

Form **1040** U.S. Individual Income Tax Return **2020** 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 checked 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: \_\_\_\_\_  
 If joint return, spouse's first name and middle initial: \_\_\_\_\_  
 Last name: \_\_\_\_\_  
 Do you have a P.O. box, see instructions.  Yes  No Apt. no. \_\_\_\_\_

City, town, or post office. If you have a foreign address, also complete spaces below. PALM BEACH  
 State: FL ZIP code: 33480  
 Foreign country name: \_\_\_\_\_ Foreign province/state/county: \_\_\_\_\_ Foreign postal code: \_\_\_\_\_  
**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

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?  Yes  No

**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, 1956  Are blind Spouse:  Was born before January 2, 1956  Is blind

Dependents (see instructions):	(2) Social security number	(3) Relationship to you	(4) √ if qualifies for (see instructions):	
(1) 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"/>

<b>1</b> Wages, salaries, tips, etc. Attach Form(s) W-2	<b>1</b>	393,229
<b>2a</b> Tax-exempt interest	<b>2a</b>	2,208
<b>3a</b> Qualified dividends	<b>3a</b>	17,694
<b>4a</b> IRA distributions	<b>4a</b>	
<b>5a</b> Pensions and annuities	<b>5a</b>	
<b>6a</b> Social security benefits	<b>6a</b>	
<b>7</b> Capital gain or (loss). Attach Schedule D if required. If not required, check here	<b>7</b>	
<b>8</b> Other income from Schedule 1, line 9	<b>8</b>	-15,825,345
<b>9</b> Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>	<b>9</b>	-4,694,058
<b>10</b> Adjustments to income:		
<b>a</b> From Schedule 1, line 22	<b>10a</b>	101,699
<b>b</b> Charitable contributions if you take the standard deduction. See instructions	<b>10b</b>	
<b>c</b> Add lines 10a and 10b. These are your <b>total adjustments to income</b>	<b>10c</b>	101,699
<b>11</b> Subtract line 10c from line 9. This is your <b>adjusted gross income</b>	<b>11</b>	-4,795,757
<b>12</b> <b>Standard deduction or itemized deductions</b> (from Schedule A)	<b>12</b>	915,171
<b>13</b> Qualified business income deduction. Attach Form 8995 or Form 8995-A	<b>13</b>	
<b>14</b> Add lines 12 and 13	<b>14</b>	915,171
<b>15</b> <b>Taxable income</b> . Subtract line 14 from line 11. If zero or less, enter -0-	<b>15</b>	0

16	Tax (see instructions). Check if any from Form(s) 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	0
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	0
19	Child tax credit or credit for other dependents	19	
20	Amount from Schedule 3, line 7	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	0
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	271,973
24	Add lines 22 and 23. This is your total tax	24	271,973

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

25	Federal income tax withheld from:		
a	Form(s) W-2	25a	83,916
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	1,733
d	Add lines 25a through 25c	25d	85,649
26	2020 estimated tax payments and amount applied from 2019 return	26	13,635,520
27	Earned income credit (EIC)	27	
28	Additional child tax credit. Attach Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	
31	Amount from Schedule 3, line 13	31	19,397
32	Add lines 27 through 31. These are your total other payments and refundable credits	32	19,397
33	Add lines 25d, 26, and 32. These are your total payments	33	13,740,566

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	13,468,593
35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	5,468,593

Direct deposit? See instructions.

35b	Routing number	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings	
35d	Account number		
36	Amount of line 34 you want applied to your 2021 estimated tax	36	8,000,000

Amount You Owe

For details on how to pay, see instructions.

37	Subtract line 33 from line 24. This is the amount you owe now Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.	37	
38	Estimated tax penalty (see instructions)	38	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions  Yes. Complete below.  No

Designee's name: TIMOTHY P HORAN Phone no.: (214) 545-3965 Personal identification number (PIN): \*\*\*\*\*

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.

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
*****	03-25-2022	PRESIDENT	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
*****	03-25-2022	FIRST LADY	

Phone no. (212) 715-7231 Email address

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check if: <input type="checkbox"/> Self-employed
TIMOTHY P HORAN			
Firm's name	Firm's address	Firm's EIN	Phone no. (214) 545-3965
BKM SOWAN HORAN LLP	DALLAS, TX, 75254	27-2602152	

**SCHEDULE 1**  
(Form 1040)  
  
Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

OMB No. 1545-0074

**2020**  
Attachment  
Sequence No. **01**

▶ Attach to Form 1040, 1040-SR, or 1040-NR  
▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

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

curity number

<b>Part I Additional Income</b>			
<b>1</b>	Taxable refunds, credits, or offsets of state and local income taxes . . . . .	<b>1</b>	382,065
<b>2a</b>	Alimony received . . . . .	<b>2a</b>	
<b>b</b>	Date of original divorce or separation agreement (see instructions) ▶		
<b>3</b>	Business income or (loss). Attach Schedule C  . . . . .	<b>3</b>	-29,686
<b>4</b>	Other gains or (losses). Attach Form 4797  . . . . .	<b>4</b>	-501,255
<b>5</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E  . . . . .	<b>5</b>	-15,676,469
<b>6</b>	Farm income or (loss). Attach Schedule F . . . . .	<b>6</b>	
<b>7</b>	Unemployment compensation . . . . .	<b>7</b>	
<b>8</b>	Other income. List type and amount ▶	<b>8</b>	
<b>9</b>	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 . . . . .	<b>9</b>	-15,825,345

<b>Part II Adjustments to Income</b>			
<b>10</b>	Educator expenses . . . . .	<b>10</b>	
<b>11</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .	<b>11</b>	
<b>12</b>	Health savings account deduction. Attach Form 8889 . . . . .	<b>12</b>	
<b>13</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .	<b>13</b>	
<b>14</b>	Deductible part of self-employment tax. Attach Schedule SE  . . . . .	<b>14</b>	101,699
<b>15</b>	Self-employed SEP, SIMPLE, and qualified plans . . . . .	<b>15</b>	
<b>16</b>	Self-employed health insurance deduction . . . . .	<b>16</b>	
<b>17</b>	Penalty on early withdrawal of savings . . . . .	<b>17</b>	
<b>18a</b>	Alimony paid . . . . .	<b>18a</b>	
<b>b</b>	Recipient's SSN . . . . . ▶		
<b>c</b>	Date of original divorce or separation agreement (see instructions) ▶		
<b>19</b>	IRA Deduction . . . . .	<b>19</b>	
<b>20</b>	Student loan interest deduction . . . . .	<b>20</b>	
<b>21</b>	Tuition and fees deduction. Attach Form 8917 . . . . .	<b>21</b>	
<b>22</b>	Add lines 10 through 21. These are your <b>adjustments to income</b> . Enter here and on Form 1040 1040-SR, or 1040-NR, line 10a . . . . .	<b>22</b>	101,699

**TY 2020 Other Tax Statement**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

Other Tax Literal or Tax Text	Other Tax Amount
FROM FORM 8959	64,412

**SCHEDULE 2**  
(Form 1040)

**Additional Taxes**

OMB No. 1545-0074

**2020**

Attachment  
Sequence No. **02**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 1040, 1040-SR, or 1040-NR.**  
▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**





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

ity number

**Part I Tax**

<b>1</b>	Alternative minimum tax. Attach Form 6251 . . . . .	<b>1</b>	
<b>2</b>	Excess advance premium tax credit repayment. Attach Form 8962 . . . . .	<b>2</b>	
<b>3</b>	Add lines 1 and 2. Enter here and include on Form 1040, 1040-SR, or 1040-NR, line 17 . . . . .	<b>3</b>	0

**Part II Other Taxes**

<b>4</b>	Self-employment tax. Attach Schedule SE  . . . . .	<b>4</b>	203,397
<b>5</b>	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919 . . . . .	<b>5</b>	
<b>6</b>	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required . . . . .	<b>6</b>	
<b>7a</b>	Household employment taxes. Attach Schedule H  . . . . .	<b>7a</b>	4,164
<b>7b</b>	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required . . . . .	<b>7b</b>	
<b>8</b>	Taxes from: a <input checked="" type="checkbox"/> Form 8959  b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)  . . . . .	<b>8</b>	64,412
<b>9</b>	Section 965 net tax liability installment from Form 965-A . . . . .	<b>9</b>	
<b>10</b>	Add lines 4 through 8. These are your <b>total other taxes</b> . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b . . . . .	<b>10</b>	271,973

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

Cat. No. 71478U

Schedule 2 (Form 1040) 2020

**Additional Data**

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

## Additional Data

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**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP

**SCHEDULE 3**  
(Form 1040)

**Additional Credits and Payments**

OMB No. 1545-0074

**2020**

Attachment  
Sequence No. **03**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 1040, 1040-SR, or 1040-NR.**  
▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

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

Security number

<b>Part I Nonrefundable Credits</b>			
<b>1</b>	Foreign tax credit. Attach Form 1116 if required . . . . .	<b>1</b>	
<b>2</b>	Credit for child and dependent care expenses. Attach Form 2441 . . . . .	<b>2</b>	
<b>3</b>	Education credits from Form 8863, line 19 . . . . .	<b>3</b>	
<b>4</b>	Retirement savings contributions credit. Attach Form 8880 . . . . .	<b>4</b>	
<b>5</b>	Residential energy credits. Attach Form 5695 . . . . .	<b>5</b>	
<b>6</b>	Other credits from Form: <b>a</b> <input checked="" type="checkbox"/> 3800 <b>b</b> <input type="checkbox"/> 8801 <b>c</b> <input type="checkbox"/> _____	<b>6</b>	
<b>7</b>	Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 . . . . .	<b>7</b>	0

<b>Part II Other Payments and Refundable Credits</b>			
<b>8</b>	Net premium tax credit. Attach Form 8962 . . . . .	<b>8</b>	
<b>9</b>	Amount paid with request for extension to file (see instructions) . . . . .	<b>9</b>	
<b>10</b>	Excess social security and tier 1 RRTA tax withheld . . . . .	<b>10</b>	42
<b>11</b>	Credit for federal tax on fuels. Attach Form 4136 <b>a</b> . . . . .	<b>11</b>	19,355
<b>12</b>	Other payments or refundable credits:		
<b>a</b>	Form 2439 . . . . .	<b>12a</b>	
<b>b</b>	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 . . . . .	<b>12b</b>	
<b>c</b>	Health coverage tax credit from Form 8885 . . . . .	<b>12c</b>	
<b>d</b>	Other: _____	<b>12d</b>	
<b>e</b>	Deferral for certain Schedule H or SE filers (see instructions) . . . . .	<b>12e</b>	
<b>f</b>	Add lines 12a through 12e . . . . .	<b>12f</b>	
<b>13</b>	Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31 . . . . .	<b>13</b>	19,397

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

Cat. No. 71480G

Schedule 3 (Form 1040) 2020

**Additional Data**

**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP

SCHEDULE A (Form 1040)

Itemized Deductions

OMB No. 1545-0074

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

Attach to Form 1040 or 1040-SR.

2020

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 07

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

Your social security number

DONALD J & MELANIA<TRUMP

Medical and Dental Expenses

Caution: Do not include expenses reimbursed or paid by others.

Table with 4 rows for Medical and Dental Expenses. Line 1: Medical and dental expenses. Line 2: Enter amount from Form 1040 or 1040-SR, line 11. Line 3: Multiply line 2 by 7.5% (0.075). Line 4: Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-

4

Taxes You Paid

Table with 7 rows for Taxes You Paid. Line 5: State and local taxes. Line 5a: State and local income taxes or general sales taxes. Line 5b: State and local real estate taxes. Line 5c: State and local personal property taxes. Line 5d: Add lines 5a through 5c. Line 5e: Enter the smaller of line 5d or \$10,000. Line 6: Other taxes. Line 7: Add lines 5e and 6.

7 10,000

Interest You Paid

Caution: Your mortgage interest deduction may be limited (see instructions).

Table with 10 rows for Interest You Paid. Line 8: Home mortgage interest and points. Line 8a: Home mortgage interest and points reported to you on Form 1098. Line 8b: Home mortgage interest not reported to you on Form 1098. Line 8c: Points not reported to you on Form 1098. Line 8d: Mortgage insurance premiums. Line 8e: Add lines 8a through 8d. Line 9: Investment interest. Line 10: Add lines 8e and 9.

10 896,616

Gifts to Charity

Caution: If you made a gift and got a benefit for it see instructions.

Table with 4 rows for Gifts to Charity. Line 11: Gifts by cash or check. Line 12: Other than by cash or check. Line 13: Carryover from prior year. Line 14: Add lines 11 through 13.

14 0

Casualty and Theft Losses

15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions

15

Other Itemized Deductions

16 Other — from list in instructions. List type and amount

16 8,555

Total Itemized Deductions

17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12

17 915,171

18 If you elect to itemize deductions even though they are less than your standard deduction, check this box





## Additional Data

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**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP

## 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	225,056
2	JP MORGAN CHASE	495
3	BANK UNITED	14,509
4	PROFESSIONAL BANK	67,850
5	IVANKA TRUMP	18,000
6	DONALD J TRUMP JR	8,715
7	ERIC TRUMP	19,605
8	FIRST REPUBLIC BANK	16
9	SIGNATURE BANK	38,131
10	CAPITAL ONE NA	200,398
11	FROM K-1 - PARK BRIAR ASSOCIATES LLC	194
12	FROM K-1 - MAR-A-LAGO CLUB LLC	169
13	FROM K-1 - 40 WALL DEVELOPMENT ASSOC LLC	125,034
14	FROM K-1 - HUDSON WATERFRONT ASSOC I LP	1,174
15	FROM K-1 - HUDSON WATERFRONT ASSOC V LP	3,278,528
16	FROM K-1 - HUDSON WATERFRONT ASSOC IV LP	1,445,384
17	FROM K-1 - TRUMP CPS LLC	32
18	FROM K-1 - TRUMP PLAZA LLC	1,054
19	FROM K-1 - DJT HOLDINGS LLC - COUNTRY APARTMENTS LLC	1
20	FROM K-1 - TRUMP 845 UN LIMITED PARTNERSHIP	357
21	FROM K-1 - DJT HOLDINGS LLC - OCEAN AIR INVESTORS LLC	30,916
22	FROM K-1 - DJT HOLDINGS LLC - OAKDALE INVESTORS LLC	16,240
23	FROM K-1 - TIPPERARY REALTY CORP	5
24	FROM K-1 - THE TRUMP CORPORATION	25,941
25	FROM K-1 - TRUMP PLAZA MEMBER INC	11
26	FROM K-1 - TRUMP VILLAGE CONST CORP-DJT GR TR	321
27	FROM K-1 - TRUMP TOWER MANAGING MEMBER INC	55
28	FROM K-1 - BEACH HAVEN APARTMENTS #1 INC DJT GR TR	84
29	FROM K-1 - SHORE HAVEN APARTMENTS #1 INC DJT GR TR	380
30	FROM K-1 - DONALD J TRUMP 'FRED' TRUST	13
31	FROM K-1 - ELIZABETH TRUMP GRANDCHILDREN - DONALD	16
32	FROM K-1 - TRUMP MANAGEMENT INC	17
33	FROM K-1 - HUDSON WATERFRONT ASSOC III LP	5,017,899
34	FROM K-1 - DJT HOLDINGS LLC - TRUMP INTERNATIONAL HOTELS MANAGEMENT LLC	16



#	Payer	Amount
35	FROM K-1 - TIHT COMMERCIAL LLC	600
36	FROM K-1 - TRUMP FERRY POINT MEMBER CORP	63
37	FROM K-1 - DJT HOLDINGS LLC - TRUMP FERRY POINT LLC	6,176
38	FROM K-1 - DJT HOLDINGS MANAGING MEMBER LLC	6
39	FROM K-1 - DJT HOLDINGS LLC - LFB ACQUISITION LLC	225
40	FROM K-1 - CHARLOTTESVILLE CATERING & EVENTS LLC	35,595
41	FROM K-1 - DJT HOLDINGS LLC - TNGC CHARLOTTE LLC	3
42	FROM K-1 - TRUMP 845 UN GP LLC	238
43	FROM K-1 - DJT HOLDINGS MANAGING MEMBER LLC	912
44	FROM K-1 - TRUMP PARK AVENUE LLC - TRUMP DELMONICO LLC)	666
45	FROM K-1 - TRUMP PARK AVENUE LLC - ACQUISITION	664
46	FROM K-1 - DJT HOLDINGS LLC - TRUMP LAS VEGAS MEMBER LLC	12,064
47	FROM K-1 - DJT HOLDINGS LLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	247
48	FROM K-1 - STARRETT CITY ASSOCIATES	70
49	FROM K-1 - DJT HOLDINGS MM LLC - LFB AQUISITION MEMBER CORP	2
50	FROM K-1 - TRUMP INTERNATIONAL GOLF CLUB LLC	665
51	FROM K-1 - DJT HOLDINGS LLC - DTTM OPERATIONS LLC	927
52	FROM K-1 - DJT HOLDINGS MM LLC - DTTM OPERATIONS MANAGING MEMBER CORP	9
53	FROM K-1 - TRUMP PALACE PARC LLC	27
54	FROM K-1 - TRUMP EQUITABLE FIFTH AVE CO	5,432
55	FROM K-1 - DJT HOLDINGS LLC	23,692
56	FROM K-1 - DJT HOLDINGS MM LLC - TRUM MARKS MENSWEAR LLC	4
57	FROM K-1 - 845 UN LIMITED PARTNERSHIP - 845 LP LLC	357
58	FROM K-1 - DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MANAGING MEMBER LLC	16
59	FROM K-1 - DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MEMBER LLC	778
60	FROM K-1 - DJT HOLDINGS LLC MM - 40 WALL DEVELOPMENT ASSOCIATES LLC	125



**SCHEDULE SE  
(Form 1040)**

**Self-Employment Tax**

OMB No. 1545-0074

**2020**

Attachment  
Sequence No. **17**

▶ Go to [www.irs.gov/ScheduleSE](http://www.irs.gov/ScheduleSE) for instructions and the latest information.

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

Department of the Treasury  
Internal Revenue Service (99)

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

Social security number of person  
with self-employment income ▶

**Part I Self-Employment Tax**

**Note:** If your only income subject to self-employment tax is **church employee income**, see instructions for how to report your income and 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 . . . . .

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

**1a** Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. . . . . **1a**

**b** If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH . . . . . **1b** ( )

Skip line 2 if you use the nonfarm optional method in Part II. See instructions.

**2** Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order. **2** 7,594,666

**3** Combine lines 1a, 1b, and 2 . . . . . **3** 7,594,666

**4a** If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 . . . . . **4a** 7,013,674

**Note:** If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.

**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** 7,013,674

**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** 7,013,674

**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 2020 . . . . . **7** \$137,700

**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 \$137,700 or more, skip lines 8b through 10, and go to line 11 . . . . . **8a** 138,384

**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** 203,397

**12 Self-employment tax.** Add lines 10 and 11. Enter here and on **Schedule 2 (Form 1040), line 4.** . . . . . **12** 203,397

**13 Deduction for one-half of self-employment tax.** Multiply line 12 by 50% (0.50). Enter here and on **Schedule 1 (Form 1040), line 14.** . . . . . **13** 101,699

**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<sup>1</sup> wasn't more than \$8,460, or **(b)** your net farm profits<sup>2</sup> were less than \$6,107.

**14** Maximum income for optional methods. . . . . **14** \$5,640

**15** Enter the **smaller** of: two-thirds ( $\frac{2}{3}$ ) of gross farm income<sup>1</sup> (not less than zero) or \$5,640. Also include this amount on line 4b above . . . . . **15**

**Nonfarm Optional Method.** You may use this method **only** if **(a)** your net nonfarm profits<sup>3</sup> were less than \$6,107 and also less than 72.189% of your gross nonfarm income,<sup>4</sup> 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 ( $\frac{2}{3}$ ) of gross nonfarm income<sup>4</sup> (not less than zero) or the amount on line 16. Also include this amount on line 4b above . . . . . **17**

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

<sup>2</sup>From 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.

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

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

**Part III Maximum Deferral of Self-Employment Tax Payments**

If line 4c is zero, skip lines 18 through 20, and enter -0- on line 21.

<b>18</b> Enter the portion of line 3 that can be attributed to March 27, 2020, through December 31, 2020 . . . .	<b>18</b>	
<b>19</b> If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from line 18	<b>19</b>	
<b>20</b> Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December 31, 2020	<b>20</b>	
<b>21</b> Combine lines 19 and 20. . . . .	<b>21</b>	
If line 5b is zero, skip line 22 and enter -0- on line 23.		
<b>22</b> Enter the portion of line 5a that can be attributed to March 27, 2020, through December 31, 2020 . . . .	<b>22</b>	
<b>23</b> Multiply line 22 by 92.35% (0.9235). . . . .	<b>23</b>	
<b>24</b> Add lines 21 and 23 . . . . .	<b>24</b>	
<b>25</b> Enter the smaller of line 9 or line 24 . . . . .	<b>25</b>	
<b>26</b> Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (Form 1040)	<b>26</b>	

Schedule SE (Form 1040) 2020

**Additional Data**

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



SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

2020

Attachment Sequence No. 09

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.

Department of the Treasury Internal Revenue Service (99)

Name of proprietor

Social security number (SSN)

DONALD J TRUMP

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 2020? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2020, check here.

I Did you make any payments in 2020 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 31 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, 29 Tentative profit or (loss), 30 Expenses for business use of your home, 31 Net profit or (loss).



## Additional Data

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**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2020

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 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 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 2020? If "No," see instructions for limit on losses

H If you started or acquired this business during 2020, check here.

I Did you make any payments in 2020 that would require you to file Form(s) 1099? (see instructions)

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

Part I Income

Table with 7 rows for income reporting: 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 28 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. 29 Tentative profit or (loss). Subtract line 28 from line 7.

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), line 3 and on Schedule SE, line 2. If a loss, you must go to line 32.

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.

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 3 columns: Description, Line Number, 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 2020, 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

## Additional Data

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**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 :** 5394

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2020

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.

Attachment Sequence No. 09

Name of proprietor

Social security number (SSN)

DONALD J TRUMP

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.)

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 2020? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2020, check here. Yes No

I Did you make any payments in 2020 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 27 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 3,239

29 Tentative profit or (loss). Subtract line 28 from line 7 -3,239

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), line 3 and on Schedule SE, line 2. If a loss, you must go to line 32. -2,440

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

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**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 :** 2440

**SCHEDULE C**  
**(Form 1040)**

**Profit or Loss From Business**

OMB No. 1545-0074

**2020**

(Sole Proprietorship)

Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service (99)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Attachment  
Sequence No. 09

Name of proprietor <b>DONALD J TRUMP</b>	Social security number (SSN) <b>532289</b>
A Principal business or profession, including product or service (see instructions) <b>AVIATION</b>	B Enter code from instructions <b>532289</b>
C Business name. If no separate business name, leave blank. <b>DT ENDEAVOR I LLC</b>	D Employer ID number (EIN)/(see instr.) <b>35-2555712</b>

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 2020? If "No," see instructions for limit on losses  Yes  No

H If you started or acquired this business during 2020, check here.

I Did you make any payments in 2020 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"/>	<b>1</b>	160,144
2 Returns and allowances	<b>2</b>	0
3 Subtract line 2 from line 1	<b>3</b>	160,144
4 Cost of goods sold (from line 42)	<b>4</b>	0
5 <b>Gross profit.</b> Subtract line 4 from line 3	<b>5</b>	160,144
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	<b>6</b>	
7 <b>Gross income.</b> Add lines 5 and 6	<b>7</b>	160,144

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

8 Advertising	<b>8</b>	18 Office expense (see instructions)	<b>18</b>	
9 Car and truck expenses (see instructions)	<b>9</b>	19 Pension and profit-sharing plans	<b>19</b>	
10 Commissions and fees	<b>10</b>	20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	<b>11</b>	a Vehicles, machinery, and equipment	<b>20a</b>	
12 Depletion	<b>12</b>	b Other business property	<b>20b</b>	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	<b>13</b>	21 Repairs and maintenance	<b>21</b>	
14 Employee benefit programs (other than on line 19)	<b>14</b>	22 Supplies (not included in Part III)	<b>22</b>	
15 Insurance (other than health)	<b>15</b>	23 Taxes and licenses	<b>23</b>	
16 Interest (see instructions):		24 Travel and meals:		
a Mortgage (paid to banks, etc.)	<b>16a</b>	a Travel	<b>24a</b>	
b Other	<b>16b</b>	b Deductible meals (see instructions)	<b>24b</b>	
17 Legal and professional services	<b>17</b>	25 Utilities	<b>25</b>	
28 <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27a	<b>28</b>	26 Wages (less employment credits)	<b>26</b>	
29 Tentative profit or (loss). Subtract line 28 from line 7	<b>29</b>	27a Other expenses (from line 48)	<b>27a</b>	160,144
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). <b>Simplified method filers only:</b> 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.	<b>30</b>	b Reserved for future use	<b>27b</b>	
31 <b>Net profit or (loss).</b> Subtract line 30 from line 29. • If a profit, enter on both <b>Schedule 1 (Form 1040), line 3</b> and on <b>Schedule SE, line 2.</b> (If you checked the box on line 1, see instructions). Estates and trusts, enter on <b>Form 1041, line 3.</b> • If a loss, you <b>must</b> go to line 32.	<b>31</b>		<b>31</b>	-18,923
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 <b>Schedule 1 (Form 1040), line 3</b> and on <b>Schedule SE, line 2.</b> (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on <b>Form 1041, line 3.</b> • If you checked 32b, you <b>must</b> attach <b>Form 6198.</b> Your loss may be limited.			<b>32a</b> <input type="checkbox"/> All investment is at risk.	
			<b>32b</b> <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 <b>Cost of goods sold.</b> 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 2020, 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.

FLIGHT EXPENSE		160,144
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-----		
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48 <b>Total other expenses.</b> Enter here and on line 27a	48	160,144
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## Additional Data

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**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 :** 18923

**SCHEDULE C**  
**(Form 1040)**

**Profit or Loss From Business**

OMB No. 1545-0074

(Sole Proprietorship)

**2020**

Go to [www.irs.gov/ScheduleC](http://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.

Attachment Sequence No. **09**

Department of the Treasury  
Internal Revenue Service (99)

Name of proprietor

Social security number (SSN)

DONALD J TRUMP

**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 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 2020? If "No," see instructions for limit on losses  Yes  No

**H** If you started or acquired this business during 2020, check here.

**I** Did you make any payments in 2020 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**

<b>1</b> 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"/>	<b>1</b>	
<b>2</b> Returns and allowances	<b>2</b>	0
<b>3</b> Subtract line 2 from line 1	<b>3</b>	
<b>4</b> Cost of goods sold (from line 42)	<b>4</b>	0
<b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3	<b>5</b>	
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	<b>6</b>	
<b>7</b> <b>Gross income.</b> Add lines 5 and 6	<b>7</b>	

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

<b>8</b> Advertising	<b>8</b>		<b>18</b> Office expense (see instructions)	<b>18</b>	
<b>9</b> Car and truck expenses (see instructions)	<b>9</b>		<b>19</b> Pension and profit-sharing plans	<b>19</b>	
<b>10</b> Commissions and fees	<b>10</b>		<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions)	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment	<b>20a</b>	
<b>12</b> Depletion	<b>12</b>		<b>b</b> Other business property	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	<b>13</b>		<b>21</b> Repairs and maintenance	<b>21</b>	
<b>14</b> Employee benefit programs (other than on line 19)	<b>14</b>		<b>22</b> Supplies (not included in Part III)	<b>22</b>	
<b>15</b> Insurance (other than health)	<b>15</b>		<b>23</b> Taxes and licenses	<b>23</b>	82
<b>16</b> Interest (see instructions):			<b>24</b> Travel and meals:		
<b>a</b> Mortgage (paid to banks, etc.)	<b>16a</b>		<b>a</b> Travel	<b>24a</b>	
<b>b</b> Other	<b>16b</b>		<b>b</b> Deductible meals (see instructions)	<b>24b</b>	
<b>17</b> Legal and professional services	<b>17</b>	3,000	<b>25</b> Utilities	<b>25</b>	
			<b>26</b> Wages (less employment credits)	<b>26</b>	
			<b>27a</b> Other expenses (from line 48)	<b>27a</b>	
			<b>b</b> Reserved for future use	<b>27b</b>	

**28** **Total expenses** before expenses for business use of home. Add lines 8 through 27a **28** 3,082

**29** Tentative profit or (loss). Subtract line 28 from line 7 **29** -3,082

**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), line 3** 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** -2,929

**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), line 3** 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.

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 35-42 include: Inventory at beginning of year, Purchases less cost of items withdrawn for personal use, Cost of labor, Materials and supplies, Other costs, Add lines 35 through 39, Inventory at end of year, and 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 2020, 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)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2020

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.

Attachment Sequence No. 09

Name of proprietor

Social security number (SSN)

MELANIA TRUMP

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 2020? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2020, check here. Yes No

I Did you make any payments in 2020 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: Gross receipts or sales, Returns and allowances, Subtract line 2 from line 1, Cost of goods sold, Gross profit, Other income, Gross income.

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

Table with 27 rows for expense items: 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, Office expense, Pension and profit-sharing plans, Rent or lease, Repairs and maintenance, Supplies, Taxes and licenses, Travel and meals, Utilities, Wages, Other expenses.

28 Total expenses before expenses for business use of home. Add lines 8 through 27a 3,848

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

31 Net profit or (loss). Subtract line 30 from line 29. If a profit, enter on both Schedule 1 (Form 1040), line 3 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.

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), line 3 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

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**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 :** 2929



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 3 columns: Description, Line Number, 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 2020, 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

## Additional Data

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**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:** : ---

**Name:** DONALD J & MELANIA<TRUMP

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

**Loss Netting and Carryforward**

OMB No. 1545-2294

**2020**

Attachment  
Sequence No. **55D**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 8995-A.  
▶ Go to [www.irs.gov/Form8995-A](http://www.irs.gov/Form8995-A) for instructions and the latest information.

Name(s) shown on return: DONALD J & MELANIA<TRUMP  
Your taxpayer identification number: \_\_\_\_\_

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	(8,733,155)
3	Total of the trades, businesses, or aggregations losses. Combine the negative amounts on lines 1, column (a), and 2 for all trades, businesses, or aggregations . . . . .		3	(58,271,884)
4	Total of the trades, businesses, or aggregations income. Add the positive amounts on line 1, column (a), for all trades, businesses, or aggregations . . . . .		4	59,053,889
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 of the trades, businesses, or aggregations on line 1, column (b). See instructions . . . . .		5	(58,271,884)
6	Qualified business net (loss) carryforward. Subtract line 5 from line 3. If zero or more, enter -0- . . . . .		6	( )

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 71661B Schedule C (Form 8995-A) 2020

**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-.)
	DJT HOLDINGS MM LLC - TRUMP PRODUCTIONS MANAG	2,145	(2,117)	28
	DJT HOLDINGS MM LLCLLC - TRUMP PRODUCTIONS L	2,123	(2,095)	28
	DJT HOLDINGS MM LLC - TRUM MARKS MENSWEAR LLC	141	(139)	2
	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MANAGIN	7,932	(7,827)	105
	TIHH MEMBER CORP	1,555	(1,534)	21
	TRUMP INTERNATIONAL HOTEL HAWAII LLC	153,914	(151,876)	2,038
	MAR-A-LAGO CLUB LLC	8,024,049	(7,917,793)	106,256
	40 WALL DEVELOPMENT ASSOC LLC	3,622,030	(3,574,066)	47,964
	HUDSON WATERFRONT ASSOC V LP	4,366,825	(4,308,999)	57,826
	HUDSON WATERFRONT ASSOC III LP	564,993	(557,511)	7,482
	HUDSON WATERFRONT ASSOC IV LP	593,978	(586,112)	7,866
	TRUMP CPS LLC	383,190	(378,116)	5,074
	TRUMP PLAZA LLC	783,049	(772,680)	10,369
	TRUMP INTERNATIONAL GOLF CLUB LLC	2,124,230	(2,096,100)	28,130
	DJT HOLDINGS LLC - TRUMP PRODUCTIONS LLC	210,213	(207,429)	2,784
	TIHT COMMERCIAL LLC	22,217	(21,923)	294
	TRUMP INTERNATIONAL HOTEL HAWAII LLC	392,242	(387,048)	5,194
	DJT HOLDINGS LLC - TRUMP CHICAGO HOTEL MANAGE	448,924	(442,979)	5,945
	DJT HOLDINGS LLC - TRUMP CHICAGO RESIDENTIAL	402,392	(397,063)	5,329

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 LLC - LFB ACQUISITION LLC	1,458,530	(1,439,216)	19,314
	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB W	2,612,627	(2,578,030)	34,597
	DJT HOLDINGS LLC - TRUMP VIRGINIA LOT 5 LLC	63,059	(62,224)	835
	DJT HOLDINGS LLC - TNGC CHARLOTTE LLC	2,135,538	(2,107,259)	28,279
	DJT HOLDINGS JUPITER GOLF CLUB	866,141	(854,671)	11,470
	DJT HOLDINGS LLC - TRUMP LAS VEGAS MEMBER LLC	1,528,020	(1,507,786)	20,234
	DJT HOLDINGS LLC - TRUMP LAS VEGAS MANAGING M	25,929	(25,586)	343
	HUDSON WATERFRONT ASSOCIATES V LP	4,064,771	(4,010,944)	53,827
	HUDSON WATERFRONT ASSOC III LP	7,604,344	(7,503,646)	100,698
	TRUMP 845 UN GP LLC	190,807	(188,280)	2,527
	845 UN LIMITED PARTNERSHIP - 845 LP LLC	275,441	(271,794)	3,647
	DJT HOLDINGS LLC - THC BAKU SERVICES LLC	8,196	(8,087)	109
	DJT HOLDINGS LLC - TNGC JUPITER MANAGEMENT LL	91,460	(90,249)	1,211
	DJT HOLDINGS LLC TW VENTURE I LLC	11,533	(11,380)	153
	HUDSON WATERFRONT ASSOCIATES IV LP	374,500	(369,541)	4,959
	DJT HOLDINGS LLC - DTTM OPERATIONS LLC	385,799	(380,690)	5,109
	TRUMP EQUITABLE FIFTH AVE CO	12,831,681	(12,661,761)	169,920
	DJT HOLDINGS LLC - 124 WOODBRIDGE	96,444	(95,167)	1,277
	TIPPERARY REALTY CORP	13,149	(12,975)	174
	DJT HOLDINGS MM LLC - MAR-A-LAGO CLUBLLC	8,134	(8,026)	108
	TRUMP TOWER MANAGING MEMBER INC	126,726	(125,048)	1,678
	TRUMP MANAGEMENT INC	9,454	(9,329)	125
	TIHH MEMBER CORP	2,949	(2,910)	39
	DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO HOTEL	4,535	(4,475)	60
	DJT HOLDINGS MM LLC - TRUMP CHICAGO RESIDENTI	4,106	(4,052)	54
	DJT HOLDINGS MM LLC - TRUMP VIRGINIA LOT 5 MA	643	(634)	9
	DJT HOLDINGS MM LLC - LFB AQUISITION MEMBER C	14,881	(14,684)	197
	DJT HOLDINGS MM LLC - THC BAKU SERVICES MEMBE	84	(83)	1
	DJT HOLDINGS MM LLC - TNGC CHARLOTTE LLC	21,789	(21,500)	289
	DJT HOLDINGS MM LLC - TNGC JUPITER MANAGEMENT	933	(921)	12
	DJT HOLDINGS MM LLC - JUPITER GOLF CLUB MANAG	8,837	(8,720)	117
	DJT HOLDINGS MM LLC - T RETAIL MANAGING LLC	1,963	(1,937)	26
	DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA LOT	637	(629)	8
	DJT HOLDINGS MM LLCLLC - LFB ACQUISITIONS LL	14,733	(14,538)	195
	DJT HOLDINGS MM LLCLLC - TNGC CHARLOTTE LLC	21,571	(21,285)	286
	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MEM	15,435	(15,231)	204
	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MAN	262	(259)	3
	DJT HOLDINGS MM LLCLLC - TW VENTURE I LLC	116	(114)	2
	DJT HOLDINGS MM LLCLLC - TNGC JUPITER MGT LL	924	(912)	12
	DJT HOLDINGS MM LLCLLC - TNGC WASHINGTON DC	26,390	(26,041)	349
	DJT HOLDINGS MM LLCLLC - THC BAKU SERVICES L	83	(82)	1
	HUDSON WATERFRONT ASSOC I LP	73,826	(72,848)	978
	DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITION	60,570	(59,768)	802
	DJT HOLDINGS MM LLC TRUMP CHICAGO HOTEL MANAG	4,580	(4,519)	61
	DJT HOLDINGS MM LLC TRUMP INT'L GOLF CLUB	21	(21)	0
	DJT HOLDINGS MM LLC - TRUMP NATIONAL GOLF CLU	26,657	(26,304)	353
	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MEMBER	101,781	(100,433)	1,348
	DJT HOLDINGS LLC MM - 40 WALL DEVELOPMENT AS	3,336	(3,292)	44
	DJT HOLDINGS MM LLCLLC TRUMP CHICAGO RESIDEN	4,065	(4,011)	54
	DJT HOLDINGS LLC TRUMP MODEL MANAGEMENT LLC (	3,587	(3,540)	47
	HUDSON WATERFRONT ASSOC II LP	1,460,975	(1,441,628)	19,347
	DJT HOLDINGS MM LLC - DT DUBAI GOLF MANAGER M	4,290	(4,233)	57
	TRUMP 845 UN LIMITED PARTNERSHIP	280,905	(277,185)	3,720
	DJT HOLDINGS MM LLC - DTTM OPERATIONS MANAGIN	-687	( )	
	TRUMP MARKS WAIKIKI LLC	-2,277	( )	
	TRUMP MARKS WAIKIKI CORP	-427	( )	
	DJT HOLDINGS LLC - DTTM OPERATIONS LLC	-68,049	( )	
	DJT HOLDINGS MM LLC - TRUMP MARKS WESTCHESTER	-22	( )	
	DJT HOLDINGS MM LLC - TRUMP MARKS PALM BEACH	-22	( )	
	DJT HOLDINGS MM LLC - TRUMP MARKS MORTGAGE CO	-22	( )	
	DJT HOLDINGS MM LLC - T EXPRESS MANAGER MEMBE	-311	( )	
	TTTT VENTURE MEMBER CORP	-984	( )	
	THE EAST 61 ST COMPANY	-1,530	( )	
	THE EAST 61 ST COMPANY	-2	( )	
	PARK BRIAR ASSOCIATES LLC	-9,059	( )	

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 LLC - MISS UNIVERSE LP LLP	-14,977	( )	
	STARRETT CITY ASSOCIATES	-19,511	( )	
	DJT HOLDINGS LLC - TRUMP INTERNATIONAL HOTELS	-2,298,405	( )	
	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB C	-262,534	( )	
	DJT HOLDINGS LLC - TRUMP SALES & LEASING CHIC	-1,468	( )	
	DJT HOLDINGS LLC - TRUMP FERRY POINT LLC	-622,452	( )	
	DJT HOLDINGS LLC - TRUMP PANAMA HOTEL MANAGEM	-1,103,724	( )	
	DJT HOLDINGS LLC - TRUMP CHICAGO COMMERCIAL M	-3,394	( )	
	DJT HOLDINGS LLC - TRUMP CAROUSEL LLC	-8,340	( )	
	DJT HOLDINGS LLC - 401 MEZZ	-8,766,273	( )	
	DJT HOLDINGS LLC - TRUMP SCOTSBOROUGH SQUARE	-22,214	( )	
	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB L	-939,175	( )	
	DJT HOLDINGS LLC - TNGC PINE HILL LLC	-419,413	( )	
	DJT HOLDINGS LLC - TNGC DUTCHESS COUNTY LLC	-314,577	( )	
	DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITION	-239,074	( )	
	DJT HOLDINGS LLC - TRUMP WORLD PRODUCTIONS LL	-353	( )	
	DJT HOLDINGS LLC - TRUMP VINEYARD ESTATES LL	-190,071	( )	
	T INTERNATIONAL REALTY LLC	-26,417	( )	
	DJT HOLDINGS LLC - TRUMP CHICAGO RETAIL MANAG	-285	( )	
	DJT HOLDINGS LLC - TRUMP ENDEAVOR 12 LLC	-8,392,332	( )	
	DJT HOLDINGS - TRUMP OLD POST OFFICE LLC	-16,770,379	( )	
	DJT HOLDINGS LLC - THC SALES & MARKETING LLC	-519,309	( )	
	DJT HOLDINGS LLC - THC CENTRAL RESERVATIONS L	-83,591	( )	
	DJT HOLDINGS LLC - TRUMP INT'L HOTEL & TOWER	-1,184,545	( )	
	TRUMP PARK AVENUE LLC - TRUMP DELMONICO LLC)	-649,808	( )	
	TRUMP PARK AVENUE LLC - ACQUISITION	-644,412	( )	
	DJT HOLDINGS LLC - THC CHINA TECHNICAL SERVIC	-1,493	( )	
	DT CONNECT II LLC	-285,451	( )	
	TRUMP PALACE PARC LLC	-258,247	( )	
	DJT HOLDINGS LLC - WESTMINSTER HOTEL MANAGEME	-96	( )	
	DJT HOLDINGS LLC - TRUMP REALTY SERVICES LLC	-35	( )	
	DJT HOLDINGS LLC - TRUMP GOLF ACQUISITIONS LL	-285	( )	
	DJT HOLDINGS LLC - LAMINGTON FAMILY HOLDINGS	-465	( )	
	DJT HOLDINGS LLC - THC HOTEL DEVELOPMENT LLC	-257	( )	
	DJT HOLDINGS LLC - TRUMP SOHO MEMBER LLC	-231	( )	
	DJT HOLDINGS LLC - TRUMP LAS VEGAS DEVELOPMEN	-953	( )	
	DJT HOLDINGS LLC - TRUMP LAUDERDALE DEVELOPME	-185	( )	
	DJT HOLDINGS LLC - CHICAGO UNIT ACQUISITIONS	-699	( )	
	DJT HOLDINGS LLC - DT VENTURE II LLC	-298	( )	
	DJT HOLDINGS LLC - TRUMP PHOENIX DEVELOPMENT	-257	( )	
	DJT HOLDINGS LLC - TRUMP CARRIBEAN LLC	-181	( )	
	DJT HOLDINGS LLC - TRUMP ICE LLC	-39,969	( )	
	DJT HOLDINGS LLC - TRUMP LAUDERDALE DEVELOPME	-127	( )	
	DJT HOLDINGS LLC - TRUMP CHICAGO DEVELOPMENT	-353	( )	
	DJT HOLDINGS LLC - TRUMP 106 CPS LLC	-40	( )	
	DJT HOLDINGS LLC - TRUMP RESTAURANTS LLC	-391,432	( )	
	DJT HOLDINGS LLC - WOLLMAN RINK OPERATIONS LL	-662,599	( )	
	DJT HOLDINGS LLC	-723,399	( )	
	DJT HOLDINGS LLC - TRUMP WORLD PUBLICATIONS L	-47	( )	
	DJT HOLDINGS LLC - TIHT HOLDING COMPANY LLC	-24,107	( )	
	DJT HOLDINGS LLC - FLORIDA PROPERTIES MANAGEM	-142	( )	
	DJT HOLDINGS LLC - 1094 S OCEAN AVENUE LLC	-253,746	( )	
	TRUMP CPS CORP	-126	( )	
	FIRST MEMBER INC	-271	( )	
	DJT HOLDINGS MM LLC - TRUMP PAGEANTS INC	-309	( )	
	TRUMP VILLAGE CONST CORP-DJT GR TR	-9,767	( )	
	TRUMP 845 UN MGR CORP	-1,415	( )	
	SHORE HAVEN APARTMENTS #1 INC DJT GR TR	-8,487	( )	
	TIHT MEMBER LLC	-487	( )	
	DJT HOLDINGS MM LLC - TNGC DUTCHESS COUNTY ME	-3,210	( )	
	DJT HOLDINGS MM LLC - TRUMP PANAMA HOTEL MANA	-11,262	( )	
	DJT HOLDINGS MM LLC - TRUMP SALES & LEASING C	-15	( )	
	DJT HOLDINGS MANAGING MEMBER LLC	-38,515	( )	
	DJT HOLDINGS MM LLC - TRUMP CHICAGO COMMERCIA	-35	( )	
	DJT HOLDINGS MM LLC - TRUMP SCOTSBOROUGH SQUA	-227	( )	

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 LLC - TRUMP ENDEAVOR 12 MANAG	-64,514	( )	
TAG AIR INC	-2,028,241	( )	
DJT HOLDINGS MM LLC - TRUMP VINEYARD ESTATES	-1,940	( )	
DJT HOLDINGS MM LLC - TRUMP WORLD PRODUCTIONS	-4	( )	
DJT HOLDINGS MM LLC - TRUMP NATIONAL GOLF CLU	-9,527	( )	
DJT HOLDINGS MM LLC - TRUMP VIRGINIA ACQUISIT	-754	( )	
DJT HOLDINGS MM LLC - TRUMP CHICAGO RETAIL ME	-3	( )	
DJT HOLDINGS MM LLC - THC CENTRAL RESERVATION	-1,816	( )	
DJT HOLDINGS MM LLC - THC SALES & MARKETING L	-5,425	( )	
DJT HOLDINGS MANAGING MEMBER LLC	-265,368	( )	
DT CONNECT II MEMBER CORP	-2,883	( )	
DJT HOLDINGS MM LLC - THC CHINA-TECHNICAL SER	-15	( )	
TTTT VENTURE MEMBER CORP	-530	( )	
DJT HOLDINGS MM LLC - DT LIDO TECHNICAL SERVI	-21	( )	
DJT HOLDINGS MM LLC - DT BALI TECHNICAL SERVI	-21	( )	
DJT HOLDINGS MM LLC - TNGC PINE HILL LLC	-4,279	( )	
DJT HOLDINGS MM LLC - TRUMP NATIONALGOLF CLUB	-3,001	( )	
DJT HOLDINGS MM LLCLLC TRUMP RESTAURANTS LLC	-3,632	( )	
DJT HOLDINGS MM LLCLLC - WOLLMAN RINK OPERAT	-6,693	( )	
DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO DEVEL	-4	( )	
DJT HOLDINGS MM LLCLLC - TRUMP REALTY SERVIC	-1	( )	
DJT HOLDINGS MM LLCLLC - TRUMP GOLF ACQUISIT	-3	( )	
DJT HOLDINGS MM LLCLLC - TRUMP KOREAN PROJEC	-1	( )	
DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS DEV	-10	( )	
DJT HOLDINGS MM LLCLLC TRUMP LAUDERDALES DEV	-2	( )	
DJT HOLDINGS MM LLCLLC - CHICAGO UNIT ACQUIS	-7	( )	
DJT HOLDINGS MM LLCLLC - DT VENTURE II LLC	-3	( )	
DJT HOLDINGS MM LLCLLC - TRUMP PHOENIX DEVEL	-3	( )	
DJT HOLDINGS MM LLCLLC - TRUMP WORLD PUBLICA	-1	( )	
DJT HOLDINGS MM LLCLLC - TRUMP CARIBEAN LLC	-2	( )	
DJT HOLDINGS MM LLCLLC - TRUMP ICE LLC	-404	( )	
DJT HOLDINGS MM LLCLLC - SCOTSBOROUGH SQUARE	-224	( )	
DJT HOLDINGS MM LLCLLC - TNGC BRIARCLIFF	-9,431	( )	
DJT HOLDINGS MM LLCLLC - TNGC PINE HILL LLC	-4,226	( )	
DJT HOLDINGS MM LLCLLC - TNGC DUTCHESS COUNT	-3,287	( )	
DJT HOLDINGS MM LLCLLC - TRUMP ENDEAVOR 12 L	-84,771	( )	
DJT HOLDINGS MM LLCLLC - TRUMP OLD POST OFFI	-169,398	( )	
DJT HOLDINGS MM LLCLLC - TRUMP VINEYARD ESTA	-1,919	( )	
DJT HOLDINGS MM LLCLLC - 401 MEZZ VENTURE	-88,548	( )	
DJT HOLDINGS MM LLCLLC - TRUMP LAUDERDALE DE	-2	( )	
DJT HOLDINGS MM LLCLLC - LAMINGTON FAMILY HO	-5	( )	
DJT HOLDINGS MM LLCLLC - THC HOTEL DEVELOPME	-3	( )	
DJT HOLDINGS MM LLCLLC - TRUMP WORLD PRODUCT	-4	( )	
DJT HOLDINGS MM LLCLLC - TRUMP SALES & LEASI	-15	( )	
DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO COMML	-35	( )	
DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO RETAI	-3	( )	
DJT HOLDINGS MM LLCLLC - TRUMP CAROUSEL LLC	-78	( )	
DJT HOLDINGS MM LLCLLC - WESTMINSTER HOTEL M	-1	( )	
DJT HOLDINGS MM LLCLLC - MISS UNIVERSE LLL	-151	( )	
DJT HOLDINGS MM LLCLLC - TRUMP PANAMA HOTEL	-11,148	( )	
DJT HOLDINGS MM LLCLLC - THC CHINA TECHNICAL	-15	( )	
DJT HOLDINGS MM LLCLLC - DJT ENTREPRENEUER M	-1	( )	
DJT HOLDINGS MM LLCLLC - TRUMP FERRY POINT L	-6,287	( )	
DJT HOLDINGS MM LLCLLC - TRUMP NATL GOLF CLU	-1,909	( )	
DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA ACQU	-1,342	( )	
DJT HOLDINGS MM LLCLLC - THC SALES & MARKETI	-5,246	( )	
DJT HOLDINGS MM LLCLLC - TRUMP SOHO MEMBER L	-3	( )	
555 CALIFORNIA SERVICES JV LLC	-79,343	( )	
DJT HOLDINGS LLC - T TOWER RETAIL LLC	-77,058	( )	
TRUMP FERRY POINT MEMBER CORP	-6,351	( )	
MELANIA MARKS ACCESSORIES MEMBER CORP	-16	( )	
DJT HOLDINGS MM LLCLLC - TRUMP GOLF MANAGEME	-1	( )	
DJT HOLDINGS MM LLCLLC THC CENTRAL RESERVATI	-844	( )	
DJT HOLDINGS LLC - TMG MEMBER LLC	-18	( )	
DJT HOLDINGS LLC - TRUMP KOREAN PROJECTS LLC	-40	( )	

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 LLC - DJT ENTREPRENEUR MANAGING	-1,541	( )	
	DJT HOLDINGS LLC - DJT ENTREPRENEUR MEMBER LL	-92	( )	
	DJT HOLDINGS LLC - TRUMP GOLF MANAGEMENT LLC	-40	( )	
	DJT HOLDINGS LLC - TRUMP BRAZIL LLC	-258	( )	
	TRUMP MARKS WAIKIKI CORP	-31	( )	
	DJT HOLDINGS LLC - 1125 SOUTH OCEAN LLC	-256,417	( )	
	DJT HOLDINGS MM LLCLLC - TRUMP ENTREPRENEUR	-16	( )	
	DJT HOLDINGS MM LLCLLC - TRUMP INTERNATIONAL	-25,294	( )	
	DJT OPERATIONS I LLC	-2,440	( )	
	DJT OPERATIONS II LLC	-2,124	( )	

SCHEDULE D (Form 8995-A)

Special Rules for Patrons of Agricultural or Horticultural Cooperatives

OMB No. 1545-2294

2020

Attachment Sequence No. 55E

Department of the Treasury Internal Revenue Service

Attach to Form 8995-A. Go to www.irs.gov/Form8995A for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

DONALD J & MELANIA<TRUMP

Complete Schedule D only if you're a patron of an agricultural or horticultural cooperative. If you have more than three trades, businesses, or aggregations, attach as many Schedules D as needed. See instructions.

Table with 4 columns: Description, A, B, C. Rows include Trade/business name (TRUMP PLAZA MEMBER INC), Taxpayer ID (13-3979038), and various income calculations (7,910, 712, 0).

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

Cat. No. 72683Z

Schedule D (Form 8995-A) 2020

Additional Data

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



**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

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

OMB No. 1545-0074

**2020**

Attachment  
Sequence No. **13**

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.  
▶ Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

Name(s) shown on return DONALD J & MELANIA<TRUMP	Your social security number
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**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 2020 that would require you to file Form(s) 1099? (see instructions) . . .  **Yes**  **No**

**B** If "Yes," did you or will you file all required Forms 1099? . . .  **Yes**  **No**

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

<b>A</b>	
<b>B</b>	
<b>C</b>	

1b Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b> ROYALTIES		<b>A</b>		<input type="checkbox"/>
<b>B</b> ROYALTIES		<b>B</b>		<input type="checkbox"/>
<b>C</b>		<b>C</b>		<input type="checkbox"/>

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

Income:	Properties:	A	B	C
<b>3</b> Rents received . . . . .	<b>3</b>			
<b>4</b> Royalties received . . . . .	<b>4</b>	133,173	67	
<b>Expenses:</b>				
<b>5</b> Advertising . . . . .	<b>5</b>			
<b>6</b> Auto and travel (see instructions) . . . . .	<b>6</b>			
<b>7</b> Cleaning and maintenance . . . . .	<b>7</b>			
<b>8</b> Commissions . . . . .	<b>8</b>			
<b>9</b> Insurance . . . . .	<b>9</b>			
<b>10</b> Legal and other professional fees . . . . .	<b>10</b>			
<b>11</b> Management fees . . . . .	<b>11</b>			
<b>12</b> Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>			
<b>13</b> Other interest . . . . .	<b>13</b>			
<b>14</b> Repairs . . . . .	<b>14</b>			
<b>15</b> Supplies . . . . .	<b>15</b>			
<b>16</b> Taxes . . . . .	<b>16</b>			
<b>17</b> Utilities . . . . .	<b>17</b>			
<b>18</b> Depreciation expense or depletion . . . . .	<b>18</b>			
<b>19</b> Other (list) ▶ BOOK WRITER FEE . . . . .	<b>19</b>	44,201		
<b>20</b> Total expenses. Add lines 5 through 19 . . . . .	<b>20</b>	44,201		
<b>21</b> Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b> . . . . .	<b>21</b>	88,972	67	
<b>22</b> Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) . . . . .	<b>22</b>	()	()	()
<b>23a</b> Total of all amounts reported on line 3 for all rental properties . . . . .	<b>23a</b>			
<b>b</b> Total of all amounts reported on line 4 for all royalty properties . . . . .	<b>23b</b>		133,240	
<b>c</b> Total of all amounts reported on line 12 for all properties . . . . .	<b>23c</b>			
<b>d</b> Total of all amounts reported on line 18 for all properties . . . . .	<b>23d</b>			
<b>e</b> Total of all amounts reported on line 20 for all properties . . . . .	<b>23e</b>		44,201	
<b>24</b> <b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses . . . . .	<b>24</b>			89,039
<b>25</b> <b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .	<b>25</b>			()

**26 Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . . . . .

26

89,039

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

Cat. No. 11344L

**Schedule E (Form 1040) 2020**

Schedule E (Form 1040) 2020

Attachment Sequence No. **13**

Page **2**

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. . . . .  **Yes**  **No**

28	(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	See Additional Data Table		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
B			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
C			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
D			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

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 allowed (see Schedule K1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A	See Additional Data Table				
B					
C					
D					
<b>29a</b> Totals		54,242,244			11,746,277
<b>b</b> Totals	53,800,275		27,953,754		
<b>30</b>	Add columns (h) and (k) of line 29a . . . . .				65,988,521
<b>31</b>	Add columns (g), (i), and (j) of line 29b . . . . .				(81,754,029)
<b>32</b>	<b>Total partnership and S corporation income or (loss).</b> Combine lines 30 and 31.. . . .				-15,765,508

**Part III Income or Loss From Estates and Trusts**

33	(a) Name	(b) Employer identification number
A	See Additional Data Table	
B		

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	(f) Other income from Schedule K-1
A	See Additional Data Table		
B			
<b>34a</b> Totals			
<b>b</b> Totals			
<b>35</b>	Add columns (d) and (f) of line 34a . . . . .		
<b>36</b>	Add columns (c) and (e) of line 34b . . . . .		( )
<b>37</b>	<b>Total estate and trust income or (loss).</b> Combine lines 35 and 36.. . . .		

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

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

**Part V Summary**

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below . . . . .	40	
41	<b>Total income or (loss).</b> Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5 ▶ . . . . .	41	-15,676,469
42	<b>Reconciliation of farming and fishing income.</b> Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AC; and Schedule K-1 (Form 1041), box 14, code F (see instructions) . . . . .	42	
43	<b>Reconciliation for real estate professionals.</b> If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules . . . . .	43	

Schedule E (Form 1040) 2020

**Additional Data**

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

**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
<b>A</b>	THE EAST 61 ST COMPANY	P	<input type="checkbox"/>	13-3057745	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	THE EAST 61 ST COMPANY	P	<input type="checkbox"/>	13-3057745	<input type="checkbox"/>	<input type="checkbox"/>
<b>C</b>	PARK BRIAR ASSOCIATES LLC	P	<input type="checkbox"/>	11-6160410	<input type="checkbox"/>	<input type="checkbox"/>
<b>D</b>	MAR-A-LAGO CLUB LLC	P	<input type="checkbox"/>	65-0567671	<input type="checkbox"/>	<input type="checkbox"/>
<b>E</b>	UNREIMBURSED EXPENSES	P	<input type="checkbox"/>	65-0567671	<input type="checkbox"/>	<input type="checkbox"/>
<b>F</b>	40 WALL DEVELOPMENT ASSOC LLC	P	<input type="checkbox"/>	13-3845249	<input type="checkbox"/>	<input type="checkbox"/>
<b>G</b>	HUDSON WATERFRONT ASSOC I LP	P	<input type="checkbox"/>	13-3796302	<input type="checkbox"/>	<input type="checkbox"/>
<b>H</b>	HUDSON WATERFRONT ASSOC V LP	P	<input type="checkbox"/>	13-3796322	<input type="checkbox"/>	<input type="checkbox"/>
<b>I</b>	HUDSON WATERFRONT ASSOC II LP	P	<input type="checkbox"/>	13-3796305	<input type="checkbox"/>	<input type="checkbox"/>
<b>J</b>	HUDSON WATERFRONT ASSOC III LP	P	<input type="checkbox"/>	13-3796315	<input type="checkbox"/>	<input type="checkbox"/>
<b>K</b>	HUDSON WATERFRONT ASSOC IV LP	P	<input type="checkbox"/>	13-3796319	<input type="checkbox"/>	<input type="checkbox"/>
<b>L</b>	TRUMP CPS LLC	P	<input type="checkbox"/>	13-3917414	<input type="checkbox"/>	<input type="checkbox"/>
<b>M</b>	DJT HOLDINGS LLC - MISS UNIVERSE LP LLP	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>N</b>	TRUMP PLAZA LLC	P	<input type="checkbox"/>	13-3972488	<input type="checkbox"/>	<input type="checkbox"/>
<b>O</b>	DJT HOLDINGS LLC - COUNTRY APARTMENTS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>P</b>	DJT HOLDINGS LLC - COUNTRY PROPERTIES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>Q</b>	TRUMP 845 UN LIMITED PARTNERSHIP	P	<input type="checkbox"/>	13-3958323	<input type="checkbox"/>	<input type="checkbox"/>
<b>R</b>	DJT HOLDINGS LLC - OCEAN AIR INVESTORS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>S</b>	DJT HOLDINGS LLC - OAKDALE INVESTORS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>T</b>	DJT HOLDINGS LLC TRUMP MODEL MANAGEMENT LLC (TMG MEMBER LLC)	P	<input type="checkbox"/>	13-4040286	<input type="checkbox"/>	<input type="checkbox"/>
<b>U</b>	DJT HOLDINGS LLC - TRUMP KOREAN PROJECTS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>V</b>	TIPPERARY REALTY CORP	S	<input type="checkbox"/>	11-2405629	<input type="checkbox"/>	<input type="checkbox"/>
<b>W</b>	PLAZA CONSULTING CORP	S	<input type="checkbox"/>	13-3385468	<input type="checkbox"/>	<input type="checkbox"/>
<b>X</b>	THE TRUMP CORPORATION	S	<input type="checkbox"/>	13-3038887	<input type="checkbox"/>	<input type="checkbox"/>
<b>Y</b>	UNREIMBURSED EXPENSES	S	<input type="checkbox"/>	13-3038887	<input type="checkbox"/>	<input type="checkbox"/>
<b>Z</b>	TRUMP PROJECT MANAGEMENT CORP	S	<input type="checkbox"/>	13-3775593	<input type="checkbox"/>	<input type="checkbox"/>
<b>AA</b>	TRAVEL ENTERPRISES MANAGEMENT INC	S	<input type="checkbox"/>	13-3345689	<input type="checkbox"/>	<input type="checkbox"/>
<b>AB</b>	THE TRUMP HOTEL CORP	S	<input type="checkbox"/>	13-3430478	<input type="checkbox"/>	<input type="checkbox"/>
<b>AC</b>	HELICOPTER AIR SERVICES INC	S	<input type="checkbox"/>	13-3478858	<input type="checkbox"/>	<input type="checkbox"/>
<b>AD</b>	THE TRUMP ORGANIZATION INC	S	<input type="checkbox"/>	13-3070440	<input type="checkbox"/>	<input type="checkbox"/>
<b>AE</b>	TRUMP EMPIRE STATE INC	S	<input type="checkbox"/>	13-3766196	<input type="checkbox"/>	<input type="checkbox"/>
<b>AF</b>	FIFTY-SEVEN MANAGEMENT CORP	S	<input type="checkbox"/>	13-3860845	<input type="checkbox"/>	<input type="checkbox"/>
<b>AG</b>	DJT HOLDINGS MM LLC - MAR-A-LAGO CLUBLLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>AH</b>	TRUMP CPS CORP	S	<input type="checkbox"/>	13-3917416	<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
<b>AI</b>	FIRST MEMBER INC	S	<input type="checkbox"/>	13-3914818	<input type="checkbox"/>	<input type="checkbox"/>
<b>AJ</b>	DJT HOLDINGS MM LLC - BRIARCLIFF PROPERTIES INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>AK</b>	DJT HOLDINGS MM LLC - TRUMP PAGEANTS INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>AL</b>	TRUMP PAYROLL CORP	S	<input type="checkbox"/>	13-3494471	<input type="checkbox"/>	<input type="checkbox"/>
<b>BM</b>	FLIGHTS INC	S	<input type="checkbox"/>	13-3929051	<input type="checkbox"/>	<input type="checkbox"/>
<b>BN</b>	TRUMP PLAZA MEMBER INC	S	<input type="checkbox"/>	13-3979038	<input type="checkbox"/>	<input type="checkbox"/>
<b>BO</b>	TRUMP VILLAGE CONST CORP-DJT GR TR	S	<input type="checkbox"/>	11-1993421	<input type="checkbox"/>	<input type="checkbox"/>
<b>BP</b>	TRUMP TOWER MANAGING MEMBER INC	S	<input type="checkbox"/>	13-3981225	<input type="checkbox"/>	<input type="checkbox"/>
<b>BQ</b>	TRUMP 845 UN MGR CORP	S	<input type="checkbox"/>	13-4026239	<input type="checkbox"/>	<input type="checkbox"/>
<b>BR</b>	BEACH HAVEN APARTMENTS #1 INC DJT GR TR	S	<input type="checkbox"/>	11-1681481	<input type="checkbox"/>	<input type="checkbox"/>
<b>BS</b>	SHORE HAVEN APARTMENTS #1 INC DJT GR TR	S	<input type="checkbox"/>	11-1582802	<input type="checkbox"/>	<input type="checkbox"/>
<b>BT</b>	TRUMP MANAGEMENT INC	S	<input type="checkbox"/>	11-2196835	<input type="checkbox"/>	<input type="checkbox"/>
<b>BU</b>	TRUMP PARK AVENUE LLC (DELMONICO)	P	<input type="checkbox"/>	01-0580204	<input type="checkbox"/>	<input type="checkbox"/>
<b>BV</b>	TRUMP TORONTO DEVELOPMENT INC	S	<input type="checkbox"/>	20-0005703	<input type="checkbox"/>	<input type="checkbox"/>
<b>BW</b>	STARRETT CITY ASSOCIATES	P	<input type="checkbox"/>	11-6189342	<input type="checkbox"/>	<input type="checkbox"/>
<b>BX</b>	TRUMP PARK AVENUE LLC	P	<input type="checkbox"/>	20-1908009	<input type="checkbox"/>	<input type="checkbox"/>
<b>BY</b>	DJT HOLDINGS MM LLC - TRUMP MARKS GP CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>BZ</b>	DJT HOLDINGS LLC - DJT ENTREPRENEUR MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS LLC - DJT ENTREPRENEUR MANAGING MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	TRUMP INTERNATIONAL GOLF CLUB LLC	P	<input type="checkbox"/>	65-0750446	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	UNREIMBURSED EXPENSES	P	<input type="checkbox"/>	65-0750446	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS MM LLC - TRUMP SCOTLAND MEMBER INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS LLC - TRUMP PRODUCTIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS MM LLC - TRUMP PRODUCTIONS MANAGING MEMBER INC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS LLC - TRUMP INTERNATIONAL HOTELS MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS MM LLC - TRUMP LAS OLAS MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS MM LLC - 809 NORTH CANON MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	TIHM MEMBER CORP	S	<input type="checkbox"/>	20-5074158	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DJT HOLDINGS LLC - THE TRUMP FOLLIES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	TRUMP FLORIDA MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
<b>C</b>	TIHT MEMBER LLC	S	<input type="checkbox"/>	20-5315528	<input type="checkbox"/>	<input type="checkbox"/>
<b>C</b>	TIHT COMMERCIAL LLC	P	<input type="checkbox"/>	13-4038061	<input type="checkbox"/>	<input type="checkbox"/>
<b>C</b>	DJT HOLDINGS LLC -TRUMP LAS OLAS LLC	P	<input type="checkbox"/>	27-4162308	<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 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"/>
C	DJT HOLDINGS LLC - TRUMP CANOUAN ESTATE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
C	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 HOLDINS MM LLC - TRUMP MARKS MENSWEAR MEMBER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>

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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 LLCLLC - 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"/>
D	DJT HOLDINGS LLC - TRUMP CHICAGO COMMERCIAL MANAGER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
D	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"/>

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E	DJT HOLDINGS LLC - TRUMP WINE MARKS LLC	P	<input type="checkbox"/>	27-4162308	<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"/>
E	DJT HOLDINGS MM LLC - TRUMP BOOKS MANAGER CORP	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
E	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 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"/>
F	DJT HOLDINGS LLC - TRUMP LAS VEGAS MEMBER LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
F	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"/>

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

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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"/>
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"/>
J	DJT HOLDINGS LLC - TRUMP ICE LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
J	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 LCLLC - 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 LCLLC TRUMP RESTAURANTS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	DJT HOLDINGS MM LCLLC - WOLLMAN RINK OPERATIONS 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
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"/>
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"/>
I	DT VENTURE II MEMBER CORP	S	<input type="checkbox"/>	81-1743521	<input type="checkbox"/>	<input type="checkbox"/>
I	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"/>

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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	DJT HOLDINGS MM LLCLLC - TRUMP RIVERSIDE MANAGEMENT LLC	S	<input type="checkbox"/>	27-4162256	<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"/>
K	DJT HOLDINGS MM LLCLLC TRUMP LAUDERDALES DEVELOPMENT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
K	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"/>	27-4162256	<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"/>

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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"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
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"/>
L	DJT HOLDINGS MM LLCLLC - TW VENTURE I LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	DJT HOLDINGS MM LLCLLC - TW VENTURE II LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
L	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 - 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"/>

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O	DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA ACQUISITIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINS MM LLCLLC - THC CENTRL RESERVATIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
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"/>
O	DJT HOLDINGS LLC - 124 WOODBRIDGE	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITIONS LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
O	555 CALIFORNIA SERVICES JV LLC	P	<input type="checkbox"/>	61-1895796	<input type="checkbox"/>	<input type="checkbox"/>
O	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"/>

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M	DJT HOLDINGS MM LLCLLC - TRUMP WORLD PRODUCTIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP SALES & LEASING CHICAGO LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	DJT HOLDINGS MM LLCLLC - TRUMP PRODUCTIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
M	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"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP FERRY POINT LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - EXCEL VENTURE I LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - DTTM OPERATIONS LLC	S	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>	<input type="checkbox"/>
N	DJT HOLDINGS MM LLCLLC - TRUMP NATL GOLF CLUB COLTS NECK	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 LLCLL 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"/>
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"/>
P	DJT HOLDINGS LLC - D B PACE ACQUISITION LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS - THC BAKU HOTEL MANAGER SERVICES LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - TRUMP FLORIDA MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC - F&B 40 WALL LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	DJT HOLDINGS LLC -TRUMP MIAMI RESORT MANAGEMENT LLC	P	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>	<input type="checkbox"/>
P	THCR- EXPIRED FICA TIP CREDIT	P	<input type="checkbox"/>	13-3818407	<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	12,927				
B	41				
C	11,870				
D					8,125,748
E			466,334		
F	970,894				
G		73,826			
H		4,366,825			
I		1,460,975			
J		564,993			
K		593,978			
L		288,070			
M	17,554				
N		769,711			
O	0				
P	0				
Q		228,993			
R	0				
S	0				
T	47,446				
U	47				
V		23,616			
W	139				

	(g) Passive loss allowed (attach Form 9582 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
X			9,544,653		
Y			167,239		
Z	\$8,096				
AA	\$0				
AB	\$0				
AC	\$0				
AD	\$0				
AE	\$0				
AF		98,040			
AG					8,134
AH		264			
AI	\$303				
AJ	\$0				
AK	\$362				
AL	\$0				
BM	\$0				
BN		7,910			
BO	\$13,668				
BP		126,616			
BQ	\$1,628				
BR	\$11,718				
BS	\$12,884				
BT		8,756			
BU	\$4,247				
BV	\$0				
BW	\$32,234				
BX	\$4,253				
BY	\$1,122				
BZ	\$92				
B		31			
B					2,124,230
B			281,372		
B	\$21,139				
B		210,213			
B		2,145			
B	\$2,665,524				
B	\$5				
B	\$0				
B	\$0				
B	\$49				

	(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
B	3				
C	735				
C		21,394			
C	527				
C	2,071,839				
C	2,649				
C	2,277				
C	427				
C	25				
C	25				
C	23				
C	283				
C	25				
C	13,425				
C	14				
C	0				
C	0				
C	1				
C	0				
C	301,344				
C	311				
C		4,174			
C	20				
C	1,890				
C	0				
C	2,339				
C	24				
D	4,068				
D	148,914				
D		25,739			
D	1,359				
D	70				
D	57				
D	44				
D	0				
D	357				
D	4,359				
D	1,734				
D		546,156			
D	102				

	(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
D	\$28				
D	\$11,574				
D	\$12,793				
D	\$18				
D	\$1,519				
D		4,504			
D		4,535			
D	\$1,134,316				
D	\$1,253,797				
D		448,924			
D	\$1,111				
D	\$3,394				
D	\$292				
E	\$9,984				
E		402,392			
E	\$2,727				
E	\$3				
E	\$12				
E		4,106			
E	\$25				
E	\$0				
E	\$1,908,055				
E	\$35				
E			8,766,273		
E	\$0				
E	\$25,441				
E	\$2,453				
E	\$1,285,277				
E					1,458,530
E	\$558,643				
E	\$398,676				
E		2,522,710			
E	\$291,517				
E	\$2,422				
E	\$1,611				
E	\$0				
E	\$407				
E	\$17				
E	\$25				
F	\$26				

	(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	\$260				
F		639			
F	\$64,514				
F	\$2,135,350				
F	\$2,562				
F					14,881
F	\$5				
F	\$13,055				
F	\$251,646				
F		62,692			
F	\$2,458				
F	\$25				
F	\$0				
F	\$3				
F	\$3				
F	\$26,417				
F	\$332				
F		2,135,538			
F			8,392,332		
F	\$292				
F		818,957			
F	\$18,471,078				
F	\$0				
F		1,528,020			
F		25,929			
G	\$669,153				
G	\$54,360				
G		420,498			
G	\$2,205				
G	\$1,192				
G	\$4,226				
G	\$292				
G	\$114,533				
G	\$0				
G	\$0				
G	\$13				
G		4,290			
G	\$3				
G	\$3				
G	\$555				

	(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
G	\$0				
G	\$1,997				
G	\$6,954				
G	\$0				
G	\$0				
G		4,064,771			
G		7,604,344			
G		190,807			
G	\$1,395,620				
G	\$472,332				
G		286,369			
H	\$715,065				
H	\$726,149				
H	\$0				
H	\$2,883				
H	\$20				
H	\$0				
H	\$118				
H	\$0				
H		81			
H	\$18				
H	\$5				
H	\$1,502				
H		21,789			
H		933			
H	\$77,237				
H	\$1,747				
H	\$683				
H	\$0				
H		7,871			
H	\$513				
H	\$1,441				
H	\$0				
H	\$11,567				
H		91,460			
H		11,533			
H	\$3,289,871				
I	\$285,451				
I	\$7,570,006				
I	\$33,552				

	(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
I	0				
I	0				
I	0				
I	0				
I	0				
I	0				
I	0				
I	2				
I	0				
I		8,837			
I	0				
I	28				
I	29				
I	21				
I	21				
I	23				
I	21				
I	23				
I	23				
I	289				
I	12				
I	0				
I	0				
I	6				
J		374,500			
J	362				
J	603				
J	560,144				
J	5,716				
J	0				
J	0				
J	5,700				
J	278,234				
J	652				
J	93				
J	285				
J	0				
J	2,385				
J	47				
J	576				
J	295				

	(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	402				
J	985				
J	200				
J	860				
J	343				
J	295				
J	209				
J	43,631				
J	376				
K	406				
K	49				
K	457,591				
K	663,265				
K	0				
K	0				
K		23,401,740			
K	0				
K	932,600				
K	420				
K	3,255				
K		1,934			
K	4,594				
K	6,700				
K	5				
K	2				
K	3				
K	0				
K	2				
K	0				
K	16				
K	24				
K	0				
K	10				
K	2				
K	9				
L	3				
L	3				
L	1				
L	2				
L	441				



	(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
L	25,294				
L	0				
L	257				
L		633			
L	3				
L	12,924				
L					14,733
L	5,632				
L	4,136				
L		21,571			
L			84,771		
L	0				
L		8,272			
L		15,435			
L		262			
L	186,577				
L	0				
L	12				
L		116			
L	1,430				
L		924			
M	3,805				
M		25,624			
M	0				
M	0				
M	2,547				
M			88,548		
M	5				
M	3,037				
M	0				
M	1				
M	6				
M	3				
M	0				
M	1				
M		80			
M	0				
M	0				
M	14				
M	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
M	\$2				
M	\$2				
M	\$2				
M	\$5				
M	\$18				
M		2,123			
M	\$17				
N	\$0				
N	\$0				
N	\$137				
N	\$2				
N	\$44				
N	\$35				
N	\$3				
N	\$0				
N	\$101				
N	\$7				
N	\$177				
N	\$12,664				
N	\$3				
N	\$18				
N	\$2				
N	\$1				
N	\$0				
N	\$1				
N	\$0				
N	\$1,729				
N	\$0				
N	\$75				
N	\$11,457				
N	\$549				
N	\$0				
N	\$1,909				
O	\$2,484				
O	\$0				
O	\$6,760				
O	\$44				
O	\$1,606				
O	\$0				
O	\$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
O	\$24				
O	\$27				
O		138			
O		420			
O	\$0				
O	\$24				
O	\$5				
O	\$761				
O		31,122			
O	\$53				
O	\$24,142				
O	\$290				
O	\$1,541				
O	\$157				
O	\$259,780				
O		86,064			
O		60,570			
O	\$91,653				
O	\$22				
P	\$0				
P	\$77,058				
P	\$367,936				
P		4,580			
P	\$1,157				
P		4,065			
P					21
P		1,739			
P		101,781			
P		3,597			
P	\$1,685				
P	\$2,110				
P	\$325				
P	\$361				
P	\$356				
P			162,232		

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

	(a) Name	(b) Employer identification number
<b>A</b>	DONALD J TRUMP TRUST	11-6261971
<b>B</b>	DONALD J TRUMP ELIZABETH TRUST	13-6023440

	(a) Name	(b) Employer identification number
<b>C</b>	DONALD J TRUMP 'FRED' TRUST	13-6023441
<b>D</b>	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			

**SCHEDULE H  
(Form 1040)**

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](http://www.irs.gov/ScheduleH) for instructions and the latest information.**

OMB No. 1545-1971

**2020**

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 2020 don't have to complete this form for 2020.

- A** Did you pay **any one** household employee cash wages of \$2,200 or more in 2020? (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 1a.
  - No.** Go to line B.
- B** Did you withhold federal income tax during 2020 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 2019 or 2020 to **all** household employees? (**Don't** count cash wages paid in 2019 or 2020 to your spouse, your child under age 21, or your parent.)
  - No. Stop.** Don't file this schedule.
  - Yes.** Skip lines 1a-9 and go to line 10.

**Part I Social Security, Medicare, and Federal Income Taxes**

<b>1a</b>	Total cash wages subject to social security tax . . . . .	<b>1a</b>	20,280
<b>b</b>	Qualified sick and family wages included on line 1a . . . . .	<b>1b</b>	
<b>2a</b>	Social security tax. Multiply line 1a by 12.4% (0.124) . . . . .	<b>2a</b>	2,515
<b>b</b>	Employer share of social security tax on qualified sick and family leave wages. Multiply line 1b by 6.2% (0.062) . . . . .	<b>2b</b>	
<b>c</b>	Total social security tax. Subtract line 2b from line 2a . . . . .	<b>2c</b>	2,515
<b>3</b>	Total cash wages subject to Medicare tax . . . . .	<b>3</b>	20,280
<b>4</b>	Medicare tax. Multiply line 3 by 2.9% (0.029) . . . . .	<b>4</b>	588
<b>5</b>	Total cash wages subject to Additional Medicare Tax withholding . . . . .	<b>5</b>	
<b>6</b>	Additional Medicare Tax withholding. Multiply line 5 by 0.9% (0.009) . . . . .	<b>6</b>	
<b>7</b>	Federal income tax withheld, if any . . . . .	<b>7</b>	962
<b>8a</b>	Total social security, Medicare, and federal income taxes. Add lines 2c, 4, 6, and 7 . . . . .	<b>8a</b>	4,065
<b>b</b>	Nonrefundable portion of credit for qualified sick and family leave wages from Worksheet 3 . . . . .	<b>8b</b>	
<b>c</b>	Total social security, Medicare, and federal income taxes after nonrefundable credit. Subtract line 8b from line 8a . . . . .	<b>8c</b>	4,065
<b>d</b>	Maximum amount of the employer share of social security tax that can be deferred; see instructions.	<b>8d</b>	1,258
<b>e</b>	Refundable portion of credit for qualified sick and family leave wages from Worksheet 3 . . . . .	<b>8e</b>	
<b>f</b>	Qualified sick leave wages . . . . .	<b>8f</b>	

f Qualified sick leave wages . . . . .	8f	
g Qualified health plan expenses allocable to qualified sick leave wages . . . . .	8g	
h Qualified family leave wages . . . . .	8h	
i Qualified health plan expenses allocable to qualified family leave wages . . . . .	8i	

9 Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2019 or 2020 to **all** household employees? (**Don't** count cash wages paid in 2019 or 2020 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Include the amount from line 8c above on Schedule 2 (Form 1040), line 7a. Include the amount, if any, from line 8e, on Schedule 3 (Form 1040), line 12b. If you're not required to file Form 1040, see the line 9 instructions.
- Yes.** Go to line 10.

**Part II Federal Unemployment (FUTA) Tax**

	Yes	No
<b>10</b> 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"/>
<b>11</b> Did you pay all state unemployment contributions for 2020 by April 15, 2021? Fiscal year filers, see instructions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>12</b> 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**

<b>13</b> Name of the state where you paid unemployment contributions	NY	
<b>14</b> Contributions paid to your state unemployment fund	14	1,019
<b>15</b> Total cash wages subject to FUTA tax	<b>15</b>	16,480
<b>16</b> FUTA tax. Multiply line 15 by 0.6% (0.006). Enter the result here, skip Section B, and go to line 25	<b>16</b>	99

**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					
<b>18</b> Totals						<b>18</b>		
<b>19</b> Add columns (g) and (h) of line 18						<b>19</b>		
<b>20</b> Total cash wages subject to FUTA tax (see the line 15 instructions)							<b>20</b>	
<b>21</b> Multiply line 20 by 6.0% (0.06)							<b>21</b>	
<b>22</b> Multiply line 20 by 5.4% (0.054)						<b>22</b>		
<b>23</b> Enter the <b>smaller</b> 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)							<b>23</b>	
<b>24</b> FUTA tax. Subtract line 23 from line 21. Enter the result here and go to line 25							<b>24</b>	

**Part III Total Household Employment Taxes**

<b>25</b> Enter the amount from line 8c. If you checked the "Yes" box on line C of page 1, enter -0-	<b>25</b>	4,065
<b>26</b> Add line 16 (or line 24) and line 25	<b>26</b>	4,164
<b>27</b> Are you required to file Form 1040? <input checked="" type="checkbox"/> <b>Yes. Stop.</b> Include the amount from line 26 above on Schedule 2 (Form 1040), line 7a. Include the amount, if any, from line 8e, on Schedule 3 (Form 1040), line 12b. <b>Don't</b> complete Part IV below. <input type="checkbox"/> <b>No.</b> 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 \_\_\_\_\_

<b>Paid Preparer Use Only</b>	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.	

## Additional Data

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**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP

**Employer Name Control:** TRUM



SCHEDULE SE (Form 1040)

Self-Employment Tax

OMB No. 1545-0074

2020

Attachment Sequence No. 17

Department of the Treasury Internal Revenue Service (99)

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

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

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

Social security number of person with self-employment income

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, see instructions for how to report your income and 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.

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

Table with 2 columns: Description and Amount. Row 1a: Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Row 1b: 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.

Skip line 2 if you use the nonfarm optional method in Part II. See instructions.

Table with 2 columns: Description and Amount. Row 2: Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). Row 3: Combine lines 1a, 1b, and 2. Row 4a: If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Row 4b: If you elect one or both of the optional methods, enter the total of lines 15 and 17 here. Row 4c: Combine lines 4a and 4b. If less than \$400, stop; you don't owe self-employment tax.

Table with 2 columns: Description and Amount. Row 5a: Enter your church employee income from Form W-2. Row 5b: Multiply line 5a by 92.35% (0.9235). Row 6: Add lines 4c and 5b.

Table with 2 columns: Description and Amount. Row 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 2020.

Table with 2 columns: Description and Amount. Row 8a: Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. Row 8b: Unreported tips subject to social security tax from Form 4137, line 10. Row 8c: Wages subject to social security tax from Form 8919, line 10. Row 8d: Add lines 8a, 8b, and 8c.

Table with 2 columns: Description and Amount. Row 9: Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11.

Table with 2 columns: Description and Amount. Row 10: Multiply the smaller of line 6 or line 9 by 12.4% (0.124).

Table with 2 columns: Description and Amount. Row 11: Multiply line 6 by 2.9% (0.029).

Table with 2 columns: Description and Amount. Row 12: Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4.

Table with 2 columns: Description and Amount. Row 13: Deduction for one-half of self-employment tax. Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040), line 14.

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

Farm Optional Method. You may use this method only if (a) your gross farm income1 wasn't more than \$8,460, or (b) your net farm profits2 were less than \$6,107.

Table with 2 columns: Description and Amount. Row 14: Maximum income for optional methods.

Table with 2 columns: Description and Amount. Row 15: Enter the smaller of: two-thirds (2/3) of gross farm income1 (not less than zero) or \$5,640. Also include this amount on line 4b above.

Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits3 were less than \$6,107 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.

Table with 2 columns: Description and Amount. Row 16: Subtract line 15 from line 14.

Table with 2 columns: Description and Amount. Row 17: Enter the smaller of: two-thirds (2/3) of gross nonfarm income4 (not less than zero) or the amount on line 16. Also include this amount on line 4b above.

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.



**Part III Maximum Deferral of Self-Employment Tax Payments**

If line 4c is zero, skip lines 18 through 20, and enter -0- on line 21.

<b>18</b>	Enter the portion of line 3 that can be attributed to March 27, 2020, through December 31, 2020 . . . .	<b>18</b>	
<b>19</b>	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from line 18	<b>19</b>	
<b>20</b>	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December 31, 2020	<b>20</b>	
<b>21</b>	Combine lines 19 and 20. . . . .	<b>21</b>	
If line 5b is zero, skip line 22 and enter -0- on line 23.			
<b>22</b>	Enter the portion of line 5a that can be attributed to March 27, 2020, through December 31, 2020 . . . .	<b>22</b>	
<b>23</b>	Multiply line 22 by 92.35% (0.9235). . . . .	<b>23</b>	
<b>24</b>	Add lines 21 and 23 . . . . .	<b>24</b>	
<b>25</b>	Enter the smaller of line 9 or line 24 . . . . .	<b>25</b>	
<b>26</b>	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (Form 1040)	<b>26</b>	

Schedule SE (Form 1040) 2020

**Additional Data**

**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP



**Statement SBE  
Supplemental Business Expenses**

**2020**

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		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 1 .....	4	10,605.		
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	10,605.		

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	10,605.		
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	10,605.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....			10	10,605.

**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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

Your name <b>DONALD J. TRUMP</b>	Social security number	Business in which expenses were incurred <b>40 WALL DEVELOPMENT ASSOC, LLC</b>
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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 <b>did not</b> involve overnight travel .....	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3			
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment ..... SEE STATEMENT 2	4	4,420,840.		
5 Meals expenses .....	5			
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	4,420,840.		

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 <b>not</b> 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	4,420,840.		
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	4,420,840.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....			10	4,420,840.

**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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

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

<b>STEP 1 Enter Your Expenses</b>	<b>Column A Other Than Meals and Entertainment</b>	<b>Column B Meals and Entertainment</b>
1 Vehicle expense from line 22 or line 29 .....	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that <b>did not</b> involve overnight travel .....	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3	
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment <b>SEE STATEMENT 3</b> .....	4	98,470.
5 Meals expenses .....	5	
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	98,470.

**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 <b>not</b> 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	98,470.
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	98,470.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....	10	98,470.

**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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

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	51,337.		
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	51,337.		

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	51,337.		
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	51,337.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses			10	51,337.

**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 2020 .....	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 57.5¢ (0.575). 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 <b>smaller</b> 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**

**2020**

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

<b>STEP 1 Enter Your Expenses</b>	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 <b>did not</b> involve overnight travel .....	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3	
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment ..... <b>SEE STATEMENT 16</b>	4	2,451.
5 Meals expenses .....	5	
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	2,451.

**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 <b>not</b> 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	2,451.
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	2,451.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....	10	2,451.

<b>Part II Vehicle Expenses</b>			
<b>Section A. - General Information</b>		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service .....	11	
12	Total miles vehicle was driven during 2020 .....	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 57.5¢ (0.575). Enter the result here and on line 1 .....	22	
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<b>Section C. - Actual Expenses</b>		(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	

**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 2020 .....	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 57.5¢ (0.575). 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 <b>smaller</b> 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**

**2020**

Your name <b>DONALD J. TRUMP</b>	Social security number	Business in which expenses were incurred <b>MAR-A-LAGO CLUB LLC</b>
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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 15 .....	4	466,334.		
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	466,334.		

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	466,334.		
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	466,334.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....			10	466,334.



**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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

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

<b>STEP 1 Enter Your Expenses</b>	<b>Column A Other Than Meals and Entertainment</b>	<b>Column B Meals and Entertainment</b>
1 Vehicle expense from line 22 or line 29 .....	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that <b>did not</b> involve overnight travel .....	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3	
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment ..... <span style="margin-left: 150px;">SEE STATEMENT 7</span>	4	13,338.
5 Meals expenses .....	5	
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	13,338.

**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 <b>not</b> 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	13,338.
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	13,338.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....	10	13,338.

# Statement SBE Supplemental Business Expenses

# 2020

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

<b>STEP 1 Enter Your Expenses</b>	<b>Column A Other Than Meals and Entertainment</b>		<b>Column B Meals and Entertainment</b>	
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	189,919.		
5 Meals expenses .....	5			
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	189,919.		

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	189,919.		
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	189,919.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....			10	189,919.

**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 2020 .....	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 57.5¢ (0.575). 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 <b>smaller</b> 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**

**2020**

Your name <b>DONALD J. TRUMP</b>	Social security number	Business in which expenses were incurred <b>TRUMP PALACE/PARC LLC</b>
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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 <b>did not</b> involve overnight travel .....	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3			
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment <b>SEE STATEMENT 6</b> .....	4	45,600.		
5 Meals expenses .....	5			
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	45,600.		

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 <b>not</b> 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	45,600.		
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	45,600.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....			10	45,600.

**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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

Your name <b>DONALD J. TRUMP</b>	Social security number	Business in which expenses were incurred <b>THE TRUMP CORPORATION</b>
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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 8	4	167,239.		
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	167,239.		

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	167,239.		
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	167,239.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....			10	167,239.

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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

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

<b>STEP 1 Enter Your Expenses</b>	<b>Column A</b> Other Than Meals and Entertainment	<b>Column B</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 .....	9,692.	
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 .....	9,692.	

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	9,692.
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	9,692.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....	10	9,692.

**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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

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

<b>STEP 1 Enter Your Expenses</b>	<b>Column A Other Than Meals and Entertainment</b>	<b>Column B Meals and Entertainment</b>
1 Vehicle expense from line 22 or line 29 .....	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that <b>did not</b> involve overnight travel .....	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3	
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment <b>SEE STATEMENT 10</b> .....	66,560.	
5 Meals expenses .....	5	
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	66,560.	

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 <b>not</b> 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	66,560.
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	66,560.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....	10	66,560.

<b>Part II Vehicle Expenses</b>			
<b>Section A. - General Information</b>		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service .....	11	
12	Total miles vehicle was driven during 2020 .....	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 57.5¢ (0.575). Enter the result here and on line 1 .....	22	
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<b>Section C. - Actual Expenses</b>		(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**

**2020**

Your name <b>DONALD J. TRUMP</b>	Social security number	Business in which expenses were incurred <b>TRUMP PARK AVENUE LLC (DELMONICO)</b>
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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 <b>did not</b> involve overnight travel .....	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3			
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment ..... <span style="margin-left: 200px;">SEE STATEMENT 11</span>	4	5,082.		
5 Meals expenses .....	5			
6 <b>Total expenses.</b> 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 <b>not</b> 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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

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

<b>STEP 1 Enter Your Expenses</b>	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 <b>did not</b> involve overnight travel .....	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3	
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment <b>SEE STATEMENT 12</b> .....	5,091.	
5 Meals expenses .....	5	
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	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 <b>not</b> 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	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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

Your name <b>DONALD J. TRUMP</b>	Social security number	Business in which expenses were incurred <b>TIHT COMMERCIAL LLC</b>
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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 <b>did not</b> involve overnight travel .....	2			
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3			
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment <b>SEE STATEMENT 13</b> .....	4	823.		
5 Meals expenses .....	5			
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	823.		

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 <b>not</b> 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	823.		
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	823.		
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....			10	823.

**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 2020 .....	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 57.5¢ (0.575). 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**

**2020**

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

<b>STEP 1 Enter Your Expenses</b>	<b>Column A Other Than Meals and Entertainment</b>	<b>Column B Meals and Entertainment</b>
1 Vehicle expense from line 22 or line 29 .....	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that <b>did not</b> involve overnight travel .....	2	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. <b>Do not</b> include meals and entertainment .....	3	
4 Business expenses not included on lines 1 through 3. <b>Do not</b> include meals and entertainment ..... <b>SEE STATEMENT 14</b>	4	281,372.
5 Meals expenses .....	5	
6 <b>Total expenses.</b> In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 .....	6	281,372.

**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 <b>not</b> 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	281,372.
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	281,372.
10 Add the amounts on line 9 of both columns and enter the total here. These are your supplemental business expenses .....	10	281,372.

<b>Part II Vehicle Expenses</b>			
<b>Section A. - General Information</b>		(a) Vehicle	(b) Vehicle
11	Enter the date vehicle was placed in service .....	11	
12	Total miles vehicle was driven during 2020 .....	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 57.5¢ (0.575). Enter the result here and on line 1 .....	22	
----	--	----	--

<b>Section C. - Actual Expenses</b>		(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 <b>smaller</b> 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	

**Additional Data**

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

**Top Right Margin - Refund Product Code:** NO FINANCIAL PRODUCT  
**Header - Primary Name Control:** TRUM  
**Header - Spouse Name Control:** TRUM  
**Standard Deduction - Total Exempt Primary And Spouse Cnt:** 2  
**Age/Blindness - Total Boxes Checked Count:** 1  
**Dependents - Children Who Lived With You Count:** 1  
**Dependents - Total Exemptions Count:** 3  
**Dependent 1 Name Control:** TRUM  
**Line 25a - Form W-2 Tax Withheld:** 83916  
**Line 25c - Other Tax Withheld:** 1733

Form **1116**

**Foreign Tax Credit**

OMB No. 1545-0121

Department of the Treasury  
Internal Revenue Service (99)

(Individual, Estate, or Trust)  
▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.  
▶ Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.

**2020**  
Attachment  
Sequence No. 19

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)**

Total i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			(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):				
	7,436			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"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	71,507			
3 Pro rata share of other deductions <b>not definitely related:</b>				
a Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555	18,555	
b Other deductions (attach statement) . . . . .				
c Add lines 3a and 3b . . . . .	18,555	18,555	18,555	
d Gross foreign source income (see instructions) . . . . .	7,436			
e Gross income from all sources (see instructions) . . . . .	78,427,629	78,427,629	78,427,629	
f Divide line 3d by line 3e (see instructions) . . . . .	0.00009	0.00000	0.00000	
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 . . . . .	71,509			6

Total i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			(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):				
		156,984		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"/>				

<b>Deductions and losses (Caution: See instructions.):</b>			
2	Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .		20,298
3	Pro rata share of other deductions <b>not definitely related:</b>		
a	Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555 18,555
b	Other deductions (attach statement) . . . . .		
c	Add lines 3a and 3b . . . . .	18,555	18,555 18,555
d	Gross foreign source income (see instructions) . . . . .		156,904
e	Gross income from all sources (see instructions) . . . . .	78,427,629	78,427,629 78,427,629
f	Divide line 3d by line 3e (see instructions) . . . . .	0.00000	0.00200 0.00000
g	Multiply line 3c by line 3f . . . . .		37
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 . . . . .		20,335 6

Total	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	G CH	H RN	I DR	
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
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"/>				

<b>Deductions and losses (Caution: See instructions.):</b>			
2	Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .		57,722
3	Pro rata share of other deductions <b>not definitely related:</b>		
a	Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555 18,555
b	Other deductions (attach statement) . . . . .		
c	Add lines 3a and 3b . . . . .	18,555	18,555 18,555
d	Gross foreign source income (see instructions) . . . . .		
e	Gross income from all sources (see instructions) . . . . .	78,427,629	78,427,629 78,427,629
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 . . . . .			722 6

Total		Foreign Country or U.S. Possession		
		J	K	L
Enter the name of the foreign country or U.S. possession . . . . .		OC		
1a	Gross income from sources within country shown above and of the type checked above (see instructions):			
	-----			
	-----	-164,420		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 <b>definitely related</b> to the income on line 1a (attach statement) . . . . .			
3	Pro rata share of other deductions <b>not definitely related</b> :			
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 . . . . .		-92,566	6

**Form 1116, Part II - Foreign Taxes Paid or Accrued**

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	(p) Other foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))	
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 41,655



Form <b>1116</b> Department of the Treasury Internal Revenue Service (69)	<b>Foreign Tax Credit</b> (Individual, Estate, or Trust) Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T. Go to <a href="http://www.irs.gov/Form1116">www.irs.gov/Form1116</a> for instructions and the latest information.	OMB No. 1545-0121 <b>2020</b> Attachment Sequence No. 19
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)**

Total	Foreign Country or U.S. Possession			
	A	B	C	
i Enter the name of the foreign country or U.S. possession . . . . . ▶	OC	UK	CH	(Add cols. A, B, and C.)
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
14,500,097	1,220,974	8,798,494	16	<b>1a</b>
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"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	309,654	21,153,884	813	
3 Pro rata share of other deductions <b>not definitely related:</b>				
a Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555	8,555	
b Other deductions (attach statement) . . . . .				
c Add lines 3a and 3b . . . . .	8,555	8,555	8,555	
d Gross foreign source income (see instructions) . . . . .	1,220,974	8,798,494	16	
e Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564	78,045,564	
f Divide line 3d by line 3e (see instructions) . . . . .	0.01564	0.11274	0.00000	
g Multiply line 3c by line 3f . . . . .	134	964		
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 . . . . .	309,788	21,154,848	813	<b>6</b>
29,675,102				

Total	Foreign Country or U.S. Possession			
	D	E	F	
i Enter the name of the foreign country or U.S. possession . . . . . ▶	DR	PM	AE	(Add cols. A, B, and C.)
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
14,500,097			431,392	<b>1a</b>
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"/>				

<b>Deductions and losses (Caution: See instructions.):</b>			
<b>2</b> Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	730	52	2,000
<b>3</b> Pro rata share of other deductions <b>not definitely related:</b>			
<b>a</b> Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555	8,555
<b>b</b> Other deductions (attach statement) . . . . .			
<b>c</b> Add lines 3a and 3b . . . . .	8,555	8,555	8,555
<b>d</b> Gross foreign source income (see instructions) . . . . .			431,392
<b>e</b> Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564	78,045,564
<b>f</b> Divide line 3d by line 3e (see instructions) . . . . .	0.00000	0.00000	0.00553
<b>g</b> Multiply line 3c by line 3f . . . . .			47
<b>4</b> Pro rata share of interest expense (see instructions):			
<b>a</b> Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) . . . . .			
<b>b</b> Other interest expense . . . . .			
<b>5</b> Losses from foreign sources . . . . .			
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5 . . . . .	730	52	2,047

29,675,102

Total	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	G	H	I	
<b>Enter the name of the foreign country or U.S. possession</b> . . . . .	RQ	CA	IN	
<b>1a</b> Gross income from sources within country shown above and of the type checked above (see instructions):				
				7,650 <b>1a</b>

14,500,097

**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) . . . . .

<b>Deductions and losses (Caution: See instructions.):</b>			
<b>2</b> Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	52		293
<b>3</b> Pro rata share of other deductions <b>not definitely related:</b>			
<b>a</b> Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555	8,555
<b>b</b> Other deductions (attach statement) . . . . .			
<b>c</b> Add lines 3a and 3b . . . . .	8,555	8,555	8,555
<b>d</b> Gross foreign source income (see instructions) . . . . .			7,650
<b>e</b> Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564	78,045,564
<b>f</b> Divide line 3d by line 3e (see instructions) . . . . .	0.00000	0.00000	0.00010
<b>g</b> Multiply line 3c by line 3f . . . . .			1
<b>4</b> Pro rata share of interest expense (see instructions):			
<b>a</b> 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 . . . . .	52		294
	29,675,102		6

Total Enter the name of the foreign country or U.S. possession . . . . .	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	J IS	K ID	L EI	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
			3,868,785	1a
	14,500,097			
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"/>

<b>Deductions and losses (Caution: See instructions.):</b>			
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .		20	8,111,419
3 Pro rata share of other deductions <b>not definitely related:</b>			
a Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555	8,555
b Other deductions (attach statement) . . . . .			
c Add lines 3a and 3b . . . . .	8,555	8,555	8,555
d Gross foreign source income (see instructions) . . . . .			3,868,785
e Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564	78,045,564
f Divide line 3d by line 3e (see instructions) . . . . .	0.00000	0.00000	0.04957
g Multiply line 3c by line 3f . . . . .			424
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 . . . . .		20	8,111,843
	29,675,102		6

Total Enter the name of the foreign country or U.S. possession . . . . .	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	M TU	N UY	O OC	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
	8,366		164,420	1a
	14,500,097			
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"/>

<b>Deductions and losses (Caution: See instructions.):</b>			
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	52	2,017	
3 Pro rata share of other deductions <b>not definitely related:</b>			
a Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555	

b Other deductions (attach statement) . . . . .			
c Add lines 3a and 3b . . . . .	8,555	8,555	
d Gross foreign source income (see instructions) . . . . .	8,366		
e Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564	
f Divide line 3d by line 3e (see instructions) . . . . .	0.00011	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 . . . . .	53	2,017	92,545
29,675,102			
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 . . . . .			7 -15,175,005

**Part II Foreign Taxes Paid or Accrued** (see instructions)

Country	Credit is claimed for taxes (you must check one) <input checked="" type="checkbox"/> Paid <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								(u) Total foreign taxes paid or accrued (add cols. (q) through (t))	
		In foreign currency				In U.S. dollars					
		(l) Date paid or accrued			(p) Other foreign taxes paid or accrued	(t) Other foreign taxes paid or accrued					
(m) Dividends	(n) Rents and royalties	(o) Interest	(q) Dividends	(r) Rents and royalties	(s) Interest	(k)	(j)	(i)	(h)		
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 84,895

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

**Foreign Tax Credit**  
 (Individual, Estate, or Trust)

OMB No. 1545-0121

**2020**  
 Attachment  
 Sequence No. **19**

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

Name: DONALD J & MELANIA<TRUMP  
 Identification 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)**

Total	Foreign Country or U.S. Possession			
	A	B	C	
i Enter the name of the foreign country or U.S. possession . . . . . ▶	OC	AJ	PM	(Add cols. A, B, and C.)
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
	7,436			<b>1a</b>
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"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	71,507			
3 Pro rata share of other deductions <b>not definitely related:</b>				
a Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555	8,555	
b Other deductions (attach statement) . . . . .				
c Add lines 3a and 3b . . . . .	8,555	8,555	8,555	
d Gross foreign source income (see instructions) . . . . .	7,436			
e Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564	78,045,564	
f Divide line 3d by line 3e (see instructions) . . . . .	0.00010	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 . . . . .	71,508			<b>6</b>

Total	Foreign Country or U.S. Possession			
	D	E	F	
i Enter the name of the foreign country or U.S. possession . . . . . ▶	IN	CA	QA	(Add cols. A, B, and C.)
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
		156,984		<b>1a</b>
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"/>				

<b>Deductions and losses (Caution: See instructions.):</b>			
<b>2</b>	Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .		20,298
<b>3</b>	<b>Pro rata share of other deductions not definitely related:</b>		
<b>a</b>	Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555 8,555
<b>b</b>	Other deductions (attach statement) . . . . .		
<b>c</b>	Add lines 3a and 3b . . . . .	8,555	8,555 8,555
<b>d</b>	Gross foreign source income (see instructions) . . . . .		156,984
<b>e</b>	Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564 78,045,564
<b>f</b>	Divide line 3d by line 3e (see instructions) . . . . .	0.00000	0.00201 0.00000
<b>g</b>	Multiply line 3c by line 3f . . . . .		17
<b>4</b>	<b>Pro rata share of interest expense (see instructions):</b>		
<b>a</b>	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) . . . . .		
<b>b</b>	Other interest expense . . . . .		
<b>5</b>	Losses from foreign sources . . . . .		
<b>6</b>	Add lines 2, 3g, 4a, 4b, and 5 . . . . .		20,315 <b>6</b>

Total Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	G CH	H RN	I DR	
<b>1a</b> Gross income from sources within country shown above and of the type checked above (see instructions):				<b>1a</b>
<b>b</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"/>				

<b>Deductions and losses (Caution: See instructions.):</b>			
<b>2</b>	Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .		27,222
<b>3</b>	<b>Pro rata share of other deductions not definitely related:</b>		
<b>a</b>	Certain itemized deductions or standard deduction (see instructions) . . . . .	8,555	8,555 8,555
<b>b</b>	Other deductions (attach statement) . . . . .		
<b>c</b>	Add lines 3a and 3b . . . . .	8,555	8,555 8,555
<b>d</b>	Gross foreign source income (see instructions) . . . . .		
<b>e</b>	Gross income from all sources (see instructions) . . . . .	78,045,564	78,045,564 78,045,564
<b>f</b>	Divide line 3d by line 3e (see instructions) . . . . .	0.00000	0.00000 0.00000
<b>g</b>	Multiply line 3c by line 3f . . . . .		
<b>4</b>	<b>Pro rata share of interest expense (see instructions):</b>		
<b>a</b>	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 . . . . .	52		295
29,676,944			6

Total	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	J IS	K ID	L 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):				
-----			3,868,785	1a
-----				
14,500,097				
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 <b>definitely related</b> to the income on line 1a (attach statement) . . . . .		20	111,419
3 Pro rata share of other deductions <b>not definitely related</b> :			
a Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555	18,555
b Other deductions (attach statement) . . . . .			
c Add lines 3a and 3b . . . . .	18,555	18,555	18,555
d Gross foreign source income (see instructions) . . . . .			3,868,785
e Gross income from all sources (see instructions) . . . . .	76,427,629	78,427,629	78,427,629
f Divide line 3d by line 3e (see instructions) . . . . .	0.00000	0.00000	0.04933
g Multiply line 3c by line 3f . . . . .			915
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 . . . . .		20	6,112,334
29,676,944			6

Total	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	M TU	N UY	O OC	
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):				
-----			154,420	1a
-----				
14,500,097				
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 <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	52	2,017	
3 Pro rata share of other deductions <b>not definitely related</b> :			
a Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555	

<b>Deductions and losses (Caution: See instructions.):</b>			
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	730	52	2,000
3 Pro rata share of other deductions <b>not definitely related:</b>			
a Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555	18,555
b Other deductions (attach statement) . . . . .			
c Add lines 3a and 3b . . . . .	18,555	18,555	18,555
d Gross foreign source income (see instructions) . . . . .			431,392
e Gross income from all sources (see instructions) . . . . .	78,427,629	78,427,629	78,427,629
f Divide line 3d by line 3e (see instructions) . . . . .	0.0000	0.0000	0.0050
g Multiply line 3c by line 3f . . . . .			102
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 . . . . .	730	52	2,102
29,676,944			

**Foreign Country or U.S. Possession**

<b>Total</b>	<b>G</b>	<b>H</b>	<b>I</b>	(Add cols. A, B, and C.)
<b>1 Enter the name of the foreign country or U.S. possession</b> . . . . .	RQ	CA	IN	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
-----				
-----			7,650	<b>1a</b>
14,500,097				
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"/>				

<b>Deductions and losses (Caution: See instructions.):</b>			
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	52		293
3 Pro rata share of other deductions <b>not definitely related:</b>			
a Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555	18,555
b Other deductions (attach statement) . . . . .			
c Add lines 3a and 3b . . . . .	18,555	18,555	18,555
d Gross foreign source income (see instructions) . . . . .			7,650
e Gross income from all sources (see instructions) . . . . .	78,427,629	78,427,629	78,427,629
f Divide line 3d by line 3e (see instructions) . . . . .	0.0000	0.0000	0.0001
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 deductions (attach statement) . . . . .			
c	Add lines 3a and 3b . . . . .	18,555	18,555	
d	Gross foreign source income (see instructions) . . . . .	8,366		
e	Gross income from all sources (see instructions) . . . . .	78,427,629	78,427,629	
f	Divide line 3d by line 3e (see instructions) . . . . .	0.00011	0.00000	
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 . . . . .	54	2,017	92,566
				<b>6</b>
		29,675,944		
7	Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 . . . . .			<b>7</b> -15,176,847

**Part II Foreign Taxes Paid or Accrued (see instructions)**

Country	Credit is claimed for taxes (you must check one) <input checked="" type="checkbox"/> Paid <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** 84,895

For Paperwork Reduction Act Notice, see instructions. Cat. No. 11440U Form **1116** (2020)



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

**Foreign Tax Credit**  
 (Individual, Estate, or Trust)

OMB No. 1545-0121  
**2020**  
 Attachment  
 Sequence No. **19**

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

Name: DONALD J & MELANIA-C 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)**

Total	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession . . . . . ▶	OC	UK	CH	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
	1,220,974	8,798,494	16	<b>1a</b>
14,500,097				
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"/>				
<b>Deductions and losses (Caution: See instructions.):</b>				
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement) . . . . .	309,654	21,153,864	813	
3 Pro rata share of other deductions <b>not definitely related:</b>				
a Certain itemized deductions or standard deduction (see instructions) . . . . .	18,555	18,555	18,555	
b Other deductions (attach statement) . . . . .				
c Add lines 3a and 3b . . . . .	18,555	18,555	18,555	
d Gross foreign source income (see instructions) . . . . .	1,220,974	8,798,494	16	
e Gross income from all sources (see instructions) . . . . .	78,427,629	78,427,629	78,427,629	
f Divide line 3d by line 3e (see instructions) . . . . .	0.01557	0.11219	0.00005	
g Multiply line 3c by line 3f . . . . .	289	2,082		
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 . . . . .	309,943	21,155,966	813	<b>6</b>
29,676,944				

Total	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	D	E	F	
i Enter the name of the foreign country or U.S. possession . . . . . ▶	DR	PM	AE	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
			431,392	<b>1a</b>
14,500,097				
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"/>				

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. (a) through (t))	
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest		(q) Dividends	(r) Rents and royalties	(s) Interest			
A	12-31-2020										2,365	2,365
B	12-31-2020											
C	12-31-2020											
D	12-31-2020											
E	12-31-2020										39,303	39,303
F	12-31-2020											
G	12-31-2020											
H	12-31-2020											
I	12-31-2020										17	17
J	12-31-2020											

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	41,685	
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	0	16,681
11	Add lines 9 and 10 . . . . .	11	58,366	
12	Reduction in foreign taxes (see instructions) . . . . .	12	( )	
13	Taxes reclassified under high tax kickout (see instructions) . . . . .	13	-41,685	
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 24. However, if you are filing more than one Form 1116, you must complete line 20.) . . . . .	17		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. 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	0	
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 16 and Schedule 2 (Form 1040), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 16 and Schedule 2 (Form 1040), line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 . . . . . 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	Increase in Limitation (section 960(c)) . . . . .	22		
23	Add lines 21 and 22 . . . . .	23		
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV (see instructions) . . . . .	24		0

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

25	Credit for taxes on section 951A category income . . . . .	25		
26	Credit for taxes on foreign branch category income . . . . .	26		
27	Credit for taxes on passive category income . . . . .	27		
28	Credit for taxes on general category income . . . . .	28		
29	Credit for taxes on section 901(j) income . . . . .	29		
30	Credit for taxes on certain income re-sourced by treaty . . . . .	30		
31	Credit for taxes on lump-sum distributions . . . . .	31		
32	Add lines 25 through 31 . . . . .	32		0
33	Enter the smaller of line 20 or line 32 . . . . .	33		0
34	Reduction of credit for international boycott operations. See instructions for line 12 . . . . .	34		
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a . . . . .	35		0

Additional Data

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

b	Other interest expense . . . . .			
5	Losses from foreign sources . . . . .			
6	Add lines 2, 3g, 4a, 4b, and 5 . . . . .			722 6

Total	Foreign Country or U.S. Possession			(Add cols. A, B, and C.)
	J	K	L	
Enter the name of the foreign country or U.S. possession . . . . .	OC			
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
	-164,420			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 <b>definitely related</b> to the income on line 1a (attach statement) . . . . .			
3	Pro rata share of other deductions <b>not definitely related</b> :			
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 . . . . .		-92,545	6

**Form 1116, Part II - Foreign Taxes Paid or Accrued**

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

Country	Foreign Taxes Paid or Accrued (see instructions)										
	Credit is claimed for taxes (you must check one)	In foreign currency					In U.S. dollars				
		(j) <input checked="" type="checkbox"/> Paid	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))
	(k) <input type="checkbox"/> Accrued	(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										41,685	

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	12-31-2020									2,365	2,365
B	12-31-2020										
C	12-31-2020										
D	12-31-2020										
E	12-31-2020									39,303	39,303
F	12-31-2020										
G	12-31-2020										
H	12-31-2020										
I	12-31-2020									17	17
J	12-31-2020										

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	41,685	
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	41,685	
12	Reduction in foreign taxes (see instructions) . . . . .	12	( )	
13	Taxes reclassified under high tax kickout (see instructions) . . . . .	13	-41,685	
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 24. However, if you are filing more than one Form 1116, you must complete line 20.) . . . . .	17		
18	<b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption . . . . . <b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18		0
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1" . . . . .	19		
20	<b>Individuals:</b> Enter the total of Form 1040 or 1040-SR, line 16 and Schedule 2 (Form 1040), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 16 and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 . . . . . <b>Caution:</b> 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	Increase in Limitation (section 960(c)) . . . . .	22		
23	Add lines 21 and 22 . . . . .	23		
24	Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV (see instructions) . . . . .	24		0

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

25	Credit for taxes on section 951A category income . . . . .	25		
26	Credit for taxes on foreign branch category income . . . . .	26		
27	Credit for taxes on passive category income . . . . .	27		
28	Credit for taxes on general category income . . . . .	28		
29	Credit for taxes on section 901(j) income . . . . .	29		
30	Credit for taxes on certain income re-sourced by treaty . . . . .	30		
31	Credit for taxes on lump-sum distributions . . . . .	31		
32	Add lines 25 through 31 . . . . .	32		0
33	Enter the <b>smaller</b> of line 20 or line 32 . . . . .	33		0
34	Reduction of credit for international boycott operations. See instructions for line 12 . . . . .	34		
35	Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a . . . . .	35		0

Additional Data

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



Form **3800**

**General Business Credit**

OMB No. 1545-0895

**2020**

Department of the Treasury  
Internal Revenue Service (99)

Go to [www.irs.gov/Form3800](http://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: DONALD J & MELANIA<TRUMP Identifying number

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: 1 General business credit from line 2 of all Parts III with box A checked; 2 Passive activity credits from line 2 of all Parts III with box B checked; 3 Enter the applicable passive activity credits allowed for 2020; 4 Carryforward of general business credit to 2020; 5 Carryback of general business credit from 2021; 6 Add lines 1, 3, 4, and 5.

Part II Allowable Credit
Table with 17 rows: 7 Regular tax before credits; 8 Alternative minimum tax; 9 Add lines 7 and 8; 10a Foreign tax credit; 10b Certain allowable credits; 10c Add lines 10a and 10b; 11 Net income tax; 12 Net regular tax; 13 Enter 25% (0.25) of the excess; 14 Tentative minimum tax; 15 Enter the greater of line 13 or line 14; 16 Subtract line 15 from line 11; 17 Enter the smaller of line 6 or line 16.

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Part III 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.
Table with 18 rows: 18 Multiply line 14 by 75% (0.75); 19 Enter the greater of line 13 or line 18; 20 Subtract line 19 from line 11; 21 Subtract line 17 from line 20; 22 Combine the amounts from line 3 of all Parts III with box A, C, or D checked; 23 Passive activity credit from line 3 of all Parts III with box B checked; 24 Enter the applicable passive activity credit allowed for 2020; 25 Add lines 22 and 24; 26 Empowerment zone and renewal community employment credit allowed; 27 Subtract line 13 from line 11; 28 Add lines 17 and 26; 29 Subtract line 28 from line 27; 30 Enter the general business credit from line 5 of all Parts III with box A checked; 31 Reserved; 32 Passive activity credits from line 5 of all Parts III with box B checked; 33 Enter the applicable passive activity credits allowed for 2020; 34 Carryforward of business credit to 2020; 35 Carryback of business credit from 2021.



36	Add lines 30, 33, 34, and 35	36	12,689,786
37	Enter the smaller of line 29 or line 36	37	
38	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: <ul style="list-style-type: none"> <li>Individuals. Schedule 3 (Form 1040), line 6</li> <li>Corporations. Form 1120, Schedule J, Part I, line 5c</li> <li>Estates and trusts. Form 1041, Schedule G, line 2b</li> </ul>	38	

Name(s) shown on return: DONALD J & MELANIA<TRUMP  
 Identifying number: \_\_\_\_\_

**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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	
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	70,595
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	70,595
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	70,595

Name(s) shown on return: DONALD J & MELANIA<TRUMP  
 Identifying number: \_\_\_\_\_

**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
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 and auto-enrollment (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 (carryforward only)	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	65-0567671	12,271
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		12,271
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		12,271

Name(s) shown on return: DONALD J & MELANIA <TRUMP> Identifying number: \_\_\_\_\_

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
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 and auto-enrollment (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 (carryforward only)	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	27-4162256	12
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		12
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		12

Form 3800 (2020)

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
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 and auto-enrollment (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 (carryforward only)	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	27-4162308 21,854
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	21,854
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	21,854

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.

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 Investment, 1b Reserved, 1c Increasing research activities, etc.

Form 3800 (2020)

Form 3800 (2020)

Name(s) shown on return

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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.

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 Investment, 1b Reserved, 1c Increasing research activities, etc.

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 (carryforward only)	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	65-0750446	2,698
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		2,698
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		2,698

Form 3800 (2020)

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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
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 and auto-enrollment (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 (carryforward only)	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	27-4162256	76
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		76
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		76

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	
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256	138
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		138
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		138

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	
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
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 and auto-enrollment (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 (carryforward only)	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	27-8202438	150
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	150	
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	150	

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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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162308	3,683
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		3,683
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		3,683

**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
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 and auto-enrollment (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 (carryforward only)	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	27-4162256 182
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	182
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.

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 investment, reserved, research activities, housing, disabled access, renewable electricity, Indian employment, orphan drug, new markets, pension plan startup costs, child care facilities, biodiesel, sulfur diesel, distilled spirits, nonconventional source fuel, energy efficient home, energy efficient appliance, alternative motor vehicle, alternative fuel vehicle, enhanced oil recovery, mine rescue training, agricultural chemicals, employer differential wage payments, carbon dioxide sequestration, qualified plug-in electric drive motor vehicle, qualified plug-in electric vehicle, employee retention, general credits from an electing large partnership, other oil and gas production, and summary rows 2-6.

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.

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 investment, reserved, research activities, housing, disabled access, renewable electricity, Indian employment, orphan drug, and new markets.

j	Small employer pension plan startup costs and auto-enrollment (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 (carryforward only)	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	27-4162308	354
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		354
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		354

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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162308	3,393
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		3,393
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		3,393

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

Part 122 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
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 and auto-enrollment (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 (carryforward only)	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	27-4162308	941
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		941
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		941

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

Part 133 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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256 71
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	71
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	71

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Form 3800 (2020) 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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256	29
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		29
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		29

Form 3800 (2020)

Name(s) shown on return: 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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256 38
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	38
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	38

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

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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162308 3,589
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	3,589
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	3,589

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

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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162308	3,478
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		3,478
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		3,478

Form 3800 (2020)

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
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 and auto-enrollment (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 (carryforward only)	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	

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.

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	27-4162308	10,188
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		10,188
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		10,188

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	
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162308	1,903
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		1,903
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1,903

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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	39
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	39
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	39

Form 3800 (2020)

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

Identifying number: \_\_\_\_\_

**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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)			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	27-4162256 146
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	146
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II			6	146

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**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
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 and auto-enrollment (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 (carryforward only)	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	27-4162256	142
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		142
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		142

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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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256 14
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	14
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	14

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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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162308	3,686
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		3,686
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		3,686

Name(s) shown on return: DONALD J & MELANIA <TRUMP> Identifying number

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
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 and auto-enrollment (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 (carryforward only)	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	

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.

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	27-4162256	7
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		7
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		7

Form 3800 (2020)  
 Name(s) shown on return: DONALD J & MELANIA - TRUMP  
 Identifying number: \_\_\_\_\_

**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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256 4
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	4
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	4

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.

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 investment, reserved, research activities, housing, disabled access, renewable electricity, Indian employment, orphan drug, new markets, pension plan, child care, biodiesel, sulfur diesel, distilled spirits, nonconventional source fuel, energy efficient home, energy efficient appliance, alternative motor vehicle, alternative fuel vehicle, enhanced oil recovery, mine rescue, agricultural chemicals, employer differential wage, carbon dioxide sequestration, qualified plug-in electric drive, qualified plug-in electric vehicle, employee retention, general credits from partnership, and other oil and gas production credits.

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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.

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 investment, reserved, research activities, housing, disabled access, renewable electricity, Indian employment, orphan drug, new markets, pension plan, child care, biodiesel, sulfur diesel, distilled spirits, nonconventional source fuel, energy efficient home, energy efficient appliance, alternative motor vehicle, alternative fuel vehicle, enhanced oil recovery, mine rescue, agricultural chemicals, employer differential wage, carbon dioxide sequestration, qualified plug-in electric drive, qualified plug-in electric vehicle, employee retention, general credits from partnership, and other oil and gas production credits.

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 (carryforward only)	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	27-4162256	35
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		35
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		35

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**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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256	19
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		19
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		19

Name(s) shown on return Identifying number

**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	(c) Enter the appropriate
1a	1b	1c	1d
<b>Note:</b> For any line where the credit is from more than one source, a separate Part III is needed for each source through which the credit is received.			
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 and auto-enrollment (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 (carryforward only)	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	27-4162256
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	103
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	103

Name(s) shown on return Identifying number

**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
  - E  Reserved
  - F  Reserved
  - G  Eligible Small Business Credit Carryforwards



General Business Credit Carrybacks  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

**1a** Investment (Form 3468, Part II only) (attach Form 3468) **1a** . . . . .

**b** Reserved **1b** . . . . .

**Note:** On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity. Only

**1c** Increasing research activities (Form 6765) **1c** . . . . .

**1d** Low-income housing (Form 8586, Part I only) **1d** . . . . .

**1e** Disabled access (Form 8826) (see instructions for limitation) **1e** . . . . .

**1f** Renewable electricity, refined coal, and Indian coal production (Form 8835) **1f** . . . . .

**1g** Indian employment (Form 8845) **1g** . . . . .

**1h** Orphan drug (Form 8820) **1h** . . . . .

**1i** New markets (Form 8874) **1i** . . . . .

**1j** Small employer pension plan startup costs and auto-enrollment (Form 8881) (see instructions for limitation) **1j** . . . . .

**1k** Employer-provided child care facilities and services (Form 8882) (see instructions for limitation) **1k** . . . . .

**1l** Biodiesel and renewable diesel fuels (attach Form 8864) **1l** . . . . .

**1m** Low sulfur diesel fuel production (Form 8896) **1m** . . . . .

**1n** Distilled spirits (Form 8906) **1n** . . . . .

**1o** Nonconventional source fuel (carryforward only) **1o** . . . . .

**1p** Energy efficient home (Form 8908) **1p** . . . . .

**1q** Energy efficient appliance (carryforward only) **1q** . . . . .

**1r** Alternative motor vehicle (Form 8910) **1r** . . . . .

**1s** Alternative fuel vehicle refueling property (Form 8911) **1s** . . . . .

**1t** Enhanced oil recovery credit (carryforward only) **1t** . . . . .

**1u** Mine rescue team training (Form 8923) **1u** . . . . .

**1v** Agricultural chemicals security (carryforward only) **1v** . . . . .

**1w** Employer differential wage payments (Form 8932) **1w** . . . . .

**1x** Carbon dioxide sequestration (Form 8933) **1x** . . . . .

**1y** Qualified plug-in electric drive motor vehicle (Form 8936) **1y** . . . . .

**1z** Qualified plug-in electric vehicle (carryforward only) **1z** . . . . .

**1aa** Employee retention (Form 5884-A) **1aa** . . . . .

**1bb** General credits from an electing large partnership (carryforward only) **1bb** . . . . .

**1zz** 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** . . . . .

**4b** Work opportunity (Form 5884) **4b** . . . . .

**4c** Biofuel producer (Form 6478) **4c** . . . . .

**4d** Low-income housing (Form 8586, Part II) **4d** . . . . .

**4e** Renewable electricity, refined coal, and Indian coal production (Form 8835) **4e** . . . . .

**4f** Employer social security and Medicare taxes paid on certain employee tips (Form 8846) **4f** . . . . . 27-4162256 34

**4g** Qualified railroad track maintenance (Form 8900) **4g** . . . . .

**4h** Small employer health insurance premiums (Form 8941) **4h** . . . . .

**4i** Increasing research activities (Form 6765) **4i** . . . . .

**4j** Employer credit for paid family and medical leave (Form 8994) **4j** . . . . .

**4z** Other **4z** . . . . .

**5** Add lines 4a through 4z and enter here and on the applicable line of Part II **5** . . . . . 34

**6** Add lines 2, 3, and 5 and enter here and on the applicable line of Part II **6** . . . . . 34

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**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  Reserved

**B**  General Business Credit From a Passive Activity  Reserved

**C**  General Business Credit Carryforwards  Eligible Small Business Credit Carryforwards

**D**  General Business Credit Carrybacks  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
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468) . . . . .	<b>1a</b>	
<b>b</b> Reserved . . . . .	<b>1b</b>	
<b>c</b> Increasing research activities (Form 6765) . . . . .	<b>1c</b>	
<b>d</b> Low-income housing (Form 8586, Part I only) . . . . .	<b>1d</b>	
<b>e</b> Disabled access (Form 8826) (see instructions for limitation) . . . . .	<b>1e</b>	
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835) . . . . .	<b>1f</b>	
<b>g</b> Indian employment (Form 8845) . . . . .	<b>1g</b>	
<b>h</b> Orphan drug (Form 8820) . . . . .	<b>1h</b>	
<b>i</b> New markets (Form 8874) . . . . .	<b>1i</b>	
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881) (see instructions for limitation) . . . . .	<b>1j</b>	
<b>k</b> Employer-provided child care facilities and services (Form 8882) (see instructions for limitation) . . . . .	<b>1k</b>	
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864) . . . . .	<b>1l</b>	
<b>m</b> Low sulfur diesel fuel production (Form 8896) . . . . .	<b>1m</b>	
<b>n</b> Distilled spirits (Form 8906) . . . . .	<b>1n</b>	
<b>o</b> Nonconventional source fuel (carryforward only) . . . . .	<b>1o</b>	
<b>p</b> Energy efficient home (Form 8908) . . . . .	<b>1p</b>	
<b>q</b> Energy efficient appliance (carryforward only) . . . . .	<b>1q</b>	
<b>r</b> Alternative motor vehicle (Form 8910) . . . . .	<b>1r</b>	
<b>s</b> Alternative fuel vehicle refueling property (Form 8911) . . . . .	<b>1s</b>	
<b>t</b> Enhanced oil recovery credit (carryforward only) . . . . .	<b>1t</b>	
<b>u</b> Mine rescue team training (Form 8923) . . . . .	<b>1u</b>	

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	27-4162256	37
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		37
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		37

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**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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	27-4162256 10
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	10
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	10

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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

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 Investment, Reserved, Increasing research activities, Low-income housing, etc.

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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

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 Investment, Reserved, Increasing research activities, Low-income housing, etc.

j	Small employer pension plan startup costs and auto-enrollment (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 (carryforward only)	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	27-4162256	491
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		491
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		491

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**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
<b>Note:</b> 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 and auto-enrollment (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 (carryforward only)	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	1,002,621
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	1,002,621
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	10,408,249
b	Work opportunity (Form 5884)	4b	49
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	1,734,419
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	12,142,717
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	13,145,338

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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
<b>Note:</b> 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	44,934
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 and auto-enrollment (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 (carryforward only)	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	204,561
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	249,495
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	260,641
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	260,641
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	510,136

Additional Data

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

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. See instructions for kerosene used in commercial aviation from March 28, 2020, through December 31, 2020.

**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	101826	\$ 18,634	362
b	Use on a farm for farming purposes	.183			
c	Other nontaxable use (see <b>Caution</b> 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 <b>Caution</b> 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	02	2968	\$ 721	360
b	Use on a farm for farming purposes	.243			
c	Use in trains	.243			353
d	Use in certain intercity and local buses (see <b>Caution</b> 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 <b>Caution</b> 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

**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

<b>17 Total income tax credit claimed.</b> Add lines 1 through 16, column (d). Enter here and on Schedule 3 (Form 1040), line 12; Form 1120, Schedule J, line 20b; Form 1120S, line 23c; Form 1041, line 25h; or the proper line of other returns. . . . . ▶	<b>17</b>	\$	19,355	
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**Additional Data**

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**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

**2020**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.

Attachment  
Sequence No. 179

▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Name(s) shown on return: DONALD J & MELANIA<TRUMP  
Business or activity to which this form relates: ALL BUSINESS ACTIVITIES  
Identifying number: \_\_\_\_\_

**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.  
1 Maximum amount (see instructions) 1 1,040,000  
2 Total cost of section 179 property placed in service (see instructions) 2 0  
3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,590,000  
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 0  
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 1,040,000  
6 (a) Description of property (b) Cost (business use only) (c) Elected cost  
7 Listed property. Enter the amount from line 29. 7  
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8  
9 Tentative deduction. Enter the smaller of line 5 or line 8 9  
10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562. 10 369,913  
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions. 11 0  
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12  
13 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12 13 369,913

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.)**  
14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions. 14  
15 Property subject to section 168(f)(1) election 15  
16 Other depreciation (including ACRS) 16

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**  
**Section A**  
17 MACRS deductions for assets placed in service in tax years beginning before 2020 17  
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here

**Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**  
21 Listed property. Enter amount from line 28 21  
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 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

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. Includes rows 25-29.

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 with 6 columns: (a) Vehicle 1, (b) Vehicle 2, (c) Vehicle 3, (d) Vehicle 4, (e) Vehicle 5, (f) Vehicle 6. Includes rows 30-36.

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 with 2 columns: Yes, No. Includes rows 37-41 and a Note.

Part VI Amortization

Table 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. Includes rows 42-44.

## Additional Data

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

Form **4562**  
 Department of the Treasury  
 Internal Revenue Service (99)

**Depreciation and Amortization**  
 (Including Information on Listed Property)

OMB No. 1545-0172  
**2020**  
 Attachment  
 Sequence No. 179

▶ Attach to your tax return.  
 ▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Name(s) shown on return DONALD J & MELANIA<TRUMP	Business or activity to which this form relates TRUMP INTERNATIONAL GOLF CLUB SCOTLAND	Identifying number
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**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.

1 Maximum amount (see instructions) . . . . .	1	
2 Total cost of section 179 property placed in service (see instructions) . . . . .	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	5	
<b>6</b> (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property. Enter the amount from line 29. . . . .	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 . . . . .	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . .	9	
10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562. . . . .	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions. . . . .	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . . . . .	12	
13 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12 ▶ 13	13	

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions. . . . .	14	
15 Property subject to section 168(f)(1) election . . . . .	15	
16 Other depreciation (including ACRS) . . . . .	16	

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2020 . . . . .	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . . <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

**Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21 Listed property. Enter amount from line 28 . . . . .	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions . . . . .	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	

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? 24b If "Yes," is the evidence written? 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. 26 Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

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.

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.

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

42 Amortization of costs that begins during your 2020 tax year (see instructions): 43 Amortization of costs that began before your 2020 tax year 44 Total. Add amounts in column (f). See the instructions for where to report

**Additional Data**

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



Form **4797**

**Sales of Business Property**  
(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Attach to your tax return.  
▶ Go to [www.irs.gov/Form4797](http://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 2020 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)

<b>2</b>	(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 (a)
	See Additional Data Table						

**3** Gain, if any, from Form 4684, line 39 . . . . . **3**

**4** Section 1231 gain from installment sales from Form 6252, line 26 or 37 . . . . . **4**

**5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824 . . . . . **5**

**6** Gain, if any, from line 32, from other than casualty or theft . . . . . **6**

**7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: . . . . . **7** -501,255

**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 . . . . . **8**

**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 . . . . . **9**

**Part II Ordinary Gains and Losses** (see instructions)

**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 . . . . . **11** (501,255)

**12** Gain, if any, from line 7 or amount from line 8, if applicable . . . . . **12**

**13** Gain, if any, from line 31 . . . . . **13**

**14** Net gain or (loss) from Form 4684, lines 31 and 38a . . . . . **14**

**15** Ordinary gain from installment sales from Form 6252, line 25 or 36 . . . . . **15**

**16** Ordinary gain or (loss) from like-kind exchanges from Form 8824 . . . . . **16**

**17** Combine lines 10 through 16 . . . . . **17** -501,255

**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 28. The amount from property used as an employee cannot be deducted. Identify as from "Form 4797, line 18a." See instructions. . . . . **18a**

**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 . . . . . **18b** -501,255

**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			
		<b>Property A</b>	<b>Property B</b>
		<b>Property C</b>	<b>Property D</b>
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	<b>If section 1245 property:</b>		
a	Depreciation allowed or allowable from line 22 . . . . .	25a	
b	Enter the <b>smaller</b> of line 24 or 25a . . . . .	25b	
26	<b>If section 1250 property:</b> 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 <b>smaller</b> 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 <b>smaller</b> of line 26c or 26d . . . . .	26e	
f	Section 291 amount (corporations only) . . . . .	26f	
g	Add lines 26b, 26e, and 26f . . . . .	26g	
27	<b>If section 1252 property:</b> 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 <b>smaller</b> of line 24 or 27b . . . . .	27c	
28	<b>If section 1254 property:</b>		
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 <b>smaller</b> of line 24 or 28a . . . . .	28b	
29	<b>If section 1255 property:</b>		
a	Applicable percentage of payments excluded from income under section 126. See instructions . . . . .	29a	
b	Enter the <b>smaller</b> 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)
40 WALL DEVELOPMENT						-218,007
TRUMP CPS LLC						-3,350
DJT HOLDINGS LLC - O						26,614
DJT HOLDINGS LLC - O						13,506
TIPPERARY REALTY COR.						-237
TRUMP CPS CORP						-3
TRUMP TOWER MANAGING						-2,397
DJT HOLDINGS MM LLC						-19
DJT HOLDINGS LLC - T						-1,862
DJT HOLDINGS LLC - T						-11,644
DJT HOLDINGS MANAGIN						224
TRUMP EQUITABLE FIFT						-303,710
DJT HOLDINGS MM LLC						-99
DJT HOLDINGS LLC MM						-271

efile GRAPHIC print - DO NOT PROCESS		LATEST DATA - Production	DLN: 76221484788052
Form <b>4797</b>	<b>Sales of Business Property</b> (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))		OMB No. 1545-0184 <b>2020</b>
Department of the Treasury Internal Revenue Service	▶ Attach to your tax return. ▶ Go to <a href="http://www.irs.gov/Form4797">www.irs.gov/Form4797</a> 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 2020 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)

2	(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)
	FURNITURE, FIXTURE A	VARIOUS	03-31-2020	8,470	6,238	17,230	-2,522

**3** Gain, if any, from Form 4684, line 39 . . . . . **3**  
**4** Section 1231 gain from installment sales from Form 6252, line 26 or 37 . . . . . **4**  
**5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824 . . . . . **5**  
**6** Gain, if any, from line 32, from other than casualty or theft . . . . . **6**  
**7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: . . . . . **7** -2,522

**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 . . . . . **8**  
**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 . . . . . **9**

**Part II Ordinary Gains and Losses** (see instructions)

**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 . . . . . **11** ( )  
**12** Gain, if any, from line 7 or amount from line 8, if applicable . . . . . **12**  
**13** Gain, if any, from line 31 . . . . . **13**  
**14** Net gain or (loss) from Form 4684, lines 31 and 38a . . . . . **14**  
**15** Ordinary gain from installment sales from Form 6252, line 25 or 36 . . . . . **15**  
**16** Ordinary gain or (loss) from like-kind exchanges from Form 8824 . . . . . **16**  
**17** Combine lines 10 through 16 . . . . . **17**  
**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 28. The amount from property used as an employee cannot be deducted. Identify as from "Form 4797, line 18a." See instructions. . . . . **18a**  
**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 . . . . . **18b**

**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			
<b>25 If section 1245 property:</b>				
a Depreciation allowed or allowable from line 22 . . . . .	25a			
b Enter the smaller of line 24 or 25a . . . . .	25b			
<b>26 If section 1250 property:</b> 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			
<b>27 If section 1252 property:</b> 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			
<b>28 If section 1254 property:</b>				
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			
<b>29 If section 1255 property:</b>				
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	0
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	0

**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

<b>efile GRAPHIC print - DO NOT PROCESS</b>	<b>LATEST DATA - Production</b>	<b>DLN: 76221484788052</b>
Form <b>4952</b>  Department of the Treasury Internal Revenue Service (99)	<b>Investment Interest Expense Deduction</b>  ▶ Go to <a href="http://www.irs.gov/Form4952">www.irs.gov/Form4952</a> for the latest information. ▶ Attach to your tax return.	<b>2020</b>  Attachment Sequence No. 51

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

<b>Part I Total Investment Interest Expense</b>		
1 Investment interest expense paid or accrued in 2020 (see instructions) . . . . .	1	896,616
2 Disallowed investment interest expense from 2019 Form 4952, line 7 . . . . .	2	
<b>3 Total investment interest expense.</b> Add lines 1 and 2 . . . . .	<b>3</b>	<b>896,616</b>

<b>Part II Net Investment Income</b>		
4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) . . . . .	4a	10,651,526
4b Qualified dividends included on line 4a . . . . .	4b	17,694
4c Subtract line 4b from line 4a . . . . .	4c	10,633,832
4d Net gain from the disposition of property held for investment . . . . .	4d	
4e Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment (see instructions) . . . . .	4e	
4f Subtract line 4e from line 4d . . . . .	4f	
4g Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions) . . . . .	4g	
4h Investment income. Add lines 4c, 4f, and 4g . . . . .	4h	10,633,832
5 Investment expenses (see instructions) . . . . .	5	9,344
<b>6 Net investment income.</b> Subtract line 5 from line 4h. If zero or less, enter -0- . . . . .	<b>6</b>	<b>10,624,488</b>

<b>Part III Investment Interest Expense Deduction</b>		
7 Disallowed investment interest expense to be carried forward to 2021. Subtract line 6 from line 3. If zero or less, enter -0- . . . . .	7	0
<b>8 Investment interest expense deduction.</b> Enter the <b>smaller</b> of line 3 or 6. See instructions . . . . .	<b>8</b>	<b>896,616</b>

For Paperwork Reduction Act Notice, see page 4. Cat. No. 13177Y Form **4952** (2020)

**Additional Data**

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

Form **5471**

**Information Return of U.S. Persons With Respect To Certain Foreign Corporations**

OMB No. 1545-0123

(Rev. December 2020)  
Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form5471](http://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 <small>(or P.O. box number if mail is not delivered to street address)</small>		<b>A</b> Identifying number
City or town, state, and ZIP code PALM BEACH, FL 33480		<b>B</b> Category of filer (See instructions. Check applicable box(es)): 1a <input type="checkbox"/> 1b <input type="checkbox"/> 1c <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5a <input checked="" type="checkbox"/> 5b <input type="checkbox"/> 5c <input type="checkbox"/>
Filer's tax year beginning 01-01-2020 , and ending 12-31-2020		<b>C</b> Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period _____

**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** Check the box if this Form 5471 has been completed using "Alternative Information" under Rev. Proc. 2019-40

**G** If the box on line F is checked, enter the corresponding code for "Alternative Information" (see instructions) . . . . ▶

**H** Person(s) on whose behalf this information return is filed:

(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.

<b>1a</b> Name and address of foreign corporation THC BARRA HOTELARIA		<b>b(1)</b> Employer identification number, if any 32-0447181
		<b>b(2)</b> Reference ID number (see instructions)
		<b>c</b> Country under whose laws incorporated BR
<b>d</b> Date of incorporation 2014-04-15	<b>e</b> Principal place of business	<b>f</b> Principal business activity code number
		<b>g</b> Principal business activity
		<b>h</b> Functional currency code

**2** Provide the following information for the foreign corporation's accounting period stated above.

<b>a</b> Name, address, and identifying number of branch office or agent (if any) in the United States	<b>b</b> If a U.S. income tax return was filed, enter:	
	<b>(i)</b> Taxable income or (loss)	<b>(ii)</b> 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**

(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	
<b>Income</b>	<b>1a</b> Gross receipts or sales . . . . .	<b>1a</b>		
	<b>b</b> Returns and allowances . . . . .	<b>1b</b>		
	<b>c</b> Subtract line 1b from line 1a . . . . .	<b>1c</b>		
	<b>2</b> Cost of goods sold . . . . .	<b>2</b>		
	<b>3</b> Gross profit (subtract line 2 from line 1c) . . . . .	<b>3</b>		
	<b>4</b> Dividends . . . . .	<b>4</b>		
	<b>5</b> Interest . . . . .	<b>5</b>		
	<b>6a</b> Gross rents . . . . .	<b>6a</b>		
	<b>b</b> Gross royalties and license fees . . . . .	<b>6b</b>		
	<b>7</b> Net gain or (loss) on sale of capital assets . . . . .	<b>7</b>		
<b>Deductions</b>	<b>8a</b> Foreign currency transaction gain or loss – unrealized . . . . .	<b>8a</b>		
	<b>b</b> Foreign currency transaction gain or loss – realized . . . . .	<b>8b</b>		
	<b>9</b> Other income (attach statement) . . . . .	<b>9</b>		
	<b>10</b> Total income (add lines 3 through 9) . . . . .	<b>10</b>		
	<b>11</b> Compensation not deducted elsewhere . . . . .	<b>11</b>		
	<b>12a</b> Rents . . . . .	<b>12a</b>		
	<b>b</b> Royalties and license fees . . . . .	<b>12b</b>		
	<b>13</b> Interest . . . . .	<b>13</b>		
	<b>14</b> Depreciation not deducted elsewhere . . . . .	<b>14</b>		
	<b>15</b> Depletion . . . . .	<b>15</b>		
<b>Net Income</b>	<b>16</b> Taxes (exclude income tax expense (benefit)) . . . . .	<b>16</b>		
	<b>17</b> Other deductions (attach statement – exclude income tax expense (benefit)). . . . .	<b>17</b>		
	<b>18</b> Total deductions (add lines 11 through 17) . . . . .	<b>18</b>		
	<b>19</b> Net income or (loss) before unusual or infrequently occurring items, and income tax expense (benefit) (subtract line 18 from line 10) . . . . .	<b>19</b>		
	<b>20</b> Unusual or infrequently occurring items . . . . .	<b>20</b>		
	<b>21a</b> Income tax expense (benefit) – current . . . . .	<b>21a</b>		
	<b>b</b> Income tax expense (benefit) – deferred . . . . .	<b>21b</b>		
	<b>22</b> Current year net income or (loss) per books (combine lines 19 through 21b) . . . . .	<b>22</b>		
	<b>Other Comprehensive Income</b>	<b>23a</b> Foreign currency translation adjustments . . . . .	<b>23a</b>	
		<b>b</b> Other . . . . .	<b>23b</b>	
<b>c</b> Income tax expense (benefit) related to other comprehensive income . . . . .		<b>23c</b>		
<b>24</b> Other comprehensive income (loss), net of tax (line 23a plus line 23b less line 23c) . . . . .		<b>24</b>		



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
<b>1</b> Cash . . . . .	<b>1</b>	
<b>2a</b> Trade notes and accounts receivable . . . . .	<b>2a</b>	
<b>b</b> Less allowance for bad debts . . . . .	<b>2b</b>	( )
<b>3</b> Derivatives . . . . .	<b>3</b>	
<b>4</b> Inventories . . . . .	<b>4</b>	
<b>5</b> Other current assets (attach statement) . . . . .	<b>5</b>	
<b>6</b> Loans to shareholders and other related persons . . . . .	<b>6</b>	
<b>7</b> Investment in subsidiaries (attach statement) . . . . .	<b>7</b>	
<b>8</b> Other investments (attach statement) . . . . .	<b>8</b>	
<b>9a</b> Buildings and other depreciable assets . . . . .	<b>9a</b>	
<b>b</b> Less accumulated depreciation . . . . .	<b>9b</b>	( )
<b>10a</b> Depletable assets . . . . .	<b>10a</b>	
<b>b</b> Less accumulated depletion . . . . .	<b>10b</b>	( )
<b>11</b> Land (net of any amortization) . . . . .	<b>11</b>	
<b>12</b> Intangible assets:		
<b>a</b> Goodwill . . . . .	<b>12a</b>	
<b>b</b> Organization costs . . . . .	<b>12b</b>	
<b>c</b> Patents, trademarks, and other intangible assets . . . . .	<b>12c</b>	
<b>d</b> Less accumulated amortization for lines 12a, 12b, and 12c . . . . .	<b>12d</b>	( )
<b>13</b> Other assets (attach statement) . . . . .	<b>13</b>	
<b>14</b> Total assets . . . . .	<b>14</b>	
<b>Liabilities and Shareholders' Equity</b>		
<b>15</b> Accounts payable . . . . .	<b>15</b>	
<b>16</b> Other current liabilities (attach statement) . . . . .	<b>16</b>	
<b>17</b> Derivatives . . . . .	<b>17</b>	
<b>18</b> Loans from shareholders and other related persons . . . . .	<b>18</b>	
<b>19</b> Other liabilities (attach statement) . . . . .	<b>19</b>	
<b>20</b> Capital stock:		
<b>a</b> Preferred stock . . . . .	<b>20a</b>	
<b>b</b> Common stock . . . . .	<b>20b</b>	
<b>21</b> Paid-in or capital surplus (attach reconciliation) . . . . .	<b>21</b>	
<b>22</b> Retained earnings . . . . .	<b>22</b>	
<b>23</b> Less cost of treasury stock . . . . .	<b>23</b>	( )
<b>24</b> Total liabilities and shareholders' equity . . . . .	<b>24</b>	

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)?
b Enter the total amount of the base erosion payments \$
c Enter the total amount of the base erosion tax benefit \$
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?
b Enter the total amount of the disallowed deduction (see instructions) \$
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?
b Enter the amount of gross income derived from sales, leases, exchanges, or other dispositions (but not licenses) from transactions with the foreign corporation that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) (see instructions) \$
c Enter the amount of gross income derived from a license of property to the foreign corporation that the filer included in its computation of FDDEI (see instructions) \$
d Enter the amount of gross income derived from services provided to the foreign corporation that the filer included in its computation of FDDEI (see instructions) \$
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):
[ ] Comparable uncontrolled transaction [ ] Income method [ ] Acquisition price method
[ ] Market capitalization method [ ] Residual profit split method [ ] Unspecified methods
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?
b Enter the amount of the earnings and profits reduction pursuant to section 367(d)(2)(B) 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)?
22a Did any extraordinary reduction with respect to a controlling section 245A shareholder occur during the tax year (see instructions)?
b If the answer to question 22a is "Yes," was an election made to close the tax year such that no amount is treated as an extraordinary reduction amount or tiered extraordinary reduction amount (see instructions)?

Schedule I Summary of Shareholder's Income From Foreign Corporation (see instructions)

If item H on page 1 is completed, a separate Schedule I must be filed for each Category 4, 5a, or 5b filer for whom reporting is furnished on this Form 5471. This schedule I is being completed for:

Table with columns: Name of U.S. shareholder, Identifying number, and numbered rows (1a-6) for various income categories like Section 964(e)(4) Subpart F dividend income, Section 245A(e)(2) Subpart F income, etc.

7a Was any income of the foreign corporation blocked? Yes No
7b Did any such income become unblocked during the tax year (see section 964(b))? Yes No

If the answer to either question is "Yes," attach an explanation.
8a Did this U.S. shareholder have an extraordinary disposition (ED) account with respect to the foreign corporation at any time during the tax year (see instructions)?
8b If the answer to question 8a is "Yes," enter the U.S. shareholder's ED account balance at the beginning of the CFC year and at the end of the tax year \$
8c Enter the CFC's aggregate ED account balance with respect to all U.S. shareholders at the beginning of the CFC year and at the end of the tax year \$
9 Enter the sum of the hybrid deduction accounts with respect to stock of the foreign corporation (see instructions) \$

**Additional Data**

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**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 6251

Alternative Minimum Tax—Individuals

OMB No. 1545-0074

2020

Department of the Treasury Internal Revenue Service (99)

Go to www.irs.gov/Form6251 for instructions and the latest information. Attach to Form 1040, Form 1040-SR, or Form 1040-NR.

Attachment Sequence No. 32

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

social security number

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

Table with 2 columns: Description and Amount. Rows include 1, 2a, 2b, 2c, 2d, 2e, 2f, 2g, 2h, 2i, 2j, 2k, 2l, 2m, 2n, 2o, 2p, 2q, 2r, 2s, 2t, 3, 4. Total for line 4 is -5,568,578.

Part II Alternative Minimum Tax (AMT)

Table with 2 columns: Description and Amount. Rows include 5 (Exemption), 6, 7, 8, 9, 10, 11. Total for line 11 is 0.

Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions.

Table with 2 columns: Line number and Description. Lines 12-40 contain instructions for tax computation, including amounts from Form 6251, Schedule D, and various worksheets. Includes instructions for AMT, regular tax, and capital gains rates.

**Additional Data**

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





Form **8582**  
 Department of the Treasury  
 Internal Revenue Service (99)

**Passive Activity Loss Limitations**

OMB No. 1545-1008

**2020**

Attachment  
 Sequence No. **858**

▶ See separate instructions.  
 ▶ Attach to Form 1040, 1040-SR, or 1041.  
 ▶ Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.

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

Identifying number

Part I 2020 Passive Activity Loss		Caution: Complete Worksheets 1, 2, and 3 before completing Part I.	
<b>Rental Real Estate Activities With Active Participation</b> (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)			
1a	Activities with net income (enter the amount from Worksheet 1, column (a))	1a	
1b	Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	( )
1c	Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	( )
1d	Combine lines 1a, 1b, and 1c	1d	
<b>Commercial Revitalization Deductions From Rental Real Estate Activities</b>			
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a	( )
2b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	( )
2c	Add lines 2a and 2b	2c	( )
<b>All Other Passive Activities</b>			
3a	Activities with net income (enter the amount from Worksheet 3, column (a))	3a	54,514,442
3b	Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	(65,905,501)
3c	Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	(6,302,813)
3d	Combine lines 3a, 3b, and 3c	3d	-17,693,872
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	4	-17,693,872

- 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.	
5	Enter the smaller of the loss on line 1d or the loss on line 4	5	
6	Enter \$150,000. If married filing separately, see instructions	6	
7	Enter modified adjusted gross income, but not less than zero (see instructions) Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.	7	
8	Subtract line 7 from line 6	8	
9	Multiply line 8 by 50% (0.5). Do not enter more than \$25,000. If married filing separately, see instructions	9	
10	Enter the smaller of line 5 or line 9	10	

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

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.	
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12	Enter the loss from line 4	12	
13	Reduce line 12 by the amount on line 10	13	
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	

Part IV Total Losses Allowed			
15	Add the income, if any, on lines 1a and 3a and enter the total	15	54,514,442
16	Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	16	54,514,442

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
<b>Total. Enter on Form 8582, lines 1a, 1b, and 1c . . . . . ▶</b>					

**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
<b>Total. Enter on Form 8582, lines 2a and 2b . . . . . ▶</b>			

**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					
<b>Total. Enter on Form 8582, lines 3a, 3b, and 3c . . . . . ▶</b>	54,514,442	-65,905,501	-6,302,813		

**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)
<b>Total . . . . . ▶</b>			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				
<b>Total . . . . . ▶</b>		71,761,451	1.00	17,693,872

**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				
<b>Total</b>		68,704,054	16,904,794	51,799,260

**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
DJT HOLDINGS MM LLC - TRU					
Form or schedule and line number to be reported on (see instructions): FORM 4797					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	25				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	25		0.00089	6	19
Form or schedule and line number to be reported on (see instructions): SCH E					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	28,057				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	28,057		0.99911	6,918	21,139
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- ▶					
<b>Total</b>		28,082	1.00	6,924	21,158
Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
DJT HOLDINGS LLC - TRUMP					
Form or schedule and line number to be reported on (see instructions): FORM 4797					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	2,472				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	2,472		0.00090	610	1,862
Form or schedule and line number to be reported on (see instructions): SCH E					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	2,749,858				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	2,749,858		0.99910	678,019	2,071,839
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- ▶					
<b>Total</b>		2,752,330	1.00	678,629	2,073,701
Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
DJT HOLDINGS LLC - TRUMP					
Form or schedule and line number to be reported on (see instructions): FORM 4797					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	15,454				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	15,454		0.03720	3,810	11,644

Form or schedule and line number to be reported on (see instructions):SCH E					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	399,961				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	399,961	0.96280	98,617	301,344	
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- ▶					
<b>Total . . . . . ▶</b>	<b>415,415</b>	<b>1.00</b>	<b>102,427</b>	<b>312,988</b>	
<b>Name of activity:</b> DJT HOLDINGS MM LLC - TRU	<b>(a)</b>	<b>(b)</b>	<b>(c) Ratio</b>	<b>(d) Unallowed loss</b>	<b>(e) Allowed loss</b>
Form or schedule and line number to be reported on (see instructions):FORM 4797					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	131				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	131	0.02942	32	99	
Form or schedule and line number to be reported on (see instructions):SCH E					
1a Net loss plus prior year unallowed loss from form or schedule . ▶	4,321				
b Net income from form or schedule . . . . . ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶	4,321	0.97058	1,066	3,255	
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- ▶					
<b>Total . . . . . ▶</b>	<b>4,452</b>	<b>1.00</b>	<b>1,098</b>	<b>3,354</b>	

**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		-12,135	-5,022		-17,157
THE EAST 61 ST. COMP		-15	-39		-54
PARK BRIAR ASSOCIATE		-12,943	-2,811		-15,754
40 WALL DEVELOPMENT		-271,198	-18,153		-289,351
40 WALL DEVELOPMENT		-826,453	-462,171		-1,288,624
HUDSON WATERFRONT AS	73,826			73,826	
HUDSON WATERFRONT AS	4,366,825			4,366,825	
HUDSON WATERFRONT AS	1,460,975			1,460,975	
HUDSON WATERFRONT AS	564,993			564,993	
HUDSON WATERFRONT AS	593,978			593,978	
TRUMP CPS LLC		-4,446			-4,446
TRUMP CPS LLC	288,070			288,070	
DJT HOLDINGS LLC - M		-20,721	-2,577		-23,298
TRUMP PLAZA LLC	769,711			769,711	
TRUMP 845 UN LIMITED	235,032		-6,039	228,993	
DJT HOLDINGS LLC - O	26,614			26,614	
DJT HOLDINGS LLC - O	13,506			13,506	
DJT HOLDINGS LLC TRU		-62,973			-62,973
DJT HOLDINGS LLC - T		-56	-7		-63
TIPPERARY REALTY COR		-304	-11		-315
TIPPERARY REALTY COR	23,616			23,616	
PLAZA CONSULTING COR		-36	-148		-184
TRUMP PROJECT MANAGE		-9,692	-1,054		-10,746
FIFTY-SEVEN MANAGEME	98,040			98,040	
TRUMP CPS CORP		-4			-4
TRUMP CPS CORP	264			264	
FIRST MEMBER INC		-370	-32		-402
DJT HOLDINGS MM LLC		-427	-53		-480
TRUMP PLAZA MEMBER I	7,910			7,910	
TRUMP VILLAGE CONST		-14,240	-3,901		-18,141
TRUMP TOWER MANAGING		-3,071	-110		-3,181
TRUMP TOWER MANAGING	126,616			126,616	
TRUMP 845 UN MGR COR		-1,948	-213		-2,161
BEACH HAVEN APARTMEN		-13,352	-2,201		-15,553
SHORE HAVEN APARTMEN		-13,465	-3,636		-17,101
TRUMP MANAGEMENT INC	9,454		-698	8,756	
TRUMP DELMONICO LLC		-5,082	-555		-5,637
STARRETT CITY ASSOCI		-30,060	-12,723		-42,783
TRUMP PARK AVENUE LL		-5,091	-554		-5,645
DJT HOLDINGS MM LLC		-1,340	-149		-1,489
DJT HOLDINGS LLC - D		-122			-122
DJT HOLDINGS LLC - D	31			31	
DJT HOLDINGS MM LLC		-25,764	-2,318		-28,082
DJT HOLDINGS LLC - T	210,213			210,213	
DJT HOLDINGS MM LLC	2,145			2,145	
DJT HOLDINGS LLC - T		-3,170,711	-367,119		-3,537,830
DJT HOLDINGS MM LLC		-7			-7
DJT HOLDINGS LLC - T		-55	-10		-65
TRUMP FLORIDA MANAGE		-4			-4
TIHT MEMBER LLC		-748	-227		-975
TIHT COMMERCIAL LLC	21,394			21,394	
DJT HOLDINGS LLC -TR		-653	-47		-700
DJT HOLDINGS LLC - T		-2,625,153	-227,177		-2,752,330
TRUMP MARKS PHILADEL		-2,927	-589		-3,516
TRUMP MARKS WAIKIKI		-3,022			-3,022
TRUMP MARKS WAIKIKI		-567			-567
DJT HOLDINGS MM LLC		-30	-3		-33
DJT HOLDINGS MM LLC		-30	-3		-33
DJT HOLDINGS MM LLC		-30			-30
TRUMP MARKS PHILADEL		-337	-39		-376
DJT HOLDINGS MM LLC		-30	-3		-33
DJT HOLDINGS LLC -TR		-16,067	-1,752		-17,819
DJT HOLDINGS MMC LLC			-18		-18
DJT HOLDINGS MM LLC		-1			-1
DJT HOLDINGS LLC - T		-415,415			-415,415
DJT HOLDINGS MM LLC		-413			-413
DJT HOLDINGS MM LLC	4,174			4,174	
DJT HOLDINGS MM LLC		-24	-2		-26
DJT HOLDINGS LLC - U		-2,310	-198		-2,508
DJT HOLDINGS LLC - T		-2,800	-305		-3,105
DJT HOLDINGS MM LLC		-29	-3		-32
DJT HOLDINGS MM LLC		-4,541	-858		-5,399
DJT HOLDINGS LLC - G		-187,822	-9,825		-197,647
DJT HOLDINGS MM LLC	26,513		-774	25,739	
MELANIA MARKS ACCESS		-1,628	-176		-1,804
DJT HOLDINGS LLC - T		-55	-38		-93
MELANIA MARKS ACCESS		-71	-5		-76
DJT HOLDINGS MM LLC		-12	-47		-59
SC LP SHOPPING CENTE			-474		-474
DJT HOLDINGS LLC - T		-1,159	-4,626		-5,785
DJT HOLDINGS LLC - T		-2,035	-266		-2,301
TRUMP INTERNATIONAL	546,156			546,156	

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		-118	-17		-135	
DJT HOLDINGS MM LLC		-14	-23		-37	
TRUMP FERRY POINT ME		-10,138	-5,223		-15,361	
DJT HOLDINGS MM LLC		-15,448	-1,531		-16,979	
DJT HOLDINGS MM LLC		-21	-3		-24	
DJT HOLDINGS MM LLC		-1,916	-100		-2,016	
TIHH MEMBER CORP	4,504			4,504		
DJT HOLDINGS MM LLC/	4,535			4,535		
DJT HOLDINGS LLC - T		-993,662	-511,864		-1,505,526	
DJT HOLDINGS LLC - T		-1,514,035	-150,073		-1,664,108	
DJT HOLDINGS LLC - T	448,924			448,924		
DJT HOLDINGS LLC - P		-1,330	-145		-1,475	
DJT HOLDINGS LLC - T		-4,505			-4,505	
DJT HOLDINGS LLC -TR		-349	-38		-387	
DJT HOLDINGS LLC - T		-11,607	-1,644		-13,251	
DJT HOLDINGS LLC - T	402,392			402,392		
DJT HOLDINGS LLC - T		-1,330	-2,290		-3,620	
DJT HOLDINGS MM LLC		-4			-4	
DJT HOLDINGS MM LLC		-14	-2		-16	
DJT HOLDINGS MM LLC	4,106			4,106		
DJT HOLDINGS MM LLC		-30	-3		-33	
DJT HOLDINGS MANAGIN		-2,509,061	-23,414		-2,532,475	
DJT HOLDINGS MM LLC		-46			-46	
DJT HOLDINGS LLC - T		-30,540	-3,227		-33,767	
DJT HOLDINGS LLC - T		-2,898	-358		-3,256	
DJT HOLDINGS LLC - T		-1,359,788	-346,102		-1,705,890	
DJT HOLDINGS LLC - T		-602,231	-139,230		-741,461	
DJT HOLDINGS LLC - T		-445,045	-84,099		-529,144	
DJT HOLDINGS LLC - T	2,598,536		-75,826	2,522,710		
DJT HOLDINGS LLC - T		-334,474	-52,443		-386,917	
DJT HOLDINGS LLC - T		-2,898	-316		-3,214	
DJT HOLDINGS LLC - T		-1,876	-262		-2,138	
DJT HOLDINGS LLC - T		-486	-54		-540	
DJT HOLDINGS MM LLC		-19	-3		-22	
DJT HOLDINGS MM LLC		-30	-3		-33	
DJT HOLDINGS MM LLC		-30	-4		-34	
DJT HOLDINGS MM LLC		-312	-33		-345	
DJT HOLDINGS MM LLC	643		-4	639		
DJT HOLDINGS MM LLC		-85,627			-85,627	
TAG AIR INC		-2,727,044	-107,109		-2,834,153	
DJT HOLDINGS MM LLC		-2,779	-622		-3,401	
DJT HOLDINGS MM LLC		-5	-1		-6	
DJT HOLDINGS MM LLC		-13,799	-3,528		-17,327	
DJT HOLDINGS LLC -		-272,424	-81,575		-353,999	
DJT HOLDINGS LLC -	63,059		-367	62,692		
DJT HOLDINGS MM LLC		-2,795	-468		-3,263	
DJT HOLDINGS MM LLC		-30	-3		-33	
DJT HOLDINGS MM LLC		-4			-4	
DJT HOLDINGS MM LLC		-4			-4	
T INTERNATIONAL REAL		-35,062			-35,062	
DJT HOLDINGS LLC - T		-394	-47		-441	
DJT HOLDINGS LLC - T	2,135,538			2,135,538		
DJT HOLDINGS - WHITE		-349	-38		-387	
DJT HOLDINGS JUPITER	866,141		-47,184	818,957		
DJT HOLDINGS - TRUMP		-22,815,129	-1,700,699		-24,515,828	
DJT HOLDINGS LLC - T	1,528,020			1,528,020		
DJT HOLDINGS LLC - T	25,929			25,929		
DJT HOLDINGS LLC - T		-738,292	-149,844		-888,136	
DJT HOLDINGS LLC - E			-72,149		-72,149	
DJT HOLDINGS LLC - D	420,498			420,498		
DT MARKS VANCOUVER L		-2,927			-2,927	
DJT HOLDINGS LLC - T		-1,330	-252		-1,582	
DJT HOLDINGS LLC - C		-5,250	-359		-5,609	
DJT HOLDINGS LLC - T		-349	-38		-387	
DJT HOLDINGS LLC - T		-121,072	-30,942		-152,014	
DJT HOLDINGS MM LLC		-14	-3		-17	
DJT HOLDINGS MM LLC	4,290			4,290		
DJT HOLDINGS MM LLC		-4			-4	
DJT HOLDINGS MM LLC		-4			-4	
DJT HOLDINGS MM LLC			-736		-736	
DJT HOLDINGS MM LLC		-2,469	-181		-2,650	
DJT HOLDINGS MM LLC		-7,701	-1,529		-9,230	
HUDSON WATERFRONT AS	4,064,771			4,064,771		
HUDSON WATERFRONT AS	7,604,344			7,604,344		
TRUMP 845 UN GP LLC	190,807			190,807		
DJT HOLDINGS LLC - T		-1,641,269	-211,075		-1,852,344	
DJT HOLDINGS MANAGIN	224			224		
DJT HOLDINGS MANAGIN		-625,228	-1,677		-626,905	
845 UN LIMITED PARTN	286,369			286,369		
TRUMP PARK AVENUE LL		-883,816	-65,257		-949,073	
TRUMP PARK AVENUE LL		-882,048	-81,737		-963,785	
DT CONNECT II MEMBER		-3,827			-3,827	
DJT HOLDINGS MM LLC		-24	-3		-27	
DJT HOLDINGS MM LLC		-140	-16		-156	
DJT HOLDINGS MM LLC	84		-3	81		
DJT HOLDINGS MM LLC		-21	-3		-24	
DJT HOLDINGS MM LLC		-6	-1		-7	
TTTT VENTURE MEMBER		-1,476	-518		-1,994	
DJT HOLDINGS MM LLC	21,789			21,789		
DJT HOLDINGS MM LLC	933			933		
DJT HOLDINGS MM LLC		-97,412	-5,101		-102,513	
DJT HOLDINGS LLC - T		-2,065	-254		-2,319	
DJT HOLDINGS-D B PAC			-906		-906	
DJT HOLDINGS LLC - T	8,196		-325	7,871		
DJT HOLDINGS LLC - T		-627	-54		-681	
DJT HOLDINGS LLC - T		-1,607	-305		-1,912	

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 LLC - P		-13,740	-1,612		-15,352
DJT HOLDINGS LLC - T	91,460			91,460	
DJT HOLDINGS LLC TW	11,533			11,533	
DJT HOLDINGS LLC -TW		-4,180,488	-186,030		-4,366,498
DT CONNECT II LLC		-378,866			-378,866
DJT HOLDINGS LLC - T		-9,547,389	-499,940		-10,047,329
DJT HOLDINGS MM LLC		-42,653	-1,879		-44,532
DJT HOLDINGS MM LLC			-3		-3
DJT HOLDINGS MM LLC	8,837			8,837	
DJT HOLDINGS MM LLC		-33	-4		-37
DJT HOLDINGS MM LLC		-34	-4		-38
DJT HOLDINGS MM LLC		-28			-28
DJT HOLDINGS MM LLC		-24	-4		-28
DJT HOLDINGS MM LLC		-28	-3		-31
DJT HOLDINGS MM LLC		-28			-28
DJT HOLDINGS MM LLC		-28	-3		-31
DJT HOLDINGS MM LLC		-28	-3		-31
EID VENTURE II MEMBE		-343	-40		-383
DJT HOLDINGS MM LLC		-14	-2		-16
DJT HOLDINGS MM LLC		-8			-8
HUDSON WATERFRONT AS	374,500			374,500	
EID VENTURE II LLC		-435	-45		-480
DJT HOLDINGS LLC - D		-768	-32		-800
DJT HOLDINGS LLC - D		-743,454			-743,454
DJT HOLDINGS MM LLC		-7,586			-7,586
DJT HOLDINGS MM LLC		-5,144	-1,421		-7,565
TRUMP PALACE PARC LL		-349,300	-19,987		-369,287
DJT HOLDINGS LLC - W		-309	-556		-865
DJT HOLDINGS LLC - T		-85	-58		-123
DJT HOLDINGS LLC - T		-378			-378
DJT HOLDINGS LLC - W			-3,166		-3,166
DJT HOLDINGS LLC - T		-56	-7		-63
DJT HOLDINGS LLC - L		-654	-111		-765
DJT HOLDINGS LLC - T		-353	-38		-391
DJT HOLDINGS LLC - T		-362	-171		-533
DJT HOLDINGS LLC - T		-1,276	-32		-1,308
DJT HOLDINGS LLC - T		-250	-15		-265
DJT HOLDINGS LLC - C		-981	-161		-1,142
DJT HOLDINGS LLC - D		-410	-45		-455
DJT HOLDINGS LLC - T		-353	-38		-391
DJT HOLDINGS LLC - T		-250	-28		-278
DJT HOLDINGS LLC - T		-54,247	-3,662		-57,909
DJT HOLDINGS LLC - T		-250	-249		-499
DJT HOLDINGS LLC - T		-486	-53		-539
DJT HOLDINGS LLC - T		-56	-9		-65
DJT HOLDINGS LLC - T		-541,181	-66,159		-607,340
DJT HOLDINGS LLC - W		-879,656	-666		-880,322
TRUMP EQUITABLE FIFT	23,401,740	-303,710		23,098,030	
DJT HOLDINGS LLC		-1,028,598	-209,201		-1,237,799
DJT HOLDINGS MM LLC		-449	-109		-558
DJT HOLDINGS MM LLC		-4,452			-4,452
DJT HOLDINGS MM LLC	1,963		-29	1,934	
DJT HOLDINGS MM LLC/		-5,466	-632		-6,098
DJT HOLDINGS MM LLC/		-8,885	-7		-8,892
DJT HOLDINGS MM LLC/		-5	-1		-6
DJT HOLDINGS MM LLC/		-1	-1		-2
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-1	-1		-2
DJT HOLDINGS MM LLC/		-21			-21
DJT HOLDINGS MM LLC/			-32		-32
DJT HOLDINGS MM LLC/		-13			-13
DJT HOLDINGS MM LLC/		-3			-3
DJT HOLDINGS MM LLC/		-10	-2		-12
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/		-548	-37		-585
DJT HOLDINGS MM LLC/		-33,572			-33,572
DJT HOLDINGS MM LLC/		-308	-33		-341
DJT HOLDINGS MM LLC/	637		-4	633	
DJT HOLDINGS MM LLC/			-4		-4
DJT HOLDINGS MM LLC/		-13,661	-3,493		-17,154
DJT HOLDINGS MM LLC/		-6,069	-1,406		-7,475
DJT HOLDINGS MM LLC/		-4,641	-849		-5,490
DJT HOLDINGS MM LLC/	21,571			21,571	
DJT HOLDINGS MM LLC/	8,749		-477	8,272	
DJT HOLDINGS MM LLC/	15,435			15,435	
DJT HOLDINGS MM LLC/	262			262	
DJT HOLDINGS MM LLC/		-230,456	-17,179		-247,635
DJT HOLDINGS MM LLC/			-16		-16
DJT HOLDINGS MM LLC/	116			116	
DJT HOLDINGS MM LLC/			-1,898		-1,898
DJT HOLDINGS MM LLC/	924			924	
DJT HOLDINGS MM LLC/			-5,050		-5,050
DJT HOLDINGS MM LLC/	26,390		-766	25,624	
DJT HOLDINGS MM LLC/		-2,752	-628		-3,380
DJT HOLDINGS MM LLC/		-3			-3
DJT HOLDINGS MM LLC/		-323	-3,708		-4,031
DJT HOLDINGS MM LLC/		-1			-1
DJT HOLDINGS MM LLC/		-7	-1		-8
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/			-1		-1
DJT HOLDINGS MM LLC/			-3		-3
DJT HOLDINGS MM LLC/	83			80	
DJT HOLDINGS MM LLC/		-16			-16
DJT HOLDINGS MM LLC/			-3		-3

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/			-3		-3
DJT HOLDINGS MM LLC/			-2		-2
DJT HOLDINGS MM LLC/		-5	-1		-5
DJT HOLDINGS MM LLC/		-21	-3		-24
DJT HOLDINGS MM LLC/	2,123			2,123	
DJT HOLDINGS MM LLC/			-23		-23
DJT HOLDINGS MM LLC/		-164	-18		-182
DJT HOLDINGS MM LLC/			-3		-3
DJT HOLDINGS MM LLC/		-12	-47		-59
DJT HOLDINGS MM LLC/		-46			-46
DJT HOLDINGS MM LLC/		-4			-4
DJT HOLDINGS MM LLC/		-117	-17		-134
DJT HOLDINGS MM LLC/		-3	-6		-9
DJT HOLDINGS MM LLC/		-209	-26		-235
DJT HOLDINGS MM LLC/		-15,293	-1,516		-16,809
DJT HOLDINGS MM LLC/			-4		-4
DJT HOLDINGS MM LLC/		-21	-3		-24
DJT HOLDINGS MM LLC/			-3		-3
DJT HOLDINGS MM LLC/			-1		-1
DJT HOLDINGS MM LLC/		-1			-1
DJT HOLDINGS MM LLC/			-2,295		-2,295
DJT HOLDINGS MM LLC/			-99		-99
DJT HOLDINGS MM LLC/		-10,037	-5,170		-15,207
DJT HOLDINGS MM LLC/			-729		-729
DJT HOLDINGS MM LLC/		-2,534			-2,534
DJT HOLDINGS MM LLC/		-2,767	-530		-3,297
DJT HOLDINGS MM LLC/		-7,458	-1,514		-8,972
DJT HOLDINGS MM LLC		-54	-4		-58
DJT HOLDINGS LLC - T			-2,132		-2,132
DJT HOLDINGS MM LLC		-23	-9		-32
DJT HOLDINGS MM LLC		-33	-3		-36
DJT HOLDINGS MM LLC	141			138	
DJT HOLDINGS MM LLC	420			420	
DJT HOLDINGS MM LLC		-29	-3		-32
DJT HOLDINGS MM LLC/		-4	-2		-6
DJT HOLDINGS LLC - T		-910	-100		-1,010
DJT HOLDINGS LLC - D	31,122			31,122	
DJT HOLDINGS LLC - T		-65	-6		-71
DJT HOLDINGS LLC - T		-32,007	-35		-32,042
DJT HOLDINGS LLC - T		-353	-32		-385
DJT HOLDINGS LLC - D		-2,045			-2,045
DJT HOLDINGS LLC - F		-194	-15		-209
DJT HOLDINGS LLC - 1		-338,760	-6,034		-344,794
DJT HOLDINGS LLC - 1	96,444		-10,380	86,064	
DJT HOLDINGS LLC - T	60,570			60,570	
555 CALIFORNIA SERVI		-109,337	-12,310		-121,647
DJT HOLDINGS LLC - T		-25	-4		-29
DJT HOLDINGS LLC - T		-102,276			-102,276
DJT HOLDINGS LLC - 1		-376,826	-111,519		-488,345
DJT HOLDINGS MM LLC	4,580			4,580	
DJT HOLDINGS MM LLC/		-1,223	-313		-1,536
DJT HOLDINGS MM LLC/	4,065			4,065	
DJT HOLDINGS MM LLC	1,739			1,739	
DJT HOLDINGS MM LLC	101,781			101,781	
DJT HOLDINGS LLC MM	3,597	-271		3,326	
DJT HOLDINGS LLC - D		-2,236			-2,236
DJT HOLDINGS - THC B		-2,800			-2,800
DJT HOLDINGS LLC - T		-431			-431
DJT HOLDINGS LLC - F		-479			-479
DJT HOLDINGS LLC - T		-472			-472
DJT AEROSPACE LLC			-7,159		-7,159
DJT OPERATIONS I LLC		-3,239			-3,239
DT ENDEAVOR I LLC			-25,117		-25,117
DJT OPERATIONS II LL		-3,082	-805		-3,887
BOOK	88,972			88,972	

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	17,157	0.00024	4,230
THE EAST 61 ST. COMP	SCH E	54	0.00000	13
PARK BRIAR ASSOCIATE	SCH E	15,754	0.00022	3,884
40 WALL DEVELOPMENT	FORM 4797	289,351	0.00403	71,344
40 WALL DEVELOPMENT	SCH E	1,288,624	0.01796	317,730
TRUMP CPS LLC	FORM 4797	4,446	0.00006	1,096
DJT HOLDINGS LLC - M	SCH E	23,298	0.00032	5,744
DJT HOLDINGS LLC TRU	SCH E	62,973	0.00088	15,527
DJT HOLDINGS LLC - T	SCH E	63	0.00000	16
TIPPERARY REALTY COR	FORM 4797	315	0.00000	78
PLAZA CONSULTING COR	SCH E	184	0.00000	45
TRUMP PROJECT MANAGE	SCH E	10,746	0.00015	2,650
TRUMP CPS CORP	FORM 4797	4	0.00000	1
FIRST MEMBER INC	SCH E	402	0.00001	99
DJT HOLDINGS MM LLC	SCH E	480	0.00001	118
TRUMP VILLAGE CONST	SCH E	18,141	0.00025	4,473
TRUMP TOWER MANAGING	FORM 4797	3,181	0.00004	784
TRUMP #45 UN MGR COR	SCH E	2,161	0.00003	533
BEACH HAVEN APARTMEN	SCH E	15,563	0.00022	3,835
SHORE HAVEN APARTMEN	SCH E	17,101	0.00024	4,217
TRUMP DELMONICO LLC	SCH E	5,637	0.00008	1,390
STARRETT CITY ASSOCI	SCH E	42,783	0.00060	10,549
TRUMP PARK AVENUE LL	SCH E	5,645	0.00008	1,392
DJT HOLDINGS MM LLC	SCH E	1,489	0.00002	367
DJT HOLDINGS LLC - D	SCH E	122	0.00000	30



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	28,082	0.00039	6,924
DJT HOLDINGS LLC - T	SCH E	3,537,830	0.04930	872,306
DJT HOLDINGS MM LLC	SCH E	7	0.00000	2
DJT HOLDINGS LLC - T	SCH E	65	0.00000	16
TRUMP FLORIDA MANAGE	SCH E	4	0.00000	1
TIHT MEMBER LLC	SCH E	975	0.00001	240
DJT HOLDINGS LLC -TR	SCH E	700	0.00001	173
DJT HOLDINGS LLC - T	SCH E	2,752,330	0.03835	678,629
TRUMP MARKS PHILADEL	SCH E	3,516	0.00005	867
TRUMP MARKS WAIKIKI	SCH E	3,022	0.00004	745
TRUMP MARKS WAIKIKI	SCH E	567	0.00001	140
DJT HOLDINGS MM LLC	SCH E	33	0.00000	8
DJT HOLDINGS MM LLC	SCH E	33	0.00000	8
DJT HOLDINGS MM LLC	SCH E	30	0.00000	7
TRUMP MARKS PHILADEL	SCH E	376	0.00001	93
DJT HOLDINGS MM LLC	SCH E	33	0.00000	8
DJT HOLDINGS LLC -TR	SCH E	17,819	0.00025	4,394
DJT HOLDINGS MMC LLC	SCH E	18	0.00000	4
DJT HOLDINGS MM LLC	SCH E	1	0.00000	
DJT HOLDINGS LLC - T	SCH E	415,415	0.00579	102,427
DJT HOLDINGS MM LLC	SCH E	413	0.00001	102
DJT HOLDINGS MM LLC	SCH E	26	0.00000	6
DJT HOLDINGS LLC - U	SCH E	2,508	0.00003	618
DJT HOLDINGS LLC - T	SCH E	3,105	0.00004	766
DJT HOLDINGS MM LLC	SCH E	32	0.00000	8
DJT HOLDINGS MM LLC	SCH E	5,399	0.00008	1,331
DJT HOLDINGS LLC - G	SCH E	197,647	0.00275	48,733
MELANIA MARKS ACCESS	SCH E	1,804	0.00003	445
DJT HOLDINGS LLC - T	SCH E	93	0.00000	23
MELANIA MARKS ACCESS	SCH E	76	0.00000	19
DJT HOLDINGS MM LLC	SCH E	59	0.00000	15
SC LP SHOPPING CENTE	SCH E	474	0.00001	117
DJT HOLDINGS LLC - T	SCH E	5,785	0.00008	1,426
DJT HOLDINGS LLC - T	SCH E	2,301	0.00003	567
DJT HOLDINGS MM LLC	SCH E	135	0.00000	33
DJT HOLDINGS MM LLC	SCH E	37	0.00000	9
TRUMP FERRY POINT ME	SCH E	15,361	0.00021	3,787
DJT HOLDINGS MM LLC	SCH E	16,979	0.00024	4,186
DJT HOLDINGS MM LLC	SCH E	24	0.00000	6
DJT HOLDINGS MM LLC	SCH E	2,016	0.00003	497
DJT HOLDINGS LLC - T	SCH E	1,505,526	0.02098	371,210
DJT HOLDINGS LLC - T	SCH E	1,664,108	0.02319	410,311
DJT HOLDINGS LLC - P	SCH E	1,475	0.00002	364
DJT HOLDINGS LLC - T	SCH E	4,505	0.00006	1,111
DJT HOLDINGS LLC -TR	SCH E	387	0.00001	95
DJT HOLDINGS LLC - T	SCH E	13,251	0.00018	3,267
DJT HOLDINGS LLC - T	SCH E	3,620	0.00005	893
DJT HOLDINGS MM LLC	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC	SCH E	16	0.00000	4
DJT HOLDINGS MM LLC	SCH E	33	0.00000	8
DJT HOLDINGS MANAGIN	SCH E	2,532,475	0.03529	624,420
DJT HOLDINGS MM LLC	SCH E	46	0.00000	11
DJT HOLDINGS LLC - T	SCH E	33,767	0.00047	8,326
DJT HOLDINGS LLC - T	SCH E	3,256	0.00005	803
DJT HOLDINGS LLC - T	SCH E	1,705,890	0.02377	420,613
DJT HOLDINGS LLC - T	SCH E	741,461	0.01033	182,818
DJT HOLDINGS LLC - T	SCH E	529,144	0.00737	130,468
DJT HOLDINGS LLC - T	SCH E	386,917	0.00539	95,400
DJT HOLDINGS LLC - T	SCH E	3,214	0.00004	792
DJT HOLDINGS LLC - T	SCH E	2,138	0.00003	527
DJT HOLDINGS LLC - T	SCH E	540	0.00001	133
DJT HOLDINGS MM LLC	SCH E	22	0.00000	5
DJT HOLDINGS MM LLC	SCH E	33	0.00000	8
DJT HOLDINGS MM LLC	SCH E	34	0.00000	8
DJT HOLDINGS MM LLC	SCH E	345	0.00000	85
DJT HOLDINGS MM LLC	SCH E	85,627	0.00119	21,113
TAG AIR INC	SCH E	2,834,153	0.03949	698,803
DJT HOLDINGS MM LLC	SCH E	3,401	0.00005	839
DJT HOLDINGS MM LLC	SCH E	6	0.00000	1
DJT HOLDINGS MM LLC	SCH E	17,327	0.00024	4,272
DJT HOLDINGS LLC -	SCH E	333,999	0.00465	82,353
DJT HOLDINGS MM LLC	SCH E	3,263	0.00005	805
DJT HOLDINGS MM LLC	SCH E	33	0.00000	8
DJT HOLDINGS MM LLC	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC	SCH E	4	0.00000	1
T INTERNATIONAL REAL	SCH E	35,062	0.00049	8,645
DJT HOLDINGS LLC - T	SCH E	441	0.00001	109
DJT HOLDINGS - WHITE	SCH E	387	0.00001	95
DJT HOLDINGS - TRUMP	SCH E	24,515,828	0.34163	6,044,750
DJT HOLDINGS LLC - T	SCH E	888,136	0.01238	218,983
DJT HOLDINGS LLC - E	SCH E	72,149	0.00101	17,789
DT MARKS VANCOUVER L	SCH E	2,927	0.00004	722
DJT HOLDINGS LLC - T	SCH E	1,582	0.00002	390
DJT HOLDINGS LLC - C	SCH E	5,609	0.00008	1,383
DJT HOLDINGS LLC - T	SCH E	387	0.00001	95
DJT HOLDINGS LLC - T	SCH E	152,014	0.00212	37,481
DJT HOLDINGS MM LLC	SCH E	17	0.00000	4
DJT HOLDINGS MM LLC	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC	SCH E	736	0.00001	181
DJT HOLDINGS MM LLC	SCH E	2,650	0.00004	653
DJT HOLDINGS MM LLC	SCH E	9,230	0.00013	2,276
DJT HOLDINGS LLC - T	SCH E	1,852,344	0.02581	456,724
DJT HOLDINGS MANAGIN	SCH E	626,905	0.00874	154,573
TRUMP PARK AVENUE LL	SCH E	949,073	0.01323	234,008

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
TRUMP PARK AVENUE LL	SCH E	963,785	0.01343	237,636
DT CONNECT II MEMBER	SCH E	3,827	0.00005	944
DJT HOLDINGS MM LLC	SCH E	27	0.00000	7
DJT HOLDINGS MM LLC	SCH E	156	0.00000	38
DJT HOLDINGS MM LLC	SCH E	24	0.00000	6
DJT HOLDINGS MM LLC	SCH E	7	0.00000	2
TTTT VENTURE MEMBER	SCH E	1,994	0.00003	492
DJT HOLDINGS MM LLC	SCH E	102,513	0.00143	25,276
DJT HOLDINGS LLC - T	SCH E	2,319	0.00003	572
DJT HOLDINGS-D B PAC	SCH E	906	0.00001	223
DJT HOLDINGS LLC - T	SCH E	681	0.00001	168
DJT HOLDINGS LLC - T	SCH E	1,912	0.00003	471
DJT HOLDINGS LLC - P	SCH E	15,352	0.00021	3,785
DJT HOLDINGS LLC -TW	SCH E	4,366,498	0.06085	1,076,627
DT CONNECT II LLC	SCH E	378,866	0.00528	93,415
DJT HOLDINGS LLC - T	SCH E	10,047,329	0.14001	2,477,323
DJT HOLDINGS MM LLC	SCH E	44,532	0.00052	10,980
DJT HOLDINGS MM LLC	SCH E	3	0.00000	1
DJT HOLDINGS MM LLC	SCH E	37	0.00000	9
DJT HOLDINGS MM LLC	SCH E	38	0.00000	9
DJT HOLDINGS MM LLC	SCH E	28	0.00000	7
DJT HOLDINGS MM LLC	SCH E	28	0.00000	7
DJT HOLDINGS MM LLC	SCH E	31	0.00000	8
DJT HOLDINGS MM LLC	SCH E	28	0.00000	7
DJT HOLDINGS MM LLC	SCH E	31	0.00000	8
DJT HOLDINGS MM LLC	SCH E	31	0.00000	8
EID VENTURE II MEMBE	SCH E	383	0.00001	94
DJT HOLDINGS MM LLC	SCH E	16	0.00000	4
DJT HOLDINGS MM LLC	SCH E	8	0.00000	2
EID VENTURE II LLC	SCH E	480	0.00001	118
DJT HOLDINGS LLC - D	SCH E	800	0.00001	197
DJT HOLDINGS LLC - D	SCH E	743,454	0.01036	183,310
DJT HOLDINGS MM LLC	SCH E	7,586	0.00011	1,870
DJT HOLDINGS MM LLC	SCH E	7,565	0.00011	1,865
TRUMP PALACE PARC LL	SCH E	369,287	0.00515	91,053
DJT HOLDINGS LLC - W	SCH E	865	0.00001	213
DJT HOLDINGS LLC - T	SCH E	123	0.00000	30
DJT HOLDINGS LLC - T	SCH E	378	0.00001	93
DJT HOLDINGS LLC - W	SCH E	3,166	0.00004	781
DJT HOLDINGS LLC - T	SCH E	63	0.00000	16
DJT HOLDINGS LLC - L	SCH E	765	0.00001	189
DJT HOLDINGS LLC - T	SCH E	391	0.00001	96
DJT HOLDINGS LLC - T	SCH E	533	0.00001	131
DJT HOLDINGS LLC - T	SCH E	1,308	0.00002	323
DJT HOLDINGS LLC - T	SCH E	265	0.00000	65
DJT HOLDINGS LLC - C	SCH E	1,142	0.00002	282
DJT HOLDINGS LLC - D	SCH E	455	0.00001	112
DJT HOLDINGS LLC - T	SCH E	391	0.00001	96
DJT HOLDINGS LLC - T	SCH E	278	0.00000	69
DJT HOLDINGS LLC - T	SCH E	57,909	0.00081	14,278
DJT HOLDINGS LLC - T	SCH E	499	0.00001	123
DJT HOLDINGS LLC - T	SCH E	539	0.00001	133
DJT HOLDINGS LLC - T	SCH E	65	0.00000	16
DJT HOLDINGS LLC - T	SCH E	607,340	0.00846	149,749
DJT HOLDINGS LLC - W	SCH E	880,322	0.01227	217,057
DJT HOLDINGS LLC	SCH E	1,237,799	0.01725	305,199
DJT HOLDINGS MM LLC	SCH E	558	0.00001	138
DJT HOLDINGS MM LLC	SCH E	4,452	0.00006	1,098
DJT HOLDINGS MM LLC/	SCH E	6,098	0.00008	1,504
DJT HOLDINGS MM LLC/	SCH E	8,892	0.00012	2,192
DJT HOLDINGS MM LLC/	SCH E	6	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	2	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	2	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	21	0.00000	5
DJT HOLDINGS MM LLC/	SCH E	32	0.00000	8
DJT HOLDINGS MM LLC/	SCH E	13	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	12	0.00000	3
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	585	0.00001	144
DJT HOLDINGS MM LLC/	SCH E	33,572	0.00047	8,278
DJT HOLDINGS MM LLC/	SCH E	341	0.00000	84
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	17,154	0.00024	4,230
DJT HOLDINGS MM LLC/	SCH E	7,475	0.00010	1,843
DJT HOLDINGS MM LLC/	SCH E	5,490	0.00008	1,354
DJT HOLDINGS MM LLC/	SCH E	247,635	0.00345	61,058
DJT HOLDINGS MM LLC/	SCH E	16	0.00000	4
DJT HOLDINGS MM LLC/	SCH E	1,898	0.00003	468
DJT HOLDINGS MM LLC/	SCH E	5,050	0.00007	1,245
DJT HOLDINGS MM LLC/	SCH E	3,380	0.00005	833
DJT HOLDINGS MM LLC/	SCH E	6	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	4,031	0.00006	994
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	8	0.00000	2
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	19	0.00000	5
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	2	0.00000	1

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	6	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	24	0.00000	6
DJT HOLDINGS MM LLC/	SCH E	23	0.00000	6
DJT HOLDINGS MM LLC/	SCH E	182	0.00000	45
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	59	0.00000	15
DJT HOLDINGS MM LLC/	SCH E	46	0.00000	11
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	134	0.00000	33
DJT HOLDINGS MM LLC/	SCH E	9	0.00000	2
DJT HOLDINGS MM LLC/	SCH E	235	0.00000	58
DJT HOLDINGS MM LLC/	SCH E	16,809	0.00023	4,145
DJT HOLDINGS MM LLC/	SCH E	4	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	24	0.00000	6
DJT HOLDINGS MM LLC/	SCH E	3	0.00000	1
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	
DJT HOLDINGS MM LLC/	SCH E	1	0.00000	
DJT HOLDINGS MM LLC/	SCH E	2,295	0.00003	566
DJT HOLDINGS MM LLC/	SCH E	99	0.00000	24
DJT HOLDINGS MM LLC/	SCH E	15,207	0.00021	3,750
DJT HOLDINGS MM LLC/	SCH E	729	0.00001	180
DJT HOLDINGS MM LLC/	SCH E	2,534	0.00004	625
DJT HOLDINGS MM LLC/	SCH E	3,297	0.00005	813
DJT HOLDINGS MM LLC/	SCH E	8,972	0.00013	2,212
DJT HOLDINGS MM LLC	SCH E	58	0.00000	14
DJT HOLDINGS LLC - T	SCH E	2,132	0.00003	526
DJT HOLDINGS MM LLC	SCH E	32	0.00000	8
DJT HOLDINGS MM LLC	SCH E	36	0.00000	9
DJT HOLDINGS MM LLC	SCH E	32	0.00000	8
DJT HOLDINGS MM LLC/	SCH E	6	0.00000	1
DJT HOLDINGS LLC - T	SCH E	1,010	0.00001	249
DJT HOLDINGS LLC - T	SCH E	71	0.00000	18
DJT HOLDINGS LLC - T	SCH E	32,042	0.00045	7,900
DJT HOLDINGS LLC - T	SCH E	385	0.00001	95
DJT HOLDINGS LLC - D	SCH E	2,045	0.00003	504
DJT HOLDINGS LLC - F	SCH E	209	0.00000	52
DJT HOLDINGS LLC - 1	SCH E	344,794	0.00480	85,014
555 CALIFORNIA SERVI	SCH E	121,647	0.00170	29,994
DJT HOLDINGS LLC - T	SCH E	29	0.00000	7
DJT HOLDINGS LLC - T	SCH E	102,276	0.00143	25,218
DJT HOLDINGS LLC - 1	SCH E	488,345	0.00681	120,409
DJT HOLDINGS MM LLC/	SCH E	1,536	0.00002	379
DJT HOLDINGS LLC - D	SCH E	2,236	0.00003	551
DJT HOLDINGS - THC B	SCH E	2,800	0.00004	690
DJT HOLDINGS LLC - T	SCH E	431	0.00001	106
DJT HOLDINGS LLC - F	SCH E	479	0.00001	118
DJT HOLDINGS LLC -T	SCH E	472	0.00001	116
DJT AEROSPACE LLC	SCH C	7,159	0.00010	1,765
DJT OPERATIONS I LLC	SCH C	3,239	0.00005	799
DT ENDEAVOR I LLC	SCH C	25,117	0.00035	6,194
DJT OPERATIONS II LL	SCH C	3,887	0.00005	958

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	17,157	4,230	12,927
THE EAST 61 ST. COMP	SCH E	54	13	41
PARK BRIAR ASSOCIATE	SCH E	15,754	3,884	11,870
40 WALL DEVELOPMENT	FORM 4797	289,351	71,344	218,007
40 WALL DEVELOPMENT	SCH E	1,288,624	317,730	970,894
TRUMP CPS LLC	FORM 4797	4,446	1,096	3,350
DJT HOLDINGS LLC - M	SCH E	23,298	5,744	17,554
TRUMP 845 UN LIMITED	SCH E	6,039		6,039
DJT HOLDINGS LLC TRU	SCH E	62,973	15,527	47,446
DJT HOLDINGS LLC - T	SCH E	63	16	47
TIPPERARY REALTY COR	FORM 4797	315	78	237
PLAZA CONSULTING COR	SCH E	184	45	139
TRUMP PROJECT MANAGE	SCH E	10,746	2,650	8,096
TRUMP CPS CORP	FORM 4797	4	1	3
FIRST MEMBER INC	SCH E	402	99	303
DJT HOLDINGS MM LLC	SCH E	480	118	362
TRUMP VILLAGE CONST	SCH E	18,141	4,473	13,668
TRUMP TOWER MANAGING	FORM 4797	3,181	784	2,397
TRUMP 845 UN MGR COR	SCH E	2,161	533	1,628
BEACH HAVEN APARTMEN	SCH E	15,553	3,835	11,718
SHORE HAVEN APARTMEN	SCH E	17,101	4,217	12,884
TRUMP MANAGEMENT INC	SCH E	698		698
TRUMP DELMONICO LLC	SCH E	5,637	1,390	4,247
STARRETT CITY ASSOCI	SCH E	42,783	10,549	32,234
TRUMP PARK AVENUE LL	SCH E	5,645	1,392	4,253
DJT HOLDINGS MM LLC	SCH E	1,489	367	1,122
DJT HOLDINGS LLC - D	SCH E	122	30	92
DJT HOLDINGS LLC - T	SCH E	3,537,830	872,306	2,665,524
DJT HOLDINGS MM LLC	SCH E	7	2	5
DJT HOLDINGS LLC - T	SCH E	65	16	49
TRUMP FLORIDA MANAGE	SCH E	4	1	3
TIHT MEMBER LLC	SCH E	975	240	735
DJT HOLDINGS LLC -TR	SCH E	700	173	527
TRUMP MARKS PHILADEL	SCH E	3,516	867	2,649
TRUMP MARKS WAIKIKI	SCH E	3,022	745	2,277
TRUMP MARKS WAIKIKI	SCH E	567	140	427
DJT HOLDINGS MM LLC	SCH E	33	8	25
DJT HOLDINGS MM LLC	SCH E	33	8	25

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	30	7	23
TRUMP MARKS PHILADEL	SCH E	376	93	283
DJT HOLDINGS MM LLC	SCH E	33	8	25
DJT HOLDINGS LLC -TR	SCH E	17,819	4,394	13,425
DJT HOLDINGS MMC LLC	SCH E	18	4	14
DJT HOLDINGS MM LLC	SCH E	1		1
DJT HOLDINGS MM LLC	SCH E	413	102	311
DJT HOLDINGS MM LLC	SCH E	26	6	20
DJT HOLDINGS LLC - U	SCH E	2,508	618	1,890
DJT HOLDINGS LLC - T	SCH E	3,105	766	2,339
DJT HOLDINGS MM LLC	SCH E	32	8	24
DJT HOLDINGS MM LLC	SCH E	5,399	1,331	4,068
DJT HOLDINGS LLC - G	SCH E	197,647	48,733	148,914
DJT HOLDINGS MM LLC	SCH E	774		774
MELANIA MARKS ACCESS	SCH E	1,804	445	1,359
DJT HOLDINGS LLC - T	SCH E	93	23	70
MELANIA MARKS ACCESS	SCH E	76	19	57
DJT HOLDINGS MM LLC	SCH E	59	15	44
SC LP SHOPPING CENTE	SCH E	474	117	357
DJT HOLDINGS LLC - T	SCH E	5,785	1,426	4,359
DJT HOLDINGS LLC - T	SCH E	2,301	567	1,734
DJT HOLDINGS MM LLC	SCH E	135	33	102
DJT HOLDINGS MM LLC	SCH E	37	9	28
TRUMP FERRY POINT ME	SCH E	15,361	3,787	11,574
DJT HOLDINGS MM LLC	SCH E	16,979	4,186	12,793
DJT HOLDINGS MM LLC	SCH E	24	6	18
DJT HOLDINGS MM LLC	SCH E	2,016	497	1,519
DJT HOLDINGS LLC - T	SCH E	1,505,526	371,210	1,134,316
DJT HOLDINGS LLC - T	SCH E	1,664,108	410,311	1,253,797
DJT HOLDINGS LLC - P	SCH E	1,475	364	1,111
DJT HOLDINGS LLC - T	SCH E	4,505	1,111	3,394
DJT HOLDINGS LLC -TR	SCH E	387	95	292
DJT HOLDINGS LLC - T	SCH E	13,251	3,267	9,984
DJT HOLDINGS LLC - T	SCH E	3,620	893	2,727
DJT HOLDINGS MM LLC	SCH E	4	1	3
DJT HOLDINGS MM LLC	SCH E	16	4	12
DJT HOLDINGS MM LLC	SCH E	33	8	25
DJT HOLDINGS MANAGIN	SCH E	2,532,475	624,420	1,908,055
DJT HOLDINGS MM LLC	SCH E	46	11	35
DJT HOLDINGS LLC - T	SCH E	33,767	8,326	25,441
DJT HOLDINGS LLC - T	SCH E	3,256	803	2,453
DJT HOLDINGS LLC - T	SCH E	1,705,890	420,613	1,285,277
DJT HOLDINGS LLC - T	SCH E	741,461	182,818	558,643
DJT HOLDINGS LLC - T	SCH E	529,144	130,468	398,676
DJT HOLDINGS LLC - T	SCH E	75,826		75,826
DJT HOLDINGS LLC - T	SCH E	386,917	95,400	291,517
DJT HOLDINGS LLC - T	SCH E	3,214	792	2,422
DJT HOLDINGS LLC - T	SCH E	2,138	527	1,611
DJT HOLDINGS LLC - T	SCH E	540	133	407
DJT HOLDINGS MM LLC	SCH E	22	5	17
DJT HOLDINGS MM LLC	SCH E	33	8	25
DJT HOLDINGS MM LLC	SCH E	34	8	26
DJT HOLDINGS MM LLC	SCH E	345	85	260
DJT HOLDINGS MM LLC	SCH E	4		4
DJT HOLDINGS MM LLC	SCH E	85,627	21,113	64,514
TAG AIR INC	SCH E	2,834,153	698,803	2,135,350
DJT HOLDINGS MM LLC	SCH E	3,401	839	2,562
DJT HOLDINGS MM LLC	SCH E	6	1	5
DJT HOLDINGS MM LLC	SCH E	17,327	4,272	13,055
DJT HOLDINGS LLC -	SCH E	333,999	82,353	251,646
DJT HOLDINGS LLC -	SCH E	367		367
DJT HOLDINGS MM LLC	SCH E	3,263	805	2,458
DJT HOLDINGS MM LLC	SCH E	33	8	25
DJT HOLDINGS MM LLC	SCH E	4	1	3
DJT HOLDINGS MM LLC	SCH E	4	1	3
T INTERNATIONAL REAL	SCH E	35,062	8,645	26,417
DJT HOLDINGS LLC - T	SCH E	441	109	332
DJT HOLDINGS - WHITE	SCH E	387	95	292
DJT HOLDINGS JUPITER	SCH E	47,184		47,184
DJT HOLDINGS - TRUMP	SCH E	24,515,828	6,044,750	18,471,078
DJT HOLDINGS LLC - T	SCH E	888,136	218,983	669,153
DJT HOLDINGS LLC - E	SCH E	72,149	17,789	54,360
DT MARKS VANCOUVER L	SCH E	2,927	722	2,205
DJT HOLDINGS LLC - T	SCH E	1,582	390	1,192
DJT HOLDINGS LLC - C	SCH E	5,609	1,383	4,226
DJT HOLDINGS LLC - T	SCH E	387	95	292
DJT HOLDINGS LLC - T	SCH E	152,014	37,481	114,533
DJT HOLDINGS MM LLC	SCH E	17	4	13
DJT HOLDINGS MM LLC	SCH E	4	1	3
DJT HOLDINGS MM LLC	SCH E	4	1	3
DJT HOLDINGS MM LLC	SCH E	736	181	555
DJT HOLDINGS MM LLC	SCH E	2,650	653	1,997
DJT HOLDINGS MM LLC	SCH E	9,230	2,276	6,954
DJT HOLDINGS LLC - T	SCH E	1,852,344	456,724	1,395,620
DJT HOLDINGS MANAGIN	SCH E	626,905	154,573	472,332
TRUMP PARK AVENUE LL	SCH E	949,073	234,008	715,065
TRUMP PARK AVENUE LL	SCH E	963,785	237,636	726,149
DT CONNECT II MEMBER	SCH E	3,827	944	2,883
DJT HOLDINGS MM LLC	SCH E	27	7	20
DJT HOLDINGS MM LLC	SCH E	155	38	118
DJT HOLDINGS MM LLC	SCH E	3		3
DJT HOLDINGS MM LLC	SCH E	24	6	18
DJT HOLDINGS MM LLC	SCH E	7	2	5
TTTT VENTURE MEMBER	SCH E	1,994	492	1,502
DJT HOLDINGS MM LLC	SCH E	102,513	25,276	77,237

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	2,319	572	1,747
DJT HOLDINGS-D B PAC	SCH E	906	223	683
DJT HOLDINGS LLC - T	SCH E	325		325
DJT HOLDINGS LLC - T	SCH E	681	168	513
DJT HOLDINGS LLC - T	SCH E	1,912	471	1,441
DJT HOLDINGS LLC - P	SCH E	15,352	3,785	11,567
DJT HOLDINGS LLC -TW	SCH E	4,366,498	1,076,627	3,289,871
DT CONNECT II LLC	SCH E	378,866	93,415	285,451
DJT HOLDINGS LLC - T	SCH E	10,047,329	2,477,323	7,570,006
DJT HOLDINGS MM LLC	SCH E	44,532	10,980	33,552
DJT HOLDINGS MM LLC	SCH E	3	1	2
DJT HOLDINGS MM LLC	SCH E	37	9	28
DJT HOLDINGS MM LLC	SCH E	38	9	29
DJT HOLDINGS MM LLC	SCH E	28	7	21
DJT HOLDINGS MM LLC	SCH E	28	7	21
DJT HOLDINGS MM LLC	SCH E	31	8	23
DJT HOLDINGS MM LLC	SCH E	28	7	21
DJT HOLDINGS MM LLC	SCH E	31	8	23
DJT HOLDINGS MM LLC	SCH E	31	8	23
EID VENTURE II MEMBE	SCH E	383	94	289
DJT HOLDINGS MM LLC	SCH E	16	4	12
DJT HOLDINGS MM LLC	SCH E	8	2	6
EID VENTURE II LLC	SCH E	480	118	362
DJT HOLDINGS LLC - D	SCH E	800	197	603
DJT HOLDINGS LLC - D	SCH E	743,454	183,310	560,144
DJT HOLDINGS MM LLC	SCH E	7,586	1,870	5,716
DJT HOLDINGS MM LLC	SCH E	7,565	1,865	5,700
TRUMP PALACE PARC LL	SCH E	369,287	91,053	278,234
DJT HOLDINGS LLC - W	SCH E	865	213	652
DJT HOLDINGS LLC - T	SCH E	123	30	93
DJT HOLDINGS LLC - T	SCH E	378	93	285
DJT HOLDINGS LLC - W	SCH E	3,166	781	2,385
DJT HOLDINGS LLC - T	SCH E	63	16	47
DJT HOLDINGS LLC - L	SCH E	765	189	576
DJT HOLDINGS LLC - T	SCH E	391	96	295
DJT HOLDINGS LLC - T	SCH E	533	131	402
DJT HOLDINGS LLC - T	SCH E	1,308	323	985
DJT HOLDINGS LLC - T	SCH E	265	65	200
DJT HOLDINGS LLC - C	SCH E	1,142	282	860
DJT HOLDINGS LLC - D	SCH E	455	112	343
DJT HOLDINGS LLC - T	SCH E	391	96	295
DJT HOLDINGS LLC - T	SCH E	278	69	209
DJT HOLDINGS LLC - T	SCH E	57,909	14,278	43,631
DJT HOLDINGS LLC - T	SCH E	499	123	376
DJT HOLDINGS LLC - T	SCH E	539	133	406
DJT HOLDINGS LLC - T	SCH E	65	16	49
DJT HOLDINGS LLC - T	SCH E	607,340	149,749	457,591
DJT HOLDINGS LLC - W	SCH E	880,322	217,057	663,265
TRUMP EQUITABLE FIFT	SCH E	303,710		303,710
DJT HOLDINGS LLC	SCH E	1,237,799	305,199	932,600
DJT HOLDINGS MM LLC	SCH E	558	138	420
DJT HOLDINGS MM LLC	SCH E	29		29
DJT HOLDINGS MM LLC/	SCH E	6,098	1,504	4,594
DJT HOLDINGS MM LLC/	SCH E	8,892	2,192	6,700
DJT HOLDINGS MM LLC/	SCH E	6	1	5
DJT HOLDINGS MM LLC/	SCH E	2		2
DJT HOLDINGS MM LLC/	SCH E	4	1	3
DJT HOLDINGS MM LLC/	SCH E	2		2
DJT HOLDINGS MM LLC/	SCH E	21	5	16
DJT HOLDINGS MM LLC/	SCH E	32	8	24
DJT HOLDINGS MM LLC/	SCH E	13	3	10
DJT HOLDINGS MM LLC/	SCH E	3	1	2
DJT HOLDINGS MM LLC/	SCH E	12	3	9
DJT HOLDINGS MM LLC/	SCH E	4	1	3
DJT HOLDINGS MM LLC/	SCH E	4	1	3
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	3	1	2
DJT HOLDINGS MM LLC/	SCH E	585	144	441
DJT HOLDINGS MM LLC/	SCH E	33,572	8,278	25,294
DJT HOLDINGS MM LLC/	SCH E	341	84	257
DJT HOLDINGS MM LLC/	SCH E	4		4
DJT HOLDINGS MM LLC/	SCH E	4	1	3
DJT HOLDINGS MM LLC/	SCH E	17,154	4,230	12,924
DJT HOLDINGS MM LLC/	SCH E	7,475	1,843	5,632
DJT HOLDINGS MM LLC/	SCH E	5,490	1,354	4,136
DJT HOLDINGS MM LLC/	SCH E	477		477
DJT HOLDINGS MM LLC/	SCH E	247,635	61,058	186,577
DJT HOLDINGS MM LLC/	SCH E	16	4	12
DJT HOLDINGS MM LLC/	SCH E	1,898	468	1,430
DJT HOLDINGS MM LLC/	SCH E	5,050	1,245	3,805
DJT HOLDINGS MM LLC/	SCH E	766		766
DJT HOLDINGS MM LLC/	SCH E	3,380	833	2,547
DJT HOLDINGS MM LLC/	SCH E	6	1	5
DJT HOLDINGS MM LLC/	SCH E	4,031	994	3,037
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	8	2	6
DJT HOLDINGS MM LLC/	SCH E	4	1	3
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	3		3
DJT HOLDINGS MM LLC/	SCH E	19	5	14
DJT HOLDINGS MM LLC/	SCH E	3	1	2
DJT HOLDINGS MM LLC/	SCH E	3	1	2
DJT HOLDINGS MM LLC/	SCH E	2		2
DJT HOLDINGS MM LLC/	SCH E	6	1	5
DJT HOLDINGS MM LLC/	SCH E	24	6	18

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	23	6	17
DJT HOLDINGS MM LLC/	SCH E	182	45	137
DJT HOLDINGS MM LLC/	SCH E	3	1	2
DJT HOLDINGS MM LLC/	SCH E	59	15	44
DJT HOLDINGS MM LLC/	SCH E	46	11	35
DJT HOLDINGS MM LLC/	SCH E	4	1	3
DJT HOLDINGS MM LLC/	SCH E	134	33	101
DJT HOLDINGS MM LLC/	SCH E	9	2	7
DJT HOLDINGS MM LLC/	SCH E	235	58	177
DJT HOLDINGS MM LLC/	SCH E	16,809	4,145	12,664
DJT HOLDINGS MM LLC/	SCH E	4	1	3
DJT HOLDINGS MM LLC/	SCH E	24	6	18
DJT HOLDINGS MM LLC/	SCH E	3	1	2
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	1		1
DJT HOLDINGS MM LLC/	SCH E	2,295	566	1,729
DJT HOLDINGS MM LLC/	SCH E	99	24	75
DJT HOLDINGS MM LLC/	SCH E	15,207	3,750	11,457
DJT HOLDINGS MM LLC/	SCH E	729	180	549
DJT HOLDINGS MM LLC/	SCH E	2,534	625	1,909
DJT HOLDINGS MM LLC/	SCH E	3,297	813	2,484
DJT HOLDINGS MM LLC/	SCH E	8,972	2,212	6,760
DJT HOLDINGS MM LLC	SCH E	58	14	44
DJT HOLDINGS LLC - T	SCH E	2,132	526	1,606
DJT HOLDINGS MM LLC	SCH E	32	8	24
DJT HOLDINGS MM LLC	SCH E	36	9	27
DJT HOLDINGS MM LLC	SCH E	3		3
DJT HOLDINGS MM LLC	SCH E	32	8	24
DJT HOLDINGS MM LLC/	SCH E	6	1	5
DJT HOLDINGS LLC - T	SCH E	1,010	249	761
DJT HOLDINGS LLC - T	SCH E	71	18	53
DJT HOLDINGS LLC - T	SCH E	32,042	7,900	24,142
DJT HOLDINGS LLC - T	SCH E	385	95	290
DJT HOLDINGS LLC - D	SCH E	2,045	504	1,541
DJT HOLDINGS LLC - F	SCH E	209	52	157
DJT HOLDINGS LLC - 1	SCH E	344,794	85,014	259,780
DJT HOLDINGS LLC - 1	SCH E	10,380		10,380
555 CALIFORNIA SERVI	SCH E	121,647	29,994	91,653
DJT HOLDINGS LLC - T	SCH E	29	7	22
DJT HOLDINGS LLC - T	SCH E	102,276	25,218	77,058
DJT HOLDINGS LLC - 1	SCH E	488,345	120,409	367,936
DJT HOLDINGS MM LLC/	SCH E	1,536	379	1,157
DJT HOLDINGS LLC MM	SCH E	271		271
DJT HOLDINGS LLC - D	SCH E	2,236	551	1,685
DJT HOLDINGS - THC B	SCH E	2,800	690	2,110
DJT HOLDINGS LLC - T	SCH E	431	106	325
DJT HOLDINGS LLC - F	SCH E	479	118	361
DJT HOLDINGS LLC - T	SCH E	472	116	356
DJT AEROSPACE LLC	SCH C	7,159	1,765	5,394
DJT OPERATIONS I LLC	SCH C	3,239	799	2,440
DT ENDEAVOR I LLC	SCH C	25,117	6,194	18,923
DJT OPERATIONS II LL	SCH C	3,887	958	2,929

Form **8582-CR**

**Passive Activity Credit Limitations**

OMB No. 1545-1034

(Rev. December 2019)

▶ See separate instructions.  
▶ Attach to Form 1040, 1040-SR, or 1041.  
▶ Go to [www.irs.gov/Form8582CR](http://www.irs.gov/Form8582CR) for the latest information.

Attachment  
Sequence No. **89**

Department of the Treasury  
Internal Revenue Service

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

Identifying r

**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	33,662
b	Prior year unallowed credits from Worksheet 4, column (b)	4b	227,309
c	Add lines 4a and 4b	4c	260,971
5	Add lines 1c, 2c, 3c, and 4c	5	260,971
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	260,971

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 . . . . .	25		
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	<b>Passive Activity Credit Allowed.</b> 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 <b>Publicly Traded Partnerships (PTPs)</b> 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

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Software ID:

Software Version:

SSN:

Spouse SSN

Name: DONALD J & MELANIA<TRUMP

Form 8865

Return of U.S. Persons With Respect to Certain Foreign Partnerships

OMB No. 1545-1668

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/form8865 for instructions and the latest information. Attach to your tax return. Information furnished for the foreign partnership's tax year beginning 01-01-2020, and ending 12-31-2020

2020

Attachment Sequence No. 118

Name of person filing this return DONALD J TRUMP

Filer's identification number

ing this form with your tax return) PALM BEACH, FL 33480

A Category of filer (see Categories of Filers in the Instructions and check applicable box(es)): 1 [x] 2 [ ] 3 [ ] 4 [ ]

B Filer's tax year beginning 01-01-2020, and ending 12-31-2020

C Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$

D If filer is a member of a consolidated group but not the parent, enter the following information about the parent:

Name EIN Address

E Check if any excepted specified foreign financial assets are reported on this form (See Instructions) [ ]

F Information about certain other partners (see Instructions)

Table with 4 columns: (1) Name, (2) Address, (3) Identification number, (4) Check applicable box(es) (Category 1, Category 2, Constructive owner)

G1 Name and address of foreign partnership TRUMP INTERNATIONAL GOLF CLUB SCOTLAND LIMITED CO TRUMP ORGANIZATION NEW YORK, NY 10022

2(a) EIN (if any) 98-0485744

2(b) Reference ID number (see instructions)

3 Country under whose laws organized UK

4 Date of organization 2005-10-21 5 Principal place of business UK 6 Principal business activity code number 713900 7 Principal business activity AMUSEMENT & REC 8a Functional currency UK POUNDS 8b Exchange rate 0.732000000000

H Provide the following information for the foreign partnership's tax year:

1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: [ ] Form 1042 [ ] Form 8804 [ ] Form 1065 Service Center where Form 1065 is filed: 3 Name and address of foreign partnership's agent in country of organization, if any 4 Name and address of person(s) with custody of the books and records of the foreign partnership, and the location of such books and records, if different TRUMP ORGANIZATION CO JEFF MCCONNEY 022

5 During the tax year, did the foreign partnership pay or accrue any interest or royalty for which one or more partners aren't allowed a deduction under section 267A? See Instructions [ ] Yes [x] No If "Yes," enter the total amount of the disallowed deductions \$ 6 Is the partnership a section 721(c) partnership as defined in Regulations section 1.721(c)-1(b)(14)? [ ] Yes [x] No 7 Were any special allocations made by the foreign partnership? [ ] Yes [x] No 8 Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See Instructions [ ] 9 How is this partnership classified under the law of the country in which it's organized? PRIVATE LIMITED CO 10a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Reg. 1.1503(d)-1(b)(4) or part of a combined separate unit under Reg. 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b. [ ] Yes [x] No b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss as defined in Reg. 1.1503(d)-1(b)(5)(ii)? [ ] Yes [ ] No 11 Does this partnership meet both of the following requirements? 1. The partnership's total receipts for the tax year were less than \$250,000 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. [ ] Yes [x] No If "Yes," don't complete Schedules L, M-1, and M-2.

- 12a Is the filer of this Form 8865 claiming a foreign-derived intangible income deduction (under section 250) with respect to any amounts listed on Schedule N?  Yes  No
- b If "Yes," enter the amount of gross income derived from sales, leases, exchanges, or other dispositions (but not licenses) from transactions with or by the foreign partnership that the filer included in its computation of foreign-derived deduction eligible income (FDDEI).
- c If "Yes," enter the amount of gross income derived from a license of property to or by the foreign partnership that the filer included in its computation of FDDEI.
- d If "Yes," enter the amount of gross income derived from services provided to or by the foreign partnership that the filer included in its computation of FDDEI.
- 13 Enter the number of foreign partners that transferred all or a portion of their partnership interests or received a distribution subject to section 864(c)(8).
- 14 At any time during the tax year were any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?  Yes  No
- 15a Were there any transfers of property or money within a 2-year period between the partnership and any of its partners that would require disclosure under Regs. 1.707-3 or 1.707-6? If "Yes," attach a statement identifying the transfers, the amount or value of each transfer, and an explanation of the tax treatment. See instructions for exceptions.  Yes  No
- b Did the partnership assume a liability or receive property subject to a liability where such liability was incurred by a partner within a 2-year period of transferring the property to the partnership? If "Yes," attach a statement identifying the property transferred, the amount or value of each transfer, the debt assumed or taken by the partnership, and an explanation of the tax treatment.  Yes  No

**Sign Here Only if You're Filing This Form Separately and Not With Your Tax Return** Under penalties of perjury, I declare that I've examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it's true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of general partner or limited liability company member \_\_\_\_\_ Date \_\_\_\_\_

**Paid Preparer Use Only**

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.

**Schedule A Constructive Ownership of Partnership Interest.** Check the boxes that apply to the filer. If you check box b, enter the name, address, and U.S. taxpayer identification number (if any) of the person(s) whose interest you constructively own. See instructions.

a <input checked="" type="checkbox"/> Owns a direct interest		b <input type="checkbox"/> Owns a constructive interest		
Name	Address	Identification number (if any)	Check if foreign person	Check if direct partner

**Schedule A-1 Certain Partners of Foreign Partnership (see instructions)**

Name	Address	Identification number (if any)	Check if foreign person

**Schedule A-2 Foreign Partners of Section 721(c) Partnership (see instructions)**

Name of foreign partner	Address	Country of organization (if any)	U.S. taxpayer identification number (if any)	Check if related to U.S. transferor	Percentage interest	
					Capital	Profits

Does the partnership have any other foreign person as a direct partner?  Yes  No

**Schedule A-3 Affiliation Schedule.** List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest.

Name	Address	EIN (if any)	Total ordinary income or loss	Check if foreign partnership

**Schedule B Income Statement - Trade or Business Income**

**Caution:** Include **only** trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

<b>Income</b>	<b>1a</b> Gross receipts or sales . . . . .	<b>1a</b>		<b>1c</b>	
	<b>b</b> Less returns and allowances . . . . .	<b>1b</b>		<b>2</b>	
	<b>2</b> Cost of goods sold . . . . .			<b>3</b>	
	<b>3</b> Gross profit. Subtract line 2 from line 1c . . . . .			<b>4</b>	
	<b>4</b> Ordinary income (loss) from other partnerships, estates, and trusts ( <i>attach statement</i> ). . . . .			<b>5</b>	
	<b>5</b> Net farm profit (loss) ( <i>attach Schedule F (Form 1040)</i> ). . . . .			<b>6</b>	
	<b>6</b> Net gain (loss) from Form 4797, Part II, line 17 ( <i>attach Form 4797</i> ). . . . .			<b>7</b>	1,545,299
	<b>7</b> Other income (loss) ( <i>attach statement</i> ) <sup>(b)(6)</sup> . . . . .			<b>8</b>	1,545,299
<b>8 Total income (loss)</b> . Combine lines 3 through 7 . . . . .					
<b>Deductions</b> <small>(See instructions for limitations)</small>	<b>9</b> Salaries and wages (other than to partners) (less employment credits) . . . . .			<b>9</b>	
	<b>10</b> Guaranteed payments to partners . . . . .			<b>10</b>	
	<b>11</b> Repairs and maintenance . . . . .			<b>11</b>	
	<b>12</b> Bad debts . . . . .			<b>12</b>	
	<b>13</b> Rent . . . . .			<b>13</b>	
	<b>14</b> Taxes and licenses . . . . .			<b>14</b>	
	<b>15</b> Interest (see instructions) . . . . .			<b>15</b>	98
	<b>16a</b> Depreciation ( <i>if required, attach Form 4562</i> ) <sup>(b)(6)</sup> . . . . .	<b>16a</b>	1,183,981		
	<b>b</b> Less depreciation reported elsewhere on return . . . . .	<b>16b</b>		<b>16c</b>	1,183,981
	<b>17</b> Depletion ( <b>Don't</b> deduct oil and gas depletion.) . . . . .			<b>17</b>	
	<b>18</b> Retirement plans, etc. . . . .			<b>18</b>	
	<b>19</b> Employee benefit programs . . . . .			<b>19</b>	
	<b>20</b> Other deductions ( <i>attach statement</i> ) <sup>(b)(6)</sup> . . . . .			<b>20</b>	2,935,122
<b>21 Total deductions</b> . Add the amounts shown in the far right column for lines 9 through 20 . . . . .			<b>21</b>	4,119,201	
<b>22 Ordinary business income (loss)</b> from trade or business activities. Subtract line 21 from line 8 . . . . .			<b>22</b>	-2,573,902	
<b>Tax and Payment</b>	<b>23</b> Reserved for future use . . . . .			<b>23</b>	
	<b>24</b> Reserved for future use . . . . .			<b>24</b>	
	<b>25</b> Reserved for future use . . . . .			<b>25</b>	
	<b>26</b> Reserved for future use . . . . .			<b>26</b>	
	<b>27</b> Reserved for future use . . . . .			<b>27</b>	
	<b>28</b> Reserved for future use . . . . .			<b>28</b>	
	<b>29</b> Reserved for future use . . . . .			<b>29</b>	
	<b>30</b> Reserved for future use . . . . .			<b>30</b>	

Schedule K Partners' Distributive Share Items		Total amount
Income (Loss)	<b>1</b> Ordinary business income (loss) (Schedule B, line 22) . . . . .	<b>1</b> -2,573,902
	<b>2</b> Net rental real estate income (loss) (attach Form 8825) . . . . .	<b>2</b>
	<b>3a</b> Other gross rental income (loss) . . . . . <b>3a</b>	
	<b>b</b> Expenses from other rental activities (attach statement) . . . . . <b>3b</b>	
	<b>c</b> Other net rental income (loss). Subtract line 3b from line 3a . . . . . <b>3c</b>	
	<b>4</b> Guaranteed payments: <b>a</b> Services . . . . . <b>4a</b>	
	<b>b</b> Capital . . . . . <b>4b</b>	
	<b>c</b> Total . Add line 4a and line 4b . . . . . <b>4c</b>	
	<b>5</b> Interest income . . . . . <b>5</b>	
	<b>6</b> Dividends and dividend equivalents: <b>a</b> Ordinary dividends . . . . . <b>6a</b>	
	<b>b</b> Qualified dividends . . . . . <b>6b</b>	
<b>c</b> Dividend equivalents . . . . . <b>6c</b>		
<b>7</b> Royalties . . . . . <b>7</b>		
<b>8</b> Net short-term capital gain (loss) (attach Schedule D (Form 1065)) . . . . . <b>8</b>		
<b>9a</b> Net long-term capital gain (loss) (attach Schedule D (Form 1065)) . . . . . <b>9a</b>		
<b>b</b> Collectibles (28%) gain (loss) . . . . . <b>9b</b>		
<b>c</b> Unrecaptured section 1250 gain (attach statement) . . . . . <b>9c</b>		
<b>10</b> Net section 1231 gain (loss) (attach Form 4797 <sup>902</sup> ) . . . . . <b>10</b>	-2,522	
<b>11</b> Other income (loss) (see instructions) Type ▶ <b>11</b>		
Deductions	<b>12</b> Section 179 deduction (attach Form 4562) . . . . . <b>12</b>	
	<b>13a</b> Contributions . . . . . <b>13a</b>	
	<b>b</b> Investment interest expense . . . . . <b>13b</b>	
	<b>c</b> Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶ <b>13c(2)</b>	
<b>d</b> Other deductions (see instructions) Type ▶ <b>13d</b>		
Self-Employment	<b>14a</b> Net earnings (loss) from self-employment . . . . . <b>14a</b>	
	<b>b</b> Gross farming or fishing income . . . . . <b>14b</b>	
	<b>c</b> Gross nonfarm income . . . . . <b>14c</b>	
Credits	<b>15a</b> Low-income housing credit (section 42(j)(5)) . . . . . <b>15a</b>	
	<b>b</b> Low-income housing credit (other) . . . . . <b>15b</b>	
	<b>c</b> Qualified rehabilitation expenditures (rental real estate) (attach Form 3468) . . . . . <b>15c</b>	
	<b>d</b> Other rental real estate credits (see instructions) Type ▶ <b>15d</b>	
	<b>e</b> Other rental credits (see instructions) Type ▶ <b>15e</b>	
	<b>f</b> Other credits (see instructions) Type ▶ <b>15f</b>	
Foreign Transactions	<b>16a</b> Name of country or U.S. possession ▶ UK	
	<b>b</b> Gross income from all sources . . . . . <b>16b</b> 1,545,299	
	<b>c</b> Gross income sourced at partner level . . . . . <b>16c</b>	
	Foreign gross income sourced at partnership level	
	<b>d</b> Reserved for future use ▶ <b>e</b> Foreign branch category . . . . . <b>16e</b>	
	<b>f</b> Passive category ▶ <b>g</b> General category ▶ 1,542,777 <b>h</b> Other (attach statement) ▶ <b>16h</b>	
	Deductions allocated and apportioned at partner level	
	<b>i</b> Interest expense ▶ <b>j</b> Other . . . . . <b>16j</b>	
	Deductions allocated and apportioned at partnership level to foreign source income	
	<b>k</b> Reserved for future use ▶ <b>l</b> Foreign branch category . . . . . <b>16l</b>	
	<b>m</b> Passive category ▶ <b>n</b> General category ▶ 4,053,992 <b>o</b> Other (attach statement) ▶ <b>16o</b>	
<b>p</b> Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued <b>16p</b>		
<b>q</b> Reduction in taxes available for credit (attach statement) . . . . . <b>16q</b>		
<b>r</b> Other foreign tax information (attach statement) . . . . . <b>16r</b>		
Alternative Minimum Tax (AMT) Items	<b>17a</b> Post-1986 depreciation adjustment . . . . . <b>17a</b>	
	<b>b</b> Adjusted gain or loss . . . . . <b>17b</b>	
	<b>c</b> Depletion (other than oil and gas) . . . . . <b>17c</b>	
	<b>d</b> Oil, gas, and geothermal properties—gross income . . . . . <b>17d</b>	
	<b>e</b> Oil, gas, and geothermal properties—deductions . . . . . <b>17e</b>	
	<b>f</b> Other AMT items (attach statement) . . . . . <b>17f</b>	
Other Information	<b>18a</b> Tax-exempt interest income . . . . . <b>18a</b>	
	<b>b</b> Other tax-exempt income . . . . . <b>18b</b>	
	<b>c</b> Nondeductible expenses . . . . . <b>18c</b> 2,766	
	<b>19a</b> Distributions of cash and marketable securities . . . . . <b>19a</b>	
	<b>b</b> Distributions of other property . . . . . <b>19b</b>	
<b>20a</b> Investment income . . . . . <b>20a</b>		
<b>b</b> Investment expenses . . . . . <b>20b</b>		
<b>c</b> Other items and amounts (attach statement) . . . . . <b>20c</b>		

Schedule I. Balance Sheets per Books. (Not required if Item H11, page 1, is answered "Yes.")

	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
<b>1</b> Cash . . . . .		73,016		166,692
<b>2a</b> Trade notes and accounts receivable . . . . .				
<b>b</b> Less allowance for bad debts . . . . .				
<b>3</b> Inventories . . . . .		230,624		296,113
<b>4</b> U.S. government obligations . . . . .				
<b>5</b> Tax-exempt securities . . . . .				
<b>6</b> Other current assets ( <i>attach statement</i> ) . . . . .		152,117		131,171
<b>7a</b> Loans to partners (or persons related to partners) . . . . .				
<b>7b</b> Mortgage and real estate loans . . . . .				
<b>8</b> Other investments ( <i>attach statement</i> ) . . . . .				
<b>9a</b> Buildings and other depreciable assets . . . . .	22,987,061		24,065,810	
<b>b</b> Less accumulated depreciation . . . . .	3,212,624	19,774,437	4,521,699	19,544,111
<b>10a</b> Depletable assets . . . . .				
<b>b</b> Less accumulated depletion . . . . .				
<b>11</b> Land (net of any amortization) . . . . .		12,286,439		12,722,843
<b>12a</b> Intangible assets (amortizable only) . . . . .				
<b>b</b> Less accumulated amortization . . . . .				
<b>13</b> Other assets ( <i>attach statement</i> ) . . . . .		11,257,079		10,139,006
<b>14 Total assets</b> . . . . .		43,773,712		42,999,936
<b>Liabilities and Capital</b>				
<b>15</b> Accounts payable . . . . .		386,570		542,349
<b>16</b> Mortgages, notes, bonds payable in less than 1 year . . . . .				
<b>17</b> Other current liabilities ( <i>attach statement</i> ) . . . . .		539,569		785,262
<b>18</b> All nonrecourse loans . . . . .				
<b>19a</b> Loans from partners (or persons related to partners) . . . . .				
<b>b</b> Mortgages, notes, bonds payable in 1 year or more . . . . .				
<b>20</b> Other liabilities ( <i>attach statement</i> ) . . . . .		309,306		268,648
<b>21</b> Partners' capital accounts . . . . .		42,538,267		41,403,677
<b>22 Total liabilities and capital</b> . . . . .		43,773,712		42,999,936

**Schedule M Balance Sheets for Interest Allocation**

	(a) Beginning of tax year	(b) End of tax year
<b>1</b> Total U.S. assets . . . . .		
<b>2</b> Total foreign assets:		
<b>a</b> Passive category . . . . .		
<b>b</b> General category . . . . .		
<b>c</b> Other (attach statement) . . . . .	\$43,772,989	\$42,987,438

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return** (Not required if Item H11, page 1, is answered "Yes.")

<b>1</b> Net income (loss) per books . . . . .	-2,579,190	<b>6</b> Income recorded on books this tax year not included on Schedule K, lines 1 through 11 (itemize):	
<b>2</b> Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11 not recorded on books this tax year (itemize): \$ _____		<b>a</b> Tax-exempt interest \$ _____	
<b>3</b> Guaranteed payments (other than health insurance) . . . . .		<b>7</b> Deductions included on Schedule K, lines 1 through 13d, and 16p not charged against book income this tax year (itemize):	
<b>4</b> Expenses recorded on books this tax year not included on Schedule K, lines 1 through 13d, and 16p (itemize):	2,766	<b>a</b> Depreciation \$ _____	
<b>a</b> Depreciation \$ _____		<b>8</b> Add lines 6 and 7 . . . . .	
<b>b</b> Travel and entertainment \$ _____	2,766	<b>9</b> Income (loss). Subtract line 8 from line 5 . . . . .	-2,576,424
<b>5</b> Add lines 1 through 4 . . . . .	-2,576,424		

**Schedule M-2 Analysis of Partners' Capital Accounts** (Not required if Item H11, page 1, is answered "Yes.")

<b>1</b> Balance at beginning of tax year . . . . .	42,538,267	<b>6</b> Distributions: <b>a</b> Cash . . . . .	
<b>2</b> Capital contributed:		<b>b</b> Property . . . . .	
<b>a</b> Cash . . . . .	1,444,600	<b>7</b> Other decreases (itemize): \$ _____	
<b>b</b> Property . . . . .		<b>8</b> Add lines 6 and 7 . . . . .	
<b>3</b> Net income (loss) per books . . . . .	-2,579,190	<b>9</b> Balance at end of tax year. Subtract line 8 from line 5 . . . . .	41,403,677
<b>4</b> Other increases (itemize): \$ _____			
<b>5</b> Add lines 1 through 4 . . . . .	41,403,677		

**Schedule N Transactions Between Controlled Foreign Partnership and Partners or Other Related Entities**

**Important:** Complete a separate Form 8865 and Schedule N for each controlled foreign partnership. Enter the totals for each type of transaction that occurred between the foreign partnership and the persons listed in columns (a) through (d).

Transactions of foreign partnership	(a) U.S. person filing this return	(b) Any domestic corporation or partnership controlling or controlled by the U.S. person filing this return	(c) Any other foreign corporation or partnership controlling or controlled by the U.S. person filing this return	(d) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the U.S. person filing this return)
1 Sales of inventory . . . . .				
2 Sales of property rights (patents, trademarks, etc.) . . . . .				
3 Compensation received for technical, managerial, engineering, construction, or like services . . . . .				
4 Commissions received . . . . .				
5 Rents, royalties, and license fees received . . . . .				
6 Distributions received . . . . .				
7 Interest received . . . . .				
8 Other . . . . .				
9 Add lines 1 through 8 . . . . .				
10 Purchases of inventory . . . . .				
11 Purchases of tangible property other than inventory . . . . .				
12 Purchases of property rights (patents, trademarks, etc.) . . . . .				
13 Compensation paid for technical, managerial, engineering, construction, or like services . . . . .				
14 Commissions paid . . . . .				
15 Rents, royalties, and license fees paid . . . . .				
16 Distributions paid . . . . .				
17 Interest paid . . . . .				
18 Other . . . . .				
19 Add lines 10 through 18 . . . . .				
20 Amounts borrowed (enter the maximum loan balance during the year). See instructions . . . . .				
21 Amounts loaned (enter the maximum loan balance during the year). See instructions . . . . .				



## Additional Data

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**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP

Form 8938

Statement of Specified Foreign Financial Assets

OMB No. 1545-2195

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8938 for instructions and the latest information. Attach to your tax return. For calendar year 2020 or tax year beginning 01-01-2020, ending and ending

2020 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 [x] 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)

Table with columns: (a) Asset Category, (b) Tax item, (c) Amount reported on form or schedule, (d) Form and line, (e) Schedule and line. Rows include Foreign Deposit and Custodial Accounts and Other Foreign Assets.

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
4. Number of Forms 8621
5. Number of Forms 8865

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 [ ] Deposit [ ] Custodial 2 Account number or other designation

3 Check all that apply a [ ] Account opened during tax year b [ ] Account closed during tax year
c [ ] Account jointly owned with spouse d [ ] 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? [ ] Yes [ ] 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

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.

(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

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

Form **8959**

**Additional Medicare Tax**

OMB No. 1545-0074

**2020**

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, 1040-NR, 1040-PR, or 1040-SS.
- ▶ Go to [www.irs.gov/Form8959](http://www.irs.gov/Form8959) for instructions and the latest information.

Attachment  
Sequence No. **71**

Name(s) shown on return

Your social security number

DONALD J & MELANIA<TRUMP

**Part I Additional Medicare Tax on Medicare Wages**

<b>1</b>	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5 . . . . .	<b>1</b>	393,229	
<b>2</b>	Unreported tips from Form 4137, line 6 . . . . .	<b>2</b>		
<b>3</b>	Wages from Form 8919, line 6 . . . . .	<b>3</b>		
<b>4</b>	Add lines 1 through 3 . . . . .	<b>4</b>	393,229	
<b>5</b>	Enter the following amount for your filing status: Married filing jointly . . . . . \$250,000 Married filing separately . . . . . \$125,000 Single, Head of household, or Qualifying widow(er) . . . . . \$200,000	<b>5</b>	250,000	
<b>6</b>	Subtract line 5 from line 4. If zero or less, enter -0- . . . . .	<b>6</b>		143,229
<b>7</b>	Additional Medicare tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II . . . . .	<b>7</b>		1,289

**Part II Additional Medicare Tax on Self-Employment Income**

<b>8</b>	Self-employment income from Schedule SE (Form 1040), Section A, line 4, or Section B, line 6. If you had a loss, enter -0- (Form 1040-PR or Form 1040-SS filers, see instructions.) . . . . .	<b>8</b>	7,013,674	
<b>9</b>	Enter the following amount for your filing status: Married filing jointly . . . . . \$250,000 Married filing separately . . . . . \$125,000 Single, Head of household, or Qualifying widow(er) . . . . . \$200,000	<b>9</b>	250,000	
<b>10</b>	Enter the amount from line 4 . . . . .	<b>10</b>	393,229	
<b>11</b>	Subtract line 10 from line 9. If zero or less, enter -0- . . . . .	<b>11</b>	0	
<b>12</b>	Subtract line 11 from line 8. If zero or less, enter -0- . . . . .	<b>12</b>		7,013,674
<b>13</b>	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III . . . . .	<b>13</b>		63,123

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

<b>14</b>	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions) . . . . .	<b>14</b>		
<b>15</b>	Enter the following amount for your filing status: Married filing jointly . . . . . \$250,000 Married filing separately . . . . . \$125,000 Single, Head of household, or Qualifying widow(er) . . . . . \$200,000	<b>15</b>	250,000	
<b>16</b>	Subtract line 15 from line 14. If zero or less, enter -0- . . . . .	<b>16</b>		
<b>17</b>	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV . . . . .	<b>17</b>		

**Part IV Total Additional Medicare Tax**

<b>18</b>	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 8 (check box a) (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V . . . . .	<b>18</b>		64,412
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**Part V Withholding Reconciliation**

<b>19</b>	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6 . . . . .	<b>19</b>	7,435	
<b>20</b>	Enter the amount from line 1 . . . . .	<b>20</b>	393,229	
<b>21</b>	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages . . . . .	<b>21</b>	5,702	
<b>22</b>	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages . . . . .	<b>22</b>		1,733
<b>23</b>	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions) . . . . .	<b>23</b>		
<b>24</b>	<b>Total Additional Medicare Tax withholding.</b> Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25 (Form 1040-PR or 1040-SS filers, see instructions) . . . . .	<b>24</b>		1,733

## Additional Data

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**Software ID:**

**Software Version:**

**SSN:**

**Spouse SSN:**

**Name:** DONALD J & MELANIA<TRUMP

Form **8990**  
 Rev. May 2020  
 Department of the Treasury  
 Internal Revenue Service

**Limitation on Business Interest Expense  
 Under Section 163(j)**

OMB No. 1545-0123

▶ Attach to your tax return.  
 ▶ Go to [www.irs.gov/Form8990](http://www.irs.gov/Form8990) for instructions and the latest information.

Taxpayer name(s) shown on tax return  
 DONALD J & MELANIA<TRUMP

If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter:  
 Name of foreign entity ▶ \_\_\_\_\_

Employer identification number, if any ▶ \_\_\_\_\_  
 Reference ID number (see instructions) ▶ \_\_\_\_\_

**Part I Computation of Allowable Business Interest Expense**

Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j).

**Section I — Business Interest Expense**

1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation . . . . .	1		
2	Disallowed business interest expense carryovers from prior years. (Does not apply to a partnership) . . . . .	2		
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h)) . . . . .	3		
4	Floor plan financing interest expense. See instructions . . . . .		4	
5	<b>Total business interest expense.</b> Add lines 1 through 4 . . . . . ▶		5	

**Section II — Adjusted Taxable Income**

**Taxable Income**

6	Taxable income. See instructions . . . . .	6	
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**Additions (adjustments to be made if amounts included on line 6)**

7	Any item of loss or deduction which is not properly allocable to a trade or business of the taxpayer. See instructions . . . . .	7		
8	Any business interest expense not from a pass-through entity. See instructions . . . . .	8		
9	Amount of any net operating loss deduction under section 172 . . . . .	9		
10	Amount of any qualified business income deduction allowed under section 199A . . . . .	10		
11	Deduction allowable for depreciation, amortization, or depletion attributable to a trade or business . . . . .	11		
12	Amount of any loss or deduction items from a pass-through entity. See instructions . . . . .	12	81,754,029	
13	Other additions. See instructions . . . . .	13		
14	<b>Total current year partner's excess taxable income</b> (Schedule A, line 44, column (f)) . . . . .	14	36,814,832	
15	<b>Total current year S corporation shareholder's excess taxable income</b> (Schedule B, line 46, column (c)) . . . . .	15	161,566	
16	<b>Total.</b> Add lines 7 through 15 . . . . . ▶	16		118,730,427

**Reductions (adjustments to be made if amounts included on line 6)**

17	Any item of income or gain which is not properly allocable to a trade or business of the taxpayer. See instructions . . . . .	17	( )	
18	Any business interest income not from a pass-through entity. See instructions . . . . .	18	( )	
19	Amount of any income or gain items from a pass-through entity. See instructions . . . . .	19	(65,988,521)	
20	Other reductions. See instructions . . . . .	20	( )	
21	<b>Total.</b> Combine lines 17 through 20 . . . . . ▶	21	(65,988,521)	
22	<b>Adjusted taxable income.</b> Combine lines 6, 16, and 21. (If zero or less, enter -0-.) . . . . . ▶	22		52,741,906

**Section III — Business Interest Income**

<b>23</b>	Current year business interest income. See instructions . . . . .	<b>23</b>			
<b>24</b>	Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g); and Schedule B, line 46, column(d)) . . . . .	<b>24</b>		27	
<b>25</b>	<b>Total.</b> Add lines 23 and 24 . . . . .				<b>25</b> 27

**Section IV — 163(j) Limitation Calculations**

**Limitation on Business Interest Expense**

<b>26</b>	Multiply adjusted taxable income (line 22) by the applicable percentage. See instructions . . . . .	<b>26</b>	26,370,953		
<b>27</b>	Business interest income (line 25) . . . . .	<b>27</b>		27	
<b>28</b>	Floor plan financing interest expense (line 4) . . . . .	<b>28</b>			
<b>29</b>	<b>Total.</b> Add lines 26, 27, and 28 . . . . .				<b>29</b> 26,370,980

**Allowable Business Interest Expense**

<b>30</b>	<b>Total current year business interest expense deduction.</b> See instructions . . . . .	<b>30</b>			
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**Carryforward**

<b>31</b>	<b>Disallowed business interest expense.</b> Subtract line 29 from line 5. (If zero or less, enter -0-.) . . . . .	<b>31</b>			
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**Part II Partnership Pass-Through Items**

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

**Excess Business Interest Expense**

<b>32</b>	<b>Excess business interest expense.</b> Enter amount from line 31 . . . . .	<b>32</b>			
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**Excess Taxable Income** (If you entered an amount on line 32, skip lines 33 through 37.)

<b>33</b>	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) . . . . .	<b>33</b>			
<b>34</b>	Subtract line 33 from line 26. (If zero or less, enter -0-.) . . . . .	<b>34</b>			
<b>35</b>	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) . . . . .	<b>35</b>			
<b>36</b>	<b>Excess Taxable Income.</b> Multiply line 35 by line 22 . . . . .	<b>36</b>			

**Excess Business Interest Income**

<b>37</b>	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.) . . . . .	<b>37</b>			
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**Part III S Corporation Pass-Through Items**

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

**Excess Taxable Income**

<b>38</b>	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) . . . . .	<b>38</b>			
<b>39</b>	Subtract line 38 from line 26. (If zero or less, enter -0-.) . . . . .	<b>39</b>			
<b>40</b>	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) . . . . .	<b>40</b>			
<b>41</b>	<b>Excess Taxable Income.</b> Multiply line 40 by line 22 . . . . .	<b>41</b>			

**Excess Business Interest Income**

<b>42</b>	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.) . . . . .	<b>42</b>			
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**SCHEDULE A Summary of Partner's Allocable Partnership Interest**

Any taxpayer that owns an interest in a partnership and receives excess business interest expense allocated from the partnership should complete Schedule A before completing Part I.

(a) Name of partnership	(b) EIN	Excess Business Interest Expense			(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (lesser of (e) or (f) plus (g))	(i) Current year business interest carryover ((e) minus (h))
		(c) Current year	(d) Prior year carryover	(e) Total ((c) plus (d))				
<b>43</b> See Additional Data Table								
<b>44 Total</b>					36,814,832	27		

**SCHEDULE B Summary of Shareholder's Excess Taxable Income and Excess Business Interest Income**

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

(a) Name of S corporation	(b) EIN	(c) Current year excess taxable income	(d) Current year excess business interest income
<b>45</b> TIPPERARY REALTY CORP	11-2405629	21,339	0
PLAZA CONSULTING CORP	13-3385468	19	0
TRUMP PLAZA MEMBER INC	13-3979038	5,299	0
TRUMP TOWER MANAGING MEMBER INC	13-3981225	134,909	0
<b>46 Total</b>		161,566	

**Additional Data**

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

**Schedule A, Line 43 - Partner's Allocable Partnership Interest**

(a) Name of partnership	(b) EIN	Excess Business Interest Expense			(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (lesser of (e) or (f) plus (g))	(i) Current year business interest carryover ((d) minus (h))
		(c) Current year	(d) Prior year carryover	(e) Total ((c) plus (d))				
THE EAST 61 ST COMPANY	13-3057745	0	0	0	52,902	0	0	0
THE EAST 61 ST COMPANY	13-3057745	0	0	0	535	0	0	0
MAR-A-LAGO CLUB LLC	65-0567671	0	0	0	9,003,774	0	0	0
40 WALL DEVELOPMENT ASSOC LLC	13-3845249	0	0	0	5,185,961	0	0	0
TRUMP PLAZA LLC	13-3972488	0	0	0	524,607	0	0	0
DJT HOLDINGS LLC - 401 MEZZ	27-4162308	31,039	0	31,039	0	0	0	31,039
TRUMP 845 UN GP LLC	13-3958321	0	0	0	289,541	0	0	0
DJT HOLDINGS LLC - TRUMP INT'L HOTEL & TOWER CHICA	27-4162308	586,032	0	586,032	0	0	0	586,032
845 UN LIMITED PARTNERSHIP - 845 LP LLC	13-3958323	0	0	0	440,082	0	0	0
TRUMP PARK AVENUE LLC - TRUMP DELMONICO LLC)	01-0580204	158,847	0	158,847	0	0	0	158,847
TRUMP PARK AVENUE LLC - ACQUISITION	01-0580204	158,529	0	158,529	0	0	0	158,529
TRUMP PALACE PARC LLC	13-3913538	0	0	0	0	27	0	0
TRUMP EQUITABLE FIFTH AVE CO	13-3014138	0	0	0	21,317,430	0	0	0
DJT HOLDINGS LLC - 1125 SOUTH OCEAN LLC	27-4162308	13,087	0	13,087	0	0	0	13,087

Form **8995-A**

**Qualified Business Income Deduction**

OMB No. 1545-2294

Department of the Treasury  
Internal Revenue Service

▶ Attach to tax return.  
▶ Go to [www.irs.gov/Form8995A](http://www.irs.gov/Form8995A) for instructions and the latest information.

**2020**

Attachment  
Sequence No. **55A**

Name(s) shown on return \_\_\_\_\_ number \_\_\_\_\_

DONALD J & MELANIA<TRUMP

**Note:** You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions. Use this form if your taxable income, before your qualified business income deduction, is above \$163,300 (\$326,600 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

**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	See Additional Data Table				
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 . . . . .	28	28	2
3 Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	6	6	0
4 Allocable share of W-2 wages from the trade, business, or aggregation . . . . .			
5 Multiply line 4 by 50% (0.50) . . . . .			
6 Multiply line 4 by 25% (0.25) . . . . .			
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property . . . . .			
8 Multiply line 7 by 2.5% (0.025) . . . . .			
9 Add lines 6 and 8 . . . . .			
10 Enter the greater of line 5 or line 9 . . . . .			
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10 . . . . .			
12 Phased-in reduction. Enter amount from line 26, if any. See instructions . . . . .			
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12 . . . . .	6	6	0
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any . . . . .			
15 Qualified business income component. Subtract line 14 from line 13 . . . . .	6	6	0

	D	E	F
2 Qualified business income from the trade, business, or aggregation. See instructions . . . . .	105	21	2,038
3 Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	21	4	408
4 Allocable share of W-2 wages from the trade, business, or aggregation . . . . .			
5 Multiply line 4 by 50% (0.50) . . . . .			
6 Multiply line 4 by 25% (0.25) . . . . .			
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property . . . . .			
8 Multiply line 7 by 2.5% (0.025) . . . . .			
9 Add lines 6 and 8 . . . . .			
10 Enter the greater of line 5 or line 9 . . . . .			
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10 . . . . .			
12 Phased-in reduction. Enter amount from line 26, if any. See instructions . . . . .			
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12 . . . . .	21	4	408
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any . . . . .			
15 Qualified business income component. Subtract line 14 from line 13 . . . . .	21	4	408

	G	H	I
2 Qualified business income from the trade, business, or aggregation. See instructions . . . . .	106,256	47,964	57,826
3 Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	21,251	9,593	11,565
4 Allocable share of W-2 wages from the trade, business, or aggregation . . . . .			
5 Multiply line 4 by 50% (0.50) . . . . .			
6 Multiply line 4 by 25% (0.25) . . . . .			
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property . . . . .			
8 Multiply line 7 by 2.5% (0.025) . . . . .			
9 Add lines 6 and 8 . . . . .			
10 Enter the greater of line 5 or line 9 . . . . .			
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10 . . . . .			
12 Phased-in reduction. Enter amount from line 26, if any. See instructions . . . . .			

13	Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12 . . . . .	13	21,251	9,593	11,565
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	21,251	9,593	11,565
			<b>J</b>	<b>K</b>	<b>L</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	7,482	7,866	5,074
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	1,496	1,573	1,015
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 UBIA of 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	1,496	1,573	1,015
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	1,496	1,573	1,015
			<b>M</b>	<b>N</b>	<b>O</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	10,369	28,130	2,784
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	2,074	5,626	557
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 UBIA of 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	2,074	5,626	557
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	2,074	5,626	557
			<b>P</b>	<b>Q</b>	<b>R</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	294	5,194	5,945
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	59	1,039	1,189
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 UBIA of 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	59	1,039	1,189
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	59	1,039	1,189
			<b>S</b>	<b>T</b>	<b>U</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	5,329	19,314	34,597
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	1,066	3,863	6,919
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 UBIA of 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	1,066	3,863	6,919
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	1,066	3,863	6,919

		V	W	X	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	835	28,279	11,470
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	167	5,656	2,294
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 UBIA of 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	167	5,656	2,294
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	167	5,656	2,294

		Y	Z	AA	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	20,234	343	53,827
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	4,047	69	10,765
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 UBIA of 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	4,047	69	10,765
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	4,047	69	10,765

		AB	AC	AD	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	100,698	2,527	3,647
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	20,140	505	729
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 UBIA of 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	20,140	505	729
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	20,140	505	729

		AE	AF	AG	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	109	1,211	153
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	22	242	31
4	Allocable share of W-2 wages from the trade, business, or aggregation . . . . .	4			

5	Multiply line 4 by 50% (0.50)			
6	Multiply line 4 by 25% (0.25)			
7	Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property			
8	Multiply line 7 by 2.5% (0.025)			
9	Add lines 6 and 8			
10	Enter the greater of line 5 or line 9			
11	W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10			
12	Phased-in reduction. Enter amount from line 26, if any. See instructions			
13	Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	22	242	31
14	Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any			
15	Qualified business income component. Subtract line 14 from line 13	22	242	31

		AH	AI	AJ
2	Qualified business income from the trade, business, or aggregation. See instructions	4,959	5,109	169,920
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	992	1,022	33,984
4	Allocable share of W-2 wages from the trade, business, or aggregation			
5	Multiply line 4 by 50% (0.50)			
6	Multiply line 4 by 25% (0.25)			
7	Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property			
8	Multiply line 7 by 2.5% (0.025)			
9	Add lines 6 and 8			
10	Enter the greater of line 5 or line 9			
11	W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10			
12	Phased-in reduction. Enter amount from line 26, if any. See instructions			
13	Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	992	1,022	33,984
14	Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any			
15	Qualified business income component. Subtract line 14 from line 13	992	1,022	33,984

		AK	AL	AM
2	Qualified business income from the trade, business, or aggregation. See instructions	1,277	174	108
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	255	35	22
4	Allocable share of W-2 wages from the trade, business, or aggregation			
5	Multiply line 4 by 50% (0.50)			
6	Multiply line 4 by 25% (0.25)			
7	Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property			
8	Multiply line 7 by 2.5% (0.025)			
9	Add lines 6 and 8			
10	Enter the greater of line 5 or line 9			
11	W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10			
12	Phased-in reduction. Enter amount from line 26, if any. See instructions			
13	Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	255	35	22
14	Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any			
15	Qualified business income component. Subtract line 14 from line 13	255	35	22

		AN	AO	AP
2	Qualified business income from the trade, business, or aggregation. See instructions	1,678	125	39
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	336	25	8
4	Allocable share of W-2 wages from the trade, business, or aggregation			
5	Multiply line 4 by 50% (0.50)			
6	Multiply line 4 by 25% (0.25)			
7	Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property			
8	Multiply line 7 by 2.5% (0.025)			
9	Add lines 6 and 8			
10	Enter the greater of line 5 or line 9			
11	W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10			
12	Phased-in reduction. Enter amount from line 26, if any. See instructions			
13	Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	336	25	8
14	Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any			
15	Qualified business income component. Subtract line 14 from line 13	336	25	8

		AQ	AR	AS
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2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	60	54	9
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	12	11	2
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 UBIA of 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	12	11	2
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	12	11	2

		AT	AU	AV	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	197	1	289
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	39	0	58
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 UBIA of 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	39	0	58
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	39	0	58

		AW	AX	AY	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	12	117	26
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	2	23	5
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 UBIA of 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	2	23	5
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	2	23	5

		AZ	BA	BB	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	8	195	286
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	2	39	57
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 UBIA of 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	2	39	57
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	2	39	57
			<b>BC</b>	<b>BD</b>	<b>BE</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	204	3	2
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	41	1	0
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 UBIA of 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	41	1	0
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	41	1	0
			<b>BF</b>	<b>BG</b>	<b>BH</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	12	349	1
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	2	70	0
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 UBIA of 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	2	70	0
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	2	70	0
			<b>BI</b>	<b>BJ</b>	<b>BK</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	978	802	61
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	196	160	12
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 UBIA of 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	196	160	12
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	196	160	12
			<b>BL</b>	<b>BM</b>	<b>BN</b>
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	0	353	1,348
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	0	71	270
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 UBIA of 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	0	71	270
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	0	71	270

		BO	BP	BQ	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	44	54	47
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	9	11	9
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 UBIA of 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	9	11	9
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	9	11	9

		BR	BS	BT	
2	Qualified business income from the trade, business, or aggregation. See instructions . . . . .	2	19,347	57	3,720
3	Multiply line 2 by 20% (0.20). If your taxable income is \$163,300 or less (\$326,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 . . . . .	3	3,869	11	744
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 UBIA of 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	3,869	11	744
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	3,869	11	744
16	Total qualified business income component. Add all amounts reported on line 15 . . . . .	16	156,402		

**Part III Phased-in Reduction**

Complete Part III only if your taxable income is more than \$163,300 but not \$213,300 (\$326,600 and \$426,600 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	6	6	0
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	-5,710,928		
21	Threshold. Enter \$163,300 (\$326,600 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			
		D	E	F	
17	Enter amounts from line 3 . . . . .	17	21	4	408
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		G	H	I	
17	Enter amounts from line 3 . . . . .	17	21,251	9,593	11,565
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		J	K	L	
17	Enter amounts from line 3 . . . . .	17	1,496	1,573	1,015
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		M	N	O	
17	Enter amounts from line 3 . . . . .	17	2,074	5,626	557
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		P	Q	R	
17	Enter amounts from line 3 . . . . .	17	59	1,039	1,189
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		S	T	U	
17	Enter amounts from line 3 . . . . .	17	1,066	3,863	6,919
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		V	W	X	
17	Enter amounts from line 3 . . . . .	17	167	5,656	2,294
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		Y	Z	AA	
17	Enter amounts from line 3 . . . . .	17	4,047	69	10,765
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			

		AB	AC	AD	
17	Enter amounts from line 3 . . . . .	17	20,140	505	729
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AE	AF	AG	
17	Enter amounts from line 3 . . . . .	17	22	242	31
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AH	AI	AJ	
17	Enter amounts from line 3 . . . . .	17	992	1,022	33,984
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AK	AL	AM	
17	Enter amounts from line 3 . . . . .	17	255	35	22
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AN	AO	AP	
17	Enter amounts from line 3 . . . . .	17	336	25	8
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AQ	AR	AS	
17	Enter amounts from line 3 . . . . .	17	12	11	2
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AT	AU	AV	
17	Enter amounts from line 3 . . . . .	17	39	0	58
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AW	AX	AY	
17	Enter amounts from line 3 . . . . .	17	2	23	5
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		AZ	BA	BB	
17	Enter amounts from line 3 . . . . .	17	2	39	57
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		BC	BD	BE	
17	Enter amounts from line 3 . . . . .	17	41	1	0
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
		BF	BG	BH	
17	Enter amounts from line 3 . . . . .	17	2	70	0
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			

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			
			<b>BI</b>	<b>BJ</b>	<b>BK</b>
17	Enter amounts from line 3 . . . . .	17	196	160	12
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
			<b>BL</b>	<b>BM</b>	<b>BN</b>
17	Enter amounts from line 3 . . . . .	17	0	71	270
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
			<b>BO</b>	<b>BP</b>	<b>BQ</b>
17	Enter amounts from line 3 . . . . .	17	9	11	9
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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			
			<b>BR</b>	<b>BS</b>	<b>BT</b>
17	Enter amounts from line 3 . . . . .	17	3,869	11	744
18	Enter the amounts from line 10 . . . . .	18			
19	Subtract line 18 from line 17 . . . . .	19			
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	156,402		
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions . . . . .	28	6,815,155		
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	6,815,155		
31	REIT and PTP component. Multiply line 30 by 20% (0.20) . . . . .	31	1,363,031		
32	Qualified business income deduction before the income limitation. Add lines 27 and 31 . . . . .	32		1,519,433	
33	Taxable income before qualified business income deduction . . . . .	33	-5,710,928		
34	Net capital gain. See instructions . . . . .	34	17,694		
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	( )		

**Additional Data**

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

**Part I - Trade, Business, or Aggregation Information**

i	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if partner
A	DJT HOLDINGS MM LLC - TRUMP PRODUCTIONS MANAG	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
B	DJT HOLDINGS MM LLCLLC - TRUMP PRODUCTIONS L	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
C	DJT HOLDINGS MM LLC - TRUM MARKS MENSWEAR LLC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
D	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MANAGIN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
E	TIHH MEMBER CORP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27-0963803	<input type="checkbox"/>
F	TRUMP INTERNATIONAL HOTEL HAWAII LLC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27-0963857	<input type="checkbox"/>
G	MAR-A-LAGO CLUB LLC	<input type="checkbox"/>	<input type="checkbox"/>	65-0567671	<input type="checkbox"/>
H	40 WALL DEVELOPMENT ASSOC LLC	<input type="checkbox"/>	<input type="checkbox"/>	13-3845249	<input type="checkbox"/>
I	HUDSON WATERFRONT ASSOC V LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796322	<input type="checkbox"/>
J	HUDSON WATERFRONT ASSOC III LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796315	<input type="checkbox"/>
K	HUDSON WATERFRONT ASSOC IV LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796319	<input type="checkbox"/>
L	TRUMP CPS LLC	<input type="checkbox"/>	<input type="checkbox"/>	13-3917414	<input type="checkbox"/>
M	TRUMP PLAZA LLC	<input type="checkbox"/>	<input type="checkbox"/>	13-3972488	<input type="checkbox"/>
N	TRUMP INTERNATIONAL GOLF CLUB LLC	<input type="checkbox"/>	<input type="checkbox"/>	65-0750446	<input type="checkbox"/>
O	DJT HOLDINGS LLC - TRUMP PRODUCTIONS LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
P	TIHT COMMERCIAL LLC	<input type="checkbox"/>	<input type="checkbox"/>	13-4038061	<input type="checkbox"/>
Q	TRUMP INTERNATIONAL HOTEL HAWAII LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-0963857	<input type="checkbox"/>
R	DJT HOLDINGS LLC - TRUMP CHICAGO HOTEL MANAGE	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
S	DJT HOLDINGS LLC - TRUMP CHICAGO RESIDENTIAL	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
T	DJT HOLDINGS LLC - LFB ACQUISITION LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
U	DJT HOLDINGS LLC - TRUMP NATIONAL GOLF CLUB W	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
V	DJT HOLDINGS LLC - TRUMP VIRGINIA LOT 5 LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
W	DJT HOLDINGS LLC - TNGC CHARLOTTE LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
X	DJT HOLDINGS JUPITER GOLF CLUB	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
Y	DJT HOLDINGS LLC - TRUMP LAS VEGAS MEMBER LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
Z	DJT HOLDINGS LLC - TRUMP LAS VEGAS MANAGING M	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
AA	HUDSON WATERFRONT ASSOCIATES V LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796322	<input type="checkbox"/>
AB	HUDSON WATERFRONT ASSOC III LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796315	<input type="checkbox"/>
AC	TRUMP 845 UN GP LLC	<input type="checkbox"/>	<input type="checkbox"/>	13-3958321	<input type="checkbox"/>
AD	845 UN LIMITED PARTNERSHIP - 845 LP LLC	<input type="checkbox"/>	<input type="checkbox"/>	13-3958323	<input type="checkbox"/>
AE	DJT HOLDINGS LLC - THC BAKU SERVICES LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
AF	DJT HOLDINGS LLC - TNGC JUPITER MANAGEMENT LL	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
AG	DJT HOLDINGS LLC TW VENTURE I LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
AH	HUDSON WATERFRONT ASSOCIATES IV LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796319	<input type="checkbox"/>
AI	DJT HOLDINGS LLC - DTTM OPERATIONS LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
AJ	TRUMP EQUITABLE FIFTH AVE CO	<input type="checkbox"/>	<input type="checkbox"/>	13-3014138	<input type="checkbox"/>
AK	DJT HOLDINGS LLC - 124 WOODBRIDGE	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
AL	TIPPERARY REALTY CORP	<input type="checkbox"/>	<input type="checkbox"/>	11-2405629	<input type="checkbox"/>
AM	DJT HOLDINGS MM LLC - MAR-A-LAGO CLUBLLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AN	TRUMP TOWER MANAGING MEMBER INC	<input type="checkbox"/>	<input type="checkbox"/>	13-3981225	<input type="checkbox"/>
AO	TRUMP MANAGEMENT INC	<input type="checkbox"/>	<input type="checkbox"/>	11-2196835	<input type="checkbox"/>
AP	TIHH MEMBER CORP	<input type="checkbox"/>	<input type="checkbox"/>	27-0963803	<input type="checkbox"/>
AQ	DJT HOLDINGS MM LLCLLC - TRUMP CHICAGO HOTEL	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AR	DJT HOLDINGS MM LLC - TRUMP CHICAGO RESIDENTI	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AS	DJT HOLDINGS MM LLC - TRUMP VIRGINIA LOT 5 MA	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AT	DJT HOLDINGS MM LLC - LFB AQUISITION MEMBER C	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AU	DJT HOLDINGS MM LLC - THC BAKU SERVICES MEMBE	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AV	DJT HOLDINGS MM LLC - TNGC CHARLOTTE LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AW	DJT HOLDINGS MM LLC - TNGC JUPITER MANAGEMENT	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AX	DJT HOLDINGS MM LLC - JUPITER GOLF CLUB MANAG	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AY	DJT HOLDINGS MM LLC - T RETAIL MANAGING LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
AZ	DJT HOLDINGS MM LLCLLC - TRUMP VIRGINIA LOT	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BA	DJT HOLDINGS MM LLCLLC - LFB ACQUISITIONS LL	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BB	DJT HOLDINGS MM LLCLLC - TNGC CHARLOTTE LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BC	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MEM	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BD	DJT HOLDINGS MM LLCLLC - TRUMP LAS VEGAS MAN	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BE	DJT HOLDINGS MM LLCLLC - TW VENTURE I LLC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BF	DJT HOLDINGS MM LLCLLC - TNGC JUPITER MGT LL	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BG	DJT HOLDINGS MM LLCLLC - TNGC WASHINGTON DC	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BH	DJT HOLDINGS MM LLCLLC - THC BAKU SERVICES L	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BI	HUDSON WATERFRONT ASSOC I LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796302	<input type="checkbox"/>
BJ	DJT HOLDINGS LLC - TRUMP VIRGINIA ACQUISITION	<input type="checkbox"/>	<input type="checkbox"/>	27-4162308	<input type="checkbox"/>
BK	DJT HOLDINGS MM LLC TRUMP CHICAGO HOTEL MANAG	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BL	DJT HOLDINGS MM LLC TRUMP INT'L GOLF CLUB	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BM	DJT HOLDINGS MM LLC - TRUMP NATIONAL GOLF CLU	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BN	DJT HOLDINGS MM LLC - TRUMP LAS VEGAS MEMBER	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
BO	DJT HOLDINGS LLC MM - 40 WALL DEVELOPMENT AS	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
<b>BP</b>	DJT HOLDINGS MM LLLLC TRUMP CHICAGO RESIDEN	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
<b>BQ</b>	DJT HOLDINGS LLC TRUMP MODEL MANAGEMENT LLC (	<input type="checkbox"/>	<input type="checkbox"/>	13-4040286	<input type="checkbox"/>
<b>BR</b>	HUDSON WATERFRONT ASSOC II LP	<input type="checkbox"/>	<input type="checkbox"/>	13-3796305	<input type="checkbox"/>
<b>BS</b>	DJT HOLDINGS MM LLC - DT DUBAI GOLF MANAGER M	<input type="checkbox"/>	<input type="checkbox"/>	27-4162256	<input type="checkbox"/>
<b>BT</b>	TRUMP 845 UN LIMITED PARTNERSHIP	<input type="checkbox"/>	<input type="checkbox"/>	13-3958323	<input type="checkbox"/>

**TY 2020 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	42,987,438

**TY 2020 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	50,212	54,776
		PREPAID EXPENSE	101,905	76,395



**TY 2020 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 2020 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	11,255,084	10,136,940
		INTELLECTUAL PROPERTY	1,995	2,066

**TY 2020 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	539,569	785,262

**TY 2020 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	309,306	268,648

**TY 2020 Itemized Share of Other Income (Loss)  
Schedule**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN**

Description	Amount
MEMBERSHIP FEES	1,520,083
OTHER INCOME	25,216



**TY 2020 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		1,636
DECORATIONS		1,548
DIRECT COSTS		220,522
INSURANCE		40,507
MARKETING		98,784
MISCELLANEOUS		122,985
OFFICE EXPENSE		226,548
PROFESSIONAL FEES		122,272
REPAIRS & MAINTENANCE		110,338
SALARIES & WAGES		1,614,227
SECURITY		4,946
SUPPLIES		287,332
UTILITIES		80,711
MEALS		2,766

**TY 2020 Other Miscellaneous Deductions  
Statement**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

Type Of Miscellaneous Deduction	Miscellaneous Deduction Amount
SCHEDULE K-1	5,589
SCHEDULE K-1	2,881
SCHEDULE K-1	85



**TY 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 1ZZ - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD T & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 1ZZ - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 1ZZ - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 1ZZ - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 1ZZ - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN**

**Spouse SSN**

**Credit Identification:** 1ZZ - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:** -

**Spouse SSN:**

**Credit Identification:** 4F - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:** ---

**Credit Identification:** 4A - REHABILITATION INVESTMENT CREDIT (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



**TY 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 4F - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation****Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** 4A - REHABILITATION INVESTMENT CREDIT (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 2020 Carry Forward of General Business Credit Computation**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 4B - 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 2020 Carry Forward of General Business Credit Computation**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 4F - EMPLOYER SOCIAL SECURITY CREDIT (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 2020 Carry Forward of General Business Credit Computation**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 4F - EMPLOYER SOCIAL SECURITY CREDIT (POST-2006)

**The Tax Year the Credit**

**Originated:** 01-01-2019

**The Amount of the Credit:** 214,912

**The Amount Allowed for that  
Year:**

0

**TY 2020 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 2020 Carry Forward of General Business Credit Computation**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Credit Identification:** 4F - EMPLOYER SOCIAL SECURITY CREDIT (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

**TY 2020 Carry Forward of General Business Credit Computation****Name:** DONALD J & MELANIA<TRUMP**SSN:****Spouse SSN:****Credit Identification:** 1ZZ - EMPLOYER SOCIAL SECURITY CREDIT (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



**TY 2020 Foreign Income Net  
Adjustment Statement**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

Explanation

ALLOCATION OF LOSSES FROM OTHER CATEGORIES 9465919

**TY 2020 Foreign Income Net  
Adjustment Statement**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

Explanation
ALLOCATION OF LOSSES FROM OTHER CATEGORIES 9606427

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 71507

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 20298

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 722

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 309654

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 21153884





**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 813

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 730

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 52

**TY 2020 Foreign Income Related Expenses  
Statement**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 2000

**TY 2020 Foreign Income Related Expenses  
Statement**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 52

**TY 2020 Foreign Income Related Expenses  
Statement**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 293

**TY 2020 Foreign Income Related Expenses  
Statement**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 20

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 8111419



**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 52

**TY 2020 Foreign Income Related Expenses  
Statement**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 2017

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 71507

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 20298

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 722

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 309654

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 21153884





**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 813

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 730

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 2000

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 52

**TY 2020 Foreign Income Related Expenses  
Statement**

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 293

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 52

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:** -

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 20

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 8111419



**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:** -

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 52

**TY 2020 Foreign Income Related Expenses  
Statement**

---

**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

BUSINESS EXPENSES 2017

**TY 2020 Foreign Tax Credit Carryback  
Computation Statement**

---

**Name:** DONALD J & MELANIA<TRUMP**SSN****Spouse SSN****Explanation:**

2019 FR TX PD 279715 CARRYOVER 279715 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

**TY 2020 Foreign Tax Credit Carryback  
Computation Statement**

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**Name:** DONALD J & MELANIA<TRUMP

**SSN:**

**Spouse SSN:**

**Explanation:**

2016 FR TX PD 8085 CARRYOVER 8085 2015 FR TX PD 8596 CARRYOVER 8596

**TY 2020 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:** A SUBSTANTIAL PORTION OF THE INFORMATION REPORTED IN THIS; RETURN IS BASED UPON INFORMATION PROVIDED BY AND/OR FROM; FLOW-THROUGH RETURNS AS FILED BY MAZARS USA LLP; 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, 2020.; THE FORM 8858 FILING REQUIREMENT FOR TRUMP EDUCATION ULC; HAS BEEN SATISFIED BY THE TRUMP ENTREPRENEUR INITIATIVE LLC; (ADDRESS : C/O THE TRUMP ORGANIZATION ; THE TRUMP ENTREPRENEUR INITIATIVE LLC HAS E-FILED ITS RETURN FOR THE TAX YEAR ENDED DECEMBER 31, 2020.; 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, 2020.; 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, 2020.; 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, 2020.; 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 2020; 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, 2020; 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, 2020

**TY 2020 Gen Dep**

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**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).





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# Form 1116

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for CH in the PASSIVE income category.

A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

**Form 1116**

8121 2103

Name

**DONALD J. & MELANIA TRUMP**

1000000000

The date foreign taxes paid or accrued is not applicable for RN in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for OC in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for UK in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for CH in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116**

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Name

**DONALD J. & MELANIA TRUMP**

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The date foreign taxes paid or accrued is not applicable for DR in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for PM in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116**

Name

**DONALD J. & MELANIA TRUMP**

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The date foreign taxes paid or accrued is not applicable for **AE** in the **GENERAL LIMITATION** income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



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# Form 1116

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for RQ in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for CA in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for IN in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

**Form 1116**

Name

**DONALD J. & MELANIA TRUMP**

The date foreign taxes paid or accrued is not applicable for IS in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for DR in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for ID in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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# Form 1116

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for EI in the GENERAL LIMITATION income category.

A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116**

Name

**DONALD J. & MELANIA TRUMP**

---

The date foreign taxes paid or accrued is not applicable for TU in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



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# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for UY in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116**

Name

**DONALD J. & MELANIA TRUMP**

---

The date foreign taxes paid or accrued is not applicable for HTKO in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for HTKO in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



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# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for QA in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for CA in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for IN in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for PM in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



---

**Form 1116**

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for AJ in the PASSIVE income category.

A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

# Form 1116

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for OC in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

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Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for OC in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for UK in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for CH in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116** -AMT

---

Name

**DONALD J. & MELANIA TRUMP**

---

The date foreign taxes paid or accrued is not applicable for DR in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for PM in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

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Name

**DONALD J. & MELANIA TRUMP**

---

The date foreign taxes paid or accrued is not applicable for AE in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



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**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for RQ in the GENERAL LIMITATION income category.

A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

**DONALD J. & MELANIA TRUMP**

---

The date foreign taxes paid or accrued is not applicable for CA in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for IN in the GENERAL LIMITATION income category.

A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

**Form 1116** -AMT

Name

**DONALD J. & MELANIA TRUMP**

The date foreign taxes paid or accrued is not applicable for IS in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for ID in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

**Form 1116** -AMT

Name

**DONALD J. & MELANIA TRUMP**

The date foreign taxes paid or accrued is not applicable for EI in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116** -AMT

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for TU in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

**Form 1116** -AMT

Name

**DONALD J. & MELANIA TRUMP**

The date foreign taxes paid or accrued is not applicable for UY in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



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**Form 1116** -AMT

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for OC in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for AJ in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for PM in the PASSIVE income category.

A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116** -AMT

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Name

**DONALD J. & MELANIA TRUMP**

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The date foreign taxes paid or accrued is not applicable for IN in the PASSIVE income category.  
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**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

---

The date foreign taxes paid or accrued is not applicable for CA in the PASSIVE income category.

A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

---

**Form 1116** -AMT

---

Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for QA in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116** -AMT

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for CH in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116** -AMT

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Name

**DONALD J. & MELANIA TRUMP**

---

The date foreign taxes paid or accrued is not applicable for RN in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



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**Form 1116** -AMT

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for DR in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116** -AMT

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Name

**DONALD J. & MELANIA TRUMP**

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The date foreign taxes paid or accrued is not applicable for HTKO in the GENERAL LIMITATION income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.

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**Form 1116** -AMT

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Name

DONALD J. & MELANIA TRUMP

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The date foreign taxes paid or accrued is not applicable for HTKO in the PASSIVE income category.  
A date of 12/31/2020 has been used for ForeignTaxesPaidOrAccruedDt.



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

### TY 2020 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		0.73200

