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## **Tax Return Carryovers to 2016**

NAME: GHISLAINE MAXWELL

ID Number:

# Two-Year Comparison Worksheet

# 2015

Name(s) as shown on return <b>GHISLAINE MAXWELL</b>			Social security number [REDACTED]
2014 Filing Status <b>SINGLE</b>	2015 Filing Status <b>SINGLE</b>		
2014 Tax Bracket <b>25.0%</b>	2015 Tax Bracket <b>25.0%</b>		
Description	Tax Year 2014	Tax Year 2015	Increase (Decrease)
SCHEDULE B - TAXABLE INTEREST	64,169.	63,088.	-1,081.
SCHEDULE B - ORDINARY DIVIDENDS	186,472.	182,240.	-4,232.
SCHEDULE B - QUALIFIED DIVIDENDS	123,149.	119,551.	-3,598.
SCH. C/C-EZ (BUSINESS INCOME/LOSS)	-1,250.	-500.	750.
SCHEDULE D (CAPITAL GAIN/LOSS)	-3,000.	-3,000.	
FORM 4797 (OTHER GAINS OR LOSSES)	2.	5,310.	5,308.
SCHEDULE E (RENTAL AND PASSTHROUGH)	43.	-3,642.	-3,685.
OTHER INCOME	-12,926.	0.	12,926.
TOTAL INCOME	233,510.	243,496.	9,986.
ADJUSTED GROSS INCOME	233,510.	243,496.	9,986.
TAXES	128,301.	119,703.	-8,598.
INTEREST (DEDUCTIBLE)	1.	17.	16.
CONTRIBUTIONS	0.	5,353.	5,353.
JOB EXPENSES AND 2% MISC. DEDUCT.	47,167.	40,652.	-6,515.
TOTAL ITEMIZED DEDUCTIONS	175,469.	165,725.	-9,744.
INCOME BEFORE EXEMPTIONS	58,041.	77,771.	19,730.
PERSONAL EXEMPTIONS	3,950.	4,000.	50.
TAXABLE INCOME	54,091.	73,771.	19,680.
TAX	2,579.	5,448.	2,869.
FORM 6251 (ALTERNATIVE MINIMUM TAX)	32,878.	27,605.	-5,273.
TAX BEFORE CREDITS	35,457.	33,053.	-2,404.
FORM 1116 (FOREIGN TAX CREDIT)	1,120.	4,420.	3,300.
TAX AFTER NON-REFUNDABLE CREDITS	34,337.	28,633.	-5,704.
FORM 8960 (NET INVEST. INCOME TAX)	1,273.	1,653.	380.
TOTAL TAX	35,610.	30,286.	-5,324.
ESTIMATED TAX PAYMENTS	56,761.	71,151.	14,390.
FORM 4868 (EXTENSION REQUEST)	25,000.	0.	-25,000.
TOTAL PAYMENTS	81,761.	71,151.	-10,610.
TAX OVERPAID	46,151.	40,865.	-5,286.
OVERPAYMENT APPLIED TO ESTIMATE	46,151.	40,865.	-5,286.
NEW YORK STATE RETURN			
TAXABLE INCOME	144,154.	151,015.	6,861.
TAX	14,727.	15,433.	706.
OTHER TAXES	114.	127.	13.
PAYMENTS	32,349.	24,571.	-7,778.
REFUNDABLE CREDITS	63.	63.	
OVERPAYMENT APPLIED TO ESTIMATED TAX	17,571.	9,074.	-8,497.

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New Jersey  
Long Island  
Westchester

**M A R K S P A N E T H**  
ACCOUNTANTS & ADVISORS

**GHISLAINE MAXWELL**  
C/O MARKS PANETH LLP-685 3RD AV  
NEW YORK, NY [REDACTED]

DEAR MS. MAXWELL:

ENCLOSED ARE YOUR 2015 INCOME TAX RETURNS, AS FOLLOWS...

2015 U.S. INDIVIDUAL INCOME TAX RETURN

2015 NEW YORK INDIVIDUAL INCOME TAX RETURN

IN ORDER FOR US TO ELECTRONICALLY FILE THE ABOVE RETURNS WE MUST HAVE WRITTEN AUTHORIZATION FROM YOU. WE ARE ENCLOSING A U.S. FORM 8879 AND NEW YORK TR-579-IT, WHICH YOU MUST SIGN TO AUTHORIZE THE E-FILING OF YOUR TAX RETURNS. EACH AUTHORIZATION FORM SHOULD BE SIGNED AND RETURNED TO OUR OFFICE AS SOON AS POSSIBLE BY POSTAL SERVICE, E-MAIL, OR FAX.

THE STATUS OF YOUR 2016 INDIVIDUAL ESTIMATED TAXES FOR THE FOURTH QUARTER WILL BE DETERMINED AT A LATER DATE.

YOUR COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

ALAN BLECHER  
MARKS PANETH LLP

## 2015 TAX RETURN FILING INSTRUCTIONS

### U.S. INDIVIDUAL INCOME TAX RETURN

FOR THE YEAR ENDING

DECEMBER 31, 2015

Prepared for	GHISLAINE MAXWELL C/O MARKS PANETH LLP-685 3RD AV NEW YORK, NY [REDACTED]
Prepared by	MARKS PANETH LLP 685 THIRD AVENUE NEW YORK, NY [REDACTED]
Amount of tax	Total tax \$ 30,286 Less: payments and credits \$ 71,151 Plus: interest and penalties \$ 0 OVERPAYMENT \$ 40,865
Overpayment	Miscellaneous Donations \$ 0 Credited to your estimated tax \$ 40,865 Refunded to you \$ 0
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING AND THE PRACTITIONER PIN PROGRAM HAS BEEN ELECTED. PLEASE SIGN AND RETURN FORM 8879 TO OUR OFFICE. WE WILL THEN TRANSMIT YOUR RETURN ELECTRONICALLY TO THE IRS.
Return must be mailed on or before	RETURN FEDERAL FORM 8879 TO US BY OCTOBER 17, 2016.
Special Instructions	

# Tentative Credit for Prior Year Minimum Tax

Name(s)	Social security number
GHISLAINE MAXWELL	[REDACTED]

## Part I Net Minimum Tax on Exclusion Items

1 Combine lines 1, 6 and 10 of your 2015 Form 6251	1 77,771.
2 Enter adjustments and preferences treated as exclusion items	2 160,355.
3 Minimum tax credit net operating loss deduction	3 ( )
4 Combine lines 1, 2, and 3. If more than zero OR you filed Form 2555 for 2015, go to line 5. If zero or less AND you did not file Form 2555 for 2015, enter -0- here and on line 15 and go to Part II.	4 238,126.
5 Enter: \$83,400 if married filing jointly or qualifying widow(er) for 2015; \$53,600 if single or head of household for 2015; or \$41,700 if married filing separately for 2015	5 53,600.
6 Enter: \$158,900 if married filing jointly or qualifying widow(er) for 2015; \$119,200 if single or head of household for 2015; or \$79,450 if married filing separately for 2015	6 119,200.
7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7 118,926.
8 Multiply line 7 by 25% (.25)	8 29,732.
9 Subtract line 8 from line 5. If zero or less, enter -0-	9 23,868.
10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II	10 214,258.
11 • If you filed Form 2555 for 2015, enter the amount from line 6 of the Foreign Earned Income Tax Worksheet. • If for 2015 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or had a gain on both lines 15 and 16 of Schedule D (Form 1040), complete Part III and enter the amount from line 55 here. • All others: If line 10 is \$185,400 or less (\$92,700 or less if married filing separately for 2015), multiply line 10 by 26% (.26). Otherwise, multiply line 10 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately for 2015) from the result	11 36,939.
12 Minimum tax foreign tax credit on exclusion items	12 8,309.
13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13 28,630.
14 Enter the amount from your 2015 Form 6251, line 34	14 1,028.
15 Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-	15 27,602.

## Part II Tentative Minimum Tax Credit

16 Enter the amount from your 2015 Form 6251, line 35	16 27,605.
17 Enter the amount from line 15 above	17 27,602.
18 Subtract line 17 from line 16. If less than zero, enter as a negative amount	18 3.
19 2015 minimum tax credit carryforward. Enter the amount from your 2015 Form 8801, line 26	19 1.
20 Enter the 2015 unallowed qualified electric vehicle credit	20
21 Tentative minimum tax credit for 2016. Combine lines 18, 19, and 20	21 4.

Lines 22 through 26 do not apply.

**Part III Tax Computation Using Maximum Capital Gains Rates**

27	Enter the amount from line 10. If you filed Form 2555 or 2555-EZ for 2015, enter the amount from line 3 of the worksheet in the instructions	27	214,258.
28	Enter the amount from line 6 of your 2015 Qualified Dividends and Capital Gain Tax Worksheet, or the amount from line 13 of your 2015 Schedule D Tax Worksheet	28	119,551.
	If you figured your 2015 tax using the 2015 Qualified Dividends and Capital Gain Tax Worksheet, skip line 29 and enter the amount from line 28 on line 30. Otherwise, go to line 29.	29	
29	Enter the amount from line 19 of your 2015 Schedule D (Form 1040)	30	119,551.
30	Add lines 28 and 29, and enter the smaller of that result or the amount from line 10 of your 2015 Schedule D Tax Worksheet	31	119,551.
31	Enter the smaller of line 27 or line 30	32	94,707.
32	Subtract line 31 from line 27	33	24,624.
33	If line 32 is \$185,400 or less (\$92,700 or less if married filing separately for 2015), multiply line 32 by 26% (.26). Otherwise, multiply line 32 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately for 2015) from the result.	34	37,450.
34	Enter:	35	
	• \$74,900 if married filing jointly or qualifying widow(er) for 2015,	36	37,450.
	• \$37,450 if single or married filing separately for 2015, or	37	119,551.
	• \$50,200 if head of household for 2015.	38	37,450.
35	Enter the amount from line 7 of your 2015 Qualified Dividends and Capital Gain Tax Worksheet, or the amount from line 14 of your 2015 Schedule D Tax Worksheet, whichever applies. If you did not complete either worksheet, enter the amount from 2015 Form 1040, line 43; but not less than -0-	39	82,101.
36	Subtract line 35 from line 34. If zero or less, enter -0-	40	413,200.
37	Enter the smaller of line 27 or line 28	41	37,450.
38	Enter the smaller of line 36 or line 37	42	
39	Subtract line 38 from line 37	43	37,450.
40	Enter:	44	375,750.
	• \$413,200 if single	45	82,101.
	• \$232,425 if married filing separately	46	12,315.
	• \$464,850 if married filing jointly or qualifying widow(er)	47	119,551.
	• \$439,000 if head of household	48	
41	Enter the amount from line 36	49	
42	Enter the amount from line 7 of your 2015 Qualified Dividends and Capital Gain Tax Worksheet 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 2015 Form 1040, line 43; but not less than -0-	50	
43	Add lines 41 and 42	51	
44	Subtract line 43 from line 40, but not less than -0-	52	
45	Enter the smaller of line 39 or line 44	53	36,939.
46	Multiply line 45 by 15% (.15)	54	56,284.
47	Add lines 38 and 45	55	36,939.
	If lines 47 and 27 are the same, skip lines 48 through 52 and go to line 53. Otherwise, go to line 48.		
48	Subtract line 47 from line 37		
49	Multiply line 48 by 20% (.20)		
	If line 29 is zero or blank, skip lines 50 through 52 and go to line 53. Otherwise, go to line 50.		
50	Add lines 32, 47, and 48		
51	Subtract line 50 from line 27		
52	Multiply line 51 by 25% (.25)		
53	Add lines 33, 46, 49, and 52		
54	If line 27 is \$185,400 or less (\$92,700 or less if married filing separately for 2015), multiply line 27 by 26% (.26). Otherwise, multiply line 27 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately for 2015) from the result.		
55	Enter the smaller of line 53 or line 54 here and on line 11. If you filed Form 2555 or 2555-EZ for 2015, do not enter this amount on line 11. Instead, enter it on line 4 of the worksheet.		

## IRS e-file Signature Authorization

2015

► Do not send to the IRS. This is not a tax return.

► Keep this form for your records.

► Information about Form 8879 and its instructions is at [www.irs.gov/form8879](http://www.irs.gov/form8879).

Submission Identification Number (SID) ►

Taxpayer's name <b>GHISLAINE MAXWELL</b>	Social security number [REDACTED]
Spouse's name [REDACTED]	Spouse's social security number [REDACTED]

**Part I Tax Return Information - Tax Year Ending December 31, 2015 (Whole Dollars Only)**

1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4) .....	1 243,496.
2 Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12) .....	2 30,286.
3 Federal income tax withheld (Form 1040, line 64; Form 1040A, line 40; Form 1040EZ, line 7) .....	3 [REDACTED]
4 Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Part I, line 13a) .....	4 0.
5 Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14) .....	5 [REDACTED]

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2015, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

I authorize **MARKS PANETH LLP** to enter or generate my PIN [REDACTED]  
ERO firm name  
Enter five digits, but  
do not enter all zeros

as my signature on my tax year 2015 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2015 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► \_\_\_\_\_ Date ► **10/06/2016****Spouse's PIN: check one box only**

I authorize \_\_\_\_\_ to enter or generate my PIN [REDACTED]  
ERO firm name  
Enter five digits, but  
do not enter all zeros

as my signature on my tax year 2015 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2015 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► \_\_\_\_\_ Date ► \_\_\_\_\_

**Practitioner PIN Method Returns Only - continue below****Part III Certification and Authentication - Practitioner PIN Method Only**

**ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN. **2 6 2 9 8 2** [REDACTED]  
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2015 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► \_\_\_\_\_ Date ► \_\_\_\_\_

519995  
11-06-15

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

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**Tax Year 2015 e-file Jurat/Disclosure  
for Form 1040, 1040A, or 1040EZ  
using Practitioner PIN method  
(with or without Electronic Funds Withdrawal)**

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**ERO Declaration**

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

**ERO Signature**

**I am signing this Tax Return by entering my PIN below.**

ERO's PIN 262982   
(enter EFIN plus 5 self-selected numerics)

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**Taxpayer Declarations**

**Perjury Statement**

Under penalties of perjury, I declare that I have examined this return, including any accompanying statements and schedules and, to the best of my knowledge and belief, it is true, correct, and complete.

**Consent to Disclosure**

I consent to allow my Intermediate Service Provider, transmitter, or Electronic Return Originator (ERO) to send my return/form to IRS and to receive the following information from IRS: a) an acknowledgment of receipt or reason for rejection of transmission; b) the reason for any delay in processing or refund; and, c) the date of any refund.

**I am signing this Tax Return and Electronic Funds Withdrawal Consent, if applicable, by entering my Self-Select PIN below.**

---

Taxpayer's PIN:  Date 10062016

Spouse's PIN: 

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COPY

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05-12-15

▼ DETACH HERE ▼

Form **4868**

Department of the Treasury  
Internal Revenue Service (99)

For calendar year 2015, or other tax year beginning

1019

**2015**

**Application for Automatic Extension of Time  
To File U.S. Individual Income Tax Return**

, 2015, ending

**Part I Identification**

1 Your name(s)

GHISLAINE MAXWELL  
C/O MARKS PANETH LLP-685 3RD AV  
NEW YORK, NY 10017

2 Your social security number

3 Spouse's social security number

**Part II Individual Income Tax**

4 Estimate of total tax liability for 2015 \$ **30,286.**

5 Total 2015 payments **71,151.**

6 Balance due. Subtract line 5  
from line 4 **0.**

7 Amount you are paying **0.**

8 Check here if you are "out of the country" and a U.S.  
citizen or resident

9 Check here if you file Form 1040NR or 1040NR-EZ and did not receive  
wages as an employee subject to U.S. income tax withholding

LX MAXW 30 0 201512 670

EFTA00026288

For the year Jan. 1-Dec. 31, 2015, or other tax year beginning

, 2015, ending

20

See separate instructions.

Your first name and initial

Last name

Your social security number

GHISLAINE

MAXWELL

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.

C/O MARKS PANETH LLP-685 3RD AV

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

NEW YORK, NY 10017

Foreign country name

Foreign province/state/county

Foreign postal code

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. You  Spouse**Filing Status**

1  Single  
2  Married filing jointly (even if only one had income)  
3  Married filing separately. Enter spouse's SSN above

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

Check only  
one box.**Exemptions**

6a  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 a child under age 17 qualifying for child tax credit

If more than four dependents, see instructions and check here ► 

d Total number of exemptions claimed

Boxes checked on 6a and 6b 1

No. of children on 6c who:

- lived with you
- did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

Add numbers on lines above ►

1

**Income**Attach Form(s)  
W-2 here. Also  
attach Forms  
W-2G and  
1099-R if tax  
was withheld.If you did not  
get a W-2,  
see instructions.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	
8a	Taxable interest. Attach Schedule B if required	8a	63,088.
b	Tax-exempt interest. Do not include on line 8a	8b	5,672.
9a	Ordinary dividends. Attach Schedule B if required	9a	182,240.
b	Qualified dividends	9b	119,551.
10	Taxable refunds, credits, or offsets of state and local income taxes	STMT 1	STMT 2
11	Alimony received	10	0.
12	Business income or (loss). Attach Schedule C or C-EZ	11	
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ►	12	-500.
14	Other gains or (losses). Attach Form 4797	13	-3,000.
15a	IRA distributions	14	5,310.
16a	Pensions and annuities	15b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	16b	
18	Farm income or (loss). Attach Schedule F	17	-3,642.
19	Unemployment compensation	18	
20a	Social security benefits	19	
21	Other income. List type and amount	20b	
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income ►	21	
22		22	243,496.

**Adjusted  
Gross  
Income**

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Deductible part of self-employment tax. Attach Schedule SE	27	
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN ►	31a	
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	
37	Subtract line 36 from line 22. This is your adjusted gross income ►	37	243,496.

510001  
12-30-15

LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2015)

EFTA00026289

**Tax and Credits**

Standard Deduction for -  
 • People who check any box on line 39a or 39b. **Or** who can be claimed as a dependent, see instructions.

• All others: Single or Married filing separately, \$6,300  
 Married filing jointly or Qualifying widow(er), \$12,600  
 Head of household, \$9,250

38	Amount from line 37 (adjusted gross income)	38	243,496.
39a	Check <input type="checkbox"/> You were born before January 2, 1951, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1951, <input type="checkbox"/> Blind. Total boxes checked ► 39a <input type="checkbox"/>	40	165,725.
41	Subtract line 40 from line 38	41	77,771.
42	Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see inst.	42	4,000.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	73,771.
44	Tax. Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	5,448.
45	Alternative minimum tax. Attach Form 6251	45	27,605.
46	Excess advance premium tax credit repayment. Attach Form 8962	46	
47	Add lines 44, 45, and 46	47	33,053.
48	Foreign tax credit. Attach Form 1116 if required	48	4,420.
49	Credit for child and dependent care expenses. Attach Form 2441	49	
50	Education credits from Form 8863, line 19	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit. Attach Schedule 8812, if required	52	
53	Residential energy credits. Attach Form 5695	53	
54	Other credits from Form: a <input checked="" type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	
55	Add lines 48 through 54. These are your total credits	55	4,420.
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	28,633.
57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60a	Household employment taxes from Schedule H	60a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
61	Health care: Individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	61	
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input checked="" type="checkbox"/> Form 8960 c <input type="checkbox"/> Inst; enter code(s)	62	1,653.
63	Add lines 56 through 62. This is your total tax	63	30,286.

**Payments**

64	Federal income tax withheld from Forms W-2 and 1099	64	
65	2015 estimated tax payments and amount applied from 2014 return	65	71,151.
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election	66b	
67	Additional child tax credit. Attach Schedule 8812	67	
68	American opportunity credit from Form 8863, line 8	68	
69	Net premium tax credit. Attach Form 8962	69	
70	Amount paid with request for extension to file	70	
71	Excess social security and tier 1 RRTA tax withheld	71	
72	Credit for federal tax on fuels. Attach Form 4136	72	
73	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	71,151.

**Refund**

75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	40,865.
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here ► <input type="checkbox"/>	76a	
b	Routing <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number <input type="text"/>	77	40,865.

**Amount You Owe**

78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
----	--	----	--

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)?	<input checked="" type="checkbox"/> Yes. Complete below.	<input type="checkbox"/> No
Designee's name ► BLECHER, ALAN	Phone <input type="text"/>	Personal identification number (PIN) <input type="text"/>

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.	
Your signature <input type="text"/>	Date <input type="text"/>
Spouse's signature. If a joint return, both must sign. <input type="text"/>	Your occupation CONSULTANT
Date <input type="text"/>	Spouse's occupation <input type="text"/>
Print/Type preparer's name <input type="text"/>	Daytime phone number <input type="text"/>

Paid Preparer Use Only	Preparer's signature <input type="text"/>	Date <input type="text"/>	Check <input type="checkbox"/> If self-employed	PTIN <input type="text"/>
Firm's name ► MARKS PANETH LLP	Firm's EIN ► 11 3518842			
685 THIRD AVENUE	Phone no. <input type="text"/>			
Firm's address ► NEW YORK, NY 10017				

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service  
(99)  
Name(s) shown on Form 1040

**Itemized Deductions**

► Information about Schedule A and its separate instructions is at [www.irs.gov/schedulea](http://www.irs.gov/schedulea).  
► Attach to Form 1040.

OMB No. 1545-0074

**2015**

Attachment

Sequence No. 07

Your social security number

**GHISLAINE MAXWELL**

<b>Medical and Dental Expenses</b>	<b>Caution:</b> Do not include expenses reimbursed or paid by others.		
1	Medical and dental expenses (see instructions) <b>SEE STATEMENT 8</b>	1	6,955.
2	Enter amount from Form 1040, line 38	2	243,496.
3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1951, multiply line 2 by 7.5% (.075) instead	3	24,350.
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0.	4	0.
<b>Taxes You Paid</b>	5 State and local (check only one box): a <input checked="" type="checkbox"/> Income taxes, or b <input type="checkbox"/> General sales taxes } <b>SEE STATEMENT 6</b>	5	34,571.
	6 Real estate taxes (see instructions)	6	85,132.
	7 Personal property taxes	7	
	8 Other taxes. List type and amount ►	8	
	9 Add lines 5 through 8	9	119,703.
<b>Interest You Paid</b>	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	
<b>Note:</b> Your mortgage interest deduction may be limited (see instructions).	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.) <b>STMT 7</b>	14	17.
	15 Add lines 10 through 14	15	17.
<b>Gifts to Charity</b>	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	5,353.
	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500	17	
If you made a gift and got a benefit for it, see instructions.	18 Carryover from prior year	18	
	19 Add lines 16 through 18	19	5,353.
<b>Casualty and Theft Losses</b>	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	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	11,000.
	23 Other expenses - investment, safe deposit box, etc. List type and amount ► <b>SEE STATEMENT 5</b>	23	34,522.
	24 Add lines 21 through 23	24	45,522.
	25 Enter amount from Form 1040, line 38	25	243,496.
	26 Multiply line 25 by 2% (.02)	26	4,870.
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0.	27	40,652.
<b>Other Miscellaneous Deductions</b>	28 Other - from list in instructions. List type and amount ►	28	
	29 Is Form 1040, line 38, over \$154,950? <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. <input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.	29	165,725.
<b>Total Itemized Deductions</b>	30 If you elect to itemize deductions even though they are less than your standard deduction, check here ► <input type="checkbox"/>		



## Interest and Dividend Summary

Name: GHISLAINE MAXWELL

Payer	Interest	FEIN/SSN: [REDACTED]									
		Interest on U.S. Savings Bonds	Tax-Exempt Interest	Private Activity Interest	Original Issue Discount (OID)	Ordinary Dividends	Qualified Dividends	Capital Gain Distributions	Federal Income Tax Withheld	State Tax Withheld	Foreign Tax Paid
BARCLAYS	16,736.										
CATER ALLEN PRIVATE BANK	5,519.										
IMPUTED INTEREST - LOAN FROM											
TERRAMAR PROJECT	1,515.										
UBS - Y1 23568						40,340.	40,340.				
UBS - Y1 23570						21,805.	88.				
UBS - Y1 23571						33,471.	7,817.	8,868.			
UBS - Y1 23574						20,493.	20,109.				
UBS - Y1 23575						10,611.		629.			
UBS - Y1 23572						54,713.	50,817.				
UBS - Y1 23568	6.										
UBS - Y1 23571	1.										
UBS - Y1 23574 - INTEREST	37,673.										
UBS - Y1 23574 - BOND PREMIUM	-51.										
UBS - Y1 23574 - T/E			5,672.								
UBS - Y1 23575	12.										
UBS - Y1 23572	7.										
UBS - Y1 23680	17.										
FROM K-1 - THE BLACKSTONE											
GROUP, LP	416.					126.	53.				
FROM K-1 - CARGOMETRICS											
TECHNOLOGIES LLC	75.										
FROM K-1 - ALPHAKEYS											
MILLENNIUM FUND, L.L.C.	269.					681.	327.				
<b>TOTALS</b>	<b>62,195.</b>	<b>893.</b>	<b>5,672.</b>			<b>182,240.</b>	<b>119,551.</b>	<b>9,497.</b>			

530191 04-01-15

6.1

EFTA00026293

## Interest and Dividend Summary

Name: GHISLAINE MAXWELL

FEIN/SSN:

**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](http://www.irs.gov/schedulec).  
 ► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

**2015**Attachment  
Sequence No. 09

Name of proprietor

Social security number (SSN)  
[REDACTED]**GHISLAINE MAXWELL****A** Principal business or profession, including product or service (see instructions)**CONSULTING****B** Enter code from instructions  
► **812990****C** Business name. If no separate business name, leave blank.**ELLMAX, LLC****D** Employer ID number (EIN), (see instr.)**E** Business address (including suite or room no.) ► **116 EAST 65TH STREET**  
City, town or post office, state, and ZIP code **NEW YORK, NY 11021****F** Accounting method: (1)  Cash (2)  Accrual (3)  Other (specify) ► \_\_\_\_\_**G** Did you "materially participate" in the operation of this business during 2015? If "No," see instructions for limit on losses  Yes  No**H** If you started or acquired this business during 2015, check here **I** Did you make any payments in 2015 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 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 ► 

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 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: a Mortgage (paid to banks, etc.)	16a	24 Travel, meals, and entertainment: a Travel	24a
b Other	16b	b Deductible meals and entertainment (see instructions)	24b
17 Legal and professional services	17	25 Utilities	25
	500.	26 Wages (less employment credits)	26
28 Total expenses before expenses for business use of home. Add lines 8 through 27a		27 a Other expenses (from line 48)	27a
29 Tentative profit or (loss). Subtract line 28 from line 7		b Reserved for future use	27b
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).		28	500.
Simplified method filers only: enter the total square footage of: (a) your home: and (b) the part of your home used for business: _____		29	-500.
Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30		30	

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.

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.

31 -500.

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) 2015

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

OMB No. 1545-0074

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

Name(s) shown on return

Your social security number

**GHISLAINE MAXWELL****Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	<b>69,900.</b>	<b>70,528.</b>		<b>&lt;628.&gt;</b>
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	<b>74.</b>			<b>74.</b>
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			<b>STMT 12</b>	<b>4 10.</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				<b>5 &lt;7.&gt;</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions				<b>6 ( 178,632.)</b>
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2				<b>7 &lt;179,183.&gt;</b>

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

See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	<b>3,210,287.</b>	<b>3,120,573.</b>	<b>31.</b>	<b>89,745.</b>
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	<b>232,220.</b>	<b>244,272.</b>		<b>&lt;12,052.&gt;</b>
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				<b>11 362.</b>
			<b>SEE STATEMENT 13</b>	
			<b>SEE STATEMENT 15</b>	
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				<b>12 1,477.</b>
<b>13</b> Capital gain distributions			<b>SEE STATEMENT 16</b>	<b>13 9,497.</b>
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions				<b>14 ( 6,208,137.)</b>
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on page 2				<b>15 &lt;6,119,108.&gt;</b>

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

Schedule D (Form 1040) 2015

**Part III Summary**

16	Combine lines 7 and 15 and enter the result	16	<u>&lt;6,298,291.&gt;</u>	
<ul style="list-style-type: none"> <li>If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter <b>-0-</b> on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.</li> </ul>				
17	Are lines 15 and 16 <b>both</b> gains?	18		
<input type="checkbox"/> <b>Yes.</b> Go to line 18. <input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.		19		
18	Enter the amount, if any, from line 7 of the <b>28% Rate Gain Worksheet</b> in the instructions	18		
19	Enter the amount, if any, from line 18 of the <b>Unrecaptured Section 1250 Gain Worksheet</b> in the instructions	19		
20	Are lines 18 and 19 <b>both</b> zero or blank?	21		
<input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <b>Do not</b> complete lines 21 and 22 below.		SEE STATEMENT 17	<u>3,000.</u>	
<input type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Do not</b> complete lines 21 and 22 below.				
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the <b>smaller</b> of:	21	(	3,000.)
<ul style="list-style-type: none"> <li>The loss on line 16 or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>				
<b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.				
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?			
<input checked="" type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42).				
<input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040 or Form 1040NR.				

Name(s) shown on return

**Social security number or  
taxpayer identification no.**

## GHISLAINE MAXWELL

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

## Part I

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

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

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

**(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)**

(B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B.

**2 Totals.** Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, **line 1b** (if **Box A** above is checked), **line 2** (if **Box B** above is checked), or **line 3** (if **Box C** above is checked) ►

69,900. 70,528.

<628. >

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return

**Social security number or  
taxpayer identification no.**

GHISLAINE MAXWELL

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

## Part I

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

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

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

**(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)**

(B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS.

(C) Short-term transactions not reported to you on Form 1099-B

**2 Totals.** Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, **line 1b** (if **Box A** above is checked), **line 2** (if **Box B** above is checked), or **line 3** (if **Box C** above is checked) ►

74

74.

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

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

**Social security number or  
taxpayer identification no.**

## GHISLAINE MAXWELL

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

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

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

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

**X** (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS.

(F) Long-term transactions not reported to you on Form 1099-B

**2 Totals.** Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, **line 8b** (if **Box D** above is checked), **line 9** (if **Box E** above is checked), or **line 10** (if **Box F** above is checked) ►

3210287. 3120573. 31. 89,745.

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

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

**Social security number or  
taxpayer identification no.**

## GHISLAINE MAXWELL

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

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

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

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

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

**(E) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS.**

(E) Long-term transactions reported on Form(s) 1099-B showing

**2 Totals.** Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, **line 8b** (if **Box D** above is checked), **line 9** (if **Box E** above is checked), or **line 10** (if **Box F** above is checked) ►

232,220. 244,272.

<12,052. >

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

## Qualified Dividends and Capital Gain Tax Worksheet - Line 44

Keep for Your Records

Name(s) shown on return <b>GHISLAINE MAXWELL</b>		Your SSN [REDACTED]
<b>Before you begin:</b> <input checked="" type="checkbox"/> See the instructions for line 44 to see if you can use this worksheet to figure your tax. <input checked="" type="checkbox"/> Before completing this worksheet, complete Form 1040 through line 43. <input checked="" type="checkbox"/> If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on line 13 of Form 1040.		
1. Enter the amount from Form 1040, line 43. However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet. 1. <u>73,771.</u>		
2. Enter the amount from Form 1040, line 9b* 2. <u>119,551.</u>		
3. Are you filing Schedule D? <input checked="" type="checkbox"/> Yes. Enter the <b>smaller</b> of line 15 or 16 of Schedule D. If either line 15 or line 16 is blank or a loss, enter -0- 3. <u>0.</u> <input type="checkbox"/> No. Enter the amount from Form 1040, line 13		
4. Add lines 2 and 3 4. <u>119,551.</u>		
5. If filing Form 4952 (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise, enter -0- 5. <u>0.</u>		
6. Subtract line 5 from line 4. If zero or less, enter -0- 6. <u>119,551.</u>		
7. Subtract line 6 from line 1. If zero or less, enter -0- 7. <u>0.</u>		
8. Enter: <div style="display: flex; align-items: center; justify-content: space-between;"> <div style="flex-grow: 1; margin-right: 10px;">           \$ 37,450 if single or married filing separately,            \$ 74,900 if married filing jointly or qualifying widow(er),            \$ 50,200 if head of household.         </div> <div style="border-left: 1px solid black; margin-right: 10px;"></div> <div style="flex-grow: 1;">           8. <u>37,450.</u> </div> </div>		
9. Enter the smaller of line 1 or line 8 9. <u>37,450.</u>		
10. Enter the smaller of line 7 or line 9 10. <u>0.</u>		
11. Subtract line 10 from line 9. This amount is taxed at 0% 11. <u>37,450.</u>		
12. Enter the smaller of line 1 or line 6 12. <u>73,771.</u>		
13. Enter the amount from line 11 13. <u>37,450.</u>		
14. Subtract line 13 from line 12 14. <u>36,321.</u>		
15. Enter: <div style="display: flex; align-items: center; justify-content: space-between;"> <div style="flex-grow: 1; margin-right: 10px;">           \$ 413,200 if single,            \$ 232,425 if married filing separately,            \$ 464,850 if married filing jointly or qualifying widow(er),            \$ 439,000 if head of household.         </div> <div style="border-left: 1px solid black; margin-right: 10px;"></div> <div style="flex-grow: 1;">           15. <u>413,200.</u> </div> </div>		
16. Enter the smaller of line 1 or line 15 16. <u>73,771.</u>		
17. Add lines 7 and 11 17. <u>37,450.</u>		
18. Subtract line 17 from line 16. If zero or less, enter -0- 18. <u>36,321.</u>		
19. Enter the smaller of line 14 or line 18 19. <u>36,321.</u>		
20. Multiply line 19 by 15% (0.15) 20. <u>5,448.</u>		
21. Add lines 11 and 19 21. <u>73,771.</u>		
22. Subtract line 21 from line 12 22. <u>0.</u>		
23. Multiply line 22 by 20% (0.20) 23. <u>0.</u>		
24. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet 24. <u>0.</u>		
25. Add lines 20, 23, and 24 25. <u>5,448.</u>		
26. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet 26. <u>14,238.</u>		
27. <b>Tax on all taxable income.</b> Enter the <b>smaller</b> of line 25 or line 26. Also include this amount on Form 1040, line 44. If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet 27. <u>5,448.</u>		

*\*If you are filing Form 2555 or 2555-EZ, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.*

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

Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**

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

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

► Information about Schedule E and its separate instructions is at [www.irs.gov/schedulee](http://www.irs.gov/schedulee).

OMB No. 1545-0074

**2015**

Attachment  
Sequence No. 13

Name(s) shown on return

Your social security number

**GHISLAINE MAXWELL**

**Part I Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

**A** Did you make any payments in 2015 that would require you to file Form(s) 1099? (see instructions)  Yes  No  
**B** If "Yes," did you or will you file required Forms 1099?  Yes  No

**1a** Physical address of each property (street, city, state, ZIP code)

**A THE BLACKSTONE GROUP, LP - ROYALTY**

**B**

**C**

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
			A	B	C
A	6				
B					
C					

**Type of Property:**

1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental  
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:	Properties:	A	B	C
3 Rents received .....	3			
4 Royalties received .....	4	9.		
<b>Expenses:</b>				
5 Advertising .....	5			
6 Auto and travel (see instructions) .....	6			
7 Cleaning and maintenance .....	7			
8 Commissions .....	8			
9 Insurance .....	9			
10 Legal and other professional fees .....	10			
11 Management fees .....	11			
12 Mortgage interest paid to banks, etc. (see instructions) .....	12			
13 Other interest .....	13			
14 Repairs .....	14			
15 Supplies .....	15			
16 Taxes .....	16			
17 Utilities .....	17			
18 Depreciation expense or depletion .....	18			
19 Other (list) ► <b>STMT 18</b> .....	19	6.		
20 Total expenses. Add lines 5 through 19 .....	20	6.		
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 .....	21	3.		
22 Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) .....	22	)	)	)

23a Total of all amounts reported on line 3 for all rental properties .....	23a			
b Total of all amounts reported on line 4 for all royalty properties .....	23b	9.		
c Total of all amounts reported on line 12 for all properties .....	23c			
d Total of all amounts reported on line 18 for all properties .....	23d			
e Total of all amounts reported on line 20 for all properties .....	23e	6.		
24 Income. Add positive amounts shown on line 21. <b>Do not</b> include any losses .....	24		3.	
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .....	25			
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 .....	26		3.	

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

Schedule E (Form 1040) 2015

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

GHISLAINE MAXWELL

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

**Part II Income or Loss From Partnerships and S Corporations** Note: If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk, excess farm loss, or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses?  Yes  No  
If you answered "Yes," see instructions before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	ALPHAKEYS MILLENNIUM FUND, L.L.C.	P		27-5238213	
B	INVESTMENT INTEREST EXPENSE	P		27-5238213	
C	CARGOMETRICS TECHNOLOGIES LLC	P		90-0907396	
D	THE BLACKSTONE GROUP, LP	P		20-8875684	

Passive Income and Loss		Nonpassive Income and Loss				
		(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A				1,736.		
B				1,985.		
C		0.				
PTPD		19.				95.
29a	Totals					95.
b	Totals	19.		3,721.		
30	Add columns (g) and (j) of line 29a				30	95.
31	Add columns (f), (h), and (i) of line 29b				31	( 3,740. )
32	Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				32	-3,645.

**Part III Income or Loss From Estates and Trusts**

33	(a) Name	(b) Employer identification number
A		
B		
Passive Income and Loss		Nonpassive Income and Loss
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A		
B		
34a	Totals	
b	Totals	
35	Add columns (d) and (f) of line 34a	35
36	Add columns (c) and (e) of line 34b	36 ( )
37	Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below	37

**Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder**

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41 -3,642.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code V; and Schedule K-1 (Form 1041), box 14, code F (see instructions)	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	
		43

## INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2015

**SCHEDULE E**Name **GHISLAINE MAXWELL**Passthrough **THE BLACKSTONE GROUP, LP**

PUBLICLY TRADED PARTNERSHIP

**SSN/EIN** **[REDACTED]****TAXPAYER****ID** **20-8875684**

OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>SCHEDULE E, PAGE 2</b>								
Ordinary business income (loss) .....	3.							
Rental real estate income (loss) .....	19.							
Other net rental income (loss) .....								
Intangible drilling costs/dry hole costs	7.							
Self-charged passive interest expense								
Guaranteed payments .....								
Section 179 and carryover .....								
Disallowed section 179 expense .....								
Excess farm loss .....								
Net income (loss) .....	15.							15.
First passive other .....	1.							1.
Second passive other .....	-35.							-35.
Cost depletion .....								
Percentage depletion .....								
Depletion carryover .....								
Disallowed due to 65% limitation .....								
Unreimbursed expenses (nonpassive)								
Nonpassive other .....	95.							95.
Total Schedule E (page 2) .....	76.							76.
<b>FORM 4797</b>								
Section 1231 gain (loss) .....	347.							347.
Section 179 recapture on disposition								
<b>SCHEDULE D</b>								
Net short-term cap. gain (loss) .....	-7.							-7.
Net long-term cap. gain (loss) .....	1,471.							1,471.
Section 1256 contracts & straddles .....								
<b>FORM 4952</b>								
Investment interest expense - Sch. A	17.							17.
Other net investment income .....	95.							95.
<b>ITEMIZED DEDUCTIONS</b>								
Charitable contributions .....								
Deductions related to portfolio income .....	21.							21.
Other .....								

**SCHEDULE E**

Name GHISLAINE MAXWELL

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Passthrough THE BLACKSTONE GROUP L

**PUBLICLY TRADED PARTNERSHIPS**

**ID** 20-8875684

**SSN/EIN**

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**TAXPAYER**

**INCOME FROM PASSTHROUGH STATEMENT, PAGE 1**

2015

**SCHEDULE E**

Name GHAISLAINE MAXWELL

Basethrough CARGOMETRICS TECHNOLOGIES LLC

— ID 90-0907396

**SSN/EIN**

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**TAXPAYER**

## Partnership

## SCHEDULE E

Name GHISLAINE MAXWELL

Passthrough CARGOMETRICS TECHNOLOGIES LLC

ID 90-0907396

SSN/EIN XXXXXXXXXX TAXPAYER

PARTNERSHIP

OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>INTEREST AND DIVIDENDS</b>								
Interest income .....	75.							75.
Interest from U.S. bonds .....								
Ordinary dividends .....								
Qualified dividends .....								
Tax-exempt interest income .....								
<b>FORM 6251</b>								
Depreciation adjustment after 12/31/86 .....								
Adjusted gain or loss .....								
Beneficiary's AMT adjustment .....								
Depletion (other than oil) .....								
Other .....								
<b>MISCELLANEOUS</b>								
Self-employment earnings (loss)/Wages .....	-118,351.							-118,351.
Gross farming & fishing inc .....								
Royalties .....								
Royalty expenses/depletion .....								
Undistributed capital gains credit .....								
Backup withholding .....								
Credit for estimated tax .....								
Cancellation of debt .....								
Medical insurance - 1040 .....								
Dependent care benefits .....								
Retirement plans .....								
Qualified production activities income .....								
Passthrough adjustment to Form 1040 .....								
Penalty on early withdrawal of savings .....								
NOL .....								
Other taxes/recapture of credits .....								
Credits .....	4,569.							4,569.
Casualty and theft loss .....								

## INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2015

**SCHEDULE E**Name **GHISLAINE MAXWELL**Passthrough **ALPHAKEYS MILLENNIUM FUND, L.L.C.**ID **27-5238213****SSN/EIN** **[REDACTED]****TAXPAYER**

PARTNERSHIP

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>SCHEDULE E, PAGE 2</b>								
Ordinary business income (loss) .....	-1,736.							
Rental real estate income (loss) .....								
Other net rental income (loss) .....								
Intangible drilling costs/dry hole costs .....								
Self-charged passive interest expense .....								
Guaranteed payments .....								
Section 179 and carryover .....								
Disallowed section 179 expense .....								
Excess farm loss .....								
Net income (loss) .....	-1,736.							-1,736.
First passive other .....								
Second passive other .....								
Cost depletion .....								
Percentage depletion .....								
Depletion carryover .....								
Disallowed due to 65% limitation .....								
Unreimbursed expenses (nonpassive) .....								
Nonpassive other .....	-1,985.							-1,985.
Total Schedule E (page 2) .....	-3,721.							-3,721.
<b>FORM 4797</b>								
Section 1231 gain (loss) .....								
Section 179 recapture on disposition .....								
<b>SCHEDULE D</b>								
Net short-term cap. gain (loss) .....								
Net long-term cap. gain (loss) .....	6.							6.
Section 1256 contracts & straddles .....	25.							25.
<b>FORM 4952</b>								
Investment interest expense - Sch. A .....								
Other net investment income .....								
<b>ITEMIZED DEDUCTIONS</b>								
Charitable contributions .....								
Deductions related to portfolio income .....	252.							252.
Other .....								

## SCHEDULE E

Name GHISLAINE MAXWELL

Passthrough ALPHAKEYS MILLENNIUM FUND, L.L.C.

ID 27-5238213

SSN/EIN

TAXPAYER

PARTNERSHIP

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
<b>INTEREST AND DIVIDENDS</b>								
Interest income .....	269.							269.
Interest from U.S. bonds .....	893.							893.
Ordinary dividends .....	681.							681.
Qualified dividends .....	327.							327.
Tax-exempt interest income .....								
<b>FORM 6251</b>								
Depreciation adjustment after 12/31/86 .....								
Adjusted gain or loss .....								
Beneficiary's AMT adjustment .....								
Depletion (other than oil) .....								
Other .....								
<b>MISCELLANEOUS</b>								
Self-employment earnings (loss)/Wages .....								
Gross farming & fishing inc .....								
Royalties .....								
Royalty expenses/depletion .....								
Undistributed capital gains credit .....								
Backup withholding .....								
Credit for estimated tax .....								
Cancellation of debt .....								
Medical insurance - 1040 .....								
Dependent care benefits .....								
Retirement plans .....								
Qualified production activities income .....								
Passthrough adjustment to Form 1040 .....								
Penalty on early withdrawal of savings .....								
NOL .....								
Other taxes/recapture of credits .....								
Credits .....								
Casualty and theft loss .....								

PASSTHROUGH RECAP - BASIC INFORMATION														2015	
GHISLAINE MAXWELL															
T Y S P J E	Schedule K-1 Line Reference: (1065/1120S/1041)			1/1/6	2/2/7	3/3/8	*	*	5/4/1	*	6a/5a/2a	7/6/*	8/7/3	9a/8a/4a	4/*/*
	Entity No.	Act. No.	Name	Ordinary Income (Loss)	Rental Real Estate Inc. (Loss)	Other Rental Income (Loss)	Passive Activity Loss C/O	AMT Passive Activity Loss C/O	Interest	US Treasury Bond Interest	Dividends	Royalties	Short-Term Capital Gain (Loss)	Net Long-Term Capital Gain (Loss)	Guaranteed Payments to Partner
T P	3	3	ALPHAKEYS MILLENNIUM FUND, L.L.C.	-1,736.					269.	893.	681.			6.	
T P	2	2	CARGOMETRICS TECHNOLOGIES LLC	-118,351.			4,275.	4,275.	75.						
T T	1	1	THE BLACKSTONE GROUP, LP	3.	19.				416.		126.	9.	-7.	1,471.	
Totals				-120,084.	19.		4,275.	4,275.	760.	893.	807.	9.	-7.	1,477.	
Component of:				Schedule E, Page 2, Various	Schedule E, Page 2, Various	Schedule E, Page 2, Various	Form 8582 Line 3c	Form 8582 AMT, Line 3c	Schedule B, Line 1	Schedule B, Line 1	Schedule B, Line 5	Schedule E, Line 4	Schedule D, Line 5	Schedule D, Line 12	Schedule E, Page 2, Various

Schedule K-1 Line Reference: (1065/1120S/1041)																	
Entity No.	Act. No.	Section 1231 Gain (Loss)	Ordinary Gain (Loss) Form 4797	Other Income	Charitable Contributions 50%	Section 179 Expense	Deductions Related to Portfolio Income (2%)	Other Deductions	Investment Int. Expense (Schedule E)	Investment Int. Expense (Schedule E)	Investment Income	SE Health Insurance Premium	Wages for More Than 2% Shareholders	Net SE Earnings	AMT Depr Adj on Post '86 Property	Minimum Tax Adjustment	Exclusion Items
3	3		5,310.				252.			1,985.							
2	2										75.			-118351			
1	1	347.		4.			21.	38.	17.								
Totals		347.	5,310.	4.			273.	38.	17.	1,985.	75.			-118351			
Component of:		Form 4797, Line 2	Form 4797, Line 10	Schedule E, Page 2, Various	Schedule A, Lines 16 & 17	Form 4562, Line 6	Schedule A, Line 23	Schedule E, Page 2, Various	Schedule A, Line 14	Schedule E, Page 2, Various	Form 4952, Line 4a	Form 1040, Line 29	Form 1040, Line 7	Schedule SE, Line 2	Form 6251, Line 19	Form 6251, Line 16	2015 Form 8801

\* - No specific Schedule K-1 line reference for these amounts.

PASSTHROUGH RECAP - ADDITIONAL INCOME, DEDUCTIONS, AND PRIOR YEAR CARRYOVERS																2015			
GHISLAINE MAXWELL																			
Schedule K-1																			
Line Reference: (1065/11205/1041)	17/15/*	15/13/13	15/13/*	*//*/10	*//*/11	18/16/14	18/16/*	18/16/*	*	*	*	*	*	*	*	*	*	*	
Entity No.	Act. No.	AMT Adj. Gain or Loss	Low Income Housing Cr Pre '08	Low Income Housing Cr Post '07	Estate Tax Deduction	Excess Deductions on Termination	Tax-exempt Interest Income	Other Tax-exempt Income	Nondeductible Expenses	Section 1231 PAL Carryover	AMT Section 1231 PAL Carryover	ST Capital PAL C/O	AMT ST Capital PAL C/O	LT Capital PAL C/O	AMT LT Capital PAL C/O	Form 4797 Ordinary PAL C/O	AMT 4797 Ordinary PAL C/O		
3	3								3.										
Totals .....									3.										
Component of:	Form 6251, Line 18	Form 8586 Line 4	Form 8586 Line 11	Schedule A, Line 28	Schedule A, Line 23	Schedule B, Line 1	Schedule B, Line 1	Form 6198, Line 4 Basic Lmt.	Form 8582, Line 3c	Form 8582 AMT, Line 3c	Form 8582, Line 3c	Form 8582 AMT, Line 3c	Form 8582, Line 3c	Form 8582 AMT, Line 3c	Form 8582, Line 3c	Form 8582 AMT, Line 3c			

Schedule K-1																	
Line Reference: (1065/11205/1041)																	
13/12/*																	
Entity No.	Act. No.	Section 179 Carryover	Charitable Contributions 30% Regular	Charitable Contributions 30% Special	Charitable Contributions 20%	Keogh Payments	SEP Payments	IRA Contributions	Other Portfolio Income (loss)	Other Nonportfolio Nonpassive Income	Unrecaptured Section 1250 Gain	20/17/*	Investment Expenses	Investment Interest Expense C/O (Sch. E)	Nonpassive Depreciation and Amortization	Deductions Related to Portfolio Income (not 2%)	Medical Payments for 2% Owner
1	1								95.		16.						
Totals .....									95.		16.						
Component of:	Form 4562, Line 10	Schedule A, Lines 16 & 17	Schedule A, Lines 16 & 17	Schedule A, Lines 16 & 17	Form 1040, Line 28	Form 1040, Line 28	Form 1040, Line 32	Schedule E, Page 2, Various	Schedule E, Page 2, Various	Schedule D, Line 19	Form 4952, Line 5	Form 4952, Line 2	Schedule E, Line 33	Schedule A, Line 28	Schedule A, Line 1		

528072 04-01-15 \* - No specific Schedule K-1 line reference for these amounts.

**Schedule E**

**PASSTHROUGH RECAP - CARRYOVERS TO NEXT YEAR**

2015

GHISLAINE MAXWELL



**Schedule E****Publicly Traded Partnerships**

Name of Activity: THE BLACKSTONE GROUP, LP - ACTIVITY NO. 1

Activity net income	347.
Activity net loss	-19.
Prior year unallowed losses	
Net income (loss)	<u>328.</u>
Total loss allowed from the PTP for 2015	19.

Disallowd losses from this PTP

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
SCH E	-19.	0.	-19.		19.
FORM 4797	347.	0.	347.		
	<u>328.</u>		<u>328.</u>		<u>19.</u>

**Alternative Minimum Tax**

Activity net income	347.
Activity net loss	-9.
Prior year unallowed losses	
Net income (loss)	<u>338.</u>
Total loss allowed from the PTP for 2015	9.

Disallowd losses from this PTP

Alternative minimum tax adjustment	<u>10.</u>
------------------------------------	------------

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
SCH E	-9.	0.	-9.		9.
FORM 4797	347.	0.	347.		
	<u>338.</u>		<u>338.</u>		<u>9.</u>

**Schedule of Mineral Interest Properties - Summary**

Identifying Number											
Name											
GHISLAINE MAXWELL											

Property Number	Property Description	Gross Income	Royalty Paid	Severance Tax	Operating Expense	IDC Expense	Dry Hole Costs	Other Expenses	Depreciation	Amortization	Overhead Expense	Net Income Before Depletion
1	THE BLACKSTONE GROUP, LP	21.			2.	7.						12.
TOTALS		21.			2.	7.						12.

Property Number	Property Description	% Depletion Limited to Net Income	Daily Production (Barrel)	Quantity Limitation Rate	% Depletion After Quantity Limitation	Cost Depletion	Prior Year % Depletion C/O	Greater of Cost or % Depletion	% Depletion 1st Iteration	Allocation Ratio	* Limited % Depletion	% Depletion Final Iteration
1	THE BLACKSTONE GROUP, LP			1.000000								
TOTALS												

Property Number	Property Description	Reallocation Ratio	* Allowable Depletion	Net Income After Depletion	% Depletion C/O To Next Year	Excess Depletion	Beginning Accum. IDC	Amortized Pref. IDC Expense	* Net Income for Excess IDC Calc.	Excess IDC	* Cost Depletion for 65% Limit	Reserved	Reserved
1	THE BLACKSTONE GROUP, LP			12.									
TOTALS				12.									

Property Number	Property Description	Beginning Recoverables	Production	Ending Recoverables	Basis	Beginning Accum. Depletion	Adjusted Basis	Cost Depletion Rate	Cost Depletion	* Allowable Depletion	Ending Accum. Depletion	Reserved	Reserved
1	THE BLACKSTONE GROUP, LP												
TOTALS													

\* "Limited % Depletion" - has been limited to 65% of Taxable Income

\* "Allowable Depletion" - Greater of "Percentage Depletion" or "Cost Depletion" after calculation for the 65% taxable income limitations or "Non-Oil & Gas Depletion"

\* "Net Income for Excess IDC CALC" - has been reduced by "Allowable Depletion" and "Excess IDC" has been added back.

\* "Cost Depletion for 65% Limitation" - Used for computation of taxable income limitation statement for AMT

Total excess Intangible Drilling Cost

Less 65% of Net Income for Excess IDC Calculation

Excess Intangible Drilling Cost Preference

## Foreign Tax Credit

(Individual, Estate, or Trust)

2015

Attachment  
Sequence No. 19

► Attach to Form 1040, 1040NR, 1041, or 990-T.

► Information about Form 1116 and its separate instructions is at [www.irs.gov/form1116](http://www.irs.gov/form1116).

Name

GHISLAINE MAXWELL

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a  Passive category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

f Resident of (name of country) ► UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

## Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	OTHER COUNTRIES	UNITED KINGDOM		
1a Gross income from sources within country shown above and of the type checked above:				
	51,257.	22,255.		1a 73,512.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement) SEE STATEMENT 19	98.			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	160,355.	160,355.		
b Other deductions (attach statement)				
c Add lines 3a and 3b	160,355.	160,355.		
d Gross foreign source income	51,257.	22,255.		
e Gross income from all sources	471,259.	471,259.		
f Divide line 3d by line 3e	.10877	.04722		
g Multiply line 3c by line 3f	17,442.	7,573.		
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	17,540.	7,573.		6 25,113.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7 48,399.

## Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one)	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				(r) Other foreign taxes paid or accrued
		Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:				
(h) <input checked="" type="checkbox"/> Paid	(i) <input type="checkbox"/> Accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(o) Dividends	(p) Rents and royalties	(q) Interest			(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
A					8,307.					8,307.
B										
C										

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2

► 8 8,307.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2015)

**Part III Figuring the Credit**

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	8,307.
10 Carryback or carryover (attach detailed computation)	10	
11 Add lines 9 and 10	11	8,307.
12 Reduction in foreign taxes	12	
13 Taxes reclassified under high tax kickout	13	
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	8,307.
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	48,399.
16 Adjustments to line 15	16	14,680.
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	63,079.
18 <b>Individuals:</b> Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption	18	77,771.
<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	19	.81109
19 Divide line 17 by line 18. If line 17 is more than line 18, enter *1	20	5,448.
20 <b>Individuals:</b> Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	21	4,419.
<b>Caution:</b> If you are completing line 20 for separate category (lump-sum distributions), see instructions.	22	4,419.
21 Multiply line 20 by line 19 (maximum amount of credit)	23	4,419.
22 Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	24	1.
	25	
	26	
27 Add lines 23 through 26	27	4,420.
28 Enter the smaller of line 20 or line 27	28	4,420.
29 Reduction of credit for international boycott operations	29	
30 Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	4,420.

Form 1116 (2015)

## Foreign Tax Credit

(Individual, Estate, or Trust)

2015

Attachment  
Sequence No. 19

► Attach to Form 1040, 1040NR, 1041, or 990-T.

► Information about Form 1116 and its separate instructions is at [www.irs.gov/form1116](http://www.irs.gov/form1116).

Name

GHISLAINE MAXWELL

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a  Passive category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

f Resident of (name of country) ► UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

## Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	►			
1a Gross income from sources within country shown above and of the type checked above:				
	19.			1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ►				19.
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income				
e Gross income from all sources				
f Divide line 3d by line 3e				
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ►				7
				12.

## Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued							
		In foreign currency			In U.S. dollars				
		Taxes withheld at source on:		(n) Other foreign taxes paid or accrued	Taxes withheld at source on:		(r) Other foreign taxes paid or accrued		
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(o) Dividends	(p) Rents and royalties	(q) Interest	
A					2.				2.
B									
C									

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ►

8 2.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2015)

**Part III Figuring the Credit**

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	2.
10 Carryback or carryover (attach detailed computation)	10	
11 Add lines 9 and 10	11	2.
12 Reduction in foreign taxes	12	
13 Taxes reclassified under high tax kickout	13	
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	2.
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	12.
16 Adjustments to line 15	16	
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	12.
18 <b>Individuals:</b> Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption	18	77,771.
<b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	19	.00015
19 Divide line 17 by line 18. If line 17 is more than line 18, enter *1	20	5,448.
20 <b>Individuals:</b> Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	21	1.
<b>Caution:</b> If you are completing line 20 for separate category (lump-sum distributions), see instructions.	22	1.
21 Multiply line 20 by line 19 (maximum amount of credit)		
22 Enter the <b>smaller</b> of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV		

**Part IV Summary of Credits From Separate Parts III**

23 Credit for taxes on passive category income	23	
24 Credit for taxes on general category income	24	
25 Credit for taxes on certain income re-sourced by treaty	25	
26 Credit for taxes on lump-sum distributions	26	
27 Add lines 23 through 26	27	
28 Enter the <b>smaller</b> of line 20 or line 27	28	
29 Reduction of credit for international boycott operations	29	
30 Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	

## General Business Credit

OMB No. 1545-0895

2015

Attachment  
Sequence No. 22

► Information about Form 3800 and its separate instructions is at [www.irs.gov/form3800](http://www.irs.gov/form3800).  
 ► You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

Identifying number  
[Redacted]

GHI SLAINE MAXWELL

**Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)**  
 (See instructions and complete Part(s) III before Parts I and II)

1	General business credit from line 2 of all Parts III with box A checked	1	
2	Passive activity credits from line 2 of all Parts III with box B checked	2	29.
3	Enter the applicable passive activity credits allowed for 2015 (see instructions)	3	0.
4	Carryforward of general business credit to 2015. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach	4	
5	Carryback of general business credit from 2016. Enter the amount from line 2 of Part III with box D checked	5	
6	Add lines 1, 3, 4, and 5	6	

**Part II Allowable Credit**

7	Regular tax before credits:	7	5,448.
8	• Individuals. Enter the sum of the amounts from Form 1040, lines 44 and 46, or the sum of the amounts from Form 1040NR, lines 42 and 44		
9	• Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the applicable line of your return		
10	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b; or the amount from the applicable line of your return		
11	8 Alternative minimum tax:	8	27,605.
12	• Individuals. Enter the amount from Form 6251, line 35		
13	• Corporations. Enter the amount from Form 4626, line 14		
14	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56		
15	9 Add lines 7 and 8	9	33,053.
16	10a Foreign tax credit	10a	4,420.
17	b Certain allowable credits (see instructions)	10b	
18	c Add lines 10a and 10b	10c	4,420.
19	11 Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	28,633.
20	12 Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-	12	1,028.
21	13 Enter 25% (.25) of the excess, if any, of line 12 over \$25,000 (see instructions)	13	
22	14 Tentative minimum tax:	14	28,633.
23	• Individuals. Enter the amount from Form 6251, line 33		
24	• Corporations. Enter the amount from Form 4626, line 12		
25	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		
26	15 Enter the greater of line 13 or line 14	15	28,633.
27	16 Subtract line 15 from line 11. If zero or less, enter -0-	16	0.
28	17 Enter the smaller of line 6 or line 16	17	0.

**C corporations:** See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 3800 (2015)

**Part II Allowable Credit (Continued)**

**Note.** If you are not required to report any amounts on lines 22 or 24 below, skip lines 18 through 25 and enter -0- on line 26.

18 Multiply line 14 by 75% (.75) (see instructions)	18
19 Enter the greater of line 13 or line 18	19
20 Subtract line 19 from line 11. If zero or less, enter -0-	20
21 Subtract line 17 from line 20. If zero or less, enter -0-	21
22 Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22
23 Passive activity credit from line 3 of all Parts III with box B checked	23
24 Enter the applicable passive activity credit allowed for 2015 (see instructions)	24
25 Add lines 22 and 24	25
26 Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26 0.
27 Subtract line 13 from line 11. If zero or less, enter -0-	27 28,633.
28 Add lines 17 and 26	28
29 Subtract line 28 from line 27. If zero or less, enter -0-	29 28,633.
30 Enter the general business credit from line 5 of all Parts III with box A checked	30
31 Reserved	31
32 Passive activity credits from line 5 of all Parts III with box B checked	32
33 Enter the applicable passive activity credits allowed for 2015 (see instructions)	33
34 Carryforward of business credit to 2015. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34
35 Carryback of business credit from 2016. Enter the amount from line 5 of Part III with box D checked (see instructions)	35
36 Add lines 30, 33, 34, and 35	36
37 Enter the <b>smaller</b> of line 29 or line 36	37
38 <b>Credit allowed for the current year.</b> Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return: <ul style="list-style-type: none"> <li>• Individuals. Form 1040, line 54, or Form 1040NR, line 51</li> <li>• Corporations. Form 1120, Schedule J, Part I, line 5c</li> <li>• Estates and trusts. Form 1041, Schedule G, line 2b</li> </ul>	38

Form 3800 (2015)

Name(s) shown on return

GHI SLAINE MAXWELL

Identifying number

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. (see instructions)

<b>A</b> <input type="checkbox"/> General Business Credit From a Non-Passive Activity	<b>E</b> <input type="checkbox"/> Reserved
<b>B</b> <input checked="" type="checkbox"/> General Business Credit From a Passive Activity	<b>F</b> <input type="checkbox"/> Reserved
<b>C</b> <input type="checkbox"/> General Business Credit Carryforwards	<b>G</b> <input type="checkbox"/> Eligible Small Business Credit Carryforwards
<b>D</b> <input type="checkbox"/> General Business Credit Carrybacks	<b>H</b> <input type="checkbox"/> Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

(a) Description of credit

(b) If claiming the credit from a pass-through entity, enter the EIN

(c) Enter the appropriate amount

	(a)	(b)	(c)
<b>Note.</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>		
<b>b</b> Reserved	<b>1b</b>		
<b>c</b> Increasing research activities (Form 6765)	<b>STMT 20</b>	<b>1c</b>	<b>90-0907396 29.</b>
<b>d</b> Low-income housing (Form 8586, Part I only)	<b>1d</b>		
<b>e</b> Disabled access (Form 8826) (see instructions for limitation)	<b>1e</b>		
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>1f</b>		
<b>g</b> Indian employment (Form 8845)	<b>1g</b>		
<b>h</b> Orphan drug (Form 8820)	<b>1h</b>		
<b>i</b> New markets (Form 8874)	<b>1i</b>		
<b>j</b> Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	<b>1j</b>		
<b>k</b> Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	<b>1k</b>		
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864)	<b>1l</b>		
<b>m</b> Low sulfur diesel fuel production (Form 8896)	<b>1m</b>		
<b>n</b> Distilled spirits (Form 8906)	<b>1n</b>		
<b>o</b> Nonconventional source fuel	<b>1o</b>		
<b>p</b> Energy efficient home (Form 8908)	<b>1p</b>		
<b>q</b> Energy efficient appliance	<b>1q</b>		
<b>r</b> Alternative motor vehicle (Form 8910)	<b>1r</b>		
<b>s</b> Alternative fuel vehicle refueling property (Form 8911)	<b>1s</b>		
<b>t</b> Reserved	<b>1t</b>		
<b>u</b> Mine rescue team training (Form 8923)	<b>1u</b>		
<b>v</b> Agricultural chemicals security (carryforward only)	<b>1v</b>		
<b>w</b> Employer differential wage payments (Form 8932)	<b>1w</b>		
<b>x</b> Carbon dioxide sequestration (Form 8933)	<b>1x</b>		
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>		
<b>z</b> Qualified plug-in electric vehicle (carryforward only)	<b>1z</b>		
<b>aa</b> New hire retention (carryforward only)	<b>1aa</b>		
<b>bb</b> General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	<b>1bb</b>		
<b>zz</b> Other	<b>1zz</b>		
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I	<b>2</b>		<b>29.</b>
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II	<b>3</b>		
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468)	<b>4a</b>		
<b>b</b> Work opportunity (Form 5884)	<b>4b</b>		
<b>c</b> Biofuel producer (Form 6478)	<b>4c</b>		
<b>d</b> Low-income housing (Form 8586, Part II)	<b>4d</b>		
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>4e</b>		
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	<b>4f</b>		
<b>g</b> Qualified railroad track maintenance (Form 8900)	<b>4g</b>		
<b>h</b> Small employer health insurance premiums (Form 8941)	<b>4h</b>		
<b>i</b> Reserved	<b>4i</b>		
<b>j</b> Reserved	<b>4j</b>		
<b>z</b> Other	<b>4z</b>		
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II	<b>5</b>		
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	<b>6</b>		<b>29.</b>

Form **4797**

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

**Sales of Business Property**  
(Also Involuntary Conversions and Recapture Amounts  
Under Sections 179 and 280F(b)(2))  
► Attach to your tax return.

OMB No. 1545-0184

**2015**

Attachment  
Sequence No. **27**

► Information about Form 4797 and its separate instructions is at [www.irs.gov/form4797](http://www.irs.gov/form4797).

**GHISLAINE MAXWELL**

1 Enter the gross proceeds from sales or exchanges reported to you for 2015 on Form(s) 1099-B or 1099-S  
(or substitute statement) that you are including on line 2, 10, or 20

**1**

**Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From  
Other Than Casualty or Theft-Most Property Held More Than 1 Year** (see instructions)

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
<b>2</b> <b>THE BLACKSTONE GROUP, LP</b>						<b>347.</b>
<b>3</b> Gain, if any, from Form 4684, line 39						<b>3</b>
<b>4</b> Section 1231 gain from installment sales from Form 6252, line 26 or 37						<b>4</b>
<b>5</b> Section 1231 gain or (loss) from like-kind exchanges from Form 8824						<b>5</b>
<b>6</b> Gain, if any, from line 32, from other than casualty or theft						<b>6</b>
<b>7</b> Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:						<b>7</b>
<b>Partnerships (except electing large partnerships) and S corporations.</b> Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.						<b>347.</b>
<b>Individuals, partners, S corporation shareholders, and all others.</b> If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						
<b>8</b> Nonrecaptured net section 1231 losses from prior years (see instructions)						<b>8</b>
<b>9</b> Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)						<b>9</b>

**Part II Ordinary Gains and Losses** (see instructions)

**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

<b>ALPHAKEYS MILLENNIUM FUND, L.L.C.</b>						<b>5,310.</b>

<b>11</b> Loss, if any, from line 7	<b>11</b> ( )
<b>12</b> Gain, if any, from line 7 or amount from line 8, if applicable	<b>12</b>
<b>13</b> Gain, if any, from line 31	<b>13</b>
<b>14</b> Net gain or (loss) from Form 4684, lines 31 and 38a	<b>14</b>
<b>15</b> Ordinary gain from installment sales from Form 6252, line 25 or 36	<b>15</b>
<b>16</b> Ordinary gain or (loss) from like-kind exchanges from Form 8824	<b>16</b>
<b>17</b> Combine lines 10 through 16	<b>17</b>
<b>18</b> For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:  a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions	<b>5,310.</b>
 b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14	 <b>18a</b>
	 <b>18b</b>
	<b>5,310.</b>

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797 (2015)**

**Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255** (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)			
A					
B					
C					
D					
These columns relate to the properties on lines 19A through 19D. ►		Property A	Property B	Property C	Property D
20 Gross sales price (Note: See line 1 before completing.)	20				
21 Cost or other basis plus expense of sale	21				
22 Depreciation (or depletion) allowed or allowable	22				
23 Adjusted basis. Subtract line 22 from line 21	23				
24 Total gain. Subtract line 23 from line 20	24				
25 If section 1245 property:					
a Depreciation allowed or allowable from line 22	25a				
b Enter the smaller of line 24 or 25a	25b				
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.					
a Additional depreciation after 1975 (see instructions)	26a				
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b				
c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c				
d Additional depreciation after 1969 and before 1976	26d				
e Enter the smaller of line 26c or 26d	26e				
f Section 291 amount (corporations only)	26f				
g Add lines 26b, 26e, and 26f	26g				
27 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).					
a Soil, water, and land clearing expenses	27a				
b Line 27a multiplied by applicable percentage	27b				
c Enter the smaller of line 24 or 27b	27c				
28 If section 1254 property:					
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a				
b Enter the smaller of line 24 or 28a	28b				
29 If section 1255 property:					
a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a				
b Enter the smaller of line 24 or 29a (see instructions)	29b				

**Summary of Part III Gains.** Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32

**Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less**  
(see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation (see instructions)	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

## Alternative Minimum Tax - Individuals

2015

Attachment  
Sequence No. 32

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

Your social security number  
[REDACTED]

GHI SLAINE MAXWELL

## Part I Alternative Minimum Taxable Income

1	77,771.
2	
3	119,703.
4	
5	40,652.
6	0.
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	SEE STATEMENT 21 10.
20	
21	
22	
23	
24	
25	
26	
27	
28	238,136.

## Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2015, see instructions.)	
	IF your filing status is...	AND line 28 is not over... THEN enter on line 29...
	Single or head of household	\$119,200 \$53,600 } Married filing jointly or qualifying widow(er) 158,900 83,400 } Married filing separately 79,450 41,700 STMT 22 }
		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	
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 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 \$185,400 or less (\$92,700 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately) from the result.	
32	Alternative minimum tax foreign tax credit (see instructions)	
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 Sch J to figure your tax on Form 1040, line 44, refigure that tax without using Schedule J before completing this line (see instructions)	
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	

519481  
01-11-16 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 6251 (2015)

**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.

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	214,270.
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 figured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	119,551.
38 Enter the amount from Schedule D (Form 1040), line 19 (as figured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38	
39 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as figured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39	119,551.
40 Enter the <b>smaller</b> of line 36 or line 39	40	119,551.
41 Subtract line 40 from line 36	41	94,719.
42 If line 41 is \$185,400 or less (\$92,700 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately) from the result	42	24,627.
43 Enter: • \$74,900 if married filing jointly or qualifying widow(er), • \$37,450 if single or married filing separately, or • \$50,200 if head of household.	43	37,450.
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	0.
45 Subtract line 44 from line 43. If zero or less, enter -0	45	37,450.
46 Enter the <b>smaller</b> of line 36 or line 37	46	119,551.
47 Enter the <b>smaller</b> of line 45 or line 46. This amount is taxed at 0%	47	37,450.
48 Subtract line 47 from line 46	48	82,101.
49 Enter: • \$413,200 if single • \$232,425 if married filing separately • \$464,850 if married filing jointly or qualifying widow(er) • \$439,000 if head of household	49	413,200.
50 Enter the amount from line 45	50	37,450.
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 filing Form 2555 or Form 2555-EZ, see instructions for the amount to enter	51	
52 Add line 50 and line 51	52	37,450.
53 Subtract line 52 from line 49. If zero or less, enter -0	53	375,750.
54 Enter the <b>smaller</b> of line 48 or line 53	54	82,101.
55 Multiply line 54 by 15% (.15)	55	12,315.
56 Add lines 47 and 54	56	119,551.
If lines 56 and 36 are the same, skip lines 57 through 61 and go to line 62. Otherwise, go to line 57.		
57 Subtract line 56 from line 46	57	0.
58 Multiply line 57 by 20% (.20)	58	
If line 38 is zero or blank, skip lines 59 through 61 and go to line 62. Otherwise, go to line 59.		
59 Add lines 41, 56, and 57	59	
60 Subtract line 59 from line 36	60	
61 Multiply line 60 by 25% (.25)	61	
62 Add lines 42, 55, 58, and 61	62	36,942.
63 If line 36 is \$185,400 or less (\$92,700 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately) from the result	63	56,288.
64 Enter the <b>smaller</b> 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	36,942.

## ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s)

Social Security Number

GHISLAINE MAXWELL

Form Name	Description	Income	Adjustment				
			Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251 Other Adjustment
E-	THE BLACKSTONE GROUP , LP - PTP						
	* REGULAR INCOME	-19.					
	AMT ADJUSTMENTS	10.				10.	
	* AMT NET INCOME	-9.					
	** TOTAL ADJ & PREF **					10.	

## ALTERNATIVE MINIMUM TAX

## Foreign Tax Credit

(Individual, Estate, or Trust)

OMB No. 1545-0121

1116

2015

Department of the Treasury  
Internal Revenue Service (99)Attachment  
Sequence No. 19

► Attach to Form 1040, 1040NR, 1041, or 990-T.

► Information about Form 1116 and its separate instructions is at [www.irs.gov/form1116](http://www.irs.gov/form1116).

Name

Identifying number as shown on page 1 of your tax return

GHISLAINE MAXWELL

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a  Passive category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

f Resident of (name of country) ► UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

## Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	OTHER COUNTRIES	UNITED KINGDOM		
1a Gross income from sources within country shown above and of the type checked above:				
	51,257.	22,255.		1a 73,512.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				
Deductions and losses (Caution: See instructions):	98.			
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income	51,257.	22,255.		
e Gross income from all sources	471,259.	471,259.		
f Divide line 3d by line 3e	.10877	.04722		
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	98.			6 98.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7 73,414.

## Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one)	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				(r) Other foreign taxes paid or accrued
		Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:				
(h) <input checked="" type="checkbox"/> Paid	(i) <input type="checkbox"/> Accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(o) Dividends	(p) Rents and royalties	(q) Interest			(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
A					8,307.					8,307.
B										
C										

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2015)

## ALTERNATIVE MINIMUM TAX

Form 1116 (2015) GHISLAINE MAXWELL

Page 2

**Part III Figuring the Credit**

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	8,307.
10 Carryback or carryover (attach detailed computation)	10	
11 Add lines 9 and 10	11	8,307.
12 Reduction in foreign taxes	12	
13 Taxes reclassified under high tax kickout	13	
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	8,307.
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	73,414.
16 Adjustments to line 15	16	
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	73,414.
18 Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	238,136.
<b>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</b>	19	.30829
19 Divide line 17 by line 18. If line 17 is more than line 18, enter *1	19	.30829
20 Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	20	36,942.
<b>Caution: If you are completing line 20 for separate category (lump-sum distributions), see instructions.</b>	20	36,942.
21 Multiply line 20 by line 19 (maximum amount of credit)	21	11,389.
22 Enter the <b>smaller</b> of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22	8,307.

**Part IV Summary of Credits From Separate Parts III**

23 Credit for taxes on passive category income	23	8,307.
24 Credit for taxes on general category income	24	2.
25 Credit for taxes on certain income re-sourced by treaty	25	
26 Credit for taxes on lump-sum distributions	26	
27 Add lines 23 through 26	27	8,309.
28 Enter the <b>smaller</b> of line 20 or line 27	28	8,309.
29 Reduction of credit for international boycott operations	29	
30 Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	8,309.

Form 1116 (2015)

## ALTERNATIVE MINIMUM TAX

1116

Department of the Treasury  
Internal Revenue Service (99)

## Foreign Tax Credit

(Individual, Estate, or Trust)

OMB No. 1545-0121

2015

Attachment  
Sequence No. 19

► Attach to Form 1040, 1040NR, 1041, or 990-T.

► Information about Form 1116 and its separate instructions is at [www.irs.gov/form1116](http://www.irs.gov/form1116).

Name

Identifying number as shown on page 1 of your tax return

GHISLAINE MAXWELL

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a  Passive category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

f Resident of (name of country) ► UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

## Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

g Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
	OTHER COUNTRIES			
1a Gross income from sources within country shown above and of the type checked above:	19.			1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ►				19.
<b>Deductions and losses (Caution: See instructions):</b>				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b	19.			
d Gross foreign source income				
e Gross income from all sources	471,259.			
f Divide line 3d by line 3e	.00004			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7
				19.

## Part II Foreign Taxes Paid or Accrued

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

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2015)

## ALTERNATIVE MINIMUM TAX

Form 1116 (2015) GHISLAINE MAXWELL

Page 2

**Part III Figuring the Credit**

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	2.
10 Carryback or carryover (attach detailed computation)	10	
11 Add lines 9 and 10	11	2.
12 Reduction in foreign taxes	12	
13 Taxes reclassified under high tax kickout	13	
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	2.
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	19.
16 Adjustments to line 15	16	
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	19.
18 Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	238,136.
<b>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</b>	19	.00008
19 Divide line 17 by line 18. If line 17 is more than line 18, enter *1	20	36,942.
20 Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	21	3.
<b>Caution: If you are completing line 20 for separate category (lump-sum distributions), see instructions.</b>	22	2.

**Part IV Summary of Credits From Separate Parts III**

23 Credit for taxes on passive category income	23	
24 Credit for taxes on general category income	24	
25 Credit for taxes on certain income re-sourced by treaty	25	
26 Credit for taxes on lump-sum distributions	26	
27 Add lines 23 through 26	27	
28 Enter the smaller of line 20 or line 27	28	
29 Reduction of credit for international boycott operations	29	
30 Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	

Form 1116 (2015)

Form **4952**Department of the Treasury  
Internal Revenue Service (99)**Investment Interest Expense Deduction**► Information about Form 4952 and its instructions is at [www.irs.gov/form4952](http://www.irs.gov/form4952).

► Attach to your tax return.

OMB No. 1545-0191

**2015**Attachment  
Sequence No. **51**

Name(s) shown on return

Identifying number  
[REDACTED]**GHISLAINE MAXWELL****Part I Total Investment Interest Expense**

1 Investment interest expense paid or accrued in 2015 (see instructions)	SEE STATEMENT 23	1	2,002.
2 Disallowed investment interest expense from 2014 Form 4952, line 7		2	
3 Total investment interest expense. Add lines 1 and 2		3	2,002.

**Part II Net Investment Income**

4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	STMT 24	4a	245,760.
b Qualified dividends included on line 4a		4b	119,551.
c Subtract line 4b from line 4a		4c	126,209.
d Net gain from the disposition of property held for investment		4d	
e Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment (see instructions)		4e	
f Subtract line 4e from line 4d		4f	
g Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)		4g	
h Investment income. Add lines 4c, 4f, and 4g		4h	126,209.
5 Investment expenses (see instructions)	SEE STATEMENT 25	5	34,528.
6 Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-		6	91,681.

**Part III Investment Interest Expense Deduction**

7 Disallowed investment interest expense to be carried forward to 2016. Subtract line 6 from line 3. If zero or less, enter -0-		7	0.
8 Investment interest expense deduction. Enter the <b>smaller</b> of line 3 or 6. See instructions	STMT 26	8	2,002.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4952** (2015)

## ALTERNATIVE MINIMUM TAX

Form **4952**Department of the Treasury  
Internal Revenue Service (99)**Investment Interest Expense Deduction**► Information about Form 4952 and its instructions is at [www.irs.gov/form4952](http://www.irs.gov/form4952).

► Attach to your tax return.

OMB No. 1545-0191

**2015**Attachment  
Sequence No. **51**

Name(s) shown on return

Identifying number  
[REDACTED]

GHI SLAINE MAXWELL

**Part I Total Investment Interest Expense**

1	Investment interest expense paid or accrued in 2015 (see instructions)	SEE STATEMENT 27	1	2,002.
2	Disallowment investment interest expense from 2014 Form 4952, line 7		2	
3	<b>Total investment interest expense.</b> Add lines 1 and 2		3	2,002.

**Part II Net Investment Income**

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	245,760.
4b	Qualified dividends included on line 4a	4b	119,551.
4c	Subtract line 4b from line 4a		126,209.
4d	Net gain from the disposition of property held for investment	4d	
4e	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e	
4f	Subtract line 4e from line 4d		
4g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)		
4h	Investment income. Add lines 4c, 4f, and 4g		126,209.
5	Investment expenses (see instructions)		6.
6	<b>Net investment income.</b> Subtract line 5 from line 4h. If zero or less, enter -0-		126,203.

**Part III Investment Interest Expense Deduction**

7	Disallowment investment interest expense to be carried forward to 2016. Subtract line 6 from line 3. If zero or less, enter -0-	7	0.
8	<b>Investment interest expense deduction.</b> Enter the <b>smaller</b> of line 3 or 6. See instructions	8	2,002.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4952** (2015)

REGULAR FORM 4952, LINE 8	2,002.
LESS RECOMPUTED FORM 4952, LINE 8	2,002.
INTEREST ADJUSTMENT - FORM 6251, LINE 8	

Form 8960

Department of the Treasury  
Internal Revenue Service (99)Net Investment Income Tax -  
Individuals, Estates, and Trusts

OMB No. 1545-2227

2015

Attachment  
Sequence No. 72

► Attach to your tax return.

► Information about Form 8960 and its separate instructions is at [www.irs.gov/form8960](http://www.irs.gov/form8960).Name(s) shown on your tax return  
GHISLAINE MAXWELLYour 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	63,088.
2	Ordinary dividends (see instructions)	2	182,240.
3	Annuities (see instructions)	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	-3,642.
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	STATEMENT 28	1,736.
c	Combine lines 4a and 4b	4c	-1,906.
5a	Net gain or loss from disposition of property (see instructions)	5a	2,310.
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	-5,310.
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	
d	Combine lines 5a through 5c	5d	-3,000.
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	240,422.

**Part II Investment Expenses Allocable to Investment Income and Modifications**

9a	Investment interest expenses (see instructions)	9a	17.
b	State, local, and foreign income tax (see instructions)	9b	34,263.
c	Miscellaneous investment expenses (see instructions)	9c	34,522.
d	Add lines 9a, 9b, and 9c	9d	68,802.
10	Additional modifications (see instructions)	10	
11	Total deductions and modifications. Add lines 9d and 10	11	68,802.

**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	171,620.
<b>Individuals:</b>			
13	Modified adjusted gross income (see instructions)	13	243,496.
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	43,496.
16	Enter the smaller of line 12 or line 15	16	43,496.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (.038). <b>Enter here and include on your tax return</b> (see instructions)	17	1,653.

**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). <b>Enter here and include on your tax return</b> (see instructions)	21	

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

Form 8960 (2015)

## Lines 5a-5d - Net Gains and Losses Worksheet

Keep for Your Records

	(A) Capital gains/(losses) Form 1040, Line 13, or Form 1041, Line 4	(B) Ordinary gains/(losses) Form 1040, Line 14, or Form 1041, Line 7	Total of columns (A) + (B)
1. Beginning Net Gains and Losses	-3,000.	5,310.	Enter this amount on line 5a 2,310.
2. Gains and Losses excluded from Net Investment Income, use current year amounts for lines 2a-2g and 2i.			
(a) Enter net gains from the disposition of property used in a non-section 1411 trade or business (enter as negative amounts): Name of Trade or Business <u>SEE STATEMENT 29</u> Amount _____ (_____ ) (_____ ) 5,310.			
(b) Enter net losses from the disposition of property used in a non-section 1411 trade or business (enter as positive amounts): Name of Trade or Business Amount _____			
(c) Enter net losses from a former passive activity (FPA) allowed by reason of section 469(f)(1)(A) _____			
(d) Gains recognized in the current year for payments received on an installment sale obligation or private annuity for the disposition of property used in a non-section 1411 trade or business _____			
(e) Enter the net gain attributable to the net unrealized appreciation (NUA) in employer securities _____			
(f) In the case of a QEF (other than a QEF held in a section 1411 trade or business) with respect to which a section 1.1411-10(g) election is not in effect, enter the amount treated as long-term capital gain for regular income tax purposes under section 1293(a)(1)(B) _____			
(g) Enter any other gains and losses included in net investment income that are not otherwise reported on Form 8960 and any other gains and losses excluded from net investment income reported on line 5a (enter excluded gains as a negative number and excluded losses as a positive number) _____			
(h) Enter the amount reported on line 2(j) of this worksheet from your prior tax year return calculations. Enter as a positive no. _____			
(i) If you do not have a capital loss carryover to next year, then skip this line and go to line 2(j). Otherwise, enter the lesser of (i)(1) or (i)(2) as a negative number _____ (i)(1) If the sum of the amounts reported on lines 2(a)-2(h) and line 3(d), column (A), is greater than zero, enter that amount here. Otherwise, enter -0- on line 2(i) and go to line 2(j) _____		0.	
OR			
(i)(2) The amount of capital loss carried over to next year (Schedule D (Form 1040), line 16, less the amount allowed as a current deduction on Schedule D (Form 1040), line 21) entered as a positive number <u>6,295,291.</u>			
(j) Sum of lines 2(a)-2(i) _____		-5,310.	Enter this amount on line 5b -5,310.
3. Adjustment for Gains and Losses attributable to the disposition of interests in partnerships and S corporations _____			Enter this amount on line 5c
Add lines 1, 2(j) and 3 _____	-3,000.	0.	Enter this amount on line 5d -3,000.

**Line 7 - Deduction Recoveries Worksheet****NEW YORK****Keep for Your Records**

1. Enter total amount of recovery included in gross income .....	1. <u>0.</u>
<ul style="list-style-type: none"> <li>• Do not include recoveries of items that are included in net investment income in the year of recovery (included on lines 1-6).</li> <li>• Do not include recoveries of items if the amount relates to a deduction taken in a tax year beginning before 2013.</li> <li>• Do not include recoveries of items if the amount relates to a deduction taken in a tax year beginning after 2012, and you were not subject to the NIIT solely because your MAGI was below the applicable threshold.</li> </ul>	
<b>CAUTION</b> <i>This rule does not apply if you incurred a net operating loss (NOL) in such year, and a portion of such NOL constitutes a section 1411 NOL.</i>	
2. Amount of the recovery that would have been included in gross income but for the application of the tax benefit rule under section 111 .....	2. <u>17,622.</u>
3. Total amount of recovery (add lines 1 and 2) .....	3. <u>17,622.</u>
4. Enter the percentage of the deduction allocated to net investment income in the prior year. (If the deduction was not allocated between investment income and non-investment income, enter 100%) .....	4. <u>1.000000000</u>
5. Enter the lesser of (a) line 3 multiplied by line 4, or (b) the total amount deducted on the prior year Form 8960 attributable to item recovered (after any deduction limitations imposed by section 67 or 68) .....	5. <u>17,622.</u>
<b>Calculation of recoveries when the deduction is not taken into account in computing your section 1411 NOL</b>	
6. Multiply line 5 by .038 .....	6. <u>670.</u>
7. Enter the amount of net investment income in the year of the deduction (previous year's Form 8960, line 12, unless line 12 is zero, then previous year's Form 8960, line 8 minus line 11) .....	7. <u>152,575.</u>
8. Add the amount of line 5 to line 7 .....	8. <u>170,197.</u>
9. Using the previous year's Form 8960, recalculate the NIIT for the year of the deduction by replacing the amount reported on line 12 with the amount reported on line 8 of this worksheet (do not use the net investment income reported on that year's Form 8960, line 12). Enter your recalculated NIIT here .....	9. <u>1,273.</u>
10. Enter the NIIT reported for the year of the deduction .....	10. <u>1,273.</u>
11. Subtract line 10 from line 9 .....	11. <u>0.</u>
12. Enter the smaller of line 6 or line 11 .....	12. <u>0.</u>
13. Divide line 12 by 3.8% (line 12 ÷ .038). Enter the result here and include on Form 8960, line 7 .....	13. <u>0.</u>
<b>Calculation of recoveries when the deduction is taken into account in computing your section 1411 NOL</b>	
14. Enter the amount of the section 1411 NOL in the year of the deduction (entered as a positive number) .....	14. _____
15. Enter the amount of the section 1411 NOL in the year of the deduction recomputed without the amount on line 5 (entered as a positive number, but not less than zero) .....	15. _____
16. Subtract line 15 from line 14. Enter the result here and include on Form 8960, line 7 .....	16. _____

**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) <u>SEE STATEMENT 30</u>		
(b)		

2. Enter the total of all items listed in line 1 ..... 2. 34,522.

3. Enter the amount of all Miscellaneous Itemized Deductions after the application of the section 67 limitation (Schedule A (Form 1040), line 27) ..... 3. 40,652.

4. Enter the lesser of the total reported on line 2 or line 3 ..... 4. 34,522.

**Part II - Application of Section 67 Limitation to Specific Deductions**

(A)  
Reenter the amounts and descriptions from Part I, line 1.

Description	Line	Amount		
(a) <u>SEE STATEMENT 31</u>			X	=
(b)			X	=

(B)  
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).

(C)  
Multiply the individual amounts in column (A) by the amount in column (B).

**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 - continued**

Keep for Your Records

**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:

<u>Description</u>	<u>Line</u>	<u>Amount</u>
(a) <u>SEE STATEMENT 32</u>	_____	_____
(b) _____	_____	_____

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

2. 34,263.

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 where they will be reported):

<u>Description</u>	<u>Line</u>	<u>Amount</u>
(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. 68,785.

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

5. 165,725.

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

(a) Investment Interest Expense	_____	17.
(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. 17.

7. Subtract line 6e from line 5 \_\_\_\_\_

7. 165,708.

8. Enter the lesser of line 7 or line 4 \_\_\_\_\_

8. 68,785.

**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)**

(B)

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).

(C)

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.

(A)

Reenter the amounts and descriptions from Part III, lines 1 - 3.

Miscellaneous Itemized Deductions properly allocable to investment income:

<u>Description</u>	<u>Line</u>	<u>Amount</u>	<u>X</u>	<u>=</u>
1. (a) <u>SEE STATEMENT 33</u>	_____	_____	X	_____
(b) _____	_____	_____	X	_____
2. State, local, and foreign income taxes	34,263.	34,263.	X	1.0000

Itemized Deductions Subject to Section 68 included on Line

3 of Part III:

3. (a) _____	_____	X	_____	=
(b) _____	_____	X	_____	=

Form **8960****Net Investment Income Tax -  
Individuals, Estates, and Trusts****2015**

NEW YORK

Name(s) <b>GHISLAINE MAXWELL</b>	Your social security number or EIN [REDACTED]
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**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	72,195.
2 Ordinary dividends (Form 1040, line 9a; or Form 1041, line 2a)	2	182,240.
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	-3,642.
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	4b	1,736.
c Combine lines 4a and 4b	4c	-1,906.
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	2,310.
b Net gain or loss from disposition of property that is not subject to net investment income tax	5b	-5,310.
c Adjustment from disposition of partnership interest or S corporation stock	5c	
d Combine lines 5a through 5c	5d	-3,000.
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	249,529.

**Part II State Income Tax Pro-ration for 2015 Income Tax Payments**

9 State total income	9	252,694.
10 State income tax payments for 2015	10	24,571.
11 2015 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10	11	24,263.

**Part III State Income Tax Pro-ration for 2014 Estimate Payments Made in 2015**

12 State estimate payments for 2014	12	
13 Percent of state income taxes attributable to investment income for 2014	13	
14 2014 state estimate payments attributable to investment income. Line 12 times line 13	14	

**Part IV State Income Tax Pro-ration for Balance of Prior Years Tax Plus Extension Payments Paid in 2015**

15 Balance of prior years tax plus extension payments paid in 2015	15	10,000.
16 Percent of state income taxes attributable to investment income for 2014	16	1.000000
17 Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16	17	10,000.

**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 2014	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	34,263.
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Form **8960 (2015)**

Form 8801  
**8801**

Department of the Treasury  
Internal Revenue Service (98)

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

OMB No. 1545-1073

**2015**

Attachment  
Sequence No. 74

Name(s) shown on return

Identifying number  
[REDACTED]

**GHISLAINE MAXWELL**

## Part I Net Minimum Tax on Exclusion Items

1	58,041.
2	175,468.
3	( )
4	233,509.
5	52,800.
6	117,300.
7	116,209.
8	29,052.
9	23,748.
10	209,761.
11	35,456.
12	1,120.
13	34,336.
14	1,459.
15	32,877.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8801 (2015)

## Part II Minimum Tax Credit and Carryforward to 2016

16 Enter the amount from your 2014 Form 6251, line 35, or 2014 Form 1041, Schedule I, line 56	16	32,878.
17 Enter the amount from line 15	17	32,877.
18 Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	1.
19 2014 credit carryforward. Enter the amount from your 2014 Form 8801, line 26	19	
20 Enter your 2014 unallowed qualified electric vehicle credit (see instructions)	20	
21 Combine lines 18 through 20. If zero or less, stop here and see the instructions	21	1.
22 Enter your 2015 regular income tax liability minus allowable credits (see instructions)	22	1,028.
23 Enter the amount from your 2015 Form 6251, line 33, or 2015 Form 1041, Schedule I, line 54	23	28,633.
24 Subtract line 23 from line 22. If zero or less, enter -0-	24	0.
25 Minimum tax credit. Enter the <b>smaller</b> of line 21 or line 24. Also enter this amount on your 2015 Form 1040, line 54 (check box b); Form 1040NR, line 51 (check box b); or Form 1041, Schedule G, line 2c	25	0.
26 Credit carryforward to 2016. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	1.

Form 8801 (2015)

**Part III Tax Computation Using Maximum Capital Gains Rates**

Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Worksheet in the instructions.

<b>Caution:</b> If you didn't complete the 2014 Qualified Dividends and Capital Gain Tax Worksheet, the 2014 Schedule D Tax Worksheet, or Part V of the 2014 Schedule D (Form 1041), see the instructions before completing this part. *	
27 Enter the amount from Form 8801, line 10. If you filed Form 2555 or 2555-EZ for 2014, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions .....	27 209,761.
<b>Caution:</b> If for 2014 you filed Form 1040NR, 1041, 2555, or 2555-EZ, see the instructions before completing lines 28, 29, and 30.	
28 Enter the amount from line 6 of your 2014 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2014 Schedule D Tax Worksheet, or the amount from line 26 of the 2014 Schedule D (Form 1041), whichever applies* .....	28 123,149.
<b>If you figured your 2014 tax using the 2014 Qualified Dividends and Capital Gain Tax Worksheet, skip line 29 and enter the amount from line 28 on line 30. Otherwise, go to line 29.</b>	
29 Enter the amount from line 19 of your 2014 Schedule D (Form 1040), or line 18b, column (2), of the 2014 Schedule D (Form 1041) .....	29
30 Add lines 28 and 29, and enter the <b>smaller</b> of that result or the amount from line 10 of your 2014 Schedule D Tax Worksheet .....	30 123,149.
31 Enter the <b>smaller</b> of line 27 or line 30 .....	31 123,149.
32 Subtract line 31 from line 27 .....	32 86,612.
33 If line 32 is \$182,500 or less (\$91,250 or less if married filing separately for 2014), multiply line 32 by 26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,650 (\$1,825 if married filing separately for 2014) from the result. Form 1040NR filers, see instructions .....	33 22,519.
34 Enter:	
• \$73,800 if married filing jointly or qualifying widow(er) for 2014, • \$36,900 if single or married filing separately for 2014, • \$49,400 if head of household for 2014, or • \$2,500 for an estate or trust.  Form 1040NR filers, see instructions.	34 36,900.
35 Enter the amount from line 7 of your 2014 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2014 Schedule D Tax Worksheet, or the amount from line 27 of the 2014 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2014 Schedule D (Form 1041), enter the amount from your 2014 Form 1040, line 43, or 2014 Form 1041, line 22, whichever applies; if zero or less, enter -0-. Form 1040NR filers, see instructions .....	35
36 Subtract line 35 from line 34. If zero or less, enter -0- .....	36 36,900.
37 Enter the <b>smaller</b> of line 27 or line 28 .....	37 123,149.
38 Enter the <b>smaller</b> of line 36 or line 37 .....	38 36,900.
39 Subtract line 38 from line 37 .....	39 86,249.
40 Enter:	
• \$406,750 if single for 2014, • \$228,800 if married filing separately for 2014, • \$457,600 if married filing jointly or qualifying widow(er) for 2014, or • \$432,200 if head of household for 2014, or • \$12,150 for an estate or trust.  Form 1040NR filers, see instructions.	40 406,750.
41 Enter the amount from line 36 .....	41 36,900.
42 Form 1040 filers, enter the amount from line 7 of your 2014 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 19 of your 2014 Schedule D Tax Worksheet, whichever applies. If you didn't complete either worksheet, see instructions. Form 1041 filers, enter the amount from line 27 of your 2014 Schedule D (Form 1041) or line 18 of your 2014 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2014 Schedule D (Form 1041), enter the amount from your 2014 Form 1041, line 22; if zero or less, enter -0-. Form 1040NR filers, see instructions .....	42

\* The 2014 Qualified Dividends and Capital Gain Tax Worksheet is in the 2014 Instructions for Form 1040. The 2014 Schedule D Tax Worksheet is in the 2014 Instructions for Schedule D (Form 1040) (or the 2014 Instructions for Schedule D (Form 1041)).

## Part III Tax Computation Using Maximum Capital Gains Rates (continued)

43	Add lines 41 and 42	43	36,900.
44	Subtract line 43 from line 40. If zero or less, enter -0	44	369,850.
45	Enter the <b>smaller</b> of line 39 or line 44	45	86,249.
46	Multiply line 45 by 15% (0.15)	46	12,937.
47	Add lines 38 and 45	47	123,149.
	If lines 47 and 27 are the same, skip lines 48 through 52 and go to line 53. Otherwise, go to line 48.		
48	Subtract line 47 from line 37	48	0.
49	Multiply line 48 by 20% (0.20)	49	
	If line 29 is zero or blank, skip lines 50 through 52 and go to line 53. Otherwise, go to line 50.		
50	Add lines 32, 47 and 48	50	
51	Subtract line 50 from line 27	51	
52	Multiply line 51 by 25% (0.25)	52	
53	Add lines 33, 46, 49, and 52	53	35,456.
54	If line 27 is \$182,500 or less (\$91,250 or less if married filing separately for 2014), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,650 (\$1,825 if married filing separately for 2014) from the result. Form 1040NR filers, see instructions	54	55,083.
55	Enter the <b>smaller</b> of line 53 or line 54 here and on line 11. If you filed Form 2555 or 2555-EZ for 2014, don't enter this amount on line 11. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet in the instructions for line 11	55	35,456.

Form 1116

FORM 8801

## Foreign Tax Credit

(Individual, Estate, or Trust)

OMB No. 1545-0121

2014

Attachment  
Sequence No. 19Department of the Treasury  
Internal Revenue Service (99)

Name

GHI SLAINE MAXWELL

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a  Passive category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

f Resident of (name of country) ► UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

## Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	OTHER COUNTRIES	UNITED KINGDOM		
1a Gross income from sources within country shown above and of the type checked above:				
	106,055.	22,127.		1a 128,182.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				
Deductions and losses (Caution: See instructions):	11.			
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income	106,055.	22,127.		
e Gross income from all sources	369,869.	369,869.		
f Divide line 3d by line 3e	.286737	.059824		
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	11.			6 11.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7 128,171.

## Part II Foreign Taxes Paid or Accrued

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

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2

For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2014)

**Part III Figuring the Credit**

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	1,120.
10 Carryback or carryover (attach detailed computation)	10	
11 Add lines 9 and 10	11	1,120.
12 Reduction in foreign taxes	12	
13 Taxes reclassified under high tax kickout	13	
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	1,120.
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	128,171.
16 Adjustments to line 15	16	
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	128,171.
18 Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	233,509.
<b>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</b>	19	.548891
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	.548891
20 Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37	20	35,456.
<b>Caution: If you are completing line 20 for separate category (lump-sum distributions), see instructions.</b>	20	35,456.
21 Multiply line 20 by line 19 (maximum amount of credit)	21	19,461.
22 Enter the <b>smaller</b> of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22	1,120.

**Part IV Summary of Credits From Separate Parts III**

23 Credit for taxes on passive category income	23	
24 Credit for taxes on general category income	24	
25 Credit for taxes on certain income re-sourced by treaty	25	
26 Credit for taxes on lump-sum distributions	26	
27 Add lines 23 through 26	27	
28 Enter the <b>smaller</b> of line 20 or line 27	28	1,120.
29 Reduction of credit for international boycott operations	29	
30 Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	1,120.

Name  
GHISLAINE MAXWELL

1. Enter your taxable income from Form 8801, line 10	1. <u>209,761.</u>
2. Enter your qualified dividends from Form 1040, line 9b	2. <u>N/A</u>
3. Enter the amount from Form 4952, line 4g	3. <u>N/A</u>
4. Enter the amount from Form 4952, line 4e*	4. <u>N/A</u>
5. Subtract line 4 from line 3. If zero or less, enter -0-	5. <u>N/A</u>
6. Subtract line 5 from line 2. If zero or less, enter -0-	6. <u>N/A</u>
7. Enter the <b>smaller</b> of line 15 or line 16 of Sch. D	7. <u>N/A</u>
8. Enter the <b>smaller</b> of line 3 or line 4	8. <u>N/A</u>
9. Subtract line 8 from line 7. If zero or less, enter -0-	9. <u>N/A</u>
10. Add lines 6 and 9	10. <u>123,149.</u>
11. Add lines 18 and 19 of Schedule D	11. <u></u>
12. Enter the <b>smaller</b> of line 9 or line 11	12. <u></u>
13. Subtract line 12 from line 10	13. <u>123,149.</u>
14. Subtract line 13 from line 1. If zero or less, enter -0-	14. <u>86,612.</u>
15. Enter: • \$36,900 if single or married filing separately; \$73,800 if married filing jointly or qualifying widow(er); or \$49,400 if head of household	15. <u>36,900.</u>
16. Enter the <b>smaller</b> of line 1 or line 15	16. <u>36,900.</u>
17. Enter the <b>smaller</b> of line 14 or line 16	17. <u>36,900.</u>
18. Subtract line 10 from line 1. If zero or less, enter -0-	18. <u>86,612.</u>
19. Enter the <b>larger</b> of line 17 or line 18	19. <u>86,612.</u>
20. Subtract line 17 from line 16. This amount is taxed at 0%  If lines 1 and 16 are the same, skip lines 21 through 41 and go to line 42. Otherwise, go to line 21.	20. <u></u>
21. Enter the <b>smaller</b> of line 1 or line 13	21. <u>123,149.</u>
22. Enter the amount from line 20 (if line 20 is blank, enter -0-)	22. <u>0.</u>
23. Subtract line 22 from line 21. If zero or less, enter -0-	23. <u>123,149.</u>
24. Enter: • \$406,750 if single; • \$228,800 if married filing separately; • \$457,600 if married filing jointly or qualifying widow(er); or • \$432,200 if head of household	24. <u>406,750.</u>
25. Enter the <b>smaller</b> of line 1 or line 24	25. <u>209,761.</u>
26. Add lines 19 and 20	26. <u>86,612.</u>
27. Subtract line 26 from line 25, if zero or less, enter -0-	27. <u>123,149.</u>
28. Enter the <b>smaller</b> of line 23 or line 27	28. <u>123,149.</u>
29. Multiply line 28 by 15% (.15)	29. <u>N/A</u>
30. Add lines 22 and 28	30. <u>123,149.</u>
If lines 1 and 30 are the same, skip lines 31 through 41 and go to line 42. Otherwise, go to line 31.	
31. Subtract line 30 from line 21	31. <u></u>
32. Multiply line 31 by 20% (.20)	32. <u>N/A</u>
If Schedule D, line 19, is zero or blank, skip lines 33 through 38 and go to line 39. Otherwise, go to line 33.	
33. Enter the <b>smaller</b> of line 9 above or Schedule D, line 19	33. <u></u>
34. Add lines 10 and 19	34. <u></u>
35. Enter the amount from line 1 above	35. <u></u>
36. Subtract line 35 from line 34. If zero or less, enter -0-	36. <u></u>
37. Subtract line 36 from line 33. If zero or less, enter -0-	37. <u></u>
38. Multiply line 37 by 25% (.25)	38. <u>N/A</u>
If Schedule D, line 18, is zero or blank, skip lines 39 through 41 and go to line 42. Otherwise, go to line 39.	

Minimum Tax Foreign Tax Credit on Exclusion Items 2014 Schedule D Tax Worksheet Recalculated - Continued

39. Add lines 19, 20, 28, 31, and 37 .....	39. _____
40. Subtract line 39 from line 1 .....	40. _____
41. Multiply line 40 by 28% (.28) .....	41. _____ N/A
42. Figure the tax on the amount on line 19. If the amount on line 19 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 19 is \$100,000 or more, use the Tax Computation Worksheet .....	42. _____ N/A
43. Add lines 29, 32, 38, 41, and 42 .....	43. _____ N/A
44. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet .....	44. _____ N/A
<b>45. Tax on all taxable income (including capital gains and qualified dividends).</b> Enter the smaller of line 43 or line 44 .....	45. _____ N/A

COPY

**6781**Department of the Treasury  
Internal Revenue Service  
Name(s) shown on tax return**Gains and Losses From Section 1256  
Contracts and Straddles**► Information about Form 6781 and its instructions is at [www.irs.gov/form6781](http://www.irs.gov/form6781).  
► Attach to your tax return.

OMB No. 1545-0644

**2015**Attachment  
Sequence No. 82Identifying number  
[Redacted]**GHISLAINE MAXWELL**Check all applicable boxes  
A  Mixed straddle election  
(see instructions).  
B  Straddle-by-straddle identification election  
C  Mixed straddle account election  
D  Net section 1256 contracts loss election**Part I Section 1256 Contracts Marked to Market**

	(a) Identification of account	(b) (Loss)	(c) Gain	
<b>1</b>	<b>FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.</b>			<b>25.</b>
<b>2</b>	Add the amounts on line 1 in columns (b) and (c) ..... <b>2</b>	( )		<b>25.</b>
<b>3</b>	Net gain or (loss). Combine line 2, columns (b) and (c) .....			<b>3</b>
<b>4</b>	Form 1099-B adjustments. See instructions and attach statement .....			<b>4</b>
<b>5</b>	Combine lines 3 and 4 .....			<b>5</b>
<b>Note:</b> If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions.				
<b>6</b>	If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be carried back. Enter the loss as a positive number. If you did not check box D, enter -0- .....			<b>6</b>
<b>7</b>	Combine lines 5 and 6 .....			<b>7</b>
<b>8</b>	<b>Short-term capital gain or (loss).</b> Multiply line 7 by 40% (.40). Enter here and include on line 4 of Schedule D or on Form 8949 (see instructions) .....			<b>8</b>
<b>9</b>	<b>Long-term capital gain or (loss).</b> Multiply line 7 by 60% (.60). Enter here and include on line 11 of Schedule D or on Form 8949 (see instructions) .....			<b>9</b>
				<b>15.</b>

**Part II Gains and Losses From Straddles.** Attach a separate statement listing each straddle and its components.**Section A - Losses From Straddles**

(a) Description of property	(b) Date entered into or acquired	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Loss. If column (e) is more than (d), enter difference. Otherwise, enter -0-	(g) Unrecognized gain on offsetting positions	(h) Recognized loss. If column (f) is more than (g), enter difference. Otherwise, enter -0-
	(c) Date closed out or sold					
	Mo. Day Yr.					
<b>10</b>						
<b>11a</b>	Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule D or on Form 8949 (see instructions) .....				<b>11a</b>	( )
<b>b</b>	Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule D or on Form 8949 (see instructions) .....				<b>11b</b>	( )

**Section B - Gains From Straddles**

(a) Description of property	(b) Date entered into or acquired	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Gain. If column (d) is more than (e), enter difference. Otherwise, enter -0-
	(c) Date closed out or sold			
	Mo. Day Yr.			
<b>12</b>				
<b>13a</b>	Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D or on Form 8949 (see instructions) .....			
<b>b</b>	Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule D or on Form 8949 (see instructions) .....			
<b>13b</b>				

**Part III Unrecognized Gains From Positions Held on Last Day of Tax Year.** Memo Entry Only (see instructions)

(a) Description of property	(b) Date acquired Mo. Day Yr.	(c) Fair market value on last business day of tax year	(d) Cost or other basis as adjusted	(e) Unrecognized gain. If column (c) is more than (d), enter difference. Otherwise, enter -0-
<b>14</b>				

## Passive Activity Loss Limitations

OMB No. 1545-1008

2015

Attachment  
Sequence No. 88Department of the Treasury  
Internal Revenue Service (99)► See separate instructions.  
► Attach to Form 1040 or Form 1041.► Information about Form 8582 and its instructions is available at [www.irs.gov/form8582](http://www.irs.gov/form8582).

Name(s) shown on return

Identifying number

GHISLAINE MAXWELL

## Part I 2015 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see

Special Allowance for Rental Real Estate Activities in the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))

1a

b Activities with net loss (enter the amount from Worksheet 1, column (b))

1b ( )

c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))

1c ( )

d Combine lines 1a, 1b, and 1c

1d

## Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)

2a ( )

b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)

2b ( )

c Add lines 2a and 2b

2c ( )

## All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))

3a

b Activities with net loss (enter the amount from Worksheet 3, column (b))

3b ( 118,351 )

c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))

3c ( 4,275 )

d Combine lines 3a, 3b, and 3c

3d -122,626.

4 Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used

4 -122,626.

If line 4 is a loss and:

- Line 1d is a loss, go to Part II.
- Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
- Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

**Caution:** If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

## Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4

5

6 Enter \$150,000. If married filing separately, see instructions

6

7 Enter modified adjusted gross income, but not less than zero (see instructions)

7

Note: If line 7 is greater than or equal to line 6, skip lines 8 and

9, enter -0- on line 10. Otherwise, go to line 8.

8

8 Subtract line 7 from line 6

9

9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions

10

10 Enter the smaller of line 5 or line 9

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

## Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions

11

12 Enter the loss from line 4

12

13 Reduce line 12 by the amount on line 10

13

14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13

14

## Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total

15

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

SEE STATEMENT 37

16

0.

**Caution:** The worksheets must be filed with your tax return. Keep a copy for your records.

---

**Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c (See instructions.)**

---

**Total. Enter on Form 8582, lines 1a, 1b, and 1c.**

---

**Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.)**

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
<b>Total. Enter on Form 8582, lines 2a and 2b</b>	►		

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

**Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.)**

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
SEE ATTACHED STATEMENT FOR WORKSHEET 3					
Total. Enter on Form 8582, lines 3a, 3b, and 3c	►	-118,351.	-4,275.		

SEE ATTACHED STATEMENT FOR WORKSHEET 3

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

**Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)**

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total					

Total

## Worksheet 5 - Allocation of Unallowed Losses (See instructions.)

SEE ATTACHED STATEMENT FOR WORKSHEET 5

**Total**

---

**Worksheet 6 - Allowed Losses (See instructions.)**

---

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
SEE ATTACHED	STATEMENT FOR WORKSHEET	6		
Total	►	122,626.	122,626.	

**Worksheet 7 - Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)**

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule	►				
<b>b</b> Net income from form or schedule	►				
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0-	►				
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule	►				
<b>b</b> Net income from form or schedule	►				
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0-	►				
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule	►				
<b>b</b> Net income from form or schedule	►				
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0-	►				
<b>Total</b>	►				

Form 8582 (2015)

## Passive Activity Credit Limitations

OMB No. 1545-1034

► See separate instructions.

► Attach to Form 1040 or 1041.

Attachment  
Sequence No. 89

Identifying number

GHI SLAINE MAXWELL

## Part I Passive Activity Credits

Caution: If you have credits from a publicly traded partnership, see *Publicly Traded Partnerships (PTPs)* in the instructions.

Credits From Rental Real Estate Activities With Active Participation (Other Than Rehabilitation Credits and Low-Income Housing Credits) (See Lines 1a through 1c in the instructions.)

1a Credits from Worksheet 1, column (a) .....

1a

b Prior year unallowed credits from Worksheet 1, column (b) .....

1b

c Add lines 1a and 1b .....

1c

Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990) (See Lines 2a through 2c in the instructions.)

2a Credits from Worksheet 2, column (a) .....

2a

b Prior year unallowed credits from Worksheet 2, column (b) .....

2b

c Add lines 2a and 2b .....

2c

Low-Income Housing Credits for Property Placed in Service After 1989 (See Lines 3a through 3c in the instructions.)

3a Credits from Worksheet 3, column (a) .....

3a

b Prior year unallowed credits from Worksheet 3, column (b) .....

3b

c Add lines 3a and 3b .....

3c

All Other Passive Activity Credits (See Lines 4a through 4c in the instructions.)

4a Credits from Worksheet 4, column (a) .....

4a

29.

b Prior year unallowed credits from Worksheet 4, column (b) .....

4b

c Add lines 4a and 4b .....

4c

29.

5 Add lines 1c, 2c, 3c, and 4c .....

5

29.

6 Enter the tax attributable to net passive income (see instructions) .....

6

0.

7 Subtract line 6 from line 5. If line 6 is more than or equal to line 5, enter -0- and see instructions .....

7

29.

Note: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II, III, or IV. Instead, go to line 37.

## Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Complete this part only if you have an amount on line 1c. Otherwise, go to Part III.

8 Enter the smaller of line 1c or line 7 .....

8

9 Enter \$150,000. If married filing separately, see instructions .....

9

10 Enter modified adjusted gross income, but not less than zero (see instructions).

10

If line 10 is equal to or more than line 9, skip lines 11

through 15 and enter -0- on line 16 .....

11

11 Subtract line 10 from line 9 .....

12

12 Multiply line 11 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see instructions .....

13a Enter the amount, if any, from line 10 of Form 8582 .....

13a

b Enter the amount, if any, from line 14 of Form 8582 .....

13b

c Add lines 13a and 13b .....

13c

14 Subtract line 13c from line 12 .....

14

15 Enter the tax attributable to the amount on line 14 (see instructions) .....

15

16 Enter the smaller of line 8 or line 15 .....

16

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8582-CR (Rev. 01-2012)

**Part III Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990)**

*Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.*

17	Enter the amount from line 7	17
18	Enter the amount from line 16	18
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V	19
20	Enter the <b>smaller</b> of line 2c or line 19	20
21	Enter \$250,000. If married filing separately, see instructions to find out if you can skip lines 21 through 26	21
22	Enter modified adjusted gross income, but not less than zero. (See instructions for line 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	22
23	Subtract line 22 from line 21	23
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see instructions	24
25a	Enter the amount, if any, from line 10 of Form 8582	25a
b	Enter the amount, if any, from line 14 of Form 8582	25b
c	Add lines 25a and 25b	25c
26	Subtract line 25c from line 24	26
27	Enter the tax attributable to the amount on line 26 (see instructions)	27
28	Enter the amount, if any, from line 18	28
29	Subtract line 28 from line 27	29
30	Enter the <b>smaller</b> of line 20 or line 29	30

**Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989**

*Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V.*

31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7	31
32	Enter the amount from line 30	32
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33
34	Enter the <b>smaller</b> of line 3c or line 33	34
35	Tax attributable to the remaining special allowance (see instructions)	35
36	Enter the <b>smaller</b> of line 34 or line 35	36

**Part V Passive Activity Credit Allowed**

37	<b>Passive Activity Credit Allowed.</b> Add lines 6, 16, 30, and 36. See instructions to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one activity. If you have any credits from a publicly traded partnership, see <b>Publicly Traded Partnerships (PTPs)</b> in the instructions.	37	0.
----	--	----	----

**Part VI Election To Increase Basis of Credit Property**

38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the property, check this box. See instructions	► <input type="checkbox"/>
39	Name of passive activity disposed of ►	
40	Description of the credit property for which the election is being made ►	
41	Amount of unallowed credit that reduced your basis in the property ► \$	

Form 8582

**ALTERNATIVE MINIMUM TAX**  
**Passive Activity Loss Limitations**

OMB No. 1545-1008

2015

Attachment  
Sequence No. 88Department of the Treasury  
Internal Revenue Service (99)► See separate instructions.  
► Attach to Form 1040 or Form 1041.

Name(s) shown on return

Identifying number

GHISLAINE MAXWELL

**Part I 2015 Passive Activity Loss** Caution: Complete Worksheets 1, 2, and 3 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see**Special Allowance for Rental Real Estate Activities** in the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))

1a

b Activities with net loss (enter the amount from Worksheet 1, column (b))

1b ( )

c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))

1c ( )

d Combine lines 1a, 1b, and 1c

1d

**Commercial Revitalization Deductions From Rental Real Estate Activities**

2a Commercial revitalization deductions from Worksheet 2, column (a)

2a ( )

b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)

2b ( )

c Add lines 2a and 2b

2c ( )

**All Other Passive Activities**

3a Activities with net income (enter the amount from Worksheet 3, column (a))

3a

b Activities with net loss (enter the amount from Worksheet 3, column (b))

3b ( 118,351 )

c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))

3c ( 4,275 )

d Combine lines 3a, 3b, and 3c

3d -122,626.

4 Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used

4 -122,626.

If line 4 is a loss and:

- Line 1d is a loss, go to Part II.
- Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
- Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

**Caution:** If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4

5

6 Enter \$150,000. If married filing separately, see instructions

6

7 Enter modified adjusted gross income, but not less than zero (see instructions)

7

**Note:** If line 7 is greater than or equal to line 6, skip lines 8 and

9, enter -0- on line 10. Otherwise, go to line 8.

8

8 Subtract line 7 from line 6

9

9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see instructions

10

10 Enter the smaller of line 5 or line 9

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

**Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities****Note:** Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions

11

12 Enter the loss from line 4

12

13 Reduce line 12 by the amount on line 10

13

14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13

14

**Part IV Total Losses Allowed**

15 Add the income, if any, on lines 1a and 3a and enter the total

15

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

SEE STATEMENT 44

16

0.

## ALTERNATIVE MINIMUM TAX

Form 8582 (2015) GHISLAINE MAXWELL

Page 2

**Caution:** The worksheets must be filed with your tax return. Keep a copy for your records.

**Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c (See instructions.)**

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
<b>Total. Enter on Form 8582, lines 1a, 1b, and 1c</b>	►				

**Total. Enter on Form 8582, lines 1a, 1b, and 1c.**

**Worksheet 2 - For Form 8582. Lines 2a and 2b (See instructions.)**

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
<b>Total. Enter on Form 8582, lines 2a and 2b</b>	►		

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

---

**Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.)**

Name of activity	Current year		Prior years		Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss	
SEE ATTACHED STATEMENT FOR WORKSHEET 3						
Total. Enter on Form 8582, lines 3a, 3b, and 3c	►	-118,351.	-4,275.			

SEE ATTACHED STATEMENT FOR WORKSHEET 3

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

-118,351. -4,275.

**Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)**

Worksheet 1 – Use this Worksheet if an amount is shown on Form 8000, line 10 or 11 (see instructions.)					
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total	►				

### Total

**Worksheet 5 - Allocation of Unallowed Losses (See instructions.)**

SEE ATTACHED STATEMENT FOR WORKSHEET 5

### Total

122,626.

## ALTERNATIVE MINIMUM TAX

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**Worksheet 6 - Allowed Losses (See instructions.)**

**Worksheet 7 - Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)**

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule	►				
<b>b</b> Net income from form or schedule	►				
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0-	►				
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule	►				
<b>b</b> Net income from form or schedule	►				
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0-	►				
<b>Form or schedule and line number to be reported on (see instructions):</b>					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule	►				
<b>b</b> Net income from form or schedule	►				
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0-	►				
<b>Total</b>	►				

Form 8582 (2015)

## Statement of Specified Foreign Financial Assets

OMB No. 1545-2195

2015

Department of the Treasury  
Internal Revenue Service► Information about Form 8938 and its separate instructions is at [www.irs.gov/form8938](http://www.irs.gov/form8938).

► Attach to your tax return.

For calendar year 2015 or tax year beginning

and ending

Attachment  
Sequence No. 175If you have attached continuation statements, check here 

Number of continuation statements

3

Name(s) shown on return

TIN

GHISLAINE MAXWELL

## Part I Foreign Deposit and Custodial Accounts Summary

1 Number of Deposit Accounts (reported on Form 8938) .....	►	5
2 Maximum Value of All Deposit Accounts .....	\$	2,488,652.
3 Number of Custodial Accounts (reported on Form 8938) .....	►	
4 Maximum Value of All Custodial Accounts .....	\$	
5 Were any foreign deposit or custodial accounts closed during the tax year? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

## Part II Other Foreign Assets Summary

1 Number of Foreign Assets (reported on Form 8938) .....	►	2
2 Maximum Value of All Assets .....	\$	
3 Were any foreign assets acquired or sold during the tax year? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

## Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions)

(a) Asset Category	(b) Tax item	(c) Amount reported on form or schedule	Where reported	
			(d) Form and line	(e) Schedule and line
1 Foreign Deposit and Custodial Accounts	1a Interest	\$ 22,255.	1040/LINE 8A	SCH B, LN 1
	1b Dividends	\$		
	1c Royalties	\$		
	1d Other income	\$		
	1e Gains (losses)	\$		
	1f Deductions	\$		
	1g Credits	\$ 3,637.	1040/LINE 48	
2 Other Foreign Assets	2a Interest	\$		
	2b Dividends	\$		
	2c Royalties	\$		
	2d Other income	\$		
	2e Gains (losses)	\$		
	2f Deductions	\$		
	2g Credits	\$		

## Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

1. Number of Forms 3520 .....	2. Number of Forms 3520-A .....	3. Number of Forms 5471 .....
4. Number of Forms 8621 .....	5. Number of Forms 8865 .....	

## Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary (see instructions)

If you have more than one account to report, attach a continuation statement for each additional account (see instructions).

1 Type of account	<input checked="" type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation [REDACTED]
3 Check all that apply	a <input type="checkbox"/> Account opened during tax year c <input type="checkbox"/> Account jointly owned with spouse	b <input type="checkbox"/> Account closed during tax year d <input checked="" type="checkbox"/> No tax item reported in Part III with respect to this asset
4 Maximum value of account during tax year .....		\$ 47,524.
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? .....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 If you answered "Yes" to line 5, complete all that apply.		
(a) Foreign currency in which account is maintained	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service

UNITED KINGDOM, POUND

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

Form 8938 (2015)

**Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary**  
(see instructions) (continued)

7a Name of financial institution in which account is maintained

b Reserved

**BARCLAYS**

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

**8 WEST HALKIN STREET**

9 City or town, state or province, and country (including postal code)

**LONDON SW1X 8JE UNITED KINGDOM**

**Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary** (see instructions)

**Note.** If you reported specified foreign financial assets on Forms 3520, 3520-A, 5471, 8621, or 8865, you do not have to include the assets on Form 8938. You must complete Part IV. See instructions.

If you have more than one asset to report, attach a continuation statement for each additional asset (see instructions).

1 Description of asset

**WEALTH AT WORK LIMITED - PENSION FUND**

2 Identifying number or other designation

3 Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates.

a Date asset acquired during tax year, if applicable .....

b Date asset disposed of during tax year, if applicable .....

c  Check if asset jointly owned with spouse d  Check if no tax item reported in Part III with respect to this asset

4 Maximum value of asset during tax year (check box that applies)

a  \$0 - \$50,000 b  \$50,001 - \$100,000 c  \$100,001 - \$150,000 d  \$150,001 - \$200,000

e If more than \$200,000, list value .....

5 Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars?  Yes  No

6 If you answered "Yes" to line 5, complete all that apply.

(a) Foreign currency in which asset is denominated	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
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**UNITED KINGDOM, POUND**

**.675000000**

7 If asset reported on line 1 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.

a Name of foreign entity  Reserved

c Type of foreign entity (1)  Partnership (2)  Corporation (3)  Trust (4)  Estate

d Mailing address of foreign entity. Number, street, and room or suite no.

e City or town, state or province, and country (including postal code)

8 If asset reported on line 1 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.

**Note.** If this asset has more than one issuer or counterparty, attach a continuation statement with the same information for each additional issuer or counterparty (see instructions).

a Name of issuer or counterparty **WEALTH AT WORK LIMITED**

Check if information is for  Issuer  Counterparty

b Type of issuer or counterparty (1)  Individual (2)  Partnership (3)  Corporation (4)  Trust (5)  Estate

c Check if issuer or counterparty is a  U.S. person  Foreign person

d Mailing address of issuer or counterparty. Number, street, and room or suite no.

**5 TEMPLE SQUARE, TEMPLE STREET**

e City or town, state or province, and country (including postal code)

**LIVERPOOL L2 5RH UNITED KINGDOM**

GHISLAINE MAXWELL

**Part V Foreign Deposit and Custodial Accounts (see instructions)**

1 Type of account	<input checked="" type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset		
4 Maximum value of account during tax year \$ 1,164,654.		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply. (1) Foreign currency in which account is maintained (2) Foreign currency exchange rate used to convert to U.S. dollars (3) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service		
UNITED KINGDOM, POUND		

7a Name of financial institution in which account is maintained b Reserved

**CATER ALLEN PRIVATE BANK**

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

**9 NELSON STREET**

9 City or town, province or state, and country (including postal code)

**BRADFORD BD1 5AN UNITED KINGDOM**

1 Type of account	<input checked="" type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset		
4 Maximum value of account during tax year \$ 304,665.		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply. (1) Foreign currency in which account is maintained (2) Foreign currency exchange rate used to convert to U.S. dollars (3) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service		
UNITED KINGDOM, POUND		

7a Name of financial institution in which account is maintained b Reserved

**BARCLAYS**

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

**8 WEST HALKIN STREET**

9 City or town, province or state, and country (including postal code)

**LONDON SW1X 8JE UNITED KINGDOM**

1 Type of account	<input checked="" type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input checked="" type="checkbox"/> No tax item reported in Part III with respect to this asset		
4 Maximum value of account during tax year \$ 55,668.		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply. (1) Foreign currency in which account is maintained (2) Foreign currency exchange rate used to convert to U.S. dollars (3) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service		
UNITED KINGDOM, POUND		

7a Name of financial institution in which account is maintained b Reserved

**WEALTH AT WORK LIMITED**

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

**5 TEMPLE SQUARE, TEMPLE STREET**

9 City or town, province or state, and country (including postal code)

**LIVERPOOL L2 5RH UNITED KINGDOM**

GHISLAINE MAXWELL

**Part V Foreign Deposit and Custodial Accounts (see instructions)**

1 Type of account	<input checked="" type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset		
4 Maximum value of account during tax year \$ 916,141.		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply. (1) Foreign currency in which account is maintained (2) Foreign currency exchange rate used to convert to U.S. dollars (3) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service		
UNITED KINGDOM, POUND		

7a Name of financial institution in which account is maintained

b Reserved

**BARCLAYS**

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

**8 WEST HALKIN STREET**

9 City or town, province or state, and country (including postal code)

**LONDON SW1X 8JE UNITED KINGDOM**

1 Type of account	<input type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset		
4 Maximum value of account during tax year \$		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply. (1) Foreign currency in which account is maintained (2) Foreign currency exchange rate used to convert to U.S. dollars (3) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service		

7a Name of financial institution in which account is maintained

b Reserved

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

9 City or town, province or state, and country (including postal code)

1 Type of account	<input type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset		
4 Maximum value of account during tax year \$		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply. (1) Foreign currency in which account is maintained (2) Foreign currency exchange rate used to convert to U.S. dollars (3) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service		

7a Name of financial institution in which account is maintained

b Reserved

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

9 City or town, province or state, and country (including postal code)

**GHISLAINE MAXWELL****Part VI Other Foreign Assets**

**Note.** If you reported specified foreign financial assets on Forms 3520, 3520-A, 5471, 8621, or 8865, you do not have to include the assets on Form 8938. You must complete Part IV. See instructions.

If you have more than one asset to report, attach a continuation sheet with the same information for each additional asset (see instructions).

1 Description of asset	2 Identifying number or other designation
<b>INVESTMENT IN GNAT &amp; COMPANY LTD</b>	

3 Complete all that apply	
a Date asset acquired during tax year, if applicable	
b Date asset disposed of during tax year, if applicable	
c <input type="checkbox"/> Check if asset jointly owned with spouse	d <input type="checkbox"/> Check if no tax item reported in Part III with respect to this asset

4 Maximum value of asset during tax year (check box that applies)	
a <input type="checkbox"/> \$0 - \$50,000	b <input type="checkbox"/> \$50,001 - \$100,000
c <input type="checkbox"/> \$100,001 - \$150,000	d <input type="checkbox"/> \$150,001 - \$200,000

e If more than \$200,000, list value	\$
--------------------------------------	----

5 Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
---	---	-----------------------------

6 If you answered "Yes" to line 5, complete all that apply.	
(1) Foreign currency in which asset is denominated	(2) Foreign currency exchange rate used to convert to U.S. dollars

(3) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service

**UNITED KINGDOM, POUND**

7 If asset reported on line 1 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.

a Name of foreign entity	b Reserved
c Type of foreign entity	(1) <input type="checkbox"/> Partnership (2) <input type="checkbox"/> Corporation (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> Estate
d Mailing address of foreign entity. Number, street, and room or suite no.	

e City or town, state or province, and country (including postal code)

8 If asset reported on line 1 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.

**Note.** If this asset has more than one issuer or counterparty, attach a continuation sheet with the same information for each additional issuer or counterparty (see instructions).

a Name of issuer or counterparty	<b>GNAT &amp; COMPANY LTD</b>
Check if information is for	<input checked="" type="checkbox"/> Issuer <input type="checkbox"/> Counterparty
b Type of issuer or counterparty	
(1) <input type="checkbox"/> Individual	(2) <input type="checkbox"/> Partnership
(3) <input type="checkbox"/> Corporation	(4) <input type="checkbox"/> Trust
c Check if issuer or counterparty is a	(5) <input type="checkbox"/> Estate
<input type="checkbox"/> U.S. person	<input checked="" type="checkbox"/> Foreign person
d Mailing address of issuer or counterparty. Number, street, and room or suite no.	
e City or town, province or state, and country (including postal code)	

NAME

GHISLAINE MAXWELL

[REDACTED]

INCOME TYPE	TOTAL	U.S.	GENERAL	FOREIGN PASSIVE
Compensation				
Dividends/Distributions	182,240.	182,240.		
Interest	STMT 45 63,088.	40,833.		22,255.
Capital Gains	220,491.	220,491.		
Business/Profession				
Rent/Royalty	9.	9.		
State/Local Refunds				
Partnership/S Corporation	121.	121.		
Trust/Estate				
Other Income	5,310.	-45,966.	19.	51,257.
Gross Income	<u>471,259.</u>	<u>397,728.</u>	<u>19.</u>	<u>73,512.</u>
Less:				
Section 911 Exclusion				
Capital Losses	223,491.	223,491.		
Capital Gains Tax Adjustment				
Total Income - Form 1116	<u>247,768.</u>	<u>174,237.</u>	<u>19.</u>	<u>73,512.</u>
Deductions:				
Business/Profession Expenses	545.	545.		
Rent/Royalty Expenses	6.	6.		
Partnership/S Corporation Losses	3,721.	3,721.		
Trust/Estate Losses				
Capital Losses				
Non-capital Losses				
Individual Retirement Account				
Moving Expenses				
Self-employment Tax Deduction				
Self-employment Health Insurance				
Keogh Contributions				
Alimony				
Forfeited Interest				
Foreign Housing Deduction				
Other Adjustments		-98.		98.
Capital Gains Tax Adjustment				
Total Deductions	<u>4,272.</u>	<u>4,174.</u>		<u>98.</u>
Adjusted Gross Income	<u>243,496.</u>	<u>170,063.</u>	<u>19.</u>	<u>73,414.</u>
Less Itemized Deductions:				
Specifically Allocated	5,353.	5,353.		
Home Mortgage Interest				
Other Interest	17.	17.		
Ratably Allocated	160,355.	135,333.	7.	25,015.
Total Adjustments to Adjusted Gross Income	<u>165,725.</u>	<u>140,703.</u>	<u>7.</u>	<u>25,015.</u>
Taxable Income Before Exemptions	<u>77,771.</u>	<u>29,360.</u>	<u>12.</u>	<u>48,399.</u>

**Form 1116****Allocation of Itemized Deductions**

NAME

**GHISLAINE MAXWELL**

	Total Itemized Deductions	Itemized Deductions After Sec. 68 Reduction	Form 1116		
			Specifically U.S.	Specifically Foreign	Ratable
Taxes .....	119,703.	119,703.			119,703.
Interest - Not Including Investment Interest .....					
Contributions .....	5,353.	5,353.	5,353.		
Miscellaneous Deductions Subject to 2% .....	40,652.	40,652.			40,652.
Other Miscellaneous Deductions - Not Including Gambling Losses .....					
Foreign Adjustment .....					
Total Itemized Deductions Subject to Sec. 68 .....	165,708.	165,708.			
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental .....					
Investment Interest .....	17.	17.	17.		
Casualty Losses .....					
Gambling Losses .....					
Foreign Adjustment .....					
Total Itemized Deductions .....	165,725.				
Total Allowed on Schedule A .....		165,725.	5,370.		160,355.

NAME

GHISLAINE MAXWELL

Foreign Income Category	GENERAL LIMITATION INCOME					
Regular	2010	2011	2012	2013	2014	2015
1. Foreign tax paid/accrued .....						2.
2. FTC carryback to 2015 for amended returns .....						
3. Reduction in foreign taxes .....						
4. Foreign tax available .....						2.
5. Maximum credit allowable .....						1.
6. Unused foreign tax (+) or excess of limit (-) .....						1.
7. Foreign tax carryback .....						
8. Foreign tax carryforward .....						
9. Foreign tax or excess limit remaining .....						1.
Total foreign taxes from all available years to be carried to next year .....						1.
2005	2006	2007	2008	2009		
1. Foreign tax paid/accrued .....						
2. FTC carryback to 2015 for amended returns .....						
3. Reduction in foreign taxes .....						
4. Foreign tax available .....						
5. Maximum credit allowable .....						
6. Unused foreign tax (+) or excess of limit (-) .....						
7. Foreign tax carryback .....						
8. Foreign tax carryforward .....						
9. Foreign tax or excess limit remaining .....						

NAME

GHISLAINE MAXWELL

Foreign Income Category	GENERAL LIMITATION INCOME					
AMT	2010	2011	2012	2013	2014	2015
1. Foreign tax paid/accrued						2.
2. FTC carryback to 2015 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						2.
5. Maximum credit allowable						3.
6. Unused foreign tax ( + ) or excess of limit ( - )						-1.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining						-1.
Total foreign taxes from all available years to be carried to next year						
	2005	2006	2007	2008	2009	
1. Foreign tax paid/accrued						
2. FTC carryback to 2015 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						
5. Maximum credit allowable						
6. Unused foreign tax ( + ) or excess of limit ( - )						
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining						

NAME

GHISLAINE MAXWELL

[REDACTED]

## Foreign Income Category

## PASSIVE INCOME

## Regular

	2010	2011	2012	2013	2014	2015
1. Foreign tax paid/accrued						8,307.
2. FTC carryback to 2015 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						8,307.
5. Maximum credit allowable						4,419.
6. Unused foreign tax (+) or excess of limit (-)					-1,459.	3,888.
7. Foreign tax carryback					1,459.	1,459.
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining						2,429.
Total foreign taxes from all available years to be carried to next year						2,429.

1. Foreign tax paid/accrued	2005	2006	2007	2008	2009
2. FTC carryback to 2015 for amended returns					
3. Reduction in foreign taxes					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax (+) or excess of limit (-)					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Foreign tax or excess limit remaining					

NAME

GHISLAINE MAXWELL

[REDACTED]

Foreign Income Category	PASSIVE INCOME					
AMT	2010	2011	2012	2013	2014	2015
1. Foreign tax paid/accrued						8,307.
2. FTC carryback to 2015 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						8,307.
5. Maximum credit allowable						11,389.
6. Unused foreign tax (+) or excess of limit (-)					-18,342.	-3,082.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining					-18,342.	-3,082.
Total foreign taxes from all available years to be carried to next year						

	2005	2006	2007	2008	2009
1. Foreign tax paid/accrued					
2. FTC carryback to 2015 for amended returns					
3. Reduction in foreign taxes					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax (+) or excess of limit (-)					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Foreign tax or excess limit remaining					

## Form 1116

## Pro Rata Share of Allocated Losses

Allocation of Losses from Other Categories				
INCOME CLASSIFICATION	INCOME	LOSS	ALLOCATED LOSS	LOSS NOT ALLOCATED
Passive income	48,399.			
Income re-sourced by treaty				
General limitation income	12.			
Totals	48,411.			

Allocation of U.S. Losses				
INCOME CLASSIFICATION	REMAINING INCOME	U.S. LOSS	ALLOCATED LOSS	LOSS NOT ALLOCATED
Passive income	48,399.			
Income re-sourced by treaty				
General limitation income	12.			
Totals	48,411.			

Recapture of Prior Year Overall Foreign Loss				
INCOME CLASSIFICATION	REMAINING INCOME	OVERALL PRIOR YEAR LOSS	RECAPTURED LOSS	LOSS NOT RECAPTURED
Passive income	48,399.			
Income re-sourced by treaty				
General limitation income	12.			
Totals	48,411.			
Recapture percentage				

Recapture of Separate Limitation Loss Accounts				
INCOME CLASSIFICATION	REMAINING INCOME	PRIOR YEAR LOSS	RECHARACTERIZED LOSS	LOSS NOT RECHARACTERIZED
Passive income	48,399.			
Income re-sourced by treaty				
General limitation income	12.			
Totals	48,411.			

Recapture of Overall Domestic Loss Prior to 2012				
INCOME CLASSIFICATION	U.S. TAXABLE INCOME LIMIT	PRIOR YEAR LOSS	RECAPTURED LOSS	LOSS NOT RECAPTURED
Passive income				
Income re-sourced by treaty				
General limitation income				
Totals				

Recapture of Overall Domestic Loss				
INCOME CLASSIFICATION	U.S. TAXABLE INCOME LIMIT	PRIOR YEAR LOSS	RECAPTURED LOSS	LOSS NOT RECAPTURED
Passive income	14,680.	19,289.	14,680.	4,609.
Income re-sourced by treaty				
General limitation income				
Totals	14,680.	19,289.	14,680.	4,609.

Adjustments to Form 1116, Line 15						
INC. CLASSIFICATION	OTHER CATEGORIES	U.S. LOSSES	PRIOR YEAR OVERALL	RECAPTURE OF LOSS ACCOUNTS	DOMESTIC RECAPTURE	FORM 1116, LINE 16
Passive					14,680.	14,680.
Re-sourced by treaty						
General limitation						

FORM 1040

STATE AND LOCAL INCOME TAX REFUNDS

STATEMENT 1

2014

2013

2012

NEW YORK

GROSS STATE/LOCAL INC TAX REFUNDS 17,622.  
LESS: TAX PAID IN FOLLOWING YEAR

NET TAX REFUNDS NEW YORK 17,622.

TOTAL NET TAX REFUNDS 17,622.

COPY

FORM 1040	TAXABLE STATE AND LOCAL INCOME TAX REFUNDS	STATEMENT	2
	2014	2013	2012
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.	17,622.		
LESS:REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION	17,622.		
1 NET REFUNDS FOR RECALCULATION			
2 TOTAL ITEMIZED DEDUCTIONS BEFORE PHASEOUT	175,469.		
3 DEDUCTION NOT SUBJ TO PHASEOUT	1.		
4 NET REFUNDS FROM LINE 1			
5 LINE 2 MINUS LINES 3 AND 4	175,468.		
6 MULT LN 5 BY APPL SEC. 68 PCT	140,374.		
7 PRIOR YEAR AGI	233,510.		
8 ITEM. DED. PHASEOUT THRESHOLD	254,200.		
9 SUBTRACT LINE 8 FROM LINE 7 (IF ZERO OR LESS, SKIP LINES 10 THROUGH 15, AND ENTER AMOUNT FROM LINE 1 ON LINE 16)	-20,690.		
10 MULT LN 9 BY APPL SEC. 68 PCT			
11 ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10)			
12 ITEM DED. NOT SUBJ TO PHASEOUT			
13A TOTAL ADJ. ITEMIZED DEDUCTIONS			
13B PRIOR YR. STD. DED. AVAILABLE			
14 PRIOR YR. ALLOWABLE ITEM. DED.			
15 SUBTRACT THE GREATER OF LINE 13A OR LINE 13B FROM LINE 14			
16 TAXABLE REFUNDS (LESSER OF LINE 15 OR LINE 1)			
17 ALLOWABLE PRIOR YR. ITEM. DED.	175,469.		
18 PRIOR YEAR STD. DED. AVAILABLE	6,200.		
19 SUBTRACT LINE 18 FROM LINE 17	169,269.		
20 LESSER OF LINE 16 OR LINE 19			
21 PRIOR YEAR TAXABLE INCOME	54,091.		
22 AMOUNT TO INCLUDE ON FORM 1040, LINE 10 * IF LINE 21 IS -0- OR MORE, USE AMOUNT FROM LINE 20 * IF LINE 21 IS A NEGATIVE AMOUNT, NET LINES 20 AND 21			0.
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2012			
TOTAL TO FORM 1040, LINE 10			0.

FORM 1040

TAX-EXEMPT INTEREST

STATEMENT 3

NAME OF PAYER	AMOUNT
UBS - Y1 23574 - T/E	5,672.
TOTAL TO FORM 1040, LINE 8B	5,672.

FORM 1040	QUALIFIED DIVIDENDS	STATEMENT	4
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NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
UBS - Y1 23568	40,340.	40,340.
UBS - Y1 23570	21,805.	88.
UBS - Y1 23571	33,471.	7,817.
UBS - Y1 23574	20,493.	20,109.
UBS - Y1 23572	54,713.	50,817.
FROM K-1 - THE BLACKSTONE GROUP, LP	126.	53.
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	681.	327.
TOTAL INCLUDED IN FORM 1040, LINE 9B		119,551.

SCHEDULE A	MISCELLANEOUS DEDUCTIONS SUBJECT TO FLOOR	STATEMENT	5
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DESCRIPTION	AMOUNT
UBS Y1-23574	7,744.
UBS Y1-23571	5,074.
UBS Y1-23568	8,111.
UBS Y1-23570	4,832.
UBS Y1-23571	8,488.
FROM K-1 - THE BLACKSTONE GROUP, LP	21.
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	252.
TOTAL TO SCHEDULE A, LINE 23	34,522.

SCHEDULE A	STATE AND LOCAL INCOME TAXES	STATEMENT 6
DESCRIPTION	AMOUNT	
NEW YORK 2ND QTR ESTIMATE PAYMENTS	2,000.	
NEW YORK 3RD QTR ESTIMATE PAYMENTS	5,000.	
NEW YORK PRIOR YEAR OVERPAYMENT APPLIED	17,571.	
NEW YORK PRIOR YEAR BALANCE DUE AND EXTENSION PAYMENTS	10,000.	
TOTAL TO SCHEDULE A, LINE 5	34,571.	

SCHEDULE A	INVESTMENT INTEREST	STATEMENT 7
DESCRIPTION	AMOUNT	
FROM K-1 - THE BLACKSTONE GROUP, LP	17.	
TOTAL TO SCHEDULE A, LINE 14	17.	

SCHEDULE A	MEDICAL AND DENTAL EXPENSES	STATEMENT 8
DESCRIPTION	AMOUNT	
DOCTORS, DENTISTS, ETC.	6,955.	
TOTAL TO SCHEDULE A, LINE 1	6,955.	

SCHEDULE B	INTEREST INCOME	STATEMENT 9
NAME OF PAYER	AMOUNT	
BARCLAYS	16,736.	
CATER ALLEN PRIVATE BANK	5,519.	
IMPUTED INTEREST - LOAN FROM TERRAMAR PROJECT	1,515.	
UBS - Y1 23568	6.	
UBS - Y1 23571	1.	
UBS - Y1 23574 - INTEREST	37,673.	
UBS - Y1 23574 - BOND PREMIUM	-51.	
UBS - Y1 23574 - T/E	10,000.	
UBS - Y1 23575	12.	
UBS - Y1 23572	7.	
UBS - Y1 23680	17.	
FROM K-1 - THE BLACKSTONE GROUP, LP	416.	

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FROM K-1 - CARGOMETRICS TECHNOLOGIES LLC	75.
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	269.
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	893.
 TOTAL TO SCHEDULE B, LINE 1	 73,088.

SCHEDULE B	TAX-EXEMPT INTEREST	STATEMENT 10
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NAME OF PAYER	AMOUNT
UBS - Y1 23574 - T/E	5,672.
 TOTAL TAX-EXEMPT INTEREST TO SCHEDULE B, LINE 1	 5,672.

SCHEDULE B	AMORTIZABLE BOND PREMIUM ADJUSTMENT	STATEMENT 11
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NAME OF PAYER	AMOUNT
UBS - Y1 23574 - T/E	4,328.
 TOTAL ABP ADJUSTMENT TO SCHEDULE B, LINE 1	 4,328.

SCHEDULE D	NET SHORT-TERM GAIN OR LOSS FROM FORMS 6252, 4684, 6781 AND 8824	STATEMENT 12
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DESCRIPTION OF PROPERTY	GAIN OR LOSS
FORM 6781, PART I	10.
 TOTAL TO SCHEDULE D, PART I, LINE 4	 10.

SCHEDULE D	NET LONG-TERM GAIN OR LOSS FROM FORMS 4797, 2439, 6252, 4684, 6781 AND 8824	STATEMENT 13
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DESCRIPTION OF PROPERTY	GAIN OR LOSS	28% GAIN
FORM 6781, PART I	15.	
FORM 4797	347.	
 TOTAL TO SCHEDULE D, PART II, LINE 11	 362.	

SCHEDULE D	NET SHORT-TERM GAIN OR LOSS FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES	STATEMENT 14
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DESCRIPTION OF ACTIVITY	GAIN OR LOSS
THE BLACKSTONE GROUP, LP	-7.
TOTAL TO SCHEDULE D, PART I, LINE 5	-7.

SCHEDULE D	NET LONG-TERM GAIN OR LOSS FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES	STATEMENT 15
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DESCRIPTION OF ACTIVITY	GAIN OR LOSS	28% GAIN
THE BLACKSTONE GROUP, LP	1,471.	
ALPHAKEYS MILLENNIUM FUND, L.L.C.	6.	
TOTAL TO SCHEDULE D, PART II, LINE 12	1,477.	

SCHEDULE D	CAPITAL GAIN DISTRIBUTIONS	STATEMENT 16
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NAME OF PAYER	TOTAL CAPITAL GAIN	28% GAIN
UBS - Y1 23571	8,868.	
UBS - Y1 23575	629.	
TOTALS TO SCHEDULE D, LINE 13	9,497.	

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 17
1. ENTER THE AMOUNT FROM FORM 1040, LINE 41		77,771.
2. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT		3,000.
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-		80,771.
4. ENTER THE SMALLER OF LINE 2 OR LINE 3		3,000.
5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT		179,183.
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15		
7. ADD LINES 4 AND 6		3,000.
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-		176,183.
9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT		6,119,108.
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7		
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-		
12. ADD LINES 10 AND 11		
13. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0-		6,119,108.

SCHEDULE E	OTHER EXPENSES	STATEMENT 18
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## THE BLACKSTONE GROUP, LP - ROYALTY

DESCRIPTION	AMOUNT
ROYALTY INCOME DEDUCTION - THE BLACKSTONE GROUP, LP	6.
TOTAL TO SCHEDULE E, PAGE 1, LINE 19	6.

FORM 1116	EXPENSES DIRECTLY ALLOCABLE TO FOREIGN INCOME	STATEMENT 19
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DESCRIPTION	COUNTRY	AMOUNT
OTHER EXPENSES DIRECTLY ALLOCATED	OTHER COUNTRIES	98.
TOTAL TO FORM 1116, PART I, LINE 2		98.

FORM 3800

RESEARCH CREDIT LIMITATION

STATEMENT 20

CARGOMETRICS TECHNOLOGIES LLC

1 TAXABLE INCOME ATTRIBUTABLE TO THIS ACTIVITY	75.
2 TAXABLE INCOME FROM FORM 1040, LINE 43	73,771.
3 DIVIDE LINE 1 BY LINE 2	.001016660
4 NET INCOME TAX FROM FORM 3800, LINE 11	28,633.
5 TAX LIABILITY LIMITATION (LINE 3 X LINE 4)	29.
A CURRENT YEAR CREDIT	4,569.
B CREDIT CARRIED FORWARD FROM PRIOR YEAR(S)	
C TOTAL CREDITS	4,569.
CURRENT YEAR CREDIT (LESSER OF 5A OR 5 - 5B)	29.

FORM 6251

PASSIVE ACTIVITIES

STATEMENT 21

NAME OF ACTIVITY	FORM	NET INCOME (LOSS)		
		AMT	REGULAR	ADJUSTMENT
THE BLACKSTONE GROUP, LP - PTP	SCH E	-9.	-19.	10.
TOTAL TO FORM 6251, LINE 19				10.

1 ENTER: \$53,600 IF SINGLE OR HEAD OF HOUSEHOLD; \$83,400 IF  
MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$41,700  
IF MARRIED FILING SEPARATELY 53,600.

2 ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME  
(AMTI) FORM 6251, LINE 28 238,136.

3 ENTER: \$119,200 IF SINGLE OR HEAD OF HOUSEHOLD;  
\$158,900 IF MARRIED FILING JOINTLY OR  
QUALIFYING WIDOW(ER); \$79,450 IF MARRIED  
FILING SEPARATELY 119,200.

4 SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS  
ENTER -0- 118,936.

5 MULTIPLY LINE 4 BY 25% (.25) 29,734.

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 23,866.

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

DESCRIPTION	CURRENT	CARRYOVER
FROM K-1 - THE BLACKSTONE GROUP, LP	17.	
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	1,985.	
TOTALS TO FORM 4952, LINES 1 AND 2	2,002.	

DESCRIPTION	AMOUNT
INTEREST INCOME	63,088.
DIVIDEND INCOME	182,240.
THE BLACKSTONE GROUP, LP - ROYALTY	9.
THE BLACKSTONE GROUP, LP - ACTIVITY NO. 1	328.
THE BLACKSTONE GROUP, LP	95.
TOTAL TO FORM 4952, LINE 4A	245,760.

FORM 4952

INVESTMENT EXPENSES

STATEMENT 25

DESCRIPTION	AMOUNT
THE BLACKSTONE GROUP, LP - ROYALTY SCHEDULE A DEDUCTIONS	6. 34,522.
TOTAL TO FORM 4952, LINE 5	34,528.

FORM 4952	INVESTMENT INTEREST EXPENSE DEDUCTION SUMMARY	STATEMENT 26
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NAME	FORM OR SCHEDULE	INVESTMENT INTEREST EXPENSE	INVESTMENT INTEREST EXPENSE C/O	DISALLOWED INVESTMENT INTEREST EXPENSE	ALLOWED INVESTMENT INTEREST EXPENSE
FROM K-1 - THE BLACKST SCH A		17.	0.	0.	17.
FROM K-1 - ALPHAKEYS M SCH E		1,985.	0.	0.	1,985.
TOTALS		2,002.	0.	0.	2,002.

FORM 4952AMT	INVESTMENT INTEREST EXPENSE	STATEMENT 27
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DESCRIPTION	CURRENT	CARRYOVER
FROM K-1 - THE BLACKSTONE GROUP, LP	17.	
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	1,985.	
TOTALS TO FORM 4952AMT, LINES 1 AND 2	2,002.	

FORM 8960	TRADE OR BUSINESS INCOME	STATEMENT 28
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ALPHAKEYS MILLENNIUM FUND, L.L.C.	1,736.
AMOUNT TO FORM 8960, LINE 4B	1,736.

FORM 8960

NET GAINS FROM DISPOSITION OF PROPERTY USED  
IN A NON-SECTION 1411 TRADE OR BUSINESS

STATEMENT 29

NAME OF TRADE OR BUSINESS	AMOUNT
ALPHAKEYS MILLENNIUM FUND, L.L.C.	5,310.
TOTAL TO NET GAINS AND LOSSES WORKSHEET, LINE 2A	5,310.
	=====

FORM 8960

MISCELLANEOUS ITEMIZED DEDUCTIONS PROPERLY  
ALLOCABLE TO INVESTMENT INCOME BEFORE LIMITATIONS

STATEMENT 30

DESCRIPTION	LINE	AMOUNT
UBS Y1-23574	9C	7,744.
UBS Y1-23571	9C	5,074.
UBS Y1-23568	9C	8,111.
UBS Y1-23570	9C	4,832.
UBS Y1-23571	9C	8,488.
FROM K-1 - THE BLACKSTONE GROUP, LP	9C	21.
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	9C	252.
TOTAL TO LINES 9 AND 10 WORKSHEET, PART I, LINE 1		34,522.
	=====	

FORM 8960

MISCELLANEOUS ITEMIZED DEDUCTIONS PROPERLY  
ALLOCABLE TO INVESTMENT INCOME AFTER LIMITATION

STATEMENT 31

DESCRIPTION	LINE	COLUMN A AMNT	RATIO	COLUMN C AMNT
UBS Y1-23574	9C	7,744.	1.0000	7,744.
UBS Y1-23571	9C	5,074.	1.0000	5,074.
UBS Y1-23568	9C	8,111.	1.0000	8,111.
UBS Y1-23570	9C	4,832.	1.0000	4,832.
UBS Y1-23571	9C	8,488.	1.0000	8,488.
FROM K-1 - THE BLACKSTONE GROUP, LP	9C	21.	1.0000	21.
FROM K-1 - ALPHAKEYS MILLENNIUM FUN	9C	252.	1.0000	252.
TOTAL TO LINES 9 & 10 WKST, PART II		34,522.		34,522.
	=====			=====

FORM 8960

MISCELLANEOUS ITEMIZED DEDUCTIONS PROPERLY  
ALLOCABLE TO INVESTMENT INCOME AFTER LIMITATION

STATEMENT 32

DESCRIPTION	LINE	AMOUNT
UBS Y1-23574	9C	7,744.
UBS Y1-23571	9C	5,074.
UBS Y1-23568	9C	8,111.
UBS Y1-23570	9C	4,832.
UBS Y1-23571	9C	8,488.
FROM K-1 - THE BLACKSTONE GROUP, LP	9C	21.
FROM K-1 - ALPHAKEYS MILLENNIUM FUND, L.L.C.	9C	252.
TOTAL TO LINES 9 AND 10 WORKSHEET, PART III, LINE 1		34,522.

FORM 8960

MISCELLANEOUS ITEMIZED DEDUCTIONS PROPERLY  
ALLOCABLE TO INVESTMENT INCOME

STATEMENT 33

DESCRIPTION	LINE	COLUMN A AMNT	RATIO	COLUMN C AMNT
UBS Y1-23574	9C	7,744.	1.0000	7,744.
UBS Y1-23571	9C	5,074.	1.0000	5,074.
UBS Y1-23568	9C	8,111.	1.0000	8,111.
UBS Y1-23570	9C	4,832.	1.0000	4,832.
UBS Y1-23571	9C	8,488.	1.0000	8,488.
FROM K-1 - THE BLACKSTONE GROUP, LP	9C	21.	1.0000	21.
FROM K-1 - ALPHAKEYS MILLENNIUM FUN	9C	252.	1.0000	252.
TOTAL TO LINES 9 & 10 WORKSHEET, PART IV, LINE 1		34,522.		34,522.

FORM 8582

## OTHER PASSIVE ACTIVITIES - WORKSHEET 3

STATEMENT 34

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
CARGOMETRICS TECHNOLOGIES LLC	0.	-118,351.	-4,275.		-122,626.
TOTALS	0.	-118,351.	-4,275.		-122,626.

FORM 8582

ALLOCATION OF UNALLOWED LOSSES - WORKSHEET 5 STATEMENT 35

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
CARGOMETRICS TECHNOLOGIES LLC	SCH E	122,626.	1.000000000	122,626.
TOTALS		122,626.	1.000000000	122,626.

FORM 8582

ALLOWED LOSSES - WORKSHEET 6

STATEMENT 36

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
CARGOMETRICS TECHNOLOGIES LLC	SCH E	122,626.	122,626.	
TOTALS		122,626.	122,626.	

FORM 8582

SUMMARY OF PASSIVE ACTIVITIES

STATEMENT 37

R R E A NAME	FORM OR SCHEDULE	PRIOR GAIN/LOSS	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
CARGOMETRICS TECHNOLOGIES LLC	SCH E	-118,351.	-4,275.	-122,626.	122,626.
TOTALS		-118,351.	-4,275.	-122,626.	122,626.

PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME

TOTAL TO FORM 8582, LINE 16

FORM 8582-CR

OTHER PASSIVE ACTIVITY CREDITS  
WORKSHEET 4

STATEMENT 38

NAME OF ACTIVITY	FROM FORM	CURRENT YEAR CREDITS	PRIOR YEAR UNALLOWED CREDITS	TOTAL CREDITS
CARGOMETRICS TECHNOLOGIES LLC	6765/3800, LINE 2	29.		29.
TOTALS		29.		29.

FORM 8582-CR

## ALLOCATION OF UNALLOWED CREDITS - WORKSHEET 8

STATEMENT 39

NAME OF ACTIVITY	FORM REPORTED ON	CREDITS	RATIO	UNALLOWED CREDITS
CARGOMETRICS TECHNOLOGIES LLC	FORM 3800, LINE 3	29.	1.000000000	29.
TOTALS		29.	1.000000000	29.

FORM 8582-CR

## ALLOWED CREDITS - WORKSHEET 9

STATEMENT 40

NAME OF ACTIVITY	FORM REPORTED ON	CREDITS	UNALLOWED CREDITS	ALLOWED CREDITS
CARGOMETRICS TECHNOLOGIES LLC	FORM 3800, LINE 3	29.	29.	0.
TOTALS		29.	29.	0.

FORM 8582

ALTERNATIVE MINIMUM TAX  
OTHER PASSIVE ACTIVITIES - WORKSHEET 3

STATEMENT 41

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
CARGOMETRICS TECHNOLOGIES LLC	0.	-118,351.	-4,275.		-122,626.
TOTALS	0.	-118,351.	-4,275.		-122,626.

FORM 8582

ALTERNATIVE MINIMUM TAX  
ALLOCATION OF UNALLOWED LOSSES - WORKSHEET 5

STATEMENT 42

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
CARGOMETRICS TECHNOLOGIES LLC	SCH E	122,626.	1.000000000	122,626.
TOTALS		122,626.	1.000000000	122,626.

FORM 8582

ALTERNATIVE MINIMUM TAX  
ALLOWED LOSSES - WORKSHEET 6

STATEMENT 43

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
CARGOMETRICS TECHNOLOGIES LLC	SCH E	122,626.	122,626.	
TOTALS		122,626.	122,626.	

R

R

E

A NAME

CARGOMETRICS  
TECHNOLOGIES LLC

TOTALS

PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME

TOTAL TO FORM 8582AMT, LINE 16

FORM 1116

U.S. AND FOREIGN SOURCE INCOME SUMMARY  
FOREIGN INTEREST INCOME

STATEMENT 45

DESCRIPTION

DESCRIPTION	AMOUNT
BARCLAYS	16,736.
CATER ALLEN PRIVATE BANK	5,519.
TOTAL FOREIGN INTEREST INCOME	22,255.

FORM 1116

U.S. AND FOREIGN SOURCE INCOME SUMMARY  
TOTAL PARTNERSHIP/S-CORPORATION INCOME/LOSS

STATEMENT 46

DESCRIPTION

DESCRIPTION	INCOME	LOSS
THE BLACKSTONE GROUP, LP	121.	
ALPHAKEYS MILLENNIUM FUND, L.L.C.		-3,721.
TOTAL PARTNERSHIP/S-CORPORATION INCOME/LOSS	121.	-3,721.

## 2015 TAX RETURN FILING INSTRUCTIONS

### NEW YORK INCOME TAX RETURN

FOR THE YEAR ENDING

DECEMBER 31, 2015

Prepared for	GHISLAINE MAXWELL C/O MARKS PANETH LLP-685 3RD AV NEW YORK, NY 10017
Prepared by	MARKS PANETH LLP 685 THIRD AVENUE NEW YORK, NY 10017
Amount of tax	Total tax \$ 15,560 Less: payments and credits \$ 24,634 Plus: interest and penalties \$ 0 OVERPAYMENT \$ 9,074
Overpayment	Miscellaneous Donations \$ 0 Credited to your estimated tax \$ 9,074 Refunded to you \$ 0
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. PLEASE SIGN, DATE, AND RETURN FORM TR-579-IT TO OUR OFFICE. WE WILL SUBMIT YOUR ELECTRONIC RETURN TO THE NY TAX DEPT.
Return must be mailed on or before	RETURN FORM TR-579-IT TO US BY OCTOBER 17, 2016.
Special Instructions	

**New York State E-File Signature Authorization for Tax Year 2015  
For Forms IT-201, IT-201-X, IT-203, IT-203-X, IT-214, NYC-208, and NYC-210**Electronic return originator (ERO): **do not mail** this form to the Tax Department. Keep it for your records.Taxpayer's name: GHISLAINE MAXWELLSpouse's name: \_\_\_\_\_  
(jointly filed return only)**Purpose**

Form TR-579-IT must be completed to authorize an ERO to e-file a personal income tax return and to transmit bank account information for the electronic funds withdrawal.

**General instructions**

Taxpayers must complete Part B before the ERO transmits the taxpayer's electronically filed Form IT-201, *Resident Income Tax Return*, IT-201-X, *Amended Resident Income Tax Return*, IT-203, *Nonresident and Part-Year Resident Income Tax Return*, IT-203-X, *Amended Nonresident and Part-Year Resident Income Tax Return*, IT-214, *Claim for Real Property Tax Credit*, NYC-208, *Claim for New York City Enhanced Real Property Tax Credit*, or NYC-210, *Claim for New York City School Tax Credit*.

For returns filed jointly, both spouses must complete and sign Form TR-579-IT.

EROs must complete Part C prior to transmitting electronically filed income tax returns (Forms IT-201, IT-201-X, IT-203, IT-203-X, IT-214, NYC-208, and NYC-210).

Both the paid preparer and the ERO are required to sign Part C. However, if an individual performs as both the paid preparer and the ERO, he or she is only required to sign as the paid preparer. It is not necessary to include the ERO signature in this case. Please note that an alternative signature can be used as described in Publication 58, *Information for Income Tax Return Preparers*. Go to our Web site at [www.tax.ny.gov](http://www.tax.ny.gov) to view this document.

**Do not mail Form TR-579-IT to the Tax Department.** EROs must keep this form for three years and present it to the Tax Department upon request.

This form is not required for electronically filed Form IT-370, *Application for Automatic Six-Month Extension of Time to File for Individuals*. See Form TR-579.1-IT, *New York State Taxpayer Authorization for Electronic Funds Withdrawal for Tax Year 2015 Form IT-370*.

**Part A - Tax return information**

1 Federal adjusted gross income (from applicable line)	1. <u>243496</u>
2 Refund	2. <u>0</u>
3 Amount you owe	3. _____

**Part B - Declaration of taxpayer and authorizations for Forms IT-201, IT-201-X, IT-203, IT-203-X, IT-214, NYC-208, and NYC-210**

Under penalty of perjury, I declare that I have examined the information on my 2015 New York State electronic personal income tax return, including any accompanying schedules, attachments, and statements, and certify that my electronic return is true, correct, and complete. The ERO has my consent to send my 2015 New York State electronic return to New York State through the Internal Revenue Service (IRS). In addition, by using a computer system and software to prepare and transmit my form electronically, I consent to the disclosure to New York State of all information pertaining to the transmission of my tax form electronically. I understand that by executing this Form TR-579-IT, I am authorizing the ERO to sign and file this return on my behalf and agree that the ERO's submission of my personal income tax return to the IRS, together with this authorization, will serve as the electronic signature for the return and any authorized payment transaction. If I am paying my New York State personal income taxes due by electronic funds withdrawal, I authorize the New York State Tax Department and its designated financial agents to initiate an electronic funds withdrawal from the financial institution account indicated on my 2015 electronic return, and I authorize my financial institution to withdraw the amount from my account. As New York does not support International ACH Transactions (IAT), I attest the source for these funds is within the United States. I understand and agree that I may revoke this authorization for payment only by contacting the Tax Department no later than five (5) business days prior to the payment date.

Taxpayer's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Spouse's signature: \_\_\_\_\_  
(jointly filed return only)

Date: \_\_\_\_\_

**Part C - Declaration of electronic return originator (ERO) and paid preparer**

Under penalty of perjury, I declare that the information contained in this 2015 New York State electronic personal income tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed paper 2015 New York State return signed by a paid preparer, I declare that the information contained in the taxpayer's 2015 New York State electronic return is identical to that contained in the paper copy of the return. If I am the paid preparer, under penalty of perjury I declare that I have examined this 2015 New York State electronic personal income tax return, and, to the best of my knowledge and belief, the return is true, correct, and complete. I have based this declaration on all information available to me.

ERO's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Paid preparer's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print name: BLECHER, ALAN

**Instructions****New for 2015**

Self-employed individuals engaging in business within the Metropolitan Commuter Transportation District (MCTD) must now submit their application for automatic six-month extension of time to file, along with any required payment for metropolitan commuter transportation mobility tax (MCTMT), using Form IT-370 rather than Form MTA-7, *Application for Automatic Six-Month Extension of Time To File a Metropolitan Commuter Transportation Mobility Tax Return*. Form MTA-7 is obsolete.

**General information****Purpose**

File Form IT-370 on or before the due date of the return to get an automatic six-month extension of time to file Form IT-201, *Resident Income Tax Return*, or Form IT-203, *Nonresident and Part-Year Resident Income Tax Return*.

**Note:** We no longer accept a copy of the federal extension form in place of Form IT-370.

If you are requesting an extension of time to file using Form IT-370, you may still file Form IT-201 or Form IT-203 electronically, provided you meet the conditions for electronic filing as listed in the instructions for the forms.

If you have to file Form Y-203, *Yonkers Nonresident Earnings Tax Return*, the time to file is automatically extended when you file Form IT-370. For more information on who is required to file Form Y-203, see the instructions for the form.

We cannot grant an extension of time to file for more than six months if you live in the United States. However, you may qualify for an extension of time to file beyond six months under section 157.3(b)(1) of the personal income tax regulations because you are outside the United States and Puerto Rico, or you intend to claim nonresident status under section 605(b)(1)(A)(ii) of the Tax Law (548-day rule), as explained in the instructions for Form IT-203 under *Additional Information*. Also see the special condition code instructions for the return you will be filing (Form IT-201 or Form IT-203).

**When to file**

File **one** completed Form IT-370 on or before the filing deadline for your return (extension applications filed after the filing deadline for the return are invalid). Generally, the filing deadline is the fifteenth day of the fourth month following the close of your tax year (April 18, 2016, for calendar-year filers).

However, you may file Form IT-370 on or before:

- **June 15, 2016**, if you qualify for an automatic two-month extension of time to file your federal and New York State income tax returns because you are out of the country (for additional information, see *When to file/Important dates* on the back cover of the instructions for the return you are filing) **and** you need an additional four months to file (October 17, 2016);
- **June 15, 2016**, if you are a U.S. nonresident alien for federal income tax purposes and you qualify to file your federal and New York State income tax returns on June 15, 2016, **and** you need an additional six months to file (December 15, 2016); or
- **July 14, 2016**, (if your due date is April 18, 2016) or **September 13, 2016** (if you are a nonresident alien and your due date is June 15, 2016), if you qualify for a 90-day extension of time to file because your spouse died within 30 days before your return due date **and** you need additional time to file. However, you must file your return on or before October 17, 2016, if your due date is April 18, 2016, or on or before December 15, 2016, if you are a nonresident alien and your due date is June 15, 2016.

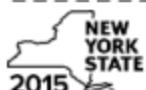
See *Special condition codes* on page 2.

If you qualify for an **extension of time to file beyond six months**, you must file Form IT-370 on or before the filing deadline for your return.

**How to file**

Complete Form IT-370 and file it, along with payment for any tax due, on or before the due date of your return. Use the worksheet on page 3 to determine if a payment is required.

▼ **Detach (cut) here** ▼ **Do not submit with your return.**



Paid preparer? Mark an X in the box and complete page 2		X	Enter your 2-character special condition code if applicable (see instructions) <input type="checkbox"/>		
Your social security number (SSN)		Spouse's SSN (only if filing a joint return)			
Your first name and middle initial <b>GHISLAINE</b>		Your last name <b>MAXWELL</b>			
Spouse's first name and middle initial		Spouse's last name			
Mailing address (number and street or PO box) <b>C/O MARKS PANETH LLP-685 3RD AV</b>			Apartment number		
City, village, or post office (see instructions) <b>NEW YORK</b>		State <b>NY</b>	ZIP code <b>10017</b>		
E-mail:					

Mark an X in the box for each tax that you are subject to:

NYS tax  NYC tax  Yonkers tax  MCTMT

Dollars	Cents
1 Sales and use tax .....	0 .00
2 Total payment .....	0 .00

3701151019



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Spouses who file separate returns must complete separate Forms IT-370. Do not include your spouse's SSN or name on your separate Form IT-370.

**Payment of tax** - To obtain an extension of time to file, you must make full payment of the properly estimated tax balances due. Payment may be made by check or money order. See *Payment options* below.

#### Penalties

**Late payment penalty** - If you do not pay your tax liability when due (determined with regard to any extension of time to pay), you will have to pay a penalty of 1/2 of 1% of the unpaid amount for each month or part of a month it is not paid, up to a maximum of 25%. The penalty will not be charged if you can show reasonable cause for paying late. This penalty is in addition to the interest charged for late payments.

Reasonable cause will be presumed with respect to the addition to tax for late payment of tax if the requirements relating to extensions of time to file have been complied with, the balance due shown on the income tax return, reduced by any sales or use tax that is owed, is no greater than 10% of the total New York State, New York City, Yonkers, and MCTMT tax shown on the income tax return, and the balance due shown on the income tax return is paid with the return.

**Late filing penalty** - If you do not file your Form IT-201 or Form IT-203 when due (determined with regard to any extension of time to file), or if you do not file Form IT-370 on time and obtain an extension of time to file, you will have to pay a penalty of 5% of the tax due for each month, or part of a month, the return is late, up to a maximum of 25%. However, if your return is not filed within 60 days of the time prescribed for filing a return (including extensions), this penalty will not be less than the lesser of \$100 or 100% of the amount required to be shown as tax due on the return reduced by any tax paid and by any credit that may be claimed. The penalty will not be charged if you can show reasonable cause for filing late.

#### Interest

Interest will be charged on income tax, MCTMT, or sales or use tax that is not paid on or before the due date of your return, even if you received an extension of time to file your return. Interest

is a charge for the use of money and in most cases may not be waived. Interest is compounded daily and the rate is adjusted quarterly.

#### Fee for payments returned by banks

The law allows the Tax Department to charge a \$50 fee when a check, money order, or electronic payment is returned by a bank for nonpayment. However, if an electronic payment is returned as a result of an error by the bank or the department, the department won't charge the fee. If your payment is returned, we will send a separate bill for \$50 for each return or other tax document associated with the returned payment.

#### Privacy notification

See our Web site or Publication 54, *Privacy Notification*.

#### Specific instructions

**Name and address box** - Enter your name (both names if filing a joint application), address and social security number(s). Failure to provide a social security number may invalidate this extension. If you do not have a social security number, enter *do not have one*. If you do not have a social security number, but have applied for one, enter *applied for*.

**Foreign addresses** - Enter the information in the following order: city, province or state, and then country (all in the *City, village, or post office box*). Follow the country's practice for entering the postal code. **Do not abbreviate the country name**.

**Special condition codes** - If you are out of the country and need an additional four months to file (October 17, 2016), enter special condition code **E3**. If you are a nonresident alien and your filing due date is June 15, 2016, and you need an additional six months to file (December 15, 2016), enter special condition code **E4**. If you qualified for a 90-day extension of time to file because your spouse died, and you need additional time to file (on or before October 17, 2016, or in the case of a nonresident alien, on or before December 15, 2016), enter special condition code **D9**. Also enter the applicable special condition code, **E3, E4, or D9** on Form IT-201 or Form IT-203 when you file your return.

▼ **Detach (cut) here** ▼ **Do not submit with your return.**

IT-370 (2015) (page 2)

**Payment options** - Full payment must be made by check or money order of any balance due with this automatic extension of time to file. Make the check or money order payable in U.S. funds to **New York State Income Tax** and write your social security number and **2015 Income Tax** on it. For online payment options, see our Web site (at [www.tax.ny.gov](http://www.tax.ny.gov)).

**Paid preparers** - Under the law, all paid preparers must sign and complete the paid preparer section of the form. Paid preparers may be subject to civil and/or criminal sanctions if they fail to complete this section in full.

When completing this section, enter your New York tax preparer registration identification number (NYTPRIN) if you are required to have one. If you are not required to have a NYTPRIN, enter in the **NYTPRIN excl. code** box one of the specified 2-digit codes listed below that indicates why you are exempt from the registration requirement. You **must** enter a NYTPRIN or an exclusion code. Also, you must enter your federal preparer tax identification number (PTIN) if you have one; if not, you must enter your social security number.

Code	Exemption type	Code	Exemption type
01	Attorney	02	Employee of attorney
03	CPA	04	Employee of CPA
05	PA (Public Accountant)	06	Employee of PA
07	Enrolled agent	08	Employee of enrolled agent
09	Volunteer tax preparer	10	Employee of business preparing that business' return

See our Web site for more information about the tax preparer registration requirements.

<b>▼ Paid preparer must complete (see instructions) ▼</b>		Date:
Preparer's signature		► Preparer's NYTPRIN
►		
Firm's name (or yours, if self-employed)		▼ Preparer's PTIN or SSN
MARKS PANETH LLP		
Address		● Employer identification number
685 THIRD AVENUE		113518842
NEW YORK, NY 10017		NYTPRIN excl. code 01
E-mail:		

3702151019



EFTA00026389

**Worksheet instructions**

Complete the following worksheet to determine if you must make a payment with Form IT-370.

If you enter an amount on lines 1, 2, 3, or 4 of this worksheet, mark an X in the appropriate box on IT-370.

**Line 1** - Enter the amount of your New York State income tax liability for 2015 that you expect to enter on Form IT-201, line 46, or Form IT-203, line 50.

**Line 2** - Enter the amount of your New York City income tax liability for 2015 that you expect to enter on Form IT-201, line 54, or Form IT-203, line 52a.

**Line 3** - Enter the amount of your Yonkers income tax liability for 2015 that you expect to enter on Form IT-201, lines 55, 56, and 57; or Form IT-203, lines 53 and 54.

**Line 4** - Enter the amount of your MCTMT liability for 2015 that you expect to enter on Form IT-201, line 54b, or Form IT-203, line 52c.

**Line 5** - Enter the amount of sales and use tax, if any, that you will be required to report when you file your 2015 return. See the instructions for your NYS income tax return for information on how to compute your sales and use tax. Also enter this amount on line 1 on IT-370.

**Line 7** - Enter the amount of 2015 tax already paid that you expect to enter on Form IT-201, line 76, or Form IT-203, line 66 (excluding the amount paid with Form IT-370).

<b>Worksheet</b>		
1 New York State income tax liability for 2015	1.	10042
2 New York City income tax liability for 2015	2.	5391
3 Yonkers income tax liability for 2015	3.	0
4 MCTMT liability for 2015	4.	0
5 Sales and use tax due for 2015 (enter this amount here and on line 1 on IT-370)	5.	127
6 Total taxes (add lines 1 through 5)	6.	15560
7 Total 2015 income tax already paid	7.	24634
8 Total payment (subtract line 7 from line 6 and enter this amount here and on line 2 on IT-370). If line 7 is more than line 6, enter 0	8.	0

**Note:** You may be subject to penalties if you underestimate the balance due.

**How to claim credit for payment made with this form**

Include the amount paid with Form IT-370 on Form IT-201, line 75, or Form IT-203, line 65.

For more information, see the line instructions for the return you file.

**Where to file**

If you are enclosing a payment with Form IT-370, mail to:

Extension Request  
PO Box 4125  
Binghamton NY 13902-4125

If you are not enclosing a payment with Form IT-370, mail to:

Extension Request-NR  
PO Box 4126  
Binghamton NY 13902-4126

**Private delivery services**

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, *Designated Private Delivery Services*. See *Need help?* below for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery. See Publication 55 for where to send the form covered by these instructions.

**Need help?**

Visit our Web site at [www.tax.ny.gov](http://www.tax.ny.gov)

- get information and manage your taxes online
- check for new online services and features

**Telephone assistance**

Automated income tax refund status: (518) 457-5149

**Personal Income Tax** Information Center: (518) 457-5181

To order forms and publications: (518) 457-5431

**Text Telephone (TTY) Hotline** (for persons with

hearing and speech disabilities using a TTY): (518) 485-5082

**Persons with disabilities:** In compliance with the

Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities.

If you have questions about special accommodations for persons with disabilities, call the information center.



Department of Taxation and Finance

**Resident Income Tax Return**

New York State • New York City • Yonkers • MCTMT

568001 11-17-15

**IT-201**

For the full year January 1, 2015, through December 31, 2015, or fiscal year beginning .....

and ending .....

For help completing your return, see the instructions, Form IT-201-I.

Your first name	MI	Your last name (for a joint return, enter spouse's name on line below)	Your date of birth (mmddyyyy)	Your social security number
<b>GHISLAINE</b>		<b>MAXWELL</b>		
Spouse's first name	MI	Spouse's last name	Spouse's date of birth (mmddyyyy)	Spouse's social security number
Mailing address (see instructions, page 13) (number and street or PO box)			Apartment number	New York State county of residence
<b>C/O MARKS PANETH LLP-685 3RD A</b>				<b>NY</b>
City, village, or post office		State ZIP code	Country (if not United States)	School district name
<b>NEW YORK</b>		<b>NY 10017</b>		<b>MANHATTAN</b>
Taxpayer's permanent home address (see instructions, page 13) (number and street or rural route)			Apartment number	School district code number .....
City, village, or post office		State ZIP code	Taxpayer's date of death (mmddyyyy)	Spouse's date of death (mmddyyyy)
		<b>NY</b>		
			Decedent information	

**A Filing status** (mark an *X* in one box):

(1)  Single

(2)  Married filing joint return  
(enter spouse's social security number above)

(3)  Married filing separate return  
(enter spouse's social security number above)

(4)  Head of household (with qualifying person)

(5)  Qualifying widow(er) with dependent child

**B Did you itemize** your deductions on your 2015 federal income tax return? .....Yes  No **C Can you be claimed as a dependent on another taxpayer's federal return?** .....Yes  No **D1** Did you have a financial account located in a foreign country? (see page 14) .....Yes  No **D2 Yonkers residents and Yonkers part-year residents only:**

(1) Did you receive a property tax freeze credit? (see page 14) .....

Yes  No 

(2) If Yes, enter the amount .....

00

**E** (1) Did you or your spouse maintain living quarters in NYC during 2015? (see page 14) Yes  No 

(2) Enter the number of days spent in NYC in 2015 (any part of a day spent in NYC is considered a day) .....

00

**F NYC residents and NYC part-year residents only** (see page 14):

(1) Number of months you lived in NYC in 2015 .....

12

(2) Number of months your spouse lived in NYC in 2015 .....

00

**G** Enter your 2-character special condition code(s) if applicable (see page 14) .....

00

**H Dependent exemption information** (see page 15)

First name	MI	Last name	Relationship	Social security number	Date of birth (mmddyyyy)

If more than 7 dependents, mark an *X* in the box.

201001151019



For office use only

EFTA00026391

**Federal income and adjustments** (see page 15)

Whole dollars only

1 Wages, salaries, tips, etc.	.....
2 Taxable interest income	.....
3 Ordinary dividends	.....
4 Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25)	.....
5 Alimony received	.....
6 Business income or loss (submit a copy of federal Schedule C or C-EZ, Form 1040)	.....
7 Capital gain or loss (if required, submit a copy of federal Schedule D, Form 1040)	.....
8 Other gains or losses (submit a copy of federal Form 4797)	.....
9 Taxable amount of IRA distributions. If received as a beneficiary, mark an <b>X</b> in the box	.....
10 Taxable amount of pensions and annuities. If received as a beneficiary, mark an <b>X</b> in the box	.....
11 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (submit copy of federal Schedule E, Form 1040)	.....

1		00
2	63088	00
3	182240	00
4		00
5		00
6	-500	00
7	-3000	00
8	5310	00
9		00
10		00
11	-3642	00

12 Rental real estate included in line 11	.....	12	00
13 Farm income or loss (submit a copy of federal Schedule F, Form 1040)	.....	13	00
14 Unemployment compensation	.....	14	00
15 Taxable amount of social security benefits (also enter on line 27)	.....	15	00
16 Other income (see page 15) <b>Identify:</b>	.....	16	00
17 Add lines 1 through 11 and 13 through 16	.....	17	243496
18 Total federal adjustments to income (see page 15) <b>Identify:</b>	.....	18	00
19 Federal adjusted gross income (subtract line 18 from line 17)	.....	19	243496

**New York additions** (see page 16)

20 Interest income on state and local bonds and obligations (but not those of NYS or its local governments)	.....
21 Public employee 414(h) retirement contributions from your wage and tax statements (see page 16)	.....
22 New York's 529 college savings program distributions (see page 16)	.....
23 Other (Form IT-225, line 9)	.....
24 Add lines 19 through 23	.....

20	10000	00
21		00
22		00
23	106	00
24	253602	00

**New York subtractions** (see page 17)

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

25		00
26		00
27		00
28	893	00
29		00
30		00
31	15	00



32	908	00
33	252694	00

**Standard deduction or itemized deduction** (see page 20)

34 Enter your **standard deduction** (table on page 20) or your **itemized deduction** (from Form IT-201-D)

Mark an **X** in the appropriate box:  **Standard** - or -  **Itemized**

35 Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank)

36 Dependent exemptions (enter the number of dependents listed in Item H; see page 20)

37 Taxable income (subtract line 36 from line 35)

34	101679	00
35	151015	00
36	000	00
37	151015	00

201002151019



EFTA00026392

## Tax computation, credits, and other taxes

38 Taxable income (from line 37 on page 2)	38	151015	00
39 NYS tax on line 38 amount (see page 21)	39	10042	00
40 NYS household credit (page 21, table 1, 2, or 3)	40	00	
41 Resident credit (see page 22)	41	00	
42 Other NYS nonrefundable credits (Form IT-201-ATT, line 7)	42	00	
43 Add lines 40, 41, and 42	43	00	
44 Subtract line 43 from line 39 (if line 43 is more than line 39, leave blank)	44	10042	00
45 Net other NYS taxes (Form IT-201-ATT, line 30)	45	00	
46 Total New York State taxes (add lines 44 and 45)	46	10042	00

## New York City and Yonkers taxes, credits, and surcharges, and MCTMT

47 NYC resident tax on line 38 amount (see page 22)	47	5391	00
48 NYC household credit (page 22, table 4, 5, or 6)	48	00	
49 Subtract line 48 from line 47 (if line 48 is more than line 47, leave blank)	49	5391	00
50 Part-year NYC resident tax (Form IT-360.1)	50	00	
51 Other NYC taxes (Form IT-201-ATT, line 34)	51	00	
52 Add lines 49, 50, and 51	52	5391	00
53 NYC nonrefundable credits (Form IT-201-ATT, line 10)	53	00	
54 Subtract line 53 from line 52 (if line 53 is more than line 52, leave blank)	54	5391	00
54a MCTMT net earnings base	54a	00	
54b MCTMT	54b	00	
55 Yonkers resident income tax surcharge (see page 25)	55	00	
56 Yonkers nonresident earnings tax (Form Y-203)	56	00	
57 Part-year Yonkers resident income tax surcharge (Form IT-360.1)	57	00	
58 Total New York City and Yonkers taxes / surcharges and MCTMT (add lines 54 and 54b through 57)	58	5391	00
59 Sales or use tax (see page 26; do not leave line 59 blank)	59	127	00

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



## Voluntary contributions (see page 27)

60a Return a Gift to Wildlife	60a	00	
60b Missing/Exploited Children Fund	60b	00	
60c Breast Cancer Research Fund	60c	00	
60d Alzheimer's Fund	60d	00	
60e Olympic Fund (\$2 or \$4; see page 27)	60e	00	
60f Prostate and Testicular Cancer Research and Education Fund	60f	00	
60g 9/11 Memorial	60g	00	
60h Volunteer Firefighting & EMS Recruitment Fund	60h	00	
60i Teen Health Education	60i	00	
60j Veterans Remembrance	60j	00	
60k Homeless Veterans	60k	00	
60l Mental Illness Anti-Stigma Fund	60l	00	
60m Women's Cancers Education and Prevention Fund	60m	00	
60 Total voluntary contributions (add lines 60a through 60m)	60	00	
61 Total New York State, New York City, Yonkers, and sales or use taxes, MCTMT, and voluntary contributions (add lines 46, 58, 59, and 60)	61	15560	00

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62 Enter amount from line 61

62

15560 00

## Payments and refundable credits (see page 28)

63 Empire State child credit	63	00
63a Family tax relief credit	63a	00
64 NYS/NYC child and dependent care credit	64	00
65 NYS earned income credit (EIC)	65	00
66 NYS noncustodial parent EIC	66	00
67 Real property tax credit	67	00
68 College tuition credit	68	00
69 NYC school tax credit (also complete F on page 1; see page 29)	69	63 00
70 NYC earned income credit	70	00
70a NYC enhanced real property tax credit	70a	00
71 Other refundable credits (Form IT-201-ATT, line 18)	71	00
72 Total New York State tax withheld	72	00
73 Total New York City tax withheld	73	00
74 Total Yonkers tax withheld	74	00
75 Total estimated tax payments and amount paid with Form IT-370	75	24571 00
<b>76 Total payments (add lines 63 through 75)</b>	<b>76</b>	<b>24634 00</b>



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

## Your refund, amount you owe, and account information (see pages 31 through 33)

77 Amount overpaid (if line 76 is more than line 62, subtract line 62 from line 76)

77 9074 00

78 Amount of line 77 to be refunded

78 00

Mark one refund choice:  direct deposit (fill in line 83) -or-  debit card -or-  paper check

79 Amount of line 77 that you want applied to your

See page 31 for information about your three refund choices.

2016 estimated tax (see instructions)

79 9074 00

80 Amount you owe (if line 76 is less than line 62, subtract line 76 from line 62). To pay by electronic funds withdrawal, mark an X in the box  and fill in lines 83 and 84. If you pay by check or money order you must complete Form IT-201-V and mail it with your return

See page 32 for payment options.

80 00

81 Estimated tax penalty (include this amount in line 80 or reduce the overpayment on line 77; see page 32)

See page 35 for the proper assembly of your return.

82 Other penalties and interest (see page 32)

81 00

83 Account information for direct deposit or electronic funds withdrawal (see page 33).



If the funds for your payment (or refund) would come from (or go to) an account outside the U.S., mark an X in this box (see pg. 33)

83a Account type:  Personal checking - or-  Personal savings - or-  Business checking - or-  Business savings83b Routing number  83c Account number 84 Electronic funds withdrawal (see page 33) Date  Amount  00

Third-party designee? (see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Print designee's name <b>BLECHER, ALAN</b>		Designee's phone number <input type="text"/>	Personal identification number (PIN) <input type="text"/>
▼ Paid preparer must complete (see instructions) ▼		Preparer's NYTPRIN excl. code <b>01</b>	▼ Taxpayer(s) must sign here ▼	
Preparer's signature  <b>BLECHER, ALAN</b>		Preparer's printed name  <b>BLECHER, ALAN</b>	Your signature	
Firm's name (or yours, if self-employed) <b>MARKS PANETH LLP</b>		Preparer's PTIN or SSN <input type="text"/>	Your occupation <b>CONSULTANT</b>	
Address <b>685 THIRD AVENUE NEW YORK, NY</b>		Employer identification number <b>113518842</b>	Spouse's signature and occupation (if joint return)	
		Date <input type="text"/>	Daytime phone number <input type="text"/>	
E-mail: <input type="text"/>		E-mail: <input type="text"/>		

See instructions for where to mail your return.

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Department of Taxation and Finance

568011 04-25-16

**Resident Itemized Deduction Schedule****IT-201-D**

Submit this form with Form IT-201. See instructions for completing Form IT-201-D in the instructions for Form IT-201.

Name(s) as shown on your Form IT-201 <b>GHISLAINE MAXWELL</b>	Your social security number [REDACTED]
--	---

1 Medical and dental expenses (federal Schedule A, line 4) .....

2 Taxes you paid (federal Schedule A, line 9) .....

3 Interest you paid (federal Schedule A, line 15) .....

4 Gifts to charity (federal Schedule A, line 19) .....

5 Casualty and theft losses (federal Schedule A, line 20) .....

6 Job expenses/miscellaneous deductions (federal Schedule A, line 27) .....

7 Other miscellaneous deductions (federal Schedule A, line 28) .....

8 Enter amount from federal Schedule A, line 29 .....

9 State, local, and foreign **income** taxes (or general sales tax, if applicable) and other subtraction adjustments (see instructions) .....

10 Subtract line 9 from line 8 .....

11 Addition adjustments (see instructions) .....

12 Add lines 10 and 11 .....

13 Itemized deduction adjustment (see instructions) .....

14 Subtract line 13 from line 12 .....

15 College tuition itemized deduction (see Form IT-272) .....

16 **New York State itemized deduction** (add lines 14 and 15; enter on Form IT-201, line 34) .....

**Whole dollars only**

1	00
2	119703 00
3	17 00
4	5353 00
5	00
6	40652 00
7	00
8	165725 00

**STATEMENT 1**

9	34571 00
10	131154 00
11	4418 00
12	135572 00
13	33893 00
14	101679 00
15	00
16	101679 00

**STATEMENT 2**

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# New York State Modifications

Attachment to Form IT-201, IT-203, IT-204, or IT-205

**IT-225**

Name(s) as shown on return	Identifying number as shown on return
GHISLAINE MAXWELL	[REDACTED]

Complete all parts that apply to you; see instructions (Form IT-225-I). Submit this form with Form IT-201, IT-203, IT-204, or IT-205.

Mark an **X** in the box identifying the return you are filing: IT-201  IT-203  IT-204  IT-205 **Schedule A - New York State additions (enter whole dollars only)****Part 1 - Individuals, partnerships, and estates or trusts****1 New York State additions**

	Number	A - Total amount
1a	A - 111	90 00
1b	A - 209	16 00
1c	A -	00
1d	A -	00
1e	A -	00
1f	A -	00
1g	A -	00

	B - NYS allocated amount
	00
	00
	00
	00
	00
	00
	00

2 Total (add column A, lines 1a through 1g) ..... **2** 106 00

3 Total of Schedule A, Part 1, column A amounts from additional Form(s) IT-225, if any ..... **3** 00

4 Add lines 2 and 3 ..... **4** 106 00

**Part 2 - Partners, shareholders, and beneficiaries**

! Form IT-201 filers: do not enter EA-103 or EA-113  
Form IT-203 filers: do not enter EA-113  
Form IT-205 filers: do not enter EA-113 or EA-201

**5 New York State additions**

	Number	A - Total amount
5a	EA -	00
5b	EA -	00
5c	EA -	00
5d	EA -	00
5e	EA -	00
5f	EA -	00
5g	EA -	00

	B - NYS allocated amount
	00
	00
	00
	00
	00
	00
	00

6 Total (add column A, lines 5a through 5g) ..... **6** 00

7 Total of Schedule A, Part 2, column A amounts from additional Form(s) IT-225, if any ..... **7** 00

8 Add lines 6 and 7 ..... **8** 00

9 Total additions (add lines 4 and 8; see instructions) ..... **9** 106 00

(continued)

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**Schedule B - New York State subtractions** (enter whole dollars only)**Part 1 - Individuals, partnerships, and estates or trusts****10 New York State subtractions**

Number
10a S - 213
10b S -
10c S -
10d S -
10e S -
10f S -
10g S -

A - Total amount	
15	00
00	00
00	00
00	00
00	00
00	00
00	00

B - NYS allocated amount	
00	00
00	00
00	00
00	00
00	00
00	00
00	00

11 Total (add column A, lines 10a through 10g) .....

11	15	00
----	----	----

12 Total of Schedule B, Part 1, column A amounts from additional Form(s) IT-225, if any .....

12	00	00
----	----	----

13 Add lines 11 and 12 .....

13	15	00
----	----	----

**Part 2 - Partners, shareholders, and beneficiaries**

Form IT-201 filers: do not enter ES-103, ES-104, ES-106, ES-107, or ES-125  
 Form IT-203 filers: do not enter ES-106, ES-107, or ES-125  
 Form IT-205 filers: do not enter ES-125

**14 New York State subtractions**

Number
14a ES -
14b ES -
14c ES -
14d ES -
14e ES -
14f ES -
14g ES -

A - Total amount	
00	00
00	00
00	00
00	00
00	00
00	00
00	00

B - NYS allocated amount	
00	00
00	00
00	00
00	00
00	00
00	00
00	00

15 Total (add column A, lines 14a through 14g) .....

15	00	00
----	----	----

16 Total of Schedule B, Part 2, column A amounts from additional Form(s) IT-225, if any .....

16	00	00
----	----	----

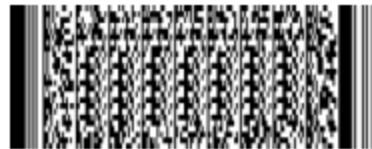
17 Add lines 15 and 16 .....

17	00	00
----	----	----

18 Total subtractions (add lines 13 and 17; see instructions) .....

18	15	00
----	----	----

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Department of Taxation and Finance

568051 11-17-15

# Underpayment of Estimated Tax By Individuals and Fiduciaries

**IT-2105.9**

New York State • New York City • Yonkers • MCTMT

Name(s) as shown on return <b>GHISLAINE MAXWELL</b>	Identification number (SSN or EIN) [REDACTED]
--	--

**Part 1 - All filers must complete this part** (see instructions, Form IT-2105.9-I, for assistance)

1 Total tax from your 2015 return before withholding and estimated tax payments (caution: see instructions) .....	1	15433.00
2 Empire State child credit (from Form IT-201, line 63) .....	2	.00
3 NYS/NYC child and dependent care credit (from Form IT-201, line 64) .....	3	.00
4 NY State earned income credit (EIC) (from Form IT-201, line 65) .....	4	.00
5 NY State noncustodial parent EIC (from Form IT-201, line 66) .....	5	.00
6 Real property tax credit (from Form IT-201, line 67) .....	6	.00
7 College tuition credit (from Form IT-201, line 68) .....	7	.00
7a Property tax freeze credit (see instructions) .....	7a	.00
7b Family tax relief credit (from Form IT-201, line 63a) .....	7b	.00
8 NY City school tax credit (from Form IT-201, line 69, or Form IT-203, line 60) .....	8	63.00
9 NY City earned income credit (from Form IT-201, line 70) .....	9	.00
9a NY City enhanced real property tax credit (from Form IT-201, line 70a) .....	9a	.00
10 Other refundable credits (from Form IT-201, line 71; Form IT-203, line 61; or Form IT-205, line 33) .....	10	.00
11 Add lines 2 through 10 .....	11	63.00
12 Current year tax (subtract line 11 from line 1) .....	12	15370.00
13 Multiply line 12 by 90% (.90) .....	13	13833.00
14 Income taxes withheld (from Form IT-201, lines 72, 73, and 74; Form IT-203, lines 62, 63, and 64; or Form IT-205, lines 34, 35, and 36) .....	14	.00
15 Subtract line 14 from line 12. If the result is less than \$300, do not complete the rest of this form (see instructions) .....	15	15370.00
16 Enter your 2014 tax (caution: see instructions) .....	16	16130.00
17 Enter the smaller of line 13 or line 16 .....	17	13833.00

**Part 2 - Short method for computing the penalty** - Complete lines 18 through 24 if you paid withholding tax and/or paid four equal estimated tax installments (on the due dates), or if you made no payments of estimated tax. Otherwise, you must complete Part 3 - Regular method.

18 Enter the amount from line 14 above .....	18	.00
19 Enter the total amount of estimated tax payments you made (see instructions) .....	19	.00
20 Add lines 18 and 19 .....	20	.00
21 Total underpayment for year. Subtract line 20 from line 17 (if zero or less, you do not owe the penalty) .....	21	.00
22 Multiply line 21 by .05000 and enter the result .....	22	.00
23 If the amount on line 21 was paid on or after April 15, 2016, enter 0. If the amount on line 21 was paid before April 15, 2016, make the following computation to find the amount to enter on this line: Amount on line 21 x number of days paid before April 15, 2016 x .00020 = .....	23	.00
24 Penalty. Subtract line 23 from line 22 .....	24	.00

Enter here and on Form IT-201, line 81; Form IT-203, line 71; or Form IT-205, line 42.

**Part 3 - Regular method - Schedule A - Computing your underpayment** (Schedule B is on page 2)

Payment due dates	A 4/15/15	B 6/15/15	C 9/15/15	D 1/15/16
25 Required installments. Enter 1/4 of line 17 in each column. (If you used the annualized income installment method, see instructions.) .....	25 3458.00	3458.00	3458.00	3459.00
26 Estimated tax paid and tax withheld (see instructions) .....	26 17571.00	2000.00	5000.00	.00
Complete lines 27 through 29, one column at a time, starting in column A.				
27 Overpayment or underpayment from prior period .....		14113.00	12655.00	14197.00
28 If line 27 is an overpayment, add lines 26 and 27; if line 27 is an underpayment, subtract line 27 from line 26 (see instr.) .....	28 17571.00	16113.00	17655.00	14197.00
29 Underpayment (subtract line 28 from line 25) or overpayment (subtract line 25 from line 28; see instructions) .....	29 14113.00	12655.00	14197.00	10738.00

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**Part 3 - Regular method - Schedule B - Computing the penalty**

Payment due dates	A 4/15/15	B 6/15/15	C 9/15/15	D 1/15/16
30 Amount of underpayment (from line 29) .....	30	.00	.00	.00
<b>First installment (April 15 - June 15, 2015)</b>				
31 April 15 - June 15 =	(61 ÷ 365) × 7.5% = .01253			
- or -				
April 15 - _____ = (_____ ÷ 365) × 7.5% = •	31			
32 Multiply line 30, column A by line 31 .....	32	.00	32	
<b>Second installment (June 15 - September 15, 2015)</b>				
33 June 15 - September 15 = (92 ÷ 365) × 7.5% = .01890	- or -			
June 15 - _____ = (_____ ÷ 365) × 7.5% = •				
34 Multiply line 30, column B by line 33 .....	33	.00	34	.00
<b>Third installment (September 15, 2015 - January 15, 2016)</b>				
35 September 15 - December 31 = (107 ÷ 365) × 7.5% = .02198	- or -			
January 1 - January 15 = (15 ÷ 366) × 7.5% = .00306	.02504			
September 15 - _____ = (_____ ÷ 365) × 7.5% = •				
January 1 - _____ = (_____ ÷ 366) × 7.5% = •				
Total				
36 Multiply line 30, column C by line 35 .....	35	.00	36	
<b>Fourth installment (January 15 - April 15, 2016)</b>				
37 January 15 - April 15 = (91 ÷ 366) × 7.5% = .01864	- or -			
January 15 - _____ = (_____ ÷ 366) × 7.5% = •				
38 Multiply line 30, column D by line 37 .....	37			
39 <b>Penalty.</b> Add lines 32, 34, 36, and 38. Enter here and on Form IT-201, line 81; Form IT-203, line 71; or Form IT-205, line 42 .....				
39				0.00

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Submit this form with your New York State return.

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## NY IT-201-D ITEMIZED DEDUCTION WORKSHEET - ADDITION ADJUSTMENTS STATEMENT 1

DESCRIPTION	AMOUNT
INTEREST EXP. RELATED TO U.S. OBLIGATIONS	90.
BOND PREMIUM	4,328.
TOTAL TO FORM IT-201-D, LINE 11	4,418.

COPY

1. NEW YORK ADJUSTED GROSS INCOME FROM FORM IT-201, LINE 33 OR FORM IT-203, LINE 32	252,694.
2. FILING STATUS 1 OR 3 ENTER \$100,000, OR FILING STATUS 4 ENTER \$150,000, OR FILING STATUS 2 OR 5 ENTER \$200,000	100,000.
3. SUBTRACT LINE 2 FROM LINE 1	152,694.
4. ENTER THE LESSOR OF LINE 3 OR \$50,000	50,000.
5. DIVIDE LINE 4 BY \$50,000 AND CARRY THE RESULT TO 4 DECIMAL PLACES	1.0000
6. ENTER 25% OF FORM IT-201-D, LINE 12 (IT-203-D, LINE 13)	33,893.
7. MULTIPLY LINE 5 BY LINE 6 AND TRANSFER THIS AMOUNT TO FORM IT-201-D LINE 13 (IT-203-D, LINE 14)	33,893.

COPY