

See instructions on page 16.)

Use the IRS label. Otherwise, please print or type.

Presidential Election Campaign

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

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

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

Your social security number: \_\_\_\_\_  
 Spouse's social security number: \_\_\_\_\_

You must enter your SSN(s) above.

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

Filing Status

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

Check only one box.

Exemptions

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

b  Spouse

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

Boxes checked on 6a and 6b: 2

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

Dependents on 6c not entered above: \_\_\_\_\_

Add numbers on lines above: 2

If more than four dependents, see page 19.

Income

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

Adjusted Gross Income

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



Tax and Credits

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

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

Other Taxes

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

Payments

If you have a qualifying child, attach Schedule EIC.

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

Refund

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

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

Amount You Owe

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

Third Party Designee

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

Sign Here

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

Paid Preparer's Use Only

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

510002 11-05-05

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