

For the year Jan. 1-Dec. 31, 2014, or other tax year beginning

, 2014, ending

, 20

See separate instructions.

Your first name and initial

Last name

ANASTASIYA

SIROOCHENKO

Your social security number

If a joint return, spouse's first name and initial

Last name

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.

Apt. no.

Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below.

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Foreign country name

Foreign province/state/county

Foreign postal code

You Spouse

Filing Status

- 1 [X] Single
2 [] Married filing jointly (even if only one had income)
3 [] Married filing separately. Enter spouse's SSN above and full name here.
4 [] Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.
5 [] Qualifying widow(er) with dependent child

Exemptions

- 6a [X] Yourself. If someone can claim you as a dependent, do not check box 6a
b [] Spouse
c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) [] if child under age 17 qualifying for child tax credit
d Total number of exemptions claimed 1

Income

Table with 2 columns: Description and Amount. Rows include Wages, salaries, tips, etc. (7); Taxable interest (8a); Tax-exempt interest (8b); Ordinary dividends (9a); Qualified dividends (9b); Taxable refunds, credits, or offsets of state and local income taxes (10); Alimony received (11); Business income or (loss) (12); Capital gain or (loss) (13); Other gains or (losses) (14); IRA distributions (15a); Pensions and annuities (16a); Rental real estate, royalties, partnerships, S corporations, trusts, etc. (17); Farm income or (loss) (18); Unemployment compensation (19); Social security benefits (20a); Other income (21); Total income (22) = 225,533.

Adjusted Gross Income

Table with 2 columns: Description and Amount. Rows include Educator expenses (23); Health savings account deduction (25); Moving expenses (26); Deductible part of self-employment tax (27) = 10,264; Self-employed SEP, SIMPLE, and qualified plans (28); Self-employed health insurance deduction (29) = 1,828; Add lines 23 through 35 (36) = 12,092; Subtract line 36 from line 22. This is your adjusted gross income (37) = 213,441.

Tax and Credits

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-56 for tax and credits.

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 57-63 for other taxes.

Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 64-74 for payments.

Refund

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-77 for refund.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 78-79 for amount owed.

Third Party Designee

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

Sign Here

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

Paid Preparer Use Only

Print/Type preparer's name: MICHAEL B. STEIN; Preparer's signature; Date; Check self-employed; PTIN: P01215135; Firm's name: GOLDGLIT & COMPANY, LLP; Firm's address: 499 SEVENTH AVENUE - 14 SOUTH; Firm's EIN; Phone no. (212) 868-7200

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

▶ Information about Form 2210 and its separate instructions is at www.irs.gov/form2210.

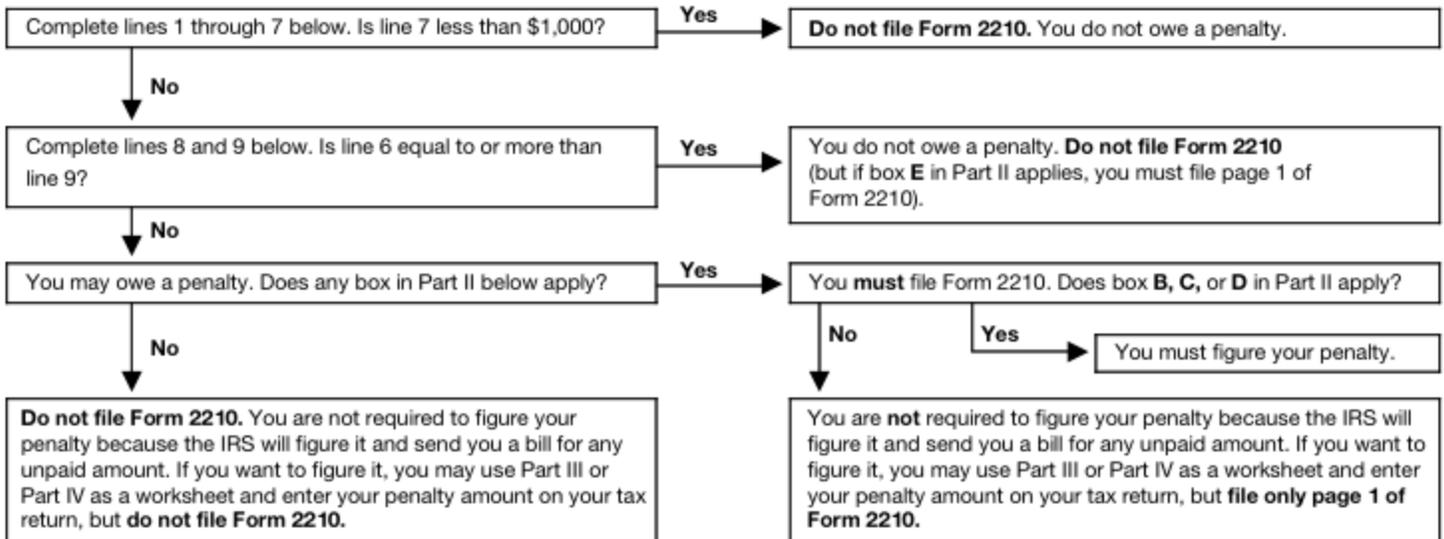
▶ Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

Name(s) shown on tax return

ANASTASIYA SIROOCHENKO

Identifying number

Do You Have To File Form 2210?



Part I Required Annual Payment

1	Enter your 2014 tax after credits from Form 1040, line 56 (see instructions if not filing Form 1040)	1	47,197.
2	Other taxes, including self-employment tax and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions)	2	20,597.
3	Refundable credits, including the premium tax credit (see instructions)	3	()
4	Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop ; you do not owe a penalty. Do not file Form 2210	4	67,794.
5	Multiply line 4 by 90% (.90)	5	61,015.
6	Withholding taxes. Do not include estimated tax payments (see instructions)	6	
7	Subtract line 6 from line 4. If less than \$1,000, stop ; you do not owe a penalty. Do not file Form 2210	7	67,794.
8	Maximum required annual payment based on prior year's tax (see instructions)	8	21,748.
9	Required annual payment. Enter the smaller of line 5 or line 8	9	21,748.

Next: Is line 9 more than line 6?

- No.** You **do not** owe a penalty. **Do not file Form 2210** unless box **E** below applies.
- Yes.** You may owe a penalty, but **do not file Form 2210** unless one or more boxes in Part II below applies.
- If box **B, C, or D** applies, you must figure your penalty and file Form 2210.
 - If box **A or E** applies (but not **B, C, or D**) file only page 1 of Form 2210. You are **not** required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or IV as a worksheet and enter your penalty on your tax return, but **file only page 1 of Form 2210**.

Part II Reasons for Filing. Check applicable boxes. If none apply, **do not file Form 2210**.

- A** You request a **waiver** (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you are not required to figure your penalty.
- B** You request a **waiver** (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C** Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment 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 tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E** You filed or are filing a joint return for either 2013 or 2014, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you are **not** required to figure your penalty (unless box **B, C, or D** applies).

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **2210** (2014)

Part IV Regular Method (See the instructions if you are filing Form 1040NR or 1040NR-EZ.)

Section A - Figure Your Underpayment	Payment Due Dates				
	(a) 4/15/14	(b) 6/15/14	(c) 9/15/14	(d) 1/15/15	
18 Required installments. If box C in Part II applies, enter the amounts from Schedule AI, line 25. Otherwise, enter 25% (.25) of line 9, Form 2210, in each column	18	5,437.	5,437.	5,437.	5,437.
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. Do not file Form 2210 unless you checked a box in Part II	19	4,128.			
<i>Complete lines 20 through 26 of one column before going to line 20 of the next column.</i>					
20 Enter the amount, if any, from line 26 in the previous column	20				
21 Add lines 19 and 20	21				
22 Add the amounts on lines 24 and 25 in the previous column	22		1,309.	6,746.	12,183.
23 Subtract line 22 from line 21. If zero or less, enter -0-. For column (a) only, enter the amount from line 19	23	4,128.	0.	0.	0.
24 If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0-	24		1,309.	6,746.	
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	1,309.	5,437.	5,437.	5,437.
26 Overpayment. If line 23 is more than line 18, subtract line 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.)

27 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 79; Form 1040A, line 51; Form 1040NR, line 76; Form 1040NR-EZ, line 26; or Form 1041, line 26. Do not file Form 2210 unless you checked a box in Part II	27	310.
---	----	------

Form 2210 (2014)

SEE ATTACHED WORKSHEET

**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

2014
Attachment
Sequence No. **07**

Your social security number

ANASTASIYA SIROOCHENKO

Medical and Dental Expenses		Caution. Do not include expenses reimbursed or paid by others.			
1	Medical and dental expenses (see instructions)	SEE STATEMENT 7	1	9,335.	
2	Enter amount from Form 1040, line 38	2 213,441.			
3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1950, multiply line 2 by 7.5% (.075) instead		3	21,344.	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4		0.
Taxes You Paid		5 State and local (check only one box):			
a	<input checked="" type="checkbox"/> Income taxes, or	SEE STATEMENT 6	5	15,800.	
b	<input type="checkbox"/> General sales taxes		6		
6	Real estate taxes (see instructions)		7		
7	Personal property taxes		8		
8	Other taxes. List type and amount		9		15,800.
9	Add lines 5 through 8				
Interest You Paid		10 Home mortgage interest and points reported to you on Form 1098			
10	Home mortgage interest and points reported to you on Form 1098		10		
11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address		11		
12	Points not reported to you on Form 1098. See instructions for special rules		12		
13	Mortgage insurance premiums (see instructions)		13		
14	Investment interest. Attach Form 4952 if required. (See instructions.)		14		
15	Add lines 10 through 14		15		
Gifts to Charity		16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions			
16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions		16	1,800.	
17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500		17		
18	Carryover from prior year		18		
19	Add lines 16 through 18		19		1,800.
Casualty and Theft Losses		20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)			
20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)		20		
Job Expenses and Certain Miscellaneous Deductions		21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.)			
21	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.)		21		
22	Tax preparation fees		22		
23	Other expenses - investment, safe deposit box, etc. List type and amount		23		
24	Add lines 21 through 23		24		
25	Enter amount from Form 1040, line 38	25	25		
26	Multiply line 25 by 2% (.02)		26		
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-		27		
Other Miscellaneous Deductions		28 Other - from list in instructions. List type and amount			
28	Other - from list in instructions. List type and amount		28		
Total Itemized Deductions		29 Is Form 1040, line 38, over \$152,525?			
	<input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.	}	29	17,600.	
	<input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.				
30	If you elect to itemize deductions even though they are less than your standard deduction, check here				

SCHEDULE B
(Form 1040A or 1040)

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

Interest and Ordinary Dividends

▶ Attach to Form 1040A or 1040.

▶ Information about Schedule B and its instructions is at www.irs.gov/scheduleb

OMB No. 1545-0074

2014
Attachment
Sequence No. **08**

ANASTASIYA SIROOCHENKO

Your social security number
052 02 9816

Part I
Interest

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

Amount

23.

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 form.

2 Add the amounts on line 1 **23.**
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 **3**
4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a **23.**

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

Amount

Part II
Ordinary Dividends

5 List name of payer ▶

5

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

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

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

Part III
Foreign Accounts and Trusts

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

Yes No

7a At any time during 2014, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions **X**

If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements **X**

b If you are required to file FinCen Form 114, enter the name of the foreign country where the financial account is located ▶ **AUSTRIA**

8 During 2014, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions **X**

427501
11-07-14

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

Schedule B (Form 1040A or 1040) 2014

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2014

Attachment
Sequence No. **09**

Name of proprietor

ANASTASIYA SIROOCHENKO

Social security number (SSN)

[REDACTED]

A Principal business or profession, including product or service (see instructions)

ART DEALER

B Enter code from instructions

453920

C Business name. If no separate business name, leave blank.

SUBLIME ART LLC

D Employer ID number (EIN) (see instructions)

[REDACTED]

E Business address (including suite or room no.) **244 FIFTH AVENUE #1590**

City, town or post office, state, and ZIP code **NEW YORK, NY 10001**

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) _____

G Did you "materially participate" in the operation of this business during 2014? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2014, check here

I Did you make any payments in 2014 that would require you to file Form(s) 1099? (see instructions) Yes No

J If "Yes," did you or will you file required Forms 1099? Yes No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	962,848.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	962,848.
4 Cost of goods sold (from line 42)	4	410,977.
5 Gross profit. Subtract line 4 from line 3	5	551,871.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) SEE STATEMENT 8	6	1,200.
7 Gross income. Add lines 5 and 6	7	553,071.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8	10,170.	18 Office expense	18	19,333.
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11	8,588.	a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	90,106.	21 Repairs and maintenance	21	132.
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15	5,768.	23 Taxes and licenses	23	6,759.
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a	1,687.	a Travel	24a	43,495.
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	20,632.
17 Legal and professional services	17	26,687.	25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28	329,548.	26 Wages (less employment credits)	26	65,418.
29 Tentative profit or (loss). Subtract line 28 from line 7	29	223,523.	27 a Other expenses (from line 48)	27a	30,773.
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____ Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30		27 b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29. ● If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . ● If a loss, you must go to line 32.	31	223,523.			
32 If you have a loss, check the box that describes your investment in this activity (see instructions). ● If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . ● If you checked 32b, you must attach Form 6198 . Your loss may be limited.	32a				
	32b				

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

Schedule C (Form 1040) 2014

420001 10-17-14

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation	<input type="checkbox"/> Yes <input type="checkbox"/> No		
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	500.	
36	Purchases less cost of items withdrawn for personal use	36	425,372.	
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39	SEE STATEMENT 9 11,825.	
40	Add lines 35 through 39	40	437,697.	
41	Inventory at end of year	41	26,720.	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	410,977.	

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year)	▶ / /			
44	Of the total number of miles you drove your vehicle during 2014, enter the number of miles you used your vehicle for:				
a	Business	b	Commuting	c	Other
45	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
46	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No			

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

BANK SERVICE CHARGES	446.
DUES & SUBSCRIPTIONS	1,727.
POSTAGE & SHIPPING	18,474.
PRINTING & PRODUCTION	739.
PHOTOGRAPHY	1,606.
RESEARCH & DEVELOPMENT	4,197.
TELEPHONE	3,284.
STORAGE	300.
48 Total other expenses. Enter here and on line 27a	48 30,773.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2014
Attachment
Sequence No. **09**

Name of proprietor

ANASTASIYA SIROOCHENKO

Social security number (SSN)

[Redacted]

A Principal business or profession, including product or service (see instructions)

B Enter code from instructions

MODELING

711510

C Business name. If no separate business name, leave blank.

D Employer ID number (EIN), (see instr.)

ANASTASIYA SIROOCHENKO

E Business address (including suite or room no.) **121 EAST 69TH STREET #2**

City, town or post office, state, and ZIP code **NEW YORK, NY 10021**

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) _____

G Did you "materially participate" in the operation of this business during 2014? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2014, check here Yes No

I Did you make any payments in 2014 that would require you to file Form(s) 1099? (see instructions) Yes No

J If "Yes," did you or will you file required Forms 1099? Yes No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	3,200.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	3,200.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	3,200.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	3,200.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8		18 Office expense	18	154.
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	982.
17 Legal and professional services	17		25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29	1,924.	27 a Other expenses (from line 48)	27a	788.
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____ Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30		27 b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29. ● If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . ● If a loss, you must go to line 32.	31	1,276.			
32 If you have a loss, check the box that describes your investment in this activity (see instructions). ● If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . ● If you checked 32b, you must attach Form 6198 . Your loss may be limited.	32a				
	32b				

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

Schedule C (Form 1040) 2014

420001 10-17-14

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2014
Attachment
Sequence No. **09**

Name of proprietor

ANASTASIYA SIROOCHENKO

Social security number (SSN)

[Redacted]

A Principal business or profession, including product or service (see instructions)

RENTAL REAL ESTATE

B Enter code from instructions

531390

C Business name. If no separate business name, leave blank.

LVIV ENTERPRISES LLC

D Employer ID number (EIN), (see instr.)

[Redacted]

E Business address (including suite or room no.)

City, town or post office, state, and ZIP code

F Accounting method: (1) Cash (2) Accrual (3) Other (specify)

G Did you "materially participate" in the operation of this business during 2014? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2014, check here

I Did you make any payments in 2014 that would require you to file Form(s) 1099? (see instructions) Yes No

J If "Yes," did you or will you file required Forms 1099? Yes No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1
2 Returns and allowances	2
3 Subtract line 2 from line 1	3
4 Cost of goods sold (from line 42)	4
5 Gross profit. Subtract line 4 from line 3	5
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6
7 Gross income. Add lines 5 and 6	7

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8	18 Office expense	18	9.
9 Car and truck expenses (see instructions)	9	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10	20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11	a Vehicles, machinery, and equipment	20a	
12 Depletion	12	b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14	22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15	23 Taxes and licenses	23	
16 Interest:		24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a	a Travel	24a	
b Other	16b	b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17	25 Utilities	25	
		26 Wages (less employment credits)	26	
		27 a Other expenses (from line 48)	27a	
		b Reserved for future use	27b	

28 **Total expenses** before expenses for business use of home. Add lines 8 through 27a **9.**

29 Tentative profit or (loss). Subtract line 28 from line 7 **-9.**

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).

Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____
Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30

31 **Net profit or (loss).** Subtract line 30 from line 29. **-9.**

• If a profit, enter on both **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2.**

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3.**

• If a loss, you **must** go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both **Form 1040, line 12,** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2.**

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3.**

• If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

32a All investment is at risk.
32b Some investment is not at risk.

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

Schedule C (Form 1040) 2014

420001 10-17-14

**SCHEDULE SE
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Self-Employment Tax

Information about Schedule SE and its separate instructions is at www.irs.gov/schedulese.
Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2014

Attachment
Sequence No. 17

Name of person with self-employment income (as shown on Form 1040 or Form 1040NR)

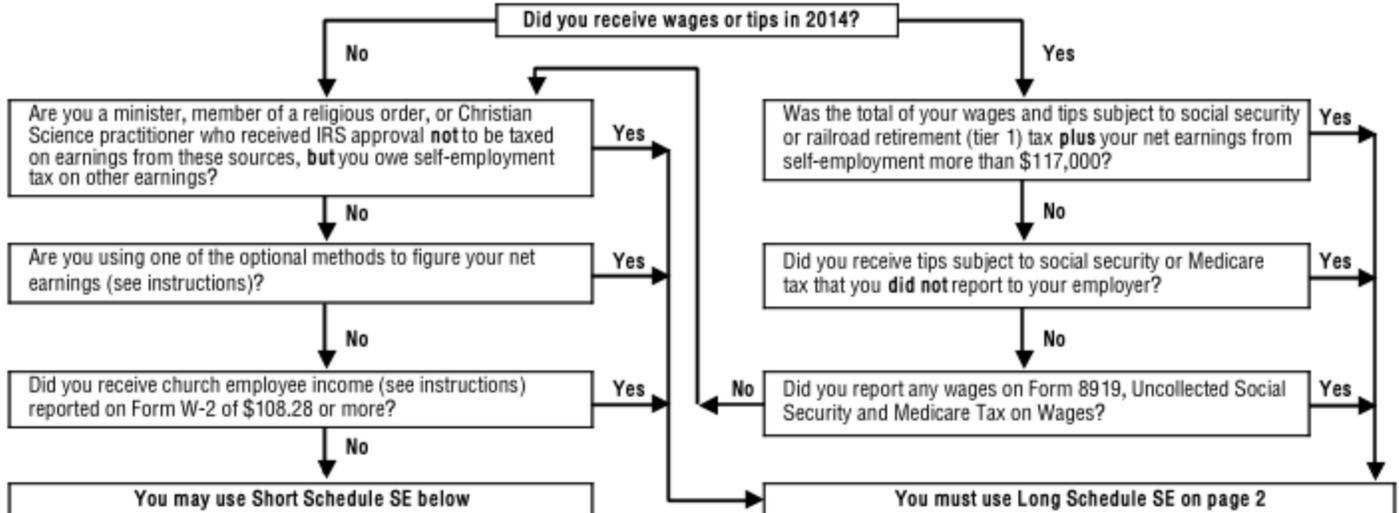
Social security number of
person with self-employment
income

ANASTASIYA SIROOCHENKO

Before you begin: To determine if you must file Schedule SE, see the instructions.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE* in the instructions.



Section A-Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	1b	
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report	2	224,790.
3 Combine lines 1a, 1b, and 2	3	224,790.
4 Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; do not file this schedule unless you have an amount on line 1b	4	207,594.
5 Self-employment tax. If the amount on line 4 is: • \$117,000 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 57, or Form 1040NR, line 55 • More than \$117,000, multiply line 4 by 2.9% (.029). Then, add \$14,508 to the result. Enter the total here and on Form 1040, line 57, or Form 1040NR, line 55	5	20,528.
6 Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	6	10,264.

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

Schedule SE (Form 1040) 2014

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

Your social security number

ANASTASIYA SIROOCHENKO

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 amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	195,841.
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-	
3	Taxes from Schedule A (Form 1040), line 9	15,800.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	
6	If Form 1040, line 38, is \$152,525 or less, enter -0-. Otherwise, see instructions	0.
7	Tax refund from Form 1040, line 10 or line 21	-720.
8	Investment interest expense (difference between regular tax and AMT)	
9	Depletion (difference between regular tax and AMT)	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	
11	Alternative tax net operating loss deduction	
12	Interest from specified private activity bonds exempt from the regular tax	
13	Qualified small business stock (7% of gain excluded under section 1202)	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	
17	Disposition of property (difference between AMT and regular tax gain or loss)	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	
19	Passive activities (difference between AMT and regular tax income or loss)	
20	Loss limitations (difference between AMT and regular tax income or loss)	
21	Circulation costs (difference between regular tax and AMT)	
22	Long-term contracts (difference between AMT and regular tax income)	
23	Mining costs (difference between regular tax and AMT)	
24	Research and experimental costs (difference between regular tax and AMT)	
25	Income from certain installment sales before January 1, 1987	
26	Intangible drilling costs preference	
27	Other adjustments, including income-based related adjustments	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$242,450, see instructions.)	210,921.

Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2014, see instructions.)																
	<table border="0"> <tr> <td>IF your filing status is...</td> <td>AND line 28 is not over...</td> <td>THEN enter on line 29...</td> <td></td> </tr> <tr> <td>Single or head of household</td> <td>\$117,300</td> <td>\$52,800</td> <td rowspan="3">} STMT 11</td> </tr> <tr> <td>Married filing jointly or qualifying widow(er)</td> <td>156,500</td> <td>82,100</td> </tr> <tr> <td>Married filing separately</td> <td>78,250</td> <td>41,050</td> </tr> </table>	IF your filing status is...	AND line 28 is not over...	THEN enter on line 29...		Single or head of household	\$117,300	\$52,800	} STMT 11	Married filing jointly or qualifying widow(er)	156,500	82,100	Married filing separately	78,250	41,050	29	29,395.
IF your filing status is...	AND line 28 is not over...	THEN enter on line 29...															
Single or head of household	\$117,300	\$52,800	} STMT 11														
Married filing jointly or qualifying widow(er)	156,500	82,100															
Married filing separately	78,250	41,050															
	If line 28 is over the amount shown above for your filing status, see instructions.																
30	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	181,526.													
31	<ul style="list-style-type: none"> 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 for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 64 here. All others: If line 30 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,650 (\$1,825 if married filing separately) from the result. 		31	47,197.													
32	Alternative minimum tax foreign tax credit (see instructions)		32														
33	Tentative minimum tax. Subtract line 32 from line 31		33	47,197.													
34	Add Form 1040, line 44 (minus any tax from Form 4972), and Form 1040, line 46. Subtract from the result any foreign tax credit from Form 1040, line 48. If you used Sch J to figure your tax on Form 1040, line 44, refigure that tax without using Schedule J before completing this line (see instructions)		34	47,182.													
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45		35	15.													

Part 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 Foreign Earned Income Tax Worksheet in the instructions.

Table with 2 columns: Description of tax computation steps (lines 36-64) and corresponding line numbers. Includes instructions for calculating capital gains tax based on Form 1040 and Form 2555-EZ data.

Additional Medicare Tax

2014

Department of the Treasury
Internal Revenue Service

- ▶ 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.

Attachment
Sequence No. **71**

Name(s) shown on return **ANASTASIYA SIROOCHENKO** Your social security number [REDACTED]

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 from box 5	1		
2 Unreported tips from Form 4137, line 6	2		
3 Wages from Form 8919, line 6	3		
4 Add lines 1 through 3	4		
5 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	5		
6 Subtract line 5 from line 4. If zero or less, enter -0-	6		
7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (.009). Enter here and go to Part II	7		

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	207,594.	
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	9	200,000.	
10 Enter the amount from line 4	10		
11 Subtract line 10 from line 9. If zero or less, enter -0-	11	200,000.	
12 Subtract line 11 from line 8. If zero or less, enter -0-	12		7,594.
13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (.009). Enter here and go to Part III	13		68.

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)	14		
15 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	15		
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 62, (Form 1040NR, 1040-PR, and 1040-SS filers, see instructions) and go to Part V	18		68.
---	----	--	-----

Part V Withholding Reconciliation

19 Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19		
20 Enter the amount from line 1	20		
21 Multiply line 20 by 1.45% (.0145). This is your regular Medicare tax withholding on Medicare wages	21		
22 Subtract line 21 from line 19. If zero or less, enter -0-. 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 64 (Form 1040NR, 1040-PR, and 1040-SS filers, see instructions)	24		

Net Investment Income Tax - Individuals, Estates, and Trusts

2014

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to your tax return.**

Attachment
Sequence No. **72**

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

Name(s) shown on your tax return
ANASTASIYA SIROOCHENKO

Your social security number or EIN
[REDACTED]

- 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)

1 Taxable interest (see instructions)	1	23.
2 Ordinary dividends (see instructions)	2	
3 Annuities (see instructions)	3	
4a Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	
c Combine lines 4a and 4b	4c	
5a Net gain or loss from disposition of property (see instructions)	5a	
b Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	
c Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	
d Combine lines 5a through 5c	5d	
6 Adjustments to investment income for certain CFCs and PFICs (see instructions)	6	
7 Other modifications to investment income (see instructions)	7	
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	23.

Part II Investment Expenses Allocable to Investment Income and Modifications

9a Investment interest expenses (see instructions)	9a	
b State, local, and foreign income tax (see instructions)	9b	1.
c Miscellaneous investment expenses (see instructions)	9c	
d Add lines 9a, 9b, and 9c	9d	1.
10 Additional modifications (see instructions)	10	
11 Total deductions and modifications. Add lines 9d and 10	11	1.

Part III Tax Computation

12 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	22.
Individuals:		
13 Modified adjusted gross income (see instructions)	13	213,441.
14 Threshold based on filing status (see instructions)	14	200,000.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	13,441.
16 Enter the smaller of line 12 or line 15	16	22.
17 Net investment income tax for individuals. Multiply line 16 by 3.8% (.038). Enter here and include on your tax return (see instructions)	17	1.
Estates and Trusts:		
18a Net investment income (line 12 above)	18a	
b Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b	
c Undistributed net investment income. Subtract line 18b from 18a (see instructions). If zero or less, enter -0-	18c	
19a Adjusted gross income (see instructions)	19a	
b Highest tax bracket for estates and trusts for the year (see instructions)	19b	
c Subtract line 19b from line 19a. If zero or less, enter -0-	19c	
20 Enter the smaller of line 18c or line 19c	20	
21 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (.038). Enter here and include on your tax return (see instructions)	21	

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

Form **8960** (2014)

Lines 9 and 10 - Application of Itemized Deduction Limitations on Deductions Properly Allocable to Investment Income Worksheet

Keep for Your Records

Part I - Application of Section 67 to Deductions Properly Allocable to Investment Income

1. Enter the amount of Miscellaneous Itemized Deductions properly allocable to investment income before any itemized deduction limitations (Description and Form 8960 line number where they will be reported):

	Description	Line	Amount
(a)	_____	_____	_____
(b)	_____	_____	_____

2. Enter the total of all items listed in line 1 2. _____
3. Enter the amount of all Miscellaneous Itemized Deductions after the application of the section 67 limitation (Schedule A (Form 1040), line 27) 3. _____
4. Enter the lesser of the total reported on line 2 or line 3 4. _____

Part II - Application of Section 67 Limitation to Specific Deductions

(A)			(B)		(C)	
Reenter the amounts and descriptions from Part I, line 1.			IF line 3 is less than line 2, THEN divide line 3 by line 2 AND enter the amount in column (B).		IF amounts reported on Part I, lines 2 and 4 are equal, THEN enter 1.00 in column (B).	
	Description	Line	Amount			
(a)	_____	_____	_____	X	_____	= _____
(b)	_____	_____	_____	X	_____	= _____

TIP *Individuals* - Use the amounts in column (C) on Part III, line 1, to determine the amount of these deductions that are allowable after the application of the section 68 limitation.

Estates or trusts - Enter the amounts in column (C) in the appropriate location on lines 9 and 10. Do not complete Parts III or IV of this worksheet.

Lines 9 and 10 - Application of Itemized Deduction Limitations on Deductions Properly Allocable to Investment Income Worksheet -

Keep for Your Records

continued

Part III - Application of Section 68 to deductions properly allocable to investment income (Individuals Only)

1. Enter the amount of Miscellaneous Itemized Deductions properly allocable to investment income from column (C) of Part II:

	Description	Line	Amount
(a)	_____	_____	_____
(b)	_____	_____	_____

2. Enter the amount of state, local, and foreign income taxes that are properly allocable to investment income 2. 1.

3. Enter the amounts of other Itemized Deductions subject to the section 68 limitation and properly allocable to investment income before any itemized deduction limitations (Description and Form 8960 line number):

	Description	Line	Amount
(a)	_____	_____	_____
(b)	_____	_____	_____

4. Enter the total deductions properly allocable to investment income subject to the section 68 limitation. Enter the sum of lines 1 through 3 4. 1.

5. Enter the amount of total itemized deductions reported on Form 1040, line 40 5. 17,600.

6. Enter all other itemized deductions allowed but not subject to the section 68 deduction limitation:

- (a) Investment Interest Expense _____
- (b) Casualty Losses (other than losses described in section 165(c)(1)) _____
- (c) Medical Expenses _____
- (d) Gambling Losses _____
- (e) Total of lines 6(a) through 6(d) 6e. _____

7. Subtract line 6e from line 5 7. 17,600.

8. Enter the lesser of line 7 or line 4 8. 1.

TIP

This is the amount of itemized deductions that are properly allocable to investment income after the application of the sections 67 and 68 deduction limitations. Use Part IV of this worksheet to reconcile this amount to the individual deduction amounts reported on Form 8960, lines 9 and 10.

Part IV - Reconciliation of Schedule A Deductions to Form 8960, lines 9 and 10 (Individuals Only)

(A)	(B)	(C)
Reenter the amounts and descriptions from Part III, lines 1 - 3.	IF Part III, line 8 is less than Part III, line 4, THEN divide line 8 by line 4 AND enter the amount in column (B). IF the amounts reported on Part III, lines 4 and 8 are equal, THEN enter 1.00 in column (B).	Multiply the individual amounts in column (A) by the amount in column (B). Enter these amounts in the appropriate location on lines 9 and 10.
Miscellaneous Itemized Deductions properly allocable to investment income:		
1. (a) _____ X _____ = _____		
(b) _____ X _____ = _____		
2. State, local, and foreign income taxes 1. X <u>1.0000</u> = <u>1.</u>		
Itemized Deductions Subject to Section 68 included on Line 3 of Part III:		
3. (a) _____ X _____ = _____		
(b) _____ X _____ = _____		

NEW YORK

Name(s) **ANASTASIYA SIROOCHENKO** Your social security number or EIN XXXXXXXXXX

Part I Investment Income Section 6013(g) election
 Regulations section 1.1411-10(g) election

1	Taxable interest (Form 1040, line 8a; or Form 1041, line 1)	1	23.
2	Ordinary dividends (Form 1040, line 9a; or Form 1041, line 2a)	2	0.
3	Annuities from nonqualified plans	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (Form 1040, line 17; or Form 1041, line 5)	4a	0.
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	4b	
c	Combine lines 4a and 4b	4c	0.
5a	Net gain or loss from disposition of property from Form 1040, combine lines 13 and 14; or from Form 1041, combine lines 4 and 7	5a	0.
b	Net gain or loss from disposition of property that is not subject to net investment income tax	5b	
c	Adjustment from disposition of partnership interest or S corporation stock	5c	
d	Combine lines 5a through 5c	5d	0.
6	Changes in investment income for certain CFCs and PFICs	6	
7	Other modifications to investment income	7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	23.

Part II State Income Tax Pro-rata for 2014 Income Tax Payments

9	State total income	9	212,721.
10	State income tax payments for 2014	10	6,200.
11	2014 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10	11	1.

Part III State Income Tax Pro-rata for 2013 Estimate Payments Made in 2014

12	State estimate payments for 2013	12	
13	Percent of state income taxes attributable to investment income for 2013	13	.
14	2013 state estimate payments attributable to investment income. Line 12 times line 13	14	

Part IV State Income Tax Pro-rata for Balance of Prior Years Tax Plus Extension Payments Paid in 2014

15	Balance of prior years tax plus extension payments paid in 2014	15	9,600.
16	Percent of state income taxes attributable to investment income for 2013	16	.
17	Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16	17	

Part V Reduction of State Tax Deduction

18	Reduction of state tax deduction	18	()
19	Percent of state income taxes attributable to investment income for 2013	19	.
20	Reduction of state tax deduction attributable to investment income. Line 18 times line 19	20	()

Part VI Total State Income Tax Payments Attributable to Investment Income

21	Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, line 2	21	1.
-----------	---	-----------	----

Form 8960 (2014)

Depreciation and Amortization
(Including Information on Listed Property)

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

▶ Attach to your tax return. **SCHEDULE C- 1**

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

Attachment
Sequence No. **179**

ANASTASIYA SIROOCHENKO	Business or activity to which this form relates SUBLIME ART LLC	Identifying number [REDACTED]
------------------------	--	----------------------------------

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 Maximum amount (see instructions)	1	500,000.
2 Total cost of section 179 property placed in service (see instructions)	2	86,646.
3 Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	500,000.
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
COMPUTER	6,516.	6,516.
FURNITURE	80,130.	80,130.
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	86,646.
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	86,646.
10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	311,436.
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	86,646.
13 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2014	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B - Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 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 property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20a Class life						
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	3,460.
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 instr.	22	90,106.
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	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		24b If "Yes," is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
VEHICLE	071514	100.00 %	106,208.	106,208.	5.00	S/L - HY	3,460.	
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	3,460.
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle 1		(e) Vehicle		(f) Vehicle	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
							X					
35 Was the vehicle used primarily by a more than 5% owner or related person?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
							X					
36 Is another vehicle available for personal use?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
								X				

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2014 tax year:					
43 Amortization of costs that began before your 2014 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

ANASTASIYA SIROOCHENKO

SUBLIME ART LLC

1	HEALTH INSURANCE PAYMENTS LESS PREMIUM TAX CREDIT		1,828.
2	NET PROFIT FROM TRADE OR BUSINESS UNDER WHICH INSURANCE PLAN IS ESTABLISHED		223,523.
3	TOTAL OF ALL NET PROFITS AND EARNED INCOME	224,799.	
4	DIVIDE LINE 2 BY LINE 3	.9943	
5	DEDUCTIBLE PORTION OF SELF-EMPLOYMENT TAX	10,264.	
6	LINE 4 TIMES LINE 5		10,206.
7	LINE 2 MINUS LINE 6		213,317.
8	SELF-EMPLOYED SEP, SIMPLE, AND QUALIFIED PLANS ATTRIBUTABLE TO TRADE OR BUSINESS NAMED ABOVE		0.
9	LINE 7 MINUS LINE 8		213,317.
10	FORM 2555, LINE 45 ATTRIBUTABLE TO THE TRADE OR BUSINESS NAMED ABOVE		
11	LINE 9 MINUS LINE 10		213,317.
12	SELF-EMPLOYED HEALTH INSURANCE DEDUCTION. LESSER OF LINE 1 OR LINE 11		1,828.

FORM 1040 OTHER TAXES STATEMENT 2

DESCRIPTION	AMOUNT
FROM FORM 8959	68.
FROM FORM 8960	1.
TOTAL TO FORM 1040, LINE 62	69.

FORM 1040	TOTAL DUE WITH INTEREST AND PENALTIES	STATEMENT	3
AMOUNT DUE			63,976.
INTEREST NOT INCLUDED			965.
PENALTY NOT INCLUDED			1,910.
TOTAL DUE			66,851.

FORM 1040	LATE PAYMENT INTEREST					STATEMENT	4
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST	
TAX DUE	04/15/15	63,666.	63,666.	.0300	183	965.	
DATE FILED	10/15/15		64,631.				
TOTAL LATE PAYMENT INTEREST						965.	

FORM 1040	LATE PAYMENT PENALTY					STATEMENT	5
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY		
TAX DUE	04/15/15	63,666.	63,666.	6	1,910.		
DATE FILED	10/15/15						
TOTAL LATE PAYMENT PENALTY					1,910.		

SCHEDULE A	STATE AND LOCAL INCOME TAXES	STATEMENT	6
DESCRIPTION	AMOUNT		
NEW YORK 4TH QTR ESTIMATE PAYMENTS	2,577.		
NEW YORK PRIOR YEAR OVERPAYMENT APPLIED	3,623.		
NEW YORK PRIOR YEAR BALANCE DUE AND EXTENSION PAYMENTS	9,600.		
TOTAL TO SCHEDULE A, LINE 5	15,800.		

SCHEDULE A	MEDICAL AND DENTAL EXPENSES	STATEMENT	7
DESCRIPTION		AMOUNT	
DOCTORS, DENTISTS, ETC.		9,574.	
PRESCRIPTION MEDICINES AND DRUGS		219.	
INSURANCE REIMBURSEMENT		-458.	
TOTAL TO SCHEDULE A, LINE 1		9,335.	

SCHEDULE C	OTHER INCOME	STATEMENT	8
DESCRIPTION		AMOUNT	
INSURANCE REIMBURSEMENT		1,200.	
TOTAL TO SCHEDULE C, LINE 6		1,200.	

SCHEDULE C	OTHER COSTS OF GOODS SOLD	STATEMENT	9
DESCRIPTION		AMOUNT	
FRAMING COSTS		11,825.	
TOTAL TO SCHEDULE C, LINE 39		11,825.	

SCHEDULE SE	NON-FARM INCOME	STATEMENT	10
DESCRIPTION		AMOUNT	
ART DEALER		223,523.	
MODELING		1,276.	
RENTAL REAL ESTATE		-9.	
TOTAL TO SCHEDULE SE, LINE 2		224,790.	



FORM 6251	EXEMPTION WORKSHEET	STATEMENT 11
1	ENTER: \$52,800 IF SINGLE OR HEAD OF HOUSEHOLD; \$82,100 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$41,050 IF MARRIED FILING SEPARATELY	52,800.
2	ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 28	210,921.
3	ENTER: \$117,300 IF SINGLE OR HEAD OF HOUSEHOLD; \$156,500 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$78,250 IF MARRIED FILING SEPARATELY	117,300.
4	SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS ENTER -0-	93,621.
5	MULTIPLY LINE 4 BY 25% (.25)	23,405.
6	SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0-. IF ANY OF THE THREE CONDITIONS UNDER CERTAIN CHILDREN UNDER AGE 24 APPLY TO YOU, COMPLETE LINES 7 THROUGH 10. OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30	29,395.
7	MINIMUM EXEMPTION AMOUNT FOR CERTAIN CHILDREN UNDER AGE 24	
8	ENTER YOUR EARNED INCOME, IF ANY	
9	ADD LINES 7 AND 8	
10	ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30	

FORM 4562	PART I - BUSINESS INCOME	STATEMENT 12
INCOME TYPE		AMOUNT
SCHEDULE C SECTION 179 EXPENSE		224,790. 86,646.
TOTAL BUSINESS INCOME USED IN FORM 4562, LINE 11		311,436.