

**Form 1040 U.S. Individual Income Tax Return 2015** (99) OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2015, or other tax year beginning		, 2015, ending	, 20	See separate instructions.
Your first name and initial <b>CLAUDE A</b>	Last name <b>SIMON</b>			Your social security number <b>106-50-1158</b>
If a joint return, spouse's first name and initial	Last name			Spouse's social security number <b>149-46-3469</b>
Home address (number and street). If you have a P.O. box, see instructions. <b>71 TONJES ROAD</b>			Apt. no.	▲ Make sure the SSN(s) above and on line 6c are correct.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>CALLICOON NY 12723</b>			Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.	
Foreign country name	Foreign province/state/county	Foreign postal code		<input type="checkbox"/> You <input type="checkbox"/> Spouse
<b>Filing Status</b>	1 <input type="checkbox"/> Single	4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ►		
	2 <input type="checkbox"/> Married filing jointly (even if only one had income)			
Check only one box.	3 <input checked="" type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ► <b>CAROLYN</b>	5 <input type="checkbox"/> Qualifying widow(er) with dependent child <b>SIMON</b>		
<b>Exemptions</b>	6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	} Boxes checked on 6a and 6b No. of children on 6c who: ● lived with you		1
b <input type="checkbox"/> Spouse	c Dependents:			2
If more than four dependents, see instructions and check here ►	(1) First name <b>CHARLES A</b> (2) Last name <b>SIMON</b>	(2) Dependent's social security number <b>669-22-4825</b>	(3) Dependent's relationship to you Son	<input checked="" type="checkbox"/> if child under age 17 qual. for child tax credit (see instr.)
	(1) First name <b>HENRY</b> (2) Last name <b>SIMON</b>	(2) Dependent's social security number <b>669-30-1405</b>	(3) Dependent's relationship to you Son	<input checked="" type="checkbox"/> ● did not live with you due to divorce or separation (see instructions)
				Dependents on 6c not entered above
d Total number of exemptions claimed			Add numbers on lines above ► 3	
<b>Income</b>	7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	45,000	
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	8a Taxable interest. Attach Schedule B if required	8a	115	
	b Tax-exempt interest. Do not include on line 8a	8b	98,597	
	9a Ordinary dividends. Attach Schedule B if required	9a	8,691	
	b Qualified dividends	9b	2,773	
If you did not get a W-2, see instructions.	10 Taxable refunds, credits, or offsets of state and local income taxes	10		
	11 Alimony received	11		
	12 Business income or (loss). Attach Schedule C or C-EZ	12		
	13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ►	13	-1,500	
	14 Other gains or (losses). Attach Form 4797	14		
	15a IRA distributions	15a	b Taxable amount	
	16a Pensions and annuities	16a	b Taxable amount	
	17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	-37,128	
	18 Farm income or (loss). Attach Schedule F	18		
	19 Unemployment compensation	19		
	20a Social security benefits	20a	b Taxable amount	
	21 Other income. List type and amount	See Statement 1		
	22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ►	22	-83,763	

<b>Adjusted Gross Income</b>	23 Educator expenses	23	
	24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
	25 Health savings account deduction. Attach Form 8889	25	
	26 Moving expenses. Attach Form 3903	26	
	27 Deductible part of self-employment tax. Attach Schedule SE	27	
	28 Self-employed SEP, SIMPLE, and qualified plans	28	
	29 Self-employed health insurance deduction	29	
	30 Penalty on early withdrawal of savings	30	
	31a Alimony paid b Recipient's SSN ►	31a	
	32 IRA deduction	32	
	33 Student loan interest deduction	33	
	34 Tuition and fees. Attach Form 8917	34	
	35 Domestic production activities deduction. Attach Form 8903	35	
	36 Add lines 23 through 35	36	
	37 Subtract line 36 from line 22. This is your adjusted gross income ►	37	-83,763

Form 1040 (2015) CLAUDE A SIMON

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## Tax and Credits

## Standard Deduction for—

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$6,300

Married filing jointly or Qualifying widow(er), \$12,600

Head of household, \$9,250

## Other Taxes

## Payments

If you have a qualifying child, attach Schedule EIC.

38	Amount from line 37 (adjusted gross income) .....	38	-83,763
39a	Check <input type="checkbox"/> You were born before January 2, 1951, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1951, <input type="checkbox"/> Blind. } Total boxes checked ► 39a		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> b		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin) .....	40	22,547
41	Subtract line 40 from line 38 .....	41	-106,310
42	Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see instructions .....	42	12,000
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- .....	43	0
44	Tax (see instr.). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> _____	44	0
45	Alternative minimum tax (see instructions). Attach Form 6251 .....	45	
46	Excess advance premium tax credit repayment. Attach Form 8962 .....	46	
47	Add lines 44, 45, and 46 .....	47	
48	Foreign tax credit. Attach Form 1116 if required .....	48	
49	Credit for child and dependent care expenses. Attach Form 2441 .....	49	
50	Education credits from Form 8863, line 19 .....	50	
51	Retirement savings contributions credit. Attach Form 8880 .....	51	
52	Child tax credit. Attach Schedule 8812, if required .....	52	
53	Residential energy credits. Attach Form 5695 .....	53	
54	Other credits from Form a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> _____	54	
55	Add lines 48 through 54. These are your total credits .....	55	
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- .....	56	0
57	Self-employment tax. Attach Schedule SE .....	57	
58	Unreported social security and Medicare tax from Form a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919 .....	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required .....	59	
60a	Household employment taxes from Schedule H .....	60a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required .....	60b	
61	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/> X .....	61	
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s) .....	62	
63	Add lines 56 through 62. This is your total tax .....	63	0
64	Federal income tax withheld from Forms W-2 and 1099 .....	64	5,518
65	2015 estimated tax payments and amount applied from 2014 return .....	65	
66a	Earned income credit (EIC) .....	66a	
b	Nontaxable combat pay election <input type="checkbox"/> 66b .....	66b	
67	Additional child tax credit. Attach Schedule 8812 .....	67	2,000
68	American opportunity credit from Form 8863, line 8 .....	68	
69	Net premium tax credit. Attach Form 8962 .....	69	
70	Amount paid with request for extension to file .....	70	
71	Excess social security and tier 1 RRTA tax withheld .....	71	
72	Credit for federal tax on fuels. Attach Form 4136 .....	72	
73	Credits from Form a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/> _____	73	
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments .....	74	7,518
75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid .....	75	7,518
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here ► <input type="checkbox"/> b	76a	7,518
► b	Routing number 021000089 ► c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
► d	Account number 79830938		
77	Amount of line 75 you want applied to your 2016 estimated tax ► 77	77	
Amount You Owe	78 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions ►	78	
79	Estimated tax penalty (see instructions) 79		

## Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)?  Yes. Complete below.  No

Designee's name ►

Personal identification number (PIN) ►

Phone no. ►

## Sign Here

Joint return? See instructions. Keep a copy for your records.

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

Your signature

Date

Your occupation

BUSINESS OWNER

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

Date

Spouse's occupation

If the IRS sent you an Identity Protection PIN, enter it here (see instr.)

►

Print/Type preparer's name

Preparer's signature

Date

Check  if

PTIN self-employed

P00447700

Paid

Allan C Cohn CPA

Allan C Cohn CPA

Date

Check  if

PTIN self-employed

P00447700

Preparer

Cohn &amp; Langer, CPAs

Date

Check  if

PTIN self-employed

P00447700

Use Only

Firm's name ► 18 Blanche St

Firm's address ► Plainview

Date

Check  if

PTIN self-employed

P00447700

Phone no.

Phone no.

P00447700

**SCHEDULE A**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service  
(99)

Name(s) shown on Form 1040

**Itemized Deductions**► Information about Schedule A and its separate instructions is at [www.irs.gov/schedulea](http://www.irs.gov/schedulea).

OMB No. 1545-0074

**2015**Attachment  
Sequence No. **07****CLAUDE A SIMON**Your social security number  
**106-50-1158**

<b>Medical and Dental Expenses</b>	<b>Caution:</b> Do not include expenses reimbursed or paid by others.		<b>4</b>
	1		
	2		
	3		
4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			
<b>Taxes You Paid</b>	5	<b>2,168</b>	<b>9</b>
	a <input checked="" type="checkbox"/> Income taxes, or b <input type="checkbox"/> General sales taxes		
	6	<b>11,431</b>	
	7		
	8		
	9 Add lines 5 through 8	<b>13,599</b>	
	10		
	11		
	12		
13			
14			
15			
<b>Gifts to Charity</b>  If you made a gift and got a benefit for it, see instructions.	16		<b>19</b>
	17		
	18		
	19 Add lines 16 through 18		
	20		
<b>Casualty and Theft Losses</b>		<b>20</b>	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	21		<b>27</b>
	22		
	23		
	24		
	25	<b>-83,763</b>	
	26		
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	<b>8,948</b>	
	28		
	29		
	30		
<b>Other Miscellaneous Deductions</b>		<b>28</b>	
<b>Total Itemized Deductions</b>		<b>29</b>	
29 Is Form 1040, line 38, over \$154,950?  <input checked="" type="checkbox"/> <b>No.</b> Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.  <input type="checkbox"/> <b>Yes.</b> Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.		<b>22,547</b>	
30 If you elect to itemize deductions even though they are less than your standard deduction, check here ► <input type="checkbox"/>			

**SCHEDULE B**

(Form 1040A or 1040)

Department of the Treasury  
Internal Revenue Service (99)**Interest and Ordinary Dividends**

OMB No. 1545-0074

► Attach to Form 1040A or 1040.

**2015**Attachment  
Sequence No. **08**

Name(s) shown on return

**CLAUDE A SIMON**Your social security number  
**106-50-1158****Part I****Interest**(See instructions  
on back and the  
instructions for  
Form 1040A, or  
Form 1040,  
line 8a.)Note: If you  
received a Form  
1099-INT, Form  
1099-OID, or  
substitute  
statement from  
a brokerage firm,  
list the firm's  
name as the  
payer and enter  
the total interest  
shown on that  
form.

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions on back and list this interest first. Also, show that buyer's social security number and address ►

**TD AMERITRADE****MORGAN STANLEY****BLACKSTONE GROUP****BLACKSTONE GROUP****20-8875684****20-8875684**

Amount

**17****14****62****22****1**

2 Add the amounts on line 1  
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989.  
Attach Form 8815  
4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ►

**115****2****115****3****115****4****115**

Note: If line 4 is over \$1,500, you must complete Part III.

**Part II****Ordinary  
Dividends**(See instructions  
on back and the  
instructions for  
Form 1040A, or  
Form 1040,  
line 9a.)Note: If you  
received a Form  
1099-DIV or  
substitute  
statement from  
a brokerage firm,  
list the firm's  
name as the  
payer and enter  
the ordinary  
dividends shown  
on that form.

5 List name of payer ►  
**MORGAN STANLEY**  
**TD AMERITRADE**  
**BLACKSTONE GROUP**  
**BLACKSTONE GROUP**

**20-8875684****20-8875684****1,029****7,636****19****7****5**

6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ►

**8,691**

Note: If line 6 is over \$1,500, you must complete Part III.

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

**Part III****Foreign  
Accounts  
and Trusts**(See  
instructions on  
back.)

7a At any time during 2015, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions  
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements  
b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ►  
8 During 2015, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions on back

**Yes** **No****X****X**

**SCHEDULE D**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service  
(99)**Capital Gains and Losses**

OMB No. 1545-0074

► Attach to Form 1040 or Form 1040NR.  
 ► Information about Schedule D and its separate instructions is at [www.irs.gov/schedule](http://www.irs.gov/schedule).  
 ► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

**2015**  
 Attachment  
 Sequence No. **12**

Name(s) shown on return

**CLAUDE A SIMON**

Your social security number

**106-50-1158****Part I Short-Term Capital Gains and Losses — Assets Held One Year or Less**

See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.....				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....	<b>3,847,718</b>	<b>3,837,352</b>	<b>2,927</b>	<b>13,293</b>
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....	<b>514,386</b>	<b>376,980</b>	<b>0</b>	<b>137,406</b>
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 .....			<b>4</b>	
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....			<b>5</b>	<b>-1</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....			<b>6</b>	<b>397,353</b>
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back .....			<b>7</b>	<b>-246,655</b>

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

See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.....				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....	<b>3,514,651</b>	<b>3,514,129</b>	<b>0</b>	<b>522</b>
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....	<b>16</b>	<b>33</b>	<b>0</b>	<b>-17</b>
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 .....			<b>11</b>	<b>70</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....			<b>12</b>	<b>294</b>
<b>13</b> Capital gain distributions. See the instructions .....			<b>13</b>	<b>7,451</b>
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....			<b>14</b>	
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on the back .....			<b>15</b>	<b>8,320</b>

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2015

## CLAUDE A SIMON

Schedule D (Form 1040) 2015

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## Part III Summary

16	Combine lines 7 and 15 and enter the result	16	-238,335
	<ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.</li> </ul>		
17	Are lines 15 and 16 <b>both</b> gains?	18	
	<input type="checkbox"/> <b>Yes.</b> Go to line 18. <input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.	19	
18	Enter the amount, if any, from line 7 of the <b>28% Rate Gain Worksheet</b> in the instructions	18	
19	Enter the amount, if any, from line 18 of the <b>Unrecaptured Section 1250 Gain Worksheet</b> in the instructions	19	
20	Are lines 18 and 19 <b>both</b> zero or blank?		
	<input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <b>Do not</b> complete lines 21 and 22 below.		
	<input type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Do not</b> complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the <b>smaller</b> of:	21	( 1,500 )
	<ul style="list-style-type: none"> <li>• The loss on line 16 or</li> <li>• (\$3,000), or if married filing separately, (\$1,500) <span style="float: right;">}</span></li> </ul>		
	<b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		
	<input checked="" type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42).		
	<input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2015

Form **8949**

## **Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

2015

Attachment  
Sequence No. **12A**

Department of the Treasury  
Internal Revenue Service  
Name(s) shown on return

CLAUDE A SIMON

**Social security number or taxpayer identification number**  
**106-50-1158**

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part I** **Short-Term.** Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)  
 (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS  
 (C) Short-term transactions not reported to you on Form 1099-B

**2 Totals.** Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►

**3,847,718**      **3,837,352**      **2,927**      **13,293**

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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**For Paperwork Reduction Act Notice, see your tax return instructions.**

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Form **8949** (2015)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

**Social security number or taxpayer identification number**

## CLAUDE A SIMON

106-50-1158

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part II** **Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box D, E, or F below. Check only one box.** If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

**(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)  
 **(E)** Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS  
 **(F)** Long-term transactions not reported to you on Form 1099-B

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949**

## **Sales and Other Dispositions of Capital Assets**

► Information about Form 8949 and its separate instructions is at [www.irs.gov/form8949](http://www.irs.gov/form8949).

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2015

Attachment  
Sequence No. **12A**

Department of the Treasury  
Internal Revenue Service  
Name(s) shown on return

CLAUDE A SIMON

**Social security number or taxpayer identification number**  
**106-50-1158**

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part I** **Short-Term.** Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

**(A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

**(B)** Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

**(C)** Short-term transactions not reported to you on Form 1099-B

**2 Totals.** Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).

514,386      376,980      0      137,406

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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**For Paperwork Reduction Act Notice, see your tax return instructions.**

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Form **8949** (2015)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

**Social security number or taxpayer identification number**

## CLAUDE A SIMON

106-50-1158

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part II** **Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box D, E, or F below. Check only one box.** If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

**(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)  
 **(E)** Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS  
 **(F)** Long-term transactions not reported to you on Form 1099-B

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

**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.)

► Attach to Form 1040, 1040NR, or Form 1041.

OMB No. 1545-0074

**2015**Attachment Sequence No. **13**

Name(s) shown on return

Your social security number

**CLAUDE A SIMON****106-50-1158****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 instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A	Did you make any payments in 2015 that would require you to file Form(s) 1099? (see instructions)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
B	If "Yes," did you or will you file all required Forms 1099?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

1a Physical address of each property (street, city, state, ZIP code)

A 534 WEST 42ND STREET, NEW YORK, NY 10036

B 336 EAST 56TH STREET, NEW YORK, NY 10022

C 10 PARK AVE APT 9H, NEW YORK, NY 10016

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	1		A 365		
B	1		B 365		
C	1		C 365		

**Type of Property:**

1 Single Family Residence	3 Vacation/Short-Term Rental	5 Land	7 Self-Rental
2 Multi-Family Residence	4 Commercial	6 Royalties	8 Other (describe)

Income:	Properties:	A	B	C
3 Rents received .....	3	41,100	213,425	31,200
4 Royalties received .....	4			

**Expenses:**

5 Advertising .....	5		
6 Auto and travel (see instructions) .....	6	4,100	15,167
7 Cleaning and maintenance .....	7		
8 Commissions .....	8		
9 Insurance .....	9	1,388	9,282
10 Legal and other professional fees .....	10	3,947	1,792
11 Management fees .....	11		15,900
12 Mortgage interest paid to banks, etc. (see instructions) .....	12		90,802
13 Other interest .....	13		558
14 Repairs .....	14		8,268
15 Supplies .....	15		4,034
16 Taxes .....	16	2,878	59,653
17 Utilities .....	17	3,004	7,851
18 Depreciation expense or depletion .....	18		
19 Other (list) ► See statement 3,4,5 .....	19	30,190	64,141
20 Total expenses. Add lines 5 through 19 .....	20	41,407	261,789
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 .....	21	-307	-48,364
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) .....	22	( 836 )	( 2,244 )
			2,963 )

23a Total of all amounts reported on line 3 for all rental properties .....

23a	
23b	
23c	
23d	
23e	

b Total of all amounts reported on line 4 for all royalty properties .....

c Total of all amounts reported on line 12 for all properties .....

d Total of all amounts reported on line 18 for all properties .....

e Total of all amounts reported on line 20 for all properties .....

24 Income. Add positive amounts shown on line 21. Do not include any losses .....

24

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. 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 40 on page 2 do not apply to you, also enter this amount on Form 1040, line

17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 .....

26

**For Paperwork Reduction Act Notice, see the separate instructions.**

DAA

Schedule E (Form 1040) 2015

**SCHEDULE E**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Supplemental Income and Loss**  
(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)  
► Attach to Form 1040, 1040NR, or Form 1041.  
► Information about Schedule E and its separate instructions is at [www.irs.gov/schedulee](http://www.irs.gov/schedulee).

OMB No. 1545-0074

**2015**Attachment Sequence No. **13**

Name(s) shown on return

Your social security number

**CLAUDE A SIMON****106-50-1158****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 instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A	Did you make any payments in 2015 that would require you to file Form(s) 1099? (see instructions)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
B	If "Yes," did you or will you file all required Forms 1099?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

1a	Physical address of each property (street, city, state, ZIP code)				
A	BLACKSTONE GROUP - Royalty				
B	LRR ENERGY LP - Royalty				
C					

1b	Type of Property (from list below)	2	For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	6			A		
B	6			B		
C				C		

**Type of Property:**

1 Single Family Residence	3 Vacation/Short-Term Rental	5 Land	7 Self-Rental
2 Multi-Family Residence	4 Commercial	6 Royalties	8 Other (describe)

Income:	Properties:	A	B	C
3 Rents received .....	3			
4 Royalties received .....	4	1	36	

**Expenses:**

5 Advertising .....	5		
6 Auto and travel (see instructions) .....	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 instructions) .....	12		
13 Other interest .....	13		
14 Repairs .....	14		
15 Supplies .....	15		
16 Taxes .....	16		
17 Utilities .....	17		
18 Depreciation expense or depletion .....	18		
19 Other (list) ► See Statement 6 .....	19	1	
20 Total expenses. Add lines 5 through 19 .....	20	1	
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 .....	21		36
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) .....	22	(	)

23a Total of all amounts reported on line 3 for all rental properties .....	23a	285,725	
b Total of all amounts reported on line 4 for all royalty properties .....	23b	37	
c Total of all amounts reported on line 12 for all properties .....	23c	91,360	
d Total of all amounts reported on line 18 for all properties .....	23d		
e Total of all amounts reported on line 20 for all properties .....	23e	328,354	

24 Income. Add positive amounts shown on line 21. Do not include any losses .....	24	6,079	
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. 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 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 .....	26		36

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Schedule E (Form 1040) 2015

## Schedule E (Form 1040) 2015

Attachment Sequence No. **13**Page **2**

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

Your social security number

**CLAUDE A SIMON****106-50-1158****Caution.** The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations** **Note:** If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach **Form 6198**. See instructions.

**27** Are you reporting any loss not allowed in a prior year due to the at-risk, excess farm loss, or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section.

**Yes****No**

28	(a) Name	(b) Enter P for partnership, S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	<b>See Statement 7</b>				
B					
C					
D					

<b>Passive Income and Loss</b>		<b>Nonpassive Income and Loss</b>				
		(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A						
B						
C						
D						
<b>29a</b>	Totals					<b>6,619</b>
<b>b</b>	Totals			<b>43,783</b>		
<b>30</b>	Add columns (g) and (j) of line 29a				<b>30</b>	<b>6,619</b>
<b>31</b>	Add columns (f), (h), and (i) of line 29b				<b>31</b>	<b>43,783</b>
<b>32</b>	<b>Total partnership and S corporation income or (loss).</b> Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				<b>32</b>	<b>-37,164</b>

**Part III Income or Loss From Estates and Trusts**

33	(a) Name	(b) Employer identification number		
A				
B				
<b>Passive Income and Loss</b>		<b>Nonpassive Income and Loss</b>		
		(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A				
B				
<b>34a</b>	Totals			
<b>b</b>	Totals			
<b>35</b>	Add columns (d) and (f) of line 34a			<b>35</b>
<b>36</b>	Add columns (c) and (e) of line 34b			<b>36</b>
<b>37</b>	<b>Total estate and trust income or (loss).</b> Combine lines 35 and 36. Enter the result here and include in the total on line 41 below			<b>37</b>

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

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below			<b>39</b>	

**Part V Summary**

<b>40</b>	Net farm rental income or (loss) from <b>Form 4835</b> . Also, complete line 42 below	<b>40</b>
<b>41</b>	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	<b>41</b>
<b>42</b>	<b>Reconciliation of farming and fishing income.</b> Enter your <b>gross</b> farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code V; and Schedule K-1 (Form 1041), box 14, code F (see instructions)	<b>42</b>
<b>43</b>	<b>Reconciliation for real estate professionals.</b> If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	<b>43</b>

Form **1116**Department of the Treasury  
Internal Revenue Service

(99)

**Foreign Tax Credit**

(Individual, Estate, or Trust)

► Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

**2015**Attachment  
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

**CLAUDE A SIMON****106-50-1158**Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in 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 category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

f Resident of (name of country) ► **US United States**

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)**

g Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	OC	B	
1a Gross income from sources within country shown above and of the type checked above (see instructions):	<b>ASIA</b>			
dividends		<b>8,665</b>		1a <b>8,665</b>
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, & you used an alternative basis to determine its source (see instructions) ► <input type="checkbox"/>				
<b>Deductions and losses</b> (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)		<b>11,431</b>		
b Other deds. (attach stmt.)				
c Add lines 3a and 3b		<b>11,431</b>		
d Gross foreign source income (see instructions)		<b>13,678</b>		
e Gross income from all sources (see instructions)		<b>419,973</b>		
f Divide line 3d by line 3e (see instructions)		<b>0.0326</b>		
g Multiply line 3c by line 3f		<b>372</b>		
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5		<b>372</b>		6 <b>372</b>
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ►				7 <b>8,293</b>

**Part II Foreign Taxes Paid or Accrued (see instructions)**

Country	Credit is claimed for taxes (you must check one)	Foreign taxes paid or accrued							
		In foreign currency				In U.S. dollars			
	(h) <input checked="" type="checkbox"/> Paid	Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued
	(i) <input type="checkbox"/> Accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(o) Dividends	(p) Rents and royalties	(q) Interest		
A <b>1099 Tax</b>					<b>112</b>				<b>112</b>
B									
C									
8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ►								8	<b>112</b>

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2015)

## CLAUDE A SIMON

106-50-1158

Page 2

Form 1116 (2015)

**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	112	
10	Carryback or carryover (attach detailed computation) <b>See Stmt 8</b> .....	10	35	
11	Add lines 9 and 10 .....	11	147	
12	Reduction in foreign taxes (see instructions) .....	12	( )	
13	Taxes reclassified under high tax kickout (see instructions) .....	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit .....	14	147	
15	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 instructions) .....	15	8,293	
16	Adjustments to line 15 (see instructions) .....	16		
17	Combine the amounts on lines 15 and 16. 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 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.) .....	17	8,293	
18	<b>Individuals:</b> Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption .....	18	-106,310	
	<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .....	19	1.0000	
20	<b>Individuals:</b> Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 .....	20		
	<b>Caution:</b> If you are completing line 20 for separate category e (lump-sum distributions), see instructions.			
21	Multiply line 20 by line 19 (maximum amount of credit) .....	21		
22	Enter the <b>smaller</b> of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV (see instructions) .....	22		

**Part IV Summary of Credits From Separate Parts III (see instructions)**

23	Credit for taxes on passive category income .....	23		
24	Credit for taxes on general category income .....	24		
25	Credit for taxes on certain income re-sourced by treaty .....	25		
26	Credit for taxes on lump-sum distributions .....	26		
27	Add lines 23 through 26 .....	27		
28	Enter the <b>smaller</b> of line 20 or line 27 .....	28		
29	Reduction of credit for international boycott operations. See instructions for line 12 .....	29		
30	Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a .....	30	0	

Form 1116 (2015)

Form **1116**Department of the Treasury  
Internal Revenue Service

(99)

**Foreign Tax Credit**

(Individual, Estate, or Trust)

► Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

**2015**Attachment  
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

**CLAUDE A SIMON****106-50-1158**Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in 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 category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

**f Resident of (name of country) ► US United States**

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)**

g Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A UK	B UK	C	
1a Gross income from sources within country shown above and of the type checked above (see instructions):	United Kingdom	United Kingdom		
<b>DIVIDENDS</b>	<b>30</b>	<b>10</b>		<b>1a</b> <b>40</b>
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, & you used an alternative basis to determine its source (see instructions) ► <input type="checkbox"/>				
<b>Deductions and losses (Caution: See instructions):</b>				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	<b>11,431</b>	<b>11,431</b>		
b Other deds. (attach stmt.)				
c Add lines 3a and 3b	<b>11,431</b>	<b>11,431</b>		
d Gross foreign source income (see instructions)	<b>30</b>	<b>10</b>		
e Gross income from all sources (see instructions)	<b>419,973</b>	<b>419,973</b>		
f Divide line 3d by line 3e (see instructions)	<b>0.0001</b>			
g Multiply line 3c by line 3f	<b>1</b>			
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	<b>1</b>			<b>6</b>
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ►				<b>7</b>
				<b>1</b>
				<b>39</b>

**Part II Foreign Taxes Paid or Accrued (see instructions)**

Country	Credit is claimed for taxes (you must check one)	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		(h) <input checked="" type="checkbox"/> Paid	Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued
A	(i) <input type="checkbox"/> Accrued	(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(o) Dividends	(p) Rents and royalties	(q) Interest	(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
B										
C										

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ► **8**

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2015)

## CLAUDE A SIMON

106-50-1158

Page 2

Form 1116 (2015)

**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		14
10 Carryback or carryover (attach detailed computation) .....	10		
11 Add lines 9 and 10 .....	11		
12 Reduction in foreign taxes (see instructions) .....	12	)	
13 Taxes reclassified under high tax kickout (see instructions) .....	13		
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit .....	14		
15 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 instructions) .....	15	39	
16 Adjustments to line 15 (see instructions) .....	16		
17 Combine the amounts on lines 15 and 16. 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 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.) .....	17	39	
18 <b>Individuals:</b> Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption .....	18	-106,310	
<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .....	19	1.0000	
20 <b>Individuals:</b> Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 .....	20		
<b>Caution:</b> If you are completing line 20 for separate category e (lump-sum distributions), see instructions.			
21 Multiply line 20 by line 19 (maximum amount of credit) .....	21		
22 Enter the <b>smaller</b> of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV (see instructions) .....	22		

**Part IV Summary of Credits From Separate Parts III (see instructions)**

23 Credit for taxes on passive category income .....	23		27
24 Credit for taxes on general category income .....	24		
25 Credit for taxes on certain income re-sourced by treaty .....	25		
26 Credit for taxes on lump-sum distributions .....	26		
27 Add lines 23 through 26 .....	27		
28 Enter the <b>smaller</b> of line 20 or line 27 .....	28		
29 Reduction of credit for international boycott operations. See instructions for line 12 .....	29		
30 Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a .....	30	0	

Form 1116 (2015)

Form **4797**Department of the Treasury  
Internal Revenue Service

**Sales of Business Property**  
**(Also Involuntary Conversions and Recapture Amounts**  
**Under Sections 179 and 280F(b)(2))**

► Attach to your tax return.

► Information about Form 4797 and its separate instructions is at [www.irs.gov/form4797](http://www.irs.gov/form4797).

OMB No. 1545-0184

**2015**Attachment  
Sequence No. **27**

Name(s) shown on return

Identifying number

**CLAUDE A SIMON****106-50-1158**

**1** Enter the gross proceeds from sales or exchanges reported to you for 2015 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) .....

**1**

**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)**

<b>2</b>	<b>(a) Description of property</b>	<b>(b) Date acquired (mo., day, yr.)</b>	<b>(c) Date sold (mo., day, yr.)</b>	<b>(d) Gross sales price</b>	<b>(e) Depreciation allowed or allowable since acquisition</b>	<b>(f) Cost or other basis, plus improvements and expense of sale</b>	<b>(g) Gain or (loss)</b> Subtract (f) from the sum of (d) and (e)
	<b>From K1</b>						<b>70</b>

<b>3</b>	Gain, if any, from Form 4684, line 39 .....	<b>3</b>	
<b>4</b>	Section 1231 gain from installment sales from Form 6252, line 26 or 37 .....	<b>4</b>	
<b>5</b>	Section 1231 gain or (loss) from like-kind exchanges from Form 8824 .....	<b>5</b>	
<b>6</b>	Gain, if any, from line 32, from other than casualty or theft .....	<b>6</b>	
<b>7</b>	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: .....	<b>7</b>	<b>70</b>
	<b>Partnerships (except electing large partnerships) and S corporations.</b> Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.		
	<b>Individuals, partners, S corporation shareholders, and all others.</b> 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 the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.		
<b>8</b>	Nonrecaptured net section 1231 losses from prior years (see instructions) .....	<b>8</b>	
<b>9</b>	Subtract line 8 from line 7. If zero or less, enter -0-. 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 the Schedule D filed with your return (see instructions) .....	<b>9</b>	

**Part II Ordinary Gains and Losses (see instructions)**

**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

<b>11</b>	Loss, if any, from line 7 .....	<b>11</b>	( )
<b>12</b>	Gain, if any, from line 7 or amount from line 8, if applicable .....	<b>12</b>	
<b>13</b>	Gain, if any, from line 31 .....	<b>13</b>	
<b>14</b>	Net gain or (loss) from Form 4684, lines 31 and 38a .....	<b>14</b>	
<b>15</b>	Ordinary gain from installment sales from Form 6252, line 25 or 36 .....	<b>15</b>	
<b>16</b>	Ordinary gain or (loss) from like-kind exchanges from Form 8824 .....	<b>16</b>	
<b>17</b>	Combine lines 10 through 16 .....	<b>17</b>	
<b>18</b>	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:		
<b>a</b>	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 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions .....	<b>18a</b>	
<b>b</b>	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 118b	<b>118b</b>	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2015)

There are no amounts for Page 2

**SCHEDULE 8812**  
(Form 1040A or 1040)Department of the Treasury  
Internal Revenue Service (99)**Child Tax Credit**

► Attach to Form 1040, Form 1040A, or Form 1040NR.  
 ► Information about Schedule 8812 and its separate instructions is at  
[www.irs.gov/schedule8812](http://www.irs.gov/schedule8812).

 1040  
 1040A  
 1040NR  
 8812

OMB No. 1545-0074

**2015**Attachment  
Sequence No. 47

Name(s) shown on return

Your social security number

**CLAUDE A SIMON****106-50-1158****Part I Filers Who Have Certain Child Dependent(s) with an ITIN (Individual Taxpayer Identification Number)**

Complete this part only for each dependent who has an ITIN and for whom you are claiming the child tax credit.

If your dependent is not a qualifying child for the credit, you cannot include that dependent in the calculation of this credit.

Answer the following questions for each dependent listed on Form 1040, line 6c; Form 1040A, line 6c; or Form 1040NR, line 7c, who has an ITIN (Individual Taxpayer Identification Number) and that you indicated is a qualifying child for the child tax credit by checking column (4) for that dependent.

**A** For the first dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

 Yes       No

**B** For the second dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

 Yes       No

**C** For the third dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

 Yes       No

**D** For the fourth dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

 Yes       No

**Note:** If you have more than four dependents identified with an ITIN and listed as a qualifying child for the child tax credit, see separate instructions and check here

**Part II Additional Child Tax Credit Filers**

**1** If you file Form 2555 or 2555-EZ **stop** here, you cannot claim the additional child tax credit.

If you are required to use the worksheet in Pub. 972, enter the amount from line 8 of the Child Tax Credit Worksheet in the publication. Otherwise:

**1040 filers:** Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040, line 52).

**1040A filers:** Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040A, line 35).

**1040NR filers:** Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040NR, line 49).

**2** Enter the amount from Form 1040, line 52; Form 1040A, line 35; or Form 1040NR, line 49 .....

**3** Subtract line 2 from line 1. If zero, **stop**; you cannot take this credit .....

**4a** Earned income (see separate instructions) .....

**b** Nontaxable combat pay (see separate instructions) .....

**5** Is the amount on line 4a more than \$3,000?

**No.** Leave line 5 blank and enter -0- on line 6.

**Yes.** Subtract \$3,000 from the amount on line 4a. Enter the result .....

**6** Multiply the amount on line 5 by 15% (.15) and enter the result .....

**Next.** Do you have three or more qualifying children?

**No.** If line 6 is zero, **stop**; you cannot take this credit. Otherwise, skip Part III and enter the **smaller** of line 3 or line 6 on line 13.

**Yes.** If line 6 is equal to or more than line 3, skip Part III and enter the amount from line 3 on line 13. Otherwise, go to line 7.

CLAUDE A SIMON

Schedule 8812 (Form 1040A or 1040) 2015

**Part III Certain Filers Who Have Three or More Qualifying Children**

7 Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see separate instructions .....	7		
8 <b>1040 filers:</b> Enter the total of the amounts from Form 1040, lines 27 and 58, plus any taxes that you identified using code "UT" and entered on line 62.	8		
<b>1040A filers:</b> Enter -0-. <b>1040NR filers:</b> Enter the total of the amounts from Form 1040NR, lines 27 and 56, plus any taxes that you identified using code "UT" and entered on line 60.	9		
9 Add lines 7 and 8 .....	10		
10 <b>1040 filers:</b> Enter the total of the amounts from Form 1040, lines 66a and 71.	11		
<b>1040A filers:</b> Enter the total of the amount from Form 1040A, line 42a, plus any excess social security and tier 1 RRTA taxes withheld that you entered to the left of line 46 (see separate instructions). <b>1040NR filers:</b> Enter the amount from Form 1040NR, line 67.	12		
11 Subtract line 10 from line 9. If zero or less, enter -0-.	13	2,000	
12 Enter the <b>larger</b> of line 6 or line 11 .....	1040	Enter this amount on Form 1040, line 67, Form 1040A, line 43, or Form 1040NR, line 64.	
Next, enter the <b>smaller</b> of line 3 or line 12 on line 13.	1040A		
	1040NR		

**Part IV Additional Child Tax Credit**

13 This is your additional child tax credit .....	13	2,000	
	1040	Enter this amount on Form 1040, line 67, Form 1040A, line 43, or Form 1040NR, line 64.	
	1040A		
	1040NR		

Schedule 8812 (Form 1040A or 1040) 2015

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

► Information about Form 4952 and its instructions is at [www.irs.gov/form4952](http://www.irs.gov/form4952).  
 ► Attach to your tax return.

OMB No. 1545-0191

**2015**Attachment  
Sequence No. **51**

Name(s) shown on return

**CLAUDE A SIMON**

Identifying number

**106-50-1158****Part I Total Investment Interest Expense**

1 Investment interest expense paid or accrued in 2015 (see instructions) .....	1	<b>28</b>
2 Disallowed investment interest expense from 2014 Form 4952, line 7 .....	2	
3 <b>Total investment interest expense.</b> Add lines 1 and 2 .....	3	<b>28</b>

**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>8,844</b>	
4b Qualified dividends included on line 4a .....	4b	<b>2,773</b>	
c Subtract line 4b from line 4a .....	4c	<b>6,071</b>	
d Net gain from the disposition of property held for investment .....	4d		
e Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment (see instructions) .....	4e		
f Subtract line 4e from line 4d .....	4f		
g Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions) .....	4g		
h Investment income. Add lines 4c, 4f, and 4g .....	4h	<b>6,071</b>	
5 Investment expenses (see instructions) .....	5	<b>8,945</b>	
6 <b>Net investment income.</b> Subtract line 5 from line 4h. If zero or less, enter -0- .....	6	<b>0</b>	

**Part III Investment Interest Expense Deduction**

7 Disallowed investment interest expense to be carried forward to 2016. Subtract line 6 from line 3. If zero or less, enter -0- .....	7	<b>28</b>
8 <b>Investment interest expense deduction.</b> Enter the <b>smaller</b> of line 3 or 6. See instructions .....	8	<b>0</b>

For Paperwork Reduction Act Notice, see page 4.

Form **4952** (2015)

Form **4952**Department of the Treasury  
Internal Revenue Service  
(99)**Alt. Min. Tax**  
**Investment Interest Expense Deduction**► Information about Form 4952 and its instructions is at [www.irs.gov/form4952](http://www.irs.gov/form4952).  
► Attach to your tax return.

OMB No. 1545-0191

**2015**Attachment  
Sequence No. **51**

Name(s) shown on return

**CLAUDE A SIMON**

Identifying number

**106-50-1158****Part I Total Investment Interest Expense**

1 Investment interest expense paid or accrued in 2015 (see instructions) .....	1	<b>28</b>
2 Disallowed investment interest expense from 2014 Form 4952, line 7 .....	2	
<b>3 Total investment interest expense.</b> Add lines 1 and 2 .....	3	<b>28</b>

**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>8,844</b>	
4b Qualified dividends included on line 4a .....	4b	<b>2,773</b>	
c Subtract line 4b from line 4a .....	4c		<b>6,071</b>
d Net gain from the disposition of property held for investment .....	4d		
e Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions) .....	4e		
f Subtract line 4e from line 4d .....	4f		
g Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions) .....	4g		
h Investment income. Add lines 4c, 4f, and 4g .....	4h	<b>6,071</b>	
5 Investment expenses (see instructions) .....	5		<b>1</b>
<b>6 Net investment income.</b> Subtract line 5 from line 4h. If zero or less, enter -0- .....	6		<b>6,070</b>

**Part III Investment Interest Expense Deduction**

7 Disallowed investment interest expense to be carried forward to 2016. Subtract line 6 from line 3. If zero or less, enter -0- .....	7	<b>0</b>
<b>8 Investment interest expense deduction.</b> Enter the smaller of line 3 or 6. See instructions .....	8	<b>28</b>

For Paperwork Reduction Act Notice, see page 4.

Form **4952** (2015)

Form **8582**Department of the Treasury  
Internal Revenue Service

(99)

**Passive Activity Loss Limitations**

OMB No. 1545-1008

**2015**Attachment  
Sequence No. **88**

Name(s) shown on return

Identifying number

**CLAUDE A SIMON****106-50-1158****Part I 2015 Passive Activity Loss****Caution:** Complete Worksheets 1, 2, and 3 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see**Special Allowance for Rental Real Estate Activities** in the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a)) .....	1a	6,043	
b Activities with net loss (enter the amount from Worksheet 1, column (b)) .....	1b	48,671	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c)) .....	1c	300,800	
d Combine lines 1a, 1b, and 1c .....	1d	<b>-343,428</b>	

**Commercial Revitalization Deductions From Rental Real Estate Activities**

2a Commercial revitalization deductions from Worksheet 2, column (a) .....	2a		
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) .....	2b		
c Add lines 2a and 2b .....	2c		

**All Other Passive Activities**

3a Activities with net income (enter the amount from Worksheet 3, column (a)) .....	3a		
b Activities with net loss (enter the amount from Worksheet 3, column (b)) .....	3b		
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c)) .....	3c		
d Combine lines 3a, 3b, and 3c .....	3d		

4 Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used .....	4	<b>-343,428</b>	
---	---	-----------------	--

If line 4 is a loss and:

- Line 1d is a loss, go to Part II.
- Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
- Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

**Caution:** 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 or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.

5 Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4 .....	5	<b>343,428</b>	
6 Enter \$150,000. If married filing separately, see instructions .....	6		
7 Enter modified adjusted gross income, but not less than zero (see instructions) .....	7	0	
<b>Note:</b> If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.	8		
8 Subtract line 7 from line 6 .....	9		
9 Multiply line 8 by 50% (.5). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions .....	10	0	
10 Enter the <b>smaller</b> of line 5 or line 9 .....			

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

**Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities****Note:** Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .....	11		
12 Enter the loss from line 4 .....	12		
13 Reduce line 12 by the amount on line 10 .....	13		
14 Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13 .....	14		

**Part IV Total Losses Allowed**

15 Add the income, if any, on lines 1a and 3a and enter the total .....	15	<b>6,043</b>	
16 <b>Total losses allowed from all passive activities for 2015.</b> Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return .....	16	<b>6,043</b>	

For Paperwork Reduction Act Notice, see instructions.

DAA

Form **8582** (2015)

CLAUDE A SIMON

106-50-1158

Form 8582 (2015)

Page 2

**Caution:** The worksheets must be filed with your tax return. Keep a copy for your records.**Worksheet 1—For Form 8582, Lines 1a, 1b, and 1c** (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
<b>See Statement 9</b>					
<b>Total. Enter on Form 8582, lines 1a, 1b, and 1c ►</b>	<b>6,043</b>	<b>48,671</b>	<b>300,800</b>		

**Worksheet 2—For Form 8582, Lines 2a and 2b** (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
<b>Total. Enter on Form 8582, lines 2a and 2b ►</b>			

**Worksheet 3—For Form 8582, Lines 3a, 3b, and 3c** (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
<b>Total. Enter on Form 8582, lines 3a, 3b, and 3c ►</b>					

**Worksheet 4—Use this worksheet if an amount is shown on Form 8582, line 10 or 14** (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
<b>Total ►</b>			<b>1.00</b>		

**Worksheet 5—Allocation of Unallowed Losses** (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
<b>SIMONS HK PROPERTIES LLC</b>	<b>Sch E1</b>	<b>94,019</b>	<b>0.2713</b>	<b>93,183</b>
<b>CHARLES HENRY PROPERTIES LLC</b>	<b>Sch E1</b>	<b>252,489</b>	<b>0.7287</b>	<b>250,245</b>
<b>Total ►</b>		<b>346,508</b>	<b>1.00</b>	<b>343,428</b>

CLAUDE A SIMON

Form 8582 (2015)

106-50-1158

Page 3

## Worksheet 6—Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
SIMONS HK PROPERTIES LLC	Sch E1	94,019	93,183	836
CHARLES HENRY PROPERTIES LLC	Sch E1	252,489	250,245	2,244
<b>Total</b>		<b>346,508</b>	<b>343,428</b>	<b>3,080</b>

## Worksheet 7—Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule	►				
b Net income from form or schedule	►				
c Subtract line 1b from line 1a. If zero or less, enter -0-	►				
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule	►				
b Net income from form or schedule	►				
c Subtract line 1b from line 1a. If zero or less, enter -0-	►				
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule	►				
b Net income from form or schedule	►				
c Subtract line 1b from line 1a. If zero or less, enter -0-	►				
<b>Total</b>				<b>1.00</b>	

Form 8582 (2015)

## Federal Statements

### Statement 1 - Form 1040, Line 21 - Other Income

Description	Amount
Prior Year NOL	\$ -100,262
Portfolio Income from K-1s	1
TD AMERITRADE	1,320
Total	\$ <u><u>-98,941</u></u>

## Federal Statements

### Statement 2 - Schedule A, Line 23 - Other Expenses

Description	Amount
MORGAN STANLEY Portfolio Inc Ded (K-1s)	\$ 8,944 4 _____
Total	\$ 8,948

## Federal Statements

### SIMONS HK PROPERTIES LLC

#### Statement 3 - Schedule E, Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
RENT EXPENSE	\$ 29,919		\$ 29,919
BANK CHARGES	171		171
PRMOTENTIAL EXPENSE	100		100
Total	\$ <u>30,190</u>		\$ <u>30,190</u>

### CHARLES HENRY PROPERTIES LLC

#### Statement 4 - Schedule E, Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
RENT EXPENSE	\$ 27,303		\$ 27,303
ADMINISTRATIVE EXPENSES	16,197		16,197
PROMOTIONAL EXPENSE	14,186		14,186
TELEPHONE	4,028		4,028
WATER & SEWER	1,074		1,074
STORAGE COSTS	840		840
OFFICE & POSTAGE	425		425
GARBAGE SERVICE	50		50
BANK CHARGES	25		25
DUES & SUBSCRIPTION	13		13
Total	\$ <u>64,141</u>		\$ <u>64,141</u>

### 10 PARK AVE

#### Statement 5 - Schedule E, Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
MOVING EXPENSES	\$ _____		\$ _____
Total	\$ <u>0</u>		\$ <u>0</u>

## Federal Statements

### BLACKSTONE GROUP

#### Statement 6 - Schedule E, Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
Royalty Expense	\$ 1		\$ 1
Total	\$ 1		\$ 1

## Federal Statements

Statement 7 - Schedule E, Page 2, Line 28

Name	P S	For Ptr	EIN	Not at Risk	Passive Loss	Passive Income	Nonpass Loss	Sec 179 Deduct	Nonpass Income
FAIRLANE VRTX, INC	S		46-1575705		\$	\$	\$	\$	\$ 5,307
VERATEX INC	S		13-2804148				43,311		
BLACKSTONE GROUP	P		20-8875684						
Rental Real Estate	P		20-8875684						3
INTEREST EXPENSE	P		20-8875684						
Other Income	P		20-8875684				5		
BLACKSTONE GROUP	P		20-8875684						1
Rental Real Estate	P		20-8875684						1
Other Income	P		20-8875684						3
LRR ENERGY LP	P		90-0708431						1,304
Section 59(e)(2) expensed	P		90-0708431						
Total					\$ 0	\$ 0	\$ 43,783	\$ 0	\$ 6,619

## Federal Statements

### Passive Income

#### Statement 8 - Form 1116, Line 10 - Carryback or Carryover

Year	Fgn Taxes Pd/Accrued	Limit	Available to Carryover
2005	\$	\$	\$
2006			
2007	90	1,372	
2008	117	103	
2009	26	46	
2010	27		
2011	41		
2012	117	752	
2013			
2014	35		35
Carryback to 2015			
Total			\$ <u>35</u>

## Federal Statements

### Statement 9 - Form 8582 Page 2 Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c

Description	Current Year Net Income	Current Year Net Loss	Prior Year Unallowed Loss	Overall Gain	Overall Loss
SIMONS HK PROPERTIES LLC	\$ 307	\$ 93,712	\$ 94,019		
CHARLES HENRY PROPERTIES LLC		48,364	204,125		252,489
10 PARK AVE	6,043		2,963	3,080	
Total	\$ 6,043	\$ 48,671	\$ 300,800		



Department of Taxation and Finance

# Resident Income Tax Return

New York State • New York City • Yonkers • MCTMT

**IT-201**

For the full year January 1, 2015, through December 31, 2015, or fiscal year beginning .....

and ending .....

For help completing your return, see the instructions, Form IT-201-I.

Your first name	MI	Your last name (for a joint return, enter spouse's name on line below)		Your date of birth (mmddyyyy)	Your social security number
CLAUDE	A	SIMON		03051956	106-50-1158
Spouse's first name	MI	Spouse's last name		Spouse's date of birth (mmddyyyy)	Spouse's social security number
					149-46-3469
Mailing address (see instructions, page 13) (number and street or PO box)				Apartment number	New York State county of residence
71 TONJES ROAD					Sull
City, village, or post office		State	ZIP code	Country (if not United States)	
CALLICOON		NY	12723	Monticello	
Taxpayer's permanent home address (see instructions, page 13) (number and street or rural route)				Apartment number	School district code number .....
					406
City, village, or post office		State	ZIP code	Taxpayer's date of death (mmddyyyy)	Spouse's date of death (mmddyyyy)
		NY		Decedent information	

**A Filing status**

(mark an **X** in one box):

- ①  Single
- ②  Married filing joint return  
(enter spouse's social security number above)
- ③  Married filing separate return  
(enter spouse's social security number above)
- ④  Head of household (with qualifying person)
- ⑤  Qualifying widow(er) with dependent child

**B Did you itemize** your deductions on your 2015 federal income tax return? .... Yes  No

**C Can you be claimed** as a dependent on another taxpayer's federal return? .... Yes  No

**D1** Did you have a financial account located in a foreign country? (see page 14) .... Yes  No

**D2 Yonkers residents and Yonkers part-year residents only:**

- (1) Did you receive a property tax freeze credit? (see page 14) .... Yes  No
- (2) If Yes, enter the amount .....  00

**E** (1) Did you or your spouse **maintain living quarters in NYC** during 2015? (see page 14) Yes  No

- (2) Enter the number of days spent in NYC in 2015 (any part of a day spent in NYC is considered a day) ..

**F NYC residents and NYC part-year residents only** (see page 14):

- (1) Number of months **you** lived in NYC in 2015 ..
- (2) Number of months **your spouse** lived in NYC in 2015 ..

**G** Enter your **2-character special condition code(s)** if applicable (see page 14) ..

**H Dependent exemption information** (see page 15)

First name	MI	Last name	Relationship	Social security number	Date of birth (mmddyyyy)
CHARLES	A	SIMON	Son	669-22-4825	02292004
HENRY		SIMON	Son	669-30-1405	04222006

If more than 7 dependents, mark an **X** in the box

201001151022



For office use only

Your social security number
106-50-1158

**Federal income and adjustments** (see page 15)

- 1 Wages, salaries, tips, etc.
- 2 Taxable interest income
- 3 Ordinary dividends
- 4 Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25)
- 5 Alimony received
- 6 Business income or loss (submit a copy of federal Schedule C or C-EZ, Form 1040)
- 7 Capital gain or loss (if required, submit a copy of federal Schedule D, Form 1040)
- 8 Other gains or losses (submit a copy of federal Form 4797)
- 9 Taxable amount of IRA distributions. If received as a beneficiary, mark an **X** in the box
- 10 Taxable amount of pensions and annuities. If received as a beneficiary, mark an **X** in the box
- 11 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (submit copy of federal Schedule E, Form 1040)

Whole dollars only		
1	45000	00
2	115	00
3	8691	00
4		00
5		00
6		00
7	-1500	00
8		00
9		00
10		00
11	-37128	00

- 12 Rental real estate included in line 11
- 13 Farm income or loss (submit a copy of federal Schedule F, Form 1040)
- 14 Unemployment compensation
- 15 Taxable amount of social security benefits (also enter on line 27)
- 16 Other income (see page 15) **Identify: See Statement 1**
- 17 Add lines 1 through 11 and 13 through 16
- 18 Total federal adjustments to income (see page 15) **Identify:**
- 19 Federal adjusted gross income (subtract line 18 from line 17)

12	00
13	00
14	00
15	00
16	-98941
17	-83763
18	00
19	-83763

**New York additions** (see page 16)

- 20 Interest income on state and local bonds and obligations (but not those of NYS or its local governments)
- 21 Public employee 414(h) retirement contributions from your wage and tax statements (see page 16)
- 22 New York's 529 college savings program distributions (see page 16)
- 23 Other (Form IT-225, line 9)
- 24 Add lines 19 through 23

20	00
21	00
22	00
23	100562
24	16799

**New York subtractions** (see page 17)

- 25 Taxable refunds, credits, or offsets of state & local income taxes (from line 4)
- 26 Pensions of NYS & local governments & the federal government (see page 15)
- 27 Taxable amount of social security benefits (from line 15)
- 28 Interest income on U.S. government bonds
- 29 Pension and annuity income exclusion (see page 18)
- 30 New York's 529 college savings program deduction/earnings
- 31 Other (Form IT-225, line 18)
- 32 Add lines 25 through 31
- 33 New York adjusted gross income (subtract line 32 from line 24)

25	00
26	00
27	00
28	00
29	00
30	00
31	00

32	00
33	16799

**Standard deduction or itemized deduction** (see page 20)

- 34 Enter your **standard deduction** (table on page 20) **or** your **itemized deduction** (from Form IT-201-D)
 

Mark an **X** in the appropriate box:  **Standard** - or -  **Itemized**
- 35 Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank)
- 36 Dependent exemptions (enter the number of dependents listed in item H; see page 20)
- 37 Taxable income (subtract line 36 from line 35)

34	20379	00
35		00
36	2	000
37		00



**Tax computation, credits, and other taxes**

38 Taxable income (from line 37 on page 2) .....	38	00
39 NYS tax on line 38 amount (see page 21) .....	39	00
40 NYS household credit (page 21, table 1, 2, or 3) .....	40	60 00
41 Resident credit (see page 22) .....	41	00
42 Other NYS nonrefundable credits (Form IT-201-ATT, line 7) .....	42	00
43 Add lines 40, 41, and 42 .....	43	60 00
44 Subtract line 43 from line 39 (if line 43 is more than line 39, leave blank) .....	44	00
45 Net other NYS taxes (Form IT-201-ATT, line 30) .....	45	00
46 Total New York State taxes (add lines 44 and 45) .....	46	00

**New York City and Yonkers taxes, credits, and surcharges, and MCTMT**

47 NYC resident tax on line 38 amount (see page 22) .....	47	00
48 NYC household credit (page 22, table 4, 5, or 6) .....	48	00
49 Subtract line 48 from line 47 (if line 48 is more than line 47, leave blank) .....	49	00
50 Part-year NYC resident tax (Form IT-360.1) .....	50	00
51 Other NYC taxes (Form IT-201-ATT, line 34) .....	51	00
52 Add lines 49, 50, and 51 .....	52	00
53 NYC nonrefundable credits (Form IT-201-ATT, line 10) .....	53	00
54 Subtract line 53 from line 52 (if line 53 is more than line 52, leave blank) .....	54	00
54a MCTMT net earnings base .....	54a	00
54b MCTMT .....	54b	00
55 Yonkers resident income tax surcharge (see page 25) .....	55	00
56 Yonkers nonresident earnings tax (Form Y-203) .....	56	00
57 Part-year Yonkers resident income tax surcharge (Form IT-360.1) .....	57	00
58 Total New York City and Yonkers taxes / surcharges and MCTMT (add lines 54 and 54b through 57) .....	58	00

**59 Sales or use tax (see page 26; do not leave line 59 blank)**

59 10 00

**Voluntary contributions** (see page 27)

60a Return a Gift to Wildlife .....	60a	00
60b Missing/Exploited Children Fund .....	60b	00
60c Breast Cancer Research Fund .....	60c	00
60d Alzheimer's Fund .....	60d	00
60e Olympic Fund (\$2 or \$4; see page 27) .....	60e	00
60f Prostate and Testicular Cancer Research and Education Fund .....	60f	00
60g 9/11 Memorial .....	60g	00
60h Volunteer Firefighting & EMS Recruitment Fund .....	60h	00
60i Teen Health Education .....	60i	00
60j Veterans Remembrance .....	60j	00
60k Homeless Veterans .....	60k	00
60l Mental Illness Anti-Stigma Fund .....	60l	00
60m Women's Cancers Education and Prevention Fund .....	60m	00
60 Total voluntary contributions (add lines 60a through 60m) .....	60	00
61 Total New York State, New York City, Yonkers, and sales or use taxes, MCTMT, and voluntary contributions (add lines 46, 58, 59, and 60) .....	61	10 00



Your social security number

106-50-1158

62 Enter amount from line 61

62

10 00

**Payments and refundable credits** (see page 28)

63 Empire State child credit	63	660	00
63a Family tax relief credit	63a		00
64 NYS/NYC child and dependent care credit	64		00
65 NYS earned income credit (EIC)	65		00
66 NYS noncustodial parent EIC	66		00
67 Real property tax credit	67		00
68 College tuition credit	68		00
69 NYC school tax credit ( <i>also complete F on page 1; see page 29</i> )	69		00
70 NYC earned income credit	70		00
70a NYC enhanced real property tax credit	70a		00
71 Other refundable credits ( <i>Form IT-201-ATT, line 18</i> )	71		00
72 Total New York State tax withheld	72	2139	00
73 Total New York City tax withheld	73		00
74 Total Yonkers tax withheld	74		00
75 Total estimated tax payments and amount paid with Form IT-37075	75		00

76 Total payments (add lines 63 through 75)

76 2799 00

**Your refund, amount you owe, and account information** (see pages 31 through 33)77 Amount overpaid (if line 76 is **more than** line 62, subtract line 62 from line 76)

77 2789 00

78 Amount of line 77 to be refunded

Mark one refund choice:  direct deposit (fill in line 83) - or -  debit card - or -  paper check

78 2789 00

79 Amount of line 77 that you want applied to your

2016 estimated tax (see instructions)

79 00

See page 31 for information about your three refund choices.

80 Amount you **owe** (if line 76 is **less than** line 62, subtract line 76 from line 62). To pay by electronic funds withdrawal, mark an **X** in the box  and fill in lines 83 and 84. If you pay by check or money order you **must** complete Form IT-201-V and mail it with your return.80 00  
See page 32 for payment options.81 Estimated tax penalty (*include this amount in line 80 or reduce the overpayment on line 77; see page 32*)

81 00

See page 35 for the proper assembly of your return.

82 Other penalties and interest (see page 32)

82 00

83 Account information for direct deposit or electronic funds withdrawal (see page 33).

If the funds for your payment (or refund) would come from (or go to) an account outside the U.S., mark an **X** in this box (see pg. 33) 83a Account type:  Personal checking - or -  Personal savings - or -  Business checking - or -  Business savings

83b Routing number

83c Account number

79830938

84 Electronic funds withdrawal (see page 33) Date

Amount 00

Third-party designee? (see instr.) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Print designee's name E-mail:	Designee's phone number	Personal identification number (PIN)
---	----------------------------------	-------------------------	--------------------------------------

▼ Paid preparer must complete ▼ (see instructions)		Preparer's NYTPRIN Preparer's printed name Allan C Cohn CPA	NYTPRIN excl. code 03
Preparer's signature Allan C Cohn CPA		Preparer's printed name Allan C Cohn CPA	
Firm's name (or yours, if self-employed) Cohn & Langer, CPAs		Preparer's PTIN or SSN P00447700	
Address 18 Blanche St Plainview NY 11803-4607		Employer identification number 45-4014297 Date 11032016	
E-mail:			

▼ Taxpayer(s) must sign here ▼	
Your signature	
Your occupation BUSINESS OWNER	
Spouse's signature and occupation (if joint return)	
Date	Daytime phone #
E-mail:	

See instructions for where to mail your return.

201004151022





Department of Taxation and Finance  
**Resident Itemized Deduction Schedule**

**IT-201-D**

Submit this form with Form IT-201. See instructions for completing Form IT-201-D in the instructions for Form IT-201.

Name(s) as shown on your Form IT-201	Your social security number
CLAUDE A SIMON	106-50-1158

Whole dollars only

- 1 Medical and dental expenses (*federal Schedule A, line 4*) .....
- 2 Taxes you paid (*federal Schedule A, line 9*) .....
- 3 Interest you paid (*federal Schedule A, line 15*) .....
- 4 Gifts to charity (*federal Schedule A, line 19*) .....
- 5 Casualty and theft losses (*federal Schedule A, line 20*) .....
- 6 Job expenses / miscellaneous deductions (*federal Schedule A, line 27*) .....
- 7 Other miscellaneous deductions (*federal Schedule A, line 28*) .....
- 8 Enter amount from **federal Schedule A, line 29** .....
- 9 State, local, and foreign **income** taxes (*or general sales tax, if applicable*)  
and other subtraction adjustments (*see instructions*) ..... See Stmt 2
- 10 Subtract line 9 from line 8 .....
- 11 Addition adjustments (*see instructions*) .....
- 12 Add lines 10 and 11 .....
- 13 Itemized deduction adjustment (*see instructions*) .....
- 14 Subtract line 13 from line 12 .....
- 15 College tuition itemized deduction (*see Form IT-272*) .....
- 16 **New York State itemized deduction** (*add lines 14 and 15; enter on Form IT-201, line 34*) .....

1	00
2	13599
3	00
4	00
5	00
6	8948
7	00
8	22547

9	2168
10	20379
11	00
12	20379
13	00
14	20379
15	00
16	20379





Department of Taxation and Finance

# Claim for Empire State Child Credit

IT-213

Submit this form with Form IT-201 or IT-203.

## Step 1 – Enter identifying information

Your name as shown on return	Your social security number
CLAUDE A SIMON	106-50-1158
Spouse's name	Spouse's social security number
	149-46-3469

## Step 2 – Determine eligibility

1 Were you (and your spouse if filing a joint New York State return) New York State residents for **all** of 2015?  1 Yes  X No

If you marked an **X** in the **No** box, **stop**; you do not qualify for this credit.

2 Did you claim the federal child tax credit or additional child tax credit for 2015?  2 Yes  X No

3 Is your federal adjusted gross income (see *instructions*)  
– \$110,000 or less and your filing status is ② married filing joint return;  
– \$75,000 or less and your filing status is ① single, ④ head of household, or ⑤ qualifying widow(er); **or**  
– \$55,000 or less and your filing status is ③ married filing separate return?  3 Yes  X No

If you marked an **X** in the **No** box at both lines 2 and 3, **stop**; you do not qualify for this credit.

4 Enter the number of children who qualify for the **federal** child tax credit or  
additional child tax credit (see *instructions*)  4  2

5 Enter the number of children from line 4 that were at least four but less than 17 years of age on December 31, 2015  5  2

If you entered 0 on line 5, **stop**; you do not qualify for this credit.

## Step 3 – Enter child information

List below the name, social security number, and date of birth for each child included on line 4.

First name	MI	Last name	Social security number	Date of birth (mmddyyyy)
CHARLES	A	SIMON	669-22-4825	02292004
HENRY		SIMON	669-30-1405	04222006

Use Form IT-213-ATT if you have additional children to report (see *instructions*).

**Step 4 – Compute credit**

If you answered **No** to question 2, skip lines 6 through 12, and enter **0** on line 13; continue with line 14.

Whole dollars only

6 Enter your federal child tax credit from Form 1040A, line 35, or Form 1040, line 52 .....	<b>6</b>	00
7 Enter your federal additional child tax credit from Form 1040A, line 43, or Form 1040, line 67 .....	<b>7</b>	2000 00
8 Add lines 6 and 7 .....	<b>8</b>	2000 00
9 Enter the number of children from line 4 .....	<b>9</b>	2
10 Divide line 8 by line 9 .....	<b>10</b>	1000 00
11 Enter the number of children from line 5 .....	<b>11</b>	2
12 Multiply line 10 by line 11 .....	<b>12</b>	2000 00
13 Multiply line 12 by 33% (.33) .....	<b>13</b>	660 00

If you marked the **No** box on line 3, skip lines 14 and 15, and enter the amount from line 13 on line 16.

**All others continue with line 14.**

14 Enter the number of children from line 5 .....	<b>14</b>	2
15 Multiply line 14 by 100 .....	<b>15</b>	200 00
16 Empire State child credit (enter the amount from line 13 or line 15, whichever is greater) .....	<b>16</b>	660 00

If you filed a joint federal return but are required to file separate New York State returns, continue with lines 17 and 18. All others enter the line 16 amount on Form IT-201, line 63.

**Step 5 – Spouses required to file separate New York State returns (see instructions)**

17 Enter the full-year resident spouse's share of the line 16 amount; <b>do not leave line 17 blank</b> .....	<b>17</b>	00
Enter here and on Form IT-201, line 63.		
18 Enter the part-year resident or nonresident spouse's share of the line 16 amount; <b>do not leave line 18 blank</b> .....	<b>18</b>	00
Enter the line 18 amount and code <b>213</b> on Form IT-203-ATT, line 12.		





Department of Taxation and Finance

# New York State Modifications

Attachment to Form IT-201, IT-203, IT-204, or IT-205

**IT-225**

Name(s) as shown on return	Identifying number as shown on return
CLAUDE A SIMON	106-50-1158

Complete all parts that apply to you; see instructions (Form IT-225-I). Submit this form with Form IT-201, IT-203, IT-204, or IT-205.

Mark an **X** in the box identifying the return you are filing: IT-201  IT-203  IT-204  IT-205 **Schedule A - New York State additions (enter whole dollars only)****Part 1 – Individuals, partnerships, and estates or trusts****1 New York State additions**

	Number	A - Total amount	B - NYS allocated amount
1a	A-201	300 00	300 00
1b	A-215	100262 00	00
1c	A -	00	00
1d	A -	00	00
1e	A -	00	00
1f	A -	00	00
1g	A -	00	00

2 Total (add column A, lines 1a through 1g) .....	2	100562 00
3 Total of Schedule A, Part 1, column A amounts from additional Form(s) IT-225, if any .....	3	00

4 Add lines 2 and 3 .....	4	100562 00
---------------------------	---	-----------

**Part 2 – Partners, shareholders, and beneficiaries**

! Form IT-201 filers: do not enter EA-103 or EA-113  
Form IT-203 filers: do not enter EA-113  
Form IT-205 filers: do not enter EA-113 or EA-201

**5 New York State additions**

	Number	A - Total amount	B - NYS allocated amount
5a	EA -	00	00
5b	EA -	00	00
5c	EA -	00	00
5d	EA -	00	00
5e	EA -	00	00
5f	EA -	00	00
5g	EA -	00	00

6 Total (add column A, lines 5a through 5g) .....	6	00
7 Total of Schedule A, Part 2, column A amounts from additional Form(s) IT-225, if any .....	7	00
8 Add lines 6 and 7 .....	8	00
9 Total additions (add lines 4 and 8; see instructions) .....	9	100562 00

(continued)

225001151022



**Schedule B - New York State subtractions (enter whole dollars only)****Part 1 – Individuals, partnerships, and estates or trusts****10 New York State subtractions**

Number		A - Total amount	B - NYS allocated amount
10a	S -	00	00
10b	S -	00	00
10c	S -	00	00
10d	S -	00	00
10e	S -	00	00
10f	S -	00	00
10g	S -	00	00

11 Total (add column A, lines 10a through 10g) .....

11 | 00

12 Total of Schedule B, Part 1, column A amounts from additional Form(s) IT-225, if any .....

12 | 00

13 Add lines 11 and 12 .....

13 | 00

**Part 2 – Partners, shareholders, and beneficiaries**

Form IT-201 filers: do not enter ES-103, ES-104, ES-106, ES-107, or ES-125

Form IT-203 filers: do not enter ES-106, ES-107, or ES-125

Form IT-205 filers: do not enter ES-125

**14 New York State subtractions**

Number		A - Total amount	B - NYS allocated amount
14a	ES -	00	00
14b	ES -	00	00
14c	ES -	00	00
14d	ES -	00	00
14e	ES -	00	00
14f	ES -	00	00
14g	ES -	00	00

15 Total (add column A, lines 14a through 14g) .....

15 | 00

16 Total of Schedule B, Part 2, column A amounts from additional Form(s) IT-225, if any .....

16 | 00

17 Add lines 15 and 16 .....

17 | 00

18 Total subtractions (add lines 13 and 17; see instructions) .....

18 | 00



## New York Statements

### Statement 1 - Form IT-201 - Other Income

Description	Amount
Prior Year NOL	\$ -100,262
Portfolio Income from K-1s	1
TD AMERITRADE	<u>1,320</u>
Total	\$ <u>-98,941</u>

## New York Statements

### Statement 2 - Form IT-201-D - Subtraction Adjustments

Class Code	Description	Amount
	State/local/foreign taxes	\$ 2,168
Total		\$ 2,168