

NEW YORK CITY DEPARTMENT OF FINANCE

www.nyc.gov/Finance



**SOFTWARE VENDOR TEST PACKAGE
FOR
UNINCORPORATED BUSINESS TAX FOR
ESTATES AND TRUSTS
WITH
BUSINESS TAX E-FILE
TAX YEAR 2013
VERSION 1.0
November 22, 2013**

Revision History

Version	Author	Date	Change Highlights
1.0	Lawrence Sporn / Kit Ling Horne	11/22/2013	Initial Version

TEST

This package describes the New York City (NYC) Acceptance Testing System procedures for software developers participating in the NYC Business Tax e-file Program (BTeFile).

WHO MUST TEST

All software developers participating in the NYC BTeFile Program must test.

WHAT TO TEST

The tests verify that the e-file software creates a complete return, carries appropriate values from one line/form to another, formats and transmits NYC returns according to the XML specifications.

Software developers must test all the NYC Unincorporated Business Tax for Individuals (UBTI) forms that they support. Before testing you should inform NYC which UBTI forms you support by email to BTeFile@finance.nyc.gov.

TEST CASE TO SUBMIT

All vendors participating in UBTI-EIN Business Tax e-File must submit the following test scenarios:

Test	Taxpayer Name	SSN	Primary Form	Associated Forms
1	CHER UBTI-EIN TC ONE	00-4043211	NYC 202EIN	Two Federal Form 1040 Schedule C One Federal Form 1040 Schedule F

- If you do not support one of the primary forms do not submit that test.
- If you do not support one or more of the forms associated with a specific test case, submit the test with the unsupported form(s) as a PDF attachment(s). If this is done, an email must be sent to BTeFile@finance.nyc.gov indicating the forms sent as PDF attachments
- Contact NYC BTeFile@finance.nyc.gov if you desire to send additional test returns not covered in this test package.

WHEN TO TEST

Testing for UBTI-EIN Trust and Estate filers is scheduled to begin November 22, 2013. To ensure adequate time for testing before the filing season, software developers should submit their initial NYC test files as soon as possible. There is no cutoff date for testing with NYC, as long as the IRS is still accepting test returns. We do not require software developers to pass federal testing before testing with NYC. Software developers may conduct federal and City testing concurrently if the IRS allows it.

TRANSMITTING TEST FILES

Software developers must transmit NYC test files through the IRS MeF system. You will get an acknowledgment from the IRS. If your test file is accepted by the IRS, NYC will retrieve your test files. If your test file is rejected by the IRS, you must correct the error and re-transmit. You may transmit an incomplete set of test cases during testing. However, a final set of acceptable test returns must be submitted in order to be accepted into the NYC BTeFile Program.

When your test has been transmitted to the IRS, you must send an email to BTeFile@Finance.nyc.gov. This email must include the test case(s) being submitted, and any deviation from the test data.

COMMUNICATING TEST RESULTS

Software Developers will be given confirmation by telephone and email from the New York City Business Tax e-File Coordinator when software has been successfully tested and approved. Only approved software may be released and distributed by the developer. NYC will make every effort to provide test results to software developers within 48 hours, Monday through Friday.

TEST ACKNOWLEDGMENT

For each submission a software developer sends through the IRS, DOF will acknowledge. The acknowledgment they receive will be either positive (ACK) or negative (NACK). The acknowledgment will be sent back to the IRS system for the vendor to pick up.

APPROVAL OF E-FILE SOFTWARE

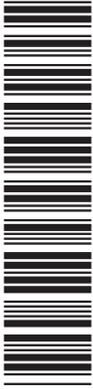
To be accepted into the NYC Business Tax e-file program, software developers are required to successfully complete the NYC testing, in addition to completing the IRS testing. Once software developers successfully complete the NYC test, NYC will inform them by email that their e-file software has been approved for NYC BTeFile. A list of approved BTeFile software packages will be posted on NYC Department of Finance's Web site, with a link to the software Web site (if provided by the software developers).

UBTI-EIN Test Case One

Begins on the next page

Taxpayer name	CHER UBTI-EIN TC ONE
EIN	00-4043211
Primary Form	NYC 202EIN
Associated Form(s)	None
Attachments	Two Federal Form 1040 Schedule C One Federal Form 1040 Schedule F
Purpose of Test	Generic Form
Other Instructions	None

TESTS



Individuals and Single-Member LLCs using SSN as their primary identifier must use Form NYC-202
UNINCORPORATED BUSINESS TAX RETURN 2013
FOR ESTATES AND TRUSTS

For CALENDAR YEAR 2013 or FISCAL YEAR beginning _____, 2013 and ending _____

- Check box if you are engaged in a **fully exempt** unincorporated business activity
- Check box if you are engaged in a **partially exempt** unincorporated business activity
- Amended return** **Final return** - Check box if you have ceased operations. Attach copy of your entire federal Form 1040 and statement showing disposition of business property.
- Check box if you claim any 9/11/01-related federal tax benefits (see inst.) Enter 2-character special condition code, if applicable. (See instructions): **A** **7**

Business name CHER UBTI-EIN TC ONE	
In Care Of ELLEN WHITE, FIDUCIARY	
Business address (number and street) 1500 TEST RUN	
City and State EUGENE, OR	Zip Code 97401
Business Telephone Number 458-123-4567	Date business began 06-01-2008
Date business ended	

EMAIL ADDRESS email@anywhere.com
EMPLOYER IDENTIFICATION NUMBER 00-4000085
BUSINESS CODE NUMBER FROM FEDERAL SCHEDULE C: 332000

SCHEDULE A

Computation of Tax

BEGIN WITH SCHEDULE B ON PAGE 3. COMPLETE ALL OTHER SCHEDULES. TRANSFER APPLICABLE AMOUNTS TO SCHEDULE A.

A. Payment		Amount included with Form NYC-200V or being paid electronically	Payment Amount
1.	Business income (from page 3, Schedule B, line 28)	310,473	310,473
2.	Business allocation percentage from Schedule C, line 5. (If not allocating, enter 100%)	21.13 %	
3.	If line 2 is less than 100%, enter income or loss on NYC real property (see instructions)		
4.	Balance (line 1 less line 3)	310,473	310,473
5.	Multiply line 4 by the business allocation percentage on line 2	65,603	65,603
6.	Amount from line 3 (NYC real property income and gain not subject to allocation) (see instructions)		
7.	Investment income (from page 3, Schedule B, line 27)		
8.	Investment allocation percentage (from page 4, Schedule D, line 2)		
9.	Multiply line 7 by the investment allocation percentage from line 8 (see instructions)	0	0
10.	Total before NOL deduction (sum of lines 5, 6 and 9 or line 1 and line 9) (see instructions for line 2)	65,603	65,603
11.	Deduct: NYC net operating loss deduction (from Form NYC-NOLD-UBTI, line 9) (see instructions)		
12.	Balance before allowance for taxpayer's services (line 10 less line 11)	65,603	65,603
13.	Less: allowance for taxpayer's services - do not enter more than 20% of line 12 or \$10,000, whichever is less (see instr)	10,000	10,000
14.	Balance before exemption (line 12 less line 13)	55,603	55,603
15.	Less: exemption - \$5,000 (taxpayer operating more than one business or short period taxpayer, see instructions)	5,000	5,000
16.	Taxable income (line 14 less line 15) (see instructions)	50,603	50,603
17.	TAX: 4% of amount on line 16	2,024	2,024
18.	Add: Sales tax addback (see instructions)		
19.	Total tax before business tax credit (add line 17 and line 18)	2,024	2,024
20.	Less: business tax credit (select the applicable credit condition from the Business Tax Credit Computation schedule on the bottom of page 2 and enter amount) (see instructions)	2,024	2,024
21.	UNINCORPORATED BUSINESS TAX (line 19 less line 20) (see instructions)	0	0

Name CHER UBTI-EIN TC ONE

EIN 00-4000085

22a. Credits from Form NYC-114.5 (attach form) (see instructions)	22a.														
22b. Credits from Form NYC-114.6 (attach form) (see instructions)	22b.														
22c. Credits from Form NYC-114.8 (attach form) (see instructions)	22c.														
22d. Credits from Form NYC-114.10 (attach form) (see instructions)	22d.														
23. Net tax after credits (line 21 less sum of lines 22a, 22b, 22c and 22d)	23.		0												
24. Payment of estimated Unincorporated Business Tax, including carryover credit from preceding year and payment with extension, NYC-EXT (see instructions)	24.		1,000												
25. If line 23 is larger than line 24, enter balance due	25.														
26. If line 23 is smaller than line 24, enter overpayment	26.		1,000												
27a. Interest (see instructions)	27a.														
27b. Additional charges (see instructions)	27b.														
27c. Penalty for underpayment of estimated tax (attach form NYC-221) ...	27c.														
28. Total of lines 27a, 27b and 27c	28.														
29. Net overpayment (line 26 less line 28) (see instructions)	29.		1,000												
30. Amount of line 29 to be: (a) Refunded - <input checked="" type="checkbox"/> Direct deposit - fill out line 30c OR <input type="checkbox"/> Paper check	30a.		800												
(b) Credited to 2014 Estimated Tax on Form NYC-5UBTI	30b.		200												
30c. Routing Number <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>2</td><td>2</td><td>2</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table> Account Number <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>7777-55555</td></tr></table> ACCOUNT TYPE Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/>	2	2	2	0	0	0	0	0	0	0	7777-55555				
2	2	2	0	0	0	0	0	0	0						
7777-55555															
31. Total remittance due (see instructions) Enter payment amount on line A above	31.														
32. NYC rent deducted on federal tax return or NYC rent from Schedule C, Part 1. (THIS LINE MUST BE COMPLETED).	32.		0												
33. Gross receipts or sales from federal return	33.		760,182												

Business Tax Credit Computation

- If the amount on page 1, line 19, is \$3,400 or less, your credit on line 20 is the entire amount of tax on line 19. (NO TAX WILL BE DUE.)
- If the amount on page 1, line 19, is \$5,400 or over, no credit is allowed. Enter "0" on line 20.

- If the amount on page 1, line 19, is over \$3,400 but less than \$5,400, your credit is computed by the following formula:

$$\text{amount on pg. 1, line 19} \times \left(\frac{\$5,400 \text{ minus tax on line 19}}{\$2,000} \right) = \text{your credit}$$

Prepayments of Estimated Tax Computation

PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 24	DATE	AMOUNT
A. Payment with declaration, Form NYC-5UBTI (1)		
B. Payment with Notice of Estimated Tax Due (2)	04-15-2013	200
C. Payment with Notice of Estimated Tax Due (3)	06-15-2013	600
D. Payment with Notice of Estimated Tax Due (4)	10-15-2013	200
E. Payment with extension, Form NYC-EXT		
F. Overpayment credited from preceding year		
G. TOTAL of A, B, C, D, E, F (enter on Schedule A, line 24)		1,000



Name CHER UBTI-EIN TC ONE

EIN 00-40000085

SCHEDULE B Computation of Total Income

Part 1 Items of business income, gain, loss or deduction

1. Net profit (or loss) from business, farming or professions as reported for federal tax purposes from federal Schedule C, C-EZ or F (Form 1040) (see instructions)	1.	306,223	
2. If entering income from more than one federal Schedule C, C-EZ or F (Form 1040), check this box. Enter the number of Schedules C, C-EZ or F attached: <input checked="" type="checkbox"/> <u>3</u>	2.		
3. Gain (or loss) from sale of business personal property or business real property (attach federal Schedule D or Form 4797) (see instructions)	3.		
4. Net amount of rental or royalty income from business personal property or business real property (attach federal Schedule E) (see instructions)	4.		
5. Other business income (or loss) (attach schedule) (see instructions)	5.		
6. Total federal income (or loss) (combine lines 1 through 5)	6.	306,223	
7. Subtract net income or gain (or add net loss) from rental, sale or exchange of real property situated outside New York City, if included in line 3 or 4 above (attach schedule) (see instructions)	7.		
8. Total income before New York City modifications (combine lines 6 and 7)	8.	306,223	

Part 2 New York City modifications (see instructions for Schedule B, part 2)

ADDITIONS

9. All income taxes and Unincorporated Business Taxes	9.	8,250	
10a. Sales and use tax credit	10a.		
10b. Relocation credits	10b.		
10c. Expenses related to exempt income	10c.		
10d. Depreciation adjustments (attach Form NYC-399 and/or NYC-399Z)	10d.		
10e. Real estate additions (see instructions)	10e.		
11. Other additions (attach schedule) (see instructions)	11.	10,000	
12. Total additions (add lines 9 through 11)	12.	18,250	

SUBTRACTIONS

13. All income tax and Unincorporated Business Tax refunds (included in part 1)	13.		
14. Sales and use tax refunds from vendors or NY State (included in part 1 and also included on page 1, Schedule A, line 18)	14.		
15. Wages and salaries subject to federal jobs credit (attach federal Form 5884)	15.		
16. Depreciation adjustment (attach Form NYC-399 and/or NYC-399Z)	16.		
17. Exempt income included in part 1 (attach schedule)	17.		
18. 50% of dividends (see instructions)	18.		
19. Real estate subtractions (see instructions)	19.		
20. Other subtractions (attach schedule) (see instructions)	20.	5,000	
21. Total subtractions (add lines 13 through 20)	21.	5,000	
22. NYC modifications (combine lines 12 and 21)	22.	13,250	
23. Total income (combine lines 8 and 22)	23.	319,473	
24. Less: Charitable contributions (not to exceed 5% of line 23) (see instructions)	24.	9,000	
25. Balance (line 23 less line 24)	25.	310,473	
26. Investment income - (complete lines a through g below) (see instructions)			
(a) Dividends from stocks held for investment	26a.		
(b) Interest from investment capital (include non-exempt governmental obligations) (itemize on rider)	26b.		
(c) Net capital gain (loss) from sales or exchanges of securities held for investment	26c.		
(d) Income from assets included on line 3 of Schedule D	26d.		
(e) Add lines 26a through 26d inclusive	26e.		
(f) Deductions directly or indirectly attributable to investment income	26f.		
(g) Interest on bank accounts included in income reported on line 26d ..26g.			
27. Investment income (line 26e less line 26f) (enter on page 1, Sch. A, line 7)	27.		
28. BUSINESS INCOME (line 25 less line 27) (enter here and transfer amount to pg 1, Sch. A, line 1)	28.	310,473	



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Name CHER UBTI-EIN TC ONE

EIN 00-4000085

ALLOCATION OF BUSINESS INCOME - Taxpayers who carry on business both inside and outside New York City should complete Schedule C, Parts 1, 2 and 3 (below). Taxpayers who do not carry on business both inside and outside New York City should omit Schedule C, Parts 1 and 2 (below), enter 100% on Part 3, line 5 and enter 100% on Schedule A, line 2.

SCHEDULE C Complete this schedule if business is carried on both inside and outside New York City

Part 1 List location of each place of business **INSIDE** New York City, nature of activities at each location (manufacturing, sales office, executive office, public warehouse, contractor, converter, etc.), and number of employees, their wages, salaries and duties at each location.

Complete Address	Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
NUMBER AND STREET 123 Test Street CITY Brooklyn STATE NY ZIP 11201	0	Catering	2	19,475	Catering
NUMBER AND STREET					
CITY STATE ZIP					
NUMBER AND STREET					
CITY STATE ZIP					
NUMBER AND STREET					
CITY STATE ZIP					
Total	0		2	19,475	

Part 2 List location of each place of business **OUTSIDE** New York City, nature of activities at each location (manufacturing, sales office, executive office, public warehouse, contractor, converter, etc.), and number of employees, their wages, salaries and duties at each location.

Complete Address	Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
NUMBER AND STREET 1500 Test Drive CITY Fort Dodge IA STATE IA ZIP 50501	0	Food Preparation	5	37,150	Food Preparation
NUMBER AND STREET					
CITY STATE ZIP					
NUMBER AND STREET					
CITY STATE ZIP					
NUMBER AND STREET					
CITY STATE ZIP					
Total	0		5	37,150	

Part 3 Formula Basis Allocation of Income

DESCRIPTION OF ITEMS USED AS FACTORS	COLUMN A - NEW YORK CITY	COLUMN B - EVERYWHERE	COLUMN C
1. Average value of the real and tangible personal property of the business (see instr)			PERCENTAGE IN NEW YORK CITY (COLUMN A DIVIDED BY COLUMN B)
a. Business real property owned 1a.		75,000	
b. Business real property rented from others (rent x 8) 1b.			
c. Business tangible personal property owned 1c.		7,500	
d. Business tangible personal property rented from others (rent x 8) 1d.			
e. Total of lines 1a - 1d 1e.		82,500	
f. Multiply Column C of line 1e by 16.5 1f.			0.0000
2a. Wages, salaries and other personal service compensation paid to employees during the year 2a.	19,475	56,625	34.3929 %
2b. Multiply Column C of line 2a by 16.5 2b.			567.4829
3a. Gross sales of merchandise or charges for services during the year 3a.	175,350	760,182	23.0668 %
3b. Multiply Column C of line 3a by 67 3b.			1,545.4756
Weighted Factor Allocation			
4a. Add Column C, lines 1f, 2b and 3b 4a.			2,112.9585
4b. Divide line 4a by 100 if no factors are missing. If a factor is missing, divide line 4a by the total of the weights of the factors present. Enter as percentage. Round to the nearest one hundredth of a percentage point 4b.			21.13 %
Business Allocation Percentage			
5. Enter percentage from line 4b. Transfer to page 1, Schedule A, line 2. See instructions 5.			21.13 %
6. IS ANY PLACE OF BUSINESS LISTED IN PARTS 1 AND 2 LOCATED IN YOUR HOME? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
7. DID YOU CLAIM A DEDUCTION FOR EXPENSES OF AN OFFICE IN YOUR HOME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			

SCHEDULE D Investment Capital and Allocation and Cash Election

A DESCRIPTION OF INVESTMENT LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)	B No. of Shares or Amount of Securities	C Average Value	D Liabilities Attributable to Investment Capital	E Net Average Value (column C minus column D)	F Issuer's Allocation Percentage	G Value Allocated to NYC (column E x column F)
1. Totals (including items on rider)>						
2. Investment allocation percentage (line 1G divided by line 1E, round to the nearest one hundredth of a percentage point)					%	
3. Cash - (To treat cash as investment capital, you must include it on this line.)>						
4. Investment capital. Total of lines 1E and 3E>						

Name CHER UBTI-EIN TC ONE

EIN 00-4000085

SCHEDULE E

If you are taking a Net Operating Loss Deduction this year, please attach Form NYC-NOLD-UBTI

SCHEDULE F The following information must be entered for this return to be complete. (See Instructions)

- Nature of business or profession: Catering Food Services/Blacksmith/Corn & Cotton
 - New York State Sales Tax ID Number - Enter 9, 10 or 11 Digits: 1 1 1 1 1 1 1 1 1
 - Did you file a New York City Unincorporated Business Tax Return for the following years:
2011: YES NO **2012:** YES NO
 If "NO," state reason: _____
 - Enter home address: 123 Test Street, Brooklyn, NY Zip Code: 11201
 - If business terminated during the current taxable year, state date terminated. (mm-dd-yy) _____
 (Attach a statement showing disposition of business property.)
 - Has the Internal Revenue Service or the New York State Department of Taxation and Finance increased or decreased any taxable income (loss) reported in any tax period, or are you currently being audited? YES NO
 If "YES", by whom? Internal Revenue Service State period(s): Beg.: 01-01-09 End.: 12-31-10
MM-DD-YY MM-DD-YY
 New York State Department of Taxation and Finance State period(s): Beg.: _____ End.: _____
MM-DD-YY MM-DD-YY
 - Has Form NYC-115 (Report of Federal/State Change in Taxable Income) been filed?..... YES NO
 - Did you calculate a depreciation deduction by the application of the federal Accelerated Cost Recovery System (ACRS) (see instr.)? YES NO
 - Were you a participant in a "Safe Harbor Leasing" transaction during the period covered by this return? YES NO
 - Is this taxpayer subject to the Commercial Rent Tax? YES NO
 - If "YES", were all required Commercial Rent Tax Returns filed? YES NO
- Please enter Employer Identification Number _____ and Account ID _____

CERTIFICATION

I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete. Firm's Email Address: _____
 I authorize the Dept. of Finance to discuss this return with the preparer listed below. (See instructions)YES

SIGN HERE: Signature of taxpayer	Title	Date	04-15-2014	Preparer's Social Security Number or PTIN
Preparer's signature	Preparer's printed name <u>Johnny Appleseed</u>	Check if self-employed <input type="checkbox"/>	Date	<u>04-15-2014</u>
<u>JA Tax Return Prep</u>	<u>123 Tax Preparer Street, Eugene OR</u>	<u>97401</u>	Firm's Employer Identification Number	
▲ Firm's name (or yours, if self-employed)	▲ Address	▲ Zip Code	<u>97-00000000</u>	

MAILING INSTRUCTIONS

Attach copy of federal Form 1040, Schedule C, Schedule C-EZ or Schedule F. If this is a final return, attach an entire copy of federal Form 1040. Make remittance payable to the order of NYC DEPARTMENT OF FINANCE. Payment must be made in U.S. dollars and drawn on a U.S. bank. To receive proper credit, you must enter your correct Employer Identification Number on your tax return and remittance. The due date for the calendar year 2013 return is on or before April 15, 2014. For fiscal years beginning in 2013, file on or before the 15th day of the fourth month following the close of the fiscal year.

ALL RETURNS EXCEPT REFUND RETURNS
 NYC DEPARTMENT OF FINANCE
 UNINCORPORATED BUSINESS TAX
 P.O. BOX 5060
 KINGSTON, NY 12402-5060

REMITTANCES
PAY ONLINE WITH FORM NYC-200V
AT NYC.GOV/FINANCE
 OR
Mail Payment and Form NYC-200V ONLY to:
 NYC DEPARTMENT OF FINANCE
 P.O. BOX 3646
 NEW YORK, NY 10008-3646

RETURNS CLAIMING REFUNDS
 NYC DEPARTMENT OF FINANCE
 UNINCORPORATED BUSINESS TAX
 P.O. BOX 5050
 KINGSTON, NY 12402-5050



60351391

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

**Profit or Loss From Business
(Sole Proprietorship)**

► For information on Schedule C and its instructions, go to www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2013
Attachment
Sequence No. **09**

Name of proprietor <u>CHER UBTI-EIN TC ONE</u>		Social security number (SSN)
A Principal business or profession, including product or service (see instructions) <u>Catering Food Services</u>	B Enter code from instructions ▶ <u>7 2 2 3 0 0</u>	
C Business name. If no separate business name, leave blank.	D Employer ID number (EIN), (see instr.) <u>0 0 4 0 4 3 2 1 1</u>	
E Business address (including suite or room no.) ▶ <u>1500 Test Drive</u> City, town or post office, state, and ZIP code <u>Fort Dodge, IA 50501</u>		
F Accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you "materially participate" in the operation of this business during 2013? If "No," see instructions for limit on losses <input type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2013, check here <input type="checkbox"/>		
I Did you make any payments in 2013 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 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	175350
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	175350
4 Cost of goods sold (from line 42)	4	28900
5 Gross profit. Subtract line 4 from line 3	5	146450
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	146450

Part II Expenses

Enter expenses for business use of your home only on line 30.

8 Advertising	8	1250	18 Office expense (see instructions)	18	350
9 Car and truck expenses (see instructions)	9	2500	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	956
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	2135
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	295
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a	9600	a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17	425	25 Utilities	25	540
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28	18051	26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29	128399	27a Other expenses (from line 48)	27a	
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30		27b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	128399			
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.					32a <input type="checkbox"/> All investment is at risk. 32b <input type="checkbox"/> Some investment is not at risk.

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 type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . .	35	49238
36	Purchases less cost of items withdrawn for personal use	36	
37	Cost of labor. Do not include any amounts paid to yourself	37	19475
38	Materials and supplies	38	863
39	Other costs	39	
40	Add lines 35 through 39	40	69576
41	Inventory at end of year	41	40676
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	28900

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) ▶ <u>01 / 01 / 2013</u>
44	Of the total number of miles you drove your vehicle during 2013, enter the number of miles you used your vehicle for: a Business <u>35000</u> b Commuting (see instructions) _____ c Other _____
45	Was your vehicle available for personal use during off-duty hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use?. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
47a	Do you have evidence to support your deduction? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

48	Total other expenses. Enter here and on line 27a	48	
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**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

**Profit or Loss From Business
(Sole Proprietorship)**

► For information on Schedule C and its instructions, go to www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2013
Attachment
Sequence No. **09**

Name of proprietor CHER UBTI-EIN TC ONE		Social security number (SSN)
A Principal business or profession, including product or service (see instructions) Blacksmith	B Enter code from instructions ▶ 3 3 2 0 0 0	
C Business name. If no separate business name, leave blank.	D Employer ID number (EIN), (see instr.) 0 0 4 0 4 3 2 1 1	
E Business address (including suite or room no.) ▶ 500 Test Drive City, town or post office, state, and ZIP code Omaha, NE		
F Accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
G Did you "materially participate" in the operation of this business during 2013? 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 2013, check here <input type="checkbox"/>		
I Did you make any payments in 2013 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 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			349832
2 Returns and allowances	2			
3 Subtract line 2 from line 1	3			349832
4 Cost of goods sold (from line 42)	4			148350
5 Gross profit. Subtract line 4 from line 3	5			201482
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			201482

Part II Expenses

Enter expenses for business use of your home only on line 30.

8 Advertising	8	1000	18 Office expense (see instructions)	18	528
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	1425
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17	425	25 Utilities	25	780
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27a Other expenses (from line 48)	27a	
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30		27b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31				197324
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.					

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

**SCHEDULE F
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Farming

▶ Attach to Form 1040, Form 1040NR, Form 1041, Form 1065, or Form 1065-B.
▶ Information about Schedule F and its separate instructions is at www.irs.gov/schedulef.

OMB No. 1545-0074

2013

Attachment
Sequence No. **14**

Name of proprietor CHER UBTI-EIN TC ONE		Social security number (SSN)	
A Principal crop or activity Corn and Cotton	B Enter code from Part IV ▶ 1 1 1 2 1 0	C Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	D Employer ID number (EIN), (see instr)
E Did you "materially participate" in the operation of this business during 2013? If "No," see instructions for limit on passive losses		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
F Did you make any payments in 2013 that would require you to file Form(s) 1099 (see instructions)?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
G If "Yes," did you or will you file required Forms 1099?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part I Farm Income—Cash Method. Complete Parts I and II (Accrual method. Complete Parts II and III, and Part I, line 9.)

1a Sales of livestock and other resale items (see instructions)	1a	235000		
b Cost or other basis of livestock or other items reported on line 1a	1b			
c Subtract line 1b from line 1a	1c			235000
2 Sales of livestock, produce, grains, and other products you raised	2			
3a Cooperative distributions (Form(s) 1099-PATR)	3a		3b Taxable amount	3b
4a Agricultural program payments (see instructions)	4a		4b Taxable amount	4b
5a Commodity Credit Corporation (CCC) loans reported under election	5a		5c Taxable amount	5c
b CCC loans forfeited	5b		5c Taxable amount	5c
6 Crop insurance proceeds and federal crop disaster payments (see instructions)				
a Amount received in 2013	6a		6b Taxable amount	6b
c If election to defer to 2014 is attached, check here <input type="checkbox"/>	6d Amount deferred from 2012		6d	6d
7 Custom hire (machine work) income	7			
8 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	8			
9 Gross income. Add amounts in the right column (lines 1c, 2, 3b, 4b, 5a, 5c, 6b, 6d, 7, and 8). If you use the accrual method, enter the amount from Part III, line 50 (see instructions)	9			235000

Part II Farm Expenses—Cash and Accrual Method. Do not include personal or living expenses (see instructions).

10 Car and truck expenses (see instructions). Also attach Form 4562	10		23 Pension and profit-sharing plans	23	
11 Chemicals	11	2000	24 Rent or lease (see instructions):		
12 Conservation expenses (see instructions)	12		a Vehicles, machinery, equipment	24a	18000
13 Custom hire (machine work)	13		b Other (land, animals, etc.)	24b	
14 Depreciation and section 179 expense (see instructions)	14		25 Repairs and maintenance	25	2000
15 Employee benefit programs other than on line 23	15		26 Seeds and plants	26	
16 Feed	16	75000	27 Storage and warehousing	27	
17 Fertilizers and lime	17		28 Supplies	28	3000
18 Freight and trucking	18	20000	29 Taxes	29	15000
19 Gasoline, fuel, and oil	19	15000	30 Utilities	30	10000
20 Insurance (other than health)	20	7000	31 Veterinary, breeding, and medicine	31	8500
21 Interest:			32 Other expenses (specify):		
a Mortgage (paid to banks, etc.)	21a		a <u>Legal Fees</u>	32a	3000
b Other	21b		b <u>Tools</u>	32b	1000
22 Labor hired (less employment credits)	22	75000	c _____	32c	
			d _____	32d	
			e _____	32e	
			f _____	32f	

33 Total expenses. Add lines 10 through 32f. If line 32f is negative, see instructions	33	254500		
34 Net farm profit or (loss). Subtract line 33 from line 9	34			(19500)
If a profit, stop here and see instructions for where to report. If a loss, complete lines 35 and 36.				
35 Did you receive an applicable subsidy in 2013? (see instructions)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Check the box that describes your investment in this activity and see instructions for where to report your loss.				
a <input type="checkbox"/> All investment is at risk.	b <input type="checkbox"/> Some investment is not at risk.			

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11346H

Schedule F (Form 1040) 2013

Part III Farm Income—Accrual Method (see instructions).

37	Sales of livestock, produce, grains, and other products (see instructions)			37	300000
38a	Cooperative distributions (Form(s) 1099-PATR)	38a		38b	Taxable amount
39a	Agricultural program payments	39a		39b	Taxable amount
40	Commodity Credit Corporation (CCC) loans:				
a	CCC loans reported under election			40a	
b	CCC loans forfeited	40b		40c	Taxable amount
41	Crop insurance proceeds			41	
42	Custom hire (machine work) income			42	
43	Other income (see instructions)			43	
44	Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43)			44	300000
45	Inventory of livestock, produce, grains, and other products at beginning of the year. Do not include sales reported on Form 4797	45			
46	Cost of livestock, produce, grains, and other products purchased during the year	46	110000		
47	Add lines 45 and 46	47	110000		
48	Inventory of livestock, produce, grains, and other products at end of year	48	45000		
49	Cost of livestock, produce, grains, and other products sold. Subtract line 48 from line 47*	49		65000	
50	Gross income. Subtract line 49 from line 44. Enter the result here and on Part I, line 9	50		235000	

*If you use the unit-livestock-price method or the farm-price method of valuing inventory and the amount on line 48 is larger than the amount on line 47, subtract line 47 from line 48. Enter the result on line 49. Add lines 44 and 49. Enter the total on line 50 and on Part I, line 9.

Part IV Principal Agricultural Activity Codes



Do not file Schedule F (Form 1040) to report the following.

- Income from providing agricultural services such as soil preparation, veterinary, farm labor, horticultural, or management for a fee or on a contract basis. Instead file Schedule C (Form 1040) or Schedule C-EZ (Form 1040).
- Income from breeding, raising, or caring for dogs, cats, or other pet animals. Instead file Schedule C (Form 1040) or Schedule C-EZ (Form 1040).
- Sales of livestock held for draft, breeding, sport, or dairy purposes. Instead file Form 4797.

These codes for the Principal Agricultural Activity classify farms by their primary activity to facilitate the administration of the Internal Revenue Code. These six-digit codes are based on the North American Industry Classification System (NAICS).

Select the code that best identifies your primary farming activity and enter the six-digit number on line B.

Crop Production

- 111100 Oilseed and grain farming
- 111210 Vegetable and melon farming

- 111300 Fruit and tree nut farming
- 111400 Greenhouse, nursery, and floriculture production
- 111900 Other crop farming

Animal Production

- 112111 Beef cattle ranching and farming
- 112112 Cattle feedlots
- 112120 Dairy cattle and milk production
- 112210 Hog and pig farming
- 112300 Poultry and egg production
- 112400 Sheep and goat farming
- 112510 Aquaculture
- 112900 Other animal production

Forestry and Logging

- 113000 Forestry and logging (including forest nurseries and timber tracts)