

Form	1040	Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return	2015	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																																																						
Your first name and initial CLAUDE A				Last name SIMON																																																							
Your social security number 106-50-1158																																																											
If a joint return, spouse's first name and initial				Last name																																																							
Spouse's social security number 149-46-3469																																																											
Home address (number and street). If you have a P.O. box, see instructions. 71 TONJES ROAD				Apt. no.																																																							
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). CALLICOON NY 12723				▲ Make sure the SSN(s) above and on line 6c are correct.																																																							
Foreign country name		Foreign province/state/county		Foreign postal code																																																							
<div style="display: flex; justify-content: space-between;"> <div> Filing Status 1 <input type="checkbox"/> Single 2 <input type="checkbox"/> Married filing jointly (even if only one had income) 3 <input checked="" type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. CAROLYN SIMON </div> <div> 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. ▶ 5 <input type="checkbox"/> Qualifying widow(er) with dependent child </div> </div>																																																											
Exemptions 6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a b <input type="checkbox"/> Spouse																																																											
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Tax and Credits	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 <input type="checkbox"/>		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/>		
	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	
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	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
Other Taxes	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"/>	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	
Payments If you have a qualifying child, attach Schedule EIC.	66a	Earned income credit (EIC)	66a	
	b	Nontaxable combat pay election 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
Refund Direct deposit? See instructions.	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"/>	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		
	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	
	Amount You Owe			
	Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No		
		Designee's name	Personal identification number (PIN)	Phone no.

Sign Here Joint return? See instr. 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	
	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation
Print/Type preparer's name		Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed PTIN
Paid	Allan C Cohn CPA	Allan C Cohn CPA	11/03/16	P00447700
Preparer	Firm's name Cohn & Langer, CPAs	Firm's EIN 45-4014297		
Use Only	Firm's address 18 Blanche St Plainview NY 11803-4607	Phone no. 516-702-3002		

**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.

► Attach to Form 1040.

OMB No. 1545-0074

2015Attachment
Sequence No. **07****CLAUDE A SIMON**

Your social security number

106-50-1158**Medical
and
Dental
Expenses****Caution:** Do not include expenses reimbursed or paid by others.**1** Medical and dental expenses (see instructions) **1****2** Enter amount from Form 1040, line 38 **2****3** Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1951, multiply line 2 by 7.5% (.075) instead **3****4** Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-**Taxes You
Paid****5** State and local (check only one box):**a** ☒ Income taxes, or**b** ☐ General sales taxes**6** Real estate taxes (see instructions) **6 11,431****7** Personal property taxes **7****8** Other taxes. List type and amount ► **8****9** Add lines 5 through 8 **9 13,599****Interest
You Paid****Note:**
Your mortgage
interest
deduction may
be limited (see
instructions).**10** Home mortgage interest and points reported to you on Form 1098 **10****11** Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ► **11****12** Points not reported to you on Form 1098. See instructions for special rules **12****13** Mortgage insurance premiums (see instructions) **13****14** Investment interest. Attach Form 4952 if required. (See instructions.) **14****15** Add lines 10 through 14 **15****Gifts to
Charity**If you made a
gift and got a
benefit for it,
see instructions.**16** Gifts by cash or check. If you made any gift of \$250 or more, see instructions **16****17** Other than by cash or check. If any gift of \$250 or more, see instructions. You **must** attach Form 8283 if over \$500 **17****18** Carryover from prior year **18****19** Add lines 16 through 18 **19****Casualty and
Theft Losses****20** Casualty or theft loss(es). Attach Form 4684. (See instructions.) **20****Job Expenses
and Certain
Miscellaneous
Deductions****21** Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ► **21****22** Tax preparation fees **22****23** Other expenses—investment, safe deposit box, etc. List type and amount ► **23 8,948****See Statement 2****24** Add lines 21 through 23 **24 8,948****25** Enter amount from Form 1040, line 38 **25 -83,763****26** Multiply line 25 by 2% (.02) **26****27** Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- **27 8,948****Other
Miscellaneous
Deductions****28** Other—from list in instructions. List type and amount ► **28****Total
Itemized
Deductions****29** Is Form 1040, line 38, over \$154,950?☒ **No.** 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.☐ **Yes.** Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.**30** If you elect to itemize deductions even though they are less than your standard deduction, check here ☐

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2015

SCHEDULE B**(Form 1040A or 1040)****Interest and Ordinary Dividends**▶ **Attach to Form 1040A or 1040.**

OMB No. 1545-0074

2015Attachment
Sequence No. **08**Department of the Treasury
Internal Revenue Service (99)▶ **Information about Schedule B and its instructions is at www.irs.gov/scheduleb.**

Name(s) shown on return

CLAUDE A SIMON

Your social security number

106-50-1158

Part I		Interest		Amount	
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 20-8875684 BLACKSTONE GROUP 20-8875684	1			
					17
					14
					62
					22
2	Add the amounts on line 1	2			115
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3			
4	Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶	4			115

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

Part II		Ordinary Dividends		Amount	
5	List name of payer ▶ MORGAN STANLEY TD AMERITADE BLACKSTONE GROUP 20-8875684 BLACKSTONE GROUP 20-8875684	5			
					1,029
					7,636
					19
					7
6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	6			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		Yes	No
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		X
	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		X

For Paperwork Reduction Act Notice, see your tax return instructions.**Schedule B (Form 1040A or 1040) 2015**

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

▶ Attach to Form 1040 or Form 1040NR.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/scheduled.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

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)
1a 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				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	3,847,718	3,837,352	2,927	13,293
2 Totals for all transactions reported on Form(s) 8949 with Box B checked	514,386	376,980	0	137,406
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	-1
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6	397,353
7 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			7	-246,655

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)
8a 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				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	3,514,651	3,514,129	0	522
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	16	33	0	-17
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 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			11	70
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	294
13 Capital gain distributions. See the instructions			13	7,451
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on the back			15	8,320

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

Schedule D (Form 1040) 2015

Part III Summary

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

Form **8949**Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Sales and Other Dispositions of Capital Assets► Information about Form 8949 and its separate instructions is at 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

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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	THRU AMERITRADE	10/01/15	10/07/15	11	2			9
	THRU AMERITRADE	Various	Various	2,900,102	2,887,684	w	2,927	15,345
	THRU MORGAN STANLEY	03/30/15	04/07/15	4	4			0
	THRU MORGAN STANLEY	Various	Various	947,601	949,662			-2,061
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.

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

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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	THRU MORGAN STANLEY	01/31/14	03/18/15	3,514,651	3,514,129			522
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 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►			3,514,651	3,514,129		0	522

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**Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Sales and Other Dispositions of Capital Assets► Information about Form 8949 and its separate instructions is at 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

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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	THRU AMERITRADE	Various	Various	183,270	194,659			-11,389
	THRU MORGAN STANLEY	Various	Various	182,014	33,219			148,795
	THRU MORGAN STANLEY	Various	Various	149,102	149,102			0
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.

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

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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	THRU AMERITRADE	Various	Various	15	33			-18
	THRU MORGAN STANLEY	03/31/15	Various	1	0			1
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 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►			16	33		0	-17

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.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.

OMB No. 1545-0074

2015Attachment
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) ☐ Yes ☒ No

B If "Yes," did you or will you file all required Forms 1099? ☐ Yes ☐ 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	
7 Cleaning and maintenance	7			15,167
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	558
13 Other interest	13			
14 Repairs	14		8,268	4,034
15 Supplies	15			
16 Taxes	16	2,878	59,653	5,398
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	25,157
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	6,043
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			
b Total of all amounts reported on line 4 for all royalty properties	23b			
c Total of all amounts reported on line 12 for all properties	23c			
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			
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.

Schedule E (Form 1040) 2015

DAA

**SCHEDULE E
(Form 1040)****Supplemental Income and Loss**

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

Department of the Treasury
Internal Revenue Service

(99)

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.**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) ☐ Yes ☐ No

B If "Yes," did you or will you file all required Forms 1099? ☐ Yes ☐ 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		6,043	
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.

Schedule E (Form 1040) 2015

DAA

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	See Statement 7				
B					
C					
D					

Passive Income and Loss			Nonpassive Income and Loss		
(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					
29a Totals					6,619
b Totals		43,783			
30 Add columns (g) and (j) of line 29a					30 6,619
31 Add columns (f), (h), and (i) of line 29b					31 (43,783)
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below					32 -37,164

Part III Income or Loss From Estates and Trusts

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

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					39

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41 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	41	-37,128
42 Reconciliation of farming and fishing income. Enter your gross 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)	42	
43 Reconciliation for real estate professionals. 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	43	

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.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

OMB No. 1545-0121

2015Attachment
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)**

		Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A	OC	B	
g	Enter the name of the foreign country or U.S. possession ▶	ASIA			
1a	Gross income from sources within country shown above and of the type checked above (see instructions):				
	dividends	8,665			8,665
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"/>				
Deductions and losses (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)	11,431			
b	Other dedts. (attach stmt.)				
c	Add lines 3a and 3b	11,431			
d	Gross foreign source income (see instructions)	13,678			
e	Gross income from all sources (see instructions)	419,973			
f	Divide line 3d by line 3e (see instructions)	0.0326			
g	Multiply line 3c by line 3f	372			
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	372			372
7	Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				8,293

Part II Foreign Taxes Paid or Accrued (see instructions)

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

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2015)

CLAUDE A SIMON

106-50-1158

Form 1116 (2015)

Page **2****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) See Stmt 8	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	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	-106,310	
	Caution: 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	Individuals: 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. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	20		
	Caution: 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 smaller 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 smaller 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 foreign tax credit . 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.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

OMB No. 1545-0121

2015Attachment
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)**

		Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A UK	B UK	C	
g Enter the name of the foreign country or U.S. possession ▶		United Kingdom	United Kingdom		
1a	Gross income from sources within country shown above and of the type checked above (see instructions):				
	DIVIDENDS	30	10		
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"/>				
Deductions and losses (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)	11,431	11,431		
b	Other ded. (attach stmt.)				
c	Add lines 3a and 3b	11,431	11,431		
d	Gross foreign source income (see instructions)	30	10		
e	Gross income from all sources (see instructions)	419,973	419,973		
f	Divide line 3d by line 3e (see instructions)	0.0001			
g	Multiply line 3c by line 3f	1			
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	1			
7	Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				39

Part II Foreign Taxes Paid or Accrued (see instructions)

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

Form 1116 (2015)

Page **2****Part III Figuring the Credit**

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9		
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11		
12	Reduction in foreign taxes (see 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	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption	18		-106,310
	Caution: 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	Individuals: 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. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	20		
	Caution: 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 smaller 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 smaller 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 foreign tax credit . 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.**

OMB No. 1545-0184

2015Attachment
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)

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

- 3** Gain, if any, from Form 4684, line 39
- 4** Section 1231 gain from installment sales from Form 6252, line 26 or 37
- 5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824
- 6** Gain, if any, from line 32, from other than casualty or theft
- 7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:

3**4****5****6****7****70****Partnerships (except electing large partnerships) and S corporations.** 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.**Individuals, partners, S corporation shareholders, and all others.** If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

- 8** Nonrecaptured net section 1231 losses from prior years (see instructions)
- 9** Subtract line 8 from line 7. If zero or less, enter -0-. 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)

8**9****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):

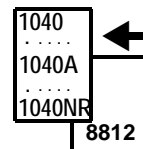
- 11** Loss, if any, from line 7
- 12** Gain, if any, from line 7 or amount from line 8, if applicable
- 13** Gain, if any, from line 31
- 14** Net gain or (loss) from Form 4684, lines 31 and 38a
- 15** Ordinary gain from installment sales from Form 6252, line 25 or 36
- 16** Ordinary gain or (loss) from like-kind exchanges from Form 8824
- 17** Combine lines 10 through 16
- 18** 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:
- a** 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** Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 18b

11**12****13****14****15****16****17****18a****18b****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.



OMB No. 1545-0074

2015Attachment
Sequence No. **47**

Name(s) shown on return

CLAUDE A SIMON

Your social security number

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).

1**2,000**

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

2

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

3**2,000**

4a Earned income (see separate instructions)

4a**45,000**

b Nontaxable combat pay (see separate instructions)

4b

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

5**42,000**

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

6**6,300**

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.

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

Schedule 8812 (Form 1040A or 1040) 2015

CLAUDE A SIMON

106-50-1158

Schedule 8812 (Form 1040A or 1040) 2015

Page **2****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	1040 filers: 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		
	1040A filers: Enter -0-.			
	1040NR filers: 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	Add lines 7 and 8	9		
10	1040 filers: Enter the total of the amounts from Form 1040, lines 66a and 71.	10		
	1040A filers: 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).			
	1040NR filers: Enter the amount from Form 1040NR, line 67.			
11	Subtract line 10 from line 9. If zero or less, enter -0-	11		
12	Enter the larger of line 6 or line 11	12		
	Next , enter the smaller of line 3 or line 12 on line 13.			

Part IV Additional Child Tax Credit

13	This is your additional child tax credit	13	2,000
-----------	--	-----------	--------------

1040 1040A 1040NR	Enter this amount on Form 1040, line 67, Form 1040A, line 43, or Form 1040NR, line 64.
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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.

► Attach to your tax return.

OMB No. 1545-0191

2015Attachment
Sequence No. **51**

Name(s) shown on return

Identifying number

CLAUDE A SIMON**106-50-1158****Part I Total Investment Interest Expense**

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

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	8,844		
4b	Qualified dividends included on line 4a	4b	2,773		
c	Subtract line 4b from line 4a			4c	6,071
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			6,071
5	Investment expenses (see instructions)	5			8,945
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6			0

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	28
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	0

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.

► Attach to your tax return.

OMB No. 1545-0191

2015Attachment
Sequence No. **51**

Name(s) shown on return

Identifying number

CLAUDE A SIMON**106-50-1158****Part I Total Investment Interest Expense**

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

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	8,844		
4b	Qualified dividends included on line 4a	4b	2,773		
c	Subtract line 4b from line 4a			4c	6,071
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	6,071
5	Investment expenses (see instructions)			5	1
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-			6	6,070

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	0
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	28

For Paperwork Reduction Act Notice, see page 4.

Form **4952** (2015)

Form **8582****Passive Activity Loss Limitations**

OMB No. 1545-1008

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1041.

▶ Information about Form 8582 and its instructions is available at www.irs.gov/form8582.**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		-343,428

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		-343,428
--	----------	--	-----------------

- 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 smaller of the loss on line 1d or the loss on line 4	5	343,428
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
Note: 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 Subtract line 7 from line 6	8	
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions	9	
10 Enter the smaller of line 5 or line 9	10	0

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 smallest 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	6,043
16 Total losses allowed from all passive activities for 2015. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	16	6,043

For Paperwork Reduction Act Notice, see instructions.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
See Statement 9					
Total. Enter on Form 8582, lines 1a, 1b, and 1c	6,043	48,671	300,800		

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
Total. Enter on Form 8582, lines 2a and 2b			

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
Total. Enter on Form 8582, lines 3a, 3b, and 3c					

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)
Total			1.00		

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
SIMONS HK PROPERTIES LLC	Sch E1	94,019	0.2713	93,183
CHARLES HENRY PROPERTIES LLC	Sch E1	252,489	0.7287	250,245
Total		346,508	1.00	343,428

CLAUDE A SIMON

106-50-1158

Form 8582 (2015)

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
Total		346,508	343,428	3,080

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- ▶					
Total ▶			1.00		

Form **8582** (2015)

Federal Statements

Statement 1 - Form 1040, Line 21 - Other Income

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

Statement 2 - Schedule A, Line 23 - Other Expenses

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

Federal Statements**SIMONS HK PROPERTIES LLC****Statement 3 - Schedule E, Line 19 - Other Expenses**

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

CHARLES HENRY PROPERTIES LLC**Statement 4 - Schedule E, Line 19 - Other Expenses**

<u>Description</u>	<u>Gross Amount</u>	<u>Business Use Percentage</u>	<u>Net Amount</u>
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**

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

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				5		
Other Income	P		20-8875684						1
BLACKSTONE GROUP	P		20-8875684						
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				467		
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			\$ 35

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

<u>Description</u>		<u>Current Year</u>	<u>Current Year</u>	<u>Prior Year</u>	<u>Overall</u>	<u>Overall</u>
		<u>Net Income</u>	<u>Net Loss</u>	<u>Unallowed Loss</u>	<u>Gain</u>	<u>Loss</u>
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	\$	<u>6,043</u>	<u>48,671</u>	<u>300,800</u>		



Department of Taxation and Finance

Resident Income Tax Return

New York State • New York City • Yonkers • MCTMT

IT-201For 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)
		NY		
		Decedent information	Spouse's date of death (mmddyyyy)	

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)

Whole dollars only

1	Wages, salaries, tips, etc.	1	45000	00
2	Taxable interest income	2	115	00
3	Ordinary dividends	3	8691	00
4	Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25)	4		00
5	Alimony received	5		00
6	Business income or loss (submit a copy of federal Schedule C or C-EZ, Form 1040)	6		00
7	Capital gain or loss (if required, submit a copy of federal Schedule D, Form 1040)	7	-1500	00
8	Other gains or losses (submit a copy of federal Form 4797)	8		00
9	Taxable amount of IRA distributions. If received as a beneficiary, mark an X in the box	9		00
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an X in the box	10		00
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (submit copy of federal Schedule E, Form 1040)	11	-37128	00
12	Rental real estate included in line 11	12		00
13	Farm income or loss (submit a copy of federal Schedule F, Form 1040)	13		00
14	Unemployment compensation	14		00
15	Taxable amount of social security benefits (also enter on line 27)	15		00
16	Other income (see page 15) Identify: See Statement 1	16	-98941	00
17	Add lines 1 through 11 and 13 through 16	17	-83763	00
18	Total federal adjustments to income (see page 15) Identify:	18		00
19	Federal adjusted gross income (subtract line 18 from line 17)	19	-83763	00

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)	20		00
21	Public employee 414(h) retirement contributions from your wage and tax statements (see page 16)	21		00
22	New York's 529 college savings program distributions (see page 16)	22		00
23	Other (Form IT-225, line 9)	23	100562	00
24	Add lines 19 through 23	24	16799	00

New York subtractions (see page 17)

25	Taxable refunds, credits, or offsets of state & local income taxes (from line 4)	25		00
26	Pensions of NYS & local governments & the federal government (see page 17)	26		00
27	Taxable amount of social security benefits (from line 15)	27		00
28	Interest income on U.S. government bonds	28		00
29	Pension and annuity income exclusion (see page 18)	29		00
30	New York's 529 college savings program deduction/earnings	30		00
31	Other (Form IT-225, line 18)	31		00
32	Add lines 25 through 31	32		00
33	New York adjusted gross income (subtract line 32 from line 24)	33	16799	00

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: <input type="checkbox"/> Standard - or - <input checked="" type="checkbox"/> Itemized	34	20379	00
35	Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank)	35		00
36	Dependent exemptions (enter the number of dependents listed in item H; see page 20)	36	2 000	00
37	Taxable income (subtract line 36 from line 35)	37		00

201002151022



Name(s) as shown on page 1
CLAUDE A SIMON

Your social security number
106-50-1158

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

See instructions on pages 22 through 25 to compute New York City and Yonkers taxes, credits, and surcharges, and MCTMT.

59	Sales or use tax (see page 26; do not leave line 59 blank)	59	10	00
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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 (also complete F on page 1; see page 29)	69		00
70 NYC earned income credit	70		00
70a NYC enhanced real property tax credit	70a		00
71 Other refundable credits (Form IT-201-ATT, line 18)	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-3	75		00

If applicable, complete Form(s) IT-2 and/or IT-1099-R and submit them with your return (see page 12).

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 ☒ 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.

See page 32 for payment options.

80 00

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 ☐ in this box (see pg. 33)83a Account type: ☒ Personal checking - or - ☐ Personal savings - or - ☐ Business checking - or - ☐ Business savings

83b Routing number 021000089

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	Designee's phone number	Personal identification number (PIN)
	E-mail:		

▼ Paid preparer must complete ▼ (see instructions)		Preparer's NYTPRIN	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		
E-mail:		Date 11032016		

▼ 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)	1		00
2 Taxes you paid (federal Schedule A, line 9)	2	13599	00
3 Interest you paid (federal Schedule A, line 15)	3		00
4 Gifts to charity (federal Schedule A, line 19)	4		00
5 Casualty and theft losses (federal Schedule A, line 20)	5		00
6 Job expenses / miscellaneous deductions (federal Schedule A, line 27)	6	8948	00
7 Other miscellaneous deductions (federal Schedule A, line 28)	7		00
8 Enter amount from federal Schedule A, line 29	8	22547	00
9 State, local, and foreign income taxes (or general sales tax, if applicable) and other subtraction adjustments (see instructions) See Stmt 2	9	2168	00
10 Subtract line 9 from line 8	10	20379	00
11 Addition adjustments (see instructions)	11		00
12 Add lines 10 and 11	12	20379	00
13 Itemized deduction adjustment (see instructions)	13		00
14 Subtract line 13 from line 12	14	20379	00
15 College tuition itemized deduction (see Form IT-272)	15		00
16 New York State itemized deduction (add lines 14 and 15; enter on Form IT-201, line 34)	16	20379	00

201005151022





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 ☒ 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 ☒ 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 ☒ 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*).

213001151022



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	6		00
7 Enter your federal additional child tax credit from Form 1040A, line 43, or Form 1040, line 67	7	2000	00
8 Add lines 6 and 7	8	2000	00
9 Enter the number of children from line 4	9	2	
10 Divide line 8 by line 9	10	1000	00
11 Enter the number of children from line 5	11	2	
12 Multiply line 10 by line 11	12	2000	00
13 Multiply line 12 by 33% (.33)	13	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	14	2	
15 Multiply line 14 by 100	15	200	00
16 Empire State child credit (<i>enter the amount from line 13 or line 15, whichever is greater</i>)	16	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; do not leave line 17 blank	17		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; do not leave line 18 blank	18		00
Enter the line 18 amount and code 213 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)	100562 00
3	Total of Schedule A, Part 1, column A amounts from additional Form(s) IT-225, if any	00
4	Add lines 2 and 3	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)	00
7	Total of Schedule A, Part 2, column A amounts from additional Form(s) IT-225, if any	00
8	Add lines 6 and 7	00
9	Total additions (add lines 4 and 8; see instructions)	100562 00

(continued)

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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

<u>Description</u>	<u>Amount</u>
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

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