

Form	1040	Department of the Treasury—Internal Revenue Service (99)	2016	OMB No. 1545-0074	IRS Use Only—Do not write or staple in this space.																																																															
U.S. Individual Income Tax Return																																																																				
For the year Jan. 1–Dec. 31, 2016, or other tax year beginning , 2016, ending , 20																																																																				
Your first name and initial Albert T.		Last name Gaytor		See separate instructions.																																																																
If a joint return, spouse's first name and initial Allison A.		Last name Gaytor		Your social security number 266 51 1966																																																																
Home address (number and street). If you have a P.O. box, see instructions. 12340 Cocoshell Road		Apt. no.		Spouse's social security number 266 34 1967																																																																
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Coral Gables, FL 33134				<div style="border: 1px solid black; padding: 2px;"> ▲ Make sure the SSN(s) above and on line 6c are correct. </div>																																																																
Foreign country name		Foreign province/state/county		Foreign postal code																																																																
<div style="display: flex; justify-content: space-between;"> <div> Filing Status Check only one box. </div> <div> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 1 <input type="checkbox"/> Single 2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶ </div> <div style="width: 48%;"> 4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶ 5 <input type="checkbox"/> Qualifying widow(er) with dependent child </div> </div> </div> </div>																																																																				
<div style="display: flex; justify-content: space-between;"> <div> Exemptions If more than four dependents, see instructions and check here ▶ <input type="checkbox"/> </div> <div> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a. b <input checked="" type="checkbox"/> Spouse c Dependents: <table border="1" style="width: 100%; border-collapse: collapse; font-size: 8pt;"> <thead> <tr> <th style="width: 20%;">(1) First name</th> <th style="width: 20%;">Last name</th> <th style="width: 20%;">(2) Dependent's social security number</th> <th style="width: 20%;">(3) Dependent's relationship to you</th> <th style="width: 20%;">(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)</th> </tr> </thead> <tbody> <tr> <td>Crocker</td> <td>Gaytor</td> <td>261 55 1212</td> <td>Son</td> <td><input type="checkbox"/></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> </tbody> </table> </div> <div style="width: 48%;"> Boxes checked on 6a and 6b 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 ▶ </div> </div> </div> </div>						(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)	Crocker	Gaytor	261 55 1212	Son	<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>																																						
(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)																																																																
Crocker	Gaytor	261 55 1212	Son	<input type="checkbox"/>																																																																
				<input type="checkbox"/>																																																																
				<input type="checkbox"/>																																																																
				<input type="checkbox"/>																																																																
<div style="display: flex; justify-content: space-between;"> <div> 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. </div> <div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 10pt;"> <tr> <td style="width: 60%;">7 Wages, salaries, tips, etc. Attach Form(s) W-2</td> <td style="width: 10%; text-align: center;">7</td> <td style="width: 30%; text-align: right;">65,250</td> </tr> <tr> <td>8a Taxable interest. Attach Schedule B if required</td> <td style="text-align: center;">8a</td> <td style="text-align: right;">1,070</td> </tr> <tr> <td>8b Tax-exempt interest. Do not include on line 8a</td> <td style="text-align: center;">8b</td> <td style="text-align: right;">725</td> </tr> <tr> <td>9a Ordinary dividends. Attach Schedule B if required</td> <td style="text-align: center;">9a</td> <td style="text-align: right;">1,580</td> </tr> <tr> <td>9b Qualified dividends</td> <td style="text-align: center;">9b</td> <td style="text-align: right;">1,425</td> </tr> <tr><td>10 Taxable refunds, credits, or offsets of state and local income taxes</td><td style="text-align: center;">10</td><td> </td></tr> <tr><td>11 Alimony received</td><td style="text-align: center;">11</td><td> </td></tr> <tr><td>12 Business income or (loss). Attach Schedule C or C-EZ</td><td style="text-align: center;">12</td><td style="text-align: right;">(828)</td></tr> <tr><td>13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/></td><td style="text-align: center;">13</td><td> </td></tr> <tr><td>14 Other gains or (losses). Attach Form 4797</td><td style="text-align: center;">14</td><td> </td></tr> <tr> <td>15a IRA distributions</td> <td style="text-align: center;">15a</td> <td> </td> </tr> <tr> <td>15b Taxable amount</td> <td style="text-align: center;">15b</td> <td> </td> </tr> <tr> <td>16a Pensions and annuities</td> <td style="text-align: center;">16a</td> <td> </td> </tr> <tr> <td>16b Taxable amount</td> <td style="text-align: center;">16b</td> <td> </td> </tr> <tr><td>17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E</td><td style="text-align: center;">17</td><td> </td></tr> <tr><td>18 Farm income or (loss). Attach Schedule F</td><td style="text-align: center;">18</td><td> </td></tr> <tr><td>19 Unemployment compensation</td><td style="text-align: center;">19</td><td style="text-align: right;">3,900</td></tr> <tr> <td>20a Social security benefits</td> <td style="text-align: center;">20a</td> <td> </td> </tr> <tr> <td>20b Taxable amount</td> <td style="text-align: center;">20b</td> <td> </td> </tr> <tr> <td>21 Other income. List type and amount <u>Gambling winnings and hobby income</u></td> <td style="text-align: center;">21</td> <td style="text-align: right;">5,950</td> </tr> <tr> <td>22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶</td> <td style="text-align: center;">22</td> <td style="text-align: right;">76,922</td> </tr> </table> </div> </div>						7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	65,250	8a Taxable interest. Attach Schedule B if required	8a	1,070	8b Tax-exempt interest. Do not include on line 8a	8b	725	9a Ordinary dividends. Attach Schedule B if required	9a	1,580	9b Qualified dividends	9b	1,425	10 Taxable refunds, credits, or offsets of state and local income taxes	10		11 Alimony received	11		12 Business income or (loss). Attach Schedule C or C-EZ	12	(828)	13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	13		14 Other gains or (losses). Attach Form 4797	14		15a IRA distributions	15a		15b Taxable amount	15b		16a Pensions and annuities	16a		16b Taxable amount	16b		17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17		18 Farm income or (loss). Attach Schedule F	18		19 Unemployment compensation	19	3,900	20a Social security benefits	20a		20b Taxable amount	20b		21 Other income. List type and amount <u>Gambling winnings and hobby income</u>	21	5,950	22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	76,922
7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	65,250																																																																		
8a Taxable interest. Attach Schedule B if required	8a	1,070																																																																		
8b Tax-exempt interest. Do not include on line 8a	8b	725																																																																		
9a Ordinary dividends. Attach Schedule B if required	9a	1,580																																																																		
9b Qualified dividends	9b	1,425																																																																		
10 Taxable refunds, credits, or offsets of state and local income taxes	10																																																																			
11 Alimony received	11																																																																			
12 Business income or (loss). Attach Schedule C or C-EZ	12	(828)																																																																		
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	13																																																																			
14 Other gains or (losses). Attach Form 4797	14																																																																			
15a IRA distributions	15a																																																																			
15b Taxable amount	15b																																																																			
16a Pensions and annuities	16a																																																																			
16b Taxable amount	16b																																																																			
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17																																																																			
18 Farm income or (loss). Attach Schedule F	18																																																																			
19 Unemployment compensation	19	3,900																																																																		
20a Social security benefits	20a																																																																			
20b Taxable amount	20b																																																																			
21 Other income. List type and amount <u>Gambling winnings and hobby income</u>	21	5,950																																																																		
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	76,922																																																																		
<div style="display: flex; justify-content: space-between;"> <div> Adjusted Gross Income </div> <div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 10pt;"> <tr><td>23 Educator expenses</td><td style="text-align: center;">23</td><td> </td></tr> <tr><td>24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ</td><td style="text-align: center;">24</td><td> </td></tr> <tr><td>25 Health savings account deduction. Attach Form 8889</td><td style="text-align: center;">25</td><td> </td></tr> <tr><td>26 Moving expenses. Attach Form 3903</td><td style="text-align: center;">26</td><td> </td></tr> <tr><td>27 Deductible part of self-employment tax. Attach Schedule SE</td><td style="text-align: center;">27</td><td> </td></tr> <tr><td>28 Self-employed SEP, SIMPLE, and qualified plans</td><td style="text-align: center;">28</td><td> </td></tr> <tr><td>29 Self-employed health insurance deduction</td><td style="text-align: center;">29</td><td> </td></tr> <tr><td>30 Penalty on early withdrawal of savings</td><td style="text-align: center;">30</td><td> </td></tr> <tr> <td>31a Alimony paid b Recipient's SSN ▶ <u>667 34 9224</u></td> <td style="text-align: center;">31a</td> <td style="text-align: right;">11,400</td> </tr> <tr><td>32 IRA deduction</td><td style="text-align: center;">32</td><td> </td></tr> <tr><td>33 Student loan interest deduction</td><td style="text-align: center;">33</td><td> </td></tr> <tr><td>34 Tuition and fees. Attach Form 8917</td><td style="text-align: center;">34</td><td> </td></tr> <tr><td>35 Domestic production activities deduction. Attach Form 8903</td><td style="text-align: center;">35</td><td> </td></tr> <tr> <td>36 Add lines 23 through 35</td> <td style="text-align: center;">36</td> <td style="text-align: right;">11,400</td> </tr> <tr> <td>37 Subtract line 36 from line 22. This is your adjusted gross income ▶</td> <td style="text-align: center;">37</td> <td style="text-align: right;">65,522</td> </tr> </table> </div> </div>						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 ▶ <u>667 34 9224</u>	31a	11,400	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	11,400	37 Subtract line 36 from line 22. This is your adjusted gross income ▶	37	65,522																		
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 ▶ <u>667 34 9224</u>	31a	11,400																																																																		
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	11,400																																																																		
37 Subtract line 36 from line 22. This is your adjusted gross income ▶	37	65,522																																																																		

Form 1040 (2016)		Page 2	
Tax and Credits		38	Amount from line 37 (adjusted gross income) 65,522
39a Check <input type="checkbox"/> You were born before January 2, 1952, <input type="checkbox"/> Blind. Total boxes <input type="checkbox"/>			
if: <input type="checkbox"/> Spouse was born before January 2, 1952, <input type="checkbox"/> Blind. checked ▶ 39a <input type="checkbox"/>			
b If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b <input type="checkbox"/>			
40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 12,600			
41 Subtract line 40 from line 38 41 52,922			
42 Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions 42 12,150			
43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 40,772			
44 Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> 44 4,971			
45 Alternative minimum tax (see instructions). Attach Form 6251 45			
46 Excess advance premium tax credit repayment. Attach Form 8962 46			
47 Add lines 44, 45, and 46 47 4,971			
48 Foreign tax credit. Attach Form 1116 if required 48			
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 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			
56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- 56 4,971			
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 type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s) 62			
63 Add lines 56 through 62. This is your total tax 63 4,971			
Payments		64	Federal income tax withheld from Forms W-2 and 1099 6,510
65 2016 estimated tax payments and amount applied from 2015 return 65			
66a Earned income credit (EIC) 66a			
b Nontaxable combat pay election 66b 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 6,510			
Refund		75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid 1,539
76a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/> 76a 1,539			
b Routing number c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
d Account number			
77 Amount of line 75 you want applied to your 2017 estimated tax ▶ 77			
Amount You Owe		78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions 78
79 Estimated tax penalty (see instructions) 79			
Third Party Designee		Do you want to allow another person to discuss this return with the IRS (see instructions)? <input type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No	
Designee's name <input type="text"/>		Phone no. <input type="text"/>	
		Personal identification number (PIN) <input type="text"/>	
Sign Here		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	
Your signature <input type="text"/>		Date <input type="text"/>	
Spouse's signature. If a joint return, both must sign. <input type="text"/>		Date <input type="text"/>	
		Your occupation Boat Captain	
		Spouse's occupation Retail Store Owner	
		Daytime phone number <input type="text"/>	
		If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>	
Paid Preparer Use Only		Print/Type preparer's name <input type="text"/>	
		Preparer's signature <input type="text"/>	
		Date <input type="text"/>	
		Check <input type="checkbox"/> if self-employed	
		PTIN <input type="text"/>	
		Firm's name <input type="text"/>	
		Firm's EIN <input type="text"/>	
		Firm's address <input type="text"/>	
		Phone no. <input type="text"/>	

SCHEDULE B
(Form 1040A or 1040)Department of the Treasury
Internal Revenue Service (99)**Interest and Ordinary Dividends**▶ **Attach to Form 1040A or 1040.**
▶ **Information about Schedule B and its instructions is at www.irs.gov/scheduleb.**

OMB No. 1545-0074

2016
Attachment
Sequence No. **08**

Name(s) shown on return

Albert T. and Allison A. Gaylor

Your social security number

266-51-1966

Part I**Interest**(See instructions
on back and the
instructions for
Form 1040A, or
Form 1040,
line 8a.)**Note:** If you
received a Form
1099-INT, Form
1099-OID, or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the total interest
shown on that
form.

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

Vizcaya National Bank
Florida Electric**Amount**375
695

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

2 1,070
3
4 1,070**Note:** If line 4 is over \$1,500, you must complete Part III.**Part II****Ordinary Dividends**(See instructions
on back and the
instructions for
Form 1040A, or
Form 1040,
line 9a.)**Note:** If you
received a Form
1099-DIV or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the ordinary
dividends shown
on that form.

- 5**
- List name of payer ▶

Everglades Bank Corp.
Grapefruit Mutual Fund
Florida Sugar Corp.**Amount**925
155
500

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

6 1,580**Note:** If line 6 is over \$1,500, you must complete Part III.**Part III**
Foreign Accounts and Trusts

(See instructions on back.)

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

- 7a**
- At any time during 2016, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions

Yes **No**

X

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

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

- 8**
- During 2016, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions on back

X

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

Cat. No. 17146N

Schedule B (Form 1040A or 1040) 2016

**SCHEDULE C
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Profit or Loss From Business**
(Sole Proprietorship)▶ **Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.**
▶ **Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.**

OMB No. 1545-0074

2016
Attachment
Sequence No. **09**

Name of proprietor Allison A. Gaylor		Social security number (SSN) 266-34-1967
A Principal business or profession, including product or service (see instructions) Retail Store—Auto Accessories	B Enter code from instructions ▶ 441300	
C Business name. If no separate business name, leave blank. Plus Two Cones	D Employer ID number (EIN), (see instr.) 987321654	
E Business address (including suite or room no.) ▶ 617 Crandon Boulevard City, town or post office, state, and ZIP code Key Biscayne, FL 33149		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2016, check here <input checked="" type="checkbox"/>		
I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
J If "Yes," did you or will you file required Forms 1099? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	63,550
2 Returns and allowances	2	600
3 Subtract line 2 from line 1	3	62,950
4 Cost of goods sold (from line 42)	4	39,800
5 Gross profit. Subtract line 4 from line 3	5	23,150
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	23,150

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

8 Advertising	8	3,100	18 Office expense (see instructions)	18	1,375
9 Car and truck expenses (see instructions)	9	918	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	7,495
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	432
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	625
15 Insurance (other than health)	15	795	23 Taxes and licenses	23	510
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	790
b Other	16b	1,750	b Deductible meals and entertainment (see instructions)	24b	75
17 Legal and professional services	17	310	25 Utilities	25	980
			26 Wages (less employment credits)	26	3,400
			27a Other expenses (from line 48)	27a	1,423
			b Reserved for future use	27b	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28	23,978			
29 Tentative profit or (loss). Subtract line 28 from line 7	29	(828)			
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30					
31 Net profit or (loss). Subtract line 30 from line 29.	31	(828)			
<ul style="list-style-type: none"> • 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). <ul style="list-style-type: none"> • If you checked 32a, enter the loss on both Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited. 					
32a <input checked="" type="checkbox"/> All investment is at risk. 32b <input type="checkbox"/> Some investment is not at risk.					

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11334P

Schedule C (Form 1040) 2016

Schedule C (Form 1040) 2016

Allison A. Gaytor

266-34-1967

Page **2****Part III Cost of Goods Sold** (see instructions)

33	Method(s) used to value closing inventory: a <input checked="" type="checkbox"/> Cost b <input type="checkbox"/> Lower of cost or market c <input type="checkbox"/> Other (attach explanation)		
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	0
36	Purchases less cost of items withdrawn for personal use	36	77,900
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs	39	
40	Add lines 35 through 39	40	77,900
41	Inventory at end of year	41	38,100
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	39,800

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

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ 09 / 01 / 16

44 Of the total number of miles you drove your vehicle during 2016, enter the number of miles you used your vehicle for:

a Business 1,700 b Commuting (see instructions) 5,000 c Other 6,472

45 Was your vehicle available for personal use during off-duty hours? ☒ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use? ☒ Yes ☐ No

47a Do you have evidence to support your deduction? ☒ Yes ☐ No

b If "Yes," is the evidence written? ☒ Yes ☐ No

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

Business gifts (only deduct \$25 per gift)	150
Uniforms (uniforms purchased for employees are deductible)	400
Telephone	800
Miscellaneous	73
Fines (non-deductible fines and penalties)	0
48 Total other expenses. Enter here and on line 27a	48 1,423

Schedule C (Form 1040) 2016

Qualified Dividends and Capital Gain Tax Worksheet—Line 44

Keep for Your Records



Before you begin: ✓ See the earlier instructions for line 44 to see if you can use this worksheet to figure your tax.
 ✓ Before completing this worksheet, complete Form 1040 through line 43.
 ✓ 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.	40,772
2. Enter the amount from Form 1040, line 9b*	2.	1,425
3. Are you filing Schedule D?*		
<input type="checkbox"/> Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 is blank or a loss, enter -0-.	} 3.	0
<input checked="" type="checkbox"/> No. Enter the amount from Form 1040, line 13.		
4. Add lines 2 and 3	4.	1,425
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.	0
6. Subtract line 5 from line 4. If zero or less, enter -0-	6.	1,425
7. Subtract line 6 from line 1. If zero or less, enter -0-	7.	39,347
8. Enter:		
\$37,650 if single or married filing separately, \$75,300 if married filing jointly or qualifying widow(er), \$50,400 if head of household.	} 8.	75,300
9. Enter the smaller of line 1 or line 8	9.	40,772
10. Enter the smaller of line 7 or line 9	10.	39,347
11. Subtract line 10 from line 9. This amount is taxed at 0%	11.	1,425
12. Enter the smaller of line 1 or line 6	12.	1,425
13. Enter the amount from line 11	13.	1,425
14. Subtract line 13 from line 12	14.	0
15. Enter:		
\$415,050 if single, \$233,475 if married filing separately, \$466,950 if married filing jointly or qualifying widow(er), \$441,000 if head of household.	} 15.	466,950
16. Enter the smaller of line 1 or line 15	16.	40,772
17. Add lines 7 and 11	17.	40,772
18. Subtract line 17 from line 16. If zero or less, enter -0-	18.	0
19. Enter the smaller of line 14 or line 18	19.	0
20. Multiply line 19 by 15% (0.15)	20.	0
21. Add lines 11 and 19	21.	1,425
22. Subtract line 21 from line 12	22.	0
23. Multiply line 22 by 20% (0.20)	23.	0
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.	4,971
25. Add lines 20, 23, and 24	25.	4,971
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.	5,189
27. Tax on all taxable income. Enter the smaller 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.	4,971

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