

Form **1040** Department of the Treasury—Internal Revenue Service (99) **U.S. Individual Income Tax Return**

2019 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

Amended Return Single Married filing jointly Married filing separately (MFS) Head of Household (HOH) Qualifying widow(er) (QW)

Filing Status If you checked the MFS box, enter the name of spouse. If you check the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. **Check only one box**

Your first name and middle initial DONALD J & MELANIA<TRUMP	Last name	Your social security number
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions.		Apt. no.

Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. You Spouse

City, town, or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). PALM BEACH, FL 33480

Foreign country name	Foreign province/state/county	Foreign postal code	If more than four dependents, see instructions and ✓ here <input type="checkbox"/>
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Standard Deduction Someone can claim: You as a dependent Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: Were born before January 2, 1955 Are blind **Spouse:** Was born before January 2, 1955 Is blind

(1) Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
First name	Last name			Child tax credit	Credit for other dependents
			SON	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Standard Deduction for • Single or Married filing separately, \$12,200 • Married filing jointly or Qualifying widow(er), \$24,400 • Head of household, \$18,350 • If you checked any box under Standard Deduction, see instructions.	1 Wages, salaries, tips, etc. Attach Form(s) W-2		1	393,928
	2a Tax-exempt interest	2a 2,533	2b Taxable interest. Attach Sch. B if required	2b 11,332,436
	3a Qualified dividends	3a 19,540	b Ordinary dividends. Attach Sch. B if required	3b 71,921
	4a IRA distributions	4a	b Taxable amount	4b
	c Pensions and annuities	4c	d Taxable amount	4d 86,532
	5a Social security benefits	5a	b Taxable amount	5b
	6 Capital gain or (loss). Attach Schedule D if required. If not required, check here			6 9,257,197
	7a Other income from Schedule 1, line 9			7a -16,698,511
	b Add lines 1, 2b, 3b, 4b, 5b, 6, and 7a. This is your total income			7b 4,443,503
	8a Adjustments to income from Schedule 1, line 22			8a 62,789
	b Subtract line 8a from line 7b. This is your adjusted gross income			8b 4,380,714
9 Standard deduction or itemized deductions (from Schedule A)	9 1,405,541			
10 Qualified business income deduction. Attach Form 8995 or Form 8995-A	10			
11a Add lines 9 and 10			11a 1,405,541	
b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-			11b 2,975,173	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 11320B

Form 1040 (2019)

12a Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> 12a 558,780	12b 558,780
b Add Schedule 2, line 3, and line 12a and enter the total ▶	
13a Child tax credit or credit for other dependents 13a	
b Add Schedule 3, line 7, and line 13a and enter the total ▶	13b 425,335
14 Subtract line 13b from line 12b. If zero or less, enter -0- ▶	14 133,445
15 Other taxes, including self-employment tax, from Schedule 2, line 10 ▶	15 327,532
16 Add lines 14 and 15. This is your total tax ▶	16 460,977
17 Federal income tax withheld from Forms W-2 and 1099 ▶	17 86,490
18 Other payments and refundable credits:	
a Earned income credit (EIC) 18a	
b Additional child tax credit. Attach Schedule 8812 18b	
c American opportunity credit from Form 8863, line 8 18c	
d Schedule 3, line 14 18d 11,010,007	
e Add lines 18a through 18d. These are your total other payments and refundable credits ▶	18e 11,010,007
19 Add lines 17 and 18e. These are your total payments ▶	19 11,096,497

• If you have a qualifying child, attach Sch. EIC.
• If you have nontaxable combat pay, see instructions.

Refund

20 If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid ▶	20 10,635,520
21a Amount of line 20 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/> 21a	
▶ b Routing number <input type="text"/> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
▶ d Account number <input type="text"/>	
22 Amount of line 20 you want applied to your 2020 estimated tax ▶ 22 10,635,520	

Direct deposit?
See instructions.

Amount You Owe

23 Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions ▶ 23	
24 Estimated tax penalty (see instructions) ▶ 24	

Third Party Designee

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions. **Yes.** Complete below. **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
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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.

Your signature *****	Date 10-14-2020	Your occupation PRESIDENT	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
Spouse's signature. If a joint return, both must sign. *****	Date 10-14-2020	Spouse's occupation FIRST LADY	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) <input type="text"/>

Joint return?
See instructions.
Keep a copy for your records.

Paid Preparer Use Only

Preparer's name DONALD BENDER	Preparer's signature	Date	PTIN	Check if: <input checked="" type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
Firm's name ▶ MAZARS USA LLP	Phone no. (516) 488-1200	Firm's EIN ▶ 13-1459550		
Firm's address ▶ WOODBURY, NY, 117972003				

SCHEDULE 1 (Form 1040 or 1040-SR)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2019

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040 or 1040-SR DONALD J & MELANIA<TRUMP

Your social security number

At any time during 2019, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency during the year? Yes No

Part I Additional Income

Table with 9 rows for Part I: Taxable refunds, credits, or offsets of state and local income taxes; Alimony received; Business income or (loss); Other gains or (losses); Rental real estate, royalties, partnerships, S corporations, trusts, etc.; Farm income or (loss); Unemployment compensation; Other income; Combine lines 1 through 8.

Part II Adjustments to Income

Table with 12 rows for Part II: Educator expenses; Certain business expenses of reservists, performing artists, and fee-basis government officials; Health savings account deduction; Moving expenses for members of the Armed Forces; Deductible part of self-employment tax; Self-employed SEP, SIMPLE, and qualified plans; Self-employed health insurance deduction; Penalty on early withdrawal of savings; Alimony paid; IRA Deduction; Student loan interest deduction; Tuition and fees; Add lines 10 through 21.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

SCHEDULE 2
(Form 1040 or 1040-SR)

Additional Taxes

OMB No. 1545-0074

2019
Attachment
Sequence No. **02**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040 or 1040-SR.
▶ Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040 or 1040-SR
DONALD J & MELANIA<TRUMP

Your social security number

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	0
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and include on Form 1040 or 1040-SR, line 12b	3	0

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE	4	125,578
5	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	5	
6	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required	6	
7a	Household employment taxes. Attach Schedule H	7a	4,720
7b	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required	7b	
8	Taxes from: a <input checked="" type="checkbox"/> Form 8959 b <input checked="" type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	8	197,234
9	Section 965 net tax liability installment from Form 965-A	9	
10	Add lines 4 through 8. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 15	10	327,532

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

Cat. No. 71478U

Schedule 2 (Form 1040 or 1040-SR) 2019

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

TY 2019 Other Tax Statement

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Other Tax Literal	Other Tax Amount
FROM FORM 8959	40,267
FROM FORM 8960	156,967

SCHEDULE 3 (Form 1040 or 1040-SR)

Additional Credits and Payments

OMB No. 1545-0074

2019

Attachment Sequence No. 03

Department of the Treasury Internal Revenue Service

Attach to Form 1040 or 1040-SR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040 or 1040-SR DONALD J & MELANIA<TRUMP

Your social security number

Part I Nonrefundable Credits

Table with 7 rows for nonrefundable credits including foreign tax credit, child care expenses, education credits, retirement savings, residential energy, and other credits.

Part II Other Payments and Refundable Credits

Table with 7 rows for other payments and refundable credits including 2019 estimated tax payments, net premium tax credit, excess social security, and fuel tax credits.

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

Cat. No. 71480G

Schedule 3 (Form 1040 or 1040-SR) 2019

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (POST-2006)**The Tax Year the Credit****Originated:** 01-01-2018**The Amount of the Credit:** 260,641**The Amount Allowed for that
Year:**

0

SCHEDULE A (Form 1040 or 1040-SR)

Itemized Deductions

OMB No. 1545-0074

2019

Attachment Sequence No. 07

Go to www.irs.gov/ScheduleA for instructions and the latest information.

Attach to Form 1040 or 1040-SR.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040 or 1040-SR

Your social security number

DONALD J & MELANIA<TRUMP

Table with columns for line number, description, amount, and total. Rows include Medical and Dental Expenses, Taxes You Paid, Interest You Paid, Gifts to Charity, Casualty and Theft Losses, and Other Itemized Deductions. Total Itemized Deductions: 1,405,541.

TY 2019 Other Miscellaneous Deductions Statement

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Type Of Miscellaneous Deduction	Miscellaneous Deduction Amount
SCHEDULE K-1	5,113
SCHEDULE K-1	2,228
SCHEDULE K-1	52
SCHEDULE K-1	24

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

SCHEDULE B (Form 1040 or 1040-SR)

Interest and Ordinary Dividends

OMB No. 1545-0074

2019

Attachment Sequence No. 08

Department of the Treasury Internal Revenue Service (99)

Go to www.irs.gov/ScheduleB for instructions and the latest information. Attach to Form 1040 or 1040-SR.

Name(s) shown on return DONALD J & MELANIA<TRUMP

Your social security number

Part I Interest

(See instructions and the instructions for Form 1040 or 1040-SR, line 2b.)

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 shown on that form.

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address

Grid for listing interest payers with dotted lines for text entry.

Payer

See Additional Data Table

Grid for listing payer names with dotted lines for text entry.

Summary table with 4 rows: 2 Add the amounts on line 1 (11,332,436); 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989; 4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b (11,332,436). Total Amount: 11,332,436.

Note: If line 4 is over \$1,500, you must complete Part III.

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

Form 1040 Schedule B, Part I, Group 2

#	Payer	Amount
1	CAPITAL ONE NA	449,634
2	JP MORGAN CHASE	1,807
3	BANK UNITED	100,273
4	PROFESSIONAL BANK	157,373
5	IVANKA TRUMP	18,000
6	DONALD J TRUMP JR	8,715
7	ERIC TRUMP	24,000
8	FIRST REPUBLIC BANK	88
9	SIGNATURE BANK	79,026
10	FROM K-1 - PARK BRIAR ASSOCIATES LLC	673
11	FROM K-1 - MAR-A-LAGO CLUB LLC	14
12	FROM K-1 - 40 WALL DEVELOPMENT ASSOC LLC	162,103
13	FROM K-1 - HUDSON WATERFRONT ASSOC I LP	8,728
14	FROM K-1 - HUDSON WATERFRONT ASSOC V LP	3,293,747
15	FROM K-1 - HUDSON WATERFRONT ASSOC IV LP	1,459,004
16	FROM K-1 - TRUMP CPS LLC	45
17	FROM K-1 - TRUMP PLAZA LLC	890
18	FROM K-1 - DJT HOLDINGS LLC - COUNTRY APARTMENTS LLC	7
19	FROM K-1 - DJT HOLDINGS LLC - OCEAN AIR INVESTORS LLC	33,411
20	FROM K-1 - DJT HOLDINGS LLC - OAKDALE INVESTORS LLC	14,815
21	FROM K-1 - TIPPERARY REALTY CORP	126
22	FROM K-1 - THE TRUMP CORPORATION	32,846
23	FROM K-1 - TRUMP PLAZA MEMBER INC	9
24	FROM K-1 - TRUMP VILLAGE CONST CORP-DJT GR TR	1,048
25	FROM K-1 - TRUMP TOWER MANAGING MEMBER INC	684
26	FROM K-1 - BEACH HAVEN APARTMENTS #1 INC DJT GR TR	416
27	FROM K-1 - SHORE HAVEN APARTMENTS #1 INC DJT GR TR	900
28	FROM K-1 - TRUMP MANAGEMENT INC	64
29	FROM K-1 - STARRETT CITY ASSOCIATES	530
30	FROM K-1 - HUDSON WATERFRONT ASSOC III LP	5,081,651
31	FROM K-1 - DJT HOLDINGS LLC - TRUMP INTERNATIONAL HOTELS MANAGEMENT LLC	19
32	FROM K-1 - TIHT COMMERCIAL LLC	1,582
33	FROM K-1 - SC LP SHOPPING CENTER LLC	83
34	FROM K-1 - TRUMP FERRY POINT MEMBER CORP	136
35	FROM K-1 - DJT HOLDINGS LLC - TRUMP FERRY POINT LLC	13,299
36	FROM K-1 - DJT HOLDINGS MANAGING MEMBER LLC	415

#	Payer	Amount
37	FROM K-1 - DJT HOLDINGS LLC - LFB ACQUISITION LLC	208
38	FROM K-1 - CHARLOTTESVILLE CATERING & EVENTS LLC	138,779
39	FROM K-1 - DJT HOLDINGS LLC - TNGC CHARLOTTE LLC	445
40	FROM K-1 - TRUMP 845 UN GP LLC	261
41	FROM K-1 - DJT HOLDINGS MANAGING MEMBER LLC	272
42	FROM K-1 - TRUMP PARK AVENUE LLC - TRUMP DELMONICO LLC)	13,611
43	FROM K-1 - TRUMP PARK AVENUE LLC - ACQUISITION	13,583
44	FROM K-1 - DJT HOLDINGS LLC - TRUMP LAS VEGAS MEMBER LLC	55,990
45	FROM K-1 - DJT HOLDINGS LLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	1,142
46	FROM K-1 - DJT HOLDINGS MM LLC - TNGC CHARLOTTE LLC	5
47	FROM K-1 - DJT HOLDINGS LLC - PINE HILL DEVELOPMENT LLC)	5
48	FROM K-1 - DJT HOLDINGS MM LLC - LFB AQUISITION MEMBER CORP	2
49	FROM K-1 - TRUMP INTERNATIONAL GOLF CLUB LLC	3,559
50	FROM K-1 - TRUMP PALACE PARC LLC	77
51	FROM K-1 - TRUMP EQUITABLE FIFTH AVE CO	125,365
52	FROM K-1 - DJT HOLDINGS LLC	22,954
53	FROM K-1 - FIFTY-SEVEN MANAGEMENT CORP	584
54	FROM K-1 - DJT HOLDINGS MM LLCLLC - TNGC CHARLOTTE LLC	4
55	FROM K-1 - DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MEMBER LLC	566
56	FROM K-1 - DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	12
57	FROM K-1 - DJT HOLDINGS MM LLCLLC - OCEAN AIR INVESTORS LLC	337
58	FROM K-1 - DJT HOLDINGS MM LLCLLC - OAKDALE INVESTORS LLC	150
59	FROM K-1 - DJT HOLDINGS MM LLCLLC - TRUMP FERRY POINT LLC	134
60	FROM K-1 - DJT HOLDINGS MM LLCLLC - LFB ACQUISITIONS LLC	2
61	FROM K-1 - DJT HOLDINGS LLC - 1125 SOUTH OCEAN LLC	3,990
62	FROM K-1 - 845 UN LIMITED PARTNERSHIP - 845 LP LLC	392
63	FROM K-1 - DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	74
64	FROM K-1 - DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MEMBER LLC	3,610
65	FROM K-1 - DJT HOLDINGS LLC MM - 40 WALL DEVELOPMENT ASSOCIATES LLC	162

SCHEDULE C

(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service
(99)

Profit or Loss From Business

(Sole Proprietorship)

Go to www.irs.gov/ScheduleC for instructions and the latest information.
Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2019

Attachment Sequence No. **09**

Name of proprietor: DONALD J TRUMP
 Social security number (SSN):
 A Principal business or profession, including product or service (see instructions): MANAGEMENT SERVICES
 B Enter code from instructions: 541600
 C Business name. If no separate business name, leave blank. DONALD J TRUMP
 D Employer ID number (EIN)/(see instr.):
 E Business address (including suite or room no.):
 City, town or post office, state, and ZIP code: NEW YORK, NY 10022

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) _____
 G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses. Yes No
 H If you started or acquired this business during 2019, check here. Yes No
 I Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) Yes No
 J If "Yes," did you or will you file required Forms 1099? Yes No

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	
2	Returns and allowances	2	0
3	Subtract line 2 from line 1	3	
4	Cost of goods sold (from line 42)	4	0
5	Gross profit. Subtract line 4 from line 3	5	
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	94,017
7	Gross income. Add lines 5 and 6	7	94,017

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8	Advertising	8		18	Office expense (see instructions)	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):	20	
11	Contract labor (see instructions)	11		20a	a Vehicles, machinery, and equipment	20a	
12	Depletion	12		20b	b Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	94,017
16	Interest (see instructions):			24	Travel and meals:		
16a	a Mortgage (paid to banks, etc.)	16a		24a	a Travel	24a	
16b	b Other	16b		24b	b Deductible meals (see instructions)	24b	
17	Legal and professional services	17		25	Utilities	25	
				26	Wages (less employment credits)	26	
				27a	27a Other expenses (from line 48)	27a	
				27b	b Reserved for future use	27b	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	94,017	28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	94,017
29	Tentative profit or (loss). Subtract line 28 from line 7	29	0	29	Tentative profit or (loss). Subtract line 28 from line 7	29	0
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.	30		30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.	30	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	0	31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	0
32	If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a	<input type="checkbox"/> All investment is at risk.	32a	<input type="checkbox"/> All investment is at risk.
				32b	<input type="checkbox"/> Some investment is not at risk.	32b	<input type="checkbox"/> Some investment is not at risk.

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. Yes No

Table with 2 columns: Description and Amount. Rows include: 35 Inventory at beginning of year, 36 Purchases less cost of items withdrawn for personal use, 37 Cost of labor, 38 Materials and supplies, 39 Other costs, 40 Add lines 35 through 39, 41 Inventory at end of year, 42 Cost of goods sold.

Part IV Information on Your Vehicle.

Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year)
44 Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for: a Business b Commuting (see instructions) c Other
45 Was your vehicle available for personal use during off-duty hours? Yes No
46 Do you (or your spouse) have another vehicle available for personal use? Yes No
47a Do you have evidence to support your deduction? Yes No
b If "Yes," is the evidence written? Yes No

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

Table with 2 columns: Description and Amount. Multiple rows for listing expenses.

48 Total other expenses. Enter here and on line 27a 48

SCHEDULE C

(Form 1040 or 1040-SR)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Go to www.irs.gov/ScheduleC for instructions and the latest information. Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2019

Attachment Sequence No. 09

Name of proprietor

DONALD J TRUMP

Social security number (SSN)

A Principal business or profession, including product or service (see instructions) AVIATION

B Enter code from instructions

532289

C Business name. If no separate business name, leave blank. DJT AEROSPACE LLC

D Employer ID number (EIN)/(see instr.)

E Business address (including suite or room no.) City, town or post office, state, and ZIP code C/O MAZARS WOODBURY, NY 11797

F Accounting method: (1) Cash (2) Accrual (3) Other (specify)

G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses

Yes No

H If you started or acquired this business during 2019, check here.

Yes No

I Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions)

Yes No

J If "Yes," did you or will you file required Forms 1099?

Yes No

Part I Income

Table with 7 rows for income items: 1 Gross receipts or sales (32,095), 2 Returns and allowances (0), 3 Subtract line 2 from line 1 (32,095), 4 Cost of goods sold (0), 5 Gross profit (32,095), 6 Other income, 7 Gross income (32,095).

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

Table with 27 rows for expenses: 8 Advertising, 9 Car and truck expenses, 10 Commissions and fees, 11 Contract labor (1,658), 12 Depletion, 13 Depreciation and section 179 expense deduction, 14 Employee benefit programs (65), 15 Insurance (5,701), 16 Interest, 17 Legal and professional services (1,115), 18 Office expense (953), 19 Pension and profit-sharing plans, 20 Rent or lease (18,344), 21 Repairs and maintenance (17,487), 22 Supplies (416), 23 Taxes and licenses (52), 24 Travel and meals (1,458), 25 Utilities, 26 Wages (35,367), 27a Other expenses (15,136), 27b Reserved for future use.

28 Total expenses before expenses for business use of home. Add lines 8 through 27a 97,752

29 Tentative profit or (loss). Subtract line 28 from line 7 -65,657

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: and (b) the part of your home used for business: Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.

31 Net profit or (loss). Subtract line 30 from line 29. -58,498

32 If you have a loss, check the box that describes your investment in this activity (see instructions). 32a All investment is at risk. 32b Some investment is not at risk.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: **a** Cost **b** Lower of cost or market **c** Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. Yes No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs	39	
40 Add lines 35 through 39	40	0
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	0

Part IV Information on Your Vehicle.

Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ _____

44 Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for:
a Business _____ **b** Commuting (see instructions) _____ **c** Other _____

45 Was your vehicle available for personal use during off-duty hours? Yes No

46 Do you (or your spouse) have another vehicle available for personal use? Yes No

47a Do you have evidence to support your deduction? Yes No
b If "Yes," is the evidence written? Yes No

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

MISCELLANEOUS FEES	93
LANDING FEES	2,992
CLEANING FEES	208
FUEL EXPENSE	7,511
DUES & SUBSCRIPTIONS	1,189
CREW TRAINING	3,143
48 Total other expenses. Enter here and on line 27a	48 15,136

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Part II, Line 31 - Passive Activity Loss Literal : PAL

Part II, Line 31 - Passive Activity Loss Amount : 58498

SCHEDULE C (Form 1040 or 1040-SR)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2019

Attachment Sequence No. 09

Department of the Treasury Internal Revenue Service (99)

Go to www.irs.gov/ScheduleC for instructions and the latest information. Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor: DONALD J TRUMP. Social security number (SSN). A Principal business or profession, including product or service (see instructions) AVIATION. B Enter code from instructions 532289. C Business name. If no separate business name, leave blank. DJT OPERATIONS I LLC. D Employer ID number (EIN)/(see instr.) 27-3212458.

E Business address (including suite or room no.) C/O MAZARS. City, town or post office, state, and ZIP code WOODBURY, NY 11797.

F Accounting method: (1) [X] Cash (2) [] Accrual (3) [] Other (specify). G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses. H If you started or acquired this business during 2019, check here. I Did you make any payments in 2019 that would require you to file Form(s) 1099? J If "Yes," did you or will you file required Forms 1099?

Part I Income table with 7 rows. Line 1: 50,080. Line 2: 0. Line 3: 50,080. Line 4: 0. Line 5: 50,080. Line 6: 50,080. Line 7: 50,080.

Part II Expenses table with 32 rows. Line 8-17: Advertising, Car and truck expenses, Commissions and fees, Contract labor, Depletion, Depreciation and section 179 expense deduction, Employee benefit programs, Insurance, Interest, Legal and professional services. Line 18-27: Office expense, Pension and profit-sharing plans, Rent or lease, Taxes and licenses, Travel and meals, Utilities, Wages, Other expenses. Line 28: Total expenses before expenses for business use of home. Line 29: Tentative profit or (loss). Line 30: Expenses for business use of your home. Line 31: Net profit or (loss). Line 32: If you have a loss, check the box that describes your investment in this activity.

Form 1040 Schedule C, Part V, Other expenses:

(a) Description	(b) Amount
MISCELLANEOUS FEES	93
LANDING FEES	2,992
CLEANING FEES	208
FUEL EXPENSE	7,511
DUES & SUBSCRIPTIONS	1,189
CREW TRAINING	3,143

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a [] Cost b [] Lower of cost or market c [] Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. [] Yes [] No

Table with 2 columns: Description and Amount. Rows include: 35 Inventory at beginning of year, 36 Purchases less cost of items withdrawn for personal use, 37 Cost of labor, 38 Materials and supplies, 39 Other costs, 40 Add lines 35 through 39, 41 Inventory at end of year, 42 Cost of goods sold.

Part IV Information on Your Vehicle.

Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year)
44 Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for: a Business b Commuting c Other
45 Was your vehicle available for personal use during off-duty hours?
46 Do you (or your spouse) have another vehicle available for personal use?
47a Do you have evidence to support your deduction?
b If "Yes," is the evidence written?

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

Table with 2 columns: Description and Amount. Multiple rows for listing expenses.

48 Total other expenses. Enter here and on line 27a

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN: ---

Name: DONALD J & MELANIA<TRUMP

SCHEDULE C
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service
(99)

Profit or Loss From Business

(Sole Proprietorship)

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2019

Attachment
Sequence No. 09

Name of proprietor: DONALD J TRUMP
Social security number (SSN):

A Principal business or profession, including product or service (see instructions): AVIATION
B Enter code from instructions: 532289

C Business name. If no separate business name, leave blank: DT ENDEAVOR I LLC
D Employer ID number (EIN)/(see instr.): 35-2555712

E Business address (including suite or room no.): City, town or post office, state, and ZIP code: NEW YORK, NY 10022

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) _____
G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses. Yes No
H If you started or acquired this business during 2019, check here.
I Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) Yes No
J If "Yes," did you or will you file required Forms 1099? Yes No

Part I Income			
1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	120,328
2	Returns and allowances	2	0
3	Subtract line 2 from line 1	3	120,328
4	Cost of goods sold (from line 42)	4	0
5	Gross profit. Subtract line 4 from line 3	5	120,328
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6	7	120,328

Part II Expenses. Enter expenses for business use of your home only on line 30.			
8	Advertising	8	
9	Car and truck expenses (see instructions)	9	
10	Commissions and fees	10	
11	Contract labor (see instructions)	11	
12	Depletion	12	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	12,852
14	Employee benefit programs (other than on line 19)	14	
15	Insurance (other than health)	15	12,636
16	Interest (see instructions):		
	a Mortgage (paid to banks, etc.)	16a	
	b Other	16b	
17	Legal and professional services	17	2,099
18	Office expense (see instructions)	18	
19	Pension and profit-sharing plans	19	
20	Rent or lease (see instructions):		
	a Vehicles, machinery, and equipment	20a	33,635
	b Other business property	20b	
21	Repairs and maintenance	21	161,473
22	Supplies (not included in Part III)	22	11,488
23	Taxes and licenses	23	2,160
24	Travel and meals:		
	a Travel	24a	
	b Deductible meals (see instructions)	24b	
25	Utilities	25	
26	Wages (less employment credits)	26	32,841
27a	Other expenses (from line 48)	27a	81,519
	b Reserved for future use	27b	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	350,703
29	Tentative profit or (loss). Subtract line 28 from line 7	29	-230,375
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.	30	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	-205,258
32	If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.		
	32a <input checked="" type="checkbox"/> All investment is at risk.		
	32b <input type="checkbox"/> Some investment is not at risk.		

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: **a** Cost **b** Lower of cost or market **c** Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. Yes No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs	39	
40 Add lines 35 through 39	40	0
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	0

Part IV Information on Your Vehicle.

Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ _____

44 Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for:
a Business _____ **b** Commuting (see instructions) _____ **c** Other _____

45 Was your vehicle available for personal use during off-duty hours? Yes No

46 Do you (or your spouse) have another vehicle available for personal use? Yes No

47a Do you have evidence to support your deduction? Yes No

b If "Yes," is the evidence written? Yes No

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

FUEL EXPENSE	65,865
TELEPHONE	15,557
LICENSES & PERMITS	97

48 **Total other expenses.** Enter here and on line 27a **48** 81,519

SCHEDULE C
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service
(99)

Profit or Loss From Business

(Sole Proprietorship)

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2019

Attachment
Sequence No. 09

Name of proprietor MELANIA TRUMP	Social security number (SSN)
A Principal business or profession, including product or service (see instructions) MODEL	B Enter code from instructions 711510
C Business name. If no separate business name, leave blank. MELANIA TRUMP	D Employer ID number (EIN)/(see instr.)

E Business address (including suite or room no.) ▶
City, town or post office, state, and ZIP code **NEW YORK, NY 10022**

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) _____

G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses . . . Yes No

H If you started or acquired this business during 2019, check here.

I Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) Yes No

J If "Yes," did you or will you file required Forms 1099? Yes No

Part I Income			
1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1		
2 Returns and allowances	2		0
3 Subtract line 2 from line 1	3		
4 Cost of goods sold (from line 42)	4		0
5 Gross profit. Subtract line 4 from line 3	5		
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6		3,848
7 Gross income. Add lines 5 and 6	7		3,848

Part II Expenses. Enter expenses for business use of your home only on line 30.			
8 Advertising	8		
9 Car and truck expenses (see instructions)	9		
10 Commissions and fees	10		
11 Contract labor (see instructions)	11		
12 Depletion	12		
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		
14 Employee benefit programs (other than on line 19)	14		
15 Insurance (other than health)	15		
16 Interest (see instructions):			
a Mortgage (paid to banks, etc.)	16a		
b Other	16b		
17 Legal and professional services	17		
18 Office expense (see instructions)	18		
19 Pension and profit-sharing plans	19		
20 Rent or lease (see instructions):			
a Vehicles, machinery, and equipment	20a		
b Other business property	20b		
21 Repairs and maintenance	21		
22 Supplies (not included in Part III)	22		
23 Taxes and licenses	23		3,848
24 Travel and meals:			
a Travel	24a		
b Deductible meals (see instructions)	24b		
25 Utilities	25		
26 Wages (less employment credits)	26		
27a Other expenses (from line 48)	27a		
b Reserved for future use	27b		
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28		3,848
29 Tentative profit or (loss). Subtract line 28 from line 7	29		0
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.	30		
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31		0
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.		32a <input type="checkbox"/> All investment is at risk. 32b <input type="checkbox"/> Some investment is not at risk.	

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. Yes No

Table with 2 columns: Description and Amount. Rows include: 35 Inventory at beginning of year, 36 Purchases less cost of items withdrawn for personal use, 37 Cost of labor, 38 Materials and supplies, 39 Other costs, 40 Add lines 35 through 39, 41 Inventory at end of year, 42 Cost of goods sold.

Part IV Information on Your Vehicle.

Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year)
44 Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for: a Business b Commuting (see instructions) c Other
45 Was your vehicle available for personal use during off-duty hours? Yes No
46 Do you (or your spouse) have another vehicle available for personal use? Yes No
47a Do you have evidence to support your deduction? Yes No
b If "Yes," is the evidence written? Yes No

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

Table with 2 columns: Description and Amount. Multiple rows for listing expenses.

48 Total other expenses. Enter here and on line 27a

SCHEDULE C (Form 1040 or 1040-SR)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2019

Attachment Sequence No. 09

Department of the Treasury Internal Revenue Service (99)

Go to www.irs.gov/ScheduleC for instructions and the latest information. Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

DONALD J TRUMP

Social security number (SSN)

A Principal business or profession, including product or service (see instructions) AVIATION

B Enter code from instructions 532289

C Business name. If no separate business name, leave blank. DJT OPERATIONS II LLC

D Employer ID number (EIN)/(see instr.) 27-3212492

E Business address (including suite or room no.) City, town or post office, state, and ZIP code C/O MAZARS WOODBURY, NY 11797

F Accounting method: (1) Cash (2) Accrual (3) Other (specify)

G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2019, check here. Yes No

I Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) Yes No

J If "Yes," did you or will you file required Forms 1099? Yes No

Part I Income

Table with 7 rows for income items: 1 Gross receipts or sales, 2 Returns and allowances, 3 Subtract line 2 from line 1, 4 Cost of goods sold, 5 Gross profit, 6 Other income, 7 Gross income.

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

Table with 20 rows for expenses: 8 Advertising, 9 Car and truck expenses, 10 Commissions and fees, 11 Contract labor, 12 Depletion, 13 Depreciation and section 179 expense deduction, 14 Employee benefit programs, 15 Insurance, 16 Interest, 17 Legal and professional services, 18 Office expense, 19 Pension and profit-sharing plans, 20 Rent or lease, 21 Repairs and maintenance, 22 Supplies, 23 Taxes and licenses, 24 Travel and meals, 25 Utilities, 26 Wages, 27a Other expenses, 27b Reserved for future use.

28 Total expenses before expenses for business use of home. Add lines 8 through 27a 7,382

29 Tentative profit or (loss). Subtract line 28 from line 7 -7,382

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: and (b) the part of your home used for business: Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.

31 Net profit or (loss). Subtract line 30 from line 29. If a profit, enter on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2. If you checked the box on line 1, see instructions. Estates and trusts, enter on Form 1041, line 3. If a loss, you must go to line 32. -6,577

32 If you have a loss, check the box that describes your investment in this activity (see instructions). If you checked 32a, enter the loss on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2. If you checked the box on line 1, see the line 31 instructions. Estates and trusts, enter on Form 1041, line 3. If you checked 32b, you must attach Form 6198. Your loss may be limited. 32a All investment is at risk. 32b Some investment is not at risk.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Part II, Line 31 - Passive Activity Loss Literal : PAL

Part II, Line 31 - Passive Activity Loss Amount : 205258

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a [] Cost b [] Lower of cost or market c [] Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. [] Yes [] No

Table with 2 columns: Description and Amount. Rows include: 35 Inventory at beginning of year, 36 Purchases less cost of items withdrawn for personal use, 37 Cost of labor, 38 Materials and supplies, 39 Other costs, 40 Add lines 35 through 39, 41 Inventory at end of year, 42 Cost of goods sold.

Part IV Information on Your Vehicle.

Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year)
44 Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for: a Business b Commuting (see instructions) c Other
45 Was your vehicle available for personal use during off-duty hours? [] Yes [] No
46 Do you (or your spouse) have another vehicle available for personal use? [] Yes [] No
47a Do you have evidence to support your deduction? [] Yes [] No
b If "Yes," is the evidence written? [] Yes [] No

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

Table with 2 columns: Description and Amount. Multiple rows for listing expenses.

48 Total other expenses. Enter here and on line 27a 48

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Part II, Line 31 - Passive Activity Loss Literal : PAL

Part II, Line 31 - Passive Activity Loss Amount : 6577

**SCHEDULE C
(Form 8995-A)**

Loss Netting and Carryforward

OMB No. XXXX-XXXX

2019

Attachment
Sequence No. **55D**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 8995-A.
▶ Go to www.irs.gov/Form8995-A for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

DONALD J & MELANIA<TRUMP

If you have more than three trades, businesses, or aggregations, complete and attach as many Schedules C as needed. See instructions.

1	Trade, business, or aggregation name	(a) Qualified business income/(loss)	(b) Reduction for loss netting (see instructions)	(c) Adjusted qualified business income (Combine (a) and (b). If zero or less, enter -0-.)
	See Additional Data Table			
2	Qualified business net (loss) carryforward from prior years. See instructions		2	-153,666
3	Total trades, businesses, or aggregations losses. Combine the negative amounts on lines 1, column (a), and 2 for all trades or business		3	-57,671,819
4	Total trades, businesses, or aggregations income. Add the positive amounts on lines 1, column (a), for all trades, businesses, or aggregations		4	53,245,464
5	Losses netted with income of other trades, businesses, or aggregations. Enter in the parentheses on line 5 the smaller of the absolute value of line 3 or line 4. Allocate this amount to each trade, business, or aggregation on line 1, column (b). See instructions		5	-53,245,464
6	Qualified business net (loss) carryforward. Subtract line 5 from line 3. If zero or more, enter -0-		6	-4,426,355

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 71661B

Schedule C (Form 8995-A) 2019

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

Line 1 - Loss Netting and Carryforward Group Information

1	Trade, business, or aggregation name	(a) Qualified business income/(loss)	(b) Reduction for loss netting (see instructions)	(c) Adjusted qualified business income (Combine (a) and (b). If zero or less, enter -0-.)
	MAR-A-LAGO CLUB LLC	4,780,935	-4,780,935	0
	40 WALL DEVELOPMENT ASSOC LLC	5,411,970	-5,411,970	0
	HUDSON WATERFRONT ASSOC V LP	286,857	-286,857	0
	HUDSON WATERFRONT ASSOC III LP	536,567	-536,567	0
	HUDSON WATERFRONT ASSOC IV LP	208,436	-208,436	0
	TRUMP CPS LLC	3,520,145	-3,520,145	0
	TRUMP PLAZA LLC	1,286,651	-1,286,651	0
	TRUMP INTERNATIONAL GOLF CLUB LLC	1,669,954	-1,669,954	0
	TIHT COMMERCIAL LLC	208,426	-208,426	0
	TRUMP INTERNATIONAL HOTEL HAWAII LLC	2,428,640	-2,428,640	0
	DJT HOLDINGS LLC - TRUMP CHICAGO HOTEL MANAGE	1,658,540	-1,658,540	0
	DJT HOLDINGS LLC - TRUMP CHICAGO COMMERCIAL M	16,710	-16,710	0
	DJT HOLDINGS LLC - TRUMP CHICAGO RESIDENTIAL	410,788	-410,788	0
	DJT HOLDINGS LLC - LFB ACQUISITION LLC	3,231,485	-3,231,485	0
	T INTERNATIONAL REALTY LLC	526,891	-526,891	0
	DJT HOLDINGS LLC - TNGC CHARLOTTE LLC	523,372	-523,372	0
	DJT HOLDINGS LLC - TRUMP LAS VEGAS MEMBER LLC	1,688,333	-1,688,333	0
	DJT HOLDINGS LLC - TRUMP LAS VEGAS MANAGING M	14,931	-14,931	0
	HUDSON WATERFRONT ASSOCIATES V LP	4,042,586	-4,042,586	0
	HUDSON WATERFRONT ASSOC III LP	7,562,933	-7,562,933	0
	TRUMP 845 UN GP LLC	240,931	-240,931	0
	DJT HOLDINGS LLC - TRUMP INT'L HOTEL & TOWER	1,398,190	-1,398,190	0

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

1	Trade, business, or aggregation name	(a) Qualified business income/(loss)	(b) Reduction for loss netting (see instructions)	(c) Adjusted qualified business income (Combine (a) and (b). If zero or less, enter -0-.)
	845 UN LIMITED PARTNERSHIP - 845 LP LLC	356,184	-356,184	0
	DJT HOLDINGS LLC - TNGC JUPITER MANAGEMENT LL	94,759	-94,759	0
	DJT HOLDINGS LLC TW VENTURE I LLC	17,883	-17,883	0
	DT CONNECT II LLC	64,938	-64,938	0
	HUDSON WATERFRONT ASSOCIATES IV LP	365,399	-365,399	0
	DJT HOLDINGS LLC - TRUMP GOLF ACQUISITIONS LL	4,441	-4,441	0
	TRUMP EQUITABLE FIFTH AVE CO	8,735,223	-8,735,223	0
	TIPPERARY REALTY CORP	8,744	-8,744	0
	DJT HOLDINGS MM LLC - MAR-A-LAGO CLUBLLC	4,847	-4,847	0
	TRUMP PLAZA MEMBER INC	12,996	-12,996	0
	TIHH MEMBER CORP	16,781	-16,781	0
	DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO HOTEL	16,753	-16,753	0
	DJT HOLDINGS MM LLC - TRUMP CHICAGO RESIDENTI	4,191	-4,191	0
	DJT HOLDINGS MM LLC - TRUMP CHICAGO COMMERCIA	170	-170	0
	DJT HOLDINGS MM LLC - LFB AQUISITION MEMBER C	32,971	-32,971	0
	DT CONNECT II MEMBER CORP	656	-656	0
	DJT HOLDINGS MM LLC - TNGC CHARLOTTE LLC	5,340	-5,340	0
	DJT HOLDINGS MM LLC - TNGC JUPITER MANAGEMENT	967	-967	0
	DJT HOLDINGS MM LLC - JUPITER GOLF CLUB MANAG	3,675	-3,675	0
	DJT HOLDINGS MM LLC - DT LIDO TECHNICAL SERVI	240	-240	0
	DJT HOLDINGS MM LLC - DT BALI TECHNICAL SERVI	167	-167	0
	DJT HOLDINGS MM LLCLLC - TRUMP GOLF ACQUISIT	45	-45	0
	DJT HOLDINGS MM LLCLLC - LFB ACQUISITIONS LL	32,641	-32,641	0
	DJT HOLDINGS MM LLCLLC - TNGC CHARLOTTE LLC	5,287	-5,287	0
	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MEM	17,054	-17,054	0
	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MAN	151	-151	0
	DJT HOLDINGS MM LLCLLC - TW VENTURE I LLC	181	-181	0
	DJT HOLDINGS MM LLCLLC - TNGC JUPITER MGT LL	957	-957	0
	DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO COMM	169	-169	0
	HUDSON WATERFRONT ASSOC I LP	171,274	-171,274	0
	DJT HOLDINGS LLC - T TOWER RETAIL LLC	391,560	-391,560	0
	DJT HOLDINGS MM LLC TRUMP CHICAGO HOTEL MANAG	16,922	-16,922	0
	DJT HOLDINGS MM LLC TRUMP INT'L GOLF CLUB	16	-16	0
	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MANAGIN	1,358	-1,358	0
	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MEMBER	128,239	-128,239	0
	DJT HOLDINGS LLC MM - 40 WALL DEVELOPMENT AS	5,399	-5,399	0
	DJT HOLDINGS MM LLCLLC TRUMP CHICAGO RESIDEN	4,149	-4,149	0
	DJT HOLDINGS LLC TRUMP MODEL MANAGEMENT LLC (1,024,260	-1,024,260	0
	DJT OPERATIONS I LLC	44,206	-44,206	0
	THE EAST 61 ST COMPANY	-35,342		
	THE EAST 61 ST COMPANY	-318		
	PARK BRIAR ASSOCIATES LLC	-25,781		
	DJT HOLDINGS LLC - MISS UNIVERSE LP LLP	-21,061		
	STARRETT CITY ASSOCIATES	-103,971		
	DJT HOLDINGS LLC - TRUMP INTERNATIONAL HOTELS	-2,999,976		
	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB C	-587,163		
	SC LP SHOPPING CENTER LLC	-3,871		
	DJT HOLDINGS LLC - TRUMP DEVELOPMENT SERVICES	-37,803		
	DJT HOLDINGS LLC - TRUMP SALES & LEASING CHIC	-2,175		
	DJT HOLDINGS LLC - TRUMP FERRY POINT LLC	-4,182,793		
	DJT HOLDINGS LLC - TRUMP PANAMA HOTEL MANAGEM	-1,226,345		
	DJT HOLDINGS LLC - TRUMP CAROUSEL LLC	-13,437		
	DJT HOLDINGS LLC - 401 MEZZ	-6,445,795		
	DJT HOLDINGS LLC - TRUMP SCOTSBOROUGH SQUARE	-26,371		
	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB L	-2,828,232		
	DJT HOLDINGS LLC - TNGC PINE HILL LLC	-1,137,744		
	DJT HOLDINGS LLC - TNGC DUTCHESS COUNTY LLC	-687,231		
	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB W	-619,622		
	DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITION	-428,548		
	DJT HOLDINGS LLC - TRUMP WORLD PRODUCTIONS LL	-441		
	DJT HOLDINGS LLC - TRUMP VINEYARD ESTATES LL	-503,175		
	DJT HOLDINGS LLC - TRUMP VIRGINIA LOT 5 LLC	-3,003		
	DJT HOLDINGS LLC - TRUMP CHICAGO RETAIL MANAG	-384		
	DJT HOLDINGS LLC - TRUMP ENDEAVOR 12 LLC	-4,512,268		
	DJT HOLDINGS JUPITER GOLF CLUB	-385,574		

1	Trade, business, or aggregation name	(a) Qualified business income/(loss)	(b) Reduction for loss netting (see instructions)	(c) Adjusted qualified business income (Combine (a) and (b). If zero or less, enter -0-.)
	DJT HOLDINGS - TRUMP OLD POST OFFICE LLC	-13,897,570		
	DJT HOLDINGS LLC - THC SALES & MARKETING LLC	-1,224,476		
	DJT HOLDINGS LLC - THC CENTRAL RESERVATIONS L	-252,851		
	DJT HOLDINGS LLC - THC CHINA TECHNICAL SERVIC	-2,080		
	DJT HOLDINGS LLC - THC BAKU SERVICES LLC	-2,654		
	DJT HOLDINGS LLC - DTTM OPERATIONS LLC	-13,988		
	TRUMP PALACE PARC LLC	-137,834		
	DJT HOLDINGS LLC - WESTMINSTER HOTEL MANAGEME	-4,546		
	DJT HOLDINGS LLC - TRUMP REALTY SERVICES LLC	-478		
	DJT HOLDINGS LLC - WEST PALM OPERATIONS LLC	-25,868		
	DJT HOLDINGS LLC - LAMINGTON FAMILY HOLDINGS	-908		
	DJT HOLDINGS LLC - THC HOTEL DEVELOPMENT LLC	-315		
	DJT HOLDINGS LLC - TRUMP SOHO MEMBER LLC	-1,395		
	DJT HOLDINGS LLC - TRUMP LAS VEGAS DEVELOPMEN	-265		
	DJT HOLDINGS LLC - TRUMP LAUDERDALE DEVELOPME	-123		
	DJT HOLDINGS LLC - CHICAGO UNIT ACQUISITIONS	-1,315		
	DJT HOLDINGS LLC - DT VENTURE II LLC	-365		
	DJT HOLDINGS LLC - TRUMP PHOENIX DEVELOPMENT	-315		
	DJT HOLDINGS LLC - TRUMP CARRIBEAN LLC	-231		
	DJT HOLDINGS LLC - TRUMP ICE LLC	-29,929		
	DJT HOLDINGS LLC - TRUMP LAUDERDALE DEVELOPME	-2,038		
	DJT HOLDINGS LLC - TRUMP CHICAGO DEVELOPMENT	-433		
	DJT HOLDINGS LLC - TRUMP 106 CPS LLC	-72		
	DJT HOLDINGS LLC - TRUMP RESTAURANTS LLC	-540,626		
	DJT HOLDINGS LLC - WOLLMAN RINK OPERATIONS LL	-5,438		
	DJT HOLDINGS LLC	-1,373,564		
	DJT HOLDINGS LLC - TRUMP WORLD PUBLICATIONS L	-50		
	DJT HOLDINGS LLC - TIHT HOLDING COMPANY LLC	-288		
	DJT HOLDINGS LLC - FLORIDA PROPERTIES MANAGEM	-123		
	DJT HOLDINGS LLC - 1094 S OCEAN AVENUE LLC	-49,305		
	DJT HOLDINGS LLC - 124 WOODBRIDGE	-84,819		
	PLAZA CONSULTING CORP	-1,213		
	THE TRUMP CORPORATION	-10,891,604		
	TRUMP CPS CORP	-25		
	FIRST MEMBER INC	-263		
	DJT HOLDINGS MM LLC - TRUMP PAGEANTS INC	-434		
	TRUMP TOWER MANAGING MEMBER INC	-10,973		
	TRUMP 845 UN MGR CORP	-1,741		
	BEACH HAVEN APARMTENTS #1 INC DJT GR TR	-760		
	SHORE HAVEN APARTMENTS #1 INC DJT GR TR	-29,714		
	TRUMP MANAGEMENT INC	-5,704		
	TIHT MEMBER LLC	-1,852		
	DJT HOLDINGS MM LLC - TNGC DUTCHESS COUNTY ME	-7,012		
	DJT HOLDINGS MM LLC - TRUMP DEVELOPMENT SERVI	-386		
	DJT HOLDINGS MM LLC - TRUMP CAROUSEL MEMBER C	-137		
	DJT HOLDINGS MM LLC - TRUMP PANAMA HOTEL MANA	-12,513		
	DJT HOLDINGS MM LLC - TRUMP SALES & LEASING C	-22		
	DJT HOLDINGS MANAGING MEMBER LLC	-191,330		
	DJT HOLDINGS MM LLC - TRUMP SCOTSBOROUGH SQUA	-269		
	DJT HOLDINGS MM LLC - TRUMP VIRGINIA LOT 5 MA	-30		
	DJT HOLDINGS MM LLC - TRUMP ENDEAVOR 12 MANAG	-46,039		
	TAG AIR INC	-875,264		
	DJT HOLDINGS MM LLC - TRUMP VINEYARD ESTATES	-5,083		
	DJT HOLDINGS MM LLC - TRUMP WORLD PRODUCTIONS	-4		
	DJT HOLDINGS MM LLC - TRUMP NATIONAL GOLF CLU	-28,834		
	DJT HOLDINGS MM LLC - TRUMP VIRGINIA ACQUISIT	-3,822		
	DJT HOLDINGS MM LLC - THC CENTRAL RESERVATION	-1,481		
	DJT HOLDINGS MM LLC - THC SALES & MARKETING L	-12,493		
	DJT HOLDINGS MANAGING MEMBER LLC	-13,705		
	DJT HOLDINGS MM LLC - THC BAKU SERVICES MEMBE	-27		
	DJT HOLDINGS MM LLC - THC CHINA-TECHNICAL SER	-21		
	TTTT VENTURE MEMBER CORP	-282		
	DJT HOLDINGS MM LLC - TNGC PINE HILL LLC	-11,608		
	DJT HOLDINGS MM LLC - TRUMP NATIONALGOLF CLUB	-4,837		
	DJT HOLDINGS MM LLC - T RETAIL MANAGING LLC	-233		

1 Trade, business, or aggregation name	(a) Qualified business income/(loss)	(b) Reduction for loss netting (see instructions)	(c) Adjusted qualified business income (Combine (a) and (b). If zero or less, enter -0-.)
DJT HOLDINGS MM LLCLLC TRUMP RESTAURANTS LLC	-5,167		
DJT HOLDINGS MM LLCLLC - WOLLMAN RINK OPERAT	-55		
DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO DEVEL	-4		
DJT HOLDINGS MM LLCLLC - TRUMP REALTY SERVIC	-4		
DJT HOLDINGS MM LLCLLC - TRUMP KOREAN PROJEC	-1		
DJT HOLDINGS MM LLCLLC - WEST PALM OPERATION	-261		
DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS DEV	-3		
DJT HOLDINGS MM LLCLLC TRUMP LAUDERDALES DEV	-1		
DJT HOLDINGS MM LLCLLC - CHICAGO UNIT ACQUIS	-13		
DJT HOLDINGS MM LLCLLC - DT VENTURE II LLC	-4		
DJT HOLDINGS MM LLCLLC - TRUMP PHOENIX DEVEL	-4		
DJT HOLDINGS MM LLCLLC - TRUMP WORLD PUBLICA	-1		
DJT HOLDINGS MM LLCLLC - TRUMP CARIBEAN LLC	-3		
DJT HOLDINGS MM LLCLLC - TRUMP ICE LLC	-302		
DJT HOLDINGS MM LLCLLC - SCOTSBOROUGH SQUARE	-266		
DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA LOT	-30		
DJT HOLDINGS MM LLCLLC - TNGC BRIARCLIFF	-28,545		
DJT HOLDINGS MM LLCLLC - TNGC PINE HILL LLC	-11,493		
DJT HOLDINGS MM LLCLLC - TNGC DUTCHESS COUNT	-6,942		
DJT HOLDINGS MM LLCLLC - TRUMP ENDEAVOR 12 L	-45,578		
DJT HOLDINGS MM LLCLLC - JUPITER GOLF CLUB L	-3,894		
DJT HOLDINGS MM LLCLLC - TRUMP OLD POST OFFI	-140,379		
DJT HOLDINGS MM LLCLLC - TNGC WASHINGTON DC	-6,259		
DJT HOLDINGS MM LLCLLC - TRUMP VINEYARD ESTA	-5,134		
DJT HOLDINGS MM LLCLLC - 401 MEZZ VENTURE	-65,109		
DJT HOLDINGS MM LLCLLC - TRUMP LAUDERDALE DE	-20		
DJT HOLDINGS MM LLCLLC - LAMINGTON FAMILY HO	-9		
DJT HOLDINGS MM LLCLLC - THC HOTEL DEVELOPME	-4		
DJT HOLDINGS MM LLCLLC - TRUMP WORLD PRODUCT	-4		
DJT HOLDINGS MM LLCLLC - TRUMP SALES & LEAS	-22		
DJT HOLDINGS MM LLCLLC - TRUMP DEVELOPMENT S	-382		
DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO RETAI	-4		
DJT HOLDINGS MM LLCLLC - TRUMP CAROUSEL LLC	-135		
DJT HOLDINGS MM LLCLLC - WESTMINSTER HOTEL M	-46		
DJT HOLDINGS MM LLCLLC - MISS UNIVERSE LLL	-213		
DJT HOLDINGS MM LLCLLC - TRUMP PANAMA HOTEL	-12,387		
DJT HOLDINGS MM LLCLLC - THC CHINA TECHNICAL	-21		
DJT HOLDINGS MM LLCLLC - DJT ENTREPRENEUER M	-20		
DJT HOLDINGS MM LLCLLC - TRUMP FERRY POINT L	-42,251		
DJT HOLDINGS MM LLCLLC - DTTM OPERATIONS LLC	-617		
DJT HOLDINGS MM LLCLLC - TRUMP NATL GOLF CLU	-5,931		
DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA ACQU	-4,328		
DJT HOLDINGS MM LLCLLC - THC SALES & MARKETI	-12,368		
DJT HOLDINGS MM LLCLLC - TRUMP SOHO MEMBER L	-14		
555 CALIFORNIA SERVICES JV LLC	-100,590		
TRUMP FERRY POINT MEMBER CORP	-42,677		
DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITION	-60,570		
DJT HOLDINGS MM LLC - TRUMP NATIONAL GOLF CLU	-6,322		
DJT HOLDINGS MM LLCLLC - TRUMP GOLF MANAGEME	-1		
DJT HOLDINGS MM LLCLLC THC CENTRAL RESERVATI	-2,554		
DJT HOLDINGS LLC - TMG MEMBER LLC	-30		
DJT HOLDINGS LLC - TRUMP KOREAN PROJECTS LLC	-58		
DJT HOLDINGS LLC - DJT ENTREPRENEUR MANAGING	-2,061		
DJT HOLDINGS LLC - DJT ENTREPRENEUR MEMBER LL	-2,005		
DJT HOLDINGS LLC - TRUMP GOLF MANAGEMENT LLC	-58		
DJT HOLDINGS LLC - TRUMP BRAZIL LLC	-265		
DJT AEROSPACE LLC	-58,498		
DJT OPERATIONS II LLC	-6,577		
DT ENDEAVOR I LLC	-205,258		



SCHEDULE D (Form 1040 or 1040-SR)

Capital Gains and Losses

OMB No. 1545-0074

Attach to Form 1040, Form 1040-SR, or Form 1040-NR.

2019

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99)

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.

Name(s) shown on return DONALD J & MELANIA<TRUMP

Your social security number

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions)

Table with 5 columns: (d) Proceeds (sales price), (e) Cost (or other basis), (g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g), (h) Gain or (loss). Rows include 1a, 1b, 2, 3, 4, 5, 6, 7.

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

Table with 5 columns: (d) Proceeds (sales price), (e) Cost (or other basis), (g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g), (h) Gain or (loss). Rows include 8a, 8b, 9, 10, 11, 12, 13, 14, 15.

Part III Summary

<p>16 Combine lines 7 and 15 and enter the result</p> <ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040 or Form 1040-SR, line 6, or Form 1040-NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040 or Form 1040-SR, line 6, or Form 1040-NR, line 14. Then go to line 22. 	16	9,257,197
<p>17 Are lines 15 and 16 both gains?</p> <p><input checked="" type="checkbox"/> Yes. Go to line 18.</p> <p><input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p>	18	
<p>18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet ▶</p>		
<p>19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet ▶</p>	19	539,141
<p>20 Are lines 18 and 19 both zero or blank?</p> <p><input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). Do not complete lines 21 and 22 below.</p> <p><input checked="" type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.</p>	21	()
<p>21 If line 16 is a loss, here and on (Form 1040 or Form 1040-SR), line 6; or Form 1040-NR, line 14, the smaller of:</p> <ul style="list-style-type: none"> • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) } <p>Note. When figuring which amount is smaller, treat both amounts as positive numbers.</p>		
<p>22 Do you have qualified dividends on Form 1040 or 1040-SR, line 3a, or Form 1040-NR, line 10b?</p> <p><input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42).</p> <p><input type="checkbox"/> No. Complete the rest of Form 1040, Form 1040-SR, or Form 1040-NR.</p>		

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

SCHEDULE E (Form 1040 or 1040-SR)

Supplemental Income and Loss (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

2019

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99)

Attach to Form 1040, 1040-SR, 1040-NR, or Form 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information.

Name(s) shown on return DONALD J & MELANIA<TRUMP

Your social security number

Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

- A Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions)
B If "Yes," did you or will you file all required Forms 1099?

1a Physical address of each property (street, city, state, and ZIP code)

Table with columns A, B, C for physical address of each property.

Table with columns 1b Type of Property, 2 Fair Rental Days, Personal Use Days, QJV for ROYALTIES.

- Type of Property: 1 Single Family Residence, 2 Multi-Family Residence, 3 Vacation/Short-Term Rental, 4 Commercial, 5 Land, 6 Royalties, 7 Self-Rental, 8 Other (describe)

Main income and expense table with columns for Income, Properties, and sub-columns A, B, C. Includes rows for Rents received, Royalties received, Expenses, and Total rental real estate and royalty income or (loss).

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Name(s) shown on return. Do not enter name and social security number if shown on other side. DONALD J & MELANIA<TRUMP

Your social security number

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations - Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6198 (see instructions).

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section. [X] Yes [] No

Table with 6 columns: (a) Name, (b) Enter P for partnership; S for S corporation, (c) Check if foreign partnership, (d) Employer identification number, (e) Check if basis computation is required, (f) Check if any amount is not at risk. Rows A, B, C, D.

Table with 5 columns: (g) Passive loss allowed, (h) Passive income from Schedule K-1, (i) Nonpassive loss allowed, (j) Section 179 expense deduction from Form 4562, (k) Nonpassive income from Schedule K-1. Rows A, B, C, D, 29a Totals, 29b Totals, 30, 31, 32.

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name, (b) Employer identification number. Rows A, B.

Table with 4 columns: (c) Passive deduction or loss allowed, (d) Passive income from Schedule K-1, (e) Deduction or loss from Schedule K-1, (f) Other income from Schedule K-1. Rows A, B, 34a Totals, 34b Totals, 35, 36, 37.

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs)-Residual Holder

Table with 5 columns: (a) Name, (b) Employer identification number, (c) Excess inclusion from Schedules Q, line 2c, (d) Taxable income (net loss) from Schedules Q, line 1b, (e) Income from Schedules Q, line 3b. Rows 38, 39.

Part V Summary

Table with 2 columns: Description, Amount. Rows 40, 41, 42, 43.

Statement SBE Supplemental Business Expenses

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred THE EAST 61 ST. COMPANY
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 1	4	10,714.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	10,714.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	10,714.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	10,714.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	10,714.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred 40 WALL DEVELOPMENT ASSOC, LLC
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 2	4	9,799,195.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	9,799,195.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	9,799,195.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	9,799,195.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses	10			9,799,195.

Part II Vehicle Expenses

Section A. - General Information		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles
13	Business miles included on line 12	13	miles
14	Percent of business use. Divide line 13 by line 12	14	%
15	Average daily roundtrip commuting distance	15	miles
16	Commuting miles included on line 12	16	miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP CPS LLC
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 3	4	98,919.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	98,919.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	98,919.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	98,919.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	98,919.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below ...	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP 845 UN GP LLC (MGR)
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 4	4	55,384.
5 Meals expenses	5	
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	55,384.

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7	
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	55,384.
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	55,384.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses	10	55,384.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP EQUITABLE FIFTH AVENUE CO
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A		Column B	
		Other Than Meals and Entertainment		Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1			
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 5	4	189,814.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	189,814.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	189,814.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	189,814.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	189,814.

Part II Vehicle Expenses

Section A. - General Information

	(a) Vehicle	(b) Vehicle
11 Enter the date vehicle was placed in service	11	
12 Total miles vehicle was driven during 2019	12 miles	miles
13 Business miles included on line 12	13 miles	miles
14 Percent of business use. Divide line 13 by line 12	14 %	%
15 Average daily roundtrip commuting distance	15 miles	miles
16 Commuting miles included on line 12	16 miles	miles
17 Other miles. Add lines 13 and 16 and subtract the total from line 12	17 miles	miles
18 Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19 Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20 Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21 If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22 Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22
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Section C. - Actual Expenses

	(a) Vehicle	(b) Vehicle
23 Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a Vehicle rentals	24a	
b Inclusion amount	24b	
c Subtract line 24b from line 24a	24c	
25 Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26 Add lines 23, 24c, and 25	26	
27 Multiply line 26 by the percentage on line 14	27	
28 Depreciation. Enter amount from line 38 below	28	
29 Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

	(a) Vehicle	(b) Vehicle
30 Enter cost or other basis	30	
31 Enter section 179 deduction and special allowance	31	
32 Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33 Enter depreciation method and percentage	33	
34 Multiply line 32 by the percentage on line 33	34	
35 Add lines 31 and 34	35	
36 Enter the limitation amount	36	
37 Multiply line 36 by the percentage on line 14	37	
38 Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP PALACE/PARC LLC
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 6	4	45,476.
5 Meals expenses	5	
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	45,476.

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7		
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	45,476.	
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	45,476.	
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses	10		45,476.

Part II Vehicle Expenses

Section A. - General Information		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles
13	Business miles included on line 12	13	miles
14	Percent of business use. Divide line 13 by line 12	14	%
15	Average daily roundtrip commuting distance	15	miles
16	Commuting miles included on line 12	16	miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
	b Inclusion amount	24b	
	c Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP PLAZA LLC
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 7	4	13,301.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	13,301.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	13,301.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	13,301.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	13,301.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12 miles	miles
13	Business miles included on line 12	13 miles	miles
14	Percent of business use. Divide line 13 by line 12	14 %	%
15	Average daily roundtrip commuting distance	15 miles	miles
16	Commuting miles included on line 12	16 miles	miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17 miles	miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
	b Inclusion amount	24b	
	c Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred THE TRUMP CORPORATION
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A		Column B	
		Other Than Meals and Entertainment		Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1			
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 8	4	167,531.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	167,531.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	167,531.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	167,531.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses	10			167,531.

Part II Vehicle Expenses

Section A. - General Information

	(a) Vehicle	(b) Vehicle
11 Enter the date vehicle was placed in service	11	
12 Total miles vehicle was driven during 2019	12 miles	miles
13 Business miles included on line 12	13 miles	miles
14 Percent of business use. Divide line 13 by line 12	14 %	%
15 Average daily roundtrip commuting distance	15 miles	miles
16 Commuting miles included on line 12	16 miles	miles
17 Other miles. Add lines 13 and 16 and subtract the total from line 12	17 miles	miles
18 Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19 Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20 Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21 If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22 Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
--	----	--

Section C. - Actual Expenses

	(a) Vehicle	(b) Vehicle
23 Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a Vehicle rentals	24a	
b Inclusion amount	24b	
c Subtract line 24b from line 24a	24c	
25 Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26 Add lines 23, 24c, and 25	26	
27 Multiply line 26 by the percentage on line 14	27	
28 Depreciation. Enter amount from line 38 below	28	
29 Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

	(a) Vehicle	(b) Vehicle
30 Enter cost or other basis	30	
31 Enter section 179 deduction and special allowance	31	
32 Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33 Enter depreciation method and percentage	33	
34 Multiply line 32 by the percentage on line 33	34	
35 Add lines 31 and 34	35	
36 Enter the limitation amount	36	
37 Multiply line 36 by the percentage on line 14	37	
38 Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP PROJECT MANAGEMENT CORP
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 9	4	9,665.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	9,665.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	9,665.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	9,665.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	9,665.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred T MANAGEMENT LLC (TMG MEMBER LLC)
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 10	4	66,608.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	66,608.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	66,608.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	66,608.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	66,608.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP PARK AVENUE LLC (DELMONICO)
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment <small>SEE STATEMENT 11</small>	4	5,091.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	5,091.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	5,091.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	5,091.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	5,091.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
	b Inclusion amount	24b	
	c Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP PARK AVE LLC - ACQUISITIONS
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment <small>SEE STATEMENT 12</small>	4	5,082.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	5,082.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	5,082.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	5,082.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	5,082.

Part II Vehicle Expenses

Section A. - General Information		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

Section D. - Depreciation of Vehicles		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TIHT COMMERCIAL LLC
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 13	4	861.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	861.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	861.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	861.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	861.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles
13	Business miles included on line 12	13	miles
14	Percent of business use. Divide line 13 by line 12	14	%
15	Average daily roundtrip commuting distance	15	miles
16	Commuting miles included on line 12	16	miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP INTERNATIONAL GOLF CLUB LLC
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 14	4	280,994.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	280,994.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	280,994.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	280,994.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses	10			280,994.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles miles
13	Business miles included on line 12	13	miles miles
14	Percent of business use. Divide line 13 by line 12	14	% %
15	Average daily roundtrip commuting distance	15	miles miles
16	Commuting miles included on line 12	16	miles miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred MAR-A-LAGO CLUB LLC
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 15	4	465,442.
5 Meals expenses	5	
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	465,442.

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7	
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STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	465,442.
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	465,442.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses	10	465,442.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service	11	
12	Total miles vehicle was driven during 2019	12	miles
13	Business miles included on line 12	13	miles
14	Percent of business use. Divide line 13 by line 12	14	%
15	Average daily roundtrip commuting distance	15	miles
16	Commuting miles included on line 12	16	miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	17	miles
18	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
21	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
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Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

**Statement SBE
Supplemental Business Expenses**

2019

Your name DONALD J. TRUMP	Social security number	Business in which expenses were incurred TRUMP NATIONAL GOLF CLUB
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Part I Business Expenses and Reimbursements

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment		Column B Meals and Entertainment	
	1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 16	4	2,553.		
5 Meals expenses	5			
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	2,553.		

NOTE: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Reimbursements for Expenses Listed In STEP 1

7 Enter amounts that were not reported to you in box 1 of Form W-2. Include any amount reported under code "L" in box 12 of your Form W-2	7			
--	---	--	--	--

STEP 3 Figure Expenses Subject to the Limitation

8 Subtract line 7 from line 6	8	2,553.		
9 In Column A, enter the amount from line 8. In Column B, multiply the amount on line 8 by 50% (.50). (If zero or less, enter -0-) (If subject to the Department of Transportation (DOT) hours-of-service limits: Multiply by 80% (.80) instead of 50%)	9	2,553.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	2,553.

Part II Vehicle Expenses

Section A. - General Information

		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service		
12	Total miles vehicle was driven during 2019	miles	miles
13	Business miles included on line 12	miles	miles
14	Percent of business use. Divide line 13 by line 12	%	%
15	Average daily roundtrip commuting distance	miles	miles
16	Commuting miles included on line 12	miles	miles
17	Other miles. Add lines 13 and 16 and subtract the total from line 12	miles	miles
18	Was your vehicle available for personal use during off-duty hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No
19	Do you (or your spouse) have another vehicle available for personal use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
20	Do you have evidence to support your deduction?		<input type="checkbox"/> Yes <input type="checkbox"/> No
21	If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B. - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22	Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1	22	
----	---	----	--

Section C. - Actual Expenses

		(a) Vehicle	(b) Vehicle
23	Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a	Vehicle rentals	24a	
b	Inclusion amount	24b	
c	Subtract line 24b from line 24a	24c	
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2)	25	
26	Add lines 23, 24c, and 25	26	
27	Multiply line 26 by the percentage on line 14	27	
28	Depreciation. Enter amount from line 38 below	28	
29	Add lines 27 and 28. Enter total here and on line 1	29	

Section D. - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

		(a) Vehicle	(b) Vehicle
30	Enter cost or other basis	30	
31	Enter section 179 deduction and special allowance	31	
32	Multiply line 30 by line 14 (see Form 2106 instructions if you claimed the section 179 deduction or special allowance)	32	
33	Enter depreciation method and percentage	33	
34	Multiply line 32 by the percentage on line 33	34	
35	Add lines 31 and 34	35	
36	Enter the limitation amount	36	
37	Multiply line 36 by the percentage on line 14	37	
38	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

Form 1040 Schedule E, Part II, Line 28 - Income or Loss From Partnership and S Corporations'

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	THE EAST 61 ST COMPANY	P	<input type="checkbox"/>	13-3057745	<input type="checkbox"/>	<input type="checkbox"/>
B	THE EAST 61 ST COMPANY	P	<input type="checkbox"/>	13-3057745	<input type="checkbox"/>	<input type="checkbox"/>
C	PARK BRIAR ASSOCIATES LLC	P	<input type="checkbox"/>	11-6160410	<input type="checkbox"/>	<input type="checkbox"/>
D	MAR-A-LAGO CLUB LLC	P	<input type="checkbox"/>	65-0567671	<input type="checkbox"/>	<input type="checkbox"/>
E	UNREIMBURSED EXPENSES	P	<input type="checkbox"/>	65-0567671	<input type="checkbox"/>	<input type="checkbox"/>
F	40 WALL DEVELOPMENT ASSOC LLC	P	<input type="checkbox"/>	13-3845249	<input type="checkbox"/>	<input type="checkbox"/>
G	HUDSON WATERFRONT ASSOC I LP	P	<input type="checkbox"/>	13-3796302	<input type="checkbox"/>	<input type="checkbox"/>
H	HUDSON WATERFRONT ASSOC V LP	P	<input type="checkbox"/>	13-3796322	<input type="checkbox"/>	<input type="checkbox"/>
I	HUDSON WATERFRONT ASSOC II LP	P	<input type="checkbox"/>	13-3796305	<input type="checkbox"/>	<input type="checkbox"/>
J	HUDSON WATERFRONT ASSOC III LP	P	<input type="checkbox"/>	13-3796315	<input type="checkbox"/>	<input type="checkbox"/>
K	HUDSON WATERFRONT ASSOC IV LP	P	<input type="checkbox"/>	13-3796319	<input type="checkbox"/>	<input type="checkbox"/>
L	TRUMP CPS LLC	P	<input type="checkbox"/>	13-3917414	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS LLC - MISS UNIVERSE LP LLP	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
N	TRUMP PLAZA LLC	P	<input type="checkbox"/>	13-3972488	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - COUNTRY APARTMENTS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - COUNTRY PROPERTIES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
Q	TRUMP 845 UN LIMITED PARTNERSHIP	P	<input type="checkbox"/>	13-3958323	<input type="checkbox"/>	<input type="checkbox"/>
R	DJT HOLDINGS LLC - OCEAN AIR INVESTORS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
S	DJT HOLDINGS LLC - OAKDALE INVESTORS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
T	DJT HOLDINGS LLC TRUMP MODEL MANAGEMENT LLC (TMG MEMBER LLC)	P	<input type="checkbox"/>	13-4040286	<input type="checkbox"/>	<input type="checkbox"/>
U	DJT HOLDINGS LLC - TRUMP KOREAN PROJECTS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
V	TIPPERARY REALTY CORP	S	<input type="checkbox"/>	11-2405629	<input type="checkbox"/>	<input type="checkbox"/>
W	PLAZA CONSULTING CORP	S	<input type="checkbox"/>	13-3385468	<input type="checkbox"/>	<input type="checkbox"/>
X	THE TRUMP CORPORATION	S	<input type="checkbox"/>	13-3038887	<input type="checkbox"/>	<input type="checkbox"/>
Y	UNREIMBURSED EXPENSES	S	<input type="checkbox"/>	13-3038887	<input type="checkbox"/>	<input type="checkbox"/>
Z	TRUMP PROJECT MANAGEMENT CORP	S	<input type="checkbox"/>	13-3775593	<input type="checkbox"/>	<input type="checkbox"/>
AA	TRUMP'S CASTLE MANAGEMENT CORP	S	<input type="checkbox"/>	22-3167829	<input type="checkbox"/>	<input type="checkbox"/>
AB	TRAVEL ENTERPRISES MANAGEMENT INC	S	<input type="checkbox"/>	13-3345689	<input type="checkbox"/>	<input type="checkbox"/>
AC	THE TRUMP HOTEL CORP	S	<input type="checkbox"/>	13-3430478	<input type="checkbox"/>	<input type="checkbox"/>
AD	HELICOPTER AIR SERVICES INC	S	<input type="checkbox"/>	13-3478858	<input type="checkbox"/>	<input type="checkbox"/>
AE	DJT HOLDINGS MM LLC - PARC CONSULTING INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
AF	THE TRUMP ORGANIZATION INC	S	<input type="checkbox"/>	13-3070440	<input type="checkbox"/>	<input type="checkbox"/>
AG	TRUMP EMPIRE STATE INC	S	<input type="checkbox"/>	13-3766196	<input type="checkbox"/>	<input type="checkbox"/>
AH	FIFTY-SEVEN MANAGEMENT CORP	S	<input type="checkbox"/>	13-3860845	<input type="checkbox"/>	<input type="checkbox"/>
AI	DJT HOLDINGS MM LLC - MAR-A-LAGO CLUBLLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
AJ	TRUMP CPS CORP	S	<input type="checkbox"/>	13-3917416	<input type="checkbox"/>	<input type="checkbox"/>
AK	FIRST MEMBER INC	S	<input type="checkbox"/>	13-3914818	<input type="checkbox"/>	<input type="checkbox"/>
AL	DJT HOLDINGS MM LLC - BRIARCLIFF PROPERTIES INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
BM	DJT HOLDINGS MM LLC - TRUMP PAGEANTS INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
BN	TRUMP PAYROLL CORP	S	<input type="checkbox"/>	13-3494471	<input type="checkbox"/>	<input type="checkbox"/>
BO	FLIGHTS INC	S	<input type="checkbox"/>	13-3929051	<input type="checkbox"/>	<input type="checkbox"/>
BP	TRUMP PLAZA MEMBER INC	S	<input type="checkbox"/>	13-3979038	<input type="checkbox"/>	<input type="checkbox"/>
BQ	TRUMP VILLAGE CONST CORP-DJT GR TR	S	<input type="checkbox"/>	11-1993421	<input type="checkbox"/>	<input type="checkbox"/>
BR	TRUMP TOWER MANAGING MEMBER INC	S	<input type="checkbox"/>	13-3981225	<input type="checkbox"/>	<input type="checkbox"/>
BS	TRUMP 845 UN MGR CORP	S	<input type="checkbox"/>	13-4026239	<input type="checkbox"/>	<input type="checkbox"/>
BT	BEACH HAVEN APARTMENTS #1 INC DJT GR TR	S	<input type="checkbox"/>	11-1681481	<input type="checkbox"/>	<input type="checkbox"/>
BU	SHORE HAVEN APARTMENTS #1 INC DJT GR TR	S	<input type="checkbox"/>	11-1582802	<input type="checkbox"/>	<input type="checkbox"/>
BV	TRUMP MANAGEMENT INC	S	<input type="checkbox"/>	11-2196835	<input type="checkbox"/>	<input type="checkbox"/>
BW	TRUMP PARK AVENUE LLC (DELMONICO)	P	<input type="checkbox"/>	01-0580204	<input type="checkbox"/>	<input type="checkbox"/>
BX	TRUMP TORONTO DEVELOPMENT INC	S	<input type="checkbox"/>	20-0005703	<input type="checkbox"/>	<input type="checkbox"/>
BY	STARRETT CITY ASSOCIATES	P	<input type="checkbox"/>	11-6189342	<input type="checkbox"/>	<input type="checkbox"/>
BZ	TRUMP PARK AVENUE LLC	P	<input type="checkbox"/>	20-1908009	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS MM LLC - TRUMP MARKS GP CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS LLC - DJT ENTREPRENEUR MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS LLC - DJT ENTREPRENEUR MANAGING MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
B	TRUMP INTERNATIONAL GOLF CLUB LLC	P	<input type="checkbox"/>	65-0750446	<input type="checkbox"/>	<input type="checkbox"/>
B	UNREIMBURSED EXPENSES	P	<input type="checkbox"/>	65-0750446	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS MM LLC - TRUMP SCOTLAND MEMBER INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS LLC - TRUMP PRODUCTIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS MM LLC - TRUMP PRODUCTIONS MANAGING MEMBER INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS LLC - TRUMP INTERNATIONAL HOTELS MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS MM LLC - TRUMP LAS OLAS MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
B	DJT HOLDINGS MM LLC - 809 NORTH CANON MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
B	TIHM MEMBER CORP	S	<input type="checkbox"/>	20-5074158	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS LLC - THE TRUMP FOLLIES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	TRUMP FLORIDA MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	TIHT MEMBER LLC	S	<input type="checkbox"/>	20-5315528	<input type="checkbox"/>	<input type="checkbox"/>
C	TIHT COMMERCIAL LLC	P	<input type="checkbox"/>	13-4038061	<input type="checkbox"/>	<input type="checkbox"/>

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
C	DJT HOLDINGS LLC -TRUMP LAS OLAS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS LLC - TRUMP INTERNATIONAL GOLF CLUB SCOTLAND LTD	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	TRUMP MARKS PHILADELPHIA LLC	P	<input type="checkbox"/>	20-8882513	<input type="checkbox"/>	<input type="checkbox"/>
C	TRUMP MARKS WAIKIKI LLC	P	<input type="checkbox"/>	20-8882101	<input type="checkbox"/>	<input type="checkbox"/>
C	TRUMP MARKS WAIKIKI CORP	S	<input type="checkbox"/>	20-8858096	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUMP MARKS WESTCHESTER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUMP MARKS MORTGAGE CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUMP MARKS PUERTO RICO I MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	TRUMP MARKS PHILADELPHIA CORP	S	<input type="checkbox"/>	20-8881726	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUMP MARKS PALM BEACH CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS LLC -TRUMP GOLF COCO BEACH LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MMC LLC - TRUMP GOLF COCO BEACH MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS LLC - 809 NORTH CANON LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	TRUMP CANOUAN ESTATE MEMBER CORP	S	<input type="checkbox"/>	26-1624146	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - THE TRUMP FOLLIES MEMBER INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUMP MARKS ASIA CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB COLTS NECK LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUMP MARKS PHILIPPINES CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUMP MARKS ISTANBUL II CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - UNIT 2502 ENTERPRISES CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
C	DJT HOLDINGS LLC - UNIT 2502 ENTERPRISES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	TRUMP MARKS PUERTO RICO II MEMBER CORP	S	<input type="checkbox"/>	26-2982043	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - TRUMP CANOUAN ESTATE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP CANOUAN ESTATE MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TNGC DUTCHESS COUNTY MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - GOLF PRODUCTIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP NATIONAL GOLF CLUB WASHINGTON DC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	MELANIA MARKS ACCESSORIES LLC	P	<input type="checkbox"/>	27-0226891	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - TRUMP ACQUISITION LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	MELANIA MARKS ACCESSORIES MEMBER CORP	S	<input type="checkbox"/>	27-0226852	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP DEVELOPMENT SERVICES MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP MARKS MENSWEAR MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
D	SC LP SHOPPING CENTER LLC	P	<input type="checkbox"/>	27-1551456	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - TRUMP DEVELOPMENT SERVICES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - TRUMP SALES & LEASING CHICAGO LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	TRUMP INTERNATIONAL HOTEL HAWAII LLC	P	<input type="checkbox"/>	27-0963857	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP CAROUSEL MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP PANAMA CONDOMINIUM MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	TRUMP FERRY POINT MEMBER CORP	S	<input type="checkbox"/>	27-8202438	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP PANAMA HOTEL MANAGEMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP SALES & LEASING CHICAGO MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - GOLF PRODUCTIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	TIHH MEMBER CORP	S	<input type="checkbox"/>	27-0963803	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP CHICAGO HOTEL MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - TRUMP FERRY POINT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - TRUMP PANAMA HOTEL MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - TRUMP CHICAGO HOTEL MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	DJT HOLDINGS LLC - PANAMA OCEAN CLUB MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP CHICAGO COMMERCIAL MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP INTERNATIONAL DEVELOPMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP CAROUSEL LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP CHICAGO RESIDENTIAL MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP PANAMA CONDOMINIUM MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS MM LLC - TRUMP INTERNATIONAL DEVELOPMENT MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS MM LLC - PANAMA OCEAN CLUB MANAGEMENT MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS MM LLC - TRUMP CHICAGO RESIDENTIAL MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS MM LLC - TRUMP MARKS CHICAGO MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
E	TRUMP MARKS MEMBER CORP	S	<input type="checkbox"/>	27-1357658	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS MANAGING MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS MM LLC - TRUMP CHICAGO COMMERCIAL MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - 401 MEZZ	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - SEVEN SPRINGS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP SCOTSBOROUGH SQUARE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP WINE MARKS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>

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			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - LFB ACQUISITION LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TNGC PINE HILL LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TNGC DUTCHESS COUNTY LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB WASHINGTON DC LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP DRINKS ISRAEL LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP BOOKS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
E	CHARLOTTESVILLE CATERING & EVENTS LLC	P	<input type="checkbox"/>	38-3862571	<input type="checkbox"/>	<input type="checkbox"/>
E	DJT HOLDINGS LLC - TRUMP WORLD PRODUCTIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP BOOKS MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP DRINKS ISRAEL MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP WINE MARKS MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP SCOTSBOROUGH SQUARE MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP VIRGINIA LOT 5 MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP ENDEAVOR 12 MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	TAG AIR INC	S	<input type="checkbox"/>	95-4464111	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP VINEYARD ESTATES MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - LFB AQUISITION MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP WORLD PRODUCTIONS MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP NATIONAL GOLF CLUB LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS LLC - TRUMP VINEYARD ESTATES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS LLC - TRUMP VIRGINIA LOT 5 LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP VIRGINIA ACQUISITIONS MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - DT MARKS BAKU MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	TRUMP MARKS PUNE MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - TRUMP MIAMI RESORT MANAGEMENT MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS MM LLC - WHITE COURSE MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
F	T INTERNATIONAL REALTY LLC	P	<input type="checkbox"/>	90-0883344	<input type="checkbox"/>	<input checked="" type="checkbox"/>
F	DJT HOLDINGS LLC - TRUMP CHICAGO RETAIL MANAGER LCC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>

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F	DJT HOLDINGS LLC - TNGC CHARLOTTE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS LLC - TRUMP ENDEAVOR 12 LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS - WHITE COURSE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS JUPITER GOLF CLUB	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS - TRUMP OLD POST OFFICE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	DJT HOLDINGS OPO HOTEL MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - TRUMP LAS VEGAS MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - THC SALES & MARKETING LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - EXCEL VENTURE I LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - DT DUBAI GOLF MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DT MARKS VANCOUVER LP	P	<input type="checkbox"/>	90-0930859	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - THC DEVELOPMENT BRAZIL LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - CARIBUSINESS MRE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - THC RIO MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - THC CENTRAL RESERVATIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
G	TRUMP HOTEL MANAGEMENT CORP	S	<input type="checkbox"/>	13-3489501	<input type="checkbox"/>	<input type="checkbox"/>
G	THC MIAMI RESTAURANT HOSPITALITY MEMBER	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - THC DEVELOPMENT BRAZIL MANAGING MEMBER	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - DT DUBAI GOLF MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - THC RIO MANAGING LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - TRUMP CHICAGO RETAIL MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - EXCEL VENTURE I LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	OPO HOTEL MANAGER MEMBER CORP	S	<input type="checkbox"/>	46-3066239	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - THC CENTRAL RESERVATIONS MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - THC SALES & MARKETING LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS MM LLC - THE CARIBUSINESS RE CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
G	TW VENTURE I MANAGING MEMBER CORP	S	<input type="checkbox"/>	46-4146150	<input type="checkbox"/>	<input type="checkbox"/>
G	HUDSON WATERFRONT ASSOCIATES V LP	P	<input type="checkbox"/>	13-3796322	<input type="checkbox"/>	<input type="checkbox"/>
G	HUDSON WATERFRONT ASSOC III LP	P	<input type="checkbox"/>	13-3796315	<input type="checkbox"/>	<input type="checkbox"/>
G	TRUMP 845 UN GP LLC	P	<input type="checkbox"/>	13-3958321	<input type="checkbox"/>	<input type="checkbox"/>
G	DJT HOLDINGS LLC - TRUMP INT'L HOTEL & TOWER CHICAGO	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MANAGING MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

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H	845 UN LIMITED PARTNERSHIP - 845 LP LLC	P	<input type="checkbox"/>	13-3958323	<input type="checkbox"/>	<input type="checkbox"/>
H	TRUMP PARK AVENUE LLC - TRUMP DELMONICO LLC)	P	<input type="checkbox"/>	01-0580204	<input type="checkbox"/>	<input type="checkbox"/>
H	TRUMP PARK AVENUE LLC - ACQUISITION	P	<input type="checkbox"/>	01-0580204	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLCLLC - DB PACE ACQUISITIONS CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DT CONNECT II MEMBER CORP	S	<input type="checkbox"/>	47-1519047	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - DT DUBAI II GOLF MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - DT MARKS GURGAON MANAGING MEMBER CORP	S	<input type="checkbox"/>	47-2191989	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - PINE HILL DEVELOPMENT MANAGING MEMBER	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	THC BAKU HOTEL MANAGER SERVICE MEMBER	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - THC BAKU SERVICES MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - THC CHINA-TECHNICAL SERVICES MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - THC SERVICES SHENZHEN MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	TTTT VENTURE MEMBER CORP	S	<input type="checkbox"/>	47-2297906	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - TNGC CHARLOTTE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - TNGC JUPITER MANAGEMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS MM LLC - TURNBERRY SCOTLAND MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS LLC - THC CHINA TECHNICAL SERVICES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS-D B PACE ACQUISITION LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DT DUBAI II GOLF MANAGER LLC	P	<input type="checkbox"/>	47-2265157	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS LLC - THC BAKU SERVICES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS LLC - THC SERVICES SHENZHEN LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS LLC - THC SHENZHEN HOTEL MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS LLC - TRUMP BRIARCLIFF MANOR DEV)	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS LLC - PINE HILL DEVELOPMENT LLC)	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
H	DJT HOLDINGS LLC - TNGC JUPITER MANAGEMENT LLC)	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS LLC TW VENTURE I LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS LLC -TW VENTURE II LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
I	DT CONNECT II LLC	P	<input type="checkbox"/>	36-4791039	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS LLC - TURNBERRY SCOTLAND LLC)	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - TW VENTURE II MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DT TOWER GURGAON LLC	P	<input type="checkbox"/>	47-3351290	<input type="checkbox"/>	<input type="checkbox"/>
I	MOBILE PAYROLL CONSTRUCTION LLC	P	<input type="checkbox"/>	36-4813676	<input type="checkbox"/>	<input type="checkbox"/>

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I	DT BALI TECHNICAL SERVICES MANAGER LLC	P	<input type="checkbox"/>	36-4812795	<input type="checkbox"/>	<input type="checkbox"/>
I	DT LIDO HOTEL MANAGER LLC	P	<input type="checkbox"/>	61-1769144	<input type="checkbox"/>	<input type="checkbox"/>
I	DT LIDO TECHNICAL SERVICES MANAGER LLC	P	<input type="checkbox"/>	30-0881420	<input type="checkbox"/>	<input type="checkbox"/>
I	WILLIAM M TRUMP MEDICAL FUND LLC	P	<input type="checkbox"/>	47-5214076	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - THC SHENZHEN HOTEL MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	MOBILE PAYROLL CONSTRUCTION MANAGER CO	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - JUPITER GOLF CLUB MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DTW VENTURE MANAGING MEMBER CORP	S	<input type="checkbox"/>	46-5292006	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT TOWER GURGAON MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT MARKS BALI MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT LIDO TECHNICAL SERVICES MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT LIDO HOTEL MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT LIDO GOLF MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT BALI TECHNICAL SERVICES MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT BALI GOLF MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - DT BALI HOTEL MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	EID VENTURE II MEMBER CORP	S	<input type="checkbox"/>	81-1201049	<input type="checkbox"/>	<input type="checkbox"/>
I	DJT HOLDINGS MM LLC - C DEVELOPMENT VENTURES MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
I	DT TOWER II MEMBER CORP	S	<input type="checkbox"/>	81-1112510	<input type="checkbox"/>	<input type="checkbox"/>
J	DT VENTURE II MEMBER CORP	S	<input type="checkbox"/>	81-1743521	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS MM LLC DT TOWER I MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
J	HUDSON WATERFRONT ASSOCIATES IV LP	P	<input type="checkbox"/>	13-3796319	<input type="checkbox"/>	<input type="checkbox"/>
J	EID VENTURE II LLC	P	<input type="checkbox"/>	32-0488634	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - DT TOWER I LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - DTTM OPERATIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS MM LLC - DTTM OPERATIONS MANAGING MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC -TRUMP MARKS ASIA LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - DT CONNECT II LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS MM LLC - TNGC PINE HILL LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
J	TRUMP PALACE PARC LLC	P	<input type="checkbox"/>	13-3913538	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - WESTMINSTER HOTEL MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP REALTY SERVICES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP GOLF ACQUISITIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>

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J	DJT HOLDINGS LLC - TRUMP RIVERSIDE MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - WEST PALM OPERATIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP GOLF MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - LAMINGTON FAMILY HOLDINGS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - THC HOTEL DEVELOPMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP SOHO MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP LAS VEGAS DEVELOPMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP LAUDERDALE DEVELOPMENT 2 LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - CHICAGO UNIT ACQUISITIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - DT VENTURE II LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP PHOENIX DEVELOPMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	DJT HOLDINGS LLC - TRUMP CARRIBEAN LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - TRUMP ICE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - TRUMP LAUDERDALE DEVELOPMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - TRUMP CHICAGO DEVELOPMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - TRUMP 106 CPS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - TRUMP RESTAURANTS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - WOLLMAN RINK OPERATIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - DT VENTURE II LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC - DTW VENTURE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	TRUMP EQUITABLE FIFTH AVE CO	P	<input type="checkbox"/>	13-3014138	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP WORLD PUBLICATIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLC - T EXPRESS MANAGER MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLC - TRUMP NATIONALGOLF CLUB COLTS NECK MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLC - T RETAIL MANAGING LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC TRUMP RESTAURANTS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - WOLLMAN RINK OPERATIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP REALTY SERVICES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP GOLF ACQUISITIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K		S		27-4162256		

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
	DJT HOLDINGS MM LLCLLC - TRUMP RIVERSIDE MANAGEMENT LLC		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP KOREAN PROJECTS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP ENTREPRENEUR MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP ENTREPRENEUR MANAGING MEMBER	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - WEST PALM OPERATIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC TRUMP SOHO MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC TRUMP LAUDERDALES DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - CHICAGO UNIT ACQUISITIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - DT VENTURE II LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP PHOENIX DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP WORLD PUBLICATIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP CARIBBEAN LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP ICE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP INTERNATIONAL HOTEL MANAGEMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLC LLC - SEVEN SPRINGS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - SCOTSBOROUGH SQUARE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA LOT 5 LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP WINE MARKS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TNGC BRIARCLIFF	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - LFB ACQUISITIONS LLC	S	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TNGC PINE HILL LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TNGC DUTCHESS COUNTY LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TNGC CHARLOTTE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP ENDEAVOR 12 LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - WHITE COURSE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - JUPITER GOLF CLUB LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TRUMP OLD POST OFFICE LLC	S	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - OPO HOTEL MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
L	DJT HOLDINGS MM LLCLLC - TRUMP BRIARCLIFF MANOR DV LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - PINE HILL DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TW VENTURE I LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TW VENTURE II LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TNGC JUPITER MGT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - DT CONNECT II LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TURNBERRY SCOTLAND LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TNGC WASHINGTON DC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP MARKS ASIA LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - 809 NORTH CANON LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP VINEYARD ESTATES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - 401 MEZZ VENTURE	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP LAUDERDALE DEVELOP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP INT'L HOTEL & TOWER	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - SINGLE FAMILY RESIDENCE 109	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP GOLF MANAGEMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - LAMINGTON FAMILY HOLDINGS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - THC HOTEL DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - OCEAN AIR INVESTORS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - PANAMA OCEAN CLUB MGMT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - THC BAKU SERVICES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - DT TOWER I LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - OAKDALE INVESTORS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - THC SHENZHEN HOTEL MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP ACQUISITION LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP BOOKS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP CANOUAN ESTATE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - UNIT 2502 ENTERPRISES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP WORLD PRODUCTIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP SALES & LEASING CHICAGO LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N		S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
	DJT HOLDINGS MM LLCLLC - TRUMP PRODUCTIONS LLC					
N	DJT HOLDINGS MM LLCLLC - TRUMP PANAMA CONDOMINIUM	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP LAS OLAS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP INT'L DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP GOLF COCO BEACH LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP DRINKS ISRAEL LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP DEVELOPMENT SERVICE	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO COMML MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO RETAIL MGR LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - THC RIO MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP CAROUSEL LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - WESTMINSTER HOTEL MGT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - MISS UNIVERSE LLL	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP PANAMA HOTEL MGT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - CARIBUSINESS MRE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - THC CHINA TECHNICAL SERVICES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - THC DEVELOPMENT BRAZIL LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - THC SERVICES SHENZHEN LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - DT DUBAI GOLF MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - DJT ENTREPRENEUR MANGING MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - COUNTRY PROPERTIES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP INT'L GOLF CLUB SCOT	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - THC QATAR HOTEL MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - GOLF PRODUCTIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC - TRUMP FERRY POINT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC - EXCEL VENTURE I LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC - DTTM OPERATIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC - TRUMP NATL GOLF CLUB COLTS NECK	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA ACQUISITIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC - THC CENTRL RESERVATIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
O	DJT HOLDINGS MM LLCLLC - THC SALES & MARKETING LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLC - CARIBUSINESS MRE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - TRUMP INTERNATIONAL HOTEL	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC TRUMP LAS VEGAS MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC TNGC WASHINGTON DC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLC - DB PACE ACQUISITION LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLC - DT MARKS PUNE LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLC - TRUM MARKS MENSWEAR LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLC - DT MARKS GURGAON LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LL - DT DUBAI GOLF MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLC -THC BAKU HOTEL MANAGER SERVICES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS MM LLCLLC - TRUMP SOHO MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - TRUMP KOREAN PROJECTS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - DJT ENTREPRENEUR MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - TRUMP WORLD PUBLICATIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - TIHT HOLDING COMPANY LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - TRUMP BRAZIL LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - DJT ENTREPRENEUR MANAGING MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - FLORIDA PROPERTIES MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - 1094 S OCEAN AVENUE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - 124 WOODBRIDGE	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	555 CALIFORNIA SERVICES JV LLC	P	<input type="checkbox"/>	61-1895796	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - TMG MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - TRUMP RESTAURANTS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - T TOWER RETAIL LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - 1125 SOUTH OCEAN LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS MM LLC TRUMP CHICAGO HOTEL MANAGER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS MM LLCLLC THC CENTRAL RESERVATIONS	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS MM LLCLLC TRUMP CHICAGO RESIDENTIAL LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS MM LLC TRUMP INT'L GOLF CLUB	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
P	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MEMBER LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC MM - 40 WALL DEVELOPMENT ASSOCIATES LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

Form 1040 Schedule E, Part II, Line 28 -Passive Income and Loss/Nonpassive Income and Loss

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A	41,034				
B	318				
C	22,970				
D					4,846,338
E			465,442		
F	3,776,715				
G		171,569			
H		286,857			
I	0				
J		536,567			
K		208,436			
L		147,170			
M	21,061				
N		1,273,350			
O	0				
P	0				
Q	49,345				
R	0				
S	0				
T		900,001			
U	58				
V		18,257			
W	1,213				
X			10,891,604		
Y			167,531		
Z	8,611				
AA			0		
AB	0				
AC			0		
AD	0				
AE			0		
AF	0				
AG	0				
AH		91,759			
AI					4,851
AJ		221			

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
AK	\$263				
AL	\$0				
BM	\$434				
BN	\$0				
BO	\$0				
BP		12,996			
BQ	\$31,877				
BR		78,617			
BS	\$1,741				
BT	\$17,985				
BU	\$29,714				
BV	\$5,704				
BW	\$4,536				
BX	\$0				
BY	\$103,971				
BZ	\$4,528				
B	\$1,221				
B			2,005		
B					116
B					2,039,867
B			280,994		
B	\$18,941				
B		1,583,131			
B		16,153			
B	\$2,999,976				
B	\$4				
B	\$0				
B	\$0				
C	\$79				
C	\$14				
C	\$1,852				
C		207,565			
C	\$384				
C	\$1,856,423				
C	\$4,813				
C		124,091			
C		371			
C	\$27				
C	\$27				
C		7,495			
C	\$323				
C	\$27				

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
C	14,315				
C	146				
C	0				
C	0				
C	1				
C	0				
C			587,163		
C		14,081			
C		2,594			
C	17				
C	1,622				
C	0				
D	2,495				
D	26				
D	7,012				
D	80,284				
D	6,322				
D	1,436				
D	311				
D	45				
D	386				
D	0				
D	3,871				
D	37,803				
D	2,175				
D		2,428,640			
D	137				
D	191				
D	42,677				
D	12,513				
D	22				
D	819				
D		16,781			
D		16,753			
D	4,182,793				
D	1,226,345				
D		1,658,540			
D	1,185				
E		16,710			
E	311				
E	13,437				
E		410,788			

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
E	18,709				
E	4				
E	12				
E		4,191			
E	27				
E	0				
E	191,330				
E		170			
E			6,445,795		
E	0				
E	26,371				
E	2,929				
E	2,828,232				
E					3,231,485
E	1,137,744				
E	687,231				
E	619,622				
E	428,548				
E	2,582				
E	2,138				
E	0				
E	441				
F	21				
F	27				
F	30				
F	269				
F	30				
F			46,039		
F	875,264				
F	5,083				
F					32,971
F	4				
F	28,834				
F	503,175				
F	3,003				
F	3,822				
F	27				
F	0				
F	0				
F	4				
F		420,891			
F	384				

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
F		523,372			
F			4,512,268		
F	311				
F	385,574				
F	13,897,570				
F	0				
G					1,688,333
G					14,931
G	1,224,476				
G	589,581				
G		324,933			
G		649			
G	2,058				
G	2,931				
G	311				
G	252,851				
G	0				
G	0				
G	21				
G		3,315			
G	4				
G	4				
G	6,016				
G	0				
G	1,481				
G	12,493				
G	0				
G	0				
G		4,042,586			
G		7,562,933			
G		193,783			
G	1,724,838				
H	13,705				
H		290,851			
H	533,258				
H	667,930				
H	0				
H		656			
H	26				
H	0				
H	135				
H	0				

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
H	\$27				
H	\$21				
H	\$4				
H	\$4,233				
H		5,340			
H		967			
H	\$41,683				
H	\$2,080				
H	\$7,404				
H	\$0				
H	\$2,654				
H	\$440				
H	\$2,495				
H	\$0				
H	\$13,173				
H		94,759			
I		17,883			
I	\$1,520,173				
I		64,938			
I	\$4,085,346				
I	\$15,355				
I	\$0				
I	\$0				
I	\$0				
I	\$0				
I	\$0				
I	\$0				
I	\$26				
I	\$0				
I		3,675			
I	\$0				
I	\$29				
I	\$29				
I		240			
I	\$36				
I	\$26				
I		167			
I	\$26				
I	\$26				
I	\$328				
I	\$16				
I	\$0				

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
J	0				
J	3				
J		365,399			
J	365				
J	262				
J		2,072,104			
J		20,930			
J	0				
J	0				
J	11,608				
J	163,323				
J	4,546				
J	478				
J		4,441			
J	0				
J	25,868				
J	58				
J	908				
J	315				
J	1,395				
J	265				
J	123				
J	1,315				
J	365				
J	315				
J	231				
K	29,929				
K	2,038				
K	433				
K	72				
K	540,626				
K	5,438				
K	0				
K	0				
K		19,027,280			
K	0				
K	1,709,513				
K	887				
K			4,798		
K	233				
K	5,167				
K	55				

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
K	4				
K	4				
K		45			
K	0				
K	9				
K					1,149
K			0		
K	261				
K	0				
K	3				
L	1				
L	13				
L	4				
L	4				
L	1				
L	3				
L	302				
L	0				
L	0				
L	266				
L	30				
L	29				
L	28,545				
L					32,641
L	11,493				
L	6,942				
L		5,287			
L			45,578		
L	4				
L	3,894				
L					17,054
L					151
L	140,379				
L			0		
L	0				
L	133				
M		181			
M	15,510				
M		957			
M			0		
M	41,266				
M	6,259				

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
M	0				
M	0				
M	5,134				
M			65,109		
M	20				
M	30,303				
M	0				
M	1				
M	9				
M	4				
M	0				
M	12				
M	27				
M	3				
M	0				
M	25				
M	4				
M	21				
M	25				
M	16				
N	4				
N	22				
N		15,991			
N	189				
N	4				
N	4				
N	144				
N	26				
N	382				
N		169			
N	4				
N	4				
N	135				
N	46				
N	213				
N	12,387				
N	29				
N	21				
N	20				
N	4				
N		3,282			
N			20		

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
N	0				
N	18,751				
N	0				
N	811				
O	42,251				
O	5,955				
O		21,142			
O			5,931		
O	4,328				
O	0				
O	12,368				
O	30				
O	17,423				
O	0				
O	0				
O	76				
O	27				
O	27				
O		30			
O	0				
O	26				
O	14				
O	815				
O					115,731
O	50				
O	288				
O	265				
O			2,061		
O	123				
O	49,305				
P	84,819				
P		60,570			
P	100,590				
P	30				
P		32,670			
P		391,560			
P	911,303				
P		16,922			
P	2,554				
P		4,149			
P					20
P					1,358

SCHEDULE SE (Form 1040 or 1040-SR) Department of the Treasury Internal Revenue Service

Self-Employment Tax

OMB No. 1545-0074

2019

Attachment Sequence No. 17

Go to www.irs.gov/ScheduleSE for instructions and the latest information.

Attach to Form 1040, Form 1040-SR, or Form 1040NR.

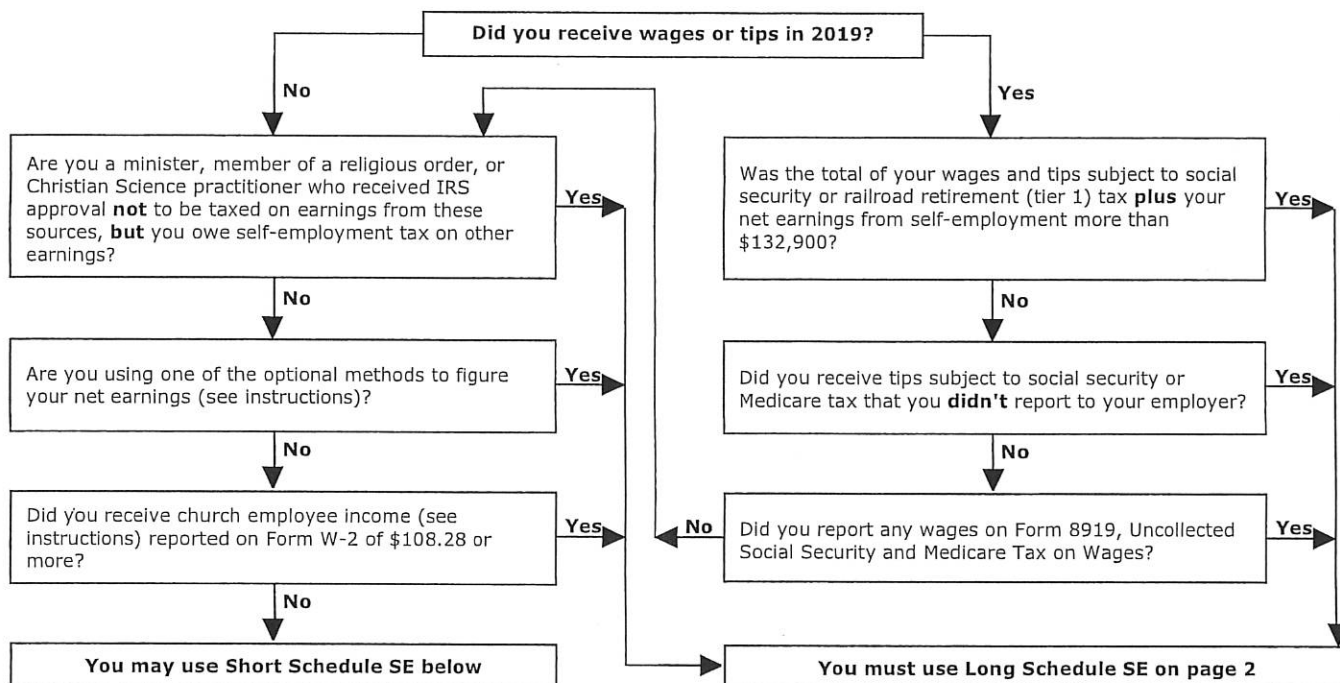
Name of person with self-employment income (as shown on Form 1040, Form 1040-SR, or Form 1040NR) DONALD J TRUMP

Social security number of person with self-employment income

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.

Table with 6 rows and 2 columns. Row 1: 1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Row 2: 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 AH. Row 3: 2 Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). Row 4: 3 Combine lines 1a, 1b, and 2. Row 5: 4 Multiply line 3 by 92.35% (0.9235). Row 6: 5 Self-employment tax. Row 7: 6 Deduction for one-half of self-employment tax.

	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
P					128,239
P		5,565			

Form 1040 Schedule E, Part III, Line 33 - Income or Loss From Estates and Trusts

	(a) Name	(b) Employer identification number
A	DONALD J TRUMP TRUST	11-6261971
B	DONALD J TRUMP ELIZABETH TRUST	13-6023440
C	DONALD J TRUMP 'FRED' TRUST	13-6023441
D	ELIZABETH TRUMP GRANDCHILDREN - DONALD	13-6814305

Form 1040 Schedule E, Part III, Line 33 - Passive Income and Loss/Nonpassive Income and Loss

	(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			0	
B	0			
C	0			
D	0			

Name of person with **self-employment** income (as shown on Form 1040, Form 1040-SR, or 1040NR)
DONALD J TRUMP

Social security number of person with **self-employment** income

Section B — Long Schedule SE

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is **church employee income**, see instructions. Also see instructions for the definition of church employee income.

A	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I		<input type="checkbox"/>
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note: Skip lines 1a and 1b if you use the farm optional method (see instructions)	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 AH	1b	()
2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. Note: Skip this line if you use the nonfarm optional method (see instructions)	2	4,688,983
3	Combine lines 1a, 1b, and 2	3	4,688,983
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	4,330,276
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
c	Combine lines 4a and 4b. If less than \$400, stop ; you don't owe self-employment tax. Exception: If less than \$400 and you had church employee income , enter -0- and continue	4c	4,330,276
5a	Enter your church employee income from Form W-2. See instructions for definition of church employee income	5a	
b	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-	5b	
6	Add lines 4c and 5b	6	4,330,276
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2019. Enter \$132,900	7	\$132,900
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$132,900 or more, skip lines 8b through 10, and go to line 11	8a	133,802
b	Unreported tips subject to social security tax (from Form 4137, line 10)	8b	
c	Wages subject to social security tax (from Form 8919, line 10)	8c	
d	Add lines 8a, 8b, and 8c	8d	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	
10	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	
11	Multiply line 6 by 2.9% (0.029)	11	125,578
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040 or 1040-SR), line 4, or Form 1040-NR, line 55	12	125,578
13	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (0.50). Enter the result here and on Schedule 1 (Form 1040 or 1040-SR), line 14, or Form 1040-NR, line 27	13	62,789

Part II Optional Methods To Figure Net Earnings (see instructions)

Farm Optional Method. You may use this method only if (a) your gross farm income ¹ wasn't more than \$8,160, or (b) your net farm profits ² were less than \$5,891.			
14	Maximum income for optional methods. Enter \$5,440	14	\$5,440
15	Enter the smaller of: two-thirds (² / ₃) of gross farm income ¹ (not less than zero) or \$5,440. Also include this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits ³ were less than \$5,891 and also less than 72.189% of your gross nonfarm income, ⁴ and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.			
16	Subtract line 15 from line 14	16	
17	Enter the smaller of: two-thirds (² / ₃) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also include this amount on line 4b above	17	

¹From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.

²From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A - minus the amount you would have entered on line 1b had you not used the optional method.

³From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A.

⁴From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

SCHEDULE SE (Form 1040 or 1040-SR)

Department of the Treasury Internal Revenue Service

Self-Employment Tax

Go to www.irs.gov/ScheduleSE for instructions and the latest information.

Attach to Form 1040, Form 1040-SR, or Form 1040NR.

OMB No. 1545-0074

2019

Attachment Sequence No. 17

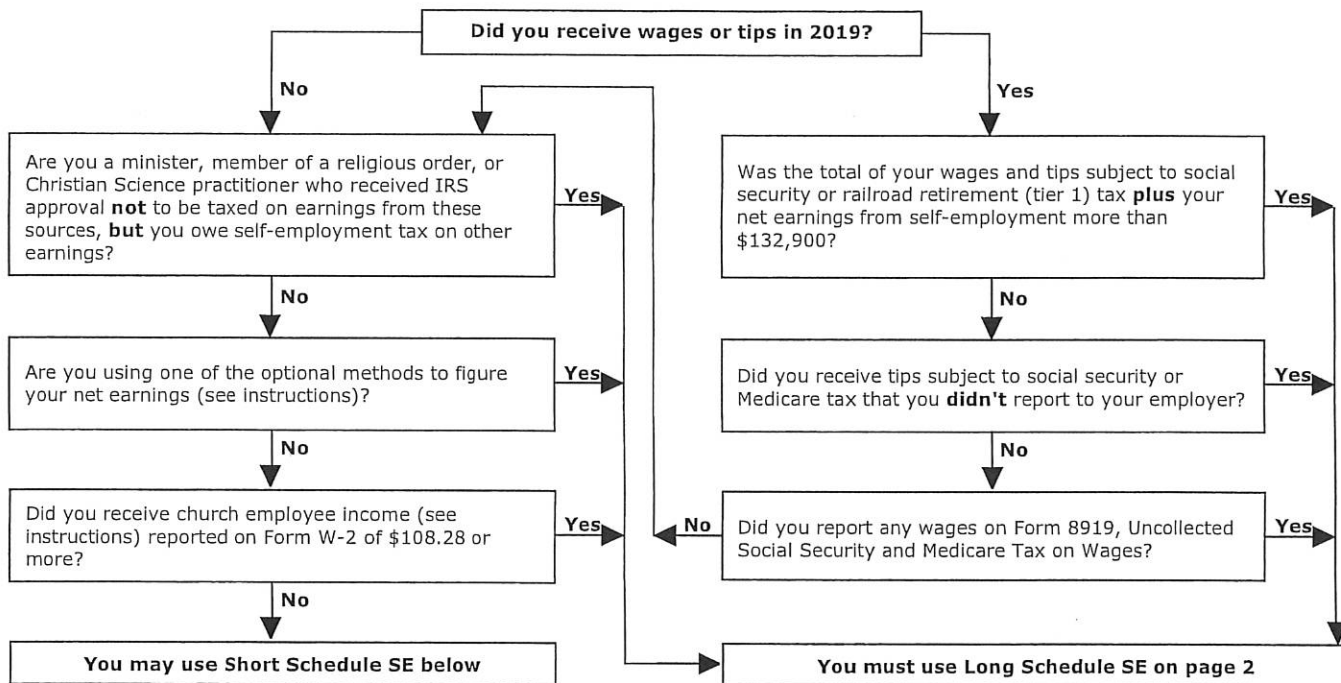
Name of person with self-employment income (as shown on Form 1040, Form 1040-SR, or Form 1040NR) DONALD J TRUMP

Social security number of person with self-employment income

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.

Table with 6 rows for tax calculations: 1a Net farm profit, 1b Social security retirement benefits, 2 Net profit from Schedule C, 3 Combined lines 1a, 1b, and 2, 4 Self-employment tax calculation, 5 Total self-employment tax, 6 Deduction for one-half of self-employment tax.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Employer Name Control: TRUM

Name of person with self-employment income (as shown on Form 1040, Form 1040-SR, or 1040NR) DONALD J TRUMP

Social security number of person with self-employment income

Section B — Long Schedule SE

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I

Table with 13 rows (1a-13) for self-employment tax calculations. Includes columns for line number, description, and amount. Key values include 4,688,983 for line 2 and 62,789 for line 13.

Part II Optional Methods To Figure Net Earnings (see instructions)

Table with 3 rows (14-17) for optional methods to figure net earnings. Includes Farm Optional Method and Nonfarm Optional Method sections.

1From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.

2From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A - minus the amount you would have entered on line 1b had you not used the optional method.

3From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A.

4From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Form **1116**

Foreign Tax Credit
(Individual, Estate, or Trust)

OMB No. 1545-0121

2019

Attachment
Sequence No. **19**

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
▶ Go to www.irs.gov/Form1116 for instructions and the latest information.

Name
DONALD J & MELANIA<TRUMP

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Section 951A category income c Passive category income e Section 901(j) income g Lump-sum distributions
 b Foreign branch category income d General category income f Certain income re-sourced by treaty
 h Resident of (name of country) ▶ US

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to **more than one** foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A OC	B AJ	C PM	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	191,330		1,238,858	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b	17,417	17,417	17,417	
d Gross foreign source income (see instructions)				
e Gross income from all sources (see instructions)	80,015,511	80,015,511	80,015,511	
f Divide line 3d by line 3e (see instructions)	0.00000	0.00000	0.00000	
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	191,330		1,238,858	6

i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	D IN	E CA	F QA	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	

b Other deductions (attach statement)			
c Add lines 3a and 3b	17,417	17,417	17,417
d Gross foreign source income (see instructions) . .			
e Gross income from all sources (see instructions) .	80,015,511	80,015,511	80,015,511
f Divide line 3d by line 3e (see instructions) . . .	0.00000	0.00000	0.00000
g Multiply line 3c by line 3f			
4 Pro rata share of interest expense (see instructions):			
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)			
b Other interest expense			
5 Losses from foreign sources			
6 Add lines 2, 3g, 4a, 4b, and 5			

6

Foreign Country or U.S. Possession **Total**
(Add cols. A, B, and C.)

i Enter the name of the foreign country or U.S. possession 	G	H	I	
	CH	RN		

1a Gross income from sources within country shown above and of the type checked above (see instructions): -----	19	10,850	-10,869	1a
---	----	--------	---------	-----------

b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) . . .

Deductions and losses (Caution: See instructions.):

2 Expenses definitely related to the income on line 1a (attach statement)		24,286		
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,417	17,417		
b Other deductions (attach statement)				
c Add lines 3a and 3b	17,417	17,417		
d Gross foreign source income (see instructions) . .	19	10,850		
e Gross income from all sources (see instructions) .	80,015,511	80,015,511		
f Divide line 3d by line 3e (see instructions) . . .	0.00000	0.00014		
g Multiply line 3c by line 3f		2		
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5		24,288	-1,454,476	6

7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2

7

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency					In U.S. dollars				
		(l) Date paid or accrued	Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
			(m) Dividends	(n) Rents and royalties	(o) Interest		(q) Dividends	(r) Rents and royalties	(s) Interest		
A	See Additional Data Table										
B											
C											

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2

8

758

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	758		
10	Carryback or carryover (attach detailed computation) (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	16,681		
11	Add lines 9 and 10	11	17,439		
12	Reduction in foreign taxes (see instructions)	12	()		
13	Taxes reclassified under high tax kickout (see instructions)	13	-758		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		16,681	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15			
16	Adjustments to line 15 (see instructions)	16			
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17			
18	Individuals: Enter the amount from Form 1040 or 1040-SR, line 11b; or Form 1040-NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19			
20	Individuals: Enter the total of Form 1040 or 1040-SR, line 12b and Schedule 2 (Form 1040 or 1040-SR), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 41, 42, and 44. Foreign estates and trusts should enter the amount from Form 1040-NR, line 42 Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.	20			
21	Multiply line 20 by line 19 (maximum amount of credit)	21			
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV (see instructions)	22			0

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on section 951A category income	23			
24	Credit for taxes on foreign branch category income	24			
25	Credit for taxes on passive category income	25			
26	Credit for taxes on general category income	26			
27	Credit for taxes on section 901(j) income	27			
28	Credit for taxes on certain income re-sourced by treaty	28			
29	Credit for taxes on lump-sum distributions	29			
30	Add lines 23 through 29	30		0	
31	Enter the smaller of line 20 or line 30	31		0	
32	Reduction of credit for international boycott operations. See instructions for line 12	32			
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 1; Form 1040-NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 46a	33			0

Form 1116

Foreign Tax Credit (Individual, Estate, or Trust)

OMB No. 1545-0121

2019

Attachment Sequence No. 19

Department of the Treasury Internal Revenue Service (99)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T. Go to www.irs.gov/Form1116 for instructions and the latest information.

Name DONALD J & MELANIA<TRUMP

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Section 951A category income, b Foreign branch category income, c Passive category income, d General category income, e Section 901(j) income, f Certain income re-sourced by treaty, g Lump-sum distributions

h Resident of (name of country) US

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

Table with columns for Foreign Country or U.S. Possession (A, B, C) and Total. Rows include 1a Gross income from sources within country shown above and of the type checked above, Deductions and losses (2, 3, 4, 5), and 6 Add lines 2, 3g, 4a, 4b, and 5.

Table with columns for Foreign Country or U.S. Possession (D, E, F) and Total. Rows include 1a Gross income from sources within country shown above and of the type checked above, Deductions and losses (2, 3), and 6 Add lines 2, 3g, 4a, 4b, and 5.

b Other deductions (attach statement)				
c Add lines 3a and 3b	17,417	17,417	17,417	
d Gross foreign source income (see instructions) . .				
e Gross income from all sources (see instructions) .	80,015,511	80,015,511	80,015,511	
f Divide line 3d by line 3e (see instructions) . . .	0.00000	0.00000	0.00000	
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	4,906,724		210,929	6 67,681,026

i Enter the name of the foreign country or U.S. possession 	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	G	H	I	
	AE	RQ	CA	
1a Gross income from sources within country shown above and of the type checked above (see instructions): ----- -----	663,416	15,045	3,616	1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				

Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	7,514	51	193,944	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b	17,417	17,417	17,417	
d Gross foreign source income (see instructions) . .	663,416	15,045	3,616	
e Gross income from all sources (see instructions) .	80,015,511	80,015,511	80,015,511	
f Divide line 3d by line 3e (see instructions) . . .	0.00829	0.00019	0.00005	
g Multiply line 3c by line 3f	144	3	1	
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	7,658	54	193,945	6 67,681,026

i Enter the name of the foreign country or U.S. possession 	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	J	K	L	
	RP	GJ	IN	
1a Gross income from sources within country shown above and of the type checked above (see instructions): ----- -----	14,081		2,082,074	1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				

Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)		26	4,409	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b	17,417	17,417	17,417	
d Gross foreign source income (see instructions) . .	14,081		2,082,074	
e Gross income from all sources (see instructions) .	80,015,511	80,015,511	80,015,511	

f	Divide line 3d by line 3e (see instructions)	0.00018	0.00000	0.02602	
g	Multiply line 3c by line 3f	3		453	
4	Pro rata share of interest expense (see instructions):				
a	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b	Other interest expense				
5	Losses from foreign sources				
6	Add lines 2, 3g, 4a, 4b, and 5	3	26	4,862	6 67,681,026

Foreign Country or U.S. Possession				Total	
				(Add cols. A, B, and C.)	
	M	N	O		
i	Enter the name of the foreign country or U.S. possession	GG	IS	AJ	
1a	Gross income from sources within country shown above and of the type checked above (see instructions):				1a 45,716,476
b	Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				<input type="checkbox"/>

Foreign Country or U.S. Possession				Total	
				(Add cols. A, B, and C.)	
	P	Q	R		
2	Expenses definitely related to the income on line 1a (attach statement)	191,330	1,712,122	194,038	
3	Pro rata share of other deductions not definitely related:				
a	Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	
b	Other deductions (attach statement)				
c	Add lines 3a and 3b	17,417	17,417	17,417	
d	Gross foreign source income (see instructions)				
e	Gross income from all sources (see instructions)	80,015,511	80,015,511	80,015,511	
f	Divide line 3d by line 3e (see instructions)	0.00000	0.00000	0.00000	
g	Multiply line 3c by line 3f				
4	Pro rata share of interest expense (see instructions):				
a	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b	Other interest expense				
5	Losses from foreign sources				
6	Add lines 2, 3g, 4a, 4b, and 5	191,330	1,712,122	194,038	6 67,681,026

Foreign Country or U.S. Possession				Total	
				(Add cols. A, B, and C.)	
	P	Q	R		
i	Enter the name of the foreign country or U.S. possession	BR	RN	MX	
1a	Gross income from sources within country shown above and of the type checked above (see instructions):		534,358		1a 45,716,476
b	Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				<input type="checkbox"/>

Foreign Country or U.S. Possession				Total	
				(Add cols. A, B, and C.)	
	P	Q	R		
2	Expenses definitely related to the income on line 1a (attach statement)	1,901,179	3,495,182	191,330	
3	Pro rata share of other deductions not definitely related:				
a	Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	
b	Other deductions (attach statement)				
c	Add lines 3a and 3b	17,417	17,417	17,417	
d	Gross foreign source income (see instructions)		534,358		
e	Gross income from all sources (see instructions)	80,015,511	80,015,511	80,015,511	
f	Divide line 3d by line 3e (see instructions)	0.00000	0.00668	0.00000	
g	Multiply line 3c by line 3f		116		
4	Pro rata share of interest expense (see instructions):				
a	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				

5 Other interest expense				
Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	1,901,179	3,495,298	191,330	6 67,681,026

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	S	T	U	
	QA	ID	EI	
i Enter the name of the foreign country or U.S. possession				
1a Gross income from sources within country shown above and of the type checked above (see instructions):		2,093,917	10,417,486	1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)		4,432	13,676,454	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b	17,417	17,417	17,417	
d Gross foreign source income (see instructions)		2,093,917	10,417,486	
e Gross income from all sources (see instructions)	80,015,511	80,015,511	80,015,511	
f Divide line 3d by line 3e (see instructions)	0.00000	0.02617	0.13019	
g Multiply line 3c by line 3f		456	2,268	
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5		4,888	13,678,722	6 67,681,026

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	V	W	X	
	TU	VC	UY	
i Enter the name of the foreign country or U.S. possession				
1a Gross income from sources within country shown above and of the type checked above (see instructions):	6,432		220	1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	1,240		2,350	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,417	17,417	17,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b	17,417	17,417	17,417	
d Gross foreign source income (see instructions)	6,432		220	
e Gross income from all sources (see instructions)	80,015,511	80,015,511	80,015,511	
f Divide line 3d by line 3e (see instructions)	0.00008	0.00000	0.00000	
g Multiply line 3c by line 3f	1			
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	1,241		2,350	6 67,681,026

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	Y	Z	CC	
	i Enter the name of the foreign country or U.S. possession			

1a	Gross income from sources within country shown above and of the type checked above (see instructions):	10,869			1a	45,716,476
b	Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) . . . <input type="checkbox"/>					
Deductions and losses (Caution: See instructions.):						
2	Expenses definitely related to the income on line 1a (attach statement)					
3	Pro rata share of other deductions not definitely related:					
a	Certain itemized deductions or standard deduction (see instructions)					
b	Other deductions (attach statement)					
c	Add lines 3a and 3b					
d	Gross foreign source income (see instructions)					
e	Gross income from all sources (see instructions)					
f	Divide line 3d by line 3e (see instructions)					
g	Multiply line 3c by line 3f					
4	Pro rata share of interest expense (see instructions):					
a	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the Instructions)					
b	Other interest expense					
5	Losses from foreign sources					
6	Add lines 2, 3g, 4a, 4b, and 5	1,454,476			6	67,681,026
7	Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7	-21,964,550

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
	(l) Date paid or accrued	Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
		(m) Dividends	(n) Rents and royalties	(o) Interest		(q) Dividends	(r) Rents and royalties	(s) Interest		
A	See Additional Data Table									
B										
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 **8** 278,957

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	278,957	
10	Carryback or carryover (attach detailed computation) (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	7,581,862	
11	Add lines 9 and 10	11	7,860,819	
12	Reduction in foreign taxes (see instructions)	12	()	
13	Taxes reclassified under high tax kickout (see instructions)	13	758	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		7,861,577
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15	-21,964,550	
16	Adjustments to line 15 (see instructions)	16	21,964,550	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17		
18	Individuals: Enter the amount from Form 1040 or 1040-SR, line 11b; or Form 1040-NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18		
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		
20	Individuals: Enter the total of Form 1040 or 1040-SR, line 12b and Schedule 2 (Form 1040 or 1040-SR), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 41, 42, and 44. Foreign estates and trusts should enter the amount from Form 1040-NR, line 42 Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.	20		
21	Multiply line 20 by line 19 (maximum amount of credit)	21		
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV (see instructions)	22		0

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on section 951A category income	23		
24	Credit for taxes on foreign branch category income	24		
25	Credit for taxes on passive category income	25		
26	Credit for taxes on general category income	26		
27	Credit for taxes on section 901(j) income	27		
28	Credit for taxes on certain income re-sourced by treaty	28		
29	Credit for taxes on lump-sum distributions	29		
30	Add lines 23 through 29	30		
31	Enter the smaller of line 20 or line 30	31		
32	Reduction of credit for international boycott operations. See instructions for line 12	32		
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 1; Form 1040-NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 46a	33		

Form 1116 Department of the Treasury Internal Revenue Service (99)

Foreign Tax Credit (Individual, Estate, or Trust)

OMB No. 1545-0121

2019

Attachment Sequence No. 19

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T. Go to www.irs.gov/Form1116 for instructions and the latest information.

Name DONALD J & MELANIA<TRUMP

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Section 951A category income c [checked] Passive category income e Section 901(j) income g Lump-sum distributions b Foreign branch category income d General category income f Certain income re-sourced by treaty

h Resident of (name of country) US

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

Table with columns for Foreign Country or U.S. Possession (A, B, C) and Total. Rows include: 1a Gross income from sources within country shown above and of the type checked above; 2 Expenses definitely related to the income on line 1a; 3 Pro rata share of other deductions not definitely related; 4 Pro rata share of interest expense; 5 Losses from foreign sources; 6 Add lines 2, 3g, 4a, 4b, and 5.

Table with columns for Foreign Country or U.S. Possession (D, E, F) and Total. Rows include: 1a Gross income from sources within country shown above and of the type checked above; 2 Expenses definitely related to the income on line 1a; 3 Pro rata share of other deductions not definitely related; 4 Pro rata share of interest expense; 5 Losses from foreign sources; 6 Add lines 2, 3g, 4a, 4b, and 5.

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	758		
10	Carryback or carryover (attach detailed computation) (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10			
11	Add lines 9 and 10	11	758		
12	Reduction in foreign taxes (see instructions)	12	()		
13	Taxes reclassified under high tax kickout (see instructions)	13	-758		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14			0
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15			
16	Adjustments to line 15 (see instructions)	16			
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17			
18	Individuals: Enter the amount from Form 1040 or 1040-SR, line 11b; or Form 1040-NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19			
20	Individuals: Enter the total of Form 1040 or 1040-SR, line 12b and Schedule 2 (Form 1040 or 1040-SR), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 41, 42, and 44. Foreign estates and trusts should enter the amount from Form 1040-NR, line 42 Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.	20			382,950
21	Multiply line 20 by line 19 (maximum amount of credit)	21			
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV (see instructions)	22			0

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on section 951A category income	23			
24	Credit for taxes on foreign branch category income	24			
25	Credit for taxes on passive category income	25			
26	Credit for taxes on general category income	26	279,715		
27	Credit for taxes on section 901(j) income	27			
28	Credit for taxes on certain income re-sourced by treaty	28			
29	Credit for taxes on lump-sum distributions	29			
30	Add lines 23 through 29	30			279,715
31	Enter the smaller of line 20 or line 30	31			279,715
32	Reduction of credit for international boycott operations. See instructions for line 12	32			
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 1; Form 1040-NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 46a	33			279,715

b Other deductions (attach statement)			
c Add lines 3a and 3b	7,417	7,417	7,417
d Gross foreign source income (see instructions) . .			
e Gross income from all sources (see instructions) . .	80,015,250	80,015,250	80,015,250
f Divide line 3d by line 3e (see instructions)	0.00000	0.00000	0.00000
g Multiply line 3c by line 3f			
4 Pro rata share of interest expense (see instructions):			
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)			
b Other interest expense			
5 Losses from foreign sources			
6 Add lines 2, 3g, 4a, 4b, and 5			6

i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total
	G	H	I	(Add cols. A, B, and C.)

1a Gross income from sources within country shown above and of the type checked above (see instructions):				
.....	19	10,850	-10,869	1a

b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)

Deductions and losses (Caution: See instructions.):

2 Expenses definitely related to the income on line 1a (attach statement)		24,286		
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	7,417	7,417		
b Other deductions (attach statement)				
c Add lines 3a and 3b	7,417	7,417		
d Gross foreign source income (see instructions) . .	19	10,850		
e Gross income from all sources (see instructions) . .	80,015,250	80,015,250		
f Divide line 3d by line 3e (see instructions)	0.00000	0.00014		
g Multiply line 3c by line 3f		1		
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5		24,287	-1,454,475	6

7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 **7**

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(q) Dividends		(r) Rents and royalties	(s) Interest			
A	See Additional Data Table									
B										
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 **8** 758

Form 1116
Department of the Treasury
Internal Revenue Service (99)

Foreign Tax Credit
(Individual, Estate, or Trust)

OMB No. 1545-0121

2019

Attachment
Sequence No. 19

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
Go to www.irs.gov/Form1116 for instructions and the latest information.

Name
DONALD J & MELANIA<TRUMP

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Section 951A category income
b Foreign branch category income
c Passive category income
d General category income
e Section 901(j) income
f Certain income re-sourced by treaty
g Lump-sum distributions
h Resident of (name of country) US

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

Table with columns for Foreign Country or U.S. Possession (A, B, C) and Total. Rows include: 1a Gross income from sources within country shown above and of the type checked above; Deductions and losses (Caution: See instructions.); 2 Expenses definitely related to the income on line 1a; 3 Pro rata share of other deductions not definitely related; 4 Pro rata share of interest expense; 5 Losses from foreign sources; 6 Add lines 2, 3g, 4a, 4b, and 5.

Table with columns for Foreign Country or U.S. Possession (D, E, F) and Total. Rows include: 1a Gross income from sources within country shown above and of the type checked above; Deductions and losses (Caution: See instructions.); 2 Expenses definitely related to the income on line 1a; 3 Pro rata share of other deductions not definitely related.

b Other deductions (attach statement)				
c Add lines 3a and 3b	7,417	7,417	7,417	
d Gross foreign source income (see instructions) . .				
e Gross income from all sources (see instructions) .	80,015,250	80,015,250	80,015,250	
f Divide line 3d by line 3e (see instructions) . . .	0.00000	0.00000	0.00000	
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	4,906,724		210,929	6 67,675,314

i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	G	H	I	
	AE	RQ	CA	
1a Gross income from sources within country shown above and of the type checked above (see instructions):	663,416	15,045	3,616	1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				

Deductions and losses (Caution: See instructions.):	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	J	K	L	
	RP	GJ	IN	
2 Expenses definitely related to the income on line 1a (attach statement)	7,514	51	193,944	
3 Pro rata share of other deductions not definitely related :				
a Certain itemized deductions or standard deduction (see instructions)	7,417	7,417	7,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b	7,417	7,417	7,417	
d Gross foreign source income (see instructions) . .	663,416	15,045	3,616	
e Gross income from all sources (see instructions) .	80,015,250	80,015,250	80,015,250	
f Divide line 3d by line 3e (see instructions) . . .	0.00829	0.00019	0.00005	
g Multiply line 3c by line 3f	61	1		
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	7,575	52	193,944	6 67,675,314

i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	J	K	L	
	RP	GJ	IN	
1a Gross income from sources within country shown above and of the type checked above (see instructions):	14,081		2,082,074	1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				

Deductions and losses (Caution: See instructions.):	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	J	K	L	
	RP	GJ	IN	
2 Expenses definitely related to the income on line 1a (attach statement)		26	4,409	
3 Pro rata share of other deductions not definitely related :				
a Certain itemized deductions or standard deduction (see instructions)	7,417	7,417	7,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b	7,417	7,417	7,417	
d Gross foreign source income (see instructions) . .	14,081		2,082,074	
e Gross income from all sources (see instructions) .	80,015,250	80,015,250	80,015,250	

f	Divide line 3d by line 3e (see instructions)	0.00018	0.00000	0.02602	
g	Multiply line 3c by line 3f	1		193	
4	Pro rata share of interest expense (see instructions):				
a	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b	Other interest expense				
5	Losses from foreign sources				
6	Add lines 2, 3g, 4a, 4b, and 5	1	26	4,602	6 67,675,314

Foreign Country or U.S. Possession				Total
M	N	O	(Add cols. A, B, and C.)	
GG	IS	AJ		
i Enter the name of the foreign country or U.S. possession				
1a Gross income from sources within country shown above and of the type checked above (see instructions):				1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				

Foreign Country or U.S. Possession				Total
M	N	O	(Add cols. A, B, and C.)	
GG	IS	AJ		
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)				
	191,330	1,712,122	194,038	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)				
	7,417	7,417	7,417	
b Other deductions (attach statement)				
c Add lines 3a and 3b				
	7,417	7,417	7,417	
d Gross foreign source income (see instructions)				
e Gross income from all sources (see instructions)				
	80,015,250	80,015,250	80,015,250	
f Divide line 3d by line 3e (see instructions)				
	0.00000	0.00000	0.00000	
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6	191,330	1,712,122	194,038	6 67,675,314

Foreign Country or U.S. Possession			Total
P	Q	R	(Add cols. A, B, and C.)
BR	RN	MX	
i Enter the name of the foreign country or U.S. possession			
1a Gross income from sources within country shown above and of the type checked above (see instructions):			1a 45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)			

Foreign Country or U.S. Possession			Total
P	Q	R	(Add cols. A, B, and C.)
BR	RN	MX	
Deductions and losses (Caution: See instructions.):			
2 Expenses definitely related to the income on line 1a (attach statement)			
	1,901,179	3,495,182	191,330
3 Pro rata share of other deductions not definitely related:			
a Certain itemized deductions or standard deduction (see instructions)			
	7,417	7,417	7,417
b Other deductions (attach statement)			
c Add lines 3a and 3b			
	7,417	7,417	7,417
d Gross foreign source income (see instructions)			
		534,358	
e Gross income from all sources (see instructions)			
	80,015,250	80,015,250	80,015,250
f Divide line 3d by line 3e (see instructions)			
	0.00000	0.00668	0.00000
g Multiply line 3c by line 3f			
		50	
4 Pro rata share of interest expense (see instructions):			
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)			

b Other interest expense							
5 Losses from foreign sources							
6 Add lines 2, 3g, 4a, 4b, and 5			1,901,179	3,495,232	191,330	6	67,675,314
Foreign Country or U.S. Possession			Total			(Add cols. A, B, and C.)	
i Enter the name of the foreign country or U.S. possession			S	T	U		
			QA	ID	EI		
1a Gross income from sources within country shown above and of the type checked above (see instructions):				2,093,917	10,417,486	1a	45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>							
Deductions and losses (Caution: See instructions.):							
2 Expenses definitely related to the income on line 1a (attach statement)				4,432	13,676,454		
3 Pro rata share of other deductions not definitely related:							
a Certain itemized deductions or standard deduction (see instructions)			7,417	7,417	7,417		
b Other deductions (attach statement)							
c Add lines 3a and 3b			7,417	7,417	7,417		
d Gross foreign source income (see instructions)				2,093,917	10,417,486		
e Gross income from all sources (see instructions)			80,015,250	80,015,250	80,015,250		
f Divide line 3d by line 3e (see instructions)			0.00000	0.02617	0.13019		
g Multiply line 3c by line 3f				194	966		
4 Pro rata share of interest expense (see instructions):							
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)							
b Other interest expense							
5 Losses from foreign sources							
6 Add lines 2, 3g, 4a, 4b, and 5				4,626	13,677,420	6	67,675,314

Foreign Country or U.S. Possession			Total			(Add cols. A, B, and C.)	
i Enter the name of the foreign country or U.S. possession			V	W	X		
			TU	VC	UY		
1a Gross income from sources within country shown above and of the type checked above (see instructions):			6,432		220	1a	45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>							
Deductions and losses (Caution: See instructions.):							
2 Expenses definitely related to the income on line 1a (attach statement)			1,240		2,350		
3 Pro rata share of other deductions not definitely related:							
a Certain itemized deductions or standard deduction (see instructions)			7,417	7,417	7,417		
b Other deductions (attach statement)							
c Add lines 3a and 3b			7,417	7,417	7,417		
d Gross foreign source income (see instructions)			6,432		220		
e Gross income from all sources (see instructions)			80,015,250	80,015,250	80,015,250		
f Divide line 3d by line 3e (see instructions)			0.00008	0.00000	0.00000		
g Multiply line 3c by line 3f			1				
4 Pro rata share of interest expense (see instructions):							
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)							
b Other interest expense							
5 Losses from foreign sources							
6 Add lines 2, 3g, 4a, 4b, and 5			1,241		2,350	6	67,675,314

Foreign Country or U.S. Possession			Total			(Add cols. A, B, and C.)	
i Enter the name of the foreign country or U.S. possession			Y	Z	CC		

1a Gross income from sources within country shown above and of the type checked above (see instructions):					
	10,869			1a	45,716,476
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) . . . <input type="checkbox"/>					
Deductions and losses (Caution: See instructions.):					
2 Expenses definitely related to the income on line 1a (attach statement)					
3 Pro rata share of other deductions not definitely related:					
a Certain itemized deductions or standard deduction (see instructions)					
b Other deductions (attach statement)					
c Add lines 3a and 3b					
d Gross foreign source income (see instructions)					
e Gross income from all sources (see instructions)					
f Divide line 3d by line 3e (see instructions)					
g Multiply line 3c by line 3f					
4 Pro rata share of interest expense (see instructions):					
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)					
b Other interest expense					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5	1,454,475			6	67,675,314
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7	-21,958,838

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency				In U.S. dollars					
		(l) Date paid or accrued	Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
			(m) Dividends	(n) Rents and royalties	(o) Interest		(q) Dividends	(r) Rents and royalties	(s) Interest		
A	See Additional Data Table										
B											
C											

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 **8** 278,957

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	278,957		
10	Carryback or carryover (attach detailed computation) (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10			
11	Add lines 9 and 10	11	278,957		
12	Reduction in foreign taxes (see instructions)	12	()		
13	Taxes reclassified under high tax kickout (see instructions)	13	758		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		279,715	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15	-21,958,838		
16	Adjustments to line 15 (see instructions)	16	26,717,269		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	4,758,431		
18	Individuals: Enter the amount from Form 1040 or 1040-SR, line 11b; or Form 1040-NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	2,096,023		
Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.					
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		1.00000	
20	Individuals: Enter the total of Form 1040 or 1040-SR, line 12b and Schedule 2 (Form 1040 or 1040-SR), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 41, 42, and 44. Foreign estates and trusts should enter the amount from Form 1040-NR, line 42	20		382,950	
Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.					
21	Multiply line 20 by line 19 (maximum amount of credit)	21		382,950	
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV (see instructions)	22		279,715	

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on section 951A category income	23			
24	Credit for taxes on foreign branch category income	24			
25	Credit for taxes on passive category income	25			
26	Credit for taxes on general category income	26			
27	Credit for taxes on section 901(j) income	27			
28	Credit for taxes on certain income re-sourced by treaty	28			
29	Credit for taxes on lump-sum distributions	29			
30	Add lines 23 through 29	30			
31	Enter the smaller of line 20 or line 30	31			
32	Reduction of credit for international boycott operations. See instructions for line 12	32			
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 1; Form 1040-NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 46a	33			

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Functional Currency and Exchange Rate QBU Statement

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Regulation: IRC Section 6038 & Treasury Regulation 1.6038(g)

QBU Id	Country of Operation	Functional Currency
UK POUNDS		0.75800

Form 3800

General Business Credit

OMB No. 1545-0895

2019

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form3800 for instructions and the latest information. You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

Attachment Sequence No. 22

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) (See instructions and complete Part(s) III before Parts I and II)

Table with 6 rows for Part I. Line 1: General business credit from line 2 of all Parts III with box A checked. Line 2: Passive activity credits from line 2 of all Parts III with box B checked (4,787). Line 3: Enter the applicable passive activity credits allowed for 2019. Line 4: Carryforward of general business credit to 2019 (5,561,483). Line 5: Carryback of general business credit from 2020. Line 6: Add lines 1, 3, 4, and 5 (5,561,483).

Part II Allowable Credit

Table with 17 rows for Part II. Line 7: Regular tax before credits (558,780). Line 8: Alternative minimum tax. Line 9: Add lines 7 and 8 (558,780). Line 10a: Foreign tax credit. Line 10b: Certain allowable credits. Line 10c: Add lines 10a and 10b. Line 11: Net income tax (558,780). Line 12: Net regular tax (558,780). Line 13: Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000 (133,445). Line 14: Tentative minimum tax (103,235). Line 15: Enter the greater of line 13 or line 14 (133,445). Line 16: Subtract line 15 from line 11 (425,335). Line 17: Enter the smaller of line 6 or line 16 (425,335).

Part II Allowable Credit (Continued)

Note: If you are not required to report any amounts on lines 22 or 24 below, skip lines 18 through 25 and enter -0- on line 26.

18	Multiply line 14 by 75% (0.75). See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0-	20	
21	Subtract line 17 from line 20. If zero or less, enter -0-	21	
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked	23	
24	Enter the applicable passive activity credit allowed for 2019. See instructions	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0
27	Subtract line 13 from line 11. If zero or less, enter -0-	27	425,335
28	Add lines 17 and 26	28	425,335
29	Subtract line 28 from line 27. If zero or less, enter -0-	29	0
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	214,912
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked	32	222,522
33	Enter the applicable passive activity credits allowed for 2019. See instructions	33	
34	Carryforward of business credit to 2019. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	12,437,941
35	Carryback of business credit from 2020. Enter the amount from line 5 of Part III with box D checked See instructions	35	
36	Add lines 30, 33, 34, and 35	36	12,652,853
37	Enter the smaller of line 29 or line 36	37	
38	<p>Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6 and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return:</p> <ul style="list-style-type: none"> • Individuals. Schedule 3 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 51. • Corporations. Form 1120, Schedule J, Part I, line 5c • Estates and trusts. Form 1041, Schedule G, line 2b 	38	425,335

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A** General Business Credit From a Non-Passive Activity
- B** General Business Credit From a Passive Activity
- C** General Business Credit Carryforwards
- D** General Business Credit Carrybacks
- E** Reserved
- F** Reserved
- G** Eligible Small Business Credit Carryforwards
- H** Reserved
- I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

(a) Description of credit	(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.		
1a Investment (Form 3468, Part II only) (attach Form 3468)	1a	
b Reserved	1b	
c Increasing research activities (Form 6765)	1c	
d Low-income housing (Form 8586, Part I only)	1d	
e Disabled access (Form 8826) (see instructions for limitation)	1e	
f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	
g Indian employment (Form 8845)	1g	
h Orphan drug (Form 8820)	1h	
i New markets (Form 8874)	1i	
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j	
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k	
l Biodiesel and renewable diesel fuels (attach Form 8864)	1l	
m Low sulfur diesel fuel production (Form 8896)	1m	
n Distilled spirits (Form 8906)	1n	
o Nonconventional source fuel (carryforward only)	1o	
p Energy efficient home (Form 8908)	1p	
q Energy efficient appliance (carryforward only)	1q	
r Alternative motor vehicle (Form 8910)	1r	
s Alternative fuel vehicle refueling property (Form 8911)	1s	4,787
t Enhanced oil recovery credit (Form 8830)	1t	
u Mine rescue team training (Form 8923)	1u	
v Agricultural chemicals security (carryforward only)	1v	
w Employer differential wage payments (Form 8932)	1w	
x Carbon dioxide sequestration (Form 8933)	1x	
y Qualified plug-in electric drive motor vehicle (Form 8936)	1y	
z Qualified plug-in electric vehicle (carryforward only)	1z	
aa Employee retention (Form 5884-A)	1aa	
bb General credits from an electing large partnership (carryforward only)	1bb	
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz	
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	4,787
3 Enter the amount from Form 8844 here and on the applicable line of Part II	3	
4a Investment (Form 3468, Part III) (attach Form 3468)	4a	
b Work opportunity (Form 5884)	4b	
c Biofuel producer (Form 6478)	4c	
d Low-income housing (Form 8586, Part II)	4d	
e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	437,434
g Qualified railroad track maintenance (Form 8900)	4g	
h Small employer health insurance premiums (Form 8941)	4h	
i Increasing research activities (Form 6765)	4i	
j Employer credit for paid family and medical leave (Form 8994)	4j	

z Other
5 Add lines 4a through 4z and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

4z		
5		437,434
6		442,221

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A [X] General Business Credit From a Non-Passive Activity
B [] General Business Credit From a Passive Activity
C [] General Business Credit Carryforwards
D [] General Business Credit Carrybacks
E [] Reserved
F [] Reserved
G [] Eligible Small Business Credit Carryforwards
H [] Reserved
I If you are filling more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, and (c) Enter the appropriate amount. Rows include categories 1a through 1zz, 2, 3, 4a through 4j.

z Other	4z	
5 Add lines 4a through 4z and enter here and on the applicable line of Part II	5	14,364
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .	6	14,364

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A** General Business Credit From a Non-Passive Activity **E** Reserved
- B** General Business Credit From a Passive Activity **F** Reserved
- C** General Business Credit Carryforwards **G** Eligible Small Business Credit Carryforwards
- D** General Business Credit Carrybacks **H** Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

(a) Description of credit	(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.		
1a Investment (Form 3468, Part II only) (attach Form 3468)	1a	
b Reserved	1b	
c Increasing research activities (Form 6765)	1c	
d Low-income housing (Form 8586, Part I only)	1d	
e Disabled access (Form 8826) (see instructions for limitation)	1e	
f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	
g Indian employment (Form 8845)	1g	
h Orphan drug (Form 8820)	1h	
i New markets (Form 8874)	1i	
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j	
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k	
l Biodiesel and renewable diesel fuels (attach Form 8864)	1l	
m Low sulfur diesel fuel production (Form 8896)	1m	
n Distilled spirits (Form 8906)	1n	
o Nonconventional source fuel (carryforward only)	1o	
p Energy efficient home (Form 8908)	1p	
q Energy efficient appliance (carryforward only)	1q	
r Alternative motor vehicle (Form 8910)	1r	
s Alternative fuel vehicle refueling property (Form 8911)	1s	
t Enhanced oil recovery credit (Form 8830)	1t	
u Mine rescue team training (Form 8923)	1u	
v Agricultural chemicals security (carryforward only)	1v	
w Employer differential wage payments (Form 8932)	1w	
x Carbon dioxide sequestration (Form 8933)	1x	
y Qualified plug-in electric drive motor vehicle (Form 8936)	1y	
z Qualified plug-in electric vehicle (carryforward only)	1z	
aa Employee retention (Form 5884-A)	1aa	
bb General credits from an electing large partnership (carryforward only)	1bb	
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz	
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	0
3 Enter the amount from Form 8844 here and on the applicable line of Part II	3	
4a Investment (Form 3468, Part III) (attach Form 3468)	4a	
b Work opportunity (Form 5884)	4b	
c Biofuel producer (Form 6478)	4c	
d Low-income housing (Form 8586, Part II)	4d	
e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	126,329
g Qualified railroad track maintenance (Form 8900)	4g	
h Small employer health insurance premiums (Form 8941)	4h	
i Increasing research activities (Form 6765)	4i	
j Employer credit for paid family and medical leave (Form 8994)	4j	

z Other
5 Add lines 4a through 4z and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . . .

4z		
5		126,329
6		126,329

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A [x] General Business Credit From a Non-Passive Activity
B [] General Business Credit From a Passive Activity
C [] General Business Credit Carryforwards
D [] General Business Credit Carrybacks
E [] Reserved
F [] Reserved
G [] Eligible Small Business Credit Carryforwards
H [] Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include 1a-1zz, 2, 3, 4a-4j.

z Other

4z		
----	--	--

5 Add lines 4a through 4z and enter here and on the applicable line of Part II

5		2,869
---	--	-------

6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

6		2,869
---	--	-------

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A** General Business Credit From a Non-Passive Activity **E** Reserved
- B** General Business Credit From a Passive Activity **F** Reserved
- C** General Business Credit Carryforwards **G** Eligible Small Business Credit Carryforwards
- D** General Business Credit Carrybacks **H** Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

(a) Description of credit	(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.		
1a Investment (Form 3468, Part II only) (attach Form 3468)	1a	
b Reserved	1b	
c Increasing research activities (Form 6765)	1c	
d Low-income housing (Form 8586, Part I only)	1d	
e Disabled access (Form 8826) (see instructions for limitation)	1e	
f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	
g Indian employment (Form 8845)	1g	
h Orphan drug (Form 8820)	1h	
i New markets (Form 8874)	1i	
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j	
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k	
l Biodiesel and renewable diesel fuels (attach Form 8864)	1l	
m Low sulfur diesel fuel production (Form 8896)	1m	
n Distilled spirits (Form 8906)	1n	
o Nonconventional source fuel (carryforward only)	1o	
p Energy efficient home (Form 8908)	1p	
q Energy efficient appliance (carryforward only)	1q	
r Alternative motor vehicle (Form 8910)	1r	
s Alternative fuel vehicle refueling property (Form 8911)	1s	
t Enhanced oil recovery credit (Form 8830)	1t	
u Mine rescue team training (Form 8923)	1u	
v Agricultural chemicals security (carryforward only)	1v	
w Employer differential wage payments (Form 8932)	1w	
x Carbon dioxide sequestration (Form 8933)	1x	
y Qualified plug-in electric drive motor vehicle (Form 8936)	1y	
z Qualified plug-in electric vehicle (carryforward only)	1z	
aa Employee retention (Form 5884-A)	1aa	
bb General credits from an electing large partnership (carryforward only)	1bb	
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz	
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	0
3 Enter the amount from Form 8844 here and on the applicable line of Part II	3	
4a Investment (Form 3468, Part III) (attach Form 3468)	4a	
b Work opportunity (Form 5884)	4b	
c Biofuel producer (Form 6478)	4c	
d Low-income housing (Form 8586, Part II)	4d	
e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	68,918
g Qualified railroad track maintenance (Form 8900)	4g	
h Small employer health insurance premiums (Form 8941)	4h	
i Increasing research activities (Form 6765)	4i	
j Employer credit for paid family and medical leave (Form 8994)	4j	

z Other

4z		
----	--	--

5 Add lines 4a through 4z and enter here and on the applicable line of Part II

5		68,918
---	--	--------

6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

6		68,918
---	--	--------

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A [X] General Business Credit From a Non-Passive Activity
B [] General Business Credit From a Passive Activity
C [] General Business Credit Carryforwards
D [] General Business Credit Carrybacks
E [] Reserved
F [] Reserved
G [] Eligible Small Business Credit Carryforwards
H [] Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include 1a-1zz, 2, 3, 4a-4j.

z Other

4z		
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5 Add lines 4a through 4z and enter here and on the applicable line of Part II

5		2,432
----------	--	-------

6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

6		2,432
----------	--	-------

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved
I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, and (c) Enter the appropriate amount. Rows include various credit categories like Investment, Reserved, Research activities, etc.

z Other	4z	
5 Add lines 4a through 4z and enter here and on the applicable line of Part II	5	134
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . . .	6	182

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, and (c) Enter the appropriate amount. Rows include various credit categories like Investment, Reserved, Research activities, etc.

z Other	4z		
5 Add lines 4a through 4z and enter here and on the applicable line of Part II	5		13,145
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .	6		17,884

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A** General Business Credit From a Non-Passive Activity
- B** General Business Credit From a Passive Activity
- C** General Business Credit Carryforwards
- D** General Business Credit Carrybacks
- E** Reserved
- F** Reserved
- G** Eligible Small Business Credit Carryforwards
- H** Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

(a) Description of credit	(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.		
1a Investment (Form 3468, Part II only) (attach Form 3468)	1a	
b Reserved	1b	
c Increasing research activities (Form 6765)	1c	
d Low-income housing (Form 8586, Part I only)	1d	
e Disabled access (Form 8826) (see instructions for limitation)	1e	
f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	
g Indian employment (Form 8845)	1g	
h Orphan drug (Form 8820)	1h	
i New markets (Form 8874)	1i	
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j	
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k	
l Biodiesel and renewable diesel fuels (attach Form 8864)	1l	
m Low sulfur diesel fuel production (Form 8896)	1m	
n Distilled spirits (Form 8906)	1n	
o Nonconventional source fuel (carryforward only)	1o	
p Energy efficient home (Form 8908)	1p	
q Energy efficient appliance (carryforward only)	1q	
r Alternative motor vehicle (Form 8910)	1r	
s Alternative fuel vehicle refueling property (Form 8911)	1s	
t Enhanced oil recovery credit (Form 8830)	1t	
u Mine rescue team training (Form 8923)	1u	
v Agricultural chemicals security (carryforward only)	1v	
w Employer differential wage payments (Form 8932)	1w	
x Carbon dioxide sequestration (Form 8933)	1x	
y Qualified plug-in electric drive motor vehicle (Form 8936)	1y	
z Qualified plug-in electric vehicle (carryforward only)	1z	
aa Employee retention (Form 5884-A)	1aa	
bb General credits from an electing large partnership (carryforward only)	1bb	
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz	
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	0
3 Enter the amount from Form 8844 here and on the applicable line of Part II	3	
4a Investment (Form 3468, Part III) (attach Form 3468)	4a	
b Work opportunity (Form 5884)	4b	
c Biofuel producer (Form 6478)	4c	
d Low-income housing (Form 8586, Part II)	4d	
e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	3,977
g Qualified railroad track maintenance (Form 8900)	4g	
h Small employer health insurance premiums (Form 8941)	4h	
i Increasing research activities (Form 6765)	4i	
j Employer credit for paid family and medical leave (Form 8994)	4j	

z Other
5 Add lines 4a through 4z and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

4z		
5		3,977
6		3,977

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, and (c) Enter the appropriate amount. Rows include various credit categories like Investment, Reserved, Research activities, etc.

z Other	4z	
5 Add lines 4a through 4z and enter here and on the applicable line of Part II	5	2,516
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .	6	2,516

Form **3800** (2019)

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved
I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, and (c) Enter the appropriate amount. Rows include categories like Investment, Reserved, Increasing research activities, etc., with specific sub-rows (1a-1zz, 2, 3, 4a-4j).

z Other	4z		
5 Add lines 4a through 4z and enter here and on the applicable line of Part II	5		6,326
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .	6		6,326

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include categories like Investment, Reserved, Increasing research activities, etc.

z Other

4z

5 Add lines 4a through 4z and enter here and on the applicable line of Part II

5

12,436

6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

6

12,436

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved
I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include 1a-1zz, 2, 3, 4a-4j.

z Other

4z

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--

5 Add lines 4a through 4z and enter here and on the applicable line of Part II

5

--

2,306

6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

6

--

2,306

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A** General Business Credit From a Non-Passive Activity
- B** General Business Credit From a Passive Activity
- C** General Business Credit Carryforwards
- D** General Business Credit Carrybacks
- E** Reserved
- F** Reserved
- G** Eligible Small Business Credit Carryforwards
- H** Reserved
- I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

(a) Description of credit	(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.		
1a Investment (Form 3468, Part II only) (attach Form 3468)	1a	
b Reserved	1b	
c Increasing research activities (Form 6765)	1c	
d Low-income housing (Form 8586, Part I only)	1d	
e Disabled access (Form 8826) (see instructions for limitation)	1e	
f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	
g Indian employment (Form 8845)	1g	
h Orphan drug (Form 8820)	1h	
i New markets (Form 8874)	1i	
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j	
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k	
l Biodiesel and renewable diesel fuels (attach Form 8864)	1l	
m Low sulfur diesel fuel production (Form 8896)	1m	
n Distilled spirits (Form 8906)	1n	
o Nonconventional source fuel (carryforward only)	1o	
p Energy efficient home (Form 8908)	1p	
q Energy efficient appliance (carryforward only)	1q	
r Alternative motor vehicle (Form 8910)	1r	
s Alternative fuel vehicle refueling property (Form 8911)	1s	
t Enhanced oil recovery credit (Form 8830)	1t	
u Mine rescue team training (Form 8923)	1u	
v Agricultural chemicals security (carryforward only)	1v	
w Employer differential wage payments (Form 8932)	1w	
x Carbon dioxide sequestration (Form 8933)	1x	
y Qualified plug-in electric drive motor vehicle (Form 8936)	1y	
z Qualified plug-in electric vehicle (carryforward only)	1z	
aa Employee retention (Form 5884-A)	1aa	
bb General credits from an electing large partnership (carryforward only)	1bb	
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz	
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	0
3 Enter the amount from Form 8844 here and on the applicable line of Part II	3	
4a Investment (Form 3468, Part III) (attach Form 3468)	4a	
b Work opportunity (Form 5884)	4b	
c Biofuel producer (Form 6478)	4c	
d Low-income housing (Form 8586, Part II)	4d	
e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	14,575
g Qualified railroad track maintenance (Form 8900)	4g	
h Small employer health insurance premiums (Form 8941)	4h	
i Increasing research activities (Form 6765)	4i	
j Employer credit for paid family and medical leave (Form 8994)	4j	

z Other
5 Add lines 4a through 4z and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

4z		
5		14,575
6		14,575

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A** General Business Credit From a Non-Passive Activity
- B** General Business Credit From a Passive Activity
- C** General Business Credit Carryforwards
- D** General Business Credit Carrybacks
- E** Reserved
- F** Reserved
- G** Eligible Small Business Credit Carryforwards
- H** Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

(a) Description of credit	(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.		
1a Investment (Form 3468, Part II only) (attach Form 3468)	1a	
b Reserved	1b	
c Increasing research activities (Form 6765)	1c	
d Low-income housing (Form 8586, Part I only)	1d	
e Disabled access (Form 8826) (see instructions for limitation)	1e	
f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	
g Indian employment (Form 8845)	1g	
h Orphan drug (Form 8820)	1h	
i New markets (Form 8874)	1i	
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j	
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k	
l Biodiesel and renewable diesel fuels (attach Form 8864)	1l	
m Low sulfur diesel fuel production (Form 8896)	1m	
n Distilled spirits (Form 8906)	1n	
o Nonconventional source fuel (carryforward only)	1o	
p Energy efficient home (Form 8908)	1p	
q Energy efficient appliance (carryforward only)	1q	
r Alternative motor vehicle (Form 8910)	1r	
s Alternative fuel vehicle refueling property (Form 8911)	1s	
t Enhanced oil recovery credit (Form 8830)	1t	
u Mine rescue team training (Form 8923)	1u	
v Agricultural chemicals security (carryforward only)	1v	
w Employer differential wage payments (Form 8932)	1w	
x Carbon dioxide sequestration (Form 8933)	1x	
y Qualified plug-in electric drive motor vehicle (Form 8936)	1y	
z Qualified plug-in electric vehicle (carryforward only)	1z	
aa Employee retention (Form 5884-A)	1aa	
bb General credits from an electing large partnership (carryforward only)	1bb	
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz	
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	0
3 Enter the amount from Form 8844 here and on the applicable line of Part II	3	
4a Investment (Form 3468, Part III) (attach Form 3468)	4a	
b Work opportunity (Form 5884)	4b	
c Biofuel producer (Form 6478)	4c	
d Low-income housing (Form 8586, Part II)	4d	
e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	15,578
g Qualified railroad track maintenance (Form 8900)	4g	
h Small employer health insurance premiums (Form 8941)	4h	
i Increasing research activities (Form 6765)	4i	
j Employer credit for paid family and medical leave (Form 8994)	4j	

z Other	4z	
5 Add lines 4a through 4z and enter here and on the applicable line of Part II	5	15,578
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .	6	15,578

Form **3800** (2019)

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B [checked] General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include various credits like Investment, Reserved, Increasing research activities, etc.

z Other
5 Add lines 4a through 4z and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

4z		
5		137,226
6		137,226

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B [checked] General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include various credit categories like Investment, Reserved, Research activities, etc.

z Other	4z	
5 Add lines 4a through 4z and enter here and on the applicable line of Part II	5	14,303
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . . .	6	14,303

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include categories like Investment, Reserved, Increasing research activities, etc., with corresponding amounts.

z Other
5 Add lines 4a through 4z and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

4z		
5		11,927,805
6		17,489,288

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
B General Business Credit From a Passive Activity
C General Business Credit Carryforwards
D General Business Credit Carrybacks
E Reserved
F Reserved
G Eligible Small Business Credit Carryforwards
H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

Table with 3 columns: (a) Description of credit, (b) If claiming the credit from a pass-through entity, enter the EIN, (c) Enter the appropriate amount. Rows include categories like Investment, Reserved, Increasing research activities, etc., with values such as 44,934 and 260,641.

z Other
5 Add lines 4a through 4z and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . .

4z		
5		260,641
6		510,136

**TY 2019 Itemized Share of Other Income (Loss)
Schedule**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Description	Amount
MEMBERSHIP FEES	4,107,631
OTHER INCOME	137,245

TY 2019 Itemized other liabilities schedule

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Corporation Name	Corporation EIN	Other Liabilities Description	Beginning Amount	Ending Amount
TRUMP INTERNATIONAL GOLF CLUB SCOTLAND LIMITED	98-0485744	LOANS/OBLIGATIONS	174,951	309,306

TY 2019 Other Deductions Schedule

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
BANK CHARGES		2,327
DECORATIONS		12,936
DIRECT COSTS		729,164
INSURANCE		43,480
MARKETING		122,048
MISCELLANEOUS		167,157
OFFICE EXPENSE		459,939
PROFESSIONAL FEES		152,775
REPAIRS & MAINTENANCE		254,726
SALARIES & WAGES		2,728,094
SECURITY		15,290
SUPPLIES		461,105
UTILITIES		83,500
MEALS		15,015



Form **4136**

Credit for Federal Tax Paid on Fuels

OMB No. 1545-0162

2019

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form4136 for instructions and the latest information.

Attachment
Sequence No. 23

Name (as shown on your income tax return)

Taxpayer identification number

DONALD J & MELANIA<TRUMP

Caution: Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 or 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

1 Nontaxable Use of Gasoline

Note. CRN is credit reference number.

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Off-highway business use	\$.183	147176	\$ 26,933	362
b	Use on a farm for farming purposes	.183			
c	Other nontaxable use (see Caution above line 1)	.183			
d	Exported	.184			411

2 Nontaxable Use of Aviation Gasoline

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use in commercial aviation (other than foreign trade)	\$.15		\$	354
b	Other nontaxable use (see Caution above line 1)	.193			324
c	Exported	.194			412
d	LUST tax on aviation fuels used in foreign trade	.001			433

3 Nontaxable Use of Undyed Diesel Fuel

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Nontaxable use			\$ 2,093	360
b	Use on a farm for farming purposes	.243	8615		
c	Use in trains	.243			353
d	Use in certain intercity and local buses (see Caution above line 1)	.17			350
e	Exported	.244			413

4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Nontaxable use taxed at \$.244	\$.243	See Add'l Data	\$	346
b	Use on a farm for farming purposes	.243			
c	Use in certain intercity and local buses (see Caution above line 1)	.17			347
d	Exported	.244			414
e	Nontaxable use taxed at \$.044	.043			377
f	Nontaxable use taxed at \$.219	.218			369

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 12625R

Form **4136** (2019)

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

5 Kerosene Used in Aviation (see **Caution** above line 1)

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244	\$.200		\$	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219	.175			355
c	Nontaxable use (other than use by state or local government) taxed at \$.244	.243			346
d	Nontaxable use (other than use by state or local government) taxed at \$.219	.218			369
e	LUST tax on aviation fuels used in foreign trade	.001			433

6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel **Registration No.** ▶

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use by a state or local government	\$.243	\$	360
b	Use in certain intercity and local buses	.17		350

7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation) **Registration No.** ▶

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use by a state or local government	\$.243	\$	346
b	Sales from a blocked pump	.243		
c	Use in certain intercity and local buses	.17		347

8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation **Registration No.** ▶

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use in commercial aviation (other than foreign trade) taxed at \$.219	\$.175		\$	355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244	.200			417
c	Nonexempt use in noncommercial aviation	.025			418
d	Other nontaxable uses taxed at \$.244	.243			346
e	Other nontaxable uses taxed at \$.219	.218			369
f	LUST tax on aviation fuels used in foreign trade	.001			433

9 Reserved for future use

Registration No. ▶

	(b) Rate	(c) Gallons of alcohol	(d) Amount of credit	(e) CRN
a Reserved for future use				
b Reserved for future use				

10 Biodiesel or Renewable Diesel Mixture Credit

Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. **Renewable diesel mixtures.** Claimant produced a mixture by mixing renewable diesel with liquid fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975, D396, or other equivalent standard approved by the IRS. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, both of which have been edited as discussed in the instructions for line 10. See the instructions for line 10 for information about renewable diesel used in aviation.

	(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of credit	(e) CRN
a Biodiesel (other than agri-biodiesel) mixtures	\$ 1.00		\$	388
b Agri-biodiesel mixtures	\$ 1.00			390
c Renewable diesel mixtures	\$ 1.00			307

11 Nontaxable Use of Alternative Fuel

Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5) (see instructions).

	(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
a Liquefied petroleum gas (LPG) (see instructions)		.183			419
b "P Series" fuels		.183			420
c Compressed natural gas (CNG) (see instructions)		.183			421
d Liquefied hydrogen		.183			422
e Fischer-Tropsch process liquid fuel from coal (including peat)		.243			423
f Liquid fuel derived from biomass		.243			424
g Liquefied natural gas (LNG) (see instructions)		.243			425
h Liquefied gas derived from biomass		.183			435

12 Alternative Fuel Credit

Registration No. ▶

	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
a Liquefied petroleum gas (LPG)	\$.50		\$	426
b "P Series" fuels	.50			427
c Compressed natural gas (CNG) (see instructions)	.50			428
d Liquefied hydrogen	.50			429
e Fischer-Tropsch process liquid fuel from coal (including peat)	.50			430
f Liquid fuel derived from biomass	.50			431
g Liquefied natural gas (LNG)	.50			432
h Liquefied gas derived from biomass	.50			436
i Compressed gas derived from biomass	.50			437

13 Registered Credit Card Issuers

Registration No. ▶

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Diesel fuel sold for the exclusive use of a state or local government	\$.243		\$	360
b Kerosene sold for the exclusive use of a state or local government	.243			346
c Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219	.218			369

14 Nontaxable Use of a Diesel-Water Fuel Emulsion

Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5) (see instructions).

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Nontaxable use		.197			309
b Exported		.198			306

15 Diesel-Water Fuel Emulsion Blending

Registration No. ▶

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
Blender credit	\$.046		\$	310

16 Exported Dyed Fuels and Exported Gasoline Blendstocks

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$.001	\$.001		\$	415
b Exported dyed kerosene	.001			416

17 Total income tax credit claimed. Add lines 1 through 16, column (d). Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 12; Form 1120, Schedule J, line 20b; Form 1120S, line 23c; Form 1041, line 25h; or the proper line of other returns. . . . ▶

17	\$	29,026
-----------	----	--------

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

TY 2019 Carry Forward of General Business Credit Computation

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Credit Identification: REHABILITATION INVESTMENT CR (PRE-2008)

The Tax Year the Credit

Originated: 01-01-1999

The Amount of the Credit: 4,396,630

**The Amount Allowed for that
Year:**

0

TY 2019 Carry Forward of General Business Credit Computation

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Credit Identification: EMPLOYER SOCIAL SECURITY CR (PRE-2007)

The Tax Year the Credit

Originated: 01-01-1999

The Amount of the Credit: 162,232

The Amount Allowed for that

Year: 0

TY 2019 Carry Forward of General Business Credit Computation

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Credit Identification: EMPLOYER SOCIAL SECURITY CR (PRE-2007)

The Tax Year the Credit

Originated: 01-01-2000

The Amount of the Credit: 145,328

**The Amount Allowed for that
Year:**

0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (PRE-2007)**The Tax Year the Credit****Originated:** 01-01-2001**The Amount of the Credit:** 153,814**The Amount Allowed for that****Year:** 0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (PRE-2007)**The Tax Year the Credit****Originated:** 01-01-2002**The Amount of the Credit:** 195,389**The Amount Allowed for that
Year:**

0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (PRE-2007)**The Tax Year the Credit****Originated:** 01-01-2003**The Amount of the Credit:** 164,032**The Amount Allowed for that****Year:** 0

TY 2019 Carry Forward of General Business Credit Computation

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Credit Identification: EMPLOYER SOCIAL SECURITY CR (PRE-2007)

The Tax Year the Credit

Originated: 01-01-2004

The Amount of the Credit: 177,843

The Amount Allowed for that

Year: 0

TY 2019 Carry Forward of General Business Credit Computation

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Credit Identification: EMPLOYER SOCIAL SECURITY CR (PRE-2007)

The Tax Year the Credit

Originated: 01-01-2005

The Amount of the Credit: 166,215

The Amount Allowed for that

Year: 0

TY 2019 Carry Forward of General Business Credit Computation

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Credit Identification: REHABILITATION INVESTMENT CR (POST-2007)

The Tax Year the Credit

Originated: 01-01-2016

The Amount of the Credit: 24,020,172

The Amount Allowed for that

Year: 0

Carryback Year	Carry Amount Allowed
2015-01-01	641,181

Carryforward Year	Carry Amount Allowed
2018-01-01	7,092,509
2017-01-01	7,435,107

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (POST-2006)**The Tax Year the Credit****Originated:** 01-01-2016**The Amount of the Credit:** 113,234**The Amount Allowed for that
Year:**

0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (POST-2006)**The Tax Year the Credit****Originated:** 01-01-2017**The Amount of the Credit:** 108,600**The Amount Allowed for that
Year:**

0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** REHABILITATION INVESTMENT CR (POST-2007)**The Tax Year the Credit****Originated:** 01-01-2018**The Amount of the Credit:** 1,556,874**The Amount Allowed for that****Year:** 0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** WORK OPPORTUNITY CREDIT (POST-2006)**The Tax Year the Credit****Originated:** 01-01-2018**The Amount of the Credit:**

49

The Amount Allowed for that**Year:**

0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (POST-2006)**The Tax Year the Credit****Originated:** 01-01-2018**The Amount of the Credit:** 1,297,673**The Amount Allowed for that****Year:** 0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** REGULAR INVESTMENT CREDIT**The Tax Year the Credit****Originated:** 01-01-2018**The Amount of the Credit:** 44,934**The Amount Allowed for that****Year:** 0

TY 2019 Carry Forward of General Business Credit Computation**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** EMPLOYER SOCIAL SECURITY CR (PRE-2007)**The Tax Year the Credit****Originated:** 01-01-2018**The Amount of the Credit:** 204,561**The Amount Allowed for that
Year:**

0

**SCHEDULE H
(Form 1040 or
1040-SR)**

Department of the Treasury
Internal Revenue Service (99)

Household Employment Taxes

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

▶ **Attach to Form 1040, 1040-SR, 1040-NR, 1040-SS, or 1041.**
▶ **Go to www.irs.gov/ScheduleH for instructions and the latest information.**

OMB No. 1545-1971

2019

Attachment
Sequence No. **44**

Name of employer

DONALD J TRUMP

Social security number

Employer identification number
13-3440039

Calendar year taxpayers having no household employees in 2019 don't have to complete this form for 2019.

A Did you pay **any one** household employee cash wages of \$2,100 or more in 2019? (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.)

- Yes.** Skip lines B and C and go to line 1.
- No.** Go to line B.

B Did you withhold federal income tax during 2019 for any household employee?

- Yes.** Skip line C and go to line 7.
- No.** Go to line C.

C Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2018 or 2019 to **all** household employees? (**Don't** count cash wages paid in 2018 or 2019 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Don't file this schedule.
- Yes.** Skip lines 1-9 and go to line 10.

Part I Social Security, Medicare, and Federal Income Taxes

1	Total cash wages subject to social security tax	1	25,160
2	Social security tax. Multiply line 1 by 12.4% (0.124)	2	3,120
3	Total cash wages subject to Medicare tax	3	25,160
4	Medicare tax. Multiply line 3 by 2.9% (0.029)	4	730
5	Total cash wages subject to Additional Medicare Tax withholding	5	
6	Additional Medicare Tax withholding. Multiply line 5 by 0.9% (0.009)	6	
7	Federal income tax withheld, if any	7	787
8	Total social security, Medicare, and federal income taxes. Add lines 2, 4, 6, and 7	8	4,637

9 Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2018 or 2019 to **all** household employees? (**Don't** count cash wages paid in 2018 or 2019 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Include the amount from line 8 above on Schedule 2 (Form 1040 or 1040-SR), line 7a. If you're not required to file Form 1040 or 1040-SR, see the line 9 instructions.
- Yes.** Go to line 10.

Part II Federal Unemployment (FUTA) Tax

	Yes	No
10 Did you pay unemployment contributions to only one state? (If you paid contributions to a credit reduction state, see instructions and check "No.")	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 Did you pay all state unemployment contributions for 2019 by April 15, 2020? Fiscal year filers see instructions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Next: If you checked the "Yes" box on **all** the lines above, complete Section A.
If you checked the "No" box on **any** of the lines above, skip Section A and complete Section B.

Section A

13 Name of the state where you paid unemployment contributions	NY	
14 Contributions paid to your state unemployment fund	14	917
15 Total cash wages subject to FUTA tax	15	13,840
16 FUTA tax. Multiply line 15 by 0.6% (0.006). Enter the result here, skip Section B, and go to line 25	16	83

Section B

17 Complete all columns below that apply (if you need more space, see instructions):

(a) Name of state	(b) Taxable wages (as defined in state act)	(c) State experience rate period		(d) State experience rate	(e) Multiply col. (b) by 0.054	(f) Multiply col. (b) by col. (d)	(g) Subtract col. (f) from col. (e). If zero or less, enter -0-.	(h) Contributions paid to state unemployment fund
		From	To					
18 Totals						18		
19 Add columns (g) and (h) of line 18						19		
20 Total cash wages subject to FUTA tax (see the line 15 instructions)							20	
21 Multiply line 20 by 6.0% (0.060)							21	
22 Multiply line 20 by 5.4% (0.054)						22		
23 Enter the smaller of line 19 or line 22 (If you paid state unemployment contributions late or you're in a credit reduction state, see instructions and check here)							23	
24 FUTA tax. Subtract line 23 from line 21. Enter the result here and go to line 25							24	

Part III Total Household Employment Taxes

25 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0-	25	4,637
26 Add line 16 (or line 24) and line 25	26	4,720
27 Are you required to file Form 1040 or 1040-SR? <input checked="" type="checkbox"/> Yes. Stop. Include the amount from line 26 above on Schedule 2 (Form 1040 or 1040-SR), line 7a. Don't complete Part IV below. <input type="checkbox"/> No. You may have to complete Part IV. See instructions for details.		

Part IV Address and Signature - Complete this part only if required. See the line 27 instructions.

Address (number and street) or P.O. box if mail isn't delivered to street address _____ Apt., room, or suite no. _____

City, town or post office, state, and ZIP code _____

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature _____	Date _____
Print/Type preparer's name _____	Preparer's signature _____
	Date _____
Check <input type="checkbox"/> if self-employed	PTIN _____
Firm's name _____	Firm's EIN _____
Firm's address _____	Phone no. _____

Paid Preparer Use Only

Form **4952**

Investment Interest Expense Deduction

OMB No. 1545-0191

2019

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form4952 for the latest information.
▶ Attach to your tax return.

Attachment
Sequence No. **51**

Name(s) shown on return
DONALD J & MELANIA<TRUMP

Identifying number

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2019 (see instructions)	1	883,424
2	Disallowed investment interest expense from 2018 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	883,424

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	11,414,715	
b	Qualified dividends included on line 4a	4b	19,540	
c	Subtract line 4b from line 4a	4c		11,395,175
d	Net gain from the disposition of property held for investment	4d	3,919,459	
e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e	3,919,459	
f	Subtract line 4e from line 4d	4f		0
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)	4g		
h	Investment income. Add lines 4c, 4f, and 4g	4h		11,395,175
5	Investment expenses (see instructions)	5		8,200
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6		11,386,975

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2020. Subtract line 6 from line 3. If zero or less, enter -0-	7	0
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	883,424

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Form 8959

Additional Medicare Tax

OMB No. 1545-0074

2019

Attachment Sequence No. 71

Department of the Treasury Internal Revenue Service

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, Form 1040-SR, 1040NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8959 for instructions and the latest information.

Name(s) shown on return

DONALD J & MELANIA<TRUMP

Your social security number

Part I Additional Medicare Tax on Medicare Wages

Table with 7 rows for Medicare wages and tips. Line 1: 393,928; Line 4: 393,928; Line 5: 250,000; Line 6: 143,928; Line 7: 1,295.

Part II Additional Medicare Tax on Self-Employment Income

Table with 5 rows for self-employment income. Line 8: 4,330,276; Line 9: 250,000; Line 10: 393,928; Line 11: 0; Line 12: 4,330,276; Line 13: 38,972.

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

Table with 4 rows for RRTA compensation. Line 14: 250,000; Line 15: 250,000; Line 16: 0; Line 17: 0.

Part IV Total Additional Medicare Tax

Line 18: 40,267

Part V Withholding Reconciliation

Table with 5 rows for withholding reconciliation. Line 19: 7,449; Line 20: 393,928; Line 21: 5,712; Line 22: 1,737; Line 24: 1,737.

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

Cat. No. 59475X

Form 8959 (2019)

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Form 8960

Net Investment Income Tax—
Individuals, Estates, and Trusts

OMB No.1545-2227

2019

Department of the Treasury
Internal Revenue Service (99)

Attach to your tax return.
Go to www.irs.gov/Form8960 for instructions and the latest information.

Attachment
Sequence No. 72

Name(s) shown on your tax return
DONALD J & MELANIA<TRUMP

Your social security number or EIN

Part I Investment Income

- Section 6013(g) election (see instructions)
Section 6013(h) election (see instructions)
Regulations section 1.1411-10(g) election (see instructions)

Table with 8 rows for investment income. Includes taxable interest (11,332,436), ordinary dividends (71,921), annuities, rental real estate (-16,472,951), net gain from disposition of property (9,257,197), and total investment income (15,559,734).

Part II Investment Expenses Allocable to Investment Income and Modifications

Table with 11 rows for investment expenses. Includes investment interest (883,424), state and foreign income tax (10,000), miscellaneous expenses (665,677), and total deductions (1,559,101).

Part III Tax Computation

Table with 21 rows for tax computation. Includes net investment income (14,000,633), modified adjusted gross income (4,380,714), net investment income tax for individuals (156,967), and net investment income tax for estates and trusts.

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

Form 8582

Passive Activity Loss Limitations

OMB No. 1545-1008

2019

Attachment Sequence No. 88

Department of the Treasury Internal Revenue Service (99)

See separate instructions. Attach to Form 1040, Form 1040-SR, or Form 1041. Go to www.irs.gov/Form8582 for instructions and the latest information.

Name(s) shown on return DONALD J & MELANIA<TRUMP

Identifying number

Part I 2019 Passive Activity Loss

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)

Special Allowance for Rental Real Estate Activities in the instructions.)

Table with 4 rows (1a-1d) for Rental Real Estate Activities. 1a: Activities with net income; 1b: Activities with net loss; 1c: Prior years unallowed losses; 1d: Combine lines 1a, 1b, and 1c.

Commercial Revitalization Deductions From Rental Real Estate Activities

Table with 3 rows (2a-2c) for Commercial Revitalization Deductions. 2a: Commercial revitalization deductions; 2b: Prior year unallowed commercial revitalization deductions; 2c: Add lines 2a and 2b.

All Other Passive Activities

Table with 4 rows (3a-3d) for All Other Passive Activities. 3a: Activities with net income; 3b: Activities with net loss; 3c: Prior years unallowed losses; 3d: Combine lines 3a, 3b, and 3c.

Line 4: Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used.

- If line 4 is a loss and: Line 1d is a loss, go to Part II. Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

Table with 5 rows (5-10) for Part II. 5: Enter the smaller of the loss on line 1d or the loss on line 4. 6: Enter \$150,000. 7: Enter modified adjusted gross income. 8: Subtract line 7 from line 6. 9: Multiply line 8 by 50% (0.5). 10: Enter the smaller of line 5 or line 9.

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

Table with 4 rows (11-14) for Part III. 11: Enter \$25,000 reduced by the amount, if any, on line 10. 12: Enter the loss from line 4. 13: Reduce line 12 by the amount on line 10. 14: Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13.

Part IV Total Losses Allowed

Table with 2 rows (15-16) for Part IV. 15: Add the income, if any, on lines 1a and 3a and enter the total. 16: Total losses allowed from all passive activities for 2019. Add lines 10, 14, and 15.

Caution: The worksheets must be filed with your tax return. Keep a copy for your records.

Worksheet 1—For Form 8582, Lines 1a, 1b, and 1c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c					

Worksheet 2—For Form 8582, Lines 2a and 2b (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

Worksheet 3—For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
See Additional Data Table					
Total. Enter on Form 8582, lines 3a, 3b, and 3c	51,604,940	-57,907,753			

Worksheet 4—Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total			1.00		

Worksheet 5—Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
See Additional Data Table				
Total		57,807,417	1.00	6,302,813

Worksheet 6—Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
See Additional Data Table				
Total		57,807,417	6,302,813	51,504,604

Worksheet 7—Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less, enter -0-					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less, enter -0-					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less, enter -0-					
Total			1.00		

Additional Data

Software ID:
 Software Version:
 SSN:
 Spouse SSN:
 Name: DONALD J & MELANIA<TRUMP

Form 8582, Part IV - Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
THE EAST 61 ST. COMP		-46,056			-46,056
THE EAST 61 ST. COMP		-357			-357
PARK BRIAR ASSOCIATE		-25,781			-25,781
40 WALL DEVELOPMENT		-166,491			-166,491
40 WALL DEVELOPMENT		-4,238,886			-4,238,886
HUDSON WATERFRONT AS	171,569			171,569	
HUDSON WATERFRONT AS	286,857			286,857	
HUDSON WATERFRONT AS	536,567			536,567	
HUDSON WATERFRONT AS	208,436			208,436	
TRUMP CPS LLC	5,550,790			5,550,790	
TRUMP CPS LLC	147,170			147,170	
DJT HOLDINGS LLC - M		-23,638			-23,638
TRUMP PLAZA LLC	1,273,350			1,273,350	
TRUMP 845 UN LIMITED		-55,384			-55,384
DJT HOLDINGS LLC - O	24,347			24,347	
DJT HOLDINGS LLC - O	10,446			10,446	
DJT HOLDINGS LLC TRU	900,001			900,001	
DJT HOLDINGS LLC - T		-65			-65
TIPPERARY REALTY COR		-100			-100
TIPPERARY REALTY COR	18,257			18,257	
PLAZA CONSULTING COR		-1,361			-1,361
TRUMP PROJECT MANAGE		-9,665			-9,665
FIFTY-SEVEN MANAGEME	91,759			91,759	
TRUMP CPS CORP	5,556			5,556	
TRUMP CPS CORP	221			221	
FIRST MEMBER INC		-295			-295
DJT HOLDINGS MM LLC		-487			-487
TRUMP PLAZA MEMBER I	12,996			12,996	
TRUMP VILLAGE CONST		-35,778			-35,778
TRUMP TOWER MANAGING		-1,013			-1,013
TRUMP TOWER MANAGING	78,617			78,617	
TRUMP 845 UN MGR COR		-1,954			-1,954
BEACH HAVEN APARMTEN		-20,186			-20,186
SHORE HAVEN APARTMEN		-33,350			-33,350
TRUMP MANAGEMENT INC		-6,402			-6,402
TRUMP DELMONICO LLC		-5,091			-5,091
STARRETT CITY ASSOCI		-116,694			-116,694
TRUMP PARK AVENUE LL		-5,082			-5,082
DJT HOLDINGS MM LLC		-1,370			-1,370
DJT HOLDINGS MM LLC		-21,259			-21,259
DJT HOLDINGS LLC - T	1,583,131			1,583,131	
DJT HOLDINGS MM LLC	16,153			16,153	
DJT HOLDINGS LLC - T		-3,367,095			-3,367,095
DJT HOLDINGS MM LLC		-4			-4
DJT HOLDINGS LLC - T		-89			-89
TRUMP FLORIDA MANAGE		-4			-4
TIHT MEMBER LLC		-2,079			-2,079
TIHT COMMERCIAL LLC	207,565			207,565	
DJT HOLDINGS LLC -TR		-431			-431
DJT HOLDINGS LLC - T		-2,083,600			-2,083,600
TRUMP MARKS PHILADEL		-5,402			-5,402
TRUMP MARKS WAIKIKI	124,091			124,091	
TRUMP MARKS WAIKIKI	371			371	
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MM LLC	7,495			7,495	
TRUMP MARKS PHILADEL		-362			-362

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS LLC -TR		-16,067			-16,067
DJT HOLDINGS MMC LLC		-164			-164
DJT HOLDINGS MM LLC		-1			-1
DJT HOLDINGS MM LLC	14,081			14,081	
DJT HOLDINGS MM LLC	2,594			2,594	
DJT HOLDINGS MM LLC		-19			-19
DJT HOLDINGS LLC - U		-1,820			-1,820
DJT HOLDINGS LLC - T		-2,800			-2,800
DJT HOLDINGS MM LLC		-29			-29
DJT HOLDINGS MM LLC		-7,870			-7,870
DJT HOLDINGS LLC - G		-90,109			-90,109
DJT HOLDINGS MM LLC		-7,096			-7,096
MELANIA MARKS ACCESS		-1,612			-1,612
DJT HOLDINGS LLC - T		-349			-349
MELANIA MARKS ACCESS		-50			-50
DJT HOLDINGS MM LLC		-433			-433
SC LP SHOPPING CENTE		-4,345			-4,345
DJT HOLDINGS LLC - T		-42,429			-42,429
DJT HOLDINGS LLC - T		-2,441			-2,441
TRUMP INTERNATIONAL	2,428,640			2,428,640	
DJT HOLDINGS MM LLC		-154			-154
DJT HOLDINGS MM LLC		-214			-214
TRUMP FERRY POINT ME		-47,900			-47,900
DJT HOLDINGS MM LLC		-14,044			-14,044
DJT HOLDINGS MM LLC		-25			-25
DJT HOLDINGS MM LLC		-919			-919
TIHH MEMBER CORP	16,781			16,781	
DJT HOLDINGS MM LLC/	16,753			16,753	
DJT HOLDINGS LLC - T		-4,694,657			-4,694,657
DJT HOLDINGS LLC - T		-1,376,418			-1,376,418
DJT HOLDINGS LLC - T	1,658,540			1,658,540	
DJT HOLDINGS LLC - P		-1,330			-1,330
DJT HOLDINGS LLC - T	16,710			16,710	
DJT HOLDINGS LLC -TR		-349			-349
DJT HOLDINGS LLC - T		-15,081			-15,081
DJT HOLDINGS LLC - T	410,788			410,788	
DJT HOLDINGS LLC - T		-20,999			-20,999
DJT HOLDINGS MM LLC		-4			-4
DJT HOLDINGS MM LLC		-14			-14
DJT HOLDINGS MM LLC	4,191			4,191	
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MANAGIN		-214,744			-214,744
DJT HOLDINGS MM LLC	170			170	
DJT HOLDINGS LLC - T		-29,598			-29,598
DJT HOLDINGS LLC - T		-3,287			-3,287
DJT HOLDINGS LLC - T		-3,174,334			-3,174,334
DJT HOLDINGS LLC - T		-1,276,974			-1,276,974
DJT HOLDINGS LLC - T		-771,330			-771,330
DJT HOLDINGS LLC - T		-695,448			-695,448
DJT HOLDINGS LLC - T		-480,991			-480,991
DJT HOLDINGS LLC - T		-2,898			-2,898
DJT HOLDINGS LLC - T		-2,400			-2,400
DJT HOLDINGS LLC - T		-495			-495
DJT HOLDINGS MM LLC		-24			-24
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MM LLC		-34			-34
DJT HOLDINGS MM LLC		-302			-302
DJT HOLDINGS MM LLC		-34			-34
TAG AIR INC		-982,373			-982,373
DJT HOLDINGS MM LLC		-5,705			-5,705
DJT HOLDINGS MM LLC		-5			-5
DJT HOLDINGS MM LLC		-32,362			-32,362
DJT HOLDINGS LLC -		-564,750			-564,750
DJT HOLDINGS LLC -		-3,370			-3,370
DJT HOLDINGS MM LLC		-4,290			-4,290
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MM LLC		-4			-4
T INTERNATIONAL REAL	420,891			420,891	
DJT HOLDINGS LLC - T		-431			-431

Name of activity	Current year		Prior years (c) Unallowed loss (line 3c)	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)		(d) Gain	(e) Loss
DJT HOLDINGS LLC - T	523,372			523,372	
DJT HOLDINGS - WHITE		-349			-349
DJT HOLDINGS JUPITER		-432,758			-432,758
DJT HOLDINGS - TRUMP		-15,598,269			-15,598,269
DJT HOLDINGS LLC - T		-1,374,320			-1,374,320
DJT HOLDINGS LLC - E		-661,730			-661,730
DJT HOLDINGS LLC - D	324,933			324,933	
DT MARKS VANCOUVER L	649			649	
DJT HOLDINGS LLC - T		-2,310			-2,310
DJT HOLDINGS LLC - C		-3,290			-3,290
DJT HOLDINGS LLC - T		-349			-349
DJT HOLDINGS LLC - T		-283,793			-283,793
DJT HOLDINGS MM LLC		-24			-24
DJT HOLDINGS MM LLC	3,315			3,315	
DJT HOLDINGS MM LLC		-4			-4
DJT HOLDINGS MM LLC		-4			-4
DJT HOLDINGS MM LLC		-6,752			-6,752
DJT HOLDINGS MM LLC		-1,662			-1,662
DJT HOLDINGS MM LLC		-14,022			-14,022
HUDSON WATERFRONT AS	4,042,586			4,042,586	
HUDSON WATERFRONT AS	7,562,933			7,562,933	
TRUMP 845 UN GP LLC	193,783			193,783	
DJT HOLDINGS LLC - T		-1,935,913			-1,935,913
DJT HOLDINGS MANAGIN		-15,382			-15,382
845 UN LIMITED PARTN	290,851			290,851	
TRUMP PARK AVENUE LL		-598,515			-598,515
TRUMP PARK AVENUE LL		-749,667			-749,667
DT CONNECT II MEMBER	656			656	
DJT HOLDINGS MM LLC		-29			-29
DJT HOLDINGS MM LLC		-151			-151
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MM LLC		-24			-24
DJT HOLDINGS MM LLC		-5			-5
TTTT VENTURE MEMBER		-4,751			-4,751
DJT HOLDINGS MM LLC	5,340			5,340	
DJT HOLDINGS MM LLC	967			967	
DJT HOLDINGS MM LLC		-46,784			-46,784
DJT HOLDINGS LLC - T		-2,334			-2,334
DJT HOLDINGS-D B PAC		-8,310			-8,310
DJT HOLDINGS LLC - T		-2,979			-2,979
DJT HOLDINGS LLC - T		-494			-494
DJT HOLDINGS LLC - T		-2,800			-2,800
DJT HOLDINGS LLC - P		-14,785			-14,785
DJT HOLDINGS LLC - T	94,759			94,759	
DJT HOLDINGS LLC TW	17,883			17,883	
DJT HOLDINGS LLC -TW		-1,706,203			-1,706,203
DT CONNECT II LLC	64,938			64,938	
DJT HOLDINGS LLC - T		-4,585,286			-4,585,286
DJT HOLDINGS MM LLC		-17,234			-17,234
DJT HOLDINGS MM LLC		-29			-29
DJT HOLDINGS MM LLC	3,675			3,675	
DJT HOLDINGS MM LLC		-33			-33
DJT HOLDINGS MM LLC		-33			-33
DJT HOLDINGS MM LLC	240			240	
DJT HOLDINGS MM LLC		-40			-40
DJT HOLDINGS MM LLC		-29			-29
DJT HOLDINGS MM LLC	167			167	
DJT HOLDINGS MM LLC		-29			-29
DJT HOLDINGS MM LLC		-29			-29
EID VENTURE II MEMBE		-368			-368
DJT HOLDINGS MM LLC		-18			-18
DJT HOLDINGS MM LLC		-3			-3
HUDSON WATERFRONT AS	365,399			365,399	
EID VENTURE II LLC		-410			-410
DJT HOLDINGS LLC - D		-294			-294
DJT HOLDINGS LLC - D	2,072,104			2,072,104	
DJT HOLDINGS MM LLC	20,930			20,930	
DJT HOLDINGS MM LLC		-13,029			-13,029
TRUMP PALACE PARC LL		-183,310			-183,310
DJT HOLDINGS LLC - W		-5,102			-5,102

Name of activity	Current year		Prior years (c) Unallowed loss (line 3c)	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)		(d) Gain	(e) Loss
DJT HOLDINGS LLC - T		-536			-536
DJT HOLDINGS LLC - T	4,441			4,441	
DJT HOLDINGS LLC - W		-29,034			-29,034
DJT HOLDINGS LLC - T		-65			-65
DJT HOLDINGS LLC - L		-1,019			-1,019
DJT HOLDINGS LLC - T		-353			-353
DJT HOLDINGS LLC - T		-1,566			-1,566
DJT HOLDINGS LLC - T		-297			-297
DJT HOLDINGS LLC - T		-138			-138
DJT HOLDINGS LLC - C		-1,476			-1,476
DJT HOLDINGS LLC - D		-410			-410
DJT HOLDINGS LLC - T		-353			-353
DJT HOLDINGS LLC - T		-259			-259
DJT HOLDINGS LLC - T		-33,591			-33,591
DJT HOLDINGS LLC - T		-2,287			-2,287
DJT HOLDINGS LLC - T		-486			-486
DJT HOLDINGS LLC - T		-81			-81
DJT HOLDINGS LLC - T		-606,785			-606,785
DJT HOLDINGS LLC - W		-6,104			-6,104
TRUMP EQUITABLE FIFT	19,027,280	-100,169		18,927,111	
DJT HOLDINGS LLC		-1,918,714			-1,918,714
DJT HOLDINGS MM LLC		-996			-996
DJT HOLDINGS MM LLC		-262			-262
DJT HOLDINGS MM LLC/		-5,799			-5,799
DJT HOLDINGS MM LLC/		-62			-62
DJT HOLDINGS MM LLC/		-5			-5
DJT HOLDINGS MM LLC/		-5			-5
DJT HOLDINGS MM LLC/	45			45	
DJT HOLDINGS MM LLC/		-10			-10
DJT HOLDINGS MM LLC/		-293			-293
DJT HOLDINGS MM LLC/		-3			-3
DJT HOLDINGS MM LLC/		-1			-1
DJT HOLDINGS MM LLC/		-15			-15
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-1			-1
DJT HOLDINGS MM LLC/		-3			-3
DJT HOLDINGS MM LLC/		-339			-339
DJT HOLDINGS MM LLC/		-299			-299
DJT HOLDINGS MM LLC/		-34			-34
DJT HOLDINGS MM LLC/		-33			-33
DJT HOLDINGS MM LLC/		-32,038			-32,038
DJT HOLDINGS MM LLC/		-12,899			-12,899
DJT HOLDINGS MM LLC/		-7,791			-7,791
DJT HOLDINGS MM LLC/	5,287			5,287	
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-4,371			-4,371
DJT HOLDINGS MM LLC/		-157,558			-157,558
DJT HOLDINGS MM LLC/		-149			-149
DJT HOLDINGS MM LLC/	181			181	
DJT HOLDINGS MM LLC/		-17,408			-17,408
DJT HOLDINGS MM LLC/	957			957	
DJT HOLDINGS MM LLC/		-46,316			-46,316
DJT HOLDINGS MM LLC/		-7,025			-7,025
DJT HOLDINGS MM LLC/		-5,762			-5,762
DJT HOLDINGS MM LLC/		-23			-23
DJT HOLDINGS MM LLC/		-34,011			-34,011
DJT HOLDINGS MM LLC/		-1			-1
DJT HOLDINGS MM LLC/		-10			-10
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/	246			246	
DJT HOLDINGS MM LLC/		-13			-13
DJT HOLDINGS MM LLC/		-30			-30
DJT HOLDINGS MM LLC/		-3			-3
DJT HOLDINGS MM LLC/	106			106	
DJT HOLDINGS MM LLC/		-28			-28
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-24			-24
DJT HOLDINGS MM LLC/		-28			-28
DJT HOLDINGS MM LLC/		-18			-18

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
DJT HOLDINGS MM LLC/		-5			-5
DJT HOLDINGS MM LLC/		-25			-25
DJT HOLDINGS MM LLC/	15,991			15,991	
DJT HOLDINGS MM LLC/		-212			-212
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-162			-162
DJT HOLDINGS MM LLC/		-29			-29
DJT HOLDINGS MM LLC/		-429			-429
DJT HOLDINGS MM LLC/	169			169	
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-152			-152
DJT HOLDINGS MM LLC/		-52			-52
DJT HOLDINGS MM LLC/		-239			-239
DJT HOLDINGS MM LLC/		-13,903			-13,903
DJT HOLDINGS MM LLC/		-33			-33
DJT HOLDINGS MM LLC/		-24			-24
DJT HOLDINGS MM LLC/		-23			-23
DJT HOLDINGS MM LLC/		-5			-5
DJT HOLDINGS MM LLC/	3,282			3,282	
DJT HOLDINGS MM LLC/		-21,046			-21,046
DJT HOLDINGS MM LLC/		-910			-910
DJT HOLDINGS MM LLC/		-47,421			-47,421
DJT HOLDINGS MM LLC/		-6,684			-6,684
DJT HOLDINGS MM LLC/	21,142			21,142	
DJT HOLDINGS MM LLC/		-4,858			-4,858
DJT HOLDINGS MM LLC/		-13,882			-13,882
DJT HOLDINGS MM LLC		-34			-34
DJT HOLDINGS LLC - T		-19,555			-19,555
DJT HOLDINGS MM LLC		-85			-85
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MM LLC		-30			-30
DJT HOLDINGS MM LLC	30			30	
DJT HOLDINGS MM LLC		-29			-29
DJT HOLDINGS MM LLC/		-16			-16
DJT HOLDINGS LLC - T		-915			-915
DJT HOLDINGS LLC - T		-56			-56
DJT HOLDINGS LLC - T		-323			-323
DJT HOLDINGS LLC - T		-297			-297
DJT HOLDINGS LLC - F		-138			-138
DJT HOLDINGS LLC - 1		-55,339			-55,339
DJT HOLDINGS LLC - 1		-95,199			-95,199
DJT HOLDINGS LLC - T	60,570			60,570	
555 CALIFORNIA SERVI		-112,900			-112,900
DJT HOLDINGS LLC - T		-34			-34
DJT HOLDINGS LLC - T	32,670			32,670	
DJT HOLDINGS LLC - T	391,560			391,560	
DJT HOLDINGS LLC - 1		-1,022,822			-1,022,822
DJT HOLDINGS MM LLC	16,922			16,922	
DJT HOLDINGS MM LLC/		-2,867			-2,867
DJT HOLDINGS MM LLC/	4,149			4,149	
DJT HOLDINGS LLC MM	5,565	-167		5,398	
DJT AEROSPACE LLC		-65,657			-65,657
DJT OPERATIONS I LLC	44,773			44,773	
DT ENDEAVOR I LLC		-230,375			-230,375
DJT OPERATIONS II LL		-7,382			-7,382
BOOK	134,210			134,210	

Form 8582, Part IV - Worksheet 5 - Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
THE EAST 61 ST. COMP	SCH E	46,056	0.00080	5,022
THE EAST 61 ST. COMP	SCH E	357	0.00001	39
PARK BRIAR ASSOCIATE	SCH E	25,781	0.00045	2,811
40 WALL DEVELOPMENT	FORM 4797	166,491	0.00288	18,153
40 WALL DEVELOPMENT	SCH E	4,238,886	0.07333	462,171
DJT HOLDINGS LLC - M	SCH E	23,638	0.00041	2,577

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
TRUMP 845 UN LIMITED	SCH E	55,384	0.00096	6,039
DJT HOLDINGS LLC - T	SCH E	65	0.00000	7
TIPPERARY REALTY COR	FORM 4797	100	0.00000	11
PLAZA CONSULTING COR	SCH E	1,361	0.00002	148
TRUMP PROJECT MANAGE	SCH E	9,665	0.00017	1,054
FIRST MEMBER INC	SCH E	295	0.00001	32
DJT HOLDINGS MM LLC	SCH E	487	0.00001	53
TRUMP VILLAGE CONST	SCH E	35,778	0.00062	3,901
TRUMP TOWER MANAGING	FORM 4797	1,013	0.00002	110
TRUMP 845 UN MGR COR	SCH E	1,954	0.00003	213
BEACH HAVEN APARTMEN	SCH E	20,186	0.00035	2,201
SHORE HAVEN APARTMEN	SCH E	33,350	0.00058	3,636
TRUMP MANAGEMENT INC	SCH E	6,402	0.00011	698
TRUMP DELMONICO LLC	SCH E	5,091	0.00009	555
STARRETT CITY ASSOCI	SCH E	116,694	0.00202	12,723
TRUMP PARK AVENUE LL	SCH E	5,082	0.00009	554
DJT HOLDINGS MM LLC	SCH E	1,370	0.00002	149
DJT HOLDINGS MM LLC	SCH E	21,259	0.00037	2,318
DJT HOLDINGS LLC - T	SCH E	3,367,095	0.05825	367,119
DJT HOLDINGS MM LLC	SCH E	4	0.00000	
DJT HOLDINGS LLC - T	SCH E	89	0.00000	10
TRUMP FLORIDA MANAGE	SCH E	4	0.00000	
TIHT MEMBER LLC	SCH E	2,079	0.00004	227
DJT HOLDINGS LLC -TR	SCH E	431	0.00001	47
DJT HOLDINGS LLC - T	SCH E	2,083,600	0.03604	227,177
TRUMP MARKS PHILADEL	SCH E	5,402	0.00009	589
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
TRUMP MARKS PHILADEL	SCH E	362	0.00001	39
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS LLC -TR	SCH E	16,067	0.00028	1,752
DJT HOLDINGS MMC LLC	SCH E	164	0.00000	18
DJT HOLDINGS MM LLC	SCH E	1	0.00000	
DJT HOLDINGS MM LLC	SCH E	19	0.00000	2
DJT HOLDINGS LLC - U	SCH E	1,820	0.00003	198
DJT HOLDINGS LLC - T	SCH E	2,800	0.00005	305
DJT HOLDINGS MM LLC	SCH E	29	0.00000	3
DJT HOLDINGS MM LLC	SCH E	7,870	0.00014	858
DJT HOLDINGS LLC - G	SCH E	90,109	0.00156	9,825
DJT HOLDINGS MM LLC	SCH E	7,096	0.00012	774
MELANIA MARKS ACCESS	SCH E	1,612	0.00003	176
DJT HOLDINGS LLC - T	SCH E	349	0.00001	38
MELANIA MARKS ACCESS	SCH E	50	0.00000	5
DJT HOLDINGS MM LLC	SCH E	433	0.00001	47
SC LP SHOPPING CENTE	SCH E	4,345	0.00008	474
DJT HOLDINGS LLC - T	SCH E	42,429	0.00073	4,626
DJT HOLDINGS LLC - T	SCH E	2,441	0.00004	266
DJT HOLDINGS MM LLC	SCH E	154	0.00000	17
DJT HOLDINGS MM LLC	SCH E	214	0.00000	23
TRUMP FERRY POINT ME	SCH E	47,900	0.00083	5,223
DJT HOLDINGS MM LLC	SCH E	14,044	0.00024	1,531
DJT HOLDINGS MM LLC	SCH E	25	0.00000	3
DJT HOLDINGS MM LLC	SCH E	919	0.00002	100
DJT HOLDINGS LLC - T	SCH E	4,694,657	0.08121	511,864
DJT HOLDINGS LLC - T	SCH E	1,376,418	0.02381	150,073
DJT HOLDINGS LLC - P	SCH E	1,330	0.00002	145
DJT HOLDINGS LLC -TR	SCH E	349	0.00001	38
DJT HOLDINGS LLC - T	SCH E	15,081	0.00026	1,644
DJT HOLDINGS LLC - T	SCH E	20,999	0.00036	2,290
DJT HOLDINGS MM LLC	SCH E	4	0.00000	
DJT HOLDINGS MM LLC	SCH E	14	0.00000	2
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS MANAGIN	SCH E	214,744	0.00371	23,414
DJT HOLDINGS LLC - T	SCH E	29,598	0.00051	3,227
DJT HOLDINGS LLC - T	SCH E	3,287	0.00006	358
DJT HOLDINGS LLC - T	SCH E	3,174,334	0.05491	346,102
DJT HOLDINGS LLC - T	SCH E	1,276,974	0.02209	139,230
DJT HOLDINGS LLC - T	SCH E	771,330	0.01334	84,099
DJT HOLDINGS LLC - T	SCH E	695,448	0.01203	75,826
DJT HOLDINGS LLC - T	SCH E	480,991	0.00832	52,443

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
DJT HOLDINGS LLC - T	SCH E	2,898	0.00005	316
DJT HOLDINGS LLC - T	SCH E	2,400	0.00004	262
DJT HOLDINGS LLC - T	SCH E	495	0.00001	54
DJT HOLDINGS MM LLC	SCH E	24	0.00000	3
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS MM LLC	SCH E	34	0.00000	4
DJT HOLDINGS MM LLC	SCH E	302	0.00001	33
DJT HOLDINGS MM LLC	SCH E	34	0.00000	4
TAG AIR INC	SCH E	982,373	0.01699	107,109
DJT HOLDINGS MM LLC	SCH E	5,705	0.00010	622
DJT HOLDINGS MM LLC	SCH E	5	0.00000	1
DJT HOLDINGS MM LLC	SCH E	32,362	0.00056	3,528
DJT HOLDINGS LLC -	SCH E	564,750	0.00977	61,575
DJT HOLDINGS LLC -	SCH E	3,370	0.00006	367
DJT HOLDINGS MM LLC	SCH E	4,290	0.00007	468
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS MM LLC	SCH E	4	0.00000	
DJT HOLDINGS LLC - T	SCH E	431	0.00001	47
DJT HOLDINGS - WHITE	SCH E	349	0.00001	38
DJT HOLDINGS JUPITER	SCH E	432,758	0.00749	47,184
DJT HOLDINGS - TRUMP	SCH E	15,598,269	0.26983	1,700,699
DJT HOLDINGS LLC - T	SCH E	1,374,320	0.02377	149,844
DJT HOLDINGS LLC - E	SCH E	661,730	0.01145	72,149
DJT HOLDINGS LLC - T	SCH E	2,310	0.00004	252
DJT HOLDINGS LLC - C	SCH E	3,290	0.00006	359
DJT HOLDINGS LLC - T	SCH E	349	0.00001	38
DJT HOLDINGS LLC - T	SCH E	283,793	0.00491	30,942
DJT HOLDINGS MM LLC	SCH E	24	0.00000	3
DJT HOLDINGS MM LLC	SCH E	4	0.00000	
DJT HOLDINGS MM LLC	SCH E	4	0.00000	
DJT HOLDINGS MM LLC	SCH E	6,752	0.00012	736
DJT HOLDINGS MM LLC	SCH E	1,662	0.00003	181
DJT HOLDINGS MM LLC	SCH E	14,022	0.00024	1,529
DJT HOLDINGS LLC - T	SCH E	1,935,913	0.03349	211,075
DJT HOLDINGS MANAGIN	SCH E	15,382	0.00027	1,677
TRUMP PARK AVENUE LL	SCH E	598,515	0.01035	65,257
TRUMP PARK AVENUE LL	SCH E	749,667	0.01297	81,737
DJT HOLDINGS MM LLC	SCH E	29	0.00000	3
DJT HOLDINGS MM LLC	SCH E	151	0.00000	16
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS MM LLC	SCH E	24	0.00000	3
DJT HOLDINGS MM LLC	SCH E	5	0.00000	1
TTTT VENTURE MEMBER	SCH E	4,751	0.00008	518
DJT HOLDINGS MM LLC	SCH E	46,784	0.00081	5,101
DJT HOLDINGS LLC - T	SCH E	2,334	0.00004	254
DJT HOLDINGS-D B PAC	SCH E	8,310	0.00014	906
DJT HOLDINGS LLC - T	SCH E	2,979	0.00005	325
DJT HOLDINGS LLC - T	SCH E	494	0.00001	54
DJT HOLDINGS LLC - T	SCH E	2,800	0.00005	305
DJT HOLDINGS LLC - P	SCH E	14,785	0.00026	1,612
DJT HOLDINGS LLC -TW	SCH E	1,706,203	0.02952	186,030
DJT HOLDINGS LLC - T	SCH E	4,585,286	0.07932	499,940
DJT HOLDINGS MM LLC	SCH E	17,234	0.00030	1,879
DJT HOLDINGS MM LLC	SCH E	29	0.00000	3
DJT HOLDINGS MM LLC	SCH E	33	0.00000	4
DJT HOLDINGS MM LLC	SCH E	33	0.00000	4
DJT HOLDINGS MM LLC	SCH E	40	0.00000	4
DJT HOLDINGS MM LLC	SCH E	29	0.00000	3
DJT HOLDINGS MM LLC	SCH E	29	0.00000	3
DJT HOLDINGS MM LLC	SCH E	29	0.00000	3
EID VENTURE II MEMBE	SCH E	368	0.00001	40
DJT HOLDINGS MM LLC	SCH E	18	0.00000	2
DJT HOLDINGS MM LLC	SCH E	3	0.00000	
EID VENTURE II LLC	SCH E	410	0.00001	45
DJT HOLDINGS LLC - D	SCH E	294	0.00001	32
DJT HOLDINGS MM LLC	SCH E	13,029	0.00023	1,421
TRUMP PALACE PARC LL	SCH E	183,310	0.00317	19,987
DJT HOLDINGS LLC - W	SCH E	5,102	0.00009	556
DJT HOLDINGS LLC - T	SCH E	536	0.00001	58

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
DJT HOLDINGS LLC - W	SCH E	29,034	0.00050	3,166
DJT HOLDINGS LLC - T	SCH E	65	0.00000	7
DJT HOLDINGS LLC - L	SCH E	1,019	0.00002	111
DJT HOLDINGS LLC - T	SCH E	353	0.00001	38
DJT HOLDINGS LLC - T	SCH E	1,566	0.00003	171
DJT HOLDINGS LLC - T	SCH E	297	0.00001	32
DJT HOLDINGS LLC - T	SCH E	138	0.00000	15
DJT HOLDINGS LLC - C	SCH E	1,476	0.00003	161
DJT HOLDINGS LLC - D	SCH E	410	0.00001	45
DJT HOLDINGS LLC - T	SCH E	353	0.00001	38
DJT HOLDINGS LLC - T	SCH E	259	0.00000	28
DJT HOLDINGS LLC - T	SCH E	33,591	0.00058	3,662
DJT HOLDINGS LLC - T	SCH E	2,287	0.00004	249
DJT HOLDINGS LLC - T	SCH E	486	0.00001	53
DJT HOLDINGS LLC - T	SCH E	81	0.00000	9
DJT HOLDINGS LLC - T	SCH E	606,785	0.01050	66,159
DJT HOLDINGS LLC - W	SCH E	6,104	0.00011	666
DJT HOLDINGS LLC	SCH E	1,918,714	0.03319	209,201
DJT HOLDINGS MM LLC	SCH E	996	0.00002	109
DJT HOLDINGS MM LLC	SCH E	262	0.00000	29
DJT HOLDINGS MM LLC/	SCH E	5,799	0.00010	632
DJT HOLDINGS MM LLC/	SCH E	62	0.00000	7
DJT HOLDINGS MM LLC/	SCH E	5	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	5	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	10	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	293	0.00001	32
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	
DJT HOLDINGS MM LLC/	SCH E	15	0.00000	2
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	
DJT HOLDINGS MM LLC/	SCH E	339	0.00001	37
DJT HOLDINGS MM LLC/	SCH E	299	0.00001	33
DJT HOLDINGS MM LLC/	SCH E	34	0.00000	4
DJT HOLDINGS MM LLC/	SCH E	33	0.00000	4
DJT HOLDINGS MM LLC/	SCH E	32,038	0.00055	3,493
DJT HOLDINGS MM LLC/	SCH E	12,899	0.00022	1,406
DJT HOLDINGS MM LLC/	SCH E	7,791	0.00013	849
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	4,371	0.00008	477
DJT HOLDINGS MM LLC/	SCH E	157,558	0.00273	17,179
DJT HOLDINGS MM LLC/	SCH E	149	0.00000	16
DJT HOLDINGS MM LLC/	SCH E	17,408	0.00030	1,898
DJT HOLDINGS MM LLC/	SCH E	46,316	0.00080	5,050
DJT HOLDINGS MM LLC/	SCH E	7,025	0.00012	766
DJT HOLDINGS MM LLC/	SCH E	5,762	0.00010	628
DJT HOLDINGS MM LLC/	SCH E	23	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	34,011	0.00059	3,708
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	
DJT HOLDINGS MM LLC/	SCH E	10	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	13	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	30	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	
DJT HOLDINGS MM LLC/	SCH E	28	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	24	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	28	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	18	0.00000	2
DJT HOLDINGS MM LLC/	SCH E	5	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	25	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	212	0.00000	23
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	162	0.00000	18
DJT HOLDINGS MM LLC/	SCH E	29	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	429	0.00001	47
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	
DJT HOLDINGS MM LLC/	SCH E	152	0.00000	17
DJT HOLDINGS MM LLC/	SCH E	52	0.00000	6
DJT HOLDINGS MM LLC/	SCH E	239	0.00000	26
DJT HOLDINGS MM LLC/	SCH E	13,903	0.00024	1,516
DJT HOLDINGS MM LLC/	SCH E	33	0.00000	4
DJT HOLDINGS MM LLC/	SCH E	24	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	23	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	5	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	21,046	0.00036	2,295
DJT HOLDINGS MM LLC/	SCH E	910	0.00002	99
DJT HOLDINGS MM LLC/	SCH E	47,421	0.00082	5,170
DJT HOLDINGS MM LLC/	SCH E	6,684	0.00012	729
DJT HOLDINGS MM LLC/	SCH E	4,858	0.00008	530
DJT HOLDINGS MM LLC/	SCH E	13,882	0.00024	1,514
DJT HOLDINGS MM LLC	SCH E	34	0.00000	4
DJT HOLDINGS LLC - T	SCH E	19,555	0.00034	2,132
DJT HOLDINGS MM LLC	SCH E	85	0.00000	9
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS MM LLC	SCH E	30	0.00000	3
DJT HOLDINGS MM LLC	SCH E	29	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	16	0.00000	2
DJT HOLDINGS LLC - T	SCH E	915	0.00002	100
DJT HOLDINGS LLC - T	SCH E	56	0.00000	6
DJT HOLDINGS LLC - T	SCH E	323	0.00001	35
DJT HOLDINGS LLC - T	SCH E	297	0.00001	32
DJT HOLDINGS LLC - F	SCH E	138	0.00000	15
DJT HOLDINGS LLC - 1	SCH E	55,339	0.00096	6,034
DJT HOLDINGS LLC - 1	SCH E	95,199	0.00165	10,380
555 CALIFORNIA SERVI	SCH E	112,900	0.00195	12,310
DJT HOLDINGS LLC - T	SCH E	34	0.00000	4
DJT HOLDINGS LLC - 1	SCH E	1,022,822	0.01769	111,519
DJT HOLDINGS MM LLC/	SCH E	2,867	0.00005	313
DJT AEROSPACE LLC	SCH C	65,657	0.00114	7,159
DT ENDEAVOR I LLC	SCH C	230,375	0.00399	25,117
DJT OPERATIONS II LL	SCH C	7,382	0.00013	805

Form 8582, Part IV - Worksheet 6 - Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
THE EAST 61 ST. COMP	SCH E	46,056	5,022	41,034
THE EAST 61 ST. COMP	SCH E	357	39	318
PARK BRIAR ASSOCIATE	SCH E	25,781	2,811	22,970
40 WALL DEVELOPMENT	FORM 4797	166,491	18,153	148,338
40 WALL DEVELOPMENT	SCH E	4,238,886	462,171	3,776,715
DJT HOLDINGS LLC - M	SCH E	23,638	2,577	21,061
TRUMP 845 UN LIMITED	SCH E	55,384	6,039	49,345
DJT HOLDINGS LLC - T	SCH E	65	7	58
TIPPERARY REALTY COR	FORM 4797	100	11	89
PLAZA CONSULTING COR	SCH E	1,361	148	1,213
TRUMP PROJECT MANAGE	SCH E	9,665	1,054	8,611
FIRST MEMBER INC	SCH E	295	32	263
DJT HOLDINGS MM LLC	SCH E	487	53	434
TRUMP VILLAGE CONST	SCH E	35,778	3,901	31,877
TRUMP TOWER MANAGING	FORM 4797	1,013	110	903
TRUMP 845 UN MGR COR	SCH E	1,954	213	1,741
BEACH HAVEN APARMEN	SCH E	20,186	2,201	17,985
SHORE HAVEN APARTMEN	SCH E	33,350	3,636	29,714
TRUMP MANAGEMENT INC	SCH E	6,402	698	5,704
TRUMP DELMONICO LLC	SCH E	5,091	555	4,536
STARRETT CITY ASSOCI	SCH E	116,694	12,723	103,971
TRUMP PARK AVENUE LL	SCH E	5,082	554	4,528
DJT HOLDINGS MM LLC	SCH E	1,370	149	1,221
DJT HOLDINGS MM LLC	SCH E	21,259	2,318	18,941
DJT HOLDINGS LLC - T	SCH E	3,367,095	367,119	2,999,976
DJT HOLDINGS MM LLC	SCH E	4		4
DJT HOLDINGS LLC - T	SCH E	89	10	79

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
TRUMP FLORIDA MANAGE	SCH E	4		4
TIHT MEMBER LLC	SCH E	2,079	227	1,852
DJT HOLDINGS LLC -TR	SCH E	431	47	384
DJT HOLDINGS LLC - T	SCH E	2,083,600	227,177	1,856,423
TRUMP MARKS PHILADEL	SCH E	5,402	589	4,813
DJT HOLDINGS MM LLC	SCH E	30	3	27
DJT HOLDINGS MM LLC	SCH E	30	3	27
TRUMP MARKS PHILADEL	SCH E	362	39	323
DJT HOLDINGS MM LLC	SCH E	30	3	27
DJT HOLDINGS LLC -TR	SCH E	16,067	1,752	14,315
DJT HOLDINGS MMC LLC	SCH E	164	18	146
DJT HOLDINGS MM LLC	SCH E	1		1
DJT HOLDINGS MM LLC	SCH E	19	2	17
DJT HOLDINGS LLC - U	SCH E	1,820	198	1,622
DJT HOLDINGS LLC - T	SCH E	2,800	305	2,495
DJT HOLDINGS MM LLC	SCH E	29	3	26
DJT HOLDINGS MM LLC	SCH E	7,870	858	7,012
DJT HOLDINGS LLC - G	SCH E	90,109	9,825	80,284
DJT HOLDINGS MM LLC	SCH E	7,096	774	6,322
MELANIA MARKS ACCESS	SCH E	1,612	176	1,436
DJT HOLDINGS LLC - T	SCH E	349	38	311
MELANIA MARKS ACCESS	SCH E	50	5	45
DJT HOLDINGS MM LLC	SCH E	433	47	386
SC LP SHOPPING CENTE	SCH E	4,345	474	3,871
DJT HOLDINGS LLC - T	SCH E	42,429	4,626	37,803
DJT HOLDINGS LLC - T	SCH E	2,441	266	2,175
DJT HOLDINGS MM LLC	SCH E	154	17	137
DJT HOLDINGS MM LLC	SCH E	214	23	191
TRUMP FERRY POINT ME	SCH E	47,900	5,223	42,677
DJT HOLDINGS MM LLC	SCH E	14,044	1,531	12,513
DJT HOLDINGS MM LLC	SCH E	25	3	22
DJT HOLDINGS MM LLC	SCH E	919	100	819
DJT HOLDINGS LLC - T	SCH E	4,694,657	511,864	4,182,793
DJT HOLDINGS LLC - T	SCH E	1,376,418	150,073	1,226,345
DJT HOLDINGS LLC - P	SCH E	1,330	145	1,185
DJT HOLDINGS LLC -TR	SCH E	349	38	311
DJT HOLDINGS LLC - T	SCH E	15,081	1,644	13,437
DJT HOLDINGS LLC - T	SCH E	20,999	2,290	18,709
DJT HOLDINGS MM LLC	SCH E	4		4
DJT HOLDINGS MM LLC	SCH E	14	2	12
DJT HOLDINGS MM LLC	SCH E	30	3	27
DJT HOLDINGS MANAGIN	SCH E	214,744	23,414	191,330
DJT HOLDINGS LLC - T	SCH E	29,598	3,227	26,371
DJT HOLDINGS LLC - T	SCH E	3,287	358	2,929
DJT HOLDINGS LLC - T	SCH E	3,174,334	346,102	2,828,232
DJT HOLDINGS LLC - T	SCH E	1,276,974	139,230	1,137,744
DJT HOLDINGS LLC - T	SCH E	771,330	84,099	687,231
DJT HOLDINGS LLC - T	SCH E	695,448	75,826	619,622
DJT HOLDINGS LLC - T	SCH E	480,991	52,443	428,548
DJT HOLDINGS LLC - T	SCH E	2,898	316	2,582
DJT HOLDINGS LLC - T	SCH E	2,400	262	2,138
DJT HOLDINGS LLC - T	SCH E	495	54	441
DJT HOLDINGS MM LLC	SCH E	24	3	21
DJT HOLDINGS MM LLC	SCH E	30	3	27
DJT HOLDINGS MM LLC	SCH E	34	4	30
DJT HOLDINGS MM LLC	SCH E	302	33	269
DJT HOLDINGS MM LLC	SCH E	34	4	30
TAG AIR INC	SCH E	982,373	107,109	875,264
DJT HOLDINGS MM LLC	SCH E	5,705	622	5,083
DJT HOLDINGS MM LLC	SCH E	5	1	4
DJT HOLDINGS MM LLC	SCH E	32,362	3,528	28,834
DJT HOLDINGS LLC -	SCH E	564,750	61,575	503,175
DJT HOLDINGS LLC -	SCH E	3,370	367	3,003
DJT HOLDINGS MM LLC	SCH E	4,290	468	3,822
DJT HOLDINGS MM LLC	SCH E	30	3	27
DJT HOLDINGS MM LLC	SCH E	4		4
DJT HOLDINGS LLC - T	SCH E	431	47	384
DJT HOLDINGS - WHITE	SCH E	349	38	311
DJT HOLDINGS JUPITER	SCH E	432,758	47,184	385,574
DJT HOLDINGS - TRUMP	SCH E	15,598,269	1,700,699	13,897,570

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
DJT HOLDINGS LLC - T	SCH E	1,374,320	149,844	1,224,476
DJT HOLDINGS LLC - E	SCH E	661,730	72,149	589,581
DJT HOLDINGS LLC - T	SCH E	2,310	252	2,058
DJT HOLDINGS LLC - C	SCH E	3,290	359	2,931
DJT HOLDINGS LLC - T	SCH E	349	38	311
DJT HOLDINGS LLC - T	SCH E	283,793	30,942	252,851
DJT HOLDINGS MM LLC	SCH E	24	3	21
DJT HOLDINGS MM LLC	SCH E	4		4
DJT HOLDINGS MM LLC	SCH E	4		4
DJT HOLDINGS MM LLC	SCH E	6,752	736	6,016
DJT HOLDINGS MM LLC	SCH E	1,662	181	1,481
DJT HOLDINGS MM LLC	SCH E	14,022	1,529	12,493
DJT HOLDINGS LLC - T	SCH E	1,935,913	211,075	1,724,838
DJT HOLDINGS MANAGIN	SCH E	15,382	1,677	13,705
TRUMP PARK AVENUE LL	SCH E	598,515	65,257	533,258
TRUMP PARK AVENUE LL	SCH E	749,667	81,737	667,930
DJT HOLDINGS MM LLC	SCH E	29	3	26
DJT HOLDINGS MM LLC	SCH E	151	16	135
DJT HOLDINGS MM LLC	SCH E	30	3	27
DJT HOLDINGS MM LLC	SCH E	24	3	21
DJT HOLDINGS MM LLC	SCH E	5	1	4
TTTT VENTURE MEMBER	SCH E	4,751	518	4,233
DJT HOLDINGS MM LLC	SCH E	46,784	5,101	41,683
DJT HOLDINGS LLC - T	SCH E	2,334	254	2,080
DJT HOLDINGS-D B PAC	SCH E	8,310	906	7,404
DJT HOLDINGS LLC - T	SCH E	2,979	325	2,654
DJT HOLDINGS LLC - T	SCH E	494	54	440
DJT HOLDINGS LLC - T	SCH E	2,800	305	2,495
DJT HOLDINGS LLC - P	SCH E	14,785	1,612	13,173
DJT HOLDINGS LLC - TW	SCH E	1,706,203	186,030	1,520,173
DJT HOLDINGS LLC - T	SCH E	4,585,286	499,940	4,085,346
DJT HOLDINGS MM LLC	SCH E	17,234	1,879	15,355
DJT HOLDINGS MM LLC	SCH E	29	3	26
DJT HOLDINGS MM LLC	SCH E	33	4	29
DJT HOLDINGS MM LLC	SCH E	33	4	29
DJT HOLDINGS MM LLC	SCH E	40	4	36
DJT HOLDINGS MM LLC	SCH E	29	3	26
DJT HOLDINGS MM LLC	SCH E	29	3	26
DJT HOLDINGS MM LLC	SCH E	29	3	26
EID VENTURE II MEMBE	SCH E	368	40	328
DJT HOLDINGS MM LLC	SCH E	18	2	16
DJT HOLDINGS MM LLC	SCH E	3		3
EID VENTURE II LLC	SCH E	410	45	365
DJT HOLDINGS LLC - D	SCH E	294	32	262
DJT HOLDINGS MM LLC	SCH E	13,029	1,421	11,608
TRUMP PALACE PARC LL	SCH E	183,310	19,987	163,323
DJT HOLDINGS LLC - W	SCH E	5,102	556	4,546
DJT HOLDINGS LLC - T	SCH E	536	58	478
DJT HOLDINGS LLC - W	SCH E	29,034	3,166	25,868
DJT HOLDINGS LLC - T	SCH E	65	7	58
DJT HOLDINGS LLC - L	SCH E	1,019	111	908
DJT HOLDINGS LLC - T	SCH E	353	38	315
DJT HOLDINGS LLC - T	SCH E	1,566	171	1,395
DJT HOLDINGS LLC - T	SCH E	297	32	265
DJT HOLDINGS LLC - T	SCH E	138	15	123
DJT HOLDINGS LLC - C	SCH E	1,476	161	1,315
DJT HOLDINGS LLC - D	SCH E	410	45	365
DJT HOLDINGS LLC - T	SCH E	353	38	315
DJT HOLDINGS LLC - T	SCH E	259	28	231
DJT HOLDINGS LLC - T	SCH E	33,591	3,662	29,929
DJT HOLDINGS LLC - T	SCH E	2,287	249	2,038
DJT HOLDINGS LLC - T	SCH E	486	53	433
DJT HOLDINGS LLC - T	SCH E	81	9	72
DJT HOLDINGS LLC - T	SCH E	606,785	66,159	540,626
DJT HOLDINGS LLC - W	SCH E	6,104	666	5,438
TRUMP EQUITABLE FIFT	SCH E	100,169		100,169
DJT HOLDINGS LLC	SCH E	1,918,714	209,201	1,709,513
DJT HOLDINGS MM LLC	SCH E	996	109	887
DJT HOLDINGS MM LLC	SCH E	262	29	233

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
DJT HOLDINGS MM LLC/	SCH E	5,799	632	5,167
DJT HOLDINGS MM LLC/	SCH E	62	7	55
DJT HOLDINGS MM LLC/	SCH E	5	1	4
DJT HOLDINGS MM LLC/	SCH E	5	1	4
DJT HOLDINGS MM LLC/	SCH E	10	1	9
DJT HOLDINGS MM LLC/	SCH E	293	32	261
DJT HOLDINGS MM LLC/	SCH E	3		3
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	15	2	13
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	3		3
DJT HOLDINGS MM LLC/	SCH E	339	37	302
DJT HOLDINGS MM LLC/	SCH E	299	33	266
DJT HOLDINGS MM LLC/	SCH E	34	4	30
DJT HOLDINGS MM LLC/	SCH E	33	4	29
DJT HOLDINGS MM LLC/	SCH E	32,038	3,493	28,545
DJT HOLDINGS MM LLC/	SCH E	12,899	1,406	11,493
DJT HOLDINGS MM LLC/	SCH E	7,791	849	6,942
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	4,371	477	3,894
DJT HOLDINGS MM LLC/	SCH E	157,558	17,179	140,379
DJT HOLDINGS MM LLC/	SCH E	149	16	133
DJT HOLDINGS MM LLC/	SCH E	17,408	1,898	15,510
DJT HOLDINGS MM LLC/	SCH E	46,316	5,050	41,266
DJT HOLDINGS MM LLC/	SCH E	7,025	766	6,259
DJT HOLDINGS MM LLC/	SCH E	5,762	628	5,134
DJT HOLDINGS MM LLC/	SCH E	23	3	20
DJT HOLDINGS MM LLC/	SCH E	34,011	3,708	30,303
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	10	1	9
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	13	1	12
DJT HOLDINGS MM LLC/	SCH E	30	3	27
DJT HOLDINGS MM LLC/	SCH E	3		3
DJT HOLDINGS MM LLC/	SCH E	28	3	25
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	24	3	21
DJT HOLDINGS MM LLC/	SCH E	28	3	25
DJT HOLDINGS MM LLC/	SCH E	18	2	16
DJT HOLDINGS MM LLC/	SCH E	5	1	4
DJT HOLDINGS MM LLC/	SCH E	25	3	22
DJT HOLDINGS MM LLC/	SCH E	212	23	189
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	162	18	144
DJT HOLDINGS MM LLC/	SCH E	29	3	26
DJT HOLDINGS MM LLC/	SCH E	429	47	382
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	152	17	135
DJT HOLDINGS MM LLC/	SCH E	52	6	46
DJT HOLDINGS MM LLC/	SCH E	239	26	213
DJT HOLDINGS MM LLC/	SCH E	13,903	1,516	12,387
DJT HOLDINGS MM LLC/	SCH E	33	4	29
DJT HOLDINGS MM LLC/	SCH E	24	3	21
DJT HOLDINGS MM LLC/	SCH E	23	3	20
DJT HOLDINGS MM LLC/	SCH E	5	1	4
DJT HOLDINGS MM LLC/	SCH E	21,046	2,295	18,751
DJT HOLDINGS MM LLC/	SCH E	910	99	811
DJT HOLDINGS MM LLC/	SCH E	47,421	5,170	42,251
DJT HOLDINGS MM LLC/	SCH E	6,684	729	5,955
DJT HOLDINGS MM LLC/	SCH E	4,858	530	4,328
DJT HOLDINGS MM LLC/	SCH E	13,882	1,514	12,368
DJT HOLDINGS MM LLC	SCH E	34	4	30
DJT HOLDINGS LLC - T	SCH E	19,555	2,132	17,423
DJT HOLDINGS MM LLC	SCH E	85	9	76
DJT HOLDINGS MM LLC	SCH E	30	3	27
DJT HOLDINGS MM LLC	SCH E	30	3	27

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
DJT HOLDINGS MM LLC	SCH E	29	3	26
DJT HOLDINGS MM LLC/	SCH E	16	2	14
DJT HOLDINGS LLC - T	SCH E	915	100	815
DJT HOLDINGS LLC - T	SCH E	56	6	50
DJT HOLDINGS LLC - T	SCH E	323	35	288
DJT HOLDINGS LLC - T	SCH E	297	32	265
DJT HOLDINGS LLC - F	SCH E	138	15	123
DJT HOLDINGS LLC - 1	SCH E	55,339	6,034	49,305
DJT HOLDINGS LLC - 1	SCH E	95,199	10,380	84,819
555 CALIFORNIA SERVI	SCH E	112,900	12,310	100,590
DJT HOLDINGS LLC - T	SCH E	34	4	30
DJT HOLDINGS LLC - 1	SCH E	1,022,822	111,519	911,303
DJT HOLDINGS MM LLC/	SCH E	2,867	313	2,554
DJT HOLDINGS LLC MM	SCH E	167		167
DJT AEROSPACE LLC	SCH C	65,657	7,159	58,498
DT ENDEAVOR I LLC	SCH C	230,375	25,117	205,258
DJT OPERATIONS II LL	SCH C	7,382	805	6,577

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2019

Department of the Treasury Internal Revenue Service (99)

Attach to your tax return.

Attachment Sequence No. 179

Go to www.irs.gov/Form4562 for instructions and the latest information.

Table with 3 columns: Name(s) shown on return, Business or activity to which this form relates, Identifying number. Values: DONALD J & MELANIA<TRUMP, ALL BUSINESS ACTIVITIES, (blank).

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 columns: Line number, Description, Column (b) Cost, Column (c) Elected cost, Total value. Rows 1-13.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

Table with 3 columns: Line number, Description, Total value. Rows 14-16.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

Table with 3 columns: Line number, Description, Total value. Rows 17-18.

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 19a-i.

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

Table with 6 columns: Line number, Description, Recovery period, Convention, Method, Depreciation deduction. Rows 20a-d.

Part IV Summary (See instructions.)

Table with 3 columns: Line number, Description, Total value. Rows 21-22.

23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

23		
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For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 12906N

Form **4562** (2019)

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation/deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions.							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions.		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2019 tax year (see instructions):					
43 Amortization of costs that began before your 2019 tax year				43	
44 Total. Add amounts in column (f). See the instructions for where to report				44	

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Line 12 - Section 179 Expense Deduction Note: SUMMARY

Form 4797

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

2019

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment Sequence No. 27

Name(s) shown on return DONALD J & MELANIA TRUMP

Identifying number

1 Enter the gross proceeds from sales or exchanges reported to you for 2019 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions

1

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft— Most Property Held More Than 1 Year (see instructions)

Table with 7 columns: (a) Description of property, (b) Date acquired, (c) Date sold, (d) Gross sales price, (e) Depreciation allowed, (f) Cost or other basis, plus improvements and expense of sale, (g) Gain or (loss). Row 1: See Additional Data Table.

- 3 Gain, if any, from Form 4684, line 39
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824
6 Gain, if any, from line 32, from other than casualty or theft
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: 5,337,738

Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

- 8 Nonrecaptured net section 1231 losses from prior years. See instructions
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions

Part II Ordinary Gains and Losses (see instructions)

Table for Part II Ordinary Gains and Losses, line 10: Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

- 11 Loss, if any, from line 7
12 Gain, if any, from line 7 or amount from line 8, if applicable
13 Gain, if any, from line 31
14 Net gain or (loss) from Form 4684, lines 31 and 38a
15 Ordinary gain from installment sales from Form 6252, line 25 or 36
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824
17 Combine lines 10 through 16

18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.

a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions.

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 130861

Form 4797 (2019)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255
(see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)		
A					
B					
C					
D					
		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1 before completing.)	20			
21	Cost or other basis plus expense of sale	21			
22	Depreciation (or depletion) allowed or allowable	22			
23	Adjusted basis. Subtract line 22 from line 21	23			
24	Total gain. Subtract line 23 from line 20	24			
25 If section 1245 property:					
a	Depreciation allowed or allowable from line 22	25a			
b	Enter the smaller of line 24 or 25a	25b			
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.					
a	Additional depreciation after 1975. See instructions	26a			
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b			
c	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c			
d	Additional depreciation after 1969 and before 1976	26d			
e	Enter the smaller of line 26c or 26d	26e			
f	Section 291 amount (corporations only)	26f			
g	Add lines 26b, 26e, and 26f	26g			
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.					
a	Soil, water, and land clearing expenses	27a			
b	Line 27a multiplied by applicable percentage. See instructions	27b			
c	Enter the smaller of line 24 or 27b	27c			
28 If section 1254 property:					
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a			
b	Enter the smaller of line 24 or 28a	28b			
29 If section 1255 property:					
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a			
b	Enter the smaller of line 24 or 29a. See instructions	29b			

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(see instructions)

		(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33	
34	Recomputed depreciation See instructions	34	
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

Form 4797, Part I, Line 2 - Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year:

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss). Subtract (f) from the sum of (d) and (e)
MAR-A-LAGO CLUB, LLC						-4,044
40 WALL DEVELOPMENT						-148,338
TRUMP CPS LLC						5,550,790
DJT HOLDINGS LLC - O						24,347
DJT HOLDINGS LLC - O						10,446
TIPPERARY REALTY COR						-89
DJT HOLDINGS MM LLC						-4
TRUMP CPS CORP						5,556
TRUMP TOWER MANAGING						-903
TRUMP EQUITABLE FIFT						-100,169
DJT HOLDINGS MM LLC						-39
DJT HOLDINGS MM LLC/						246
DJT HOLDINGS MM LLC/						106
DJT HOLDINGS LLC MM						-167

Form 5471

Information Return of U.S. Persons With Respect To Certain Foreign Corporations

OMB No. 1545-0123

(Rev. December 2019) Department of the Treasury Internal Revenue Service

Go to www.irs.gov/form5471 for instructions and the latest information.

Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning , and ending

Attachment Sequence No. 121

Name of person filing this return DONALD J TRUMP

A Identifying number

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)

B Category of filer (See instructions. Check applicable box(es)): 1 [] 2 [] 3 [] 4 [] 5 [x]

City or town, state, and ZIP code PALM BEACH, FL 33480

C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period

Filer's tax year beginning 01-01-2019 , and ending 12-31-2019

D Check box if this is a final Form 5471 for the foreign corporation []

E Check if any excepted specified foreign financial assets are reported on this form (see instructions). []

F Person(s) on whose behalf this information return is filed:

Table with 4 columns: (1) Name, (2) Address, (3) Identifying number, (4) Check applicable box(es) (Shareholder, Officer, Director)

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a Name and address of foreign corporation THC BARRA HOTELARIA NEW YORK, NY 10022

b(1) Employer identification number, if any 32-0447181 b(2) Reference ID number (see instructions) c Country under whose laws incorporated BR

d Date of incorporation 2014-04-15 e Principal place of business f Principal business activity code number g Principal business activity h Functional currency

2 Provide the following information for the foreign corporation's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States

b If a U.S. income tax return was filed, enter: (i) Taxable income or (loss) (ii) U.S. income tax paid (after all credits)

c Name and address of foreign corporation's statutory or resident agent in country of incorporation

Schedule A Stock of the Foreign Corporation

Table with 3 columns: (a) Description of each class of stock, (b) Number of shares issued and outstanding (i) Beginning of annual accounting period, (ii) End of annual accounting period

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules). However, if the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for DASTM corporations.

		Functional Currency	U.S. Dollars
Income	1a Gross receipts or sales	1a	
	b Returns and allowances	1b	
	c Subtract line 1b from line 1a	1c	
	2 Cost of goods sold	2	
	3 Gross profit (subtract line 2 from line 1c)	3	
	4 Dividends	4	
	5 Interest	5	
	6a Gross rents	6a	
	b Gross royalties and license fees	6b	
	7 Net gain or (loss) on sale of capital assets	7	
Deductions	8a Foreign currency transaction gain or loss - unrealized	8a	
	b Foreign currency transaction gain or loss - realized	8b	
	9 Other income (attach statement)	9	
	10 Total income (add lines 3 through 9)	10	
	11 Compensation not deducted elsewhere	11	
	12a Rents	12a	
	b Royalties and license fees	12b	
	13 Interest	13	
	14 Depreciation not deducted elsewhere	14	
	15 Depletion	15	
Net Income	16 Taxes (exclude income tax expense (benefit))	16	
	17 Other deductions (attach statement - exclude income tax expense (benefit)).	17	
	18 Total deductions (add lines 11 through 17)	18	
	19 Net income or (loss) before unusual or infrequently occurring items, and income tax expense (benefit) (subtract line 18 from line 10)	19	
	20 Unusual or infrequently occurring items	20	
	21a Income tax expense (benefit) - current	21a	
Other Comprehensive Income	b Income tax expense (benefit) - deferred	21b	
	22 Current year net income or (loss) per books (combine lines 19 through 21b)	22	
	23a Foreign currency translation adjustments	23a	
	b Other	23b	
c Income tax expense (benefit) related to other comprehensive income	23c		
24 Other comprehensive income (loss), net of tax (line 23a plus line 23b less line 23c)	24		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash	1		
2a Trade notes and accounts receivable	2a		
b Less allowance for bad debts	2b	()	()
3 Derivatives	3		
4 Inventories	4		
5 Other current assets (attach statement)	5		
6 Loans to shareholders and other related persons	6		
7 Investment in subsidiaries (attach statement)	7		
8 Other investments (attach statement)	8		
9a Buildings and other depreciable assets	9a		
b Less accumulated depreciation	9b	()	()
10a Depletable assets	10a		
b Less accumulated depletion	10b	()	()
11 Land (net of any amortization)	11		
12 Intangible assets:			
a Goodwill	12a		
b Organization costs	12b		
c Patents, trademarks, and other intangible assets	12c		
d Less accumulated amortization for lines 12a, b, and c	12d	()	()
13 Other assets (attach statement)	13		
14 Total assets	14		
Liabilities and Shareholders' Equity			
15 Accounts payable	15		
16 Other current liabilities (attach statement)	16		
17 Derivatives	17		
18 Loans from shareholders and other related persons	18		
19 Other liabilities (attach statement)	19		
20 Capital stock:			
a Preferred stock	20a		
b Common stock	20b		
21 Paid-in or capital surplus (attach reconciliation)	21		
22 Retained earnings	22		
23 Less cost of treasury stock	23	()	()
24 Total liabilities and shareholders' equity	24		

Schedule G Other Information

Yes No

- 1 During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership?
2 During the tax year, did the foreign corporation own an interest in any trust?
3 During the tax year, did the foreign corporation own any foreign entities that were disregarded as separate from their owner under Regulations sections 301.7701-2 and 301.7701-3 or did the foreign corporation own any foreign branches (see instructions)?
4a During the tax year, did the filer pay or accrue any base erosion payment under section 59A(d) to the foreign corporation or did the filer have a base erosion tax benefit under section 59A(c)(2) with respect to a base erosion payment made or accrued to the foreign corporation (see instructions)?
5a During the tax year, did the foreign corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A?
6a Is the filer of this Form 5471 claiming a foreign-derived intangible income deduction (under section 250) with respect to any amounts listed on Schedule M?
7 During the tax year, was the foreign corporation a participant in any cost sharing arrangement?
8 During the course of the tax year, did the foreign corporation become a participant in any cost sharing arrangement?
9 If the answer to question 7 is "Yes," was the foreign corporation a participant in a cost sharing arrangement that was in effect before January 5, 2009?
10 If the answer to question 7 is "Yes," did a U.S. taxpayer make any platform contributions as defined under Regulation section 1.482-7(c) to that cost sharing arrangement during the taxable year?
11 If the answer to question 10 is "Yes," enter the present value of the platform contributions in U.S. dollars
12 If the answer to question 10 is yes, check the box for the method under Regulation section 1.482-7(g) used to determine the price of the platform contribution transaction(s):
13 From April 25, 2014, to December 31, 2017, did the foreign corporation purchase stock or securities of a shareholder of the foreign corporation for use in a triangular reorganization (within the meaning of Regulations section 1.358-6(b)(2))?
14a Did the foreign corporation receive any intangible property in a prior year or the current tax year for which the U.S. transferor is required to report a section 367(d) annual income inclusion for the taxable year?
15 During the tax year, was the foreign corporation an expatriated foreign subsidiary under Regulations section 1.7874-12(a)(9)?
16 During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations section 1.6011-4?
17 During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under section 901(m)?
18 During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?
19 Did you answer "Yes" to any of the questions in the instructions for line 19?
20 Does the foreign corporation have interest expense disallowed under section 163(j) (see instructions)?
21 Does the foreign corporation have previously disallowed interest expense under section 163(j) carried forward to the current tax year (see instructions)?

Schedule I Summary of Shareholder's Income From Foreign Corporation (see instructions)

If item F on page 1 is completed, a separate Schedule I must be filed for each Category 4 or 5 filer for whom reporting is furnished on this Form 5471. This schedule I is being completed for:

Name of U.S. shareholder	Identifying number	
1a Section 964(e)(4) Subpart F dividend income from the sale of stock of a lower-tier foreign corporation (see instructions)		1a
b Section 245A(e)(2) Subpart F income from hybrid dividends of tiered corporations (see instructions)		1b
c Other Subpart F income (enter the result from Worksheet A in the instructions)		1c
2 Earnings invested in U.S. property (enter the result from Worksheet B in the instructions)		2
3 Section 245A eligible dividends (see instructions)		3
4 Factoring income See instructions for reporting amounts on line 1, 2 and 4 on your income tax return		4
5 Dividends received (translated at spot rate on payment date under section 989(b)(1))		5
6 Exchange gain or (loss) on a distribution of previously taxed earnings and profits		6

Yes No

- Was any income of the foreign corporation blocked?
- Did any such income become unblocked during the tax year (see section 964(b))?

If the answer to either question is "Yes," attach an explanation.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Dormant Indicator: FILED PURSUANT TO REV. PROC. 92-70 FOR DORMANT
FOREIGN CORPORATION

Form 6198

At-Risk Limitations

OMB NO. 1545-0712

(Rev. November 2009) Department of the Treasury Internal Revenue Service

Attach to your tax return. See separate instructions.

Attachment Sequence No. 31

Name(s) shown on return

Identifying number

DONALD J & MELANIA<TRUMP

Description of activity (see page 2 of the instructions) T INTERNATIONAL REALTY LLC 90-0883344

Part I Current Year Profit (Loss) From the Activity, Including Prior Year Nondeductible Amounts.

See page 2 of the instructions.

Table with 5 rows for Part I. Line 1: Ordinary income (loss) from the activity... 420,891. Line 2: Gain (loss) from the sale or other disposition of assets... Line 3: Other income and gains from the activity... Line 4: Other deductions and losses from the activity... (48). Line 5: Current year profit (loss) from the activity... 420,843.

Part II Simplified Computation of Amount At Risk. See page 3 of the instructions before completing this part.

Table with 10 rows for Part II. Line 6: Adjusted basis... 0. Line 7: Increases for the tax year... Line 8: Add lines 6 and 7... Line 9: Decreases for the tax year... Line 10a: Subtract line 9 from line 8... Line 10b: If line 10a is more than zero, enter that amount here...

Part III Detailed Computation of Amount At Risk. If you completed Part III of Form 6198 for the prior year, see page 4 of the instructions.

Table with 19 rows for Part III. Line 11: Investment in the activity... Line 12: Increases at effective date... Line 13: Add lines 11 and 12... Line 14: Decreases at effective date... Line 15: Amount at risk (check box that applies)... Line 16: Increases since (check box that applies)... Line 17: Add lines 15 and 16... Line 18: Decreases since (check box that applies)... Line 19a: Subtract line 18 from line 17... Line 19b: If line 19a is more than zero, enter that amount here...

Part IV Deductible Loss

Table with 2 rows for Part IV. Line 20: Amount at risk. Enter the larger of line 10b or line 19b... 0. Line 21: Deductible loss. Enter the smaller of the line 5 loss... ()

Note: If the loss is from a passive activity, see the Instructions for Form 8582, Passive Activity Loss Limitations, or the Instructions for Form 8810, Corporate Passive Activity Loss and Credit Limitations, to find out if the loss is allowed under the passive activity rules. If only part of the loss is subject to the passive activity loss rules, report only that part on Form 8582 or Form 8810, whichever applies.

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Form **8582-CR**

(Rev. December 2019)

Passive Activity Credit Limitations

OMB No. 1545-1034

Department of the Treasury
Internal Revenue Service

See separate instructions.
Attach to Form 1040, 1040-SR, or 1041.
Go to www.irs.gov/Form8582CR for the latest information.

Attachment
Sequence No. **89**

Name(s) shown on return
DONALD J & MELANIA<TRUMP

Identifying number

Part I Passive Activity Credits

Caution: If you have credits from a publicly traded partnership, see **Publicly Traded Partnerships (PTPs)** in the instructions.

Credits From Rental Real Estate Activities With Active Participation (Other Than Rehabilitation Credits and Low-Income Housing Credits) (See Lines 1a through 1c in the instructions.)

1a	Credits from Worksheet 1, column (a)	1a	
b	Prior year unallowed credits from Worksheet 1, column (b)	1b	
c	Add lines 1a and 1b	1c	

Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990) (See Lines 2a through 2c in the instructions.)

2a	Credits from Worksheet 2, column (a)	2a	
b	Prior year unallowed credits from Worksheet 2, column (b)	2b	
c	Add lines 2a and 2b	2c	

Low-Income Housing Credits for Property Placed in Service After 1989 (See Lines 3a through 3c in the instructions.)

3a	Credits from Worksheet 3, column (a)	3a	
b	Prior year unallowed credits from Worksheet 3, column (b)	3b	
c	Add lines 3a and 3b	3c	

All Other Passive Activity Credits (See Lines 4a through 4c in the instructions.)

4a	Credits from Worksheet 4, column (a)	4a	227,309
b	Prior year unallowed credits from Worksheet 4, column (b)	4b	
c	Add lines 4a and 4b	4c	227,309
5	Add lines 1c, 2c, 3c, and 4c	5	227,309
6	Enter the tax attributable to net passive income (see instructions)	6	0
7	Subtract line 6 from line 5. If line 6 is more than or equal to line 5, enter -0- and see instructions	7	227,309

Note: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II, III, or IV. Instead, go to line 37.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Complete this part only if you have an amount on line 1c. Otherwise, go to Part III.

8	Enter the smaller of line 1c or line 7	8	
9	Enter \$150,000. If married filing separately, see instructions	9	
10	Enter modified adjusted gross income, but not less than zero (see instructions). If line 10 is equal to or more than line 9, skip lines 11 through 15 and enter -0- on line 16	10	
11	Subtract line 10 from line 9	11	
12	Multiply line 11 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see instructions	12	
13a	Enter the amount, if any, from line 10 of Form 8582	13a	
b	Enter the amount, if any, from line 14 of Form 8582	13b	
c	Add lines 13a and 13b	13c	
14	Subtract line 13c from line 12	14	
15	Enter the tax attributable to the amount on line 14 (see instructions)	15	
16	Enter the smaller of line 8 or line 15	16	

Part III Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990)
Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.

17	Enter the amount from line 7		17	
18	Enter the amount from line 16		18	
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V		19	
20	Enter the smaller of line 2c or line 19		20	
21	Enter \$250,000. If married filing separately, see instructions to find out if you can skip lines 21 through 26	21		
22	Enter modified adjusted gross income, but not less than zero. (See instructions for line 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	22		
23	Subtract line 22 from line 21	23		
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see instructions	24		
25a	Enter the amount, if any, from line 10 of Form 8582	25a		
b	Enter the amount, if any, from line 14 of Form 8582	25b		
c	Add lines 25a and 25b	25c		
26	Subtract line 25c from line 24	26		
27	Enter the tax attributable to the amount on line 26 (see instructions)	27		
28	Enter the amount, if any, from line 18.	28		
29	Subtract line 28 from line 27		29	
30	Enter the smaller of line 20 or line 29		30	

Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989
Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V.

31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7	31	
32	Enter the amount from line 30	32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33	
34	Enter the smaller of line 3c or line 33	34	
35	Tax attributable to the remaining special allowance (see instructions)	35	
36	Enter the smaller of line 34 or line 35	36	

Part V Passive Activity Credit Allowed

37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See instructions to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) in the instructions	37	0
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Part VI Election To Increase Basis of Credit Property

38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the property, check this box. See instructions <input type="checkbox"/>
39	Name of passive activity disposed of ▶
40	Description of the credit property for which the election is being made ▶
41	Amount of unallowed credit that reduced your basis in the property ▶ \$



Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2019

Department of the Treasury Internal Revenue Service (99)

Attach to your tax return.

Attachment Sequence No. 179

Go to www.irs.gov/Form4562 for instructions and the latest information.

Table with 3 columns: Name(s) shown on return, Business or activity to which this form relates, Identifying number. Includes DONALD J & MELANIA < TRUMP and TRUMP INTERNATIONAL GOLF CLUB SCOTLAND.

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 13 rows for Part I. Columns include description of property, cost, and elected cost. Includes lines 1 through 13.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

Table with 3 rows for Part II. Columns include description of property and amount. Includes lines 14, 15, and 16.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

Table with 2 rows for Section A. Includes lines 17 and 18 regarding MACRS deductions and asset grouping.

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows 19a through i.

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

Table with 4 rows for Section C. Includes rows 20a through d regarding class life and recovery periods.

Part IV Summary (See instructions.)

Table with 2 rows for Part IV. Includes lines 21 and 22 regarding listed property and total amounts.

23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

23		
----	--	--

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 12906N

Form **4562** (2019)

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/ deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions. 25

26 Property used more than 50% in a qualified business use: Table with 9 columns for property details and percentages.

27 Property used 50% or less in a qualified business use: Table with 9 columns for property details and percentages.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with 6 main columns for vehicles (a-f) and 6 rows of questions (30-36) regarding miles driven and personal use.

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

Table for Section C with 4 rows of questions (37-41) and Yes/No columns regarding employer policies and requirements.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table for Part VI with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2019 tax year (see instructions):

43 Amortization of costs that began before your 2019 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

TY 2019 Itemized Other Categories Statement

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Regulation: IRC Section 6038 & Treasury Regulation 1.6038-3(g)

Description	Amount
OTHER INCOME	43,772,989

TY 2019 Itemized Other Categories Statement

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Regulation: IRC Section 6038 & Treasury Regulation 1.6038-3(g)

Description	Amount
OTHER INCOME	44,199,208

TY 2019 Itemized other current assets schedule

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
TRUMP INTERNATIONAL GOLF CLUB SCOTLAND LIMITED	98-0485744	MISCELLANEOUS RECEIVABLES	77,374	50,212
		PREPAID EXPENSE	120,239	101,905

TY 2019 Itemized other current liabilities schedule

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Corporation Name	Corporation EIN	Description	Beginning Amount	Ending Amount
TRUMP INTERNATIONAL GOLF CLUB SCOTLAND LIMITED	98-0485744	OTHER PAYABLES	415,106	539,569

TY 2019 Itemized other assets schedule

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Corporation Name	Corporation EIN	Other Assets Description	Beginning Amount	Ending Amount
TRUMP INTERNATIONAL GOLF CLUB SCOTLAND LIMITED	98-0485744	UNREALIZED CONVERSION GAIN/LOSS	12,008,247	11,255,084
		INTELLECTUAL PROPERTY	1,936	1,995

Additional Data

Software ID:
Software Version:
SSN:
Spouse SSN:
Name: DONALD J & MELANIA<TRUMP

Form **8938**

Statement of Specified Foreign Financial Assets

OMB No. 1545-2195

▶ Go to www.irs.gov/Form8938 for instructions and the latest information.

▶ Attach to your tax return.

2019

Department of the Treasury
Internal Revenue Service

For calendar year 2019 or tax year beginning _____ and ending _____

Attachment
Sequence No. 175

If you have attached continuation statements, check here Number of continuation statements _____

1 Name(s) shown on return
DONALD J & MELANIA<TRUMP

2 Taxpayer Identification Number (TIN) _____

3 Type of filer

a Specified individual b Partnership c Corporation d Trust

4 If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.)

a Name _____ b TIN _____

Part I Foreign Deposit and Custodial Accounts Summary

1. Number of Deposit Accounts (reported in Part V) ▶

2. Maximum Value of All Deposit Accounts \$

3. Number of Custodial Accounts (reported in Part V) ▶

4. Maximum Value of All Custodial Accounts \$

5. Were any foreign deposit or custodial accounts closed during the tax year? Yes No

Part II Other Foreign Assets Summary

1. Number of Foreign Assets (reported in Part VI) ▶

2. Maximum Value of All Assets (reported in Part VI) \$

3. Were any foreign assets acquired or sold during the tax year? Yes No

Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions)

(a) Asset Category	(b) Tax item	(c) Amount reported on form or schedule	Where reported	
			(d) Form and line	(e) Schedule and line
1 Foreign Deposit and Custodial Accounts	1a Interest	\$		
	1b Dividends	\$		
	1c Royalties	\$		
	1d Other income	\$		
	1e Gains (losses)	\$		
	1f Deductions	\$		
	1g Credits	\$		
2 Other Foreign Assets	2a Interest	\$		
	2b Dividends	\$		
	2c Royalties	\$		
	2d Other income	\$		
	2e Gains (losses)	\$		
	2f Deductions	\$		
	2g Credits	\$		

Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

1. Number of Forms 3520 _____ 2. Number of Forms 3520-A _____ 3. Number of Forms 5471 _____ 1

4. Number of Forms 8621 _____

5. Number of Forms 8865 _____ 1

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary (see instructions)

If you have more than one account to report in Part V, attach a continuation statement for each additional account (see instructions).

1 Type of account <input type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation	
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset		
4 Maximum value of account during tax year \$		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply.		
(a) Foreign currency in which account is maintained	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 37753A

Form 8938 (2019)

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary (see instructions) (continued)

7a Name of financial institution in which account is maintained b Global Intermediary Identification Number (GIIN) (Optional)

8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.

9 City or town, state or province, and country (including postal code)

Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary (see instructions)

If you have more than one asset to report in Part VI, attach a continuation statement for each additional asset (see instructions).

1 Description of asset 2 Identifying number or other designation

3 Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates.

a Date asset acquired during tax year, if applicable b Date asset disposed of during tax year, if applicable c Check if asset jointly owned with spouse d Check if no tax item reported in Part III with respect to this asset

4 Maximum value of asset during tax year (check box that applies)

a \$0 - \$50,000 b \$50,001 - \$100,000 c \$100,001 - \$150,000 d \$150,001 - \$200,000 e If more than \$200,000, list value \$

5 Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars? Yes No

6 If you answered "Yes" to line 5, complete all that apply.

Table with 3 columns: (a) Foreign currency in which asset is denominated, (b) Foreign currency exchange rate used to convert to U.S. dollars, (c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service

7 If asset reported on line 1 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.

a Name of foreign entity b GIIN (Optional)

c Type of foreign entity (1) Partnership (2) Corporation (3) Trust (4) Estate

d Mailing address of foreign entity. Number, street, and room or suite no.

e City or town, state or province, and country (including postal code)

8 If asset reported on line 1 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset. Note. If this asset has more than one issuer or counterparty, attach a continuation statement with the same information for each additional issuer or counterparty (see instructions).

a Name of issuer or counterparty Check if information is for Issuer Counterparty

b Type of issuer or counterparty (1) Individual (2) Partnership (3) Corporation (4) Trust (5) Estate

c Check if issuer or counterparty is a U.S. person Foreign person

d Mailing address of issuer or counterparty. Number, street, and room or suite no.

e City or town, state or province, and country (including postal code)

Additional Data

Software ID:

Software Version:

SSN:

Spouse SSN:

Name: DONALD J & MELANIA<TRUMP

Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$160,700 but not \$210,700 (\$160,725 and \$210,725 if married filing separately; \$321,400 and \$421,400 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

		A	B	C
17	Enter amounts from line 3	17		
18	Enter the amounts from line 10	18		
19	Subtract line 18 from line 17	19		
20	Taxable income before qualified business income deduction	20	2,975,173	
21	Threshold. Enter \$160,700 (\$160,725 if married filing separately; \$321,400 if married filing jointly)	21		
22	Subtract line 21 from line 20	22		
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23		
24	Phase-in percentage. Divide line 22 by line 23	24	%	
25	Total phase-in reduction. Multiply line 19 by line 24	25		
26	Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business	26		

Part IV Determine Your Qualified Business Income Deduction

27	Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27		
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions	28		
29	Qualified REIT dividends and PTP (loss) carryforward from prior years	29		
30	Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-	30		
31	REIT and PTP component. Multiply line 30 by 20% (0.20)	31		
32	Qualified business income deduction before the income limitation. Add lines 27 and 31	32		
33	Taxable income before qualified business income deduction	33	2,975,173	
34	Net capital gain. See instructions	34	9,276,737	
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		0
36	Income limitation. Multiply line 35 by 20% (0.20)	36		
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36	37		
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37	38		
39	Total qualified business income deduction. Add lines 37 and 38	39		
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40		

Form **8995-A**

Qualified Business Income Deduction

OMB No. XXXX-XXXX

Department of the Treasury
Internal Revenue Service

▶ Attach to tax return.
▶ Go to www.irs.gov/Form8995A for instructions and the latest information.

2019

Attachment
Sequence No. **55A**

Name(s) shown on return | Your taxpayer identification number

DONALD J & MELANIA<TRUMP

Part I Trade, Business, or Aggregation Information

Complete the schedules for Form 8995-A, (A, B, C, and/or D), as applicable, before starting Part I. Attach additional schedules when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A					
B					
C					

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	2		
3 Multiply line 2 by 20% (0.20). If your taxable income is \$160,700 or less (\$160,725 if married filing separately; \$321,400 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	3		
4 Allocable share of W-2 wages from the trade, business, or aggregation	4		
5 Multiply line 4 by 50% (0.50)	5		
6 Multiply line 4 by 25% (0.25)	6		
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	7		
8 Multiply line 7 by 2.5% (0.025)	8		
9 Add lines 6 and 8	9		
10 Enter the greater of line 5 or line 9	10		
11 W-2 wage and qualified property limitation. Enter the smaller of line 3 or line 10	11		
12 Phased-in reduction. Enter amount from line 26, if any. See instructions	12		
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	13		
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any	14		
15 Qualified business income component. Subtract line 14 from line 13	15		
16 Total qualified business income component. Add all amounts reported on line 15	16		

**TY 2019 Foreign Tax Credit Carryback
Computation Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

2017 FR TX PD 490680 CARRYOVER 490680 2016 FR TX PD 1254108 CARRYOVER 1254108 2015 FR TX PD 465747 CARRYOVER 465747 2014 FR TX PD 550298 CARRYOVER 550298 2013 FR TX PD 1002346 CARRYOVER 1002346 2012 FR TX PD 363405 CARRYOVER 363405 2011 FR TX PD 346519 CARRYOVER 346519 2010 FR TX PD 2010500 CARRYOVER 2010500 2009 FR TX PD 1401174 FTC CLMD 302915 CARRYOVER 1098259

**TY 2019 Foreign Tax Credit Carryback
Computation Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

2016 FR TX PD 8085 CARRYOVER 8085 2015 FR TX PD 8596 CARRYOVER 8596

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 2350

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 1240

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 12140926 PARTNERSHIP/S-CORP LOSSES 1535528

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 111 PARTNERSHIP/S-CORP LOSSES 4321

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 1196088 PARTNERSHIP/S-CORP LOSSES 2299094

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 1901179

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 194038

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 1712122

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 118 PARTNERSHIP/S-CORP LOSSES 4291

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 26

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 2614 PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 51

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 3281 PARTNERSHIP/S-CORP LOSSES 4233

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 33031349 PARTNERSHIP/S-CORP LOSSES 6002393

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 58

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 457458 PARTNERSHIP/S-CORP LOSSES 32090

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 24286

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 1238858

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 2350

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 1240

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 12140926 PARTNERSHIP/S-CORP LOSSES 1535528

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 111 PARTNERSHIP/S-CORP LOSSES 4321

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 1196088 PARTNERSHIP/S-CORP LOSSES 2299094

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 1901179

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 194038

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 1712122

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 118 PARTNERSHIP/S-CORP LOSSES 4291

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 26

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 2614 PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 51

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN

Explanation:

BUSINESS EXPENSES 3281 PARTNERSHIP/S-CORP LOSSES 4233

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN: .

Spouse SSN:

Explanation:

BUSINESS EXPENSES 699 PARTNERSHIP/S-CORP LOSSES 210230

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 860 PARTNERSHIP/S-CORP LOSSES 4905864

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 33031349 PARTNERSHIP/S-CORP LOSSES 6002393

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 58

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 457458 PARTNERSHIP/S-CORP LOSSES 32090

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

BUSINESS EXPENSES 24286

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 1238858

**TY 2019 Foreign Income Related Expenses
Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation:

PARTNERSHIP/S-CORP LOSSES 191330

**TY 2019 Foreign Income Net
Adjustment Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation
RECAPTURE OF OVERALL DOMESTIC LOSS 4758431



**TY 2019 Foreign Income Net
Adjustment Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation

ALLOCATION OF LOSSES FROM OTHER CATEGORIES 21958838

**TY 2019 Foreign Income Net
Adjustment Statement**

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Explanation

ALLOCATION OF LOSSES FROM OTHER CATEGORIES 21964550

TY 2019 Gen Dep**Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Business Name or Person Name:****Taxpayer Identification Number:****Form, Line or Instruction
Reference:****Regulations Reference:****Description:** SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION**Attachment Information:** DONALD J. & MELANIA TRUMP ARE MAKING THE DE MINIMIS
SAFE HARBOR ELECTION UNDER REG. SEC. 1.263(A)-1(F).

TY 2019 Gen Dep

Name: DONALD J & MELANIA<TRUMP

SSN:

Spouse SSN:

Business Name or Person Name:

Taxpayer Identification Number:

**Form, Line or Instruction
Reference:**

Regulations Reference:

Description: PREPARER NOTES

Attachment Information: THE FORM 5471 FILING REQUIREMENT FOR NITTO WORLD LIMITED CO; HAS BEEN SATISFIED BY TURNBERRY SCOTLAND LLC; (ADDRESS : C/O THE TRUMP ORGANIZATION NEW YORK, NY 10022; EIN 30-0826567).; TURNBERRY SCOTLAND LLC HAS E-FILED ITS RETURN FOR; THE TAX YEAR ENDED DECEMBER 31, 2019.; THE FORM 8858 FILING REQUIREMENT FOR TRUMP EDUCATION ULC; HAS BEEN SATISFIED BY THE TRUMP ENTREPRENEUR INITIATIVE LLC; (ADDRESS : C/O THE TRUMP ORGANIZATION NEW YORK, NY 10022;EIN 20-1806597).; THE TRUMP ENTREPRENEUR INITIATIVE LLC HAS E-FILED ITS; RETURN FOR THE TAX YEAR ENDED DECEMBER 31, 2019.; THE FORM 8858 FILING REQUIREMENT FOR SLC TURNBERRY LIMITED; HAS BEEN SATISFIED BY TURNBERRY SCOTLAND LLC; (ADDRESS : C/O THE TRUMP ORGANIZATION ; NEW YORK, NY 10022;EIN 30-0826567).; TURNBERRY SCOTLAND LLC HAS E-FILED ITS RETURN FOR; THE TAX YEAR ENDED DECEMBER 31, 2019.; THE FORM 8858 FILING REQUIREMENT FOR GOLF RECREATION; SCOTLAND LIMITED HAS BEEN SATISFIED BY TURNBERRY SCOTLAND LLC (ADDRESS: C/O THE TRUMP ORGANIZATION NEW YORK, NY 10022; EIN 30-0826567).; TURNBERRY SCOTLAND LLC HAS E-FILED ITS RETURN FOR; THE TAX YEAR ENDED DECEMBER 31, 2019.; THE FORM 8858 FILING REQUIREMENT FOR TIGL IRELAND MANAGEMENT; LIMITED HAS BEEN SATISFIED BY TW VENTURE II LLC: (ADDRESS : C/O THE TRUMP ORGANIZATION NEW YORK, NY 10022; EIN 35-2497556).; TW VENTURE II LLC HAS E-FILED ITS RETURN FOR THE YEAR ENDED; DECEMBER 31, 2019.; THE FORM 8858 FILING REQUIREMENT FOR TIGL IRELAND; ENTERPRISES LIMITED HAS BEEN SATISFIED BY TW VENTURE II LLC; (ADDRESS : C/O THE TRUMP ORGANIZATION NEW YORK, NY 10022; EIN 35-2497556).; TW VENTURE II LLC HAS E-FILED ITS RETURN FOR THE YEAR ENDED; DECEMBER 31 2019; THE FORM 8858 FILING REQUIREMENT FOR DT CONNECT EUROPE LIMIT; HAS BEEN SATISFIED BY TURNBERRY SCOTLAND LLC; (ADDRESS : C/O THE TRUMP ORGANIZATION NEW YORK, NY 10022; EIN 30-0826567).; TURNBERRY SCOTLAND LLC HAS E-FILED ITS RETURN FOR; THE YEAR ENDED DECEMBER 31, 2019; THE FORM 8858 FILING REQUIREMENT FOR THC VANCOUVER PAYROLL; ULC HAS BEEN SATISFIED BY DJT HOLDINGS MANAGING MEMBER LLC; (ADDRESS : C/O MAZARS USA LLP ; WOODBURY, NY 11797; EIN 27-4162256.; DJT HOLDINGS MANAGING

MEMBER LLC HAS E-FILED ITS RETURN FOR; THE YEAR ENDED
DECEMBER 31, 2019