

See instructions on page 16.)

Use the IRS label.

Otherwise, please print or type.

Presidential Election Campaign

For the year Jan. 1-Dec. 31, 2005, or other tax year beginning 2005, ending 20

Your first name and initial: DONALD J. Last name: TRUMP
 If a joint return, spouse's first name and initial: MELANIE Last name: KNAYS

Home address (number and street). If you have a P.O. box, see page 16: 721 FIFTH AVENUE Apt. no. _____
 City, town or post office, state, and ZIP code. If you have a foreign address, see page 16: NEW YORK NY 10022

Your social security number: _____
 Spouse's social security number: _____

You must enter your SSN(s) above.

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 16) You Spouse

Filing Status

- 1 Single
- 2 Married filing jointly (even if only one had income)
- 3 Married filing separately. Enter spouse's SSN above and full name here.
- 4 Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.
- 5 Qualifying widow(er) with dependent child (see page 17)

Check only one box.

Exemptions

6a Yourself. If someone can claim you as a dependent, do not check box 6a

b Spouse

c Dependents:		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit (see page 19)
(1) First name	Last name			

Boxes checked on 6a and 6b: 2

No. of children on 6c who: lived with you, did not live with you due to divorce or separation (see page 20)

Dependents on 6c not entered above: _____

Add numbers on lines above: 2

If more than four dependents, see page 19.

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 22.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

d Total number of exemptions claimed	7	998 599
7 Wages, salaries, tips, etc. Attach Form(s) W-2	7a	9 460 371
8a Taxable interest. Attach Schedule B if required	8a	
b Tax-exempt interest. Do not include on line 8a	8b	46 913
9a Ordinary dividends. Attach Schedule B if required	9a	314 320
b Qualified dividends (see page 23)	9b	6 299
10 Taxable refunds, credits, or offsets of state and local income taxes	10	0
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	42 395 804
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here	13	32 185 114
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions	15a	
b Taxable amount (see page 25)	15b	
16a Pensions and annuities	16a	
b Taxable amount (see page 25)	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	67 383 658
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits	20a	
b Taxable amount (see page 27)	20b	
21 Other income. List type and amount (see page 29)	21	203 201 242
SEE STATEMENT 1		
22 Add the amounts in the far right column for lines 7 through 21. This is your total income	22	49 536 624

Adjusted Gross Income

23 Educator expenses (see page 29)	23	
24 Certain business expenses of reservists, performing artists, and job-based government officials. Attach Form 2106 or 2106-EZ	24	
25 Health savings account deduction. Attach Form 8889	25	
26 Moving expenses. Attach Form 3903	26	
27 One-half of self-employment tax. Attach Schedule SE	27	943 799
28 Self-employed SEP, SIMPLE, and qualified plans	28	
29 Self-employed health insurance deduction (see page 30)	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid b Recipient's SSN	31a	
32 IRA deduction (see page 31)	32	
33 Student loan interest deduction (see page 33)	33	
34 Tuition and fees deduction (see page 34)	34	
35 Domestic production activities deduction. Attach Form 9903	35	
36 Add lines 23 through 31a and 32 through 35	36	943 799
37 Subtract line 36 from line 22. This is your adjusted gross income	37	48 592 825

Tax and Credits

Standard Deduction for - People who checked any box on line 39a or 39b of who can be claimed as a dependent. All others: Single or Married filing separately. \$5,000. Married filing jointly or Qualifying widow(er). \$10,000. Head of household. \$7,300.

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-57 for Tax and Credits, and lines 58-63 for Other Taxes.

Other Taxes

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Includes lines 64-71 for Payments.

Refund

Direct deposit? See page 59 and fill in 73b, 73c, and 73d.

Table with 3 columns: Line number, Description, and Amount. Includes lines 72-74 for Refund.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-76 for Amount You Owe.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 61)? [X] Yes. Complete the following. [] No

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer's Use Only

Preparer's signature, Date, Check if self-employed, Preparer's SSN or PTIN, EIN, Phone no.

510002 11-05-05

** INTEREST NOT INCLUDED 88,864. ** PENALTY NOT INCLUDED 68,788. *** TOTAL DUE 2,450,597.