section 1374(d)(1)) in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) ..... ▶		
10 Check this box if the corporation had subchapter C earnings and profits at the close of the tax year (see instructions) ..... ▶		<input type="checkbox"/>

**Designation of Tax Matters Person** (See instructions.)

Enter below the shareholder designated as the tax matters person (TMP) for the tax year of this return:

Name of designated TMP ▶ MARIA BRANDVOLD Identifying number of TMP ▶ 263-55-6530

Address of designated TMP ▶ PO BOX 1524  
MARATHON FL 33050

Schedule K Shareholders' Shares of Income, Credits, Deductions, etc.

		(a) Pro rata share items	(b) Total amount	
Income (Loss)	1	Ordinary income (loss) from trade or business activities (page 1, line 21)	1	(3,823.)
	2	Net income (loss) from rental real estate activities (attach Form 8625)	2	
	3a	Gross income from other rental activities	3a	
	b	Expenses from other rental activities (attach schedule)	3b	
	c	Net income (loss) from other rental activities. Subtract line 3b from line 3a	3c	
	4	Portfolio income (loss):		
	a	Interest income	4a	
	b	Dividend income	4b	
	c	Royalty income	4c	
	d	Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	4d	
e	Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	4e		
f	Other portfolio income (loss) (attach schedule)	4f		
5	Net gain (loss) under section 1231 (other than due to casualty or theft) (attach Form 4797)	5		
6	Other income (loss) (attach schedule)	6		
Deductions	7	Charitable contributions (see instructions) (attach schedule)	7	
	8	Section 179 expense deduction (attach Form 4562)	8	
	9	Deductions related to portfolio income (loss) (see instructions) (itemize)	9	
	10	Other deductions (attach schedule)	10	
Investment Interest	11a	Interest expense on investment debts	11a	
	b (1)	Investment income included on lines 4a, 4b, 4c, and 4f above	11b(1)	
	(2)	Investment expenses included on line 9 above	11b(2)	
Credits	12a	Credit for alcohol used as a fuel (attach Form 6478)	12a	
	b	Low-income housing credit (see instructions):		
	(1)	From partnerships to which sec. 42(j)(5) applies for property placed in service before 1990	12b(1)	
	(2)	Other than on line 12b(1) for property placed in service before 1990	12b(2)	
	(3)	From partnerships to which section 42(j)(5) applies for property placed in service after 1989	12b(3)	
	(4)	Other than on line 12b(3) for property placed in service after 1989	12b(4)	
	c	Qualified rehabilitation expenditures related to rental real estate activities (attach Form 3468)	12c	
	d	Credits (other than credits shown on lines 12b and 12c) related to rental real estate activities (see instructions)	12d	
e	Credits related to other rental activities (see instructions)	12e		
13	Other credits (see instructions)	13		
Adjustments and Tax Preference Items	14a	Depreciation adjustment on property placed in service after 1986	14a	16.
	b	Adjusted gain or loss	14b	
	c	Depletion (other than oil and gas)	14c	
	d (1)	Gross income from oil, gas, or geothermal properties	14d(1)	
	(2)	Deductions allocable to oil, gas, or geothermal properties	14d(2)	
e	Other adjustments and tax preference items (attach schedule)	14e		
Foreign Taxes	15a	Type of income		
	b	Name of foreign country or U.S. possession		
	c	Total gross income from sources outside the United States (attach schedule)	15c	
	d	Total applicable deductions and losses (attach schedule)	15d	
	e	Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	15e	
	f	Reduction in taxes available for credit (attach schedule)	15f	
	g	Other foreign tax information (attach schedule)	15g	
Other	16a	Total expenditures to which a section 59(e) election may apply	16a	
	b	Type of expenditures		
	17	Tax-exempt interest income	17	
	18	Other tax-exempt income	18	
	19	Nondeductible expenses	19	
	20	Total property distributions (including cash) other than dividends reported on line 22 below	20	
	21	Other items and amounts required to be reported separately to shareholders (see instructions) (attach schedule)		
	22	Total dividend distributions paid from accumulated earnings and profits	22	
	23	Income (loss). (Required only if Schedule M-1 must be completed.) Combine lines 1 through 6 in column (b). From the result, subtract the sum of lines 7 through 11a, 15e, and 16a.	23	(3,823.)

Schedule L	Balance Sheets	Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
<b>Assets</b>					
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. Government obligations				
5	Tax-exempt securities				
6	Other current assets (attach schedule)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach schedule)				
10a	Buildings and other depreciable assets			26,539.	
b	Less accumulated depreciation			11,506.	15,033.
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)			495.	
b	Less accumulated amortization			16.	479.
14	Other assets (attach schedule)				
15	Total assets		0.		15,512.
<b>Liabilities and Shareholders' Equity</b>					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach schedule)				
19	Loans from shareholders				19,235.
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach schedule)				
22	Capital stock				100.
23	Paid-in or capital surplus				
24	Retained earnings				(3,823.)
25	Less cost of treasury stock				
26	Total liabilities and shareholders' equity		0.		15,512.

**Schedule M-1** Reconciliation of Income (Loss) per Books With Income (Loss) per Return (You are not required to complete this schedule if the total assets on line 15, column (d), of Schedule L are less than \$25,000.)

1	Net income (loss) per books	(3,823.)	5	Income recorded on books this year not included on Schedule K, lines 1 through 6 (Itemize):	
2	Income included on Schedule K, lines 1 through 6, not recorded on books this year:		a	Tax-exempt int. \$	
3	Expenses recorded on books this year not included on Schedule K, lines 1 through 11a, 15e, and 16a (Itemize):		6	Deductions included on Schedule K, lines 1 through 11a, 15e, and 16a, not charged against book income this year (Itemize):	
a	Depreciation \$		8	Depreciation \$	
b	Travel and entertainment \$		7	Add lines 5 and 6	
4	Add lines 1 through 3	(3,823.)	8	Income (loss) (Schedule K, line 23). Line 4 less line 7	(3,823.)

**Schedule M-2** Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (See instructions.)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1	Balance at beginning of tax year		
2	Ordinary income from page 1, line 21		
3	Other additions		
4	Loss from page 1, line 21	(3,823.)	
5	Other reductions		
6	Combine lines 1 through 5	(3,823.)	
7	Distributions other than dividend distributions		
8	Balance at end of tax year. Subtract line 7 from line 6	(3,823.)	

DEPRECIATION AND AMORTIZATION

BRANDVOLD APPRAISAL ASSOCIATES, PA

BUSINESS OR ACTIVITY TO WHICH THIS FORM RELATES  
FORM 1120S

PART I ELECTION TO EXPENSE CERTAIN TANGIBLE PROPERTY

- 1 MAXIMUM DOLLAR LIMITATION.....1. \$17,500
- 2 TOTAL SEC. 179 PROPERTY PLACED IN SERVICE THIS TAX YEAR.....2.
- 3 THRESHOLD COST BEFORE REDUCTION IN LIMITATION.....3.
- 4 REDUCTION IN LIMITATION (LINE 2 - 3 BUT NOT < 0).....4.
- 5 DOLLAR LIMIT FOR TAX YEAR (LINE 1 - 4 BUT NOT < 0).....5.
- 6 (A) DESCRIPTION OF PROPERTY (B) COST (C) ELECTED COST
- 7 LISTED PROPERTY - ENTER AMOUNT FROM LINE 26.....7.
- 8 TOTAL ELECTED COST OF SECTION 179 PROPERTY.....8.
- 9 TENTATIVE DEDUCTION. LESSER OF LINE 5 OR 8.....9.
- 10 CARRYOVER OF DISALLOWED DEDUCTION FROM 1993.....10.
- 11 TAXABLE INCOME LIMITATION. TAXABLE INCOME OR LINE 5...11.
- 12 SECTION 179 DEDUCTION (LINES 9 + 10 BUT NOT > LINE 11)12.
- 13 CARRYOVER OF DISALLOWED DEDUCTION TO 1995..13.

PART II MACRS DEPRECIATION

(A) CLASS	(B) DATE PLACED IN SERV.	(C) BASIS	(D) PERIOD	(E) CONV	(F) METHOD	(G) DED.
14 GENERAL DEPRECIATION SYSTEM (GDS)						
(A) 3-YR PROPERTY	XXXXXXXX					
(B) 5-YR PROPERTY	XXXXXXXX					
(C) 7-YR PROPERTY	XXXXXXXX					
(D) 10-YR PROPERTY	XXXXXXXX					
(E) 15-YR PROPERTY	XXXXXXXX					
(F) 20-YR PROPERTY	XXXXXXXX					
(G) RES-RENTAL PROPERTY			27.5	MM	S/L	
(H) NONRES-REAL PROPERTY				MM	S/L	
15 ADS:						
A CLASS LIFE	XXXXXXXX				S/L	
B 12-YEAR	XXXXXXXX		12		S/L	
C 40-YEAR	XXXXXXXX		40	MM	S/L	

PART III OTHER DEPRECIATION

- 16 GDS & ADS DEDUCTION, PLACED IN SERVICE PRIOR TO 1994..16.
- 17 PROPERTY SUBJECT TO SEC. 168(F)(1) ELECTION.....17.
- 18 ACRS AND/OR OTHER DEPRECIATION.....18.

PART IV SUMMARY

- 19 LISTED PROPERTY - ENTER AMOUNT FROM LINE 27.....19.
  - 20 TOTAL (ADD LINES 12, AND 14 THROUGH 19).....20. 0.
  - 21 FOR ASSETS PLACED IN SERVICE DURING THE CURRENT YEAR..21.
- ENTER THE PORTION OF BASIS ATTRIBUTABLE TO SEC 263A COSTS

AJT BRANDVL.894

SCHEDULE K-1  
(FORM 1120S)

SHAREHOLDERS SHARE OF INCOME  
CREDITS, DEDUCTIONS, ETC

1994  
OMB NO. 1545-0130  
EIN 65-0526785

BRANDVOLD APPRAISAL ASSOCIATES, PA  
FOR CALENDAR YEAR BEGINNING

SHAREHOLDERS ID. NUMBER 263-55-6530  
SHAREHOLDER NAME AND ADDRESS

MARIA BRANDVOLD  
PO BOX 1524  
MARATHON FL 33050

ENDING  
CORP. EIN 65-0526785

CORP. NAME AND ADDRESS  
BRANDVOLD APPRAISAL ASSOCIATES, PA  
PO BOX 1524  
MARATHON, FL 33050

A SHAREHOLDER'S PERCENTAGE OF STOCK OWNERSHIP FOR THE TAX YR....100.0000

B IRS CENTER WHERE CORP. FILED ITS RETURN..ATLANTA

C TAX SHELTER REGISTRATION NUMBER.....

D CHECK APPLICABLE: ( ) FINAL K-1 ( ) AMENDED K-1

DISTRIBUTIVE SHARE ITEMS	AMOUNT	
1 ORDINARY INCOME(LOSS) FROM TRADE OR BUSINESS ACTIVITY.....	(3,823.)	SEE SHAREHOLDERS INSTRUCTIONS FOR SCHEDULE K1
2 NET INCOME (LOSS) FROM RENTAL REAL ESTATE ACTIVITY.....		
3 NET INCOME (LOSS) FROM RENTAL ACTIVITY OTHER THAN LINE 2 ABOVE.....		
4 PORTFOLIO INCOME (LOSS)	XXXXXXXXXXXXXX	
A INTEREST.....		SCH B PART I LINE 2
B DIVIDENDS.....		SCH B PART II LINE 4
C ROYALTIES.....		SCH E PART I LINE 5
D NET SHORT-TERM CAPITAL GAIN (LOSS)...		SCH D LINE 5F OR 5G
E NET LONG-TERM CAPITAL GAIN (LOSS)....		SCH D LINE 12F/12G
F OTHER PORTFOLIO INCOME (LOSS).....		(APPLICABLE LINE)
5 NET GAIN (LOSS) UNDER SECTION 1231...		FORM 4797, LINE 1
6 OTHER INCOME (LOSS).....		(APPLICABLE LINE)
7 CHARITABLE CONTRIBUTIONS.....		SCH A, LINE 14 OR 15
8 EXPENSE DEDUCTION FOR SEC. 179 PROP..		SEE SHAREHOLDERS
9 DEDUCTIONS RELATED TO PORTFOLIO.....		INSTRUCTIONS
10 OTHER DEDUCTIONS.....		FOR SCHEDULE K1
11A INTEREST EXPENSE ON INVESTMENT DEBT		FORM 4952 LINE 1
11B1 INVESTMENT INCOME INCLUDED ON SCH. K1 LINES 4A - 4F.....		SEE SHAREHOLDERS INSTRUCTIONS
11B2 INVESTMENT EXPENSE INCLUDED LINE 9.		FOR SCHEDULE K1
12A CREDIT FOR ALCOHOL USED AS A FUEL... B LOW-INCOME HOUSING CREDIT		FORM 6478, LINE 10
(1) FROM SEC 42(J)(5) PARTNERSHIP FOR PRE-1990 PROPERTY.....		
(2) OTHER THAN 12B(1) PROPERTY PLACED IN SERVICE BEFORE 1990.....		FORM 8586, LINE 5
(3) FROM SEC 42(J)(5) PARTNERSHIP FOR POST-1989 PROPERTY.....		
(4) OTHER THAN 12B(3) PROPERTY PLACED IN SERVICE AFTER 1989.....		
12C QUAL REHAB EXPENDITURES RELATED TO RENTAL REAL ESTATE ACTIVITY.....	XXXXXXXXXXXXXX	SEE SHAREHOLDERS INSTRUCTIONS FOR SCHEDULE K1
12D CREDITS RELATED TO RENTAL REAL ESTATE ACTIVITIES.....	XXXXXXXXXXXXXX	
12E CREDITS RELATED TO OTHER RENTAL....		
13 OTHER CREDITS.....		
14A DEPR. ADJUSTMENT ON POST 86 PROPERTY	16.	SEE SHAREHOLDER'S INSTRUCTIONS FOR SCHEDULE K-1 (FORM 1120S) AND FORM 6251 INSTRUCTIONS
14B ADJUSTED GAIN OR LOSS.....		
14C DEPLETION OTHER THAN OIL & GAS.....		
14D1 INCOME, OIL, GAS & GEOTHERMAL PROP.		
14D2 DEDUCTIONS ALLOCABLE TO GAS, ETC...		
14E OTHER ITEMS.....		

.AJT BRANDFL.S94  
SCHEDULE K-1 (CONTINUED) PAGE 2  
(FORM 1120S)  
BRANDVOLD APPRAISAL ASSOCIATES, PA  
MARIA BRANDVOLD

1994  
OMB NO. 1545-0130  
EIN 65-0526785  
263-55-6530

DISTRIBUTIVE SHARE ITEMS	AMOUNT	
15A INCOME TYPE.	XXXXXXXXXXXX	FORM 1116 CHECK BOXES
15B COUNTRY NAME.....	XXXXXXXXXXXX	FORM 1116 PART I
15C GROSS INCOME FROM OUTSIDE US.....		FORM 1116 PART I
15D TOTAL APPLICABLE DEDUCTIONS & LOSSES		FORM 1116 PART I
15E TOTAL FOREIGN TAX ( )PAID ( )ACCRUED		FORM 1116 PART II
15F REDUCTION IN TAX AVAIL. FOR CREDIT..		FORM 1116 PART III
15G OTHER .....		SEE INSTRUCTIONS
16A TOTAL EXPEND. SEC 59(E) ELECTION....		
16B TYPE OF EXPENDITUR		
17 TAX-EXEMPT INTEREST INCOME .....		FORM 1040 LINE 8B
18 OTHER TAX-EXEMPT INCOME.....		
19 NONDEDUCTIBLE EXPENSES.....		
20 PROPERTY DISTRIBUTIONS (NOT 1099-DIV)		SEE SHAREHOLDER'S
21 LOAN REPAYMENTS TO SHAREHOLDERS.....		INSTRUCTIONS
22 LOW INCOME HOUSING CREDIT PARTNERSHIP		FORM 8611
22 B OTHER.....		FORM 8611

23 SUPPLEMENTAL INFORMATION THAT IS REQUIRED TO BE REPORTED

FORM 1120, PAGE 1 SUPPORTING SCHEDULES  
19 OTHER DEDUCTIONS

DESCRIPTION	AMOUNT
PROF FEES	225.00
DUES	217.00
TELEPHONE	999.00
INSURANCE	213.00
POSTAGE	68.00
AUTO EXPENSE	747.00
OFFICE EXPENSE	385.00
MISC	1,334.00
AMORTIZATION	16.00

TOTAL AMOUNT: 4,204.00