<u> 1040</u>	U.	S. Individual Inco	me Tax Return		No. 1545-0074	IRS Use C	nly - Do na	t write o	qsta 1	le in this space.	
		16, or other tax year beginning	· · · · · · · · · · · · · · · · · · ·	, 2016,	ending	****	.20			separate instruc	
Your first name and	mmai		Last name						TOUT !	ocial security number	DEF
JOSEPH R.		1	BIDEN JR	•							
If a joint return, spor	use's 1	irst name and mulai	Last name					ľ	opous	o's social security	HUNIOU
JILL T.		ed atmost 16 years borro a D	BIDEN	100			Apt. no	+			
nome acoress (num	iber ai	id street). If you have a P.	.u. dox, sep insuuciio	G.			Apr 11	٠.		ake sure the SSN(s nd on line do are co	
City, town or post office	, state,	and ZIP code. If you have a fo	reign address, also comp	lete spaces below.					Presid	lantial Election Car	npalgn
WILMINGTO	N.	DE	-					l	if filing	there if you, or you gipinity, went \$3 to ind. Checking a bo at change your tax	a do to n shores
Foreign country nan			Foreign	province/state/county		Forei	gn postal o	ode	Mill U	nd. Checking a do it change your tax	or refund
•									X	You X S	pous
Filler Clarks	1	Single		4	Head	of househ	p rttiw) blo	ualifyir	ig pe	rson). If the qua	lifying
Filing Status	2	Married filing jointly	(even if only one had	Income)	perso	n is a child	but not yo	our dep	pendo	ent, enter this ch	ild's
Charle only	3		ately. Enter spouse's	-	name	here. 🕨					
Check only one box.		and full name here.	• •		i 🔲 Qualit	ying wido	v(er) with	depend	tent o	:hild	
—	6a			dependent, do not check bo	x 6a				\	Boxes checked on 6a and 6b	2
Exemptions			•	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,]	No. of children	***************************************
		Dependents:		(2) Dependent's social	(3) (ependent's		(4) V ti ci under age uzbyrog (bax cred	117	on 8c who: a lived with you	
		(1) First name	Last name	sacurity number	100	Aon Yourstub to	þ	uzitlytag (lax cred	or child lit	e did not live will you due to divorc	<u> </u>
	•					***************************************				or separation (see instructions)	•
If more than four	•					***************************************				(
dependents, see	-									Dependents on 60 not entered above	C
instructions and check here	7 .							·····		Add numbers	
	ď	Total number of exempt	ions claimed		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					on lines	2
Incomo	7	Wages, salaries, tips, et	c. Attach Form(s) W-2	***************************************		ST	MT 6	7	Т	315,2	206.
Income	8a	Taxable interest, Attach	Schedule B if require	d				8a	┪	Į	529.
	b			B					T		
Attach Form(s) W-2 here, Also	9a			ired				9 a			
attach Forms	b	Qualified dividends			9b				T		
W-26 and	10	Taxable refunds, credits	, or offsets of state an	d local income taxes	STMT 3	STM	T 5	7 10			0.
1099-R if tax was withheld.	11							11			
······································	12	Business income or (los	ss). Attach Schedule C	or C-EZ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• 4 • • • • • • • • • • • • • • • • • •		12		1,:	362.
\$8 A1.4 mms	13			uired. If not required, check				13	Τ		
If you did not get a W-2.	14	Other gains or (losses).	Attach Form 4797	-		• • • • • • • • • • • • • • • • • • • •		14	Т		
see instructions.	15a				b Taxable am	ount		15t	TT.		
	16a				b Taxable am				TT.	33,3	122
	17			orporations, trusts, etc. Attac				17	T	18,	733.
	18	Farm income or (loss).	Attach Schedule F					18	T		
	19							19	T		
	20a		20a	32,471.	b Taxable am	ount	*****	20t	\mathbf{T}	27,0	500
	21	Other income. List type						21			
	22	Combine the amounts in	n the far right column	for fines 7 through 21. This i	is your total in	., emo	>	22		396,	552
	23	Educator expenses	.,,,.,,,,,,		23						
Adjusted	24	officials. Attach Form 2106	of reservists, performing a or 2106-EZ	rtists, and fee-basis government	24]			
Gross	25	Health savings account	deduction. Attach For	m 8889	25				1		
Income	26	Moving expenses. Attac	th Form 3903	***************************************	26			_			
	27			h Schedule SE			96	<u>.</u>			
	28	Self-employed SEP, SIA	MPLE, and qualified pl	ans	28			4	1		
	29							4			
	30							4			
	31a				31a			4			
	32			*************************				4			
	33	Student loan interest de	duction		33			4			
	34	Tuition and fees. Attach	Form 8917		34			4 .			
	35			ach Form 8903				۱.			0.0
	36	Add lines 23 through 3	·		********	• • • • • • • • • • • • • • • • • • • •		36		396	96
A40004 41-70-48	37	Subtract line 36 from fir	no 77 This is unur ad	AMAARI SOAM Reform				37		4 U A	エつわ

Form 1040 (2018)	J	OSEPH R. BIDEN JR. & JILL T. BIDEN		Page 2
Tax and	38	Amount from line 37 (adjusted gross income)	38	396,456.
Credits		Check X You were born before January 2, 1952, Blind. Total boxes		
Standard	~~~	if: Spouse was born before January 2, 1952, Blind. checked > 39a 2		
Deduction for -		If your spouse itemizes on a separate return or you were a dual-status alien, check here		
People who check any box	······································	ii yani ahana imiinaa ari a aahar iri iri iri iri iri iri iri iri iri i	40	55,562.
check any box on line 39s or 39b 01 who cang	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	340,894.
be distined as a dependent, see	41	Subtract line 40 from line 38	41	
instructions.	42	Examptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see inst.	42	
1	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	338,464.
	44	Tax. Check if any from: a Form(s) 8814 b Form 4972 c	44	87,106.
	45	Alternative minimum tax. Attach Form 6251	45	3,931.
All others:		Excess advance premium tax credit repayment. Attach Form 8962	46	
Single or	46		47	
Married filing separately.	47	Add lines 44, 45, and 46	4/	31,0310
\$6,300	48	Foreign tax credit. Attach Form 1116 if required 48	l	
Married filing	49	Credit for child and dependent care expenses. Attach Form 2441		
jointly or Qualifying	50	Education credits from Form 8863, line 19		
widow(er), \$12,600	51	Retirement savings contributions credit. Attach Form 8880	1	
Head of	52	Child tax credit. Attach Schedule 8812, if required 52	1	
hausehold,		Residential energy credits. Attach Form 5695 53	1	
\$9,300	53	Other credits from Form: a 3800 b 8801 c 54	1	
	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	
	57	Self-employment tax. Attach Schedule SE	57	192.
Other	58	Unreported social security and Medicare tax from Form: a 4137 b 8919	58	
Taxes	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
	RΩs	Household employment taxes from Schedule H	60	a 608.
		First-time homebuyer credit repayment. Attach Form 5405 if required	60	b
	61	The second secon	61	·
			62	
	62		68	
-	63	Add lines 56 through 62. This is your total tax		
				QTATEMENT 7
Payments		i Andige state to the service of the service as a service serv	4	STATEMENT 7
	65	2016 estimated tax payments and amount applied from 2015 return 65	1	STATEMENT 7
If you have a qualifying	65 - 66	2016 estimated tax payments and amount applied from 2015 return 65 a Earned income credit (EIC) 66a		STATEMENT 7
If you have a qualifying child, attach	65 - 66	2016 estimated tax payments and amount applied from 2015 return 65 a Earned income credit (EIC) 66a b Nontaxable combat pay election 68b		STATEMENT 7
If you have a qualifying	65 - 66	2016 estimated tax payments and amount applied from 2015 return 65 a Earned income credit (EIC) 66a b Nontaxable combat pay election 68b Additional child tax credit. Attach Schedule 8812 67		STATEMENT 7
If you have a qualifying child, attach	65 	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8		STATEMENT 7
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If you have a qualifying child, attach	65 67 68 69 70 71 72 73	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 28885 d 73		
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If you have a qualifying child, attach	65 67 68 69 70 71 72 73 74	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	92,198.
If you have a qualifying child, attach Schedule EIC.	65 66 67 68 69 70 71 72 73 74 75 76	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here	74	92,198.
If you have a qualifying child, attach Schedule EIC. Refund Cirect deposit?	65 66 67 68 69 70 71 72 73 74 75 76	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpald a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here	74	92,198.
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If you have a qualifying child, attach Schedule EIC. Refund Cirect deposit?	65 68 67 68 69 70 71 72 73 74 75 76	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here b Routing Amount of line 75 you want applied to your 2017 estimated tax T7	74	92,198.
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If you have a qualifying child, attach Schedule EIC. Refund Cirect deposit? See instructions. Amount	65 68 67 68 69 70 71 72 73 74 75 76 77	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here B Routing S you want applied to your 2017 estimated tax Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions Estimated tax penalty (see instructions)	74 78 76	92,198. 3 1,031.
If you have a qualifying child, attach Schedule EIC. Refund Direct deposit? See instructions. Amount You Owe	65 68 67 68 69 70 71 72 73 74 75 76 77 78	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here B Routing Savings of number Amount of line 75 you want applied to your 2017 estimated tax Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions Estimated tax penalty (see instructions) Net prove the line 75 you want to discuss this return with the IRS (see instructions)? X Yes. Complete be received.	74 75 76 76	92,198. 1,031.
Refund Direct deposit? See instructions. Amount You Owe Third Par Designee	65 68 67 68 69 70 71 72 73 74 75 76 77 78	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here B Routing Savings of number Amount of line 75 you want applied to your 2017 estimated tax Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions Estimated tax penalty (see instructions) Net prove the line 75 you want to discuss this return with the IRS (see instructions)? X Yes. Complete be received.	74 75 76 76	92,198. 1,031.
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Refund Cirect deposit? See Instructions. Amount You Owe Third Par Designee Sign Here Joint return?	65 68 67 68 69 70 71 72 73 74 75 76 77 78 79	2016 estimated tax payments and amount applied from 2015 return a Earned income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 72 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here Brouting Savings Account Amount of line 75 you want applied to your 2017 estimated tax Amount of line 75 you want applied to your 2017 estimated tax From the results on how to pay, see instructions Estimated tax penalty (see instructions) To you want to allow another person to discuss this return with the IRS (see instructions)? WALTER H DEYHLE, CPA Those penalties of perby, I decire that I have examined this return and accompanying schedules and stiments, and to the best of my knowledge and bellef, they are by accountly list all amounts and sources of income I received during the tax year. Decire of the penalties of perby, I decire that I have examined this return and accompanying schedules and stiments, and to the best of my knowledge and bellef, they are by accountly list at amounts and sources of income I received during the tax year. Decire of the penalties of perby, I decire that I have examined this return with the year by accounting that appears the threat strappy is based on all information of which piepars your signature From the first tax penalties and sources of income I received during the tax year. Decire double tax year to the tax year. The penalties of year year of the tax year. The penalties of year year of the tax year. The penalties of year year of the tax year. The pena	74 76 76 76 76	92,198. 3 1,031. No onat identification bor (PiN)
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Refund Direct deposit? See instructions. Amount You Owe Third Par Designee Sign Here Joint retum? See instructions	65 68 67 68 69 70 71 72 73 74 75 76 77 78 79	2016 estimated tax payments and amount applied from 2015 return a Earned Income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpald a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here Boulded Savings Account	74 75 76 76 76 Pers 16, control has any	92,198. 3 1,031. No const identification to be rein) tot, and knawledge. Daytime phone number If the IRS sent you an identity protection PIN, enter it here
Refund Cirect deposit? See instructions. Amount You Owe Third Par Designee Sign Here Joint return? See instructions Keep a copy for you'r records.	65 68 67 68 69 70 71 72 73 74 75 76 77 78 79	2016 estimated tax payments and amount applied from 2015 return a Earned Income credit (EIC) b Nontaxable combat pay election Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Net premium tax credit. Attach Form 8962 Amount paid with request for extension to file Excess social security and tier 1 RRTA tax withheld Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved 8885 d 72 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from fine 74. This is the amount you overpald a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here Amount of line 75 you want applied to your 2017 estimated tax Amount of line 75 you want applied to your 2017 estimated tax Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions Sestimated tax penalty (see instructions) Do you want to allow another person to discuss this return with the IRS (see instructions)? X Yes. Complete be refugered by WALTER H DEYHLE, CPA Phone Phone Phone Phone VICE PRESIDENT Spouse's eignature. If a joint return, both must sign. Date Prepare's eignature Prepare's eignature	74 75 76 76 76 Pers 16, control has any	92,198. a 1,031. No const identification of the (PiN) oct, and knowledge. Jaylime phone number If the IRS sent you an identity protection PIN,
Refund Refund Direct deposit? See Instructions. Amount You Owe Third Par Designee Sign Here Joint return? See instructions Keep a copy ter your records.	65 68 67 68 69 70 71 72 73 74 75 76 77 78 79	2016 estimated tax payments and amount applied from 2015 return a Earned Income credit (EIC)	74 75 76 76 76 Pers 16, control has any	92,198. 3 1,031. No const identification to be rein) tot, and knawledge. Daytime phone number If the IRS sent you an identity protection PIN, enter it here
Refund Cirect deposit? See instructions. Amount You Owe Third Par Designee Sign Here Joint return? See instructions Keep a copy tor your records. Paid Preparet	65 68 67 68 69 70 71 72 73 74 75 76 77 78 79	2016 estimated tax payments and amount applied from 2015 return a Earned Income credit (EIC)	74 75 76 76 76 Pers 16, control has any	92,198. 3 1,031. No const identification to be rein) tot, and knawledge. Daytime phone number If the IRS sent you an identity protection PIN, enter it here
Refund Refund Direct deposit? See Instructions. Amount You Owe Third Par Designee Sign Here Joint return? See instructions Keep a copy ter your records.	65 68 67 68 69 70 71 72 73 74 75 76 77 78 79	2016 estimated tax payments and amount applied from 2015 return a Earned Income credit (EIC)	74 75 76 76 76 Pers 16, control has any	92,198. 3 1,031. No const identification to be rein) tot, and knawledge. Daytime phone number If the IRS sent you an identity protection PIN, enter it here
Refund Refund Direct deposit? See instructions. Amount You Owe Third Par Designee Sign Here Joint retum? See instructions Keep a copy for your records. Paid Preparet Use Only	65 68 69 70 71 72 73 74 75 76 77 78 79 Ty	2016 estimated tax payments and amount applied from 2015 return a Earned Income credit (EIC)	74 75 76 76 76 Pers 16, control has any	92,198. 3 1,031. No const identification to be rein) tot, and knawledge. Daytime phone number If the IRS sent you an identity protection PIN, enter it here

SCHEDULE A (Form 1040)

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

Itemized Deductions

► Information about Schedule A and its separate instructions is at www.lrz.gov/schedulea

► Attach to Form 1040.

2016 Attachment Seguence No. 07

JOSEPH P	. 1	BIDEN JR. & JILL T. BIDEN					
Medical	- 1	Caution: Do not include expenses reimbursed or paid by others.	П			Т	
and	1	Medical and dental expenses (see instructions)	11			١	
Dentai	2	Enter amount from Form 1040, line 38	H			ᅦ	
Expenses	3		1			- 1	
myberioco	3	January 2, 1952, multiply line 2 by 7.5% (0.075) instead	3			- 1	
		Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	1-2-1	<u> </u>	T	4	
Taxes You	-		T	***************************************		*	
Paid	Ð	State and local (check only one box): a	5	18,	293		
		b General sales taxes					
	6	Real estate taxes (see instructions)	6	13,	099		
	7	Personal property taxes	7				
	8	Other taxes. List type and amount					
			8				
	9					9	31,392.
Interest	10	Home mortgage interest and points reported to you on Form 1098	10	20,	836	5.	
You Paid	11					·	
Note:		************	111				
Your mortgage	40	Points not reported to you on Form 1098. See instructions for special rules	12			ᅱ	
interest	12		1		······	\dashv	
deduction may be limited (see	13	Mortgage insurance premiums (see instructions) Investment interest, Attach Form 4952 if required. (See instructions.)	14			\dashv	
instructions).	14	• • • • • • • • • • • • • • • • • • • •			Т.	15	20,836.
Gifts to	15	Add lines 10 through 14	16		889		STMT 10
	16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	10	<i>J,</i>	00.	\dashv	OIML TO
Charity	17		1			- 1	
If you made a gift and got a		You must attach Form 8283 if over \$500				\dashv	
benefit for it.	18	Bezzezezezezezezezezezezezezezezezezeze	-		T	_	5,889.
see instructions.	19	Add lines 16 through 18	******			19	3,003.
Casualty and Theft Losses					1.		
	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	'''''	***********		20	
Job Expenses and Certain	21	Unreimbursed employee expenses - job travel, union dues, job education, etc.	1				
Miscellaneous Deductions		Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶					
		***************************************	21				
•	22	***************************************	22				
	23	Other expenses · investment, safe deposit box, etc. List type and amount					
						ı	
			23			_	
	24	· · · · · · · · · · · · · · · · · · ·	24			_	
	25	Enter amount from Form 1040, line 38	4			ı	
	26	Multiply line 25 by 2% (0.02)	26				
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	******	************		27	
Other Miscellaneous Deductions	28	Other • from list in instructions. List type and amount				1	
						28	
	29		`		1		
		No. Your deduction is not limited. Add the amounts in the far right column	_		. 1		
Total		for lines 4 through 28. Also, enter this amount on Form 1040, line 40.	Ş	TMT 11	<u> </u>	29	55,562.
Itemized		Yes. Your deduction may be limited. See the Itemized Deductions			I	I	
Deductions		Worksheet in the instructions to figure the amount to enter.	,		I	1	
	30	. ,				I	
		check here			<u> </u>		
LHA 619501 11-0	7-16	For Paperwork Reduction Act Notice, see Form 1040 instructions.		Sc	chedu	ile /	(Form 1040) 2016

SCHEDULE B (Form 1040A or 1040) (Rev. January 2017)

Department of the Treasury (90) Internal Revenue Service

Name(s) shown on return

Interest and Ordinary Dividends

Attach to Form 1040A or 1040.

2016 Attachment 08

► Information about Schedule B and its instructions is at www.irs.gov/scheduleb . Sequence No. OB

JOSEPH R. BIDEN JR. & JILL T. BIDEN Amount 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 and list this interest first. Also, show that Interest buyer's social security number and address PNCBANK, NATIONAL ASSOCIATION 490. UNITED STATES SENATE FEDERAL CREDIT UNION 20. MASSACHUSETTS MUTUAL LIFE INSURANCE CO MASSACHUSETTS MUTUAL LIFE INSURANCE CO 12. 1 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 529. 2 Add the amounts on line 1 2 shown on that Excludable interest on series EE and I U.S. savings bonds issued after 1989. 529. Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a 4 Note: If line 4 is over \$1,500, you must complete Part III. **Amount** Part II List name of payer Ordinary **Dividends** 5 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. 6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a Note: If line 6 is over \$1,500, you must complete Part III. You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign Yes No Part III account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. Foreign 7a At any time during 2016, did you have a financial interest in or signature authority over a financial account (such **Accounts** as a bank account, securities account, or brokerage account) located in a foreign country? See instructions X and If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), **Trusts** to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filling 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 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 ************************************

SCHEDULE C-EZ (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Net Profit From Business

(Sole Proprietorship)

Partnerships, joint ventures, etc., generally must file Form 1065 or 1085-B.
 Attach to Form 1040, 1040NR, or 1041. ► See instructions.

2016
Attachment Sequence No. 09A

Social security number (SSN) Name of proprietor JILL T. BIDEN **General Information** Had no employees during the year, Had business expenses of \$5,000 or less. Do not deduct expenses for business use Use the cash method of accounting, You May Use of your home, Schedule C-EZ -· Did not have an inventory at any time during Instead of the year. Do not have prior year unallowed passive activity losses from this business, and Schedule C And You: Did not have a net loss from your business. Only If You: Are not required to file Form 4582, Had only one business as either a sole Depreciation and Amortization, for this proprietor, qualified joint venture, or business. See the instructions for Schedule statutory employee, C, line 13, to find out if you must file. B Enter business code (see inst) Principal business or profession, including product or service **▶** 711510 AUTHOR D Enter your EIN (see inst) C Business name. If no separate business name, leave blank. JILL BIDEN Business address (including suite or room no.). Address not required if same as on page 1 of your tax return. City, town or post office, state, and ZIP code WILMINGTON, DE Did you make any payments in 2016 that would require you to file Form(s) 1099? (see the Instructions for Schedule C) If "Yes," did you or will you file required Forms 1099? Part II Figure Your Net Profit Gross receipts. Caution; If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see Statutory employees in the instructions for Schedule C, line 1, and check here TMT 13 ... 1,362. 0. 2 Total expenses (see instructions). If more than \$5,000, you must use Schedule C Net profit. Subtract line 2 from line 1. If less than zero, you must use Schedule C. Enter on both Form 1040, line 12, and 3 Schedule SE, line 2, or on Form 1040NR, line 13, and Schedule SE, line 2. (Statutory employees, do not report this 1.362. amount on Schedule SE, line 2.) Estates and trusts, enter on Form 1041, line 3. Part III Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 2. When did you place your vehicle in service for business purposes? (month, day, year) Of the total number of miles you drove your vehicle during 2016, enter the number of miles you used your vehicle for: b Commuting c Other Business Was your vehicle available for personal use during off-duty hours? Do you (or your spouse) have another vehicle available for personal use? Ba Do you have evidence to support your deduction? b If "Yes," is the evidence written? For Paperwork Reduction Act Notice, see the separate instructions for Schedule C (Form 1040). Schedule C-EZ (Form 1040) 2016

SCHEDULE E

(Form 1040)

Department of the Treasury Internal Revenue Service

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) ➤ Attach to Form 1040, 1040NR, or Form 1041.

Information about Schedule E and its separate instructions is at www.irs.gov/schedules.

OMB No. 1545-0074

Name	(s) shown on return								Your	social	security nu	ımber
JOS	EPH R. BIDEN	J	R.	& JILL T. BIDEN								
Par	til Income or Lo	88	ro	m Rental Real Estate and Roy	alties	Note: If you are	in the	business of I	renti	ng pers	onal proper	ty, use
	Schedule C or C-	EZ (See	instructions). If you are an individual, rep	oort fan	m rental income	or loss	from Form 4	835	on pag	e 2, line 40.	
ΑГ				16 that would require you to file Form(s)							Yes X	No
	"Yes," did you or will yo										Yes	No
				y (street, city, state, ZIP code)								
Ā	11/3000 200100 01 000	. p. v	, , , , , , , , , , , , , , , , , , , 	WILMINGTON, DE		<u> </u>						
â												
ö							***************************************					
16	Type of Property	9	Fo	each rental real estate property listed					Fair	Rental	Personal	QJV
"	(from list below)	-	ab	ove, report the number of fair rental and						ays	Use Days	
A	1	1	pe	rsonal use days. Check the QJV box y if you meet the requirements to file as				A		366		
B		1	80	ualified joint venture. See instructions.				В				
ö		1						С		•		
*************	e of Property:				***************************************							
- •	ngle Family Residence	3	۷a	cation/Short-Term Rental 5 Land		7 Self-Rental						
	ulti-Family Residence	-		mmercial 6 Royaltic	38	8 Other (desc	ribe)					
	ome:			Properties:		A	T	В			C	
3					3	26,40	0.					
4					4							
_	enses:				T							
5					5							
8				9	6							
7				•••••••••••••••••••••••••••••••••••••••	7							
8	=			**************************************	8							
9				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9							
10				B	10							
11	**				11							
12				s, etc. (see instructions)	12	4.7	08.					
13				5, 500. (300 mandounin)								
14												
15	• •••••••											
16						2,9	59.					
17	***************************************			***************************************								
18				ion		-						
19	Other (list)	v. ue	ا عام.	***************************************	19							
20		ane s	the	ough 19	20	7,6	67.					
21	•			its) and/or 4 (royalties). If result is a		-						
 :				ut if you must file Form 6198	21	18,7	33.					
22	• •			as after limitation, if any, on								
s. din	Form 8582 (see instruc			and area area area area area area area are	22	ŀ)	k		¥)
23a							23a	26,	40	0.1		
b							23b					
	·			44 444 4 44			23c	4,	70	8.		
ď	· · · · · · · · · · · · · · · · · · ·	•					23d			•		
•				45 - 45 - 45 - 45 - 45 - 45 - 45 - 45 -		****************	23e	7,	66	7.		-
24				shown on line 21. Do not include any ic		*****************			Т	24	18,	733.
25				n line 21 and rental real estate losses fro		22. Enter total lo	sses l	nere		25)
26				eyalty income or (loss). Combine lines 2								
				t apply to you, also enter this amount or								
				ount in the total on line 41 on page 2						26	18,	733.
LH				ct Notice, see the separate instruction							(Form 104	

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

SCHEDULE SE (Form 1040)

Oepartment of the Treasury Internal Revenue Service

Self-Employment Tax

► Information about Schedule SE and its separate instructions is at www.irs.gov/schedulese.

Attach to Form 1040 or Form 1040NR.

2016 Attachment

Name of person with self-employment income (as shown on Form 1040 or Form 1040NR) Social security number of

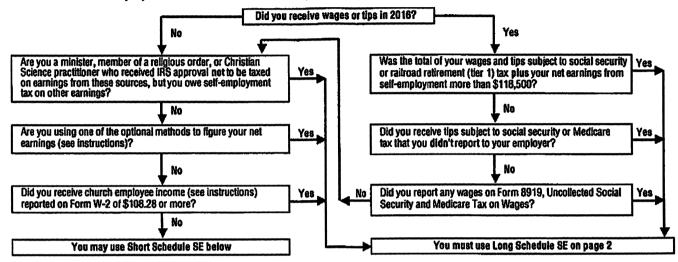
Social security number of person with self-employment income

JILL T. BIDEN

Before you begin: To determine if you must file Schedule SE, see the instructions.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE in the instructions.



Section A-Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1085), box 14, code A	1a			
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve				
	Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	1b	ļ		
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A			•	
	(other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report STMT 13	2			362.
3	Combine lines 1a, 1b, and 2	3		1,	362.
4	Multiply line 3 by 92.35% (0.9235). If less than \$400, you don't owe self-employment tax; don't file this				
	schedule unless you have an amount on line 1b	4		<u>1,</u>	<u> 258.</u>
	Note. If fine 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.				
5	Self-employment tax. If the amount on line 4 is:				
	• \$118,500 or less, multiply line 4 by 15.3% (0.153). Enter the result here and on				
	Form 1040, line 57, or Form 1040NR, line 55				
	 More than \$118,500, multiply line 4 by 2.9% (0.029). Then, add \$14,694 to the result. 		İ		
	Enter the total here and on Form 1040, line 57, or Form 1040NR, line 55	5	<u> </u>		<u> 192.</u>
6	Deduction for one-half of self-employment tax.			į	
	Multiply line 5 by 50% (0.50). Enter the result here and on				
	Form 1040, line 27, or Form 1040NR, line 27			•	

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

Schedule SE (Form 1040) 2016

Form 6251

Alternative Minimum Tax - Individuals

► Information about Form 6251 and its separate instructions is at www.lrs.gov/form6251.

Attachment Sequence N

2016

Internal Revenue Service (9

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

Your social security number

JOSEPH R. BIDEN JR. & JILL T. BIDEN		
Part I Alternative Minimum Taxable Income		
1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter		340,894.
amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)		240,034.
2 Medical and dental. If you or your spouse was 65 or older, enter the smaller of Schedule A (Form 1040), line		^
or 2.5% (0.025) of Form 1040, line 38. If zero or less, enter -0-	1	0.
3 Taxes from Schedule A (Form 1040), line 9	3	31,392.
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line.	ne <u>4</u>	
5 Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6 If Form 1040, line 38, is \$155,650 or less, enter -0 Otherwise, see instructions	6	-2,555.
7 Tax refund from Form 1040, line 10 or line 21	7	
8 Investment interest expense (difference between regular tax and AMT)		
9 Depletion (difference between regular tax and AMT)		
10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount		
11 Alternative tax net operating loss deduction		
12 Interest from specified private activity bonds exempt from the regular tax	12	
13 Qualified small business stock, see instructions		
14 Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
and the second s		
The second secon		
and the same of th		

18 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)		o.
19 Passive activities (difference between AMT and regular tax income or loss) SEE STATEMENT		
20 Loss limitations (difference between AMT and regular tax income or loss)		
21 Circulation costs (difference between regular tax and AMT)	21	
22 Long-term contracts (difference between AMT and regular tax income)		
23 Mining costs (difference between regular tax and AMT)		
24 Research and experimental costs (difference between regular tax and AMT)	24	
25 Income from certain installment sales before January 1, 1987	25	
26 Intangible drilling costs preference	26	
27 Other adjustments, including income-based related adjustments	27	
28 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is		
more than \$247,450, see instructions.)	28	369,731.
Part II Alternative Minimum Tax (AMT)		
29 Exemption. (If you were under age 24 at the end of 2016, see instructions.)		
IF your filing status is AND line 28 is not over THEN enter on line 29		
Single or head of household \$119,700 \$53,900		
Married filing separately 79,850 41,900 STMT 15	29	31,292.
If line 28 is over the amount shown above for your filing status, see instructions.		
30 Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30	338,439.
31 • If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter.	····· 	
• If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 64 here.		
 All others: If line 30 is \$186,300 or less (\$93,150 or less if married filing separately), multiply line 30 by 26% (0.26). Otherwise, multiply line 30 by 26% (0.28) and subtract \$3,726 (\$1,863 if married filing 	31	91,037.
separately) from the result.	'	
32 Alternative minimum tax foreign tax credit (see instructions)	32	91,037.
33 Tentative minimum tax. Subtract line 32 from line 31	33	31,03/.
34 Add Form 1040, line 44 (minus any tax from Form 4972), and Form 1040, line 46. Subtract from the result any		
foreign tax credit from Form 1040, line 48. If you used Sch J to figure your tax on Form 1040, line 44, refigure	1 - 1	07 106
that tax without using Schedule J before completing this line (see instructions)		<u>87,106.</u>
35 AMT. Subtract line 34 from line 33. If zero or less, enter 0. Enter here and on Form 1040, line 45	35	3,931.
619481 12-07-16 LHA For Paperwork Reduction Act Notice, see your tax return instructions.		Form 6251 (2016)

			- 0
	m 6251 (2016) JOSEPH R. BIDEN JR. & JILL T. BIDEN		Page 2
P	art III Tax Computation Using Maximum Capital Gains Rates		6 - 1 - 4 4
	Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Workship	et in t	ne instructions.
36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from		
	line 3 of the worksheet in the instructions for line 31	36	
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions	1	
	for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for		
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If		
	you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see		
	instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38	
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount		
	from line 37. Otherwise, add lines 37 and 38, and enter the smaller of that result or the amount from line		
	10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or		
	2555-EZ, see instructions for the amount to enter	39	
40	Enter the smaller of line 36 or line 39	40	
41	Subtract line 40 from line 36	41	
42	If line 41 is \$186,300 or less (\$93,150 or less if married filing separately), multiply line 41 by 26% (0.26). Otherwise,		
	multiply line 41 by 28% (0.28) and subtract \$3,726 (\$1,863 if married filling separately) from the result	42	
43	Enter:		
	• \$75,300 if married filing jointly or qualifying widow(er).		
	• \$37,650 if single or married filling separately, or	43	
	• \$50,400 if head of household.		
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions		
	for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for		
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either		
	worksheet for the regular tax, enter the amount from Form 1040, line 43; if zero or less, enter -0 If you		
	are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	44	
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	
46	Enter the smaller of line 36 or line 37	46	
47	Enter the smaller of line 45 or line 46. This amount is taxed at 0%	47	
48	Subtract line 47 from line 46	48	
49	Enter:		
•••	● \$415,050 if single		
	• \$233,475 if married filing separately	49	,
	\$233,475 if married filing separately \$466,950 if married filing jointly or qualifying widow(er) \$441,000 if head of household		
50	Enter the amount from line 45	50	
	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions		
•	for Form 1040, line 44, or the amount from line 19 of the Schedule D Tax Worksheet, whichever applies		
	(as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the	1	
	amount from Form 1040, line 43; if zero or less, enter -0. If you are filling Form 2555 or Form 2555-EZ,		
	see instructions for the amount to enter	51	
52	Add line 50 and line 51	52	
K2	Subtract line 52 from line 49. If zero or less, enter -0-	53	
	Enter the smaller of line 48 or line 53	54	
	Multiply line 54 by 15% (0.15)	55	

Form 6251 (2016)

57

59

60

61

62

If lines 56 and 36 are the same, skip lines 57 through 61 and go to line 62. Otherwise, go to line 57.

If line 38 is zero or blank, skip lines 59 through 61 and go to line 62. Otherwise, go to line 59.

59 Add lines 41, 56, and 57

62 Add lines 42, 55, 58, and 61

63 If line 36 is \$186,300 or less (\$93,150 or less if married filing separately), multiply line 36 by 26% (0.26).

60 Subtract line 59 from line 36

61 Multiply line 60 by 25% (0.25) _____

Otherwise, multiply line 36 by 28% (0.28) and subtract \$3,726 (\$1,863 if married filing separately) from the result.

64 Enter the smaller of line 62 or line 63 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31

Name(s)							Social Security Number
							walled warming realition
JOSEP:	H R. BIDEN JR. & JILL	T. BIDEN					
Form					Adjustment		
Name	Description	Income	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251 Other Adjustment
B-	COTTAGE - WILMINGTON,						
	* REGULAR INCOME * AMT NET INCOME	18,733. 18,733.				e e e e e e e e e e e e e e e e e e e	
			Harmon Anna Anna Anna Anna Anna Anna Anna An	****	erenamente en		
	and the second s			Andrew Comments			
	•						W
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
	en e			### F F F F F F F F F F F F F F F F F F			N - 1 - 1 - 1
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	A CONTRACTOR OF THE CONTRACTOR						
						e e e e e e e e e e e e e e e e e e e	
		,					
	en e						
4 4 44 4 4 4 4	· · · · · · · · · · · · · · · · · · ·	**************************************					
	e de la companya de l	e week je ver	e e e e e e e e e e e e e e e e e e e	·			
	·						
	er en						

SCHEDULE H (Form 1040)

Department of the Treasury Internal Revenue Service (89) Name of employer

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

Attach to Form 1040, 1040NR, 1040-SS, or 1041.

Information about Schedule H and its separate instructions is at www.irs.gov/scheduleh.

OMB No. 1545-1971
2016
Attachment Sequence No. 44

Social security number

Employer identification number JOSEPH R. BIDEN JR. & JILL T. BIDEN Calendar year taxpayers having no household employees in 2016 don't have to complete this form for 2016. Did you pay any one household employee cash wages of \$2,000 or more in 2016? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions before you answer this question.) X Yes. Skip lines B and C and go to line 1. No. Go to line B. Did you withhold federal income tax during 2016 for any household employee? Yes. Skip line C and go to line 7. No. Go to line C. Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2015 or 2016 to all household employees? (Don't count cash wages paid in 2015 or 2016 to your spouse, your child under age 21, or your parent.) Stop. Don't file this schedule. Yes. Skip lines 1-9 and go to line 10. Social Security, Medicare, and Federal Income Taxes Part I 3,825 1 Total cash wages subject to social security tax 474. 2 2 Social security tax. Multiply line 1 by 12.4% (0.124) 3.825. 3 Total cash wages subject to Medicare tax 111. Medicare tax, Multiply line 3 by 2.9% (0.029) 5 Total cash wages subject to Additional Medicare Tax withholding ______ 5 6 6 Additional Medicare Tax withholding, Multiply line 5 by 0.9% (0.009) 7 Federal income tax withheld, if any 585. Total social security, Medicare, and federal income taxes. Add lines 2, 4, 6, and 7 9 Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2015 or 2016 to all household employees? (Don't count cash wages paid in 2015 or 2016 to your spouse, your child under age 21, or your parent.) No. Stop. Include the amount from line 8 above on Form 1040, line 60a. If you're not required to file Form 1040, see the line 9 instructions. X Yes. Go to line 10.

610351 11-29-16

Schedule H (Form 1040) 2016

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

Form **8959**

Department of the Treasury Internal Revenue Service

Additional Medicare Tax

▶ if any line does not apply to you, leave it blank. See separate instructions. ► Attach to Form 1040, 1040NR, 1040-PR, or 1040-SS.

▶ Information about Form 8959 and its instructions is at www.irs.gov/form8959.

OMB No. 1545-0074

	e(s) snown on return SEPH R. BIDEN JR. & JILL T. BIDEN	ivu əvçid	ur social security number		
Pa					
	Medicare wages and tips from Form W-2, box 5. If you have		a.		
	more than one Form W-2, enter the total of the amounts				
	from box 5	324,831			
2	Unreported tips from Form 4137, line 6				
	Wages from Form 8919, line 6				
	Add lines 1 through 3	324,831			
	Enter the following amount for your filing status:				
•	Married filing jointly \$250,000		1 1		
	Married filing separately \$125,000				
	Single, Head of household, or Qualifying widow(er) \$200,000	250,000).		
R	Subtract line 5 from line 4. If zero or less, enter -0-			74,831.	
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0,9% (0.009). Enter here and go	to Part II	7	673.	
	rt II Additional Medicare Tax on Self-Employment Income				
	Self-employment income from Schedule SE (Form 1040),				
•	Section A, line 4, or Section B, line 6. If you had a loss, enter				
	0- (Form 1040-PR and Form 1040-SS filers, see instructions.)	1,258	3.		
9	Enter the following amount for your filing status:				
•	Married filing jointly \$250,000				
	Married filing separately \$125,000				
	Single, Head of household, or Qualifying widow(er) \$200,000 9	250,000),		
10	Enter the amount from line 4	324,831			
11	Subtract line 10 from line 9. If zero or less, enter -0-	(5.		
	Subtract fine 11 from line 8. If zero or less, enter -0-		12	1,258.	
	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter	***************************************			
		************************	13	11.	
Pe	here and go to Part III	Compensatio	1		
***************************************	Railroad retirement (RRTA) compensation and tips from				
	Form(s) W-2, box 14 (see instructions)				
15	Enter the following amount for your filing status:				
	Married filing jointly \$250,000				
	Married filing separately \$125,000				
	Single, Head of household, or Qualifying widow(er) \$200,000				
16	Subtract line 15 from line 14. If zero or less, enter -0-		16		
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by				
	0.9% (0.009). Enter here and go to Part IV.		17		
P	art IV Total Additional Medicare Tax				
	Add lines 7, 13, and 17. Also include this amount on Form 1040, line 62, (Form 1040NR,				
	1040-PR, and 1040-SS filers, see instructions) and go to Part V	**********	18	684.	
Pi	art V Withholding Reconciliation				
19	Medicare tax withheld from Form W-2, box 6. If you have more than		. l'		
	one Form W-2, enter the total of the amounts from box 6	4,93			
20	Enter the amount from line 1	324,83	<u> </u>		
21			.		
	Medicare tax withholding on Medicare wages	4,71	0.		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare Tax				
	withholding on Medicare wages	***********	22	222.	
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form				
	W-2, box 14 (see instructions)	*************************	23		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this				
	amount with federal income tax withholding on Form 1040, line 64 (Form 1040NR, 1040-PR,				
	and 1040-SS filers, see instructions)	******************	24	222.	

Form 8960

Net Investment Income Tax - Individuals, Estates, and Trusts

2016

Department of the Treasury Internal Revenue Service (99) ➤ Attach to your tax return.

Attachment Seguence No. 7

▶ Information about Form 8960 and its separate instructions is at www.lrs.gov/form8960. Name(s) shown on your tax return Your social security number or EIN JOSEPH R. BIDEN JR. & JILL T. BIDEN Investment Income Section 6013(a) election (see instructions) Section 6013(h) election (see instructions) Regulations section 1.1411-10(g) election (see instructions) 529. Taxable interest (see instructions) 9 Ordinary dividends (see Instructions) Annuities (see instructions) 4a Rental real estate, royalties, partnerships, S corporations, trusts. 18,733. 4a b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) 18,733. 4c Combine lines 4a and 4b 5a Net gain or loss from disposition of property (see instructions) Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions) 5b Adjustment from disposition of partnership interest or S corporation stock (see instructions) d Combine lines 5a through 5c Adjustments to investment income for certain CFCs and PFICs (see instructions) 6 Other modifications to investment income (see instructions) 19,262. Total Investment income, Combine lines 1, 2, 3, 4c, 5d, 6, and 7 Investment Expenses Allocable to Investment Income and Modifications Investment interest expenses (see instructions) 634. 9b State, local, and foreign income tax (see instructions) Miscellaneous investment expenses (see instructions) 634. Add lines 9a, 9b, and 9c 10 Additional modifications (see instructions) 634. Total deductions and modifications. Add lines 9d and 10 Part III Tax Computation Net investment income. Subtract Part II, line 11 from Part I, line 8. Individuals complete lines 13-18,628. 17. Estates and trusts complete lines 18a-21. If zero or less, enter -0-Individuals: 396,456. 13 250,000. 14 Subtract line 14 from line 13. If zero or less, enter-0-15 18,628. Enter the smaller of line 12 or line 15 16 Net Investment income tax for individuals. Multiply line 16 by 3.8% (.038). Enter here and 708. include on your tax return (see instructions) **Estates and Trusts:** Deductions for distributions of net investment income and 18b deductions under section 642(c) (see instructions) Undistributed net investment income. Subtract line 18b from 18a (see instructions). If zero or less, enter -0-18c 19a Adjusted gross income (see instructions) Highest tax bracket for estates and trusts for the year (see 19b instructions) _____ Subtract line 19b from line 19a. If zero or less, enter -0-Enter the smaller of line 18c or line 19c 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (.038). Enter here and include on your tax return (see instructions)

023121 12-15-10

Form 8960 (2016)

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

JOSEPH R. BIDEN JR. & JILL T. BIDEN

FORM 1040	PENSIONS AND ANNUITIES		STATEMENT	1
OFFICE OF PENSIONS				
AMOUNT RECEIVED THIS YES NONTAXABLE AMOUNT CAPITAL GAIN DISTRIBUTION		33,291. 169.		
			33,12	22.
TOTAL INCLUDED IN FORM 1	1040, LINE 16B		33,12	22.

FORM	1040 SOCIAL SECURITY BENEFITS WORKSHEET	STATEMENT 2
	K ONLY ONE BOX:	
	SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)	
	MARRIED FILING JOINTLY	
	MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE AT ANY TIME DURING 2016	
D.	MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOU FOR ALL OF 2016	SE
1.	ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON	
	FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON FORM 1040, LINE 20A	32,471.
	IF YOU CHECKED BOX B: TAXPAYER AMOUNT 32,471 SPOUSE AMOUNT	
2	MULTIPLY LINE 1 BY 50% (0.50)	16,236.
3.	ADD THE AMOUNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 14, 15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT	
	INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1	099 368,952
4.	ENTER THE AMOUNT OF ANY EXCLUSIONS FROM FOREIGN EARNED	
	INCOME, FOREIGN HOUSING, INCOME FROM U.S. POSSESSIONS,	
	OR INCOME FROM PUERTO RICO BY BONA FIDE RESIDENTS OF	
	PUERTO RICO THAT YOU CLAIMED	20.00
5.	ADD LINES 2, 3, AND 4	385,188
6.	ADD THE AMOUNTS ON FORM 1040, LINES 23 THROUGH LINE 32,	
	AND ANY WRITE-IN ADJUSTMENTS YOU ENTERED ON THE DOTTED	96
	LINE NEXT TO LINE 36 SUBTRACT LINE 6 FROM LINE 5	385,092
	ENTER: \$25,000 IF YOU CHECKED BOX A OR D, OR	000,000
٥.	\$32,000 IF YOU CHECKED BOX B, OR	
	\$-0- IF YOU CHECKED BOX C	32,000
9.	IS THE AMOUNT ON LINE 8 LESS THAN THE AMOUNT ON LINE 7?	
•	I NO. STOP. NONE OF YOUR SOCIAL SECURITY BENEFITS ARE	
	TAXABLE. ENTER -0- ON FORM 1040, LINE 20B. IF YOU ARE	
	MARRIED FILING SEPARATELY AND YOU LIVED APART FROM YOUR	
	SPOUSE FOR ALL OF 2016, BE SURE YOU ENTERED 'D' TO THE	
	RIGHT OF THE WORD "BENEFITS" ON LINE 20A.	353,092
4.0	[X] YES. SUBTRACT LINE 8 FROM LINE 7	333,032
10.	ENTER \$9,000 IF YOU CHECKED BOX A OR D, \$12,000 IF YOU CHECKED BOX B	
	\$-0- IF YOU CHECKED BOX C	12,000
11.	SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0-	
12.	ENTER THE SMALLER OF LINE 9 OR LINE 10	12,000
	ENTER ONE HALF OF LINE 12	6,000
14.	ENTER THE SMALLER OF LINE 2 OR LINE 13	6,000
15.	MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER	-0- 289,928
	ADD LINES 14 AND 15	295,928
17.	MULTIPLY LINE 1 BY 85% (.85)	27,600
18.	TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 1	27,600

JOSEPH R. BIDEN JR. & JILL T. BIDEN

FORM 1040 STATE AND I	LOCAL INCOME TAX	REFUNDS	STATEMENT 3
	2015	2014	2013
GROSS STATE/LOCAL INC TAX REFUNDS LESS: TAX PAID IN FOLLOWING YEAR	VIRGINIA 503.		
NET TAX REFUNDS VIRGINIA	503.		
TOTAL NET TAX REFUNDS	503.		

FOR	1 1040 PERSONAL EXEMPTION WORKSHEET	STATEMENT	4
1.	IS THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT BELOW FOR YOUR FILING STATUS? NO. STOP. MULTIPLY \$4,050 BY THE TOTAL NUMBER OF EXEMPTI		4
	ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE	42.	
	YES. CONTINUE		
2.	MULTIPLY \$4,050 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D	8,1	00.
3.	ENTER THE AMOUNT FROM FORM 1040, LINE 38 396,4		
4.	ENTER THE AMOUNT FOR YOUR FILING STATUS 311,3	00.	
	SINGLE \$259,400		
	MARRIED FILING JOINTLY OR WIDOW(ER) \$311,300		
	MARRIED FILING SEPARATELY \$155,650		
	HEAD OF HOUSEHOLD \$285,350		
5.	SUBTRACT LINE 4 FROM LINE 3. IF THE RESULT IS		
	MORE THAN \$122,500 (\$61,250 IF MARRIED FILING		
	SEPARATELY), STOP. ENTER -0- ON LINE 42 85,1	56.	
6.	DIVIDE LINE 5 BY \$2,500 (\$1,250 IF MARRIED		
	FILING SEPARATELY). IF THE RESULT IS NOT A		
	WHOLE NUMBER, INCREASE IT TO THE NEXT HIGHER		
	WHOLE NUMBER (FOR EXAMPLE, INCREASE 0.0004	25	
_	44 4 /	35.	
7.	MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT	^	
_	AS A DECIMAL	_	.70
8.	MULTIPLY LINE 2 BY LINE 7	5,6	/ U
9.	SUBTRACT LINE 8 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.	2.4	30

JOSEPH R. BIDEN JR. & JILL T. BIDEN

• 0			TOTAL TO FORM 1040, LINE 10
	ET	OZ OJ HOIHA SO	STATE AND LOCAL INCOME TAX REFUN
•0	IS GMA 0	AMOUNT FROM L T, NET LINES 2	22 AMOUNT TO INCLUDE ON FORM 1040, 18 * IF LINE 21 IS A NEGATIVE AMOUNT *
		*900'7EE	19 SUBTRACT LINE 18 FROM LINE 19 20 LESSER OF LINE 16 OR LINE 19 21 PRIOR YEAR TAXABLE INCOME
• • •		.028,51 .05,85	15 SUBTRACT THE GREATER OF LINE 14 13A OR LINE 13B FROM LINE 14 (LESSER OF LINE 15 OR LINE 1) (LESSER OF LINE 15 OR LINE 1) 18 PRIOR YEAR STD. DED. AVAILABLE
		.702,23 .028,51 .702,23	13A TOTAL ADJ. ITEMIZED DEDUCTIONS 13B PRIOR YR. STD. DED. AVAILABLE 14 PRIOR YR. ALLOWABLE ITEM. DED.
	·	.702,22	(IF ZERO OR LESS, SKIP LIUES 10 THROUGH 15, AND ENTER AMOUNT FROM LINE 1 ON LINE 16) 11 ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10) LINE 6 OR LINE 10) LINE 6 OR LINE 10) LINE 70 PHASEOUT
		• 6 6 6 7 8	9 SUBTRACT LINE 8 FROM LINE 7
:		. 285,382. 46,382. 509,900.	5 LINE 2 MINUS LINES 3 AND 4 6 MULT LN 5 BY APPL SEC. 68 PCT 7 PRIOR YEAR AGI 8 ITEM. DED. PHASEOUT THRESHOLD 8
		*LL6*LS	2 TOTAL ITEMIZED DEDUCTIONS 3 DEDUCTION NOT SUBJ TO PHASEOUT 4 NET REFUNDS FROM LINE 1
	•		I NET REFUNDS FOR RECALCULATION
		203°	LESS: REFUNDS-NO BENEFIT DUE TO AMT-
		• 203	NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STAT.
2013	2014	7072	
S TNEMETATS	TAX REFUNDS	POCYT INCOME	FORM 1040 TAXABLE STATE AND

FORM 1040	WAGES RECEI	VED AND TAX	ES WITHHE	LD	STATE	EMENT	6
r s employer's name	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDIC:	
UNITED STATES SENATE S NORTHERN VIRGINIA	224,686.	66,703.	12,064.		7,347.	3,4	80.
COMMUNITY OFFICE OF THE CONTROLLER	90,520.	14,260.	4,595.		6,209.	1,4	52.
TOTALS	315,206.	80,963.	16,659.		13,556.	4,9	32.
FORM 1040	FEDERAL	INCOME TAX	WITHHELD		STATE	SMENT	7
r S DESCRIPTION					Al	10UNT	
UNITED STATES SENATE NORTHERN VIRGINIA COM PUCBANK, NATIONAL ASS OFFICE OF PENSIONS	OCIATION	CE OF THE C	CONTROLLER			2,7	60. 37. 58.
FORM 8959, LINE 24	1099-SSA					8,1 2	18. 22.
TOTAL TO FORM 1040, LIN	E 64					92,1	98.
FORM 1040		OTHER TAXES	}		STATI	EMENT	8
DESCRIPTION					Al	TUUON	
FROM FORM 8959 FROM FORM 8960							84.

SCHEDULE A	STATE AND LOCAL INCOME T	AXES	STATEMENT	9
DESCRIPTION			TUUOMA	
	1	LER	12,00 4,5	95.
EXTENSION PAYMENT DELAWARE PRIOR YES EXTENSION PAYMENT	AR BALANCE DUE AND			39.
TOTAL TO SCHEDULE	A, LINE 5		18,2	93.
SCHEDULE A	CASH CONTRIBUTIONS		STATEMENT	10
DESCRIPTION		AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	
CATHOLIC DIOCESE ON ORTHERN VIRGINIA FOUNDATION THE LEUKEMIA & LY ST. JOSEPH'S ON TOUSO WESTMINSTER PRESE	COMMUNITY COLLEGE EDUCATIONAL MPHOMA SOCIETY HE BRANDYWINE	1,000. 1,271. 200. 825. 1,093. 1,500.		
SUBTOTALS		5,889.		
TOTAL TO SCHEDULE	A, LINE 16		5,8	89.

SCHE	DULE A	ITEMIZED DEDUCTIONS WORKSH	EET	STATEMENT	11
1. 2.	9, 15, 19, 20 ENTER THE TOT	PAL OF THE AMOUNTS FROM SCHEDULE 0, 27, AND 28. PAL OF THE AMOUNTS FROM SCHEDULE	A, LINES 4,	58,1	.17.
		LUS ANY GAMBLING AND CASUALTY OF	THEFT		
3.	IS THE AMOUNT IF NO, YOUR I FROM LINE 1 A	PED ON LINE 28. ON LINE 2 LESS THAN THE AMOUNT DEDUCTION IS NOT LIMITED. ENTER ABOVE ON SCHEDULE A, LINE 29.		FO 1	0.
4.		ACT LINE 2 FROM LINE 1. 3 BY 80% (.80).	46,494.	58,1	. / •
5.	ENTER THE AMO ENTER \$311,30 QUALIFYING WI	OUNT FROM FORM 1040, LINE 38. O IF MARRIED FILING JOINTLY OR DOW(ER); \$285,350 IF HEAD OF 259,400 IF SINGLE; OR \$155,650	396,456.		
7.	IF MARRIED FI IS THE AMOUNT ON LINE 5? IF NO, YOUR I THE AMOUNT FI	LING SEPARATELY. ON LINE 6 LESS THAN THE AMOUNT DEDUCTION IS NOT LIMITED. ENTER ROM LINE 1 ABOVE ON SCHEDULE A,	311,300.		
	LINE 29.	RACT LINE 6 FROM LINE 5.	85,156.		
8.		3 7 BY 3% (.03).	2,555.		
		T T T T T T T T T T T T T T T T T T T			
9.	ENTER THE SMA	ALLER OF LINE 4 OR LINE 8.		2,5	555.
9.	TOTAL ITEMIZI	ALLER OF LINE 4 OR LINE 8. ED DEDUCTIONS. SUBTRACT LINE 9 IS SULT HERE AND ON SCHEDULE A, LINI		2,5 55,5	
10.	TOTAL ITEMIZI	ED DEDUCTIONS. SUBTRACT LINE 9 I			62.
SCHE	TOTAL ITEMIZE ENTER THE RES	ED DEDUCTIONS. SUBTRACT LINE 9 IS SULT HERE AND ON SCHEDULE A, LINE		55,5	62.
SCHE	TOTAL ITEMIZE ENTER THE RES	ED DEDUCTIONS. SUBTRACT LINE 9 IS SULT HERE AND ON SCHEDULE A, LINE		55,5 STATEMENT AMOUNT	12
SCHE DESC	TOTAL ITEMIZE ENTER THE RES DULE C-EZ RIPTION	ED DEDUCTIONS. SUBTRACT LINE 9 IS SULT HERE AND ON SCHEDULE A, LINI GROSS RECEIPTS		55,5 STATEMENT AMOUNT	12
SCHE DESC GROS	TOTAL ITEMIZE ENTER THE RES DULE C-EZ RIPTION S RECEIPTS	ED DEDUCTIONS. SUBTRACT LINE 9 IS SULT HERE AND ON SCHEDULE A, LINI GROSS RECEIPTS		55,5 STATEMENT AMOUNT	12 362.
SCHE DESC GROS	TOTAL ITEMIZE ENTER THE RES DULE C-EZ RIPTION S RECEIPTS L TO SCHEDULE	ED DEDUCTIONS. SUBTRACT LINE 9 IN SULT HERE AND ON SCHEDULE A, LINE GROSS RECEIPTS C-EZ, LINE 1		STATEMENT AMOUNT 1,3	12
SCHE DESC GROS	TOTAL ITEMIZE ENTER THE RES DULE C-EZ RIPTION S RECEIPTS L TO SCHEDULE DULE SE	ED DEDUCTIONS. SUBTRACT LINE 9 IN SULT HERE AND ON SCHEDULE A, LINE GROSS RECEIPTS C-EZ, LINE 1		STATEMENT AMOUNT 1,3 1,3 STATEMENT AMOUNT	12 362.

FORM 6251	PASSIV	E ACTIVITIES		STATEMENT	14
		NET INCOM	E (LOSS)		
NAME OF ACTIVITY	FORM	AMT	REGULAR	ADJUSTMEN	T
COTTAGE - WILMINGT	SCH E	18,733.	18,733.		
TOTAL TO FORM 6251,	LINE 19				

	6251	EXEMPTION WORKSHEET	STATEMENT	15
1 en	MARRIED FILIN	IF SINGLE OR HEAD OF HOUSEHOLD; \$83,800 IF NG JOINTLY OR QUALIFYING WIDOW(ER); \$41,900 ILING SEPARATELY	83,8	00.
2 E1	NTER YOUR ALTE	RNATIVE MINIMUM TAXABLE INCOME	·	
3 EN	NTER: \$119,700 \$159,700 IF N QUALIFYING WI	251, LINE 28 369,731.) IF SINGLE OR HEAD OF HOUSEHOLD; (ARRIED FILING JOINTLY OR (DOW(ER); \$79,850 IF MARRIED		
4 St	FILING SEPARA UBTRACT LINE S ENTER -0-	TELY 159,700. FROM LINE 2. IF ZERO OR LESS 210,031.	-	
	UBTRACT LINE ! ANY OF THE TI AGE 24 APPLY	BY 25% (.25) FROM LINE 1. IF ZERO OR LESS, ENTER -0 IF REE CONDITIONS UNDER CERTAIN CHILDREN UNDER TO YOU, COMPLETE LINES 7 THROUGH 10.	52,5	08.
	CTHERWISE, ST LINE 29, AND	OP HERE AND ENTER THIS AMOUNT ON FORM 6251, GO TO FORM 6251, LINE 30	31,2	92.
8 E1		ON AMOUNT FOR CERTAIN CHILDREN UNDER AGE 24 NED INCOME, IF ANY 8		
10 E1		LER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, GO TO FORM 6251, LINE 30		
FORM	8960	STATE INCOME TAX PAYMENTS	STATEMENT	16
		STATE INCOME TAX PAYMENTS	STATEMENT	16
DELA		STATE INCOME TAX PAYMENTS	STATEMENT	16
DELA	WARE	·		16
DELAV DESCI	WARE RIPTION ED STATES SEN	·	AMOUNT	64.
DELAN DESCI UNITI	WARE RIPTION ED STATES SEN	ATE	AMOUNT 12,0	64.
DELAN DESCI UNITI	WARE RIPTION ED STATES SENS L TO STATE FOR	ATE RM 8960, LINE 10	AMOUNT 12,0	64.
DELAN DESCI UNITI TOTAL FORM	WARE RIPTION ED STATES SENS L TO STATE FOR	ATE RM 8960, LINE 10	AMOUNT 12,0	64.
DELAN DESCI	WARE RIPTION ED STATES SENS L TO STATE FOR 8960 WARE	ATE RM 8960, LINE 10 STATE INCOME TAX PAYMENTS	AMOUNT 12,0 12,0 STATEMENT AMOUNT	64.