<b>E</b> 1040		U.S. Individual Income Tax Return	2005	IRS Use Only - I	)a not	write or r	taple in this space.	
Label	Fort	ne year Jan. 1-Dec. 31, 2005, or other tax year beginning	, 200	5, ending .20			OMB No. 1545-007	4
	Y	our first name and initial	Last name	120	1	Yo	ur social security nu	ımber
instructions	A J	OSEPH R.	BIDEN.	JR.		4	SAS SELLE	
on page 16 )	B If	a joint return, spouse's first name and initial	Last name		$\top$	Sp	ouse's social securi	ity number
	J	ILL T.	BIDEN				Ania ika	
lahal	H H	me address (number and street). If you have a P.O. box	x, see page 16.	Ap	t. no.		You must er	nter
Otherwise,	E						your SSN(s) a	
	R	y, town or post office, state, and ZIP code. If you have a foreign a	ddress, see page 18.		+		ecking a box below	
Presidential		RELEASE STATE OF THE STATE OF T					ange your tax or refu	
Election Camp	aign )	Check here if you, or your spouse if filing jo	ointly, want \$3 to g	go to this fund (see page 16	T.,	. • 3	You X	Spouse
Filing Status	s . 1	Single  Married filing jointly (even if only one had income	e)	4 Head of household (w person is a child but n				
Obselvent	3	Married filing separately. Enter spouse's SSN ab		name here.	or yo	ni nehei	ident, enter tins	LINU 5
Check only one box.		and full name here.		5 Qualifying widow(er) v	rith d	enender	t child (can page	17)
	6a	X Yourself. If someone can claim you as a depend		ox 6a	-		) Boxes checked	
Exemptions		X Spouse		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•••••	on 6a and 6b No. of children	
			Dependent's social	(3) Dependent's	(4	√ if quality	on Bo who:	
		(1) First name Last name	security number	relationship to	, ch	) If quality- no child for illd tax credit see page 19)	<ul> <li>lived with you</li> <li>did not live w</li> </ul>	ith
	3				1	to page 13)	or separation	rce
26.		2		***************************************	Ť		_ (see page 20)	-
If more than four			, ,		T		Dependents on not entered abo	
dependents, see page 19.					T		_ Add numbers	·-
,	· d	Total number of exemptions claimed					on lines above	2
Income	- 7	11/			- 1	7	240,	040
	8a	Taxable interest. Attach Schedule B if required	••••••••••	•••••••	7	8a	. 220,	89.
Attach Form(s) W-2 here, Also	b	Tax-exempt interest. Do not include on line 8a	***************************************	I вь I	7	-		05.
attach Forms	9a	Ordinary dividends. Attach Schedule B if required	***************************************			9a		
W-2G and	b	Qualified dividends (see page 23)	+	g <sub>b</sub>	*	34		
1099-R if tax was withheld.	- 10	Taxable refunds, credits, or offsets of state and local i	ncome taxes		$\top$	10		
was withinein.	11	Alimony received		······································	+	11		
5737 859 19	12	Business income or (loss). Attach Schedule C or C-Ez	 7		+	12		
If you did not get a W-2,	13	Capital gain or (loss). Attach Schedule D if required. I	f not required, check	t here	i l	13		
see page 22.	14	Other gains or (losses). Attach Form 4797	. morrogon ou, onco.		11	14		
	15a	IRA distributions 15a	I	b Taxable amount (see page 2	57	15b		
Enclose, but do	16a	Pensions and annuities 16a		b Taxable amount (see page 2	1 1	16b		
not attach, any payment. Also,	17	Rental real estate, royalties, partnerships, S corporation	ons, trusts, etc. Attac			17		
please use	18	Farm income or (loss). Attach Schedule F			11	18		
Form 1040-V.	19	Unemployment compensation		••••••••••	† †	19		*******
	20a	Social security benefits 20a	1	b Taxable amount (see page 2	7	20b		700
25	21	Other income. List type and amount (see page 29)		amount (coo page 2	11	200		
		STERLING LORD LITERISTIC	CS	81,25	d.	21	81	250.
	22	Add the amounts in the far right column for lines 7 thr			-	22	321,	
	23				T		001/	<u> </u>
Adjusted	24	Educator expenses (see page 29) Certain business expenses of reservists, performing artists, and officials. Attach Form 2108 or 2108-EZ	fee-basis government	24	П			
Gross	25	Health savings account deduction. Attach Form 8889	••••••	25	П			
Income	26	Moving expenses. Attach Form 3903	,	26				
	27	One-half of self-employment tax. Attach Schedule SE		27	T			
	28	Self-employed SEP, SIMPLE, and qualified plans		28	П	- 1		
	29	Self-employed health insurance deduction (see page 3	30)	29	1			
	30	Penalty on early withdrawal of savings		30	П	- 1		
	31a	Alimony paid b Recipient's SSN ▶:		31a	П			
	32	IRA deduction (see page 31)		32	П			
	33	Student loan interest deduction (see page 33)		33	П			
	34	Tuition and fees deduction (see page 34)		34	M			
	35	Domestic production activities deduction. Attach Form	8903	35	П			
UBS Reservable	36	Add lines 23 through 31a and 32 through 35			П	36		
510001 11-05-05	37	Subtract line 36 from line 22. This is your adjusted or			I t	27	321	370

Form 1040 ( 20	105)	JOSEPH R. BIDEN, JR. & JILL T. BIDEN		Page 2
Tax and	38	Amount from line 37 (adjusted gross income)	38	321,379.
Credits	39	a Check \ \ \ You were born before January 2, 1941, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 30	341,313.
Standard	7	if: Spouse was born before January 2, 1941, ☐ Blind. checked ▶ 39a		
Deduction for	1	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here	1	
<ul> <li>People who checked any</li> </ul>	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)		F4 210
or 39b Of who	ar	Subtract line 40 from line 38	40	54,319.
can be claimed as a dependen	3	Subtract line 40 from line 38  If line 38 is over \$109,475, or you provided housing to a person displaced by Hurricane Katrina,	41	267,060.
	7 "	see page 37. Otherwise, multiply \$3,200 by the total number of exemptions claimed on line 6d		
	43	Tayable income. Subtract line 42 from line 41 If line 42 in more than line 44 and a	42	1,152.
All others:	1	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	265,908.
Single or	44	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972	44	68,341.
Married filing separately.	45	Alternative minimum tax. Attach Form 6251	45	1,299.
\$5,000	46	Add lines 44 and 45	46	69,640.
Married filing	47	Foreign tax credit. Attach Form 1116 if required		
jointly or Qualifying	48	Credit for child and dependent care expenses. Attach Form 2441		
widow(er), \$10,000	49	Credit for the elderly or the disabled. Attach Schedule R		
Part Company	50	Education credits. Attach Form 8863 50	1.	
Head of household,	51	Retirement savings contributions credit. Attach Form 8880 51		
\$7,300	52	Child tax credit (see page 41). Attach Form 8901 If required 52	1	
	-53	Adoption credit. Attach Form 8839 53	1 1	
1	54	Credits from: a Form 8396 b Form 8859 54	1	
	55	Other credits. Check applicable box(es): a Form 3800	1	
		b Form 8801 c Form 55		
	56	Add lines 47 through 55. These are your total credits	56	
	. 57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	69,640.
011	58	Self-employment tax. Attach Schedule SE	58	03,040.
Other	59	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	59	
Taxes	.60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
	61	Advance earned income credit payments from Form(s) W-2	61	
	62	Household employment taxes. Attach Schedule H	62	833.
	63	Add lines 57 through 62. This is your total tax	63	70,473.
Payment		Federal income tax withheld from Forms W-2 and 1099 64 42,003.	03	10,413.
		2005 estimated tax payments and amount applied from 2004 return 65 30,000.		
If you have	668	Earned income credit (EIC) 66a		
a qualifying child, attach	h	Nontaxable combat pay election 66b		
Schedule EIC.	67	Excess social security and tier 1 RRTA tax withheld (see page 59)STMT 2 67 1,271.	100	6
		Additional child tax credit. Attach Form 8812 68		
	69	Amount paid with request for extension to file (see page 59)		
	70	Payments from: a Form 2439 b Form 4136 c Form 8885 70		
	71	Add lines 64, 65, 66a, and 67 through 70. These are your total payments		72 274
Refund	72	If line 71 is more than line 63, subtract line 63 from line 71. This is the amount you overpaid	71	73,274.
Direct	722	Amount of line 72 you want refunded to you	72	2,801.
deposit? See page 59	- 10a	Amount of line 72 you want refunded to you  C Type: Checking Savings d number	73a	2,801.
and fill in 73b, 73c, and 73d.				
Amount				
You Owe		Amount you owe. Subtract line 71 from line 63. For details on how to pay, see page 60	75	
Third Par		Estimated tax penalty (see page 60) 76 0.		
Designee	Des	o you want to allow another person to discuss this return with the IRS (see page 61)?  X Yes. Complete the fo	llowing.	No dentification
Sign				
Here	and co	penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge. four signature	eoge and t	beller, they are true, correct,
Joint return?	K .	rod occupator	Daytim	e phone number
See page 17. Keep a copy	-	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation		
for your records.			1	
Paid		TEACHER  Date  Charlette	1	
	Prepar signati	Check it Bell-	nerse <del>s</del> esesmenter	SSN or PTIN
Preparer's				0035375
Use Only		name (or tell-em-		:1406493
510002 11-05-05	ployed	), address,	OC STATE OF	
	and ZI	code		

### SCHEDULES A&B (Form 1040)

## Schedule A - Itemized Deductions

(Schedule B is on page 2)

Department of the Treasury Internal Revenue Service Attach to Form 1040. Name(s) shown on Form 1040

See Instructions for Schedules A&B (Form 1040).

OMB No. 1545-0074

Schedule A (Form 1040) 2005

JOSEPH R. BIDEN, JR. & JILL T. BIDEN Medical Caution. Do not include expenses reimbursed or paid by others. and Medical and dental expenses (see page A-2) Dental Enter amount from Form 1040, line 38 \_\_\_\_\_\_\_\_2 Multiply line 2 by 7.5% (.075) Expenses 3 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-Taxes You State and local (check only one box): Paid a X Income taxes, or General sales taxes (see page A-3) (See 5 15,548 page A-2.) Real estate taxes (see page A-5) 6 8,025 Personal property taxes 7 Other taxes. List type and amount Add lines 5 through 8 23,573 Interest Home mortgage interest and points reported to you on Form 1098 10 35,629 Home mortgage interest not reported to you on Form 1098. If paid to the person You Paid from whom you bought the home, see page A-6 and show that person's name, (See identifying no., and address page A-5.) Note. Personal Points not reported to you on Form 1098. 12 12 interest is Investment interest. Attach Form 4952 if required. (See page A-6.) not 13 deductible. 14 Add lines 10 through 13 14 35,629. Gifts to 15a Total gifts by cash or check, 15a 380 Charity b Gifts by cash or check after August 27, 2005, that you elect to treat as qualified contributions ..... Other than by cash or check. If any gift of \$250 or more, see page A-7. If you made a You must attach Form 8283 if over \$500 gift and got a 16 benefit for it, Carryover from prior year 17 see page A-7. Add lines 15a, 16, and 17 18 380. 18 Casualty or theft loss(es). Attach Form 4684. (See page A-8.). 19 19 Job Expenses Unreimbursed employee expenses - job travel, union dues, job education, etc. and Certain Attach Form 2106 or 2106-EZ if required. (See page A-8.) Miscellaneous Deductions 20 Tax preparation fees 21 Other expenses - investment, safe deposit box, etc. List type and amount (See page A-8.) 22 Add lines 20 through 22 23 Multiply line 24 by 2% (.02) Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-26 Other - from list on page A-9. List type and amount Miscellaneous Deductions 27 Total Is Form 1040, line 38, over \$145,950 (over \$72,975 if married filing separately)? Itemized Your deduction is not limited. Add the amounts in the far right column Deductions for lines 4-through 27. Also, enter this amount on Form 1040, line 40. X Yes. Your deduction may be limited. See page A-9 for the amount to enter. If you elect to itemize deductions even though they are less than your standard deduction, check here 519501 For Paperwork Reduction Act Notice, see Form 1040 instructions.

8		1				
		-				
			i	22		
chedules A&B (Form			OMB N	No. 1545-0074	4	Page 2
iame(s) shown on Fo	m 1040, Do not enter name and social security number if shown on page 1.		Y	our social sec	urity num	ber
ת שמשטח	DIDEN ID C IIII M DIDEN					
JUSEPH K	BIDEN, JR. & JILL T. BIDEN	+	9		量と	
	Schedule B - Interest and Ordinary Dividends			At	ttachment equence N	08
Part I	1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the	+	-		Amoun	
nterest	property as a personal residence, see page B-1 and list this interest first. Also, show that				anoun	
	buyer's social security number and address					
	NEW CASTLE SCHOOL EMPLOYEES CU	+				24.
	U.S. SENATE FEDERAL CREDIT UNION	+		-		14.
	WILMINGTON SAVINGS FUND SOCIETY, FSB	+				51.
ote. If you		$\top$				21.
ceived a Form 199-INT.		+				
om 1099-OID,		+	1	7		
r substitute atement from			1		West.	
brokerage firm,						
st the firm's ame as the		T				
ayer and enter e total interest		T				
own on that						
m.		$\perp$				
						1.0
4						
	2 Add the amounts on line 1		2			89.
	S Excludable interest on series EE and I U.S. savings bonds issued after 1989.	- 1				
	Attach Form 8815		3	4		
	4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a  Note. If line 4 is over \$1,500, you must complete Part III.	-	4			89.
art II	5 List name of payer	+	-		Amount	t
rdinary	- List halife of payer	+				
ividends		+				-
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		T	d.			37-17-2
	- The state of the	I	1		1000000	Variables
		L	1	- West New		
1550		1	1			7
	a Add the amounts on line E. Cota the Little	1				
	6 Add the amounts on line 5. Enter the total here and on Form 1040, line 9a	>	6	<u> </u>		
	Note. If line 6 is over \$1,500, you must complete Part III.	+			7	
	You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (i	a) ha	d a fo	oreign	Yes	No
counts	account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	-		18		
d	7a At any time during 2005, did you have an interest in or a signature or other authority over a fina	ncial	l		3.	
usts	account in a foreign country, such as a bank account, securities account, or other financial acc  b If "Yes," enter the name of the foreign country	ount	?		-	<u> </u>
		+				
50 <b>1</b> 21-05	8 During 2005, did you receive a distribution from, or were you the grantor of, or transferor to, a for	reig	n trus	it?	4 2	-23-
	If "Yes," you may have to file Form 3520. See page B-2 vork Reduction Act Notice, see Form 1040 instructions.				$\perp$	<u>X</u>
- uput	The state of the s	Set	redule	a R /Form	1040)	2005

# **6251**

(Rev. January 2008)
Department of the Treasury
Internal Revenue Service (99)

## Alternative Minimum Tax - Individuals

Attach to Form 1040 or Form 1040NR.

2005 Attachment

Name(s) shown on Form 1040

Your social security number

	OSEPH R. BIDEN, JR. & JILL T. BIDEN Part I Alternative Minimum Taxable Income	Ш.	
-	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 2), and go to line 2. Otherwise, enter	-	F
	the amount from 5000 line 28 (eleve are sent of the 2001), enter the amount from 5000 line 2. Otherwise, enter		0.55 0.50
	the amount from Form 1040, line 38 (minus any amount on Form 8914, line 2), and go to line 7. (If less than zero, enter as a negative amount.)  Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2 1/2% of Form 1040, line 38.	1	267,060.
3	Taxes from Schedule A (Form 1040), line 38	2	00 500
- 2	Taxes from Schedule A (Form 1040), line 9	3	23,573.
-	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
-	Miscellaneous deductions from Schedule A (Form 1040), line 26	5	
	If Form 1040, line 38, is over \$145,950 (over \$72,975 if married filing separately), enter the amount from line 9		12. 2.22
7	of the Itemized Deductions Worksheet on page A-9 of the Instructions for Schedules A & B (Form 1040)	6	-5,263.
٠,	Tax refund from Form 1040, line 10 or line 21	7	
	Investment interest expense (difference between regular tax and AMT)	8	
	Depletion (difference between regular tax and AMT)	9	
70	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Interest from specified private activity bonds exempt from the regular tax	11	
12		12	
13	Exercise of incentive stock options (excess of AMT income over regular tax income)	13	
. 14	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	14	
15	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	15	The state of the s
16	Disposition of property (difference between AMT and regular tax gain or loss)	16	
17		17	
18	Passive activities (difference between AMT and regular tax income or loss)	18	
19		19	
20		20	
21	Long-term contracts (difference between AMT and regular tax income)	21	
22	Mining costs (difference between regular tax and AMT)		
23	Research and experimental costs (difference between regular tax and AMT)	23	
24		24	
25	Intangible drilling costs preference	25	
26	Other adjustments, including income-based related adjustments	26	
27	Alternative tax net operating loss deduction	27	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line	21	
	28 is more than \$191,000, see instructions)	28	285,370.
-	art II Alternative Minimum Tax	28	265,370.
29	Exemption. (If this form is for a child under age 14, see instructions.)	影響	
	IF your filing status is AND line 28 is not over THEN enter on line 29	1	
	Single or head of household \$112,500 \$40,250	7	
	Married filing jointly or qualifying widow(er) 150,000 58,000 STMT 3	29	24,157.
	Married filing separately 75,000 29,000	3	
	If line 28 is over the amount shown above for your filing status, see instructions.		
30	Subtract line 29 from line 28. If zero or less, enter -0- here and on lines 33 and 35 and stop here	30	261,213.
31	<ul> <li>If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends</li> </ul>	1000	202/2201
	on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured		
	for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here.	31	69,640.
	• All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing	23.30	03,040.
	separately) from the result.		
32	Alternative minimum tax foreign tax credit (see instructions)		
33	Tentative minimum tax. Subtract line 32 from line 31	32	60 640
34	Tentative minimum tax. Subtract line 32 from line 31	33	69,640.
	line 47). If you used Schedule J to figure your tax, the amount for line 44 of Form 1040 must be refigured		
	without using Schedule. I (see instructions)		CD 244
35	without using Schedule J (see instructions)  Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0 Enter here and on	34	68,341.
-			
5194	34	35	1,299.
01-1	LHA For Paperwork Reduction Act Notice, see instructions.	Form 6	5251 (2005) (Rev. 1-2006)

· [	om 6251 (2005) (Rev. 1-2006) JOSEPH R. BIDEN, JR. & JIL Part III Tax Computation Using Maximum Capital Gains Rate	LT.	BIDEN	(SEPTEMBE	Page 2
3	S Enter the amount from Form 6251, line 30			36	
3	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax			-52.1	
1/4	Worksheet in the instructions for Form 1040, line 44, or the amount from		1		30)
	line 13 of the Schedule D Tax Worksheet on page D9 of the instructions for			100	
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if			46.	
	necessary) (see the instructions)	37		27.1	
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the				
	AMT, if necessary) (see instructions)	38	a (1 a)		
35	If you did not complete a Schedule D Tax Worksheet for the regular tax or the			343	
	AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter	# 4		15.75	
	the smaller of that result or the amount from line 10 of the Schedule D Tax	-		- M. C.	
	Worksheet (as refigured for the AMT, if necessary)	39		6.0	
40	Enter the smaller of line 36 or line 39			40	
**	Subtract line 40 from line 36			41	
42	if the 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply	line 41	by 26% (.26).	···········   ····	
	Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married fil	lina sep	arately) from	1 1	
3	the result			> 42	
43	Enter:	•••••	••••••••••	7570 BANG	
	• \$59,400 if married filing jointly or qualifying widow(er),			0.00	
	• \$29,700 if single or married filing separately, or	43		7.57	
	• \$39,800 if head of household.			100	5%
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain			5.9	
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from	1	ě		
	line 14 of the Schedule D Tax Worksheet on page D-9 of the instructions for			J. Sec.	
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If			17.50	
	you did not complete either worksheet for the regular tax, enter -0-	44		<b>多</b> 類	
					3
45	Subtract line 44 from line 43. If zero or less, enter -0-	45			
	ji			3000	*
46	Enter the smaller of line 36 or line 37	46		250	*
				5 7	
47	Enter the smaller of line 45 or line 46	47		13.2	3 7
				7	
48	Multiply line 47 by 5% (.05)	*		> 48	
			••••••••••••	3347.193.	
49	Subtract line 47 from line 46	49			
50	Multiply line 49 by 15% (.15)			> 50	
	If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go				
	if the 66 is 2010 of blank, skip lines 5 i and 52 and go to line 53. Otherwise, go	to line	51.		
51	Subtract line 46 from line 40	51	38		
52	Multiply line 51 by 25% (.25)			> 52	
53	Add lines 42, 48, 50, and 52			53	
54	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply li	ne 36 b	v 26% (.26).		
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filir	na sepa	rately) from		
	the result	J P-		54	i.
<u>55</u>	Enter the smaller of line 53 or line 54 here and on line 31			55	
					51 (2005) (Rev. 1-2006)
				I OIIII OLL	(E000) (Nev. 1-2000)

#### SCHEDULE H (Form 1040)

Name of employer

Department of the Treasury Internal Revenue Service (89)

Household Employment Taxes

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

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

See separate instructions.

OMB No. 1545-1971

BIDEN.

Employer identification number

Social security number

51-0188032 Did you pay any one household employee cash wages of \$1,400 or more in 2005? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions on page H-3 before you answer this question.) Yes. Skip lines B and C and go to line 1. No. Go to line B. Did you withhold federal income tax during 2005 for any household employee? В Yes. Skip line C and go to line 5. No. Go to line C. Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2004 or 2005 to all household employees? (Do not count cash wages paid in 2004 or 2005 to your spouse, your child under age 21, or your parent.) Stop. Do not file this schedule. Skip lines 1-9 and go to line 10 on page 2. (Calendar year taxpayers having no household employees in 2005 Yes. do not have to complete this form for 2005.) Social Security, Medicare, and Income Taxes Part I Total cash wages subject to social security taxes (see page H-4) Social security taxes. Multiply line 1 by 12.4% (.124) 2 642. 3 Medicare taxes. Multiply line 3 by 2.9% (.029) 150. Federal income tax withheld, if any 5 Total social security, Medicare, and income taxes (add lines 2, 4, and 5) 6 792. Advance earned income credit (EIC) payments, if any 7 Net taxes (subtract line 7 from line 6) 8 8 792. Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2004 or 2005 to household employees? (Do not count cash wages paid in 2004 or 2005 to your spouse, your child under age 21, or your parent.) No. Stop. Enter the amount from line 8 above on Form 1040, line 62. If you are not required to file Form 1040, see the line 9 instructions on page H-4. X Yes. Go to line 10 on page 2. LHA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Schedule H (Form 1040) 2005

chedule	H (Form 1040) 2005 JOSEPH	R RIDEN	.TP						i s	2000
Part	Federal Unemploy	ment (FUTA) T	ax					-	- Industria	Page 2
Did	you pay unemployment contr	ributions to only one	e state? (If	f you paid	contribution	ns to New York S	tate,			Yes No
che	ck "No.")					······			1	
Dia	you pay all state unemploymere all wages that are taxable for	ent contributions fo	r 2005 by	April 17, 2	2006? Fiscal	year filers, see p	age H-4		1	
ext: If	you checked the "Yes" box of	on all the lines above	e, comple	te Section	n A.			·	1	2 X
- If	you checked the "No" box or	n any of the lines at	bove, skip	Section A	and compl	ete Section B.				
Nan	ne of the state where you paid	d unompleument		Section	F. F F.			(diago	T	
Sta	te reporting number as shown	on state unemploy	ment tax	s return	583	DE 326-0				
0.1	Pc.		100			,		107		
Con	tributions paid to your state unal cash wages subject to FUTA	Inemployment fund	(see page	∍ H-4)	L	15	16.		1	- 4
100	a casir wages subject to POTA	A tax (see page H-4)						16		5,175.
FUΊ	A tax. Multiply line 16 by .008	3. Enter the result h				ne 26		17		41.
Con	nplete all columns below that	apply (if you need n		Section						
a)	(b)	(c)	(0	i) ·	(e)	(f)	(g)	T	(h)	(i)
of ate	State reporting number as shown on state unemployment tax	Taxable wages (as defined in state act)	State exper	rience rate lod	State experience	Multiply col. (c) by .054	Multiply col. (e)	T = 10	Subtract col. (g) from col. (f).	Contributions paid to state
210	return	_	From	То	rate			$\sqcup$	If zero or less, enter -0	unemployment fund
						2				
	,									
_								-		
Tota	ils						9	19		1
	ıls						L	19		
Add	columns (h) and (i) of line 19				1	20	L	79%		
Add					1	20	L	107	×	3
Add Tota	columns (h) and (i) of line 19	A tax (see the line 10	6 instruction	ons on pa	ge H-4)	20		21	×	2
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'ORM 1040	WAGES RECEI	VED AND TAX	CES WITHHE	LD	STATI	EMENT 1
, EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
STATE OF DELAWARE WIDENER UNIVERSITY UNITED STATES SENATE	60,509. 20,500. 159,031.	7,340. 1,467. 33,196.	2,619. 676. 7,129.		4,246. 1,271. 5,580.	297.
'OTALS	240,040.	42,003.	10,424.	9 31 9	11,097.	3,596.



ORM 1040	EXCESS SOCIAL SECURITY TAX WORKSHE	ET STA	TEMENT 2
		TAXPAYER	SPOUSE
THAN \$5,580.00	SECURITY TAX WITHHELD BUT NOT MORE FOR EACH EMPLOYER (THIS TAX SHOULD 4 OF YOUR W-2 FORMS). ENTER THE	6,851.	4,246.
GROUP-TERM LIFT FORM 1040, LIN	LLECTED SOCIAL SECURITY TAX ON TIPS OR INSURANCE INCLUDED IN THE TOTAL ON 63		
3. ADD LINES 1 AND	0 2	6,851.	4,246.
1. SOCIAL SECURITY	TAX LIMIT	5,580.	5,580.
TAX INCLUDED IN	FROM LINE 3. EXCESS SOCIAL SECURITY FORM 1040, LINE 67	1,271.	0.



FOR	6251 EXEMPTION WORKSHEET		STATEMENT 3
			Te
L	NTER: \$40,250 IF SINGLE OR HEAD OF HOUSEHOLD; \$58,000 MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$29,0	IF 00	
	IF MARRIED FILING SEPARATELY		58,000.
3	NTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME	11.	50,000.
,	(AMTI) FORM 6251, LINE 28 28	5,370.	
, .	NTER: \$112,500 IF SINGLE OR HEAD OF HOUSEHOLD;	1 .	
	\$150,000 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$75,000 IF MARRIED		
54	TITI TATO OTTO A DOTT TO	2 000	
	UBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS	0,000.	
	TaxIIII 0	5,370.	
5 1	ULTIPLY LINE 4 BY 25% (.25)	. ] .	33,843.
	UBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0-	. IF	
	THIS FORM IS FOR A CHILD UNDER AGE 14, GO TO LINE 7 BY	ELOW.	100
	OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 621 LINE 29, AND GO TO FORM 6251, LINE 30	51, -	04.455
		1	24,157.
(	HILD'S MINIMUM EXEMPTION AMOUNT	. ] .	**
1	NTER THE CHILD'S EARNED INCOME, IF ANY		
I	DD LINES 7 AND 8	- 1	
0 F	NTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM		
10000	LINE 29, AND GO TO FORM 6251, LINE 30	251,	*
200		• 1 •	