

Form **1065**  
Department of the Treasury  
Internal Revenue Service

# U.S. Return of Partnership Income

For calendar year 2010, or tax year beginning \_\_\_\_\_, ending \_\_\_\_\_

OMB No. 1545-0099

**2010**

A Principal business activity

**REAL ESTATE**

B Principal product or service

**RENTAL**

C Business code number

**531120**

Print  
or  
type.

Name of partnership

**160 MADISON AVE JOINT VENTURE**

Number, street, and room or suite no. If a P.O. box, see the instructions.

**160 MADISON AVENUE**

City or town, state, and ZIP code

**NEW YORK**

**NY 10016**

D Employer identification number

**13-3027658**

E Date business started

F Total assets (see the instructions)

**\$ 1,415,781**

G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return  
(6) ☐ Technical termination - also check (1) or (2)

H Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) ▶ \_\_\_\_\_

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year ▶ \_\_\_\_\_

J Check if Schedules C and M-3 are attached \_\_\_\_\_

**Caution.** Include **only** trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

Income	1a	Gross receipts or sales	1c	
	1b	Less returns and allowances	2	
	2	Cost of goods sold (Schedule A, line 8)	3	
	3	Gross profit. Subtract line 2 from line 1c	4	
	4	Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)	5	
	5	Net farm profit (loss) (attach Schedule F (Form 1040))	6	
	6	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)	7	
	7	Other income (loss) (attach statement)	8	
8	<b>Total income (loss).</b> Combine lines 3 through 7		9	
Deductions (see the instructions for limitations)	9	Salaries and wages (other than to partners) (less employment credits)	10	
	10	Guaranteed payments to partners	11	
	11	Repairs and maintenance	12	
	12	Bad debts	13	
	13	Rent	14	
	14	Taxes and licenses	15	
	15	Interest	16a	
	16a	Depreciation (if required, attach Form 4562)	16b	
	16b	Less depreciation reported on Schedule A and elsewhere on return	16c	
	17	Depletion (Do not deduct oil and gas depletion.)	18	
	18	Retirement plans, etc.	19	
	19	Employee benefit programs	20	
	20	Other deductions (attach statement)	21	
	21	<b>Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 20		22
22	<b>Ordinary business income (loss).</b> Subtract line 21 from line 8			

**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 general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.

Signature of general partner or limited liability company member manager

Date

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☒ No

**Paid**

Print/Type preparer's name

Preparer's signature

Date

04/05/11

Check ☒ if self-employed

PTIN

P00447700

**Preparer**

Firm's name ▶ **Cohn & Langer, CPAs**

Firm's EIN ▶

**Use Only**

Firm's address ▶ **18 Blanche St  
Plainview, NY**

**11803-4607**

Phone no. **516-702-3002**

Form **1065** (2010)

For Paperwork Reduction Act Notice, see separate instructions.