



## SCHEDULES C, D, F AND G - ATTACHMENT TO FORM NYC-3A COMBINED GENERAL CORPORATION TAX RETURN

2016

Attach one Form NYC-3A/ATT for each corneration in

						the reporting c		on).	
	For CALENDAR YEAR 2016	or FISCAL	VEAR heainning			2016, and endi	na		
	Name of Subsidiary:	01110071	TE/WI beginning _		2016, and ending Employer Identification Number of Subs				
	·					<u> </u>			
	Name of Reporting Corpo	ration:			Employer Identification Number of Reporting Corporation:				
							1		
							1 1		
L									
SCHEDULE C	Subsidiary Capit	al Infori	mation						
00.112022	A	В	С	D		Е	F	G	
	SUBSIDIARY CAPITAL	% of Voting	Average	Liabilities Direc		Net Average Value	Issuer's	Value Allocated	
LIST EACH ITEM (USE RIDER IF NECESSARY)	EMPLOYER IDENTIFICATION NUMBER	Stock Owned	Value	directly Attributable to Subsidiary Capital		(column C minus column D)	Allocation Percentage	to NYC (column E x column F)	
		%					%		
	d E (including items on ride VB, schedule C, lines 1,2,a								
2. Total Column G - A	Illocated subsidiary capital	: Transfer	this total to NYC	3A/B, sche	dule C	, line 4	2.		
SCHEDULE	D Investment C	apital	Information						
		В	С	D		E	F	G	
DESCRIPTION OF INVESTMENT LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)		No. of Sh or Amour Securiti	nt of Value	Liabilities Di Indirectly Att to Investmen	ributable	Net Average Value (column C minus column D)	Issuer's Allocation Percentage	Value Allocated to NYC (column E x column F)	
							%		
I. Totals (transfer to NYC-3A)	/B, schedule D, lines 1, 2, 3 and 4)	1.							
	vestment capital, you must include it hedule D, line 6)		2.						
3.Investment capital (total	al of lines 1E and 2E)				3.				

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## SCHEDULE F Salaries and Compensation of Stockholders Information

Include all stockholders owning in excess of 5% of taxpayer's issued capital stock who received any compensation, including commissions.

Name, Country and US Zip Code (Attach rider if necessary)	Social Security Number	Official Title	Salary & All Other Compensation Received
Total (transfer to NYC-3A/B, schedule F, line 1)		1.	

## SCHEDULE G Business Location Information (Attach rider if necessary)

Part 1 - List location of, and rent paid or payable, if any, for 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							
CITY	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP					
Total	·····)	_	- 1				

Part 2 - List location of, and rent paid or payable, if any, for 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 Add	ress		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET							
СІТУ	STATE	ZIP	-				
NUMBER AND STREET	1						
СІТУ	STATE	ZIP					
NUMBER AND STREET	'						
CITY	STATE	ZIP					
Total	-	-					

