# Tax Year 2016 1041 MeF ATS Scenario 1 David Blue Trust 00-4043211

## Forms Included in Scenario 1

Form 1041

Schedule I (Form 1041)

Schedule D (Form 1041

Schedule E (Form 1040)

Form 4562 (3)

Form 8949

Form 8960

Form 8453-FE

Interest Paid on Seller Provided Financing Statement

**IRS Payment** 

Schedule K-1 (Form 1041) (2)

Schedule K-1 Net Rental Real Estate Income Explanation (2)

## Taxpayer Name, Address and TIN

David Blue Trust 1<sup>st</sup> Test St Kansas City, MO 64112 00-4043211

# **Statement Information**

# Interest Paid On Seller Provided Financing Statement

Name	Address	SSN
James Green	358 Queen St Montreal, QC CA	345-00-7968

Alfred White	55 Oxford Rd Aylesbury HP19 3EQ UK	675-00-3275
Sandeep Red	342 Lodhi Rd New Dehli 110003 IN	432-00-1322

# **Signature Information**

Signature on Form 8453-FE and included in submission as PDF.

## **IRS** Payment Record

Routing Number: 101000187
Bank Account Number: 53212345050
Bank Account Type: Checking
Payment Amount: \$1,571.00
Requested Payment Date: 03/15/2017
Daytime Phone Number: (000)-777-1212

# Statements for 1041 Sch K-1 John Orange

# **Net Rental Real Estate Income Explanation**

This statement is being provided for test purposes.

# Statements for 1041 Sch K-1 Amy Purple

## **Net Rental Real Estate Income Explanation**

This statement is being provided for test purposes.

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Department of the Treasury-Internal Revenue Service
U.S. Income Tax Return for Estates and Trusts

OMB No. 1545-0092

	Info	rmation about Fo	orm 1041 and its separate i	nstructions is at www.irs.gov/form1	041.							
A C	heck a	ill that apply:	For calendar year 2016 or f	fiscal year beginning	, 2016, and	endin	g	, 20	)			
	Decede	nt's estate	Name of estate or trust (If a gra	antor type trust, see the instructions.)		CI	Employer i	dentification num	oer			
	Simple	trust	David Blue Trust				0	0-4043211				
<b>√</b> (	Comple	x trust	Name and title of fiduciary			D I	Date entity	created				
	Qualifie	d disability trust	Jeffrey Black, Esq.					03/17/1983				
	SBT (S	S portion only)	Number, street, and room or su	uite no. (If a P.O. box, see the instructions.)				charitable and spli				
_		type trust	1st Test St					ts, check applicable instructions.	е			
$\overline{}$		otcy estate-Ch. 7				N —	<b>1</b>	n sec. 4947(a)(1). Ch	eck here			
_		otcy estate-Ch. 11	City or town, state or province,	country, and ZIP or foreign postal code				foundation	.▶□			
$\Box$	ooled	income fund	Kansas City, MO 64112					in sec. 4947(a)(2)				
<u>B</u> N	lumber	of Schedules K-1	F Check Initial return	Final return Amended	return			ting loss carryback				
	ttache	d (see lons) ► 2	applicable Change in trust's		fiduciary's name			fiduciary's address				
		·	ing trust made a section 645 elec					,				
	1	Interest incom	e				. 11	200	0			
	2a						. 2a	1000	0			
	b	-	ends allocable to: (1) Benefic		truet				1			
4	3			dule C or C-EZ (Form 1040)	trust		. 3					
Ĕ	4		, ,	D (Form 1041)			. 4		+			
Income	5			ates and trusts, etc. Attach Sched		40)		1	+			
<u>=</u>	6			F (Form 1040)	•	•			+			
	7		, ,	97					+			
	8		List type and amount						+-			
	9			d 3 through 8			9		+			
_	10		k if Form 4952 is attached			<u>,</u>	. 10		+			
	11	_					. 11	200				
	12	Fiduciary fees					. 12	100				
	13	•										
	14		ountant, and return prepar		. 13	500 100						
JS	15a	•	ons <b>not</b> subject to the 2%		. 15a	100	<del>-</del>					
Deductions	b		loss deduction. See instru		. 15a		_					
nci					. 15c		+					
be	16			ctions subject to the 2% floor			• 16		+			
۵	16 17	Add lines 10 th	_	et line 16 from line 9   <b>17</b>	1	<b>, ,</b>	10		+			
	18	•	, ,	hedule B, line 15). Attach Schedule		041)	18	7461	1			
	19		•	generation-skipping taxes (attach o	•			7401	+			
	20	Exemption .	•	, , , , , , , , , , , , , , , , , , , ,	omputation		. 20	10				
	21	•					21	10	<i>y</i>			
	22			ine 17. If a loss, see instructions .		•		2556	2			
	23							2330.	-			
	24	•		ents and amount applied from 201				174	6			
ţ	24 b	-		ents and amount applied from 201 eneficiaries (from Form 1041-T)				174	-			
en	C						. 24c	174	6			
Ę	d			ons			. 24d	174	+			
Tax and Payments	e			om Form(s) 1099, check ▶ □			. 24e		+			
9	C			; <b>g</b> Form 4136					+			
an	25								+			
ä	26		•						+			
Н	27			otal of lines 23 and 26, enter amou					+			
	28			he total of lines 23 and 26, enter all					+			
	29		28 to be: a Credited to		•				+			
	_			nined this return, including accompanying s	; b Refur			best of mv knowle	dge and			
Sig				preparer (other than taxpayer) is based on a								
He	·							lay the IRS discuss the				
	1 5	Signature of fiducia	ary or officer representing fiducia	ary Date EIN of fi	iduciary if a financi	al institu		rith the preparer show see instr.)? <b>Yes</b>	vn below			
_		Print/Type prep		Preparer's signature	Date			PTIN				
Pa							Check self-emplo	it				
	par			Firm's EIN ▶								
US	e Or	Firm's name Firm's address	<b>&gt;</b>			Phone						

Form 1041 (2016) Page 2 Charitable Deduction. Don't complete for a simple trust or a pooled income fund. Schedule A Amounts paid or permanently set aside for charitable purposes from gross income. See instructions 1 2 2 Tax-exempt income allocable to charitable contributions. See instructions . . . . . . . . . . . . . 3 3 4 4 5000 Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes 5 5 6 Section 1202 exclusion allocable to capital gains paid or permanently set aside for charitable purposes. See instructions . 6 Charitable deduction. Subtract line 6 from line 5. Enter here and on page 1, line 13 . . . . 7 Schedule B Income Distribution Deduction 1 2 2 3 Total net gain from Schedule D (Form 1041), line 19, column (1). See instructions 3 4 Enter amount from Schedule A, line 4 (minus any allocable section 1202 exclusion) 4 5000 5 Capital gains for the tax year included on Schedule A, line 1. See instructions . . . 5 Enter any gain from page 1, line 4, as a negative number. If page 1, line 4, is a loss, enter the loss as a positive number 6 6 Distributable net income. Combine lines 1 through 6. If zero or less, enter -0- . . . . 7 7 8 If a complex trust, enter accounting income for the tax year as determined under the governing instrument and applicable local law . 9 9 74614 Other amounts paid, credited, or otherwise required to be distributed . . . 10 10 Total distributions. Add lines 9 and 10. If greater than line 8, see instructions 11 11 12 Enter the amount of tax-exempt income included on line 11 . . . . . . . . 12 13 Tentative income distribution deduction. Subtract line 12 from line 11 . . . 13 14 Tentative income distribution deduction. Subtract line 2 from line 7. If zero or less, enter -0-14 15 Income distribution deduction. Enter the smaller of line 13 or line 14 here and on page 1, line 18 15 Schedule G Tax Computation (see instructions) Tax: a Tax on taxable income. See instructions . . . . . . . **b** Tax on lump-sum distributions. Attach Form 4972 . . . . 1b c Alternative minimum tax (from Schedule I (Form 1041), line 56) 1c d Total. Add lines 1a through 1c . . . . . . . . . . . . 1d Foreign tax credit. Attach Form 1116 . . . . . . . . . . . . . . . General business credit. Attach Form 3800 . . . . . . . 2b Credit for prior year minimum tax. Attach Form 8801 . . . 2c **Total credits.** Add lines 2a through 2d . . . . . . . . . . . . . . 2e 3 3 Subtract line 2e from line 1d. If zero or less, enter -0- . . . . . . Net investment income tax from Form 8960, line 21 . . . . . . . 4 4 5 Recapture taxes. Check if from: Form 4255 Form 8611 . . . 5 6 Household employment taxes. Attach Schedule H (Form 1040) . . . . . . . 6 7 Total tax. Add lines 3 through 6. Enter here and on page 1, line 23 . . . . . . . 7 Other Information Yes No Did the estate or trust receive tax-exempt income? If "Yes," attach a computation of the allocation of expenses. 1 Enter the amount of tax-exempt interest income and exempt-interest dividends ▶ \$ 2 Did the estate or trust receive all or any part of the earnings (salary, wages, and other compensation) of any At any time during calendar year 2016, did the estate or trust have an interest in or a signature or other authority 3 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country During the tax year, did the estate or trust receive a distribution from, or was it the grantor of, or transferor to, a 5 Did the estate or trust receive, or pay, any qualified residence interest on seller-provided financing? If "Yes," see If this is an estate or a complex trust making the section 663(b) election, check here. See instructions . . . ▶ □ 6 7 To make a section 643(e)(3) election, attach Schedule D (Form 1041), and check here. See instructions . . . . 8 If the decedent's estate has been open for more than 2 years, attach an explanation for the delay in closing the estate, and check here

9

### SCHEDULE I (Form 1041)

## Alternative Minimum Tax—Estates and Trusts

OMB No. 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

**David Blue Trust** 

► Attach to Form 1041.

▶ Information about Schedule I (Form 1041) and its separate instructions is at www.irs.gov/form1041.

**Employer identification number** 

00-4043211

Part I Estate's or Trust's Share of Alternative Minimum Taxable Income 1 Adjusted total income or (loss) (from Form 1041, line 17) 2 2 3 3 2000 4 4 Miscellaneous itemized deductions (from Form 1041, line 15c) Refund of taxes . . . . . . . . . . . . . . . . 5 5 6 6 Depletion (difference between regular tax and AMT). 7 Net operating loss deduction. Enter as a positive amount . 7 8 Interest from specified private activity bonds exempt from the regular tax. 8 9 9 10 Exercise of incentive stock options (excess of AMT income over regular tax income) 10 11 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 11 12 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) . . . 12 13 Disposition of property (difference between AMT and regular tax gain or loss) 13 14 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 14 Passive activities (difference between AMT and regular tax income or loss) . . . . 15 15 16 Loss limitations (difference between AMT and regular tax income or loss) . . . 16 17 Circulation costs (difference between regular tax and AMT) . . . . . . . . 17 Long-term contracts (difference between AMT and regular tax income) . . . . 18 18 19 Mining costs (difference between regular tax and AMT) . . . . . . . . . . . 19 20 Research and experimental costs (difference between regular tax and AMT) . . . 20 21 21 22 22 23 23 Other adjustments, including income-based related adjustments . . . 24 Alternative tax net operating loss deduction (See the instructions for the limitation that applies.) 24 25 Adjusted alternative minimum taxable income. Combine lines 1 through 24 . . . . . . 25 Note: Complete Part II below before going to line 26. 26 Income distribution deduction from Part II, line 44 . . . . 27 Estate tax deduction (from Form 1041, line 19) . . . . . 28 Add lines 26 and 27 . . . . . . . . . . . . . . 28 29 29 Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25 . If line 29 is: • \$23,900 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax. • Over \$23,900, but less than \$175,450, go to line 45. • \$175,450 or more, enter the amount from line 29 on line 51 and go to line 52. Part II **Income Distribution Deduction on a Minimum Tax Basis** 30 Adjusted alternative minimum taxable income (see instructions) . . . . 30 102276 31 Adjusted tax-exempt interest (other than amounts included on line 8) . . . 31 32 Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-32 Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable 33 33 5000 Capital gains paid or permanently set aside for charitable purposes from gross income (see 34 34 35 35 18710 Capital gains computed on a minimum tax basis included on line 25 . . . . . . 36 Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount 36 37 Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. 37 88566 Income required to be distributed currently (from Form 1041, Schedule B, line 9) . . . . . . . 74614 38 38 39 Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10) 39 40 40 41 Tax-exempt income included on line 40 (other than amounts included on line 8) 41 42 Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40. 42

Part	· ·					
43	Tentative income distribution deduction on a minimum tax basis. Subtra			7.		
	If zero or less, enter -0			. 43		
44	Income distribution deduction on a minimum tax basis. Enter the small					
	Enter here and on line 26			. 44		
Part						
45	Exemption amount			. 45	\$23,900	00
46		46	27662			
47	Phase-out of exemption amount	47	\$79,850	00		
48	Subtract line 47 from line 46. If zero or less, enter -0	48				
49	Multiply line 48 by 25% (0.25)			. 49		
50	Subtract line 49 from line 45. If zero or less, enter -0			. 50		+
51	Subtract line 50 from line 46			. 51	3762	!
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qua					
	gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as a	retigi	ired for the AMI,	IT		
	necessary). Otherwise, if line 51 is—					
	• \$186,300 or less, multiply line 51 by 26% (0.26).					
	• Over \$186,300, multiply line 51 by 28% (0.28) and subtract \$3,726 from					
53						-
54	Tentative minimum tax. Subtract line 53 from line 52			. 54		
55 56	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit <b>Alternative minimum tax.</b> Subtract line 55 from line 54. If zero or less, 6					
30	on Form 1041, Schedule G, line 1c					
Part	•			. 50		
ган	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Sci		lo D Tax Warkshoo	.+		
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 10					
	before completing this part.	J-11,	see the manacher	75		
57	Enter the amount from line 51			. 57		
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the	•		. 07		
	Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax					
	Worksheet in the Instructions for Form 1041, whichever applies (as					
	refigured for the AMT, if necessary)	58				
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as					
	refigured for the AMT, if necessary). If you didn't complete Schedule D					
	for the regular tax or the AMT, enter -0	59				
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or					
	the AMT, enter the amount from line 58. Otherwise, add lines 58 and 59					
	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)	60				
61	Enter the <b>smaller</b> of line 57 or line 60			. 61		
62	Subtract line 61 from line 57					
63	If line 62 is \$186,300 or less, multiply line 62 by 26% (0.26). Otherwise,			%		
	(0.28) and subtract \$3,726 from the result			63		
64	Maximum amount subject to the 0% rate	64	\$2,550 (	00		
65	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the					
	Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as					
	figured for the regular tax). If you didn't complete Schedule D or either					
	worksheet for the regular tax, enter the amount from Form 1041, line					
	22; if zero or less, enter -0	65				
66	Subtract line 65 from line 64. If zero or less, enter -0	66				
67	Enter the <b>smaller</b> of line 57 or line 58	67				
68	Enter the <b>smaller</b> of line 66 or line 67. This amount is taxed at 0%	68				
69	Subtract line 68 from line 67	69				1

Schedule I (Form 1041) (2016)

Corroda	0 1 (1 0 m 1 0 1 1) (20 1 0)						
Part	V Line 52 Computation Using Maximum Capital Gains Rates	(con	tinued)				
70	Maximum amount subject to rates below 20%	70	\$12,400	00			
71	Enter the amount from line 66	71					
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22; if zero or less, enter -0	72					
73	Add line 71 and line 72	73				_	
74	Subtract line 73 from line 70. If zero or less, enter -0	74					
75	Enter the <b>smaller</b> of line 69 or 74						
76	Multiply line 75 by 15% (0.15)	1			76		
77	Add lines 68 and 75						
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. Other			- 4			
78	Subtract line 77 from line 67	78					
79	Multiply line 78 by 20% (0.20)	<b>-</b>			79		
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. O	therv	wise, go to line	BO.			
80	Add lines 62, 77, and 78	80					
81	Subtract line 80 from line 57	81					
82	Multiply line 81 by 25% (0.25)			<b>•</b>	82		
83	Add lines 63, 76, 79, and 82				83		
84	If line 57 is \$186,300 or less, multiply line 57 by 26% (0.26). Otherwise,	multi	ply line 57 by 28	8%			
	(0.28) and subtract \$3,726 from the result			.	84		
85	Enter the <b>smaller</b> of line 83 or line 84 here and on line 52			. [	85		

Schedule I (Form 1041) (2016)

### **SCHEDULE D** (Form 1041)

Department of the Treasury Internal Revenue Service

# **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T.

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

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

OMB No. 1545-0092

Name of estate or trust **David Blue Trust** 

Employer identification number

00-4043211

Note	: Form 5227 filers need to complete <b>only</b> Parts I and II.					
Pa		sets Held One \	ear or Less			
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.	6,	20			
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					
	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	1544	600			
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term capital gain or (loss) from Forms 4684, 6252	, 6781, and 8824			4	
5 6	Net short-term gain or (loss) from partnerships, S corpo Short-term capital loss carryover. Enter the amount, i Carryover Worksheet	f any, from line 9	of the 2015 Cap		5	
7	Net short-term capital gain or (loss). Combine lines 1 line 17, column (3) on the back	a through 6 in col	umn (h). Enter her		7	,
Par		sets Held More	Than One Year			1
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	s from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	32766	15000			
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Long-term capital gain or (loss) from Forms 2439, 4684,	6252, 6781, and	8824		11	
12	Net long-term gain or (loss) from partnerships, S corpore	ations, and other	estates or trusts		12	
13	Capital gain distributions				13	
14 15	Gain from Form 4797, Part I	any, from line 14	of the 2015 Cap	ital Loss	14	
16	Carryover Worksheet	a through 15 in col	lumn (h). Enter her	e and on	15	( )
	line 18a, column (3) on the back			🕨	16	

Schedule D (Form 1041) 2016 Page 2

Part	<del>7</del>		(1) Beneficiar (see instr.		(2) Estate' or trust's	(3) Total	
	Caution: Read the instructions before completing this part		(See IIISII.	.)	or trust s		
17	Net short-term gain or (loss)	17			944		
18	Net long-term gain or (loss):						
а	Total for year	18a			17766		
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.) .	18b					
С	28% rate gain	18c					
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19					

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

### Part IV Capital Loss Limitation

- 20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the **smaller** of:

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

#### Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 22 (or Fo	rm 99	00-T, line 34) .		21				
22	Enter the <b>smaller</b> of line 18a or 19 in column (2)								
	but not less than zero	22	17766						
23	Enter the estate's or trust's qualified dividends from								
	Form 1041, line 2b(2) (or enter the qualified dividends								
	included in income in Part I of Form 990-T)	23							
24	Add lines 22 and 23	24							
25	If the estate or trust is filing Form 4952, enter the								
	amount from line 4g; otherwise, enter -0 ▶	25							
26	Subtract line 25 from line 24. If zero or less, enter -0				26	17766			
27	Subtract line 26 from line 21. If zero or less, enter -0				27	0			
28	Enter the smaller of the amount on line 21 or \$2,550	) .			28				
29	Enter the <b>smaller</b> of the amount on line 27 or line 28	3.			29				
30	Subtract line 29 from line 28. If zero or less, enter -0				0%			30	
31	Enter the <b>smaller</b> of line 21 or line 26				31				
32	Subtract line 30 from line 26				32	15216			
33	Enter the <b>smaller</b> of line 21 or \$12,400				33	12400			
34	Add lines 27 and 30				34				
35	Subtract line 34 from line 33. If zero or less, enter -0				35	9850			
36	Enter the <b>smaller</b> of line 32 or line 35				36				
37	Multiply line 36 by 15% (0.15)							37	
38	Enter the amount from line 31				38				
39	Add lines 30 and 36				39	12400			
40	Subtract line 39 from line 38. If zero or less, enter -0				40				
41	Multiply line 40 by 20% (0.20)							41	
42	Figure the tax on the amount on line 27. Use the 2016 Tax								
	and Trusts (see the Schedule G instructions in the instruction				42				
43	Add lines 37, 41, and 42				43				
44	Figure the tax on the amount on line 21. Use the 2016 Tax								
	and Trusts (see the Schedule G instructions in the instruction		,		44				
45	Tax on all taxable income. Enter the smaller of line	e 43 c	or line 44 here a	and o	n For	m 1041, Sched	dule		
	O 11 4- ( F 000 T 11 00)								ı

### **SCHEDULE E** (Form 1040)

#### Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) ► Attach to Form 1040, 1040NR, or Form 1041.

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

Your social security number **David Blue Trust** 00-4043211 Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) Yes B If "Yes," did you or will you file required Forms 1099? Yes Physical address of each property (street, city, state, ZIP code) Α 5 Plum St Olathe, 66061 В 60 Birch Ave Leawood, KS 66202 C 331 SW 3rd St. Lee's Summit, MO 64063 1b Fair Rental Personal Use Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days** Days personal use days. Check the QJV box only if you meet the requirements to file as 365 Α Α a qualified joint venture. See instructions. В В 365 С C 365 Type of Property: Single Family Residence 3 Vacation/Short-Term Rental Self-Rental Multi-Family Residence 4 Commercial 6 Royalties Other (describe) С Income: Properties: Α 3 Rents received 3 36000 42000 40000 4 4 Royalties received . . Expenses: 5 Advertising 5 3000 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . 7 2000 3000 5500 8 8 Commissions. . . . . 9 9 2000 2500 10000 Insurance . . . . . . . 10 Legal and other professional fees . 10 2000 11 Management fees . . . . . . . . . 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. . . . . . . . . . 14 1500 1500 14 Repairs. 2051 15 15 Supplies . 2602 16 Taxes . . . . 16 435 1346 17 17 18 18 Depreciation expense or depletion . . . Other (list) ----19 19 Total expenses. Add lines 5 through 19 . . . . . 20 20 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 . . . . . . . . . . . . . . . . . 21 Deductible rental real estate loss after limitation, if any, 22 on Form 8582 (see instructions) . . . . . . . 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line

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

Name(s	s) shown on return. Do not enter	r name and social se	curity number	if shown on othe	r side.				Your so	ocial se	curity number	er
	Blue Trust									00-	4043211	
Cauti	on: The IRS compares a	amounts reporte	d on your t	tax return with	n amou	nts sh	own on So	chedule(s) ł	<-1.			
Part	Income or Loss any amount is not a		-	-			-	•			activity for v	vhich
27	Are you reporting an unallowed loss from you answered "Yes,"	a passive activit	y (if that lo	ss was not re	ported	on For						
28		(a) Name		pártr	enter <b>P</b> for nership; <b>S</b> corporation		Check if foreign artnership	ident	mployer ification mber		(e) Che any amou not at r	unt is
Α				10.0	00.p0.a	,,, p.		110	moor			ioit
В												
С												
D					4					7		
		ome and Loss						ve Income	_			
	(f) Passive loss allowed (attach Form 8582 if require		ssive income schedule K-1		onpassiv Schedule			ection 179 exp tion from <b>Forr</b>			Nonpassive ir om <b>Schedule</b>	
<u>A</u>												
B												
D			<del>- 1</del>		-							
29a	Totals											
b	Totals											
30	Add columns (g) and (j)	of line 29a							30			
31	Add columns (f), (h), an	nd (i) of line 29b							31	(		
32	Total partnership and											
Dout	result here and include								32			
Part	III Income or Los	s From Estate	s and Tru	ısts						//-	\	
33			(a) Nar	me							) Employer fication number	er
A												
В	Pass	sive Income and	d Loss				No	npassive I	ncome	and	Loss	
	(c) Passive deduction or			Passive income			(e) Deductio	-			er income fro	m
	(attach Form 8582 if	required)	fro	m Schedule K-1			from Sched	lule K-1		Sc	hedule K-1	
Α												
В	<del>-</del>											
34a	Totals Totals											
b 35	Add columns (d) and (f	of line 34a							35	Ι		
36	Add columns (c) and (e	,							36	(		,
37	Total estate and trus	•	ss). Comb	oine lines 35	and 36	. Ente	r the resu	It here and		İ		
	include in the total on I	ine 41 below .	<i>.</i>						37			
Part	IV Income or Los	s From Real E	state Mo				nduits (R	EMICs) —	Resid	ual H	older	
38	(a) Name	(b) Employer ide number		(c) Excess ind Schedules (see instri	<b>Q</b> , line 20			ncome (net los l <b>ules Q,</b> line 1			Income from dules Q, line 3	Bb
39 Part	Combine columns (d) a	and (e) only. Ente	er the resul	t here and inc	lude in	the to	tal on line	41 below	39			
Part 40	V Summary  Net farm rental income	or (loss) from E	orm 1925	Also comple	ta lina	12 hale	<b>2</b> W/		40			
40 41	Total income or (loss). Combin	, ,		•				 40NR, line 18 ▶	41			
42	Reconciliation of farm									•		
	farming and fishing inco	-	-	•	-							
	(Form 1065), box 14, co											
	V; and Schedule K-1 (Fo	orm 1041), box 14	, code F (se	ee instructions	)	42						
43	Reconciliation for real	•	•									
	professional (see instruct anywhere on Form 1040 of											
	in which you materially pa					43						

Department of the Treasury

## **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Attachment

Identifying number

OMB No. 1545-0172

Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Sequence No. 179

**David Blue Trust** Rental Property A 00-4043211 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Total cost of section 179 property placed in service (see instructions) . . . 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property. Enter the amount from line 29 7 . . . . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 **10** Carryover of disallowed deduction from line 13 of your 2015 Form 4562 . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 **15** Property subject to section 168(f)(1) election . . . . . . . . . . . . . . . 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2016 . . . . . . . . 17 1252 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2016 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property 20000 5yrs HY SL 2000 **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM 9/1 property 27.5 yrs. MM S/L i Nonresidential real S/L 39 yrs. MM property MM S/L Section C-Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs. **b** 12-year c 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

	4562 (2016)												Page 2
Pa	rt V Listed Property (Include aut used for entertainment, recrea				vehicl	es, ce	ertain ai	rcraft,	certair	n comp	outers,	and pr	operty
	Note: For any vehicle for which			,	rd mile	ane ra	ite or de	ducting	lease	eynens	e comi	olete <b>or</b>	ılv 24a
	24b, columns (a) through (c) of Se								10000	охроно	0, 00111	31010 01	<b>y</b> 2 10,
	Section A—Depreciation and Other								for pas	ssenger	autom	obiles.)	
248	a Do you have evidence to support the business/											☐ Yes	☐ No
	(a) e of property (list vehicles first)  (b) Date placed in service investment use percentage  (c) Business/investment use percentage	(d) or other ba		(e) for depreness/investing use only	stment	(f) Recove period		(g) ethod/ evention		(h) preciation eduction	Ele	(i) ected sect cost	
25	Special depreciation allowance for qu												
	the tax year and used more than 50%				e (see i	nstruc	ctions) .	25					
26	Property used more than 50% in a qua	lified busi	ness use	): 									
	%			) [									
	%					_							
27	Property used 50% or less in a qualifie	d busines	s use:										
	%						S/L -	_					
	%						S/L -	-					
	%						S/L-						
28						-	ige 1 .	28					
29	Add amounts in column (i), line 26. Ent										29		
Com	plete this section for vehicles used by a so	Section I						or"orr	alatad n	ercon I	f vou pr	ovided v	chicles
	our employees, first answer the questions in												CHICIES
	and the queens in a			i .		100 0110		<u> </u>		Ι .			
30	Total business/investment miles driven dur the year (don't include commuting miles)	ing Ve	(a) hicle 1		<b>b)</b> icle 2	Ve	(c) hicle 3		<b>d)</b> icle 4		<b>e)</b> icle 5		f) cle 6
31	Total commuting miles driven during the ye	ar											
	Total other personal (noncommuting miles driven												
33	Total miles driven during the year. A lines 30 through 32	dd											
34	Was the vehicle available for person		No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?												
	Was the vehicle used primarily by a mothan 5% owner or related person? .												
36	Is another vehicle available for personal use												
	Section C—Questions wer these questions to determine if you a than 5% owners or related persons (see	neet an e	xception					-				who <b>ar</b>	en't
	Do you maintain a written policy state your employees?	ment that	prohibit	s all pe	rsonal ı	use of	vehicles	s, includ	ding co	mmutin	g, by 	Yes	No
38	Do you maintain a written policy state employees? See the instructions for ve												
39	Do you treat all use of vehicles by emp		-	-									
	Do you provide more than five vehicle use of the vehicles, and retain the infor	s to your	employe	es, obt	tain info	ormatio	on from	your er	nploye	es abou	ut the		
41	Do you meet the requirements concern				demons	stratio	n use? (S	See inst	ruction	s.) .			
	Note: If your answer to 37, 38, 39, 40,									-			
Pa	rt VI Amortization												
	Description of costs  Description of costs	b) ortization gins	Amo	<b>(c)</b> rtizable aı	mount		(d) Code secti	ion	(e) Amortiza period percent	or	Amortiza	<b>(f)</b> ition for th	iis year
42	Amortization of costs that begins durin	g your 20	16 tax ye	ear (see	instruc	tions):							
							_						
43	Amortization of costs that began before	e your 20°	16 tax ye	ar						43			

44 Total. Add amounts in column (f). See the instructions for where to report .

# **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Attachment Sequence No. **179** 

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return				siness or activity to w	Identif	ying number		
Davi	d Blue Trust			ntal Property B				00-4043211
Par			ertain Property led property, con			olete Part I.		
1	Maximum amount (						1	
2	Total cost of sectio						2	
3	Threshold cost of s						3	
4	Reduction in limitat						4	
5	Dollar limitation for							
	separately, see inst						5	
6	(a) De	escription of prope			iness use only)	(c) Elected cost		
7	Listed property. Ent	ter the amount	from line 29		7		$\neg \neg$	
	Total elected cost of						8	
	Tentative deduction						9	
	Carryover of disallo						10	
11	Business income limi					5 (see instructions)	11	
12	Section 179 expens			•	,		12	
	Carryover of disallo					13		
	: Don't use Part II c							
						e listed property.) (S	See ins	tructions.)
14	Special depreciation	n allowance	for qualified prop	erty (other than	listed property	placed in service		•
	during the tax year	(see instruction	ns)				14	
15	Property subject to	section 168(f)	(1) election				15	
16	Other depreciation	(including ACF	RS)				16	
Par	t III MACRS De	preciation (D						
	<u> </u>			Section A				
17	MACRS deductions	for assets pla	ced in service in ta	ax years beginni	ng before 2016		17	2546
18	If you are electing	to group any a	assets placed in s	ervice during th	e tax year into o	ne or more general		
	asset accounts, che							
	Section B			-	ear Using the G	eneral Depreciation	n Syste	m
(a) (	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment uponly—see instructions	ise (a) Recovery	(e) Convention	(f) Method	(g) De	epreciation deduction
19a	3-year property							
b	5-year property		25000	5 yrs	HY	SL		2500
C	7-year property							
d	10-year property							
е	15-year property							
f	20-year property							
	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L		
	property				MM	S/L		
	Section C-	-Assets Place	ed in Service Duri	ng 2016 Tax Ye	ar Using the Alt	ernative Depreciation	on Sys	tem
20a	Class life					S/L		
	12-year			12 yrs.		S/L		
	40-year			40 yrs.	MM	S/L		
Par	t IV Summary (	See instruction	ons.)					
	Listed property. En						21	
22	Total. Add amoun							
	here and on the app	oropriate lines	of your return. Par	tnerships and S	corporations—s	ee instructions .	22	

portion of the basis attributable to section 263A costs

23 For assets shown above and placed in service during the current year, enter the

	4562 (2016)												Page 2
Pa	rt V Listed Property (Include autoused for entertainment, recrea				vehicl	es, ce	ertain ai	rcraft,	certair	n comp	outers,	and pr	operty
	Note: For any vehicle for which			,	rd mile	ane ra	ite or de	ducting	lease	eynens	e comi	olete <b>or</b>	ılv 24a
	24b, columns (a) through (c) of Se								10000	охроно	0, 00111	01010 01	<b>y</b> 2 10,
	Section A—Depreciation and Other								for pa	ssenger	autom	obiles.)	
248	a Do you have evidence to support the business/											☐ Yes	
	(a) e of property (list vehicles first)  (b) Date placed in service investment use percentage	(d) or other ba		(e) for depreness/investing use only	stment	(f) Recove period		(g) ethod/ vention		(h) preciation eduction	Ele	(i) ected sectorsectors	
25	Special depreciation allowance for qu												
	the tax year and used more than 50%				e (see i	nstruc	tions) .	25					
_26	Property used more than 50% in a qua	illea busi	ness use	<del>)</del> :									
	%			<del>)                                    </del>									
	%												
27	Property used 50% or less in a qualifie	d busines	s use:	_									
	%						S/L -						
	%						S/L -						
	%						S/L -				_		
28						-	ge 1 .	28					
_29	Add amounts in column (i), line 26. Ento										29		
Com	plete this section for vehicles used by a sol	Section I						er " or r	elated n	erson I	f vou pr	ovided v	ehicles
	our employees, first answer the questions in												Ciliolos
			(a)	i .	b)	i i	(c)	· -	d)	Ι .	e)	T .	f)
30	Total business/investment miles driven dur the year (don't include commuting miles)	ng Ve	ehicle 1		icle 2	Ve	hicle 3		icle 4		icle 5		cle 6
31	Total commuting miles driven during the ye	ar											
32	Total other personal (noncommuting miles driven	ng)											
33	Total miles driven during the year. A lines 30 through 32	dd											
34	Was the vehicle available for person	nal <b>Yes</b>	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?												
35	Was the vehicle used primarily by a mothan 5% owner or related person? .	I											
36	Is another vehicle available for personal use												
	Section C—Questions wer these questions to determine if you is than 5% owners or related persons (se	neet an e	xception					-				who <b>ar</b>	en't
	Do you maintain a written policy stated your employees?	nent that	prohibit	s all pe	rsonal ı	use of	vehicles	, includ	ding co	mmutin	g, by	Yes	No
38	Do you maintain a written policy state employees? See the instructions for ve												
39	Do you treat all use of vehicles by emp		-	-									
	Do you provide more than five vehicle use of the vehicles, and retain the infor	s to your	employe	es, obt	tain info	ormatio	on from	your er	nploye	es abou	it the		
41	Do you meet the requirements concern				demons	stratio	n use? (S	See inst	ruction	s.) .			
	Note: If your answer to 37, 38, 39, 40,	or 41 is "	Yes," do	n't com	plete S	ection	B for th	e cove	red veh	icles.			
Pa	rt VI Amortization									-			
	Description of costs  Date am	o) ortization gins	Amo	<b>(c)</b> rtizable aı	mount		<b>(d)</b> Code secti	on	(e) Amortiz period percent	or	Amortiza	<b>(f)</b> ation for th	nis year
42	Amortization of costs that begins during	g your 20	16 tax ye	ear (see	instruc	tions):							
						$\perp$							
43	Amortization of costs that began before	your 20	16 tax ye	ar						43			

44 Total. Add amounts in column (f). See the instructions for where to report .

# Form **4562**

## **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2016

Attachment Sequence No. 179

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

Business or activity to which this form relates

Identifying number

**David Blue Trust** Rental Property C 00-4043211 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Total cost of section 179 property placed in service (see instructions) . . . 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property. Enter the amount from line 29 7 . . . . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 **10** Carryover of disallowed deduction from line 13 of your 2015 Form 4562 . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 **15** Property subject to section 168(f)(1) election . . . . . . . . . . . . . . . 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2016 . . . . . . . . 17 3654 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2016 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM 9/1 property 27.5 yrs. MM S/L i Nonresidential real ММ S/L 39 yrs. property MM S/L Section C-Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs. **b** 12-year c 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

	4562 (2016)												Page 2
Pa	rt V Listed Property (Include autoused for entertainment, recrea				vehicl	es, ce	ertain ai	rcraft,	certair	n comp	outers,	and pr	operty
	Note: For any vehicle for which			,	rd mile	ane ra	ite or de	ducting	lease	eynens	e comi	olete <b>or</b>	ılv 24a
	24b, columns (a) through (c) of Se								10000	охроно	0, 00111	01010 01	<b>y</b> 2 10,
	Section A—Depreciation and Other								for pa	ssenger	autom	obiles.)	
248	a Do you have evidence to support the business/											☐ Yes	
	(a) e of property (list vehicles first)  (b) Date placed in service investment use percentage	(d) or other ba		(e) for depreness/investing use only	stment	(f) Recove period		(g) ethod/ vention		(h) preciation eduction	Ele	(i) ected sectorsectors	
25	Special depreciation allowance for qu												
	the tax year and used more than 50%				e (see i	nstruc	tions) .	25					
_26	Property used more than 50% in a qua	illea busi	ness use	<del>)</del> :									
	%			<del>)                                    </del>									
	%												
27	Property used 50% or less in a qualifie	d busines	s use:	_									
	%						S/L -						
	%						S/L -						
	%						S/L -				_		
28						-	ge 1 .	28					
_29	Add amounts in column (i), line 26. Ento										29		
Com	plete this section for vehicles used by a sol	Section I						er " or r	elated n	erson l	f vou pr	ovided v	ehicles
	our employees, first answer the questions in												Ciliolos
			(a)	i .	b)	i i	(c)	· -	d)	Ι .	e)	T .	f)
30	Total business/investment miles driven dur the year (don't include commuting miles)	ng Ve	ehicle 1		icle 2	Ve	hicle 3		icle 4		icle 5		cle 6
31	Total commuting miles driven during the ye	ar											
32	Total other personal (noncommuting miles driven	ng)											
33	Total miles driven during the year. A lines 30 through 32	dd											
34	Was the vehicle available for person	nal <b>Yes</b>	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?												
35	Was the vehicle used primarily by a mothan 5% owner or related person? .	I											
36	Is another vehicle available for personal use												
	Section C—Questions wer these questions to determine if you is than 5% owners or related persons (se	neet an e	xception					-				who <b>ar</b>	en't
	Do you maintain a written policy stated your employees?	nent that	prohibit	s all pe	rsonal ı	use of	vehicles	, includ	ding co	mmutin	g, by	Yes	No
38	Do you maintain a written policy state employees? See the instructions for ve												
39	Do you treat all use of vehicles by emp		-	-									
	Do you provide more than five vehicle use of the vehicles, and retain the infor	s to your	employe	es, obt	tain info	ormatio	on from	your er	nploye	es abou	it the		
41	Do you meet the requirements concern				demons	stratio	n use? (S	See inst	ruction	s.) .			
	Note: If your answer to 37, 38, 39, 40,	or 41 is "	Yes," do	n't com	plete S	ection	B for th	e cove	red veh	icles.			
Pa	rt VI Amortization									-			
	Description of costs  Date am	o) ortization gins	Amo	<b>(c)</b> rtizable aı	mount		<b>(d)</b> Code secti	on	(e) Amortiz period percent	or	Amortiza	<b>(f)</b> ation for th	nis year
42	Amortization of costs that begins during	g your 20	16 tax ye	ear (see	instruc	tions):							
						$\perp$							
43	Amortization of costs that began before	your 20	16 tax ye	ar						43			

44 Total. Add amounts in column (f). See the instructions for where to report .

Department of the Treasury 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.

Attachment

OMB No. 1545-0074

Sequence No. 12A

Name(s) shown on return **David Blue Trust** 

Social security number or taxpayer identification number

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

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

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

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions,
complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page
for one or more of the boxes, complete as many forms with the same box checked as you need.
(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
✓ (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
C) Short-term transactions not reported to you on Form 1099-B

1  (a)  Description of property	(b) Date sold or dispessed of	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e) from column (d) and		
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	(Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g)
90 Shares Corp A	06/05/2016	11/20/2016	500	400			
20 Shares Corp B	02/14/2016	12/31/2016	1044	200			
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B					

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.

Form 8949 (2016) Attachment Sequence No. 12A

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

Social security number or taxpayer identification number 00-4043211

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

#### Part II

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

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

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

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported	Lia dea IDO (ana Mata alance
L L (D) L ONG-TERM TRANSACTIONS REPORTED ON FORMIS) 1099-B SNOWING DASIS WAS REPORTED	i to the IBS (see <b>Note</b> above

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

┐(	F)	Long-term	transactions	not rep	orted to	you on	Form	1099-B
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(F) Long-term transactions	not reported	to you on FC	ин тоээ-ь				
1  (a)  Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
				ou doubo	instructions	adjustment	(g)
40 Shares Corp V	12/11/2011	12/31/2016	12800	6800			
50 Shares Corp A	04/03/2012	06/01/2016	11000	3200			
45 Shares Corp B	07/12/2013	09/01/2016	8966	5000			
2 Totals. Add the amounts in columns negative amounts). Enter each total I Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	nere and includis checked), <b>lin</b>	e on your e 9 (if Box E					

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.

Name(s) shown on your tax return

## Net Investment Income Tax— **Individuals, Estates, and Trusts**

► Attach to your tax return.

Department of the Treasury ▶ Information about Form 8960 and its separate instructions is at www.irs.gov/form8960. Internal Revenue Service (99)

OMB No. 1545-2227

Attachment Sequence No. 72

Your social security number or EIN

**David Blue Trust** 00-4043211 Part I Investment Income ☐ Section 6013(g) election (see instructions) ☐ Section 6013(h) election (see instructions) Regulations section 1.1411-10(g) election (see instructions) 2000 1 2 10000 2 Annuities (see instructions) . . . . . . . . . . . . . . . 3 3 Rental real estate, royalties, partnerships, S corporations, trusts, 4a Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) . . . . 4b 4c Net gain or loss from disposition of property (see instructions) . 18710 5a 5a Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions) . . . . . . . . 5b Adjustment from disposition of partnership interest or S corporation 5c Combine lines 5a through 5c . . . . . . . . . . . . . . . . d 5d 6 Adjustments to investment income for certain CFCs and PFICs (see instructions) . . . 6 Other modifications to investment income (see instructions) . . 7 7 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. 8 Part II Investment Expenses Allocable to Investment Income and Modifications Investment interest expenses (see instructions) . . . . State, local, and foreign income tax (see instructions) 9b Miscellaneous investment expenses (see instructions) 9c **d** Add lines 9a, 9b, and 9c . . . . . . . . . . . 9d 10 Additional modifications (see instructions) . . . . . 10 Total deductions and modifications. Add lines 9d and 10 11 11 Part III Tax Computation Net investment income. Subtract Part II, line 11 from Part I, line 8. Individuals complete lines 13-17. Estates and trusts complete lines 18a-21. If zero or less, enter -0- . . . . 12 Individuals: 13 Modified adjusted gross income (see instructions) . . . . . 13 Threshold based on filing status (see instructions) . . . . . 14 14 15 Subtract line 14 from line 13. If zero or less, enter -0-15 16 16 Net investment income tax for individuals. Multiply line 16 by 3.8% (.038). Enter here and 17 17 **Estates and Trusts:** Net investment income (line 12 above) . . . . . . . . . . . . 18a 18a Deductions for distributions of net investment income and deductions under section 642(c) (see instructions) . . . . . 18b 79614 C Undistributed net investment income. Subtract line 18b from 18a (see 18c 19a Adjusted gross income (see instructions) . . . . . . . . 19a Highest tax bracket for estates and trusts for the year (see 19b 12400 c Subtract line 19b from line 19a. If zero or less, enter -0-19c 20 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (.038). Enter here 

# **8453-FE**

## U.S. Estate or Trust Declaration for an IRS e-file Retu

rn	

OMB No. 1545-0967

Internal Revenue Service

, 2016, and ending File electronically with the estate's or trust's return. Do not file paper copies.

For calendar year 2016, or fiscal year beginning

Department of the Treasury ▶ Information about Form 8453-FE and its instructions is at www.irs.gov/form8453fe. Name of estate or trust Employer identification number **David Blue Trust** 00-4043211 Name and title of fiduciary Jeffrey Black, Esq **Tax Return Information** 1 Total income (Form 1041, line 9) . Income distribution deduction (Form 1041, line 18) Taxable income (Form 1041, line 22) 3 Total tax (Form 1041, line 23) . 5 Tax due or overpayment (Form 1041, line 27 or 28) **Declaration of Fiduciary** Part II 📙 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the estate's or trust's taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. Under penalties of perjury, I declare that the above amounts (or the amounts on the attached listing) agree with the amounts shown on the corresponding lines of the electronic portion of the 2016 U.S. Income Tax Return(s) for Estates and Trusts. I have also examined a copy of the return(s) being filed electronically with the IRS, and all accompanying schedules and statements. To the best of my knowledge and belief, they are true, correct, and complete. If I am not the transmitter, I consent that the return(s). including this declaration and accompanying schedules and statements, be sent to the IRS by the return transmitter. I also consent to the IRS's sending the ERO and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not the return(s) is accepted, and, if rejected, the reason(s) for the rejection. Sign Here Signature of fiduciary or officer representing fiduciary Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions) Part III I declare that I have reviewed the above estate or trust return(s) and that the entries on Form 8453-FE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return(s), and only declare that this form accurately reflects the data on the return(s). The fiduciary or an officer representing the fiduciary will have signed this form before I submit the return(s). I will give the fiduciary or officer representing the fiduciary a copy of all forms and information to be filed with the IRS, and have followed all other requirements described in Pub. 4164, Modernized e-File (MeF) Guide for Software Developers and Transmitters. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above estate or trust return(s) and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge. ERO's SSN or PTIN Date Check if Check if ERO's selfalso paid signature employed ▶ ERO's preparer > Firm's name (or yours Use EIN ▶ if self-employed) Only address, and ZIP code Phone no. Under penalties of perjury, I declare that I have examined the above estate or trust return(s) and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge. Print/Type preparer's name Preparer's signature Date PTIN Paid Check if self-employed **Preparer** Firm's name Firm's EIN ▶ **Use Only** 

Firm's address ▶

Phone no.

661113

				Final K-1		Amend		OMB No. 1545-009
Schedule K-1		2016	Pa	rt III		_		of Current Year Income,
(Form 1041) Department of the Treasury				Interest		ions, Cre	dits,	and Other Items Final year deductions
nternal Revenue Service	For calendar year 2016, or tax year beginning	001	. 1	interest	liicome	824	''	i iliai year deddctions
	and ending	, 201 , 20	o, 2a	Ordinary	y dividends	024		
		, 20				4119		
Beneficiary's SI	hare of Income	<b>Deductions</b>	2b	Qualified	d dividends			
Credits, etc.		k of form and instructio	ns.					
			3	Net sho	rt-term capita	al gain		
Part I Informat  A Estate's or trust's emplor	tion About the Estat	e or Trust	4a	Net long	g-term capita	Lgain		
A Estate 3 of trust 3 emplo			"		y to oap.ta	. ga		
	00-4043211	- 0	4b	28% rat	te gain		12	Alternative minimum tax adjustmen
B Estate's or trust's name								
David Blue Trust			4c	Unrecap	otured sectio	n 1250 gain		
			5		ortfolio and iness income		_	
C Fiduciary's name, addres	ss. citv. state. and ZIP code							
	, , , , , , , , , , , , , , , , , , , ,		6	Ordinary	y business in	come		
Jeffrey Black 1st Test St								
Kansas City, MO 6411	2		7	Net rent	tal real estate	income		
Kalisas City, MO 0411	2			011		32364	13	Credits and credit recapture
			8	Otner re	ental income			
			9	Directly	apportioned o	leductions		
			$\dashv$	,				
D Check if Form 1041	I-T was filed and enter the dat	e it was filed						
	_						14	Other information
E Check if this is the	final Form 1041 for the estate	or trust	10	Estato t	ax deduction			
Part II Informat	tion About the Bene	ficiary	— I"	LState to	ax deduction			
F Beneficiary's identifying r		iliciai y						
	432-00-3254							
G Beneficiary's name, add	ress, city, state, and ZIP code							
John Orange								
5 Poplar Ave								
Overland Park, KS 662	214							
			*Se	e attacl	hed stater	nent for a	L dditio	nal information.
			No	<b>te.</b> A sta	atement m	nust be att	ache	d showing the
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					s from eac al activity.	h busines	s, rer	ntal real estate, and
			Oli	errenta	ar activity.			
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Foreign beneficiary

H X Domestic beneficiary

661113

			Final K-1		Amend	ed K-1	OMB No. 1545-0092
Schedule K-1 (Form 1041)	2016	Pa	art III		_		of Current Year Income,
Department of the Treasury			Interest		ions, Cre	dits,	and Other Items Final year deductions
Internal Revenue Service	For calendar year 2016,	1	meresi	income	924	''	Final year deductions
	or tax year beginning, 2016, and ending, 20	2a	Ordinan	y dividends	824		
	,20			,	4119		
Beneficiary's SI	nare of Income, Deductions,	2b	Qualified	d dividends			
Credits, etc.	See back of form and instructions.		$\Lambda$				
	<u> IRAFI</u>	3	Net shor	rt-term capit	al gain		
	ion About the Estate or Trust		Not lone	g-term capita	l goin		
A Estate's or trust's employ	rer identification number	4a	Net long	у-тепп сарпа	ıı yaırı		
	00-4043211	4b	28% rat	te gain		12	Alternative minimum tax adjustment
B Estate's or trust's name	<del>                                      </del>	1					
David Blue Trust	JUIV Z/	4c	Unrecap	otured section	n 1250 gain		
Buvia Biac Trast							
		5		ortfolio and iness income			
C Fiduciary's name, addres	es city state and ZID code		Horibusi	iriess iricome			
	s, city, state, and zir code	6	Ordinan	y business in	come		
Jeffrey Black							
1st Test St		7	Net rent	tal real estate	income		
Kansas City, MO 6411	2				32364	13	Credits and credit recapture
		8	Other re	ental income			
		9	Directly	annortioned	Anductions		
		"	Directly a	apportioned of	reductions		
Check if Form 1041	-T was filed and enter the date it was filed						
Oncok ii i oiiii io-ii	I was ned and enter the date it was ned					14	Other information
	_						
E Check if this is the f	inal Form 1041 for the estate or trust						
		10	Estate ta	ax deductior	1		
F Beneficiary's identifying r	ion About the Beneficiary	_					
1 Deficionary 3 identifying 1	432-00-4455						
G Beneficiary's name, addr		1					
Amy Purple							
6111 Cherry St							
Kansas City, MO 6411	2						
ikunsus City, Wio 0111	2	*04	o ottool	had atata	mant for a	 	nal information.
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Foreign beneficiary

H X Domestic beneficiary