Your first name and If a joint return, spo Home address (nui	use's firs	st name and initial	Last na										curity num	nber
Home address (nui		st name and initial	Last na	ame										
	nber and			41110						1	Spouse'	s soci	al security	number
	nber and	1.1	1						•					
City, town or post o		street). If you have a P.O.	box, see	Instruction	ns.				Apt. no	0.			e the SSN(s ne 6c are c	
	ffice, sta	te, and ZIP code. If you have	ve a forei	gn address	s, also comple	te spaces b	elow (see ir	nstructions)					Election Ca	
								T		jo	ointly, war	nt \$3 to	go to this fun ot change you	nd. Checkin
Foreign country na	ne			Foreign pr	rovince/state/c	county		Foreign	oostal co		efund.		You	Spouse
Filing Status	1 [	Single	-			4							instructions endent, ente	
J	2	Married filing jointly	(even if	only one	had income	e)		name here.		orma be	at flot you	и иср	ondone, one	51 (1115
Check only one	3	Married filing separa	ately. En	iter spou	se's SSN ab	ove	<b>•</b>							
box.	• L	→ and full name here.	,	•		5	Oualif	ying wido	w(er) (s	ee inst	ruction	s)		
						- 1							checked	
Exemptions	6a	X Yourself. If som	eone ca	an claim y	you as a der	pendent, <b>d</b>	o not che	ck box 6a				on 6a		2
	b	X Spouse				<u> </u>			<u>.</u>		<u>.</u>	No. of on 6c v	children	
	C (4) 5	Dependents:			(2) Depend social security		(3) Depen		(4) √ if continuous functions of the qualifying functions.	or child tax	credit	<ul><li>lived</li></ul>	l with you	
	(1) First	name Last name			Social Security	y number	relationship	o to you	(see	instructions	)	you du	not live with ne to divorce	
If more than four										H			aration structions)	
dependents, see instructions and										H			dents on 6c	
check here										H		not en	tered above	
	d	Total number of exem	nptions o	laimed						<del>''</del>		Add nu lines a	imbers on bove	2
Income	7	Wages, salaries, tips,	etc. At	tach For	m(s) W-2 .							7		0
	8a	Taxable interest. Atta	ich Sche	edule B if	required .							8a		
	b				•				1		0			
Attach Form(s) W-2 here. Also	9a	Ordinary dividends. A										9a		0
attach Forms	b	•			•				- 1		0			
W-2G and	10	Taxable refunds, cred	dits, or o	ffsets of	state and lo	cal income	taxes .					10		0
1099-R if tax	11	Alimony received										11		
was withheld.	12	Business income or (	,								<del></del>	12		0
If you all along the	13	Capital gain or (loss).									▶⊔∣	13	<u> </u>	3,000
If you did not get a W-2,	14	Other gains or (losses			1	1					• • •	14		
see instructions.	15a							<b>b</b> Taxa			• • •	15b		0
	16a	Pensions and annuition Rental real estate, roy			•		into oto	<b>b</b> Taxa ∧ttoob So			• • •	16b		
	17 18	Farm income or (loss										17 18		0
	19	Unemployment comp									Г	19		
	20a	Social security benefi		208	a		<b>b</b> Taxa	ble amou				20b		
	21	Other income. List type	oe and a								1	21		0
	22	Combine the amounts	s in the t	far right o	column for li	nes 7 thro	ugh 21. Th	nis is your	total ir	come	<b>•</b>	22	-:	3,000
Adjusted	23	Educator expenses						2	3					
Gross	24	Certain business experience basis government						2	,		0			
Income	25	Health savings accou									0			
	26	Moving expenses. Att									0			
	27	Deductible part of sel									0			
	28	Self-employed SEP,									0			
	29	Self-employed health												
	30	Penalty on early with							0		0			
	01-	Alimony paid <b>b</b> Red	cipient's	SSN ▶	1			31	а					
	31a							3	2		0			
	31a 32	IRA deduction												
	32 33	Student loan interest	deduction	on				3	3					
	32 33 34	Student loan interest Tuition and fees. Atta	deduction	on n 8917 .				<mark>3</mark>	3					
	32 33	Student loan interest	deduction ch Formactivities	on n 8917 . s deducti	on. Attach F	orm 8903		3 3	3 4 5		0	36		^

Form 1040 (2017	7)			Page <b>2</b>
	38	Amount from line 37 (adjusted gross income)	38	-3,000
Tax and	39a	Check		
<b>Credits</b>		if: Spouse was born before January 2, 1953, Blind. ∫ checked ▶ 39a 0	4	
Standard	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b		
Deduction for—	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	12,700
• People who	41	Subtract line 40 from line 38	41	-15,700
check any	42	<b>Exemptions.</b> If line 38 is \$156,900 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions .	42	8,100
box on line 39a or 39b <b>or</b>	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0	43	0
who can be claimed as a	44	Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c	44	0
dependent,	45	Alternative minimum tax (see instructions). Attach Form 6251	45	0
see instructions.	46	Excess advance premium tax credit repayment. Attach Form 8962	46	
All others:	47	Add lines 44, 45, and 46	47	0
Single or	48	Foreign tax credit. Attach Form 1116 if required		-
Married filing separately,	49	Credit for child and dependent care expenses. Attach Form 2441 49	-	
\$6,350	50	Education credits from Form 8863, line 19	-	
Married filing jointly or		Retirement savings contributions credit. Attach Form 8880 51	-	
Qualifying	51		-	
widow(er), \$12,700	52	Child tax credit. Attach Schedule 8812, if required	-	
Head of	53	Residential energy credits. Attach Form 5695	-	
household, \$9,350	54	Other credits from Form: <b>a</b> 3800 <b>b</b> 8801 <b>c</b> 54		
43,555	55	Add lines 48 through 54. These are your <b>total credits</b>	55	0
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0	56	0
Other	57	Self-employment tax. Attach Schedule SE	57	0
Taxes	58	Unreported social security and Medicare tax from Form: <b>a</b> 4137 <b>b</b> 8919	58	0
1 42100	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	0
	60 a	Household employment taxes from Schedule H	60a	0
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	0
	61	Health care: individual responsibility (see instructions) Full-year coverage $X$	61	
	62	Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s)	62	0
	63	Add lines 56 through 62. This is your <b>total tax</b>	63	0
Dovemente	64	Federal income tax withheld from Forms W-2 and 1099 64		
Payments	65	2017 estimated tax payments and amount applied from 2016 return 65		
If you have a	\66a	Earned income credit (EIC)		
qualifying	b	Nontaxable combat pay election 66b		
child, attach	67	Additional child tax credit. Attach Schedule 8812	1	
Schedule EIC.	68	American opportunity credit from Form 8863, line 8	7	
	69	Net premium tax credit. Attach Form 8962	-	
	70	Amount paid with request for extension to file	-	
	71	Excess social security and tier 1 RRTA tax withheld	-	
	72	Credit for federal tax on fuels. Attach Form 4136	-	
	73	Credits from Form:	-	
	73	<b>a</b> 2439 <b>b</b> Reserved <b>c</b> 8885 <b>d</b> 73		
	74	Add lines 64, 65, 66a, and 67 through 73. These are your <b>total payments</b>	74	0
D. 4	75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you <b>overpaid</b>	75	
Refund	76a	Amount of line 75 you want <b>refunded to you.</b> If Form 8888 is attached, check here	76a	
Direct deposit?	▶ b	Routing number XXXXXXXXXX	700	
See	▶ d	Account number XXXXXXXXXXXXXXXX		
instructions.	-			
Amount	<u>77</u> 78	Amount of line 75 you want applied to your 2018 estimated tax  Mount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	70	0
Amount You Owe	70 79	Estimated tax penalty (see instructions)	78	0
				V No
Third Party	Desig	, , , , , , , , , , , , , , , , , , ,		X No
Designee	name	no. ▶ number (PIN)	▶	
Sign		enalties 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 truly list all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer I		
Here Joint return? See	You	r signature Date Your occupation Daytin	ne phone	number
instructions.	Cn	upolo gigneturo. If a joint return bath must gign.	20 aant ::	on Identity Don't at
Keep a copy for your records.	Spor	PIN, en	nterit 🗀	an Identity Protection
	Print	t/Type preparer's name Preparer's signature Date	ee inst.) L	PTIN
Paid		Y I I I I I I I I I I I I I I I I I I I	if   mployed	es e
Preparer	Firm		EIN ►	
Use Only		's address ▶ Phone		

## SCHEDULE D (Form 1040)

**Capital Gains and Losses** 

Attach to Form 1040 or Form 1040NR.

Go to www.irs.gov/ScheduleD for instructions and the latest information.
 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2017
Attachment Sequence No. 12

OMB No. 1545-0074

Your social security number

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

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	(e) Cost	(g) Adjustments to gain or loss from	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.		(sales price)	(or other basis)	Form(s) 8949, Part I, line 2, column (g)	combine the result with column (g)
1a	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	0	0		0
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	0	0	0	0
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	0	0	0	0
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked	0	0	0	0
4	Short-term gain from Form 6252 and short-term gain or (loss) fr	om Forms 4684, 678	31, and 8824	4	0
5	Net short-term gain or (loss) from partnerships, S corpor Schedule(s) K-1	5			
6	Short-term capital loss carryover. Enter the amount, if ar <b>Worksheet</b> in the instructions.	Carryover 6	( 0)		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis		0		

## 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	(e) Cost	(g) Adjustments to gain or loss fr		(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.		(sales price)	(or other basis)	Form(s) 8949, Pa line 2, column (	art II,	combine the result with column (g)
8a	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	0	0			0
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	0	0	0		0
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	0	0	0		0
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked	1,010,000	10,000	0		1,000,000
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824	11	0			
12	Net long-term gain or (loss) from partnerships, S corpora	12				
13	Capital gain distributions. See the instructions		13	0		
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	Carryover	14	(-3,000,000)		
15	Net long-term capital gain or (loss). Combine lines 8a page 2	through 14 in colu	mn (h). Then go to	Part III on	15	-2,000,000
KIA	For Paperwork Reduction Act Notice, see your tax return	n instructions.	<u> </u>	Sc	chedul	le D (Form 1040) 2017

 Schedule D (Form 1040) 2017
 Page 2

Pa	rt III Summary			
16	Combine lines 7 and 15 and enter the result	16	-2,	000,000
	<ul> <li>If line 16 is a gain, 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 loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete</li> </ul>			
	<ul> <li>line 22.</li> <li>If line 16 is zero, skip lines 17 through 21 below and enter -0- 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?  Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet ▶	19		
20	Are lines 18 and 19 <b>both</b> zero or blank?  Yes. 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>Don't</b> complete lines 21 and 22 below.			
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't 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:			
	<ul> <li>The loss on line 16 or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21	(	3,000)
	Note. 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?			
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42).			
	X No. Complete the rest of Form 1040 and Form 1040NR.			

KIA Schedule D (Form 1040) 2017

Form 8949 (2017) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on Page 1 | Social security number

Social security number or taxpayer identification number

1,000,000

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.

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Test Bullion	1/11/00	1/12/17	1,010,000	10,000	С	0	1,000,000
							C
							C
							C
							C
							C
							C
							C
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							C
							C
							C
							(

**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.

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)

**KIA** Form **8949** (2017)

1,010,000