1040	J.S. Individual
-------------	-----------------

1040	U	.S. Individual Incon	ne Tax Returr	1 ⁽⁹⁹⁾ 2	013	OMB N	No. 1545-0074	IRS Use (Only - Do no	t write	or stap	le in this spac	е.	
For the year Jan. 1-Dec	. 31, 2	013, or other tax year beginning			,	2013, e			. 20		See	separate in	struction	
Your first name and			Last name						, 20			social security		э.
BRADLEY S			SCHNEIDE	R										ı
		first name and initial	Last name								Spous	se's social sec	urity numb	er
,			Last Harris											ı
Home address (num	iber a	nd street). If you have a P.O	. box, see instructio	ns.					Apt. no).	M	lake sure the S	SN/e) abo	ve
			•									nd on line 6c a		VC
City, town or post office	e, state	e, and ZIP code. If you have a fore	ign address, also comp	lete spaces	below.							dential Election		
											if filing	k here if you, o g jointly, want	\$3 to go to	0
Foreign country nan	nα		Foreign	nrovince/e	tate/county			Forei	gn postal o	ondo	this fu	and. Checking ot change you	a box belo)W
r oreign country nan	116		Toreign	province/s	late/county			10161	gii postai t	Joue		You _	Cnau	
	-	Cingle				4	Hood	f househ	old (with a	uolifi i	<u></u>		_ Spou	
Filing Status	2	Single Married filing jointly (oven if only one had	linoomo\		4				_		rson). If the	-	
	3	Married filing jointly (X Married filing separate	_						i but not y	our de	penu	ent, enter thi	s cillu s	
Check only	3	married ming coparat			,			nere. 🕨	/	d a n a n	dont d	Lila		_
one box.		and full name here.				5		ing wido	w(er) with	aepen	aent (Boxes check	ed 1	_
Exemptions	_	X Yourself. If someone									}	on 6a and 6b		-
	b _.							ependent's		(4)√ if c	hild	No. of childre on 6c who:	n 1	
	C	Dependents: (1) First name	Last name		pendent's socia curity number	al		ionship to		ùnder ag ualifying	e 17	lived withdid not live		_
		17					CONT	you		tax cre	dit	you due to di or separation	vorce	
		DANIEL H SCHI	NEIDEK				SON					(see instructi	ons)	_
If more than four dependents, see												Dependents	on 6c	
instructions and	η.											not entered a	bove	
check here 🕨 🖳	┙.											Add numbers on lines	_	
	d	Total number of exemption										above	(((_
Income	7	Wages, salaries, tips, etc.								7	+	14/	,666	
	8a	Taxable interest. Attach S							0.45	8a	_		23	•
Attach Form(s)	Ь	Tax-exempt interest. Do n							,047	_		•	100	
W-2 here. Also	9a	,	Schedule B if requi	ired					150	9a	\bot	3	,100	•
attach Forms	Ь	Qualified dividends					9b		,152	<u>.</u>				
W-2G and 1099-R if tax	10	Taxable refunds, credits, c	or offsets of state an	d local inc	ome taxes					10	-			_
was withheld.	11									11	-		E 0 4	_
	12	Business income or (loss)								12	$\overline{}$,784	
If you did not	13	Capital gain or (loss). Atta							-	13	-	23	,156	•
get a W-2,	14	Other gains or (losses). At								14	_			
see instructions.	15a		15a				Taxable amo			151	_			
	16a					_	Taxable amo			16t	<u> </u>			_
	17	Rental real estate, royalties								17	4	-3	,513	•
	18	Farm income or (loss). Att								18	_			
	19	Unemployment compensa	tion							19				
	20a					b	Taxable amo	ount		201	<u> </u>			
	21	Other income. List type an								21	_			_
	22	Combine the amounts in t	he far right column f	for lines 7	through 21. T	This is	your total in d	ome	>	22	\bot	220	,216	•
	23	Educator expenses Certain business expenses of r	recenviete nerforming a	rtiete and fe	e_hasis noverni		23			_				
Adjusted	24	officials. Attach Form 2106 or 2	2106-EZ				24			_				
Gross	25	Health savings account de					25							
Income	26	Moving expenses. Attach					26							
	27	Deductible part of self-em					27							
	28	Self-employed SEP, SIMP	LE, and qualified pla	ans			28							
	29	Self-employed health insu					29							
	30	Penalty on early withdrawa	al of savings				30							
	31a						31a							
	32	IRA deduction					32							
	33	Student loan interest dedu					33							
	34	Tuition and fees. Attach Fo					34							
	35	Domestic production activ					35							
	36	Add lines 23 through 35								36				
310001 12-03-13	37	Subtract line 36 from line								37		220	.216	· -

Form 1040 (2013)	В	RADLEY S. SCHNEIDER						Page 2
Tax and	38	Amount from line 37 (adjusted gross income)					38	220,216.
Credits	39a	Check \(\sum \) You were born before Janu	ıary 2, 1949,	Blind.	Total boxes	;		
Standard Deduction for -		if: Spouse was born before Ja	anuary 2, 1949, 🛚	Blind.	checked	➤ 39a		
 People who 	b	If your spouse itemizes on a separate return of	r you were a dual-st	tatus alien, chec	k here	▶ 39b X		
on line 39a or	40	Itemized deductions (from Schedule A) or you					40	55,221.
39b 0f who can be claimed as a	41						41	164,995.
dependent, see instructions.	42	Exemptions. If line 38 is \$150,000 or less, mu					42	0.
	43	Taxable income. Subtract line 42 from line 41	I. If line 42 is more	than line 41, en	ter -0		43	164,995.
	44	Tax. Check if any from: a Form(s)	8814 b Form	1 4972 C			44	38,745.
	45	Alternative minimum tax. Attach Form 6251					45	6,713.
 All others: Single or 	46	Add lines 44 and 45					46	45,458.
Married filing	47	Foreign tax credit. Attach Form 1116 if require	d		47			
separately, \$6,100	48	Credit for child and dependent care expenses.	Attach Form 2441		48			
Married filing jointly or	49	Education credits from Form 8863, line 19			49			
Qualifying	50	Retirement savings contributions credit. Attacl			50			
widow(er), \$12,200	51	Child tax credit. Attach Schedule 8812, if requi			51			
Head of	52	Residential energy credits. Attach Form 5695			52			
household, \$8,950	53	Other credits from Form: a X 3800 b	8801 c]	53			
	54	Add lines 47 through 53. These are your total					54	
	55	Subtract line 54 from line 46. If line 54 is more					55	45,458.
Other	56	Self-employment tax. Attach Schedule SE	· · · · · · · · · · · · · · · · · · ·	<u></u> .			56	
Taxes	57	Self-employment tax. Attach Schedule SE Unreported social security and Medicare tax fr	om Form: a 🔲	4137 b	8919		57	
	58	Additional tax on IRAs, other qualified retireme	ent plans, etc. Attac	h Form 5329 if	required		58	
	59a	Household employment taxes from Schedule I	Н				59a	14,162.
	b	First-time homebuyer credit repayment. Attach	Form 5405 if requ	ired			59b	
	60	Taxes from: a X Form 8959 b X Form	m 8960 🏿 🔛 Ins	st.; enter code(s	s)		60	1,058.
	61	Add lines 55 through 60. This is your total tax				>	61	60,678.
Payments	62	Federal income tax withheld from Forms W-2 a	and 1099		62	19,869.		
	63	2013 estimated tax payments and amount app	lied from 2012 retu	ırn	63	14,300.		
If you have a qualifying	64 a	Earned income credit (EIC)			64a			
child, attach	b	Nontaxable combat pay election	64b					
Schedule EIC.	65	Additional child tax credit. Attach Schedule 88	12		65			
	66	American opportunity credit from Form 8863,	line 8		66			
	67	Reserved			67			
	68	Amount paid with request for extension to file			68	40,000.		
	69	Excess social security and tier 1 RRTA tax with	nheld		69			
	70	Credit for federal tax on fuels. Attach Form 413	36 . <u></u> <u>.</u>	<u></u>	70			
	71	Credits from Form: a 2439 b Reserv	_{red} c8885 d _		71			
	72	Add lines 62, 63, 64a, and 65 through 71. The	se are your total pa	yments)	72	74,169.
Refund	73	If line 72 is more than line 61, subtract line 61	from line 72. This i	s the amount yo	ou overpaid		73	13,491.
Direct deposit?	74 a	Amount of line 73 you want refunded to you.	If Form 8888 is atta		re	>	74a	
See	► b	Routing C Type: Ch	necking Savings	d Account number				
instructions.	75	Amount of line 73 you want applied to your 2	014 estimated tax	>	75	13,491.		
Amount	76	Amount you owe. Subtract line 72 from line 6	1. For details on ho	w to pay, see in	structions		76	
You Owe	77	Estimated tax penalty (see instructions)			77			
Third Part	_	o you want to allow another person to discuss	this return with the	IRS (see instruction Phone >	ctions)?	X Yes. Complete be	OW. Person	No nal identification ► 1 2 5 7 0
Designee	na	signee's TERI NEWMAN Under penalties of perjury, I declare that I have examine	d this return and accor	no.	(312)	207-1040	numbe	r(PIN) ►135/9
Sign		correct, and complete. Declaration of preparer (other tha	ın taxpayer) is based or	n all information of	which prepare	er has any knowledge.		
Here Joint return?		Your signature	Date	Your occupation			Day	ytime phone number
See instructions. Keep a copy		Spouse's signature. If a joint return, both must sign.	Date	REPRESE Spouse's occupa		V.E.	16 41	ne IRS sent you an Identity
for your		Spouse's signature. If a joint return, DOIN must sign.	Date	орошоо о осоцра			Pro	tection PIN,
records.	P-i	office acceptance In			Dete	Check		er it here
Paid	Prin	t/Type preparer's name Prepa	rer's signature		Date	self-employed	" '	TIN
	щъ	RI NEWMAN TER	T NEGRINALNE		08/10			
Use Only			RI NEWMAN PLLC		08/12		30	1357951
ooc only		10 S. RIVERSIDE		ΨΗ ΕΙ. ΟΟ	R	/	$\frac{36}{312}$	·
310002	Firm	's address ► CHICAGO, IL 606		III F1100	11	Phone no. \	J 1 2	1/ 20/-1040
04-02-14	4 411	ATTICAGO, ID 000	, , , ,					

Form **2210**

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

lacktriangle Information about Form 2210 and its separate instructions is at ${}_{WWW.irs.gov/form2210}$.

► Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

2013Attachment

OMB No.1545-0140

Name(s) shown on tax return

Identifying number

BRADLEY S. SCHNEIDER

Do You Have To File Form 2210?

	l Yes ⊾ [
Complete lines 1 through 7 below. Is line 7 less than \$1,000?	165	Do not file Form	2210 . You do not	owe	a penalty.
No					
↓ 113					
Complete lines 8 and 9 below. Is line 6 equal to or more than	Yes _	You do not owe a	penalty. Do not f	ile Fo	orm 2210
line 9?	-	(but if box E in Pa	art II applies, you r		
T	J	Form 2210).			
↓ No	_				
You may owe a penalty. Does any box in Part II below apply?	Yes ▶	You must file For	m 2210. Does box	B, C	, or D in Part II apply?
		No	Yes		
No			You	u mus	st figure your penalty.
Y		<u> </u>			
Do not file Form 2210. You are not required to figure your					ty because the IRS will
penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III or					d amount. If you want to s a worksheet and enter
Part IV as a worksheet and enter your penalty amount on your tax					but file only page 1 of
return, but do not file Form 2210.		Form 2210.	-		
Part I Required Annual Payment					
1 Enter your 2013 tax after credits from Form 1040, line 55 (see instructi	ions if not filing F	form 1040)		1	45,458.
2 Other taxes, including self-employment tax and, if applicable, Additiona	_		-		
Income Tax (see instructions)			1	2	15,220.
3 Refundable credits (see instructions)				3	()
4 Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop; y				4	60,678.
5 Multiply line 4 by 90% (.90)		5	54,610.		
6 Withholding taxes. Do not include estimated tax payments (see instruc				6	19,869.
7 Subtract line 6 from line 4. If less than \$1,000, stop; you do not owe a				7	40,809.
8 Maximum required annual payment based on prior year's tax (see instr	ructions)			8	14,773.
9 Required annual payment. Enter the smaller of line 5 or line 8				9	14,773.
Next: Is line 9 more than line 6?					
No. You do not owe a penalty. Do not file Form 2210 unless box E					
Yes. You may owe a penalty, but do not file Form 2210 unless one		in Part II below applie	s.		
 If box B, C, or D applies, you must figure your penalty and file F 					
 If box A or E applies (but not B, C, or D) file only page 1 of Forn a bill for any unpaid amount. If you want to figure your penalty, yo 					
only page 1 of Form 2210.	u illay use Pait i	II OF IV as a WORKSHEE	t and enter your pen	ally of	r your tax return, but me
Part II Reasons for Filing. Check applicable boxes. If non	e apply, do no	t file Form 2210.			
A You request a waiver (see instructions) of your entire penalty. You			of Form 2210, but yo	u are r	not required
to figure your penalty.					
B You request a waiver (see instructions) of part of your penalty. Yo	u must figure yo	ur penalty and waiver	amount and file For	m 221	0.
C Your income varied during the year and your penalty is reduced or	eliminated wher	n figured using the an	nualized income in	stallm	ent method. You must
figure the penalty using Schedule AI and file Form 2210.					
D Your penalty is lower when figured by treating the federal income t	tax withheld from	n your income as paid	on the dates it was a	actuall	y withheld, instead of in
equal amounts on the payment due dates. You must figure your pe					
E X You filed or are filing a joint return for either 2012 or 2013, but not			naller than line 5 abo	ve. Yo	u must file page 1 of
Form 2210, but you are not required to figure your penalty (unless	box B, C, or D a	applies).			
LHA For Paperwork Reduction Act Notice, see separate instruc	tions.				Form 2210 (2013)

312501 01-07-14

Part IV Regular Method (See the instructions if you are filing Form 1040NR or 1040NR-FZ) Payment Due Dates Section A - Figure Your Underpayment (a) 4/15/13 (c) 9/15/13 (d) 6/15/13 1/15/14 18 Required installments. If box C in Part II applies, enter the amounts from Schedule AI, line 25. Otherwise, enter 3,693. 3,693. 3,693. 3,694. 18 25% (.25) of line 9, Form 2210, in each column 19 Estimated tax paid and tax withheld. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 18 for all payment periods, stop here; you do not owe a penalty 9,398 9,967 4,967 9,837. Do not file Form 2210 unless you checked a box in Part II 19 Complete lines 20 through 26 of one column before going to line 20 of the next column. 20 Enter the amount, if any, from line 26 in the previous 5,705. 11,979. 13,253. 20 21 Add lines 19 and 20 15,672. 16,946. 23,090. 21 22 22 Add the amounts on lines 24 and 25 in the previous column 23 Subtract line 22 from line 21. If zero or less, enter -0-. 9,398 15,672. 16,946. 23,090. 23 For column (a) only, enter the amount from line 19 24 If line 23 is zero, subtract line 21 from line 22. 0 0 Otherwise, enter -0-24 25 Underpayment. If line 18 is equal to or more than line 23, subtract line 23 from line 18. Then go to line 20 of the next column. Otherwise, go to line 26 25 26 Overpayment. If line 23 is more than line 18, subtract line 5,705. 11,979. 13,253 18 from line 23. Then go to line 20 of the next column 26

Section B - Figure the Penalty (Use the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty in the instructions.)

Form 2210 (2013)

Penalty. Enter the total penalty from line 14 of the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty. Also include this amount on Form 1040, line 77; Form 1040A, line 46; Form 1040NR, line 74; Form 1040NR-EZ, line 26; or Form 1041, line 26. Do not file Form 2210 unless you checked a box in Part II

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service 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

BRADLEY	s.	SCHNEIDER				
Medical		Caution. Do not include expenses reimbursed or paid by others.				
and	1	Medical and dental expenses (see instructions)	1			
Dental	-	Enter amount from Form 1040, line 38	H			
Expenses	3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before	1			
	·	January 2, 1949, 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-	0		4	
Taxes You	5	State and local (check only one box):	T			
Paid	·	a X Income taxes, or \ SEE STATEMENT 7	5	15,4	422.	
		b General sales taxes	H			
	6	Real estate taxes (see instructions)	6	12.3	150.	
	7	Personal property taxes	7			
	8	Other taxes. List type and amount	_			
	٠		8			
	9	Add lines 5 through 8	 		9	27,572.
Interest	10	Home mortgage interest and points reported to you on Form 1098	10	1.'	714.	27,3721
You Paid	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	10		,	
Note.			11			
Your mortgage	10	Points not reported to you on Form 1098. See instructions for special rules	12			
interest deduction may		Mortgage insurance premiums (see instructions)	13			
be limited (see	14	Investment interest. Attach Form 4952 if required. (See instructions.)	14			
instructions).	15	Add lines 10 through 14	1-4		15	1,714.
Gifts to	16		16	28.0	035.	STMT 8
Charity		Other than by cash or check. If any gift of \$250 or more, see instructions.	<u></u>			
If you made a		You must attach Form 8283 if over \$500	17			
gift and got a	18	Carryover from prior year	18			
benefit for it, see instructions		Add lines 16 through 18			19	28,035.
Casualty and						•
Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)			20	
Job Expenses and Certain Miscellaneous Deductions		Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶				
Doddotions			21			
	22	Tax preparation fees	22	1,6	530.	
	23	Other expenses - investment, safe deposit box, etc. List type and amount SEE STATEMENT 6				
			00	1 '	766.	
	04	Add East Od through CO	23	3,	396.	
	24	Add lines 21 through 23	24	5,.	370.	
	25 26	Enter amount from Form 1040, line 38 [25] 220, 216.	26	1	104.	
	27	Multiply line 25 by 2% (.02) Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	20	-,	27	0.
Other	28	Other - from list in instructions. List type and amount			21	
Miscellaneous Deductions		FROM K-1 - MDRJB PARTNERSHIP			5.	6.
	29	Is Form 1040, line 38, over \$150,000?			<u> </u>	
		No. Your deduction is not limited. Add the amounts in the far right column)			
Total		for lines 4 through 28. Also, enter this amount on Form 1040, line 40.	S	гмт 9	29	55,221.
Itemized		X Yes. Your deduction may be limited. See the Itemized Deductions	7	-	20	,
Deductions		Worksheet in the instructions to figure the amount to enter.	J			
	30	If you elect to itemize deductions even though they are less than your standard ded	uction	n		
	50	check here	Journ	" ▶ □		

LHA 319501 12-17-13 For Paperwork Reduction Act Notice, see Form 1040 instructions.

SCHEDULE B

(Form 1040A or 1040)

Interest and Ordinary Dividends

► Attach to Form 1040A or 1040.

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Information about Schedule B (Form 1040A or 1040) and its instructions is at way irs

BRADLEY S	5.	SCHNEIDER				
Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the		Am	ount	
Interest		property as a personal residence, see instructions and list this interest first. Also, show that				
		buyer's social security number and address				
		THE PRIVATEBANK				18.
		FROM K-1 - MDRJB PARTNERSHIP				4.
		FROM K-1 - AERODIRECT FUND II, LLC				1.
			1			
Note. If you						
received a Form 1099-INT,						
Form 1099-OID,						
or substitute statement from						—
a brokerage firm,						—
list the firm's name as the						—
payer and enter						
the total interest shown on that	2	Add the amounts on line 1	2			23.
form.	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.	┢▔			
	Ĭ	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			23.
		te. If line 4 is over \$1,500, you must complete Part III.		An	nount	
Part II	5	List name of payer				
Ordinary		CHARLES SCHWAB & CO., INC.				74.
Dividends		MESIROW FINANCIAL				3.
		MESIROW FINANCIAL				54.
		NATIONAL FINANCIAL SERVICES LLC			2,83	<u> 15.</u>
Note. If you			5			
received a Form 1099-DIV or						
substitute						
statement from a brokerage firm,						
list the firm's						
name as the payer and enter						
the ordinary dividends shown		SUBTOTAL FOR LINE 5			3,24	16
on that form.		TAX-EXEMPT DIVIDENDS SEE STATEMENT 10			-14	
	6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a	6		3,10	
		te. If line 6 is over \$1,500, you must complete Part III.	_		- / -	
		u must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a	a foreio	n		
Part III		count; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.		j 	Yes	No
Foreign		At any time during 2013, did you have a financial interest in or signature authority over a financial ac	ccount	(such		
Accounts		as a bank account, securities account, or brokerage account) located in a foreign country? See inst				X
and		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (
Trusts		formerly TD F 90-22.1 to report that financial interest or signature authority? See FinCEN Form 114				
		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 financia	l acco	unt		
		is located				
007501	8	During 2013, did you receive a distribution from, or were you the grantor of, or transferor to, a foreig	n trus	t?		
327501 09-30-13		If "Yes," you may have to file Form 3520. See instructions				X

Interest and Dividend Summary

Name: BRADLEY S. SCHNEIDER		Interest on U.S.	Tax-Exempt	Private Activity	Original Issue	FEIN/SSN: Ordinary	Qualified	Capital Gain	Federal Income	State Tax	Foreign
Payer	Interest	Savings Bonds	Interest	Interest	Discount (OID)	Dividends	Dividends	Distributions	Tax Withheld	Withheld	Tax Paid
THE PRIVATEBANK	18.										
MESIROW FINANCIAL											
MESIROW FINANCIAL - TAX-EXEMPT											
FEES											
CHARLES SCHWAB & CO., INC.						74.	74.				
MESIROW FINANCIAL						3.					
MESIROW FINANCIAL						222.		63,			
NATIONAL FINANCIAL SERVICES											
LLC				14.		2,801.	1,078.	1,087.			
MESIROW FINANCIAL - ACCRUED											
INTEREST PURCHASED											
FROM K-1 - MDRJB PARTNERSHIP	4.										
FROM K-1 - AERODIRECT FUND II,											
LLC	1.										
TOTALS	23.			14.		3,100.	1,152.	1,150.			

SCHEDULE C (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

For information on Schedule C and its instructions, go to www.irs.gov/schedulec.

Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

Name o	of proprietor	S	Social security number (SSN)				
ק ק ק	DLEY S. SCHNEIDER						
	Principal business or profession, including	a prod	unt or nonvino (nee instructions)			Enter or	ode from instructions
A INS	SURANCE SALES	ig prod	uct or service (see instructions)		ľ	Line	► 524210
C	Business name. If no separate business r	name, I	eave blank.		-	Employ	er ID number (EIN), (see instr.)
DAV	IS DANN ADLER SCHN					36	-4153252
E	Business address (including suite or room	m no.)	>				
	City, town or post office, state, and ZIP co	ode					
F	Accounting method: (1) X Cash		2) Accrual (3) Oth				
G	Did you "materially participate" in the ope	ration o	of this business during 2013? If "N	No," see instructions for limit on losses			X Yes No
Н	If you started or acquired this business d						▶ٰ
T	Did you make any payments in 2013 that			(see instructions)			
	If "Yes," did you or will you file required F	orms 1	099?				Yes No
	t I Income						
1	Gross receipts or sales. See instructions						60 701
				>		1	69,784.
2						2	60 704
3						3	69,784.
4						4	60 704
5	Gross profit. Subtract line 4 from line 3			:		5	69,784.
6				instructions)		6	69,784.
7	Gross income. Add lines 5 and 6		F		<u>. • </u>	7	•
	t II Expenses	_		usiness use of your home on			30.
8	Advertising	8	18	Office expense		18	
9	Car and truck expenses	١.	19	Pension and profit-sharing plans		19	
	(see instructions)	9	20	Rent or lease (see instructions):			
10	Commissions and fees	10		Vehicles, machinery, and equipment		20a	
11	Contract labor (see instructions)	11		Other business property		20b	
12	Depletion	12	21	Repairs and maintenance		21	
13	Depreciation and section 179		22	Supplies (not included in Part III)		22	
	expense deduction (not included in		23	Taxes and licenses		23	
	Part III) (see instructions)	13	24	Travel, meals, and entertainment:			
14	Employee benefit programs (other	١	a .	Travel		24a	
45	than on line 19)	14		Deductible meals and		l	
15	Insurance (other than health)	15		entertainment (see instructions)		-	
16	Interest		25	Utilities		25	
a	Mortgage (paid to banks, etc.)	16a	26	Wages (less employment credits)		26	
. b	Other	16b		Other expenses (from line 48)		27a	
17	Legal and professional services	17		Reserved for future use		27b	
28	Total expenses before expenses for busing		-		. •	28	69 794
29	Tentative profit or (loss). Subtract line 28			AU 1.5 0000		29	69,784.
30	Expenses for business use of your home.			e. Attach Form 8829			
	unless using the simplified method (see i						
	Simplified method filers only: enter the		-				
	and (b) the part of your home used for bu			I I' 00			
•	Use the Simplified Method Worksheet in		-	enter on line 30		30	
31	Net profit or (loss). Subtract line 30 from			- 0-b-d-l- 05 li 0)		
	• If a profit, enter on both Form 1040, li					ا ر ا	60 701
	(If you checked the box on line 1, see ins	ıructioi	is). Estates and trusts, enter on F	orm 1041, line 3.	r	31	69,784.
00	If a loss, you must go to line 32.)					
32	If you have a loss, check the box that des		00	All investment			
	If you checked 32a, enter the loss on b		32a	is at risk.			
	(If you checked the box on line 1, see the			, enter on Form 1041, line 3.		32b	Some investment is not at risk.
	If you checked 32b, you must attach F				J	0-1	I.I. 0 /F 4040\ 0010
LHA	For Paperwork Reduction Act Notice, se	e the s	eparate instructions.			Sched	lule C (Form 1040) 2013

320001 10-28-13

2013 DEPRECIATION AND AMORTIZATION REPORT DAVIS DANN ADLER SCHNEIDER, LLC

SCHEDULE C- 1

	I	1		l						ренивон		
Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
4	COMPUTER	051508	200DB	5.00	17	1,549.		775.	774.	729.		0.
5	PRINTER/SCANNER	051508	200DB	5.00	17	326.		163.	163.	154.		0.
6	LAPTOP COMPUTER	081208	200DB	5.00	17	2,617.		1,309.	1,308.	1,233.		0.
7	BACK UP SYSTEM	110308	200DB	5.00	17	328.		164.	164.	155.		0.
8	WIRELESS BOOSTER	111008	200DB	5.00	17	109.		55.	54.	51.		0.
9	IPHONE	120208	200DB	5.00	17	452.		226.	226.	213.		0.
	TOTAL SCH C DEPRECIATION					5,381.		2,692.	2,689.	2,535.		0.
		Ш										

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

2013

Attachment
Sequence No. 12

Name(s) shown on return

Your social security number

BRADLEY S. SCHNEIDER

Pa	rt I Short-Term Capital Gains and Lo	sses - Assets Held	d One Year or Less	5	
	instructions for how to figure the amounts to r on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss from	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.		(sales price)	(or other basis)	Form(s) 8949, Part I, line 2, column (g)	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	16,850.	17,142.		<292.>
1 b	Totals for all transactions reported on Form(s) 8949 with Box A checked				
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	67,853.	68,839.		<986.>
3	Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 5	Short-term gain from Form 6252 and short-term g Net short-term gain or (loss) from partnerships, S	_			
6	from Schedule(s) K-1 Short-term capital loss carryover. Enter the amou Carryover Worksheet in the instructions	5	()		
7	Net short-term capital gain or (loss). Combine	lines 1a through 6 in col	umn (h). If you have any	long-term	4

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

capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2

	instructions for how to figure the amounts to r on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss from	(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off s to whole dollars.	(sales price)	(or other basis)	Form(s) 8949, Part II, line 2, column (g)	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	7,326.	7,130.		196.
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked				
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	132,574.	127,780.	14.	4,808.
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 from Forms 4684, 6781, and 8824	SEE ST	and long-term gain or (lo ATEMENT 13 ATEMENT 14	11 <u>11</u>	18,289.
12	Net long-term gain or (loss) from partnerships, S			(s) K-112	<9 . >
13	Capital gain distributions	SEE S	TATEMENT 15	13	1,150.
14	Long-term capital loss carryover. Enter the amountain the instructions	•	f your Capital Loss Car ı	-	()
15	Net long-term capital gain or (loss). Combine l Part III on page 2	ines 8a through 14 in co	lumn (h). Then go to	15	24,434.
ΙНΛ	For Paperwork Reduction Act Notice see vo			Schad	ule D (Form 1040) 2013

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

Schedule D (Form 1040) 2013

<1,278.>

Pa	Summary		
16	Combine lines 7 and 15 and enter the result	. 16	23,156.
	 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? X Yes. Go to line 18. 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 SEE STATEMENT 16	19	5,151.
20	Are lines 18 and 19 both zero or blank? 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.		
	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:		
	 The loss on line 16 or (\$3,000), or if married filing separately, (\$1,500) 	21 ()
	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?		
	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).		
	No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2013

Department of the Treasure

Internal Revenue Service

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

Attachment Sequence No. 12A

Name(s) shown on return

Social security number or taxpayer identification no.

BRADLEY S. SCHNEII	DER						
Most brokers issue their own substitute statem Before you check Box A, B, or C below, determ							
IRS for most stock you bought in 2011 or later.	mic whether you receive	ed any statement(s) a	nu, ii so, the transaction	o for which basis was re-	Sorted to the	ino. Brokers are required	to report basis to the
Note. You may aggregate a codes are required. Enter the	all short-term transa	ctions reported on	Form(s) 1099-B show	wing basis was report	ted to the IF	RS and for which no	adjustments or
You must check Box A, B, or C below. If you have more short-term transactions than v (A) Short-term transactions re (B) Short-term transactions re (C) Short-term transactions n	eported on Form(seported on Form(seported)	s) 1099-B showii s) 1099-B showii	ng basis was repo ng basis was not r	rted to the IRS (se	e Note ab	ove)	for each applicable box.
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	loss. If you	nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions. (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
MESIROW FINANCIAL							
- SEE ATTACHED	VARIOUS		67,851.	68,839.			<988.
NFS - SEE							
ATTACHED	VARIOUS		2.				2.
	1						
	1						
	1						
	 						
	+						
2 Totals. Add the amounts in col	umps (d) (a) (a)	and (h) (eubtroot					
negative amounts) Enter each							

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.

323011 12-18-13 LHA For Paperwork Reduction Act Notice, see separate instructions.

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)

Form 8949 (2013)

67,853.

rm 8949 (2013) Attachment Sequence No. 12A

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 no.

BRADLEY S. SCHNEIDER

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II Long-Term. Transactions involving capital assets you held more than one 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 total directly on Schedule D, line 8a; you are not 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. ctions 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 Adjustment, if any, to gain or (b) (c) (d) (e) (h) loss. If you enter an amount Proceeds Cost or other Gain or (loss). Date acquired Date sold or Description of property in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed column (f). See instructions. Note below and rom column (d) and (Mo., day, yr.) (g) Amount of see Column (e) in combine the result Code(s) the instructions with column (g) adjustment MESIROW FINANCIAL SEE ATTACHED VARIOUS 67,785. 64,870 2,915. NFS - SEE ATTACHED VARIOUS 14,462. 12,585.W 14. 1,891 MESIROW FINANCIAL - SEE ATTACHED 50,327. 50,325 VARIOUS 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 132,574. 127,780. above is checked), or line 10 (if Box F above is checked)

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** (2013)

2013.04010 SCHNEIDER, BRADLEY

323012 12-18-13

SCHEDULE E

(Form 1040)

Department of the Treasury Internal Revenue Service (

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074
2013
Attachment

Name(s) shown on return

Your social security number

DD.	ADIEN G GGIIN	TT2 T	ומח									
Pa	ADLEY S. SCHN			x n Rental Real Estat	e and Rov	alties	Note If you a	re in th	a husingse of	renting per	eonal prop	orty use
Pa				nstructions). If you are an	_		_					_
Λ.				3 that would require you t					o ironii i orini -	on pag		X No
	f "Yes," did you or will yo				to file i offil(s)	1033 !	(See Instruction	13)			Yes [No
$\overline{}$				(street, city, state, ZIP co	nde)							
A	Triysical address of each	I DIO	Derty	(Street, City, State, Zir Co	ode)							
В												
C												
1b	Type of Property	2	For	each rental real estate pro	perty listed					Fair Renta	Persona	I QJV
	(from list below)	-	abo	ve, report the number of fa	air rental and					Days	Use Day	
Α	1	1	pers	sonal use days. Check the r if you meet the requirement	ents to file as				Α	365		
В		1	a qi	ualified joint venture. See i	nstructions.				В			
С		1							С			
	e of Property:											
1 S	ingle Family Residence	3	Vac	ation/Short-Term Rental	5 Land		7 Self-Rental					
	ulti-Family Residence	4	Cor	nmercial	6 Royaltie	s	8 Other (des	cribe)				
	ome:				Properties:		A		В		С	
3	Rents received					3	20,1	82.				
4	Royalties received					4						
Exp	enses:											
5	Advertising					5						
6	Auto and travel (see ins	truct	ions)			6						
7						7						
8						8						
9	I					9	1,6	37.				
10	Legal and other profess	sional	fees	S		10						
11	Management fees					11						
12	Mortgage interest paid	to ba	nks,	etc. (see instructions)		12						
13	Other interest					13						
14	Repairs					14						
15	Supplies					15		-				
16						16	7,4	63.				
17	Utilities					17		16				
18				n		18	9,2	46.				
19	Other (list)					19	10.5	4.6				
20				ıgh 19		20	18,3	46.				
21				s) and/or 4 (royalties). If res			1 0	ا ء د				
				t if you must file Form 619	8	21	1,8	30.				
22				after limitation, if any, on								
	Form 8582 (see instruc					22	()(20	100)
	-			line 3 for all rental properti				23a	20,	182.		
b	•			line 4 for all royalty proper	ties			23b				
С	Total of all amounts rep							23c	0	246		
	Total of all amounts rep							23d		246.		
e	Total of all amounts rep							23e	10,	346.	1	836.
24	· ·			hown on line 21. Do not in	_		00 Fata-1-11			24	Ι,	020.
25				line 21 and rental real esta)
26			_	alty income or (loss). Cor						, [
	· -			apply to you, also enter th nt in the total on line 41 or		OIIII	1040, III E 17, OF	FOITH	IO4UNH, IIIIE		1	836.
	io. Otherwise, iliciade l	u no d	mou	ni in the total on line 41 of	ı µay€ ∠					26	Ι,	990.

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

Schedule E (Form 1040) 2013

	dule E (Form 1040) 2013				Attachment S			Page 2
Name	(s) shown on return. Do not enter name and social security number if sh	nown on page 1.				You	r social secu	rity number
BR	ADLEY S. SCHNEIDER							
	ion. The IRS compares amounts reported on your tax return	with amounts sh	nown on Schedule(s) K	·-1.				
	rt II Income or Loss From Partnership				ort a loss fron	n an at-ris	k activity fo	r which
	any amount is not at risk, you must check c							
27	Are you reporting any loss not allowed in a prior year due	to the at-risk, exc	ess farm loss, or basis	limitations,	a prior year una	llowed loss	s from a	
	passive activity (if that loss was not reported on Form 858)	2), or unreimburs	sed partnership expens	ses?			Yes	X No
	If you answered "Yes," see instructions before completing	this section.						
28	(a) Name			(b) _{Enter} P _{for} partnership; S	(C) Check if foreign	(d) Emp		(e) Check if any amount is
	.,			for S corporation	partnership	lentificatio		not at risk
Α	MDRJB PARTNERSHIP			P		0-857		
В	AERODIRECT FUND II, LLC			P		0-839		
C	LEAD-OUT THIRD SOLUTIONS	LNVESTME	NT, LLC	P		7-246		
D	AERODIRECT FUND III, LLC			P		0-093		
	Passive Income and Loss		/b) Namanaina lan		assive Incom			
		ssive income Schedule K-1	(h) Nonpassive los from Schedule K-		ction 179 expension from Form 4		(j) Nonpassiv from Sched	
Α	5,054.							
В			2	26.				
C	0.							
D	269.							
29a	Totals							
b	Totals 5,323.		2	6.			_	
30						30		
31	Add columns (f), (h), and (i) of line 29b					31	(349.)
32	Total partnership and S corporation income or (loss). Co	ombine lines 30 a	nd 31. Enter the				١.	- 240
	result here and include in the total on line 41 below	T				32	-:	349.
Pa	rt III Income or Loss From Estates and	irusts						
33		(a) Name					(b) Emplidentification	

Passive Income and Loss Nonpassive Income and Loss (c) Passive deduction or loss allowed (d) Passive income (e) Deduction or loss (f) Other income from (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 Schedule K-1 A В Add columns (d) and (f) of line 34a 35 36 36 Add columns (c) and (e) of line 34b 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 (c) Excess inclusion from (d) Taxable income (net (b) Employer (e) Income from Schedules Q, line 2c (see instructions) loss) from Schedules Q, 38 (a) Name Schedules Q, line 3b identification number line 1b 39 39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below ENTIRE DISPOSITION OF PASSIVE 40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below -3,513. 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 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

Schedule E (Form 1040) 2013

identification number

Α В

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

S				

Name BRADLEY S. SCHNEIDER			SSN/EIN_	
Passthrough MDRJB PARTNERSHIP	ID	20-8575774		TAXPAYER
DAD MANDE GUATE				

PARTNERSHIP								
		Prior Year Unallowed	Disallowed Due to	Prior Year Unallowed	Disallowed Due to	Prior Year Passive	Disallowed Passive	
OTHER PASSIVE	K-1 Input	Basis Loss	Basis Limitation	At-Risk Loss	At-Risk	Loss	Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	936.							
Rental real estate income (loss)	-5,990.							
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Excess farm loss								
Net income (loss)	-5,054.							-5,054.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	-5,054.							-5,054.
FORM 4797								
Section 1231 gain (loss)	18,289.							18,289.
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions	1.							1.
Deductions related to portfolio income	777.							777.
Other								

S				

Name BRADLEY S. SCHNEIDER	_		SSN/EIN		
Passthrough MDRJB PARTNERSHIP	ID	20-8575774		TAXPAYER	
D3 DWM DD GUT D					

PARTNERSHIP								
OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income	4.							4.
Interest from U.S. bonds								
Ordinary dividends								
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86	401.							401.
Adjusted gain or loss	-602.							-602.
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits	11.							11.
Casualty and theft loss								

S				

Name BRADLEY S. SCHNEIDER			SSN/EIN	
Passthrough AERODIRECT FUND II, LLC	ID	20-8396751		TAXPAYER
PARTNERSHIP				

PARTNERSHIP								
		Prior Year Unallowed	Disallowed Due to	Prior Year Unallowed	Disallowed Due to	Prior Year Passive	Disallowed Passive	
OTHER PASSIVE	K-1 Input	Basis Loss	Basis Limitation	At-Risk Loss	At-Risk	Loss	Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	-24.							
Rental real estate income (loss)								
Other net rental income (loss)	-2.							
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Excess farm loss								
Net income (loss)	-26.							-26.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	-26.							-26.
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)	-9.							-9.
Section 1256 contracts & straddles								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income								
Other								

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Name BRADLEY S. SCHNEIDER			SSN/EIN	
Passthrough AERODIRECT FUND II, LLC	ID	20-8396751		TAXPAYER
PARTNERSHIP				

FARINERSHIF								
OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income	1.							1.
Interest from U.S. bonds								
Ordinary dividends								
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86								
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								

	IJБ	

Name BRADLEY S. SCHNEIDER			SSN/EIN
Passthrough LEAD-OUT THIRD SOLUTIONS INVESTMENT, LLC	ID	27-2461596	TAXPAYER
DAD MARED CILL D			

PARTNERSHIP								
		Prior Year Unallowed	Disallowed Due to	Prior Year Unallowed	Disallowed Due to	Prior Year Passive	Disallowed Passive	
OTHER PASSIVE	K-1 Input	Basis Loss	Basis Limitation	At-Risk Loss	At-Risk	Loss	Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)								
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Excess farm loss								
Net income (loss)								
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)								
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income	120.							120.
Other								

_	_		_	_		_	
S		_	_	וו		_	_

Name BRADLEY S. SCHNEIDER			SSN/EIN	
Passthrough LEAD-OUT THIRD SOLUTIONS INVESTMENT, LLC	ID	27-2461596		TAXPAYER
PARTNERSHIP				

PARTNERSHIP								
	IZ d Immud	Prior Year Unallowed Basis Loss	Disallowed Due to	Prior Year Unallowed At-Risk Loss	Disallowed Due to		Disallowed Passive	Tay Datum
OTHER PASSIVE	K-1 Input	Basis Loss	Basis Limitation	At-MISK LOSS	At-Risk	Loss	Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income								
Interest from U.S. bonds								
Ordinary dividends								
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86								
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								
,					I		ll	

S				

Name BRADLEY S. SCHNEIDER			SSN/EIN	
Passthrough AERODIRECT FUND III, LLC	ID	90-0934844		TAXPAYER
PARTNERSHIP				

PARTNERSHIP								
		Prior Year Unallowed	Disallowed Due to	Prior Year Unallowed	Disallowed Due to	Prior Year Passive	Disallowed Passive	
OTHER PASSIVE	K-1 Input	Basis Loss	Basis Limitation	At-Risk Loss	At-Risk	Loss	Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	-269.							
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Excess farm loss								
Net income (loss)	-269.							-269.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	-269.							-269.
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income								
Other								
	•							

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Name BRADLEY S. SCHNEIDER			SSN/EIN	
Passthrough AERODIRECT FUND III, LLC	ID	90-0934844		TAXPAYER
PARTNERSHIP				

PARTNERSHIP		T			<u> </u>	<u> </u>		
	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk		Disallowed Passive Loss	Tax Return
OTHER PASSIVE	K-1 IIIput	Dasis Luss	Dasis Limitation	ALLIISK FOSS	At-HISK	Loss	LOSS	rax neturn
INTEREST AND DIVIDENDS								
Interest income								
Interest from U.S. bonds								
Ordinary dividends								
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86								
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								
Cassary and more root		1					l	

SCHEDULE E- 1

Asset No.	Description	Dat Acqui	te ired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	RESIDENTIAL RESIDENCE	0801	L <mark>01</mark>	SL	27.50	17	254,261.			254,261.	105,173.		9,246.
2	LAND	0801	01	ь			13,382.			13,382.			0.
3	WINDOWS	0601	L 0 2	200DB	7.00	17	2,759.		828.	1,931.	1,931.		0.
	TOTAL SCH E DEPRECIATION						270,402.		828.	269,574.	107,104.		9,246.

Form **3800**

Department of the Treasury Internal Revenue Service (99) **General Business Credit**

▶ Information about Form 3800 and its separate instructions is at www.irs.gov/form3800.
 ▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

2013
Attachment

Identifying number

BRADLEY S. SCHNEIDER

De	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)	_
Pa	(See instructions and complete Part(s) III before Parts I and II)	•	
1	General business credit from line 2 of all Parts III with box A checked	1	
2	Passive activity credits from line 2 of all Parts III with box B checked 2 11.		
3	Enter the applicable passive activity credits allowed for 2013 (see instructions)	3	11.
4	Carryforward of general business credit to 2013. Enter the amount from line 2 of Part III with		
	box C checked. See instructions for statement to attach	4	42.
5	Carryback of general business credit from 2014. Enter the amount from line 2 of Part III with		
	box D checked	5	
6	Add lines 1, 3, 4, and 5	6	53.
Pa	art II Allowable Credit		
7	Regular tax before credits:		
	• Individuals. Enter the amount from Form 1040, line 44, or Form 1040NR, line 42		
	Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the		
	applicable line of your return	7	38,745.
	● Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G,		
	lines 1a and 1b; or the amount from the applicable line of your return		
8	Alternative minimum tax:		
	● Individuals. Enter the amount from Form 6251, line 35		
	Corporations. Enter the amount from Form 4626, line 14	8	6,713.
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56		
9	Add lines 7 and 8	9	45,458.
10a	a Foreign tax credit 10a		
	Certain allowable credits (see instructions)		
	Add lines 10a and 10b	10c	
_			
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	45,458.
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0- 12 38,745.		
10	Enter 25% (.25) of the excess, if any, of line 12 over \$25,000 (see instructions) 13 6,561.		
	Tentative minimum tax:		
	Individuals. Enter the amount from Form 6251, line 33		
	• Corporations. Enter the amount from Form 4626, line 12		
	Estates and trusts. Enter the amount from Schedule I		
	(Form 1041), line 54		
15	Enter the greater of line 13 or line 14	15	45,458.
16	Subtract line 15 from line 11. If zero or less, enter -0-	16	0.
17	Enter the smaller of line 6 or line 16	17	0.
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition,		
	or reorganization.		
_			

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 3800 (2013)

Form 3800 (2013) Page 2

Pa	art II Allowable Credit (Continued)		r ago z
	e. If you are not required to report any amounts on lines 22 or 24 below, skip lines 18 through 25 and enter -0- on line	e 26.	
18	Multiply line 14 by 75% (.75) (see instructions)	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0-	20	
21	Subtract line 17 from line 20. If zero or less, enter -0-	21	
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked		
24	Enter the applicable passive activity credit allowed for 2013 (see instructions)	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0.
27	Subtract line 13 from line 11. If zero or less, enter -0-	27	38,897.
28	Add lines 17 and 26	28	
29	Subtract line 28 from line 27. If zero or less, enter -0-	29	38,897.
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked		
33	Enter the applicable passive activity credits allowed for 2013 (see instructions)	33	
34	Carryforward of business credit to 2013. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	
35	Carryback of business credit from 2014. Enter the amount from line 5 of Part III with box D checked (see instructions)	35	
36	Add lines 30, 33, 34, and 35	36	
37	Enter the smaller of line 29 or line 36	37	
38	Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return: Individuals. Form 1040, line 53, or Form 1040NR, line 50 Corporations. Form 1120, Schedule J, Part I, line 5c Estates and trusts. Form 1041, Schedule G, line 2b	38	

Form 3800 (2013)

Form 3800 (2013) Page 3

Name(s) shown on return

Identifying number BRADLEY S. SCHNEIDER Part III General Business Credits or Eligible Small Business Credits(see instructions) Complete a separate Part III for each box checked below. (see instructions) Α General Business Credit From a Non-Passive Activity Reserved В X F General Business Credit From a Passive Activity Reserved C General Business Credit Carryforwards G Eligible Small Business Credit Carryforwards D General Business Credit Carrybacks Н Reserved If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III (b) If claiming the credit from a ss-through entity, enter the EIN Enter the appropriate amount (a) Description of credit Note. On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity. Investment (Form 3468, Part II only) (attach Form 3468) 1b b 20-8575774 Increasing research activities (Form 6765) C Low-income housing (Form 8586, Part I only) 1d d Disabled access (Form 8826) (see instructions for limitation) 1e Renewable electricity, refined coal, and Indian coal production (Form 8835) 1f Indian employment (Form 8845) 1g Orphan drug (Form 8820) New markets (Form 8874) 1i Small employer pension plan startup costs (Form 8881) (see instructions for limitation) 1j Employer-provided child care facilities and services (Form 8882) (see instructions 1k Biodiesel and renewable diesel fuels (attach Form 8864) Low sulfur diesel fuel production (Form 8896) 1m Distilled spirits (Form 8906) 1n Nonconventional source fuel (Form 8907) Energy efficient home (Form 8908) 1p Energy efficient appliance (Form 8909) 1q a Alternative motor vehicle (Form 8910) 1r Alternative fuel vehicle refueling property (Form 8911) Mine rescue team training (Form 8923) 1u u Agricultural chemicals security (Form 8931) (see instructions for limitation) Employer differential wage payments (Form 8932) 1w Carbon dioxide sequestration (Form 8933) 1x Qualified plug-in electric drive motor vehicle (Form 8936) Qualified plug-in electric vehicle (carryforward only) New hire retention (carryforward only) General credits from an electing large partnership (Schedule K-1 (Form 1065-B)) 1bb bb 1zz **77** Add lines 1a through 1zz and enter here and on the applicable line of Part I 2 Enter the amount from Form 8844 here and on the applicable line of Part II 3 3 Investment (Form 3468, Part III) (attach Form 3468) Work opportunity (Form 5884) 4h Biofuel producer (Form 6478) C Low-income housing (Form 8586, Part II) d Renewable electricity, refined coal, and Indian coal production (Form 8835) 4e Employer social security and Medicare taxes paid on certain employee 4f tips (Form 8846) Qualified railroad track maintenance (Form 8900) Small employer health insurance premiums (Form 8941) h Reserved Reserved **4**z Add lines 4a through 4z and enter here and on the applicable line of Part II

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

Form 3800 (2013) Page 3

Name(s) shown on return

•	s) shown on return			Identifying number
	ADLEY S. SCHNEIDER			
	t III General Business Credits or Eligible Small Business Credit	ts (see	e instructions)	
Com	plete a separate Part III for each box checked below. (see instructions)			
Α	General Business Credit From a Non-Passive Activity	ed		
В	General Business Credit From a Passive Activity F Reserv	ed		
С	General Business Credit Carryforwards G Eligible	Smal	I Business Credit Carryfor	wards
D	General Business Credit Carrybacks H Reserv			
	If you are filing more than one Part III with box A or B checked, complete and attach f	irst an	additional Part III combin	ing amounts from all
	Parts III with box A or B checked. Check here if this is the consolidated Part III (a) Description of credit			>
Note need	. On any line where the credit is from more than one source, a separate Part III is ed for each pass-through entity.		(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
С	Increasing research activities (Form 6765)	1c		42.
d	Low-income housing (Form 8586, Part I only)	1d		
е	Disabled access (Form 8826) (see instructions for limitation)	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		
k	Employer-provided child care facilities and services (Form 8882) (see instructions			
	for limitation)	1k		
-1	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (Form 8907)	10		
р	Energy efficient home (Form 8908)	1 p		
q	Energy efficient appliance (Form 8909)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Reserved	1t		
u	Mine rescue team training (Form 8923)	1u		
V	Agricultural chemicals security (Form 8931) (see instructions for limitation)	1v		
W	Employer differential wage payments (Form 8932)	1w		
X	Carbon dioxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1 y		
Z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	New hire retention (carryforward only)	1aa		
bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B)) \dots	1bb		
ZZ	Other	1zz		10
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		42.
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		-
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		1
b	Work opportunity (Form 5884)	4b		-
С	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d		
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee			
_	tips (Form 8846)	4f		+
g	Qualified railroad track maintenance (Form 8900)	4g		+
h :	Small employer health insurance premiums (Form 8941)	4h		
i	Reserved	4i		
j	Reserved	4j		
Z	Other Add lines 4a through 4z and enter here and on the applicable line of Part II	4z		
5		5 6		42.
6 31440 11-20-		0		Form 3800 (2013)
11-20-	TO TO THE PERSON OF THE PERSON			1 01111 3000 (2013)

$_{\mathsf{Form}}\,4797$

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.

2013

Attachment

Name(s) shown on return

▶ Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

DD 7	ADLEY S. SCHNEIDER							
	nter the gross proceeds from sales of	r exchanges reno	orted to you for:	2013 on Form(s) 1	099-B or 1099-S		Н	
	r substitute statement) that you are i		•	2010 0111 01111(0)	000 2 01 1000 0		1	
Pa	rt I Sales or Exchanges Other Than Casualty	of Property y or Theft-Mo	Used in a Tr ost Property	ade or Busine Held More Th	ess and Involu nan 1 Year (see	ntary Conv instructions)	ersi	ons From
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 oth basis, plus improvements a expense of sal	ınd	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
MDI	RJB PARTNERSHIP						\dashv	18,289.
							\dashv	
3	Gain, if any, from Form 4684, line 39	9		•	•	L	3	
4	Section 1231 gain from installment	sales from Form	6252, line 26 or	37			4	
5	Section 1231 gain or (loss) from like						5	
6	Gain, if any, from line 32, from other						6	
7	Combine lines 2 through 6. Enter th						7	18,289.
	Partnerships (except electing large instructions for Form 1065, Schedu below.	le K, line 10, or F	form 1120S, Sch	nedule K, line 9. Sk	kip lines 8, 9, 11, a	nd 12		
	Individuals, partners, S corporation from line 7 on line 11 below and skip 1231 losses, or they were recapture the Schedule D filed with your return	p lines 8 and 9. It ed in an earlier ye	f line 7 is a gain ear, enter the gai	and you did not ha in from line 7 as a	ave any prior year	section		
8	Nonrecaptured net section 1231 los	sses from prior y	ears (see instruc	ctions)			8	
9	Subtract line 8 from line 7. If zero or	less, enter -0 If	line 9 is zero, e					
	line 9 is more than zero, enter the a							
	capital gain on the Schedule D filed	with your return	(see instruction	s)			9	
Pa	rt II Ordinary Gains and	Losses (see in	structions)					
10	Ordinary gains and losses not include	ded on lines 11 t	hrough 16 (inclu	de property held 1	1 year or less):			
11	Loss, if any, from line 7						11	
12	Gain, if any, from line 7 or amount fr	om line 8, if appl	licable				12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, li						14	
15	Ordinary gain from installment sales						15	
16	Ordinary gain or (loss) from like-kind	exchanges from	Form 8824				16	
17	Combine lines 10 through 16						17	
18	For all except individual returns, ent	er the amount fr	om line 17 on th	e appropriate line	of your return and	skip lines		
	a and b below. For individual returns	s, complete lines	a and b below:					
а	If the loss on line 11 includes a loss the part of the loss from income-pro from property used as an employee	ducing property	on Schedule A	(Form 1040), line 2	28, and the part of	the loss		
							18a	
b	Redetermine the gain or (loss) on lin	ne 17 excluding t	he loss, if any, o	n line 18a. Enter h	nere and on			

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2013)

18b

Form 1040, line 14

19	(a) Description of section 1245, 1250, 1252, 1254, (or 1255	property:			(b) Date acqui (mo., day, yr.		(c) Date sold (mo., day, yr.)
Α						(, ,,,,		(, ,,,,,
В							\neg	
c							\neg	
D							\neg	
	These columns relate to the properties on						\neg	
	lines 19A through 19D.	▶	Property A	Property	В	Property	С	Property D
20	Gross sales price (Note: See line 1 before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
	Adjusted basis. Subtract line 22 from line 21	23						
4	Total gain. Subtract line 23 from line 20	24						
5	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b						
	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975 (see instructions)	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b						
d	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e Additional depreciation after 1969 and before 1976 Enter the smaller of line 26c or 26d	26c 26d 26e						
	Section 291 amount (corporations only)	26f					-	
7	Add lines 26b, 26e, and 26f If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership). Soil, water, and land clearing expenses	26g 27a						
	Line 27a multiplied by applicable percentage	27b					\neg	
	Enter the smaller of line 24 or 27b	27c					\neg	
8 a	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a						
	Enter the smaller of line 24 or 28a	28b						
9 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126 (see instructions)	29a						
	Enter the smaller of line 24 or 29a (see instructions)	29b						
Bun	nmary of Part III Gains. Complete property of	olumns	A through D through	h line 29b before	going	to line 30.		
0	Total gains for all properties. Add property columns	A throu	gh D, line 24				30	
	Add property columns A through D, lines 25b, 26g, Subtract line 31 from line 30. Enter the portion from						31	
	from other than casualty or theft on Form 4797, line		y or their on Form 4	.004, III IB 33. ENU	er urie	portion	32	
Paı	rt IV Recapture Amounts Under Section (see instructions)	ons 17	9 and 280F(b)(2) When Busir	ness	Use Drops t		or Less
	(See Houselong)					(a) Section 179	1	(b) Section 280F(b)(2)
_	Section 179 expense deduction or depreciation allo	wahla i	nrior voore		33		\dashv	
3	OCCUON IT & EXPENSE DEDUCTION OF DEPLECIATION AND	/wanic ii	i piloi yealo		00		- 1	

Form **4797** (2013)

35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report

35

Form **6251**

Alternative Minimum Tax - Individuals

Department of the Treasury Internal Revenue Service (9 ► Information about Form 6251 and its separate instructions is at www.irs.gov/form6251.

► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2013

Attachment Sequence No. 32

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

BRADLEY S. SCHNEIDER		
Part I Alternative Minimum Taxable Income		
1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the	T	
amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	164,995
2 Medical and dental. If you or your spouse was 65 or older, enter the smaller of Schedule A (Form 1040), line 4,		
or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3 Taxes from Schedule A (Form 1040), line 9	3	27,572
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4	
5 Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6 If Form 1040, line 38, is \$150,000 or less, enter -0 Otherwise, see instructions		-2,106
7 Tax refund from Form 1040, line 10 or line 21		
8 Investment interest expense (difference between regular tax and AMT)	-	
Depletion (difference between regular tax and AMT)		
Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
1 Alternative tax net operating loss deduction	11	
2 Interest from specified private activity bonds exempt from the regular tax SEE STATEMENT 19	12	14
3 Qualified small business stock (7% of gain excluded under section 1202)	-	
Exercise of incentive stock options (excess of AMT income over regular tax income)		
5 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		
6 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)		
7 Disposition of property (difference between AMT and regular tax gain or loss)		
Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
9 Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT 17	19	-201
and the state of t	20	
	-	
1 Circulation costs (difference between regular tax and AMT)		
22 Long-term contracts (difference between AMT and regular tax income)		
Mining costs (difference between regular tax and AMT)		
24 Research and experimental costs (difference between regular tax and AMT)		
5 Income from certain installment sales before January 1, 1987		
6 Intangible drilling costs preference		
7 Other adjustments, including income-based related adjustments	27	
8 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is		190 274
more than \$238,550, see instructions.) Part II Alternative Minimum Tax (AMT)	28	190,274
Exemption. (If you were under age 24 at the end of 2013, see instructions.)		
IF your filing status is AND line 28 is not over THEN enter on line 29		
Single or head of household \$115,400 \$51,900		
Married filing jointly or qualifying widow(er) 153,900 80,800		12 060
Married filing separately 76,950 40,400 STMT 18	29	12,069
If line 28 is over the amount shown above for your filing status, see instructions.		170 005
O Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30	178,205
1 ● If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter.		
 If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends 		
on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured		45 450
for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 60 here.	31	45,458
 All others: If line 30 is \$179,500 or less (\$89,750 or less if married filing separately), multiply line 30 by 		
26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,590 (\$1,795 if married filing		
separately) from the result.		
2 Alternative minimum tax foreign tax credit (see instructions)	32	
3 Tentative minimum tax. Subtract line 32 from line 31	33	45,458
4 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47).		
If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	34	38,7 <u>45</u> 6,713
5 AMT. Subtract line 34 from line 33. If zero or less, enter -0 Enter here and on Form 1040, line 45		

	m 6251 (2013) BRADLEY S. SCHNEIDER				Page 2
P	art III Tax Computation Using Maximum Capital Gains Rates	;			
	Complete Part III only if you are required to do so by line 31 or by the For	reign Earne	ed Income Tax Worksh	eet in th	e instructions.
36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ,	enter the a	amount from		
	line 3 of the worksheet in the instructions for line 31			36	178,205.
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax	1 1			
	Worksheet in the instructions for Form 1040, line 44, or the amount from				
	line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D				
	(Form 1040), whichever applies (as refigured for the AMT, if necessary) (see				
	instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the				
	amount to enter	37	19,157.		
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the				
	AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ,				
	see instructions for the amount to enter	38	5,151.		
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the				
	AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter				
	the smaller of that result or the amount from line 10 of the Schedule D Tax				
	Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555		04 000		
	or 2555-EZ, see instructions for the amount to enter	39	24,308.		04 200
	Enter the smaller of line 36 or line 39			40	24,308
	Subtract line 40 from line 36			41	153,897.
42	If line 41 is \$179,500 or less (\$89,750 or less if married filing separately), multiply li	_			
	Otherwise, multiply line 41 by 28% (.28) and subtract \$3,590 (\$1,795 if married fili	ng separat	ely) from		41 206
	the result		>	42	41,296
43	Enter:	1 1			
	• \$72,500 if married filing jointly or qualifying widow(er),		36,250.		
	• \$36,250 if single or married filing separately, or	43	30,230.	-	
	• \$48,600 if head of household.				
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain				
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from				
	line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D				
	(Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form				
	1040, line 43; but do not enter less than -0-	44	145,838.		
15	Subtract line 44 from line 43. If zero or less, enter -0-	45	0.		
+0	Subtract line 44 from line 45. If Zero of 1655, effect 5				
46	Enter the smaller of line 36 or line 37	46	19,157.		
47	Enter the smaller of line 45 or line 46. This amount is taxed at 0%	47	0.		
	Subtract line 47 from line 46	48	19,157.		
49	Enter the amount from the Line 49 Worksheet in the instructions STMT 20	49	84,313.		
	Enter the smaller of line 48 or line 49	50	19,157.		
51	Multiply line 50 by 15% (.15)		>	51	2,874
52	Add lines 47 and 50	52	19,157.		
	If lines 52 and 36 are the same, skip lines 53 through 57 and go to line 58. Oth	nerwise, g	o to line 53.		
53	Subtract line 52 from line 46	53	0.		
54	Multiply line 53 by 20% (.20)		>	54	
	If line 38 is zero or blank, skip lines 55 through 57 and go to line 58. Otherwis	e, go to lir			
55	Add lines 41, 52, and 53	55	173,054.		
56	Subtract line 55 from line 36	56	5,151.		
57	Multiply line 56 by 25% (.25)		>	57	1,288
	Add lines 42, 51, 54, and 57			58	45,458.
59	If line 36 is \$179,500 or less (\$89,750 or less if married filing separately), multiply li	_			
	Otherwise, multiply line 26 by 28% / 28\ and subtract \$2,500 /\$1,705 if married fili	na concret	oly) from	1 1	

45,458. Form **6251** (2013)

59

60

48,102.

60 Enter the smaller of line 58 or line 59 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter

this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31

ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT Social Security Number Name(s) BRADLEY S. SCHNEIDER Adjustment Form Description Income Name Form 6251 Form 6251, Line 17 Form 6251, Line 18 Form 6251, Line 19 Form 6251, Line 20 Other Adjustment 4797 MDRJB PARTNERSHIP REGULAR INCOME 18,289. * AMT NET INCOME 18,289. K1- MDRJB PARTNERSHIP * REGULAR INCOME -5,054. -201. -201. AMT ADJUSTMENTS -5,255. -201. AMT NET INCOME K1- AERODIRECT FUND III, L LС REGULAR INCOME -269. AMT NET INCOME -269. RESIDENTIAL RESIDENCE 1,836. REGULAR INCOME 1,836. AMT NET INCOME ** TOTAL ADJ & PREF ** -201.

ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

Asset No.	Description	Date Acquired	AMT Method	AMT Life	AMT Cost Or Basis	AMT Accumulated	Regular Depreciation	AMT Depreciation	AMT Adjustment
	DAVIS DANN ADLER SCHNEIDER,								
	LLC								
	COMPUTER		8200DE		1,549.		0.	0.	0.
5	PRINTER/SCANNER		8200DE		326.		0.		0.
6	LAPTOP COMPUTER	08120	8200DE	3	2,617.		0.	0.	0.
7	BACK UP SYSTEM		8200DE		328.		0.		0.
8	WIRELESS BOOSTER		8200DE		109.		0.	0.	0.
9	IPHONE	12020	8200DE	3	452.	213.	0.	0.	0.
	RESIDENTIAL RESIDENCE -								
	DE								
1	RESIDENTIAL RESIDENCE	08010	1 _{SL}	27.50	254,261.	105,173.			0.
	** SUBTOTAL **				254,261.	105,173.	9,246.	9,246.	0.
	*** GRAND TOTAL ***				259,642.	107,708.	9,246.	9,246.	0.

328104 05-01-13

SCHEDULE H (Form 1040)

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

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

Attachment Sequence No. 44

Department of the Treasury Internal Revenue Service (99) ▶ Information about Schedule H and its separate instructions is at www.irs.gov/form1040.

OMB No. 1545-1971

Name of employer

BRADLEY S. SCHNEIDER

Social security number

Employer identification number 45-1994229

Ca	ellendar year taxpayers having no household employees in 2013 do not have to complete this form for 2013.										
Δ	Did you pay any one household employee cash wages of \$1,800 or more in 2013? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions before you answer this question.)										
	X Yes. Skip lines B and C and go to line 1. No. Go to line B.										
В	Did you withhold federal income tax during 2013 for any household employee?										
	Yes. Skip line C and go to line 7. No. Go to line C.										
С	Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2012 or 2013 to all household employees? (Do not count cash wages paid in 2012 or 2013 to your spouse, your child under age 21, or your parent.)										
	No. Stop. Do not file this schedule. Yes. Skip lines 1-9 and go to line 10.										
P	Social Security, Medicare, and Federal Income Taxes										
1	Total cash wages subject to social security tax 1 46,536.										
2	Social security tax. Multiply line 1 by 12.4% (.124)	2	5,770.								
3	Total cash wages subject to Medicare tax 3 46,536.										
4	Medicare tax. Multiply line 3 by 2.9% (.029)	4	1,350.								
5	Total cash wages subject to Additional Medicare Tax withholding										
6	Additional Medicare Tax withholding. Multiply line 5 by 0.9% (.009)	6									
7	Federal income tax withheld, if any	7	7,000.								
В	Total social security, Medicare, and federal income taxes. Add lines 2, 4, 6, and 7	8	14,120.								
9	Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2012 or 2013 to all household employees? (Do not count cash wages paid in 2012 or 2013 to your spouse, your child under age 21, or your parent.)										
	No. Stop. Include the amount from line 8 above on Form 1040, line 59a. If you are not required to file Form 1040, see the line 9 instructions.										
	X Yes. Go to line 10.										
		<u> </u>									

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Schedule H (Form 1040) 2013

Part II	Federal U	nemployment (FU	TA) Tax										
												Yes	No
10 Did you pay unemployment contributions to only one state? (If you paid contributions to a credit reduction state,													
see instructions and check "No.")											10	X	
11 Did you p	ay all state u	nemployment contribut	ions for 2013 by	April 15, 201	4? Fiscal ye	ar filers	s see instru	ctions			11	X	—
		e taxable for FUTA tax a				nt tax?					12	X	
		'Yes" box on all the line				o .:	Б						
If you checked the "No" box on any of the lines above, skip Section A and complete Section B. Section A													
					_		[L						
13 Name of 1	the state whe	ere you paid unemploym	nent contribution	S			ш						
44 Contribut	iono noid to s	vour atata unamplayma	at fund		14	ı		71.					
		your state unemployme ect to FUTA tax							15			7 (000.
		e 15 by .6% (.006). Ente							16			, , ,	42.
IO TOTA LOA	. Multiply line	e 13 by .076 (.000). Line		Section B		O III IG Z			10				
17 Complete	all columns	below that apply (if you	need more spac	e, see instru	ctions).								
(a)	(b)	(c)		(d)	(e)		(f)		(g)		(h)	
	able wages (as ed in state act)	State experienc period	e rate	State experience	Multiply col. by .054	(b)	Multiply col by col. (c		Subtract from co	col. (f)		ontribut aid to s	
state	ou in oldio doly	From	То	rate	by .50 .		by cor. (c	,	If zero o	r less,	un	employ: fund	ment
18 Totals								18					
		h) of line 18											
		ect to FUTA tax (see the							20				
		% (.060)			I .				21				
		% (.054)			22				-				
23 Enter the smaller of line 19 or line 22 (Employers in a credit reduction state must use the worksheet and check here) 23													
								Ш	23				
		ie 23 from line 21. Enter sehold Employme		and go to line	25				24				
		line 8. If you checked t		line C of pag	ne 1 enter -0)-			25		1	4,1	20.
		and line 25							26				L62.
27 Are you re													
	-	e the amount from line	26 above on For	m 1040, line	59a. Do not	compl	ete Part IV	below.					
		ve to complete Part IV.											
Part IV Address and Signature - Complete this part only if required. See the line 27 instructions.													
Address (number and street) or P.O. box if mail is not delivered to street address Apt., room, or suite no.											ite no.		
City, town or post	onice, state, and	ZIF CODE											
Under populties of	f norium. I doolore	that I have everying this asks	dula including secon	nonvina eteteme	nto and to the b	ant of mu	, knowledge on	d baliat it is	true ee	rest and s	omplete	None	et of one
payment made to	a state unemploy	e that I have examined this sche ment fund claimed as a credit v											
which preparer has	s any knowledge.	•											
Employer's s	signature					- 🕨	Date						
r Linployer's		nronovario n	Dec =1-	aianat:	1	Dota	Date	Oback	:£	DTIN			
Paid	Print/Type (preparer's name	Preparer's	signature		Date		Check L	lif	PTIN			
Preparer	Eirm's nom	<u> </u>					self- emp						
Use Only	rimi s nam	Firm's name ►						Firm's E	IIV P				
Firm's address Phone no.													
Firm's address P													

Schedule H (Form 1040) 2013

Form **8959**

Department of the Treasury Internal Revenue Service **Additional Medicare Tax**

▶ If any line does not apply to you, leave it blank. See separate instructions.

► Attach to Form 1040, 1040NR, 1040-PR, or 1040-SS.

► Information about Form 8959 and its instructions is at www.irs.gov/form8959

OMB No. 1545-0074

2013

Attachment Sequence No. 71

Name(s) shown on Form 1040 Your social security number BRADLEY S. SCHNEIDER Part I Additional Medicare Tax on Medicare Wages 1 Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts 150,656. from box 5 2 Unreported tips from Form 4137, line 6 2 3 Wages from Form 8919, line 6 3 150,656. 4 Add lines 1 through 3 4 5 Enter the following amount for your filing status: \$250,000 Married filing jointly Married filing separately \$125,000 125,000. Single, Head of household, or Qualifying widow(er) \$200,000 6 Subtract line 5 from line 4. If the result is zero or less, enter -0-25,656. 7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (.009). Enter here and go to Part II Part II Additional Medicare Tax on Self-Employment Income 8 Self-employment income from Schedule SE (Form 1040), Section A, line 4, or Section B, line 6. If you had a loss, enter -0- (Form 1040-PR and Form 1040-SS filers, see instructions.) 8 9 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000 10 Enter the amount from line 4 11 Subtract line 10 from line 9. If zero or less, enter -0-11 12 Subtract line 11 from line 8. If the result is zero or less, enter -0-13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (.009). Enter here and go to Part III 13 Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation 14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions) **15** Enter the following amount for your filing status: Married filing jointly Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000 16 Subtract line 15 from line 14. If zero or less, enter -0-16 17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (.009). Enter here and go to Part IV 17 Part IV Total Additional Medicare Tax 18 Add lines 7, 13, and 17, Also include this amount on Form 1040, line 60, (Form 1040NR. 231. 1040-PR, and 1040-SS filers, see instructions) and go to Part V 18 Part V Withholding Reconciliation Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts 2,185. from box 6 19 150,656. 20 Enter the amount from line 1 21 Multiply line 20 by 1.45% (.0145). This is your regular Medicare tax withholding on Medicare wages 2,185. 0. 22 Subtract line 21 from line 19. This is your Additional Medicare Tax withholding on Medicare wages 22 23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions) 23 24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, line 62 (Form 1040NR, 1040-PR, and 1040-SS filers, see instructions)

Form **8960**

Net Investment Income Tax - Individuals, Estates, and Trusts

► Attach to Form 1040 or Form 1041.

2013

OMB No. 1545-2227

Department of the Treasury Internal Revenue Service (99)

► Information about Form 8960 and its separate instructions is at www.irs.gov/form8960

Attachment Sequence No. **72**

	s) shown on Form 1040 or Form 10 DLEY S. SCHNEIDER)41			· ·	Your s	ocial s	ecurity numbe	r or EIN
Par	I Investment Income		Section 6013(g) election (see instruction	ions)					
			Regulations section 1.1411-10(g) elec	-	structions)				
1	Taxable interest (Form 1040, line 8	a; or	Form 1041, line 1)				1		23.
2			or Form 1041, line 2a)				2	3,	100.
3			nstructions)				3		
4a	Rental real estate, royalties, partne								
			line 5)	4a	-3	513.			
b	Adjustment for net income or loss								
	-		see instructions)	4b					
С							4c	-3,	513.
5a	Net gain or loss from disposition of								
	combine lines 13 and 14; or from F	orm	1041, combine lines 4 and 7	5a	23	156.			
b	Net gain or loss from disposition of								
	_		tions)	5b					
С	Adjustment from disposition of par								
				5c					
d					•		5d	23,	156.
6			ain CFCs and PFICs (see instructions)				6		
7			me (see instructions)				7		
8	Total investment income. Combine						8	22,	766.
Par			ocable to Investment Income	and Mo	difications				
9a	Investment interest expenses (see	inst	uctions)	9a					
b	State income tax (see instructions)					997.			
С	Miscellaneous investment expense		ee instructions)			6.			
d							9d	1,	003.
10			ns)				10		
11			d lines 9d and 10				11	1,	003.
Par	III Tax Computation								
12	Net investment income. Subtract F	Part I	I, line 11 from Part I, line 8. Individuals	complete li	ines 13-				
	17. Estates and trusts complete lin	nes 1	8a-21. If zero or less, enter -0-				12	21,	<u>763.</u>
	Individuals:								
13	Modified adjusted gross income (se	ee ir	structions)	13		216.			
14	Threshold based on filing status (se	ee ir	structions)	14	125	000.			
15	Subtract line 14 from line 13. If zero	o or	ess, enter -0-	15	95	216.		_	_
16	Enter the smaller of line 12 or line 1	15					16	21,	763 .
17	Net investment income tax for indi-	vidu	als. Multiply line 16 by 3.8% (.038). Ente	er here and	d on				
							17		827.
	Estates and Trusts:			1					
18a				18a					
b	Deductions for distributions of net	inve	stment income and						
			structions)	18b					
С	Undistributed net investment incor	me. S	Subtract line 18b from 18a (see						
19a			s)	19a					
b	Highest tax bracket for estates and	d tru	sts for the year (see						
					1				
С	Subtract line 19b from line 19a. If z	zero	or less, enter -0-	19c	:				
20	Enter the smaller of line 18c or line						20		
21	Net investment income tax for esta	ates	and trusts. Multiply line 20 by 3.8% (.00	38). Enter h	nere and				
	on Form 1041, Schedule G, line 4						21		

323121 01-17-14 Form 8960 (2013)

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

Form **8801**

Department of the Treasury Internal Revenue Service (99)

Credit for Prior Year Minimum Tax - Individuals, Estates, and Trusts

► Information about Form 8801 and its separate instructions is at www.irs.gov/form8801.

Attach to Form 1040, 1040NR, or 1041.

2013

OMB No. 1545-1073

Name(s) shown on return

Identifying number

	RADLEY S. SCHNEIDER		
P	art I Net Minimum Tax on Exclusion Items		
1	Combine lines 1 and 10 of your 2012 Form 6251. Estates and trusts, see instructions	1	
2	Enter adjustments and preferences treated as exclusion items (see instructions)	2	51,442.
3	Minimum tax credit net operating loss deduction (see instructions)	3	()
4	Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more		
	than \$232,500 and you were married filing separately for 2012, see instructions	4	
5	Enter: \$78,750 if married filing jointly or qualifying widow(er) for 2012; \$50,600 if single or head of household for 2012; or \$39,375 if married filing separately for 2012. Estates and trusts, enter \$22,500	5	78,750.
_			
6	Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2012; \$112,500 if single or head of household for 2012; or \$75,000 if married filing separately for 2012. Estates and trusts, enter \$75,000	6	150,000.
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7	
8	Multiply line 7 by 25% (.25)	8	
9	Subtract line 8 from line 5. If zero or less, enter -0 If under age 24 at the end of 2012, see instructions	9	0.
10	Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 1040NR filers, see instructions	10	
11	• If for 2012 you filed Form 2555 or 2555-EZ, see instructions for the amount to enter.		
	• If for 2012 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of		
	Schedule D (Form 1040) (lines 14a and 15, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 45 here. Form 1040NR filers, see instructions.	11	156,463.
	• All others: If line 10 is \$175,000 or less (\$87,500 or less if married filing separately for 2012), multiply line 10 by 26% (.26). Otherwise, multiply line 10 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2012) from the result. Form 1040NR filers, see instructions.		
12	Minimum tax foreign tax credit on exclusion items (see instructions)	12	
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13	156,463.
14	Enter the amount from your 2012 Form 6251, line 34, or 2012 Form 1041, Schedule I, line 55	14	136,725.
15	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-	15	19,738.
LH	For Paperwork Reduction Act Notice, see instructions.		Form 8801 (2013)

Form 8801 (2013) BRADLEY S. SCHNEIDER		Page 2
Part II Minimum Tax Credit and Carryforward to 2014		
16 Enter the amount from your 2012 Form 6251, line 35, or 2012 Form 1041, Schedule I, line 56	16	20,099.
17 Enter the amount from line 15	17	19,738.
18 Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	361.
19 2012 credit carryforward. Enter the amount from your 2012 Form 8801, line 28	19	681.
20 Enter your 2012 unallowed qualified electric vehicle credit (see instructions)	20	
21 Combine lines 18 through 20. If zero or less, stop here and see the instructions	21	1,042.
22 Enter your 2013 regular income tax liability minus allowable credits (see instructions)	22	38,745.
23 Enter the amount from your 2013 Form 6251, line 33, or 2013 Form 1041, Schedule I, line 54	23	45,458.
24 Subtract line 23 from line 22. If zero or less, enter -0-	24	0.
25 Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2013		
Form 1040, line 53 (check box b); Form 1040NR, line 50 (check box b); or Form 1041, Schedule G, line 2c	25	0.
26 Credit carryforward to 2014. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	1,042.

Form 8801 (2013)

Form 8801 (2013)

^{*} The 2012 Qualified Dividends and Capital Gain Tax Worksheet is in the 2012 Instructions for Form 1040. The 2012 Schedule D Tax Worksheet is in the 2012 Instructions for Schedule D (Form 1040) (or the 2012 Instructions for Schedule D (Form 1041)).

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040 or Form 1041.

► Information about Form 8582 and its instructions is available at www.irs.gov/form8582

OMB No. 1545-1008

Internal Revenue Service (99) Name(s) shown on return

Identifying number

BR	ADLEY S. SCHNEIDER				
Pa	art I 2013 Passive Activity Loss Caution: Complete Worksheets 1, 2	2, and 3	B before completing Part I.		
Rer	Ital Real Estate Activities With Active Participation (For the definition of active	participa	ation, see		
Spe	cial Allowance for Rental Real Estate Activities in the instructions.)				
1a	Activities with net income (enter the amount from Worksheet 1,				
	column (a))	1 a	1,836.		
b	Activities with net loss (enter the amount from Worksheet 1,				
	column (b))	1 b			
С	Prior years unallowed losses (enter the amount from Worksheet				
	1, column (c))	1c			1 006
	Combine lines 1a, 1b, and 1c			1d	1,836
	nmercial Revitalization Deductions From Rental Real Estate Activities		l		
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a			
b	Prior year unallowed commercial revitalization deductions from				
	Worksheet 2, column (b)	2b		_	
	Add lines 2a and 2b			2c	
	Other Passive Activities				
За	Activities with net income (enter the amount from Worksheet 3,	ا ۔۔ ا	10 200		
	column (a))	За	18,289.	-	
b	Activities with net loss (enter the amount from Worksheet 3,	oh.	-5,323.		
	column (b))	3b	-3,323.		
С	Prior years unallowed losses (enter the amount from Worksheet 3,	3c			
4	column (c)) Combine lines 3a, 3b, and 3c	30		3d	12,966
	Combine lines 3a, 3b, and 3c Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include the	his form	with your return: all	Su	12,500
	losses are allowed, including any prior year unallowed losses entered on line 1c,				
	the forms and schedules normally used			4	14,802
	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 Par	t II and	go to Part III.		
	 Line 3d is a loss (and lines 1d and 2c are zero or more 			ne 15.	
Ca	ution: If your filing status is married filing separately and you lived with your spous		-		
Pa	rt II or Part III. Instead, go to line 15.		407.		
Pa	rt II Special Allowance for Rental Real Estate Activities Wit	h Acti	ve Participation		
	Note: Enter all numbers in Part II as positive amounts. See instructions for	r an exa	mple.		
5	Enter the smaller of the loss on line 1d or the loss on line 4			5	
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			
	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 separate			9	
10	Enter the smaller of line 5 or line 9			10	<u> </u>
_	If line 2c is a loss, go to Part III. Otherwise, go to line 15.				
Pa	rt III Special Allowance for Commercial Revitalization Dedu			Estat	te Activities
	Note: Enter all numbers in Part III as positive amounts. See the example for				
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separate			11	
12	Enter the loss from line 4			12	
13	Reduce line 12 by the amount on line 10			13	
14 P:	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13			14	<u>I</u>
				45	1
15	Add the income, if any, on lines 1a and 3a and enter the total			15	
16	Total losses allowed from all passive activities for 2013. Add lines 10, 14, and to find out how to report the losses on your tay return.			40	
	to find out how to report the losses on your tax return			16	

Form 8582 (2013) BRADLEY S. SCHNEIDER 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.) Current year Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss loss (line 1c) (line 1a) (line 1b) SEE ATTACHED STATEMENT FOR WORKSHEET 1 Total. Enter on Form 8582, lines 1a, 1,836. 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year (c) Overall loss Name of activity deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a and 2b Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) **Current year** Prior years Overall gain or loss Name of activity (c) Unallowed (a) Net income (b) Net loss (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET 3 Total. Enter on Form 8582, lines 3a, 18,289. -5,323.3b. and 3c Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.) Form or schedule (d) Subtract and line number (c) Special column (c) Name of activity (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions) Total Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on

(see instructions) Total

Form 8582 (2013) 319762 10-04-13

Form **8582-CR**

Passive Activity Credit Limitations

(Rev. January 2012) Department of the Treasury Internal Revenue Service

Name(s) shown on return

► See separate instructions.

► Attach to Form 1040 or 1041.

OMB No. 1545-1034

Attachment Sequence No. **89**

Identifying number

BRA	ADLEY S. SCHNEIDER					
Pai	rt I Passive Activity Credits					
	Caution: If you have credits from a publicly	traded partnership, see _{Pu}	blicly Traded Partnershi	ips (PTPs) in th	ne instr	uctions.
Cradi	ts From Rental Real Estate Activities With Active Par					
	Income Housing Credits) (See Lines 1a through 1c in		intation Greats and			
	(See Lines in all and again to in	and mod dodonos,	1 1			
1 a	Credits from Worksheet 1, column (a)		1a			
b	Prior year unallowed credits from Worksheet 1, colun	nn (b)	1b			
	Add lines 1a and 1b				1c	
	bilitation Credits From Rental Real Estate Activities a	•				
Befor	e 1990 (or From Pass-Through Interests Acquired Be	fore 1990) (See Lines 2a thro	ugh 2c in the instructions.)			
2a	Credits from Worksheet 2, column (a)		2a			
b	Prior year unallowed credits from Worksheet 2, colun	nn (b)	2b			
					2c	
Low-	ncome Housing Credits for Property Placed in Service	e After 1989 (See Lines 3a th	rough 3c in the instructions	3.)		
			1 1			
3a	Credits from Worksheet 3, column (a)		3a			
b	Prior year unallowed credits from Worksheet 3, colum	nn (b)	3b			
All Of	Add lines 3a and 3b ther Passive Activity Credits (See Lines 4a through 4c	in the instructions \			3c	
			1.1	11.		
4a	Credits from Worksheet 4, column (a) Prior year unallowed credits from Worksheet 4, colum	on /h)	4a			
b	Prior year unanowed credits from worksheet 4, colun	ın (b)	4b			11.
	Add lines 1s 2s 2s and 4s				4c	11.
5	Add lines 1c, 2c, 3c, and 4c Enter the tax attributable to net passive income (see in	notruotiono)			5 6	2,099.
6 7	Subtract line 6 from line 5. If line 6 is more than or eq	ual to line 5, anter -0- and see	inetructions		7	0.
	: If your filing status is married filing separately a					
Note	do not complete Part II, III, or IV. Instead, go t		ise at any time during th	ic year,		
Pai	rt II Special Allowance for Rental R		With Active Partic	cipation		
	Note: Complete this part only if you have a			p		
8	Enter the smaller of line 1c or line 7				8	
9	Enter \$150,000. If married filing separately, see instru	ictions	9			
10	Enter modified adjusted gross income, but not less th	an zero (see instructions).				
	If line 10 is equal to or more than line 9, skip lines 11					
	through 15 and enter -0- on line 16		10			
11	0.11 15 401 5 0					
12	Multiply line 11 by 50% (.50). Do not enter more that	n \$25,000. If married				
	filing separately, see instructions		12			
13a	Enter the amount, if any, from line 10 of					
	Form 8582	13a				
b	Enter the amount, if any, from line 14 of					
	Form 8582					
С	Add lines 13a and 13b		13c			
14						
15	Enter the tax attributable to the amount on line 14 (se				15	
16	Enter the smaller of line 8 or line 15				16	

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8582-CR** (Rev. 01-2012)

Pa	rt III Special Allowance for Rehabilitation Credits From Rental Red Housing Credits for Property Placed in Service Before 1990 (Acquired Before 1990)	or From Pass-Through	d Low Inte	v-Income rests
_	Note: Complete this part only if you have an amount on line 2c. Otherwise, go to l	Part IV.		
17	Enter the amount from line 7		17	
18	Enter the amount from line 16		18	
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V		19	
20	Enter the smaller of line 2c or line 19		20	
21	Enter \$250,000. If married filing separately, see instructions to find	I		
	out if you can skip lines 21 through 26	21		
22	Enter modified adjusted gross income, but not less than zero. (See instructions for line 10.) If line		1	
	22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	22		
23	Subtract line 22 from line 21	23	1	
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married		1	
	filing separately, see instructions	24		
25a	Enter the amount, if any, from line 10 of			
	Form 8582 25a			
b	Enter the amount, if any, from line 14 of			
	Form 8582 25b			
С	Add lines 25a and 25b	25c		
26	Subtract line 25c from line 24	26		
27	Enter the tax attributable to the amount on line 26 (see instructions)			
28	Enter the amount, if any, from line 18	28		
29	Subtract line 28 from line 27		29	
30 Pa	rt IV Special Allowance for Low-Income Housing Credits for Propo Note: Complete this part only if you have an amount on line 3c. Otherwise, go to he	erty Placed in Service	30 After	1989
31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7		31	
32	Enter the amount from line 30		32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36		33	
34	Enter the smaller of line 3c or line 33		34	
35	Tax attributable to the remaining special allowance (see instructions)		35	
36	Enter the smaller of line 34 or line 35		36	
Pa	rt V Passive Activity Credit Allowed			
37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See instructions to find out how to			
	your tax return and how to allocate allowed and unallowed credits if you have more than one credit of	or credits from more than one		
	activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partners	ships (PTPs) in the instructions.	37	11.
Pa	rt VI Election To Increase Basis of Credit Property			
38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable	transaction, and you		
	elect to increase your basis in credit property used in that activity by the unallowed credit that reduce	ed your basis in the		
	property, check this box. See instructions			>
39	Name of passive activity disposed of ▶			
40	Description of the credit property for which the election is being made ▶			

Form **8582-CR** (Rev. 01-2012)

Amount of unallowed credit that reduced your basis in the property ...

ALTERNATIVE MINIMUM TAX

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040 or Form 1041.

Internal Revenue Service (99)

Information about Form 8582 and its instructions is available at www.irs.gov/form8582

Identifying number

OMB No. 1545-1008

Nar	ne(s) shown on return	Identifying number			
	A DI EV. G. GOUNET DED				
	ADLEY S. SCHNEIDER art I 2013 Passive Activity Loss Caution: Complete Worksheets 1,	2 and 2 h	oofore completing Part I		
	ntal Real Estate Activities With Active Participation (For the definition of active				
	ecial Allowance for Rental Real Estate Activities in the instructions.)	participat	ion, see		
_					
1a	Activities with net income (enter the amount from Worksheet 1, column (a))	1a	1,836.		
h	Activities with net loss (enter the amount from Worksheet 1,				
	column (b))	1b			
c	Prior years unallowed losses (enter the amount from Worksheet				
	1, column (c))	1c			
d	Combine lines 1a, 1b, and 1c			1d	1,836.
	mmercial 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)				
	Add lines 2a and 2b			2c	
	Other Passive Activities				
За	Activities with net income (enter the amount from Worksheet 3, column (a))	3a	18,289.		
		Ja	20,2001		
b	Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	-5,524.		
_	Prior years unallowed losses (enter the amount from Worksheet 3,				
C	column (c))	3c			
d	Combine lines 3a, 3b, and 3c			3d	12,765.
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include t	his form v	vith 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	14,601.
	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 Par 	t II and g	o to Part III.		
	 Line 3d is a loss (and lines 1d and 2c are zero or more 	-	_		
	nution: If your filing status is married filing separately and you lived with your spous	e at any ti	ime during the year, _{do no}	ot con	nplete
	rt II or Part III. Instead, go to line 15. art II Special Allowance for Rental Real Estate Activities Wit	h A otiv	o Dortioination		
P	Note: Enter all numbers in Part II as positive amounts. See instructions for		•		
_	Enter the smaller of the loss on line 1d or the loss on line 4		•	-	
5	Enter \$150,000. If married filing separately, see instructions			5	
7	Enter modified adjusted gross income, but not less than zero (see instructions)	7			
•	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 sepa	arately, se	e instructions	9	
10	Enter the smaller of line 5 or line 9	_		10	
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.				
Pa	art III Special Allowance for Commercial Revitalization Dedu	ctions l	From Rental Real I	Estat	e Activities
	Note: Enter all numbers in Part III as positive amounts. See the example for	or Part II ii	n the instructions.		
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separate	ely, see in	structions	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	
-	art IV Total Losses Allowed			_	
15				15	
16	Total losses allowed from all passive activities for 2013. Add lines 10, 14, and to find out how to report the losses on your tay return.			4.0	
	to find out how to report the losses on your tax return			16	i

ALTERNATIVE MINIMUM TAX Form 8582 (2013) BRADLEY S. SCHNEIDER 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.) Current year Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss loss (line 1c) (line 1a) (line 1b) SEE ATTACHED STATEMENT FOR WORKSHEET 1 Total. Enter on Form 8582, lines 1a, 1,836. 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year (c) Overall loss Name of activity deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a and 2b Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) **Current year** Prior years Overall gain or loss Name of activity (c) Unallowed (a) Net income (b) Net loss (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET Total. Enter on Form 8582, lines 3a, -5,524. 18,289. 3b. and 3c Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.) Form or schedule (d) Subtract and line number (c) Special column (c) Name of activity (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions) Total Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions)

Form 8582 (2013)

Total

BRADLEY S. SCHNEIDER

	Form	and Type		Year Carried From	Amount A for Carr	valiable	Amount Used in	Amount Used in	Amour Used i	t A	mount Jsed in	Amount Used in	Amou Used	nt A in L	Amount Jsed in	Am Use	ount ed in	Amount Used in	Amount Used in
6765 TMC	REASED RES	יבאספע אפיי	c c	2007	-	42.	2013		<u> </u>	_				_					
6765 INCE	REASED RES	EARCH ACT	S	2013		11.													
Totals						53.	_		<u> </u>										
Amount Used in	Amount Used in	Amount Used in	Amour Used i	nt Amou in Used	in An	ount ed in	Amou Used	nt Amo	unt Ai I in U	mount sed in	Amou Used	nt in	Amoun Used in	t n Ca	Net arryover				
																_			42.
																			11.
Totals																			53,

	FOOTNOTES	STATEMENT 1
ALLOCATION OF FORM 4868, APPLICA AUTOMATIC EXTENSION OF TIME TO F INDIVIDUAL INCOME TAX RETURN:		
BRADLEY S. SCHNEIDER (SSN: JULIE R. DANN (SSN:)	40,000.
		85,000.

FORM	1040 PERSONAL EXEMPTION WORKSHEET	STATEMENT	2
]	S THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT SELOW FOR YOUR FILING STATUS? OO. STOP. MULTIPLY \$3,900 BY THE TOTAL NUMBER OF EXEMPTION ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42	S CLAIMED	4
2.	MULTIPLY \$3,900 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED	7 0	0.0
3. I	ON FORM 1040, LINE 6D	7,8	00.
6.	SUBTRACT LINE 4 FROM LINE 3. IF THE RESULT IS MORE THAN \$122,500 (\$61,250 IF MARRIED FILING SEPARATELY), STOP. ENTER -0- ON LINE 42	•	
7. 1	O 1)		
9.	SUBTRACT LINE 8 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.		
FORM	1040 TAX-EXEMPT INTEREST	STATEMENT	3
NAME	OF PAYER	AMOUNT	
MESI	COW FINANCIAL ROW FINANCIAL - TAX-EXEMPT FEES ROW FINANCIAL DNAL FINANCIAL SERVICES LLC		

8,047.

TOTAL TO FORM 1040, LINE 8B

FORM 1040	VAGES RECE	IVED AND TAX	ES WITHHE	LD	STATE	MENT	4
T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICA TAX	
T HOUSE OF REP -MEMBERS SERVICES	127,666.	19,869.	6,383.		7,049.	2,18	35.
TOTALS =	127,666.	19,869.	6,383.		7,049.	2,18	35.
FORM 1040	QUZ	ALIFIED DIVI	DENDS		STATE	MENT	5
NAME OF PAYER				DINARY VIDENDS		LIFIEI ZIDENDS	
CHARLES SCHWAB & CO., IN	74. 2,801.	74. 1,078.					
TOTAL INCLUDED IN FORM 1	L040, LINE	9в				1,15	52.
SCHEDULE A MISCEI	LANEOUS DE	EDUCTIONS SU	BJECT TO	FLOOR	STATE	MENT	6
DESCRIPTION					AM	IOUNT	
NATIONAL FINANCIAL SERVI MESIROW FINANCIAL FROM K-1 - MDRJB PARTNEN FROM K-1 - LEAD-OUT THIN	RSHIP	NS INVESTMEN	T, LLC			20 77	57. 08. 71.
TOTAL TO SCHEDULE A, LIP	NE 23					1,76	56.
SCHEDULE A	STATE ANI) LOCAL INCO	ME TAXES		STATE	MENT	7
DESCRIPTION					AM	IOUNT	
HOUSE OF REP -MEMBERS SI ILLINOIS 2ND QTR ESTIMAT ILLINOIS PRIOR YEAR BALA	TE PAYMENTS		I PAYMENTS			6,38 1,00 8,03	00.

SCHEDULE A	CASH CONTRIBUTIONS		STATEMENT 8
DESCRIPTION		AMOUNT 50% LIMIT	AMOUNT 30% LIMIT
MISCELLANEOUS		24,084.	2.050
MISCELLANEOUS FROM K-1 - MDRJB PARTNERSHIP		1.	3,950.
SUBTOTALS		24,085.	3,950.
TOTAL TO SCHEDULE A, LINE 16	•		28,035.

SCHE	DULE A ITEMIZED DEDUCTIONS WORKSHEET	STATEMENT 9
1. 2.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28	. 57,327.
3.	LOSSES INCLUDED ON LINE 28	. 0.
4. 5. 6.	IF YES, SUBTRACT LINE 2 FROM LINE 1	2.
7.	IF MARRIED FILING SEPARATELY	
8. 9.	IF YES, SUBTRACT LINE 6 FROM LINE 5	
10.	TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 9 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 29	
SCHE	DULE B TAX-EXEMPT INTEREST FROM 1099-DIV	STATEMENT 10
NAME	OF PAYER	AMOUNT
	ROW FINANCIAL ONAL FINANCIAL SERVICES LLC	263. 28.
TOTA	L TAX-EXEMPT INTEREST FROM 1099-DIV TO SCHEDULE B, LINE 5	291.

SCHEDULE D	SHORT-TE	RM CAPITA	L GAINS AND	LOSSES	STATEMENT 11
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	COST OR OTHER BASIS	GAIN OR LOSS
NFS - SEE ATTACHED MESIROW FINANCIAL -	VARIOUS VARIOUS		15,586	15,875	-289.
SEE ATTACHED	VARIOUS		1,264	1,267	-3.
TOTAL TO SCH D, LINE	1A	=	16,850	17,142	-292.
SCHEDULE D	LONG-TER	M CAPITAL	GAINS AND I	LOSSES	STATEMENT 12
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	COST OR OTHER BASIS	GAIN OR LOSS
NFS - SEE ATTACHED	VARIOUS VARIOUS		6,837	6,641	. 196.
MESIROW FINANCIAL - SEE ATTACHED			489	. 489	. 0.
TOTAL TO SCH D, LINE	8A	=	7,326	7,130	. 196.
SCHEDULE D			OR LOSS FROM		STATEMENT 13
DESCRIPTION OF PROPER	RTY		(GAIN OR LOSS	28% GAIN
FORM 4797			_	18,289.	
TOTAL TO SCHEDULE D,	PART II, L	INE 11	- -	18,289.	
SCHEDULE D			IN OR LOSS I		STATEMENT 14
	INERSHIPS,				
PAR1	INERSHIPS,			FIDUCIARIES	

SCHEDULE D	CAPITAL	GAIN	DISTRIBUTIONS		STATEMENT	15
NAME OF PAYER				TOTAL CAPITAL GAIN	1 28% G <i>I</i>	AIN
MESIROW FINANCIAL NATIONAL FINANCIAL SERV	ICES LLC			63. 1,087.		
TOTALS TO SCHEDULE D, L	INE 13			1,150.		

SCHI	EDULE D UNRECAPTURED SECTION 1250 GAIN	STATEMENT	16
	IF YOU HAVE A SECTION 1250 PROPERTY IN PART III OF FORM 4797 FOR WHICH YOU MADE AN ENTRY IN PART I OF FORM 4797, ENTER THE SMALLER OF LINE 22 OR LINE 24 OF FORM 4797 FOR THAT PROPERTY. IF YOU DID NOT HAVE ANY SUCH PROPERTY, GO TO LINE 4	•	
۷.	ENTER THE AMOUNT FROM FORM 4797, LINE 26G, FOR THE PROPERTY FOR WHICH YOU MADE AN ENTRY ON LINE 1		
4.	SUBTRACT LINE 2 FROM LINE 1		
5.	ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1 FROM A PARTNERSHIP OR AN S CORPORATION AS "UNRECAPTURED SECTION 1250 GAIN"	. 6,4	29.
7.	ADD LINES 3 THROUGH 5		29.
	LINE 8	. 6,4	29.
11.	ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1, FORMS 1099-DIV, OR FORM 2439 AS "UNRECAPTURED SECTION 1250 GAIN" FROM AN ESTATE, TRUST, REAL ESTATE INVESTMENT TRUST, OR MUTUAL FUND (OR OTHER REGULATED	•	
12.	INVESTMENT COMPANY)	ALES ON	
	ADD LINES 9 THROUGH 12	6,4	29.
15.	ENTER THE (LOSS), IF ANY, FROM SCH D, LINE 7. IF SCH D, LINE 7, IS ZERO OR A GAIN ENTER -01,278	R .	
16.	ENTER YOUR LONG-TERM CAPITAL LOSS CARRYOVERS FROM SCHEDULE D, LINE 14, AND SCHEDULE K-1 (FORM 1041),		
17.	BOX 11, CODE C		78.
18.	SUBTRACT LINE 17 FROM LINE 13. IF ZERO OR LESS, ENTER -0		
- •	IF MORE THAN ZERO, ENTER THE RESULT HERE AND ON SCHEDULE D, LINE 19	. 5,1	51.

FORM 6251	PASS	STATEMENT 17		
		NET INCOM	IE (LOSS)	
NAME OF ACTIVITY	FORM	AMT	REGULAR	ADJUSTMENT
MDRJB PARTNERSHIP MDRJB PARTNERSHIP AERODIRECT FUND III,	FORM 4797 SCH E SCH E	18,289. -5,255.	18,289. -5,054.	-201.
LLC RESIDENTIAL RESIDENCE	SCH E	-269.	-269.	
		1,836.	1,836.	
TOTAL TO FORM 6251, LI	NE 19			-201.

FORM	6251 EXEMPTION WORKS	HEET	STATEMENT	18
1 I	NTER: \$51,900 IF SINGLE OR HEAD OF HOUSER MARRIED FILING JOINTLY OR QUALIFYING WII IF MARRIED FILING SEPARATELY	OOW(ER); \$40,400	40,4	00.
	NTER YOUR ALTERNATIVE MINIMUM TAXABLE INC (AMTI) FORM 6251, LINE 28	190,274. CHOLD;		
4 5	QUALIFYING WIDOW(ER); \$76,950 IF MARRIED FILING SEPARATELY	76,950.		
=	ENTER -0			
	CULTIPLY LINE 4 BY 25% (.25)	SS, ENTER -0 IF IN CHILDREN UNDER IROUGH 10. INT ON FORM 6251,		
8 I	INIMUM EXEMPTION AMOUNT FOR CERTAIN CHILD INTER YOUR EARNED INCOME, IF ANY			
10 H	ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE LINE 29, AND GO TO FORM 6251, LINE 30.			
FORM	6251 INTEREST FROM SPECIFIED PRIV	ATE ACTIVITY BONDS	STATEMENT	19
DESC	RIPTION		AMOUNT	
NAT	ONAL FINANCIAL SERVICES LLC			14.
TOTA	L TO FORM 6251, LINE 12			14.

59

FOI	RM 6251	LINE 49 WORKSHEET		STATEMENT	20
1	\$225,000 \$450,000	IF SINGLE IF MARRIED FILING SEPARATELY IF MARRIED FILING JOINTLY OR QUALIFYING IF HEAD OF HOUSEHOLD		225,0	00.
2	ENTER THE	AMOUNT FROM FORM 6251, LINE 45			0.
3	AND CAPITA FORM 1040, SCHEDULE D FOR REGULA WORKSHEET 1040, LINE NOT COMPLE ARE FILING FROM LINE	AMOUNT FROM LINE 7 OF THE QUALIFIED DIV L GAIN TAX WORKSHEET IN THE INSTRUCTION LINE 44, OR THE AMOUNT FROM LINE 19 OF TAX WORKSHEET, WHICHEVER APPLIES (AS F R TAX). IF YOU DID NOT COMPLETE EITHER FOR THE REGULAR TAX, ENTER THE AMOUNT F 43; BUT DO NOT ENTER LESS THAN -0 IF TE EITHER WORKSHEET FOR THE REGULAR TAX FORM 2555 OR FORM 2555-EZ, ENTER THE A 3 OF THE FOREIGN EARNED INCOME TAX WORK 040 INSTRUCTIONS (AS FIGURED FOR THE RE	IS FOR THE TIGURED FROM FORM TYOU DID AMOUNT SHEET IN		
	TAX)	· · · · · · · · · · · · · · · · · · ·	• • • • • •	140,6	87.
4	ADD LINE 2	AND LINE 3		140,6	87.
5		INE 4 FROM LINE 1 AND ENTER THE RESULT UT DO NOT ENTER LESS THAN $-0-\ldots$		84,3	13.
FOI	RM 8960	MISCELLANEOUS ITEMIZED DEDUCTIONS ALLOCABLE TO INVESTMENT INCOME BEFORE			21
DE	SCRIPTION		LINE	AMOUNT	
NA'	 TIONAL FINA	NCIAL SERVICES LLC	9C	6	67 .
ME	SIROW FINAN	CIAL	9C	2	08.
		RJB PARTNERSHIP	9C		71.
FR(OM K-1 - LE	AD-OUT THIRD SOLUTIONS INVESTMENT, LL	9C	1:	20.

FORM 8582	ACTIVE	RENTAL	OF RE	AL EST	ATE - WORKSHE	ET 1 STAT	EMENT	22
		CURREN	T YEA	R	PRIOR YEAR UNALLOWED	OVERALL GAI	N OR L	oss
NAME OF ACTIVITY	NET	INCOME	NET	LOSS	LOSS	GAIN	LOSS	
RESIDENTIAL RESIDEN	ICE							
		1,836.		0.		1,836.		
TOTALS		1,836.		0.		1,836.		
FORM 8582	ОТНЕ	R PASSIV	E ACT	IVITIE	S - WORKSHEET	3 STAT	EMENT	23
		CURRENT	YEAR		PRIOR YEAR UNALLOWED	OVERALL GAI	N OR L	oss
NAME OF ACTIVITY	NET	INCOME	NET	LOSS	LOSS	GAIN	LOSS	
MDRJB PARTNERSHIP AERODIRECT FUND III		L8,289.	_	5,054.		13,235.		
LLC		0.		-269.			-2	69.
TOTALS	1	L8,289.		5,323.		13,235.	-2	69.
FORM 8582	<u> </u>	SUMMARY	OF PA	SSIVE A	ACTIVITIES	STAT	EMENT	24
R R	FORM							
E A NAME	OR SCHEDUI	LE GAIN/	LOSS	PRIOR YEAR C	NET /O GAIN/LOSS	UNALLOWED LOSS	ALLOW	
MDRJB PARTNERSHIE MDRJB PARTNERSHIE AERODIRECT FUND			289. 054.		18,289 -5,054		5,0	54.
III, LLC K RESIDENTIAL RESIDENCE -	SCH E	-	269.		-269		2	69.
KIBIDINCI		1,	836.		1,836	j.		
TOTALS		14,	802.		14,802	·	5,3	23.
PRIOR YEAR CARRYOVE	ERS ALLO	OWED DUE	TO C	URRENT	YEAR NET ACT	IVITY INCOME	E	

	-				
FORM 8582-CR		OTHER PASSIVE ACTIVITY CREDITS WORKSHEET 4			
NAME OF ACTIVITY	FROM FORM	CURRENT YEAR CREDITS	PRIOR YEAR UNALLOWED CREDITS	TOTAL CREDITS	
MDRJB PARTNERSHIP	6765/3800, LINE 2	11.			11.
TOTALS		11.			11.

FORM 8582		LTERNATI ITAL OF R		MUM TAX ATE - WORKSHE		EMENT	26
	Ct	JRRENT YE	AR	PRIOR YEAR UNALLOWED	OVERALL GAI	N OR I	oss
NAME OF ACTIVITY	NET INC	COME NE	T LOSS	LOSS	GAIN	LOSS	;
RESIDENTIAL RESIDEN	CE						
	1,8	336.	0.		1,836.		
TOTALS	1,8	336.	0.		1,836.		
FORM 8582		LTERNATI		MUM TAX S - WORKSHEET		EMENT	27
	Ct	JRRENT YE	AR —	PRIOR YEAR UNALLOWED	OVERALL GAI	N OR I	oss
NAME OF ACTIVITY	NET INC	OME NE	T LOSS	LOSS	GAIN	LOSS	;
MDRJB PARTNERSHIP AERODIRECT FUND III	18,2	289.	-5,255.		13,034.		
LLC		0.	-269.			- 2	269.
TOTALS	18,2	289 . —— ——	-5,524.		13,034.	-2	269.
FORM 8582AMT	SUMMARY	OF PASS	IVE ACTI	IVITIES - AMT	STAT	EMENT	28
R R E A NAME	FORM OR SCHEDULE O	AIN/LOSS	PRIOR YEAR C	NET O GAIN/LOSS	UNALLOWED LOSS	ALLOW LOSS	
MDRJB PARTNERSHIP MDRJB PARTNERSHIP AERODIRECT FUND		18,289. -5,255.		18,289 -5,255		5,2	255.
III, LLC	SCH E	-269.		-269	•	2	269.
	_	1,836.		1,836	•		
TOTALS		14,601.		14,601	•	5,5	524.
	_						
PRIOR YEAR CARRYOVE	= RS ALLOWEI	DUE TO	CURRENT	YEAR NET ACT	IVITY INCOME		

THIS IS NOT A FILEABLE COPY ***** Illinois Department of Revenue 2013 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration (Do not mail Form IL-8453 to the Illinois Department of Revenue unless it is requested for review.) Step 1: Provide taxpayer information BRADLEY S. SCHNEIDER Print First name and middle initial Social Security number type iling address ILDaytime phone number Step 2: Complete information from tax return 224,063₀0 Net income from Form IL-1040, Line 11, or Schedule NR, Step 5, Line 51 11,203₀0 Tax from Form IL-1040, Line 13 6,383<mark>00</mark> Illinois Income Tax withheld from Form IL-1040, Line 25 only (write "0" if none) 2,511<mark>00</mark> Overpayment from Form IL-1040, Line 35 5 Total amount due from Form IL-1040, Line 39 5 Single/head of household Married filing jointly Married filing separately Widowed Step 3: Complete direct deposit of refund or electronic funds withdrawal information (Optional) To initiate a payment or refund transaction, the information in this Step must be included within the electronic transmission. Illinois does not support international ACH transactions. IDOR will only perform direct transactions (i.e., debit, deposit) with financial institutions located within the United States or those not funded by international funds. Electronic payments will not be accepted and refunds will be via paper check. Routing no. (RN): Account no. (AN): Type of account: Checking Savings 10 Date the payment is to be electronically withdrawn: 11 Electronic funds withdrawal amount: 12 Name on account: Step 4: Taxpayer declaration and signature (Sign only after completing Step 2 and, if applicable, Step 3.) I consent that my refund may be directly deposited as designated in Step 3 and declare the information on Lines 7 through 9 is correct. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund. I authorize the Illinois Department of Revenue (IDOR) and its designated financial agent to initiate an ACH electronic funds withdrawal as designated nated in the electronic portion of my 2013 Illinois Individual Income Tax return. I authorize the financial institutions involved in the processing of an electronic overpayment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I do not want direct deposit of my refund, or an electronic funds withdrawal (direct debit) of my balance due. Under penalties of perjury, I declare the information on my electronic Form IL-1040 and the information I provided to my electronic return originator (ERO) are identical. To the best of my knowledge, my return is true, correct, and complete. I consent that my return, this declaration, and accompanying information may be sent to IDOR by my ERO. I authorize IDOR to inform my ERO and/or the transmitter when my return has been accepted or rejected. If rejected, I authorize IDOR to identify the reason(s) so the return may be corrected and retransmitted if possible. ***** THIS IS NOT A FILEABLE COPY ***** Sign Spouse's signature (if joint return, both must sign) Step 5: Electronic return originator (ERO) and paid preparer declaration and signature I declare that I have examined this taxpayer's electronic Form IL-1040, the information on this Form IL-8453, and accompanying information. I have followed all requirements of this program and declare, under penalties of perjury, that to the best of my knowledge the taxpayer's return and accompanying information are true, correct, and complete. 00/10/14

	TERI NEWMAN	08/	12/14	Check if paid preparer: (See instructions.)
ERO	ERO's signature		Date	
	PLANTE & MORAN, PLLC			
	Firm's name or your name if self-employed			Your Social Security number (SSN) or PTIN
use only	10 S. RIVERSIDE PLAZA, 9TH FLOOR			38-1357951
·,	Mailing address			Federal employer identification no. (FEIN)
	CHICAGO, IL 60606			(312) 207-1040
	City	State	ZIP	Phone number

Step 6: Attach required documents (e.g., W-2 forms, 1099 forms, IL-1310). Do not mail Form IL-8453 and these documents unless requested for review.

Illinois Department of Revenue

2013 Form IL-1040
Individual Income Tax Return or for fiscal year ending

Over 80% of taxpa yers file electronically. It is easy and you will get your refund faster. Visit tax.illinois.gov.

Step 1: Personal Information

BRADLEY S. SCHNEIDER JULIE R. DANN

			Filing status (see instructions) Single or head of household Married filing joint	ly X	Married filing	separately	Widowed
	Step 2:	1	Check if you are in a civil union (see instructions). L.J. Federal adjusted gross income from your U.S. 1040, Line 37; U.S. U.S. 1040EZ, Line 4.	. 1040A, L	ine 21; or	1	(Whole dollars only) 220,216 .00
		3	Federally tax-exempt interest and dividend income from your U.S or U.S. 1040EZ. Other additions. Attach Schedule M. Total income. Add Lines 1 through 3.	. 1040 or 1	040A, Line 8b;	2 3 4	8,047 .00 .00 228,263 .00
1099 forms here	Step 3: Base Income	6 7	Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return. Illinois Income Tax overpayment included in U.S. 1040, Line 10. Other subtractions. Attach Schedule M. Check if Line 7 includes any amount from Schedule 1299-C. Add Lines 5, 6, and 7. This is the total of your subtractions. Illinois base income. Subtract Line 8 from Line 4.	5 6 7		.00 .00 .00	.00 228,263 .00
Staple W-2 and 10	Step 4: Exemptions		b If someone can claim you as a dependent, see instructions. c Check if 65 or older: You + Spouse =	X \$2,100 X \$2,100 X \$1,000 X \$1,000	b	.00 .00 .00 .00	4,200 .00
†	Step 5: Net Income	11 12	Residents: Net income. Subtract Line 10 from Line 9. Skip Line Nonresidents and part-year residents: Check the box that applies to you during 2013 Nonresider write the Illinois base income from Sch. NR. Attach Sch. NR.		'art-year reside	11 nt, and	224,063 .00
IL-1040-V ▶	Step 6: Tax		Residents: Multiply Line 11 by 5% (.05). Cannot be less than zer Nonresidents and part-year residents: Write the tax from Schere Recapture of investment tax credits. Attach Schedule 4255. Income tax. Add Lines 13 and 14. Cannot be less than zero.			13 14 15	11,203 .00 .00 11,203 .00
Staple your check and	Step 7: Tax After Non- refundable Credits	17 18	Income tax paid to another state while an Illinois resident. Attach Schedule CR. Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR. Credit amount from Schedule 1299-C. Attach Schedule 1299-C. Add Lines 16, 17, and 18. This is the total of your credits.	16 17 18		.00 .00 8 00 .00	
₹			Cannot exceed the tax amount on Line 15. Tax after nonrefundable credits. Subtract Line 19 from Line 15.			19 20	608 .00 10,595 .00

IL-1040 page 1 (R-12/13) 349001 ID: 2BX 06-04-14

This form is authorized as outlined under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information could result in a penalty.



	21	Tax after nonrefundable credits from Page 1, Line 20.	21 _	10,	5 95 .00	2
Step 8: Other		Household employment tax. See instructions. Use tax on internet, mail order, or other out-of-state purchases from	22_	2,	327 .00	•
Taxes	24	UT Worksheet or UT Table in the instructions. Do not leave blank. Total Tax. Add Lines 21, 22, and 23.	23 _		0 .00 24	12,922 .00
Step 9: Payments		Illinois Income Tax withheld. Attach all W-2 and 1099 forms. Estimated payments from Forms IL-1040-ES and IL-505-I,	25_		383 .00	•
and Refundable	27	including overpayment applied from 2012 return. Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T.	26 27	9,	.00. 0 50	•
Credit	28	Earned Income Credit from Schedule ICR. Attach Schedule ICR.	28		.00	
	29	Total payments and refundable credit. Add Lines 25 through 28.			29	15,433 .00
Step 10: Result		Overpayment. If Line 29 is greater than Line 24, subtract Line 24 fro Underpayment. If Line 24 is greater than Line 29, subtract Line 29 f			30 <u> </u>	2,511 .00
Step 11: Underpayme of Estimated Tax Penalty and Donation	32 nt	Late-payment penalty for underpayment of estimated tax. a Check if at least two-thirds of your federal gross income is from fab Check if you or your spouse are 65 or older and permanently living in a nursing home. c Check if your income was not received evenly during the year and annualized your income on Form IL-2210. Attach Form IL-2210. d Check if you were not required to file an Illinois Individual Income return in the previous tax year.	32 _ arming.		.00	
		Voluntary charitable donations. Attach Schedule G. Total penalty and donations. Add Lines 32 and 33.	33 _		.00	.00
Step 12: Refund or Amount You Owe	36	If you have an overpayment on Line 30 and this amount is greater the Line 34, subtract Line 34 from Line 30. This is your remaining overpath Amount from Line 35 you want refunded to you. Check one box on I choose to receive my refund by direct deposit - Complete the information below if you check the Routing number Account number	aymen Line 3	7. See instructions.	35 36	2,511 .00 0 .00
		Illinois Individual Income Tax refund debit card paper check Subtract Line 36 from Line 35. This amount will be applied to your 2 If you have an underpayment on Line 31, add Lines 31 and 34. Or If you have an overpayment on Line 30 and this amount is less than			38	2,511 .00
		subtract Line 30 from Line 34. This is the amount you owe .	Line 3	4,	39	.00
Step 13: Sign and Date	Unde	r penalties of perjury, I state that I have examined this return, and, to t	he bes	st of my knowledge, Your spouse's signatu		correct, and complete.
		I NEWMAN 08/12/14 (312) 207-1	1040	Preparer's FEIN, SSN,	or PTIN	
Third Party Designee Form 1099-0	X	Check, and complete below, to allow another person to discuss this TERI NEWMAN Designee's name (please print)		n with the Illinois De (31)	partment 2) 20	7-1040 mber
Information						
349002 06-24-14		ILLINOIS DEPARTMENT OF REVENUE	LLINOIS	ent enclosed, mail to S DEPARTMENT OF R FIELD IL 62726-0001		
ID: 2BX		DR AP RR DC	IR			
IL-1040 page 2 (R	- 12/13)	DR AP RR DC	m			

Illinois Credits

Read this information first

Complete this schedule only if you are eligible for the

- Illinois Property Tax Credit
- K-12 Education Expense Credit
- Earned Income Credit (EIC)

• You must complete Form IL-1040 through Line 15 and Schedule CR, if applicable, before completing this schedule.

IL Attachment No. 23

The total amount of Illinois Property Tax Credit and K-12 Education Expense Credit cannot exceed tax. Only the Earned Income Credit may exceed tax.

Step 1: Provide the following information

	ADLEY S. SCHNEIDER name as shown on your Form IL-1040		Your Social	al Security number
Step	2: Figure your nonrefundable credit			
1 W	rite the amount of tax from your Form IL-1040, Line 15.		1	11,203 .00
	/rite the amount of credit for tax paid to other states from your Form I ubtract Line 2 from Line 1.	L-1040, Line 16.	2 3	.00 11,203 .00
Secti	on A - Illinois Property Tax Credit (See instructions for directions	on how to obtain	your property number)	
4 a	year for the real estate that includes your principal residence. Write the county and property number for the property listed above	4a	12,150 .00	
	4b County Prop	erty number		
С	4c	ed in Line 4a.		
	County Prop	erty number		
d	4d		-	
	County Prop	erty number		
е	,			
	expense on U.S. income tax forms or schedules, even if you did not take the federal deduction.	4e	.00	
f	Subtract Line 4e from Line 4a.	4f	12,150 .00	
g	Multiply Line 4f by 5% (.05).	4g	608 .00	
5 C	compare Lines 3 and 4g, and write the lesser amount here.		5	608 _{.00}
6 S	ubtract Line 5 from Line 3.	6	10,595 .00	
Secti	on B - K-12 Education Expense Credit			
	You must complete the K-12 Education Expense Credit Worksheet is schedule and attach any receipt you received from your student's s			
7 a	Write the total amount of K-12 education expenses from Line 13			
	of the worksheet on page 2 of this schedule.	7a	.00	
b	You may not take a credit for the first \$250 paid.	. 7b	250.00	
C	,,,,,,,,	" 7c	.00	
d	Multiply Line 7c by 25% (.25). Compare the result and \$500, and write the lesser amount here.	7d	.00	
8 C	compare Lines 6 and 7d, and write the lesser amount here.	74	8	0 .00
Secti	on C - Total Nonrefundable Credit			
9 A	dd Lines 5 and 8. This is your nonrefundable credit amount. Write this	s amount on		
- / '	orm IL-1040, Line 17.		\rightarrow 9	608 .00

Continued on Page 2



Schedule ICR - Page 2

Step 3: Figure your refundable credit

Earned Income Credit

<u>Note</u> If you were in a civil union as of December 31, 2013, you must recompute the federal EIC on your "as-if-married" federal return before computing this step.

10 a Write the amount of federal EIC as shown on your U.S. 1040, Line 64a; U.S. 1040A, Line 38a; or

U.S. 1040EZ, Line 8a.

b Multiply the amount on Line 10a by 10% (.10).

c Illinois residents: Write 1.0.

Nonresidents and part-year residents: Write the decimal from Schedule NR, Line 48.

d Multiply Line 10b by the decimal on Line 10c.

11 Write the amount from Line 10d here. This is your Illinois Earned Income Credit. Write this amount on Form IL-1040, Line 28. 10a <u>.00</u> 10b <u>.00</u>

10c ______ 10d .00

→ 11 <u>.00</u>

Section B Continued - K-12 Education Expense Credit Worksheet (continued from Step 2, Section B)

Note You must complete this section and attach any receipt you received from your student's school.

12 Complete the following information for each of your qualifying students. If a student attended more than one qualifying school during the calendar year, please list separately. If you need more space, attach a separate piece of paper following this format.

	A Student's name	B Social Security number	C Grade (K-12 only)	D School name (IL K-12 schools only or write "home school," if applicable)	E School city (IL cities only)	F Total tuition, book/lab fees
а						
b						
С						
d						
е						
f						
g						
h						
i						
j						

13	Add the amounts in Column F for Lines 12a through 12j (and the amounts from Column F of any		
	additional pages you attached). This is the total amount of your qualified education expenses for		
	this year. Write this amount here and on Step 2, Line 7a of this schedule.	13	.00.



2013 IL-2210 Computation of Penalties for Individuals

Attach to your Form IL-1040 IL Attachment No. 19

Read this information first- We encourage you to let us figure your penalties and send you a bill instead of completing this form yourself.

We will waive the late payment penalty for underpayment of estimated tax if you timely paid the lesser of 100 percent of the prior year's tax liability or 90 percent of the current year's tax liability. If you elect to complete Form IL-2210, this form reflects that waiver.

The late-payment penalty for underpayment of estimated tax is based on the tax shown due on your original return. Do not use the tax shown on an amended return filed after the extended due date of the return to compute your required installments in Step 2.

Step 1: Provide the following information BRADLEY S. SCHNEIDER

Step 2: Figure your required installments

2 Write the amount of credits from each tax return. See instructions.

Your name as shown on Form IL-1040

Your Social Security number

This year

11,203.

Note: If your prior year tax return was filed using a different Social Security number than the number above, write that number here.

1 Write the amount of your total income tax from each tax return. See instructions.

_	Time the amount of ordate from such tark	rotanni ooo intoli aationa.				
3	Subtract Line 2 from Line 1.			3	10,595.	2,269.
4a	Write the total amount of this year's Illinois	withholding from your W-2	2 forms. 4	a	6,383.	
4b	Write the total amount of any pass-through	h entity payments made or	your behalf. 4	b _		
4c	Add Lines 4a and 4b and write the result h	nere.	4	c	6,383.	
5	Subtract Line 4c from Line 3.			5	4,212.	
6	Multiply Column A, Line 3, by 90% (.9).			6	9,536.	
7	If Line 5 is \$500 or less or if you are not re	quired to make estimated	tax payments,	-	_	
	write "0," and go to Step 3. Otherwise, wri	te the lesser of Column A,	Line 6,			
	or Column B, Line 3.			7	2,269.	
8	Divide the amount written on Line 7 by fou	ır. This is the amount of ea	ch required		_	
	installment. (If you use the annualized inco	ome installment method, se	ee instructions.)	8	567.	
				_		
		Quarter 1	Quarter 2		Quarter 3	Quarter 4
		15th day of 4th	15th day of 6th		15th day of 9th	15th day of 1st mo.
9a	Write the installment due date for each	month of tax year	month of tax year		month of tax year	after end of tax year
	quarter. See instructions.					
9b	Write the required installment.			_		
	See instructions.	567.	567.		567.	568.
10a	Write any credit carried forward from			_		
	the prior year.		Skip this line for Quarter 2.		Skip this line for Quarter 3.	Skip this line for Quarter 4.
10b	Write the amount of tax withheld.	1,596.	1,596.		1,596.	1,595.
10c	Write the amount of pass-through payments.					
10d	Add Lines 10a through 10c in each column.	1,596.	1,596.		1,596.	1,595.
11	Subtract Line 10d from Line 9b. If the					
	amount is negative, use brackets.	<u> <1,029.</u> >	<1,029.>	٠.	<1,029.>	<u><1,027.</u> >
12	If the amount on Line 13 of the					
	previous quarter is negative, write					
	that amount as a positive here.					
	Otherwise, write "0."	Skip this line for Quarter 1.		_		
13	Subtract Line 12 from Line 11. If the					
	amount is negative, use brackets.			_		

Continue with Step 3 on Page 2



This form is authorized as outlined under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information could result in a penalty.

В

Last year

2,843.

15	Write the amount of hous	ehold employment ta	ax from IL-1040, L	ine 22.			15	2,327
16	Write the amount of use t	ax from IL-1040, Line	e 23.				16	
	Add Lines 14 through 16.						17	12,922
	Write the total amount of carried forward from the pass-through entity paym that total to the total of Li	all payments made oprior year, your total on the second se	on or before the or estimated paymer behalf, and your w	nts made this year, Fo ithholding as shown	orm IL-505-I pa on your W -2 fo	vments, the		15,433
19	Subtract Line 18 from Lin		•	the greater amount	TIGIG.			10,100
	• positive, write that amou			sheet 2, Line 23, Colum	nn C and continue	e to Step 4.		
	 zero or negative, write 		-				19	<2,511
_								
Use Use	tep 4: Figure yestep Penalty Worksheet 1 to fige Penalty Worksheet 2 to fige You must follow the in	gure your late-payme gure your late-payme	nt penalty for und nt penalty for unp	erpayment of estima aid tax.				
20	Write the amount and th	e date of each paym	ent you made. Se	e instructions.				
	Amount	Date paid	-		e paid		Amount	Date pai
	a		e			i		
	b		_			j		
	С					k		
	d		h			I		
	Penalty rates	1	of days late - 30 or more					
Pe	enalty Workshe	et 1 - Late-pa	ayment penal	ty for underpay	ment of est	imated tax	(
21			rters 1 through 4, D Payment applied		e appropriate q F Payment date	uarters in Colo G Number of days late		l Penalty
Qtr	r3							
Qtr								
	2 Add Column I, Quarters Write the total amount h	ere and on your Forn	n IL-1040, Line 32	(round to whole doll	ars).			

14

Step 3: Figure your unpaid tax

14 Write the amount from Column A, Line 3.

Penalty Worksheet 2, only if the payment date in Column F is after the original due date of the return.

Page 2 of 4 ID: 2BX

IL-2210 (R-12/13)

Write the total amount here tep 5: Figure you ote Figure your late-filing po you are filing your t	C Unpaid	D	_	_	_		_
Step 5: Figure you Step 5: Figure your late-filing points	amount	Payment applied	E Balance due (Col. C - Col. D)	F Payment date	G Number of days late	H Penalty rate (See above)	I Penalty
Write the total amount here tep 5: Figure you ote Figure your late-filing pour telephone you are filing your telephone			·				
Write the total amount here tep 5: Figure you ote Figure your late-filing pour telephone you are filing your telephone							
Write the total amount here itep 5: Figure your lote Figure your late-filing pour to the pour late Figure your late Fig	late-nayment n	enalty for unnaid t					
		-	dA.			24 _	
Figure your late-filing po	ur lata-fil	ing penalt	v and the an	ount ve	NI OWA		
 you are filing your t 	ai iato iii	ing pondit	y and the an	lount ye	ou ouc		
	enalty only if						
A	tax return after y	our extended due o	late, and				
 your tax was not pa 	aid on or before	your original due da	ate.				
igure your late-filing pe	nalty.						
5 Write the amount from Form	IL-1040, Line 15					25	
6 Write the amount of househo			40, Line 22.			26	
7 Write the amount of use tax f						27	
8 Add Lines 25 through 27. Wr						28	
9 Write the total amount of cred		its made on or befo	re your original due da	ate.		29	
O Subtract Line 29 from Line 28						30	
1 Multiply the amount on Line 3						31	
32 Write the lesser of Line 31 or \$250. This is your late-filing penalty.						32	
igure the amount you o							
3 Write any late-payment pena	-	ax from Line 24.				33	
4 Write any late-filing penalty						34	
5 If you have an overpayment of			_				
If you have an amount due or			· ·			35	
Add Lines 33 through 35. If the	he result is a neg	ative number, this	is the amount you are	overnaid (hefe	oro any amou	int	
applied to next year's estimated Line 39, instructions for your							

Continue to Step 6 on Page 4, if annualizing your income.



Step 6: Complete the annualization worksheet for Step 2, Line 9b

Complete this worksheet only if your income was not received evenly throughout the year and you choose to annualize your income. Complete Lines 37 through 53 of one column before going to the next, beginning with Column A.

			A First 3 months	B First 5 months	C First 8 months	D All 12 months
37	Write your Illinois base income					
	for each period. See instructions.	37				
38	Annualization factors.	38	4	2.4	1.5	1
39	Multiply Line 37 by Line 38. This is					
	your annualized income.	39				
40	Exemptions. See instructions.	40				
41	Subtract Line 40 from Line 39. This					
	is your Illinois net income.	41				
42	Multiply Line 41 by 5% (.05).	42				
43	For each period, write the					
	amount you wrote on					
	Step 2, Line 2, Column A.	43				
44	Subtract Line 43 from Line 42.	44				
45	Applicable percentage.	45	22.5% (.225)	45% (.450)	67.5% (.675)	90% (.900)
46	Multiply Line 44 by Line 45.					
	This is your annualized					
	installment.	46				
47	Add the amounts on Line 53 of each					
	of the preceding columns and write					
	the total here.	47	Skip this line for Column A.			
48	Subtract Line 47 from Line 46. If less					
	than zero, write "0."	48				
49	Write the amount you would have					
	entered in Step 2, Line 9b, if you were					
	not annualizing.	49				
50	Write the amount from Line 52 of the					
	preceding column.	50	Skip this line for Column A.			
51	Add Lines 49 and 50.	51				
52	If Line 51 is greater than Line 48,					
	subtract Line 48 from Line 51.					
	Otherwise, write "0."	52				Skip this line for Column D.
53	Write the lesser of Line 48 or Line 51					
	here and on Step 2, Line 9b. This is					
	your required installment.	53				
	, , , , , , , , , , , , , , , , , , , ,				•	

FOOTNO	TES STATEMENT 1
ALLOCATION OF FORM IL-505-I, AUTOMATIC EXTENSION PAYMENT:	
BRADLEY S. SCHNEIDER (SSN:) JULIE R. DANN (SSN:)	4,000. 7,000.
	11,000.