<b>£ 1040</b>		nent of the Treasury—Internal Re Individual Incor		ırn 20	14	OMB No.	1545-0074 RS U	lse Only-	-Do not write or staple in	ı this space.		
For the year Jan. 1-De	ec. 31, 201	4, or other tax year beginning	·	. 20	14, ending		, 20		See separate Instru			
Your first name and	Initial		Last name		<del></del>			Y	Your social security number			
CHARLES E			SCHUMER					•		1		
lf a joint return, spo	use's first	name and initial	Last name					Š	ipouse's social securit	ly number		
IRIS			SCHUMER					1		)		
Home address (лил	ber and	street). If you have a P.O. be	ox, see instructions,		·		Apt. r	10.	Make sure the SS	N(s) above		
							<b>100</b>		and on line 6c are	e correct.		
City, town or post offi	ce, state, c	and ZIP code. If you have a for	eign address, also con	nplete spaces bek	ow (see instr	uctions),	<del>-</del>		Presidential Election	Campaign		
BROOKLYN 1	AY.				· · · · · · · · · · · · · · · · · · ·			ini	heck here if you, or your spe Intly, want \$3 to go to this fi			
Foreign country nan	ne -	<del></del>	Forei	lgn province/sta	te/county		Foreign postal	code lat	box below will not change y			
Filing Status	1	☐ Single			4	Head	of household (with	qualifying	g person). (See Instru	ctions.) If		
i ming Gtatas	2	Married filling jointly	even if only one l	nad income)		lhe qu	alifying person is a	child bu	it not your dependent,	, enter this		
Check only one	3	Married filing separa		e's SSN above	;	child's	name here. 🕨					
box.		and full name here. I	<del>- · · · · · · · · · · · · · · · · · · ·</del>		5	<del>=</del>	ying widow(er) w	ith depe	endent child			
Exemptions	6а	Yourself. If some	one can claim you	ras a depende	ent, <b>do no</b>	t check t	юхба		Boxes checked on 6a and 6b			
•	b	🔀 Spouse	<u> </u>	<del> </del>			· · · · ·	<u> </u>	No. of children	2		
	C	Dependents:	,	endent's	(3) Depend		(4) / if child under a qualifying for child tax		on 6c who: • lived with you			
	(1) First	name Last name	Sucial sacc	urity number	relationship i	u yuu	(see instructions		<ul> <li>did not live with</li> </ul>	h		
If more than four				<del></del>					you due to divord or separation			
dependents, see		<del></del>	·	<b>-</b> ·				<del>.</del>	(see instructions)  Dependents on 6			
instructions and			<del></del>	· · ·	<del></del>		<u> </u>		not entered abov			
check here ►	di	Total number of exem	ations deimod	···			<u>_</u>		Add numbers or	n 2		
	7	Wages, salaries, tips,		<del></del>				<del></del>	lines above >	<del></del>		
Income	, 8a	Taxable Interest. Attac	,	•				7	<del></del>	056.		
	b	Tax-exempt interest.		•	.   <sub>8b</sub>	1	1,026	8a		228.		
Attach Form(s)	9a	Ordinary dividends. At			. <u>  up</u>	1	1,020	9a				
W-2 here. Also attach Forms	b	Qualified dividends		ii roquii oo ii	. 9b	1		34				
W-2G and	10	Taxable refunds, credi		ate and local i		LL		10	<del>-</del> ,	2,656.		
1099-R if tax	11	Alimony received							,050.			
was withheld.	12	Business income or (lo				` :		12				
	13	Capital gain or (loss).	·			ed. chec	khere ▶ □	13	<del></del>			
If you did not	14	Other gains or (losses)						14	<del></del>			
get a W-2, see instructions.	15a	IRA distributions .	15a		,	xable amo		15b	<del></del>			
	16a	Pensions and annuitles	16a	•		xable amo		16b	<del>-   · · · </del>			
	17	Rental real estate, roya	ilties, partnership:	s, S corporatio	ons, trusts	, etc. Att	ach Schedule E	17				
	18	Farm income or (loss).						18				
	19	Unemployment compe	nsation					19				
	20a	Social security benefits	20a		b Ta	xable amo	ount	<b>20</b> b	)			
	21	Other income. List type					**	21				
	22	Combine the amounts in		<del></del>		s is your t	otal income 🕨	22	475	,940.		
Adjusted	23	Educator expenses				ļ						
Gross	24	Certain business expense										
Income		fee-basis government offi				<u> </u>	·					
	25	Health savings accoun				ļ <u> </u>			成 (4)			
	26	Moving expenses. Atta						_	জুল জুল			
	27	Deductible part of self-er				ļ			F)			
	28	Self-employed SEP, SI				<del></del>			数			
	29	Self-employed health i			· · · · · · · · · · · · · · · · · · ·	<b> </b>			XI A			
	30	Penalty on early withda						-	Ž.			
	31a 32	Alimony paid b Recip	ient 2 99M 🛌	<del></del>	31a	<del> </del>	<del></del>	-				

33

34

Student loan interest deduction . . .

Tuition and fees. Attach Form 8917. . . .

33

34

35

36

					Page 2
Form 1040 (2014)				38	475,940.
	38	Amount from line 37 (adjusted gross income)	d. Total boxes		
Tax and	39a	Glieck   British and Francisco	d. checked ➤ 39a		
Credits		if: □ Spouse was born before January 2, 1950, □ Blind if your spouse itemizes on a separate return or you were a dual-status a			
	b	Itemized deductions (from Schedule A) or your standard deduction	n (see left margin)	40	71,183.
Standard Deduction	40 41	Subtract line 40 from line 38		41	404,757.
for—	42	Exemptions. If line 38 is \$152,525 or less, multiply \$3,950 by the number on line	6d. Otherwise, see instructions	42	0.
<ul> <li>People who check any</li> </ul>	43	Taxable income. Subtract line 42 from line 41, If line 42 is more than	n line 41, enter -0-	43	404,757.
box on line 39a or 39b or	44	Tax (see instructions). Check if any from: a Form(s) 8814 b Fo	orm 4972 c 🗌	44	109,474.
who can be claimed as a	45	Alternative minimum tax (see instructions). Attach Form 6251 .		45	13,617.
dependent, see	46	Excess advance premium tax credit repayment, Attach Form 8962		46	
instructions.	47	Add lines 44, 45, and 46	<u> </u>	47	123,091.
• All others:	48	Foreign tax credit. Attach Form 1116 if required 48	3		
Single or Married filing	49	Credit for child and dependent care expenses. Attach Form 2441 49	3		
separately, \$6,200	50	Education credits from Form 8863, line 19	<u> </u>		
Married filing	51	Retirement savings contributions credit. Attach Form 8880 51			
jointly or Qualifying	52	Child tax credit. Attach Schedule 8812, if required		11.12	
widow(er), \$12,400	53	Residential energy credits. Attach Form 5695			
Head of	54	Other credits from Form: a 3800 h 8801 c 54			
household, \$9,100	55	Add lines 48 through 54. These are your total credits		55	102.001
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-		56	123,091.
	57	Self-employment tax. Attach Schedule SE		57 58	
Other	58	Unreported social security and Medicare tax from Form: a 413		59	
Taxes	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach For		60a	2,020.
	60a	Household employment taxes from Schedule H First-time homebuyer credit repayment. Attach Form 5405 if required		60b	2,020.
	61	Health care: individual responsibility (see instructions) Full-year cove		61	
	62	Taxes from: a 🔀 Form 8959 b 🔀 Form 8960 c 🛄 instructions:		62	2,459.
	63	Add lines 56 through 62. This is your total tax		63	127,570.
Payments	64		4   133,905.		<del></del>
- aymicing	65	2014 estimated tax payments and amount applied from 2013 return 65	· · · · · · · · · · · · · · · · · · ·		
If you have a	66a	Earned income credit (EIC)			
qualifying child, attach	ь	Nontaxable combat pay election 66b	A CHARLEST AND A STATE OF THE S		
Schedule EIC.	67	Additional child tax credit, Attach Schedule 8812 67	7		
<u> </u>	,		8		
	68	American opportunity credit from Form 8863, line 8 68	<del> </del>		
	68 69	American opportunity credit from Form 8863, line 8 68  Net premium tax credit. Attach Form 8962 68	9		
		Net premium tax credit. Attach Form 8962 68  Amount paid with request for extension to file	0	4	
	69 70 71	Net premium tax credit. Attach Form 8962 68  Amount paid with request for extension to file	0 1 7,063.		
	69 70 71 72	Net premium tax credit. Attach Form 8962 68  Amount paid with request for extension to file	0 7,063. 2		
	69 70 71 72 73	Net premium tax credit. Attach Form 8962	0 7,063. 2 3		110.000
	69 70 71 72 73 74	Net premium tax credit. Attach Form 8962	0 7,063. 2 3 nents	74	140,968.
Refund	69 70 71 72 73 74	Net premium tax credit. Attach Form 8962	0 7,063. 2 3 nents	75	13,398.
	69 70 71 72 73 74 75 76a	Net premium tax credit. Attach Form 8962	0 7,063. 2 3 ments ▶ the amount you overpaid and, check here . ▶ □	75 76a	
Direct deposit?	69 70 71 72 73 74 75 76a ▶ b	Net premium tax credit. Attach Form 8962	0 7,063. 2 3 nents	75	13,398.
,,,,,,,,,	69 70 71 72 73 74 75 76a ► b	Net premium tax credit. Attach Form 8962	7,063.  7,063.  2  3  ments	75 76a	13,398.
Direct deposit? See instructions.	69 70 71 72 73 74 75 76a ► b	Net premium tax credit. Attach Form 8962	7,063.  7,063.  2  3  ments	75 76a	13,398.
Direct deposit?	69 70 71 72 73 74 75 76a ▶ b	Net premium tax credit. Attach Form 8962	7,063.  7,063.  2  3  ments	75 76a 78	13,398. 13,398.
Direct deposit? See instructions. Amount You Owe	69 70 71 72 73 74 75 76a  ▶ b 77 78	Net premium tax credit. Attach Form 8962	7,063.  7,063.  2  3  ments	75 76a	13,398. 13,398.
Direct deposit? See instructions.  Amount You Owe Third Party	69 70 71 72 73 74 75 76a ▶ b  d 77 78 79	Net premium tax credit. Attach Form 8962	7,063.  7,063.  2  3  ments	75 76a 78 78	13,398. 13,398.
Direct deposit? See instructions.  Amount You Owe Third Party Designee	69 70 71 72 73 74 75 76a ▶ b  d 77 78 79	Net premium tax credit. Attach Form 8962	7,063.  7,063.  2  3  ments	75 76a 78 78 s. Comple	13,398. 13,398. te below.
Direct deposit? See instructions.  Amount You Owe Third Party Designee Sign	69 70 71 72 73 74 75 76a ▶ b	Net premium tax credit. Attach Form 8962	7,063.  7,063.  7,063.  the amount you overpaid led, check here	75 76a 76a 78 78 s. Complete this first the best of a second seco	13,398. 13,398.
Direct deposit? See instructions.  Amount You Owe Third Party Designee Sign Here	69 70 71 72 73 74 75 76a ▶ b ↑ d 77 78 79 Unith	Net premium tax credit. Attach Form 8962	7,063.  7,063.  1 7,063.  2 3  ments	75 76a 76a 78 78 78 78 78 78 78 78 78 78 78	13,398. 13,398.
Direct deposit? See instructions.  Amount You Owe Third Party Designee Sign	69 70 71 72 73 74 75 76a ▶ b  d 77 78 79 Ur th Yo	Amount paid with request for extension to file	7,063.  7,063.  2  3  ments	75 76a 78 78 78 s. Complete this control of the best of rear has any Daytime	13,398. 13,398.  13,398.  No  The below. No  The knowledge and belief, knowledge. Phone number
Direct deposit? See instructions.  Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for	69 70 71 72 73 74 75 76a ▶ b  d 77 78 79 Ur th Yo	Net premium tax credit. Attach Form 8962	7,063.  7,063.  2 3 ments	75 76a 76a 78 78 78 78 78 78 78 78 78 78 78 78 78	13,398. 13,398. 13,398.
Direct deposit? See instructions.  Amount You Owe Third Party Designee Sign Here Joint return? See instructions.	69 70 71 72 73 74 75 76a  ▶ b   d  77 78 79  Un  NY Sp	Amount paid with request for extension to file	1 7,063.  2 3 ments ▶ the amount you overpaid hed, check here . ▶ □ to pay, see instructions ▶ 9 (see instructions)? ★ Yes Personal ide number (PIN schedules and statements, and to hed on all information of which preparation SENATOR soccupation NISTRATOR	75 76a 78 78 78 s. Complete this control of the best of rear has any Daytime	13,398. 13,398. 13,398.
Direct deposit? See instructions.  Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for your records.	69 70 71 72 73 74 75 76a  ▶ b   d  77 78 79  Un  NY Sp	Net premium tax credit. Attach Form 8962	7,063.  1 7,063.  2 3  ments	75 76a 76a 78 78 78 78 78 78 78 78 78 78 78 78 78	13,398.  13,398.  13,398.  13,398.
Direct deposit? See instructions.  Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for	69 70 71 72 73 74 75 76a  ▶ b   d  77 78 79  Un  NY Sp	Amount paid with request for extension to file	1 7,063.  2 3 ments ▶ the amount you overpaid hed, check here . ▶ □ to pay, see instructions ▶ 9 (see instructions)? ★ Yes Personal ide number (PIN schedules and statements, and to hed on all information of which preparation SENATOR soccupation NISTRATOR	75 76a 76a 78 78 78 78 78 78 78 78 78 78 78 78 78	13,398. 13,398. 13,398. 13,398.

Firm's address ►

Phone no.

#### SCHEDULE A (Form 1040)

**Itemized Deductions** 

► Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.

OMB No. 1545-0074

Attachment

Department of the Treasury

Sequence No. 07 ► Attach to Form 1040. Internal Revenue Service (99) Your social security number Name(s) shown on Form 1040 CHARLES E & IRIS SCHUMER Caution. Do not include expenses reimbursed or paid by others. 1 Medical 1 Medical and dental expenses (see instructions) . . . . . and 2. Enter amount from Form 1040, line 38 2 Dental 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 Expenses 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-5 State and local (check only one box): Taxes You 52,580. a 🗵 income taxes, or Paid b ☐ General sales taxes 6 Real estate taxes (see instructions) . . . . . . 9,542. 7 Personal property taxes . . . . . 8 Other taxes. List type and amount > 62,122. <u>6,6</u>13 Home mortgage interest and points reported to you on Form 1098 Interest 11 Home mortgage interest not reported to you on Form 1098, if paid You Paid to the person from whom you bought the home, see instructions Note. and show that person's name, identifying no., and address Your mortgage Interest deduction may be limited (see 12 Points not reported to you on Form 1098. See instructions for instructions). 12 13 Mortgage insurance premiums (see instructions) . . . . . 13 14 Investment interest. Attach Form 4952 if required. (See instructions.) 6,613. 15 Gifts to Gifts by cash or check. If you made any gift of \$250 or more, 7,375. Charity 17 Other than by cash or check. If any gift of \$250 or more, see If you made a Instructions. You must attach Form 8283 if over \$500 . . . 17 200. gift and got a benefit for it. 18 see instructions. 19 Add lines 16 through 18 . . . . . . . . . 19 7,575. Casualty and Theft Losses 20 20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) Job Expenses Unreimbursed employee expenses-job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. and Certain 77.1 Miscellaneous 21 (See instructions.) > Deductions 22 23 Other expenses-investment, safe deposit box, etc. List type and amount 🕨 24 24 Add lines 21 through 23 . . . . . . 25 Enter amount from Form 1040, line 38 | 25 | 26 26 Multiply line 25 by 2% (.02) . . . . . . . . . . . . . . . 27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-27 Other 28 Other—from list in instructions. List type and amount ▶ Miscellaneous **Deductions** 28 Total 29 Is Form 1040, line 38, over \$152,525? Itemized 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. Deductions 🗵 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

# Form 6251

## Alternative Minimum Tax—Individuals

OMB No. 1545-0074

2014

Attachment Sequence No. 32

Department of the Treasury Internal Revenue Service (99)

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

▶ Information about Form 6251 and its separate instructions is at www.irs.gov/form6251.

► Attach to Form 1040 or Form 1040NR.

Sequence No.
Your social security number

CHARLES E & IRIS SCHUMER Latris Alternative Minimum Taxable Income (See instructions for how to complete each line.) 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.) 404,757. 2 Medical and dental. If you or your spouse was 65 or older, enter the smaller of Schedule A (Form 1040). 2 3 62,122 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line 4 5,127. If Form 1040, line 38, is \$152,525 or less, enter -0-. Otherwise, see instructions . . . . . . . . . 6 2,656. 8 Investment interest expense (difference between regular tax and AMT). . . . . . . . . . . . . . . 8 9 10 10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount . . . . . 11 12 Qualified small business stock (7% of gain excluded under section 1202) . . . , . . . . . . . . . . 13 0 13 Exercise of incentive stock options (excess of AMT income over regular tax income) . . . . . . 14 14 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 15 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) . . . . . . . . . 16 16 Disposition of property (difference between AMT and regular tax gain or loss) 17 17 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 18 18 Passive activities (difference between AMT and regular tax income or loss) . . . , . . . . . . 19 Loss ilmitations (difference between AMT and regular tax income or loss) . . . . . . . 20 20 Circulation costs (difference between regular tax and AMT) . . . . . . . 21 22 23 Research and experimental costs (difference between regular tax and AMT) . . . . 24 25 25 27 28 Alternative minimum taxable income. Combine lines 1 through 27, (If married filling separately and line 459,096. Part Alternative Minimum Tax (AMT) 29 Exemption. (If you were under age 24 at the end of 2014, see instructions.) 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 Married filling jointly or qualifying widow(er) 156,500 82,100 Married filing separately. . . . . . 78.250 41,050 29 6,451. If line 28 is over the amount shown above for your filling 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, 30 452,645. 31 • 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 123,091. for the AMT, If necessary), complete Part III on the back 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 filling separately) from the result. 123,091 33 Tentative minimum tax. Subtract line 32 from line 31 . . . . . . . 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 Schedule J to figure your tax on Form 1040, line 44, 109,474. 13,617 35 AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45 . . . . .

Form 6	3251 (2014)		, ago <b>2</b>
Part	Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Work	sheet l	n the instructions.
36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for line 31	36	
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see Instructions). If you are filing Form 2555 or 2555-EZ, see Instructions for the amount to enter	37	
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filling Form 2555 or 2555-EZ, see instructions for the amount to enter	38	
	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39	
41	Subtract line 40 from line 36	41	
	If line 41 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,650 (\$1,825 if married filing separately) from the result	42	
43	Enter:		
	• \$73,800 if married filing jointly or qualifying widow(er),		
	• \$36,900 if single or married filing separately, or	43	
	• \$49,400 if head of household.		
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040, line 43; if zero or less, enter -0 If you are filing Form 2555 or 2555-EZ, see Instructions for the amount to enter	44	
45	Subtract line 44 from line 43. If zero or less, enter -0	45	
46	Enter the smaller of line 36 or line 37	46	
47	Enter the smaller of line 45 or line 46. This amount is taxed at 0%	47	
48	Subtract line 47 from line 46	48	
49			
	• \$406,750 if single		
	• \$228,800 if married filing separately	49	
	• \$457,600 if married filing jointly or qualifying widow(er)		
	• \$432,200 if head of household		
50	Enter the amount from line 45	50	
51	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040, line 44, or the amount from line 19 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the		,
	amount from Form 1040, line 43; If zero or less, enter -0 If you are filling Form 2555 or Form 2555-EZ, see instructions for the amount to enter	51	
50	Add line 50 and line 51	52	
52 53		53	
54		54	
55	No. 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (	55	
56		56	
50	If lines 56 and 36 are the same, skip lines 57 through 61 and go to line 62. Otherwise, go to line 57.	*****	
57	The state of the s	57	
58		58	
O.D	If line 38 is zero or blank, skip lines 59 through 61 and go to line 62. Otherwise, go to line 59.		
59		59	
60		60	
61	No. of the second secon	61	
62		62	
63	100 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	63	
64	Enter the smaller of line 62 or line 63 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31.	64	

### SCHEDULE H (Form 1040)

Department of the Treasury Internal Revenue Service (99)

## **Household Employment Taxes**

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

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

➤ Information about Schedule H and its separate instructions is at www.irs.gov/scheduleh.

QMB No. 1545-1971
2014
Attachment
Sequence No. 44

Name of employer

Social security number

Employer identification number

CHARLES E SCHUMER

Calendar year taxpayers having no household employees in 2014 do not have to complete this form for 2014.

A	Did you pay any one household employee cash wages of \$1,900 or more in 2014? (If any hous spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructio question.)	sehold employee was your ns before you answer this
	<ul><li>✓ Yes. Skip lines B and C and go to line 1.</li><li>☐ No. Go to line B.</li></ul>	
В	Did you withhold federal income tax during 2014 for any household employee?	
	<ul><li>Yes. Skip line C and go to line 7.</li><li>No. Go to line C.</li></ul>	
С	Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2013 or 2014 to all (Do not count cash wages paid in 2013 or 2014 to your spouse, your child under age 21, or your pages	
	No. Stop. Do not file this schedule.  Yes. Skip lines 1-9 and go to line 10.	
Pε	Social Security, Medicare, and Federal Income Taxes	
1	Total cash wages subject to social security tax	
2	Social security tax, Multiply line 1 by 12.4% (.124)	<b>2</b> 967.
3	Total cash wages subject to Medicare tax	
4	Medicare tax. Multiply line 3 by 2.9% (.029)	4 226.
5	Total cash wages subject to Additional Medicare Tax withholding	
6	Additional Medicare Tax withholding. Multiply line 5 by 0.9% (.009)	6
7	Federal Income tax withheld, if any	7 780.
8	Total social security, Medicare, and federal income taxes. Add lines 2, 4, 6, and 7	8 1,973.
9	Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2013 or 2014 to all h (Do not count cash wages paid in 2013 or 2014 to your spouse, your child under age 21, or your pages.)	
	No. Stop. Include the amount from line 8 above on Form 1040, line 60a. If you are not required line 9 instructions.	d to file Form 1040, see the
	Yes. Go to line 10.	

	ule H (Form 1040) 2014									-5
Par	Federal Une	mployment (FUT)	A) Tax		<u> </u>	<u></u>	····		·	Na
				0 /14	المالية من على المالية	tions to a spadi	t reduction		Yes	No
10	Did you pay unemi	ployment_contributions and check "No.";	ons to only one st	ate? (ir yo	n baid courupn	mons to a credi	reduction [	10	$\overline{x}$	
4.4	state, see instructio	e unemployment co	ntributions for 2014	1 by April 1	5. 2015? Fiscal	vear filers see it	nstructions		X	
11	More of wages that	: are taxable for FUT	'A tax also taxable	for your sta	ate's unemplovi	ment tax?		12	×	
12	Wele all wages that	, are taxable to re-	7 ( 127 ( 127 127 127 127 127 127 127 127 127 127	, ,			-			
Navt	r if you checked the	"Yes" box on all th	ne lines above, con	nplete Sect	ion A.					
MOVE	If you checked the	"No" box on any of	f the lines above, s	kip Section	A and complet	te Section B.				
			S	ection A						
13	Name of the state v	vhere you paid unen	nployment contribu	ıtions ►	NY					
		• •								
14	Contributions paid	to your state unemp	loyment fund 🔒 .		, 14	117.				
15	Total cash wages s	ubject to FUTA tax					15			300.
16	FUTA tax. Multiply	line 15 by .6% (.006	). Enter the result t	nere, skip S	Section B, and g	go to line 25	16	<u></u>		47.
		····		ection B			<del></del>	, <del>.</del> .		
17		ns below that apply				10	(g)	_	(h)	
	(a) Name of state	(b) Taxable wages (as	(c) State experience rate	(d) State	(e) Multiply col. (b)	(f) Multiply col. (b)	Subtract col. (f)	Col	ntribu	
	Name of State	defined in state act)	period	experience	by .054	by col. (d)	from col. (e). If		id to s	
			From To	rate			zero or less, enter -D	une	mpioy fund	yment 1
-			, , , , , , , , , , , , , , , , , , , ,					_		·
							···	·   · · · ·		
		.1	<u> </u>			· ·		1		
18	Totals	. , . ,				18		1		
19		nd (h) of line 18 .			. 19		(35.41)			
20		subject to FUTA tax					20			·• · · · · ·
21	Multiply line 20 by 6	3.0% (.060)					21			
22	Multiply line 20 by	5.4% (.054)			. 22	-				
23		of line 19 or line 22								
		edit reduction state r				eck here) . 🛄	23			<del> </del>
		t line 23 from line 2		ere and go	to line 25 .	· · · · · · · · · · · · · · · · · · ·	24			<u></u>
		hold Employmer				0	107			350
		rom line 8. If you ch	ecked the "Yes" bo	ox on line C	of page 1, enti	er-u	25			973. 920.
	Add line 16 (or line						26		2,0	120.
27	Are you required to	onle Form 1940? ude the amount fror	a lina 96 above on	Form 1040	Lline 60a Don	ot complete Pa	t IV bolow			
		ave to complete Par				iot complete i ai	t iv below.			
12		d Signature Co				line 27 instruc	tions.		<del>,,=</del>	
Addr	ess (number and street) or	P.O. box if mail is not de	livered to street address	;		A	pł., room, or suite	no.		
City.	town or post office, state,	and ZIP code	··· ·· ·· <del>-</del>			<u> </u>		·-		
Unde	er penalties of perjury, I o	declare that I have examing of any payment made	ined this schedule, inc	luding accom	panying statements ad as a credit was	and to the best o	f my knowledge a ted from the pavo	and bel neats to	ief, it o emi	. is true piovees
Deck	aration of preparer (other t	han taxpayer) is based or	all information of which	preparer has	any knowledge.	, 01 15 10 25, 4500	wa mam ana pay.		5 57/14	p.10, 000
<b>)</b> .			<del></del>			<del></del>				
	Employer's signature		D	notius.	······································	Date		TIN		
Pai	id Print/Type pri	eparer's name	Preparer's sign	erru.6		Date 02/20/2015	Check 🔀 if 🔔	i IIX	سوزا	
	eparer <b>e</b>			_			self-employed		,-	<b>-</b>
	e Only Firm's name						EIN E		-	
····	Firm's addres	ss > tall and the same	the second of		<del></del>	Phone	r no.			

# Form 8959

Department of the Treasury Internal Revenue Service

## **Additional Medicare Tax**

If any line does not apply to you, leave it blank. See separate instructions.
 Attach to Form 1040, 1040NR, 1040-PR, or 1040-SS.
 Information about Form 8959 and its instructions is at www.irs.gov/form8959.

2014 Attachment Sequence No. 71

OMB No. 1545-0074

Name(s) shown on return

Your social security number

CHA	RLES E & IRIS SCHUMER				
Par	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	522,348.		
2	Unreported tips from Form 4137, line 6	2			
3	Wages from Form 8919, line 6	3			
4	Add lines 1 through 3	4	522,348.		
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	250,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0			6	272,348.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by	0.9%	6 (.009). Enter here and		
-	go to Part II			7	2,451.
Part		come	<u> </u>		
8	Self-employment income from Schedule SE (Form 1040),			12.5	
	Section A, line 4, or Section B, line 6. If you had a loss, enter				
	-0- (Form 1040-PR and Form 1040-SS filers, see instructions.)	8			
9	Enter the following amount for your filing status:				
	Married filing jointly \$250,000				
	Married filing separately \$125,000	1			
	Single, Head of household, or Qualifying widow(er) \$200,000	9			
10	Enter the amount from line 4	10			
11	Subtract line 10 from line 9. If zero or less, enter -0	11			
12	Subtract line 11 from line 8. If zero or less, enter -0	. • .		12	
13	Additional Medicare Tax on self-employment income. Multiply here and go to Part III	line 1	2 by 0.9% (.009). Enter		
Part	here and go to Part III	T	A-L/DDTA\ O	13	
14		Tax	ACT (HHTA) Compensi	ation	
17	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:	14			
10	Married filing jointly \$250,000	 			
	Married filing separately				
	Single, Head of household, or Qualifying widow(er) \$200,000	15			
16	Subtract line 15 from line 14. If zero or less, enter -0-			12022	
17	Additional Medicare Tax on railroad retirement (RRTA) compen			16	
•••	0.9% (.009). Enter here and go to Part IV	Saliui	i. Mulupiy line to by	47	
Part	V Total Additional Medicare Tax	<u> </u>	***	17	
18	Add lines 7, 13, and 17. Also include this amount on Form	1040	line 62 (Form 1040NP	T	
	1040-PR, and 1040-SS filers, see instructions) and go to Part V	/	wie or! It ours to soluti	18	2,451.
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	7,919.		
20	Enter the amount from line 1	20	522,348.	6000	
21	Multiply line 20 by 1.45% (.0145). This is your regular				
	Medicare tax withholding on Medicare wages	21	7,574.		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is yo				
	withholding on Medicare wages			22	345.
23	Additional Medicare Tax withholding on railroad retirement (RR				
0.4	W-2, box 14 (see instructions)			23	<del></del>
24	Total Additional Medicare Tax withholding. Add lines 22 and				
	amount with federal income tax withholding on Form 1040, line and 1040-SS filers, see instructions)		OUIT 1040MR, 1940-PR,	24	215

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

► Attach to your tax return.

OMB No. 1545-2227

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 72

Name(s) snown on your tax retorn	,	Tour social security faultices of Eliv
CHARLES E & IRIS SCHUMER	<del></del>	
Part I Investment Income  Section 6013(g) election (see instructions)		
Section 6013(h) election (see instructions)		
Regulations section 1.1411-10(g) election		
1 Taxable interest (see instructions)		
2 Ordinary dividends (see instructions)		
3 Annuities (see Instructions)		3
4a Rental real estate, royalties, partnerships, S corporations, trusts,	İ	
etc. (see Instructions) , , , , , , , , , , , , , , , , 4a	1	
b Adjustment for net income or loss derived in the ordinary course of		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
a non-section 1411 trade or business (see instructions)	)	
c Combine lines 4a and 4b		4c
5a Net gain or loss from disposition of property (see instructions) . 5a	1	
b Net gain or loss from disposition of property that is not subject to		
net investment income tax (see instructions)	)   (	
c Adjustment from disposition of partnership interest or S corporation		
stock (see instructions)	<del></del>	
d Combine lines 5a through 5c		5d 0.
6 Adjustments to investment income for certain CFCs and PFICs (see instru		
7 Other modifications to investment income (see instructions)		
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7, ,	<del> </del>	8 228.
Part II Investment Expenses Allocable to Investment Income and	· · · · · · · · · · · · · · · · · · ·	1918/372
9a Investment interest expenses (see instructions) 9a		
b State, local, and foreign income tax (see instructions) 9b		
c Miscellaneous investment expenses (see instructions) 9c		
d Add lines 9a, 9b, and 9c		
10 Additional modifications (see instructions)		
11 Total deductions and modifications. Add lines 9d and 10		11 26.
Part III Tax Computation		
12 Net investment income. Subtract Part II, line 11 from Part I, line 8, Individu		1 1
17. Estates and trusts complete lines 18a-21. If zero or less, enter -0-		<b>12</b> 202.
Individuals:		
13 Modified adjusted gross income (see instructions)		
14 Threshold based on filing status (see instructions)	···	——
15 Subtract line 14 from line 13. If zero or less, enter -0		
16 Enter the smaller of line 12 or line 15		16 202.
17 Net investment income tax for individuals, Multiply line 16 by 3.8% (.	,038). Enter here ar	
include on your tax return (see instructions)		17 8.
Estates and Trusts:	1	
18a Net investment income (line 12 above)	<b>a</b> !	
b Deductions for distributions of net investment income and		
deductions under section 642(c) (see instructions) 188	b l	
C Undistributed net investment income, Subtract line 18b from 18a (see		10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (
instructions). If zero or less, enter -0	C	
40a Adiyatad ayaa inaana (ana instruction)		
19a Adjusted gross income (see instructions)	a	
b Highest tax bracket for estates and trusts for the year (see		
b Highest tax bracket for estates and trusts for the year (see instructions)	ь	
b Highest tax bracket for estates and trusts for the year (see instructions)	b c	
b Highest tax bracket for estates and trusts for the year (see instructions)	b c	20