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Form **1040** U.S. Individual Income Tax Return (99) **2016** OMB No. 1545-0074 IRS Use Only - Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2016, or other tax year beginning 2016, ending 20 See separate instructions.

Your first name and initial Last name
DONALD J. TRUMP

If a joint return, spouse's first name and initial Last name Spouse's social security number
MELANIA TRUMP

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. **▲ Make sure the SSN(s) above and on line 6c are correct.**

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below.

Foreign country name Foreign province/state/county Foreign postal code ☒ You ☒ Spouse

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

Exemptions 6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a 6b ☒ Spouse Boxes checked on 6a and 6b 2
c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) ☒ If child under age 17 qualifying for child tax credit
SON 1
If more than four dependents, see instructions and check here ☐ Dependents on 6c not entered above Add numbers on lines above 3

Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2 STMT 7 7 978.
8a Taxable interest. Attach Schedule B if required 8a 8,994,141.
b Tax-exempt interest. Do not include on line 8a 8b 2,831.
9a Ordinary dividends. Attach Schedule B if required 9a 337,938.
b Qualified dividends 9b 292,068.
10 Taxable refunds, credits, or offsets of state and local income taxes STMT 4 STMT 5 10 0.
11 Alimony received 11
12 Business income or (loss). Attach Schedule C or C-EZ 12 8,797,393.
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐ 13 10,941,053.
14 Other gains or (losses). Attach Form 4797 14 -444,633.
15a IRA distributions 15a b Taxable amount 15b
16a Pensions and annuities 16a b Taxable amount 16b 77,808.
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 -15,939,523.
18 Farm income or (loss). Attach Schedule F 18
19 Unemployment compensation 19
20a Social security benefits 20a b Taxable amount 20b
21 Other income. List type and amount SEE STATEMENT 1 21 -44,955,324.
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income 22 -32,190,169.

Adjusted Gross Income 23 Educator expenses 23
24 Certain business expenses of reservists, performing artists, and fee-basis 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 Deductible part of self-employment tax. Attach Schedule SE 27 219,505.
28 Self-employed SEP, SIMPLE, and qualified plans 28
29 Self-employed health insurance deduction 29
30 Penalty on early withdrawal of savings 30
31a Alimony paid b Recipient's SSN 31a
32 32
33 Student loan interest deduction 33
34 Tuition and fees. Attach Form 8917 34
35 Domestic production activities deduction. Attach Form 8903 35
36 Add lines 23 through 35 36 219,505.
37 Subtract line 36 from line 22. This is your adjusted gross income 37 -32,409,674.

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IRS-AUSTIN, TEXAS

Tax and Credits

Standard Deduction for -
 ● People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

● All others:
 Single or Married filing separately, \$6,300
 Married filing jointly or Qualifying widow(er), \$12,600
 Head of household, \$9,300

38	Amount from line 37 (adjusted gross income)	38	-32,409,674.
39a	Check <input checked="" type="checkbox"/> You were born before January 2, 1952, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1952, <input type="checkbox"/> Blind. Total boxes checked ... 39a 1		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ... 39b		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	8,158,717.
41	Subtract line 40 from line 38	41	-40,568,391.
42	Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see inst.	42	12,150.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	0.
44	Tax. Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	0.
45	Alternative minimum tax. Attach Form 6251	45	2,234,725.
46	Excess advance premium tax credit repayment. Attach Form 8962	46	
47	Add lines 44, 45, and 46	47	2,234,725.
48	Foreign tax credit. Attach Form 1116 if required	48	
49	Credit for child and dependent care expenses. Attach Form 2441	49	
50	Education credits from Form 8863, line 19	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit. Attach Schedule 8812, if required	52	
53	Residential energy credits. Attach Form 5695	53	
54	Other credits from Form: a <input checked="" type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	2,233,975.
55	Add lines 48 through 54. These are your total credits	55	2,233,975.
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	750.
57	Self-employment tax. Attach Schedule SE	57	439,009.
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60a	Household employment taxes from Schedule H	60a	45,060.
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
61	Health care: Individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	61	
62	Taxes from: a <input checked="" type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Inst.; enter code(s)	62	129,480.
63	Add lines 56 through 62. This is your total tax	63	614,299.

Other Taxes**Payments**

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	168.
65	2016 estimated tax payments and amount applied from 2015 return	65	
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election 66b		
67	Additional child tax credit. Attach Schedule 8812	67	
68	American opportunity credit from Form 8863, line 8	68	
69	Net premium tax credit. Attach Form 8962	69	
70	Amount paid with request for extension to file	70	1,000,000.
71	Excess social security and tier 1 RRTA tax withheld	71	
72	Credit for federal tax on fuels. Attach Form 4136	72	16,849.
73	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	1,017,017.

Refund

Direct deposit? See instructions.

75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	402,718.
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here	76a	
b	Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number <input type="text"/>		
77	Amount of line 75 you want applied to your 2017 estimated tax	77	388,441.
78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
79	Estimated tax penalty (see instructions)	79	14,277.

Amount You Owe**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete below. ☐ No

Sign Here

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

Designee's name	DONALD BENDER	Phone no.	(516) 488-1200	Personal identification number (PIN)	
Your signature		Date	10/10/17	Your occupation	EXECUTIVE
Spouse's signature (if joint return, both must sign)		Date	11/10/17	Spouse's occupation	EXECUTIVE
				Daytime phone number	
				If the IRS sent you an Identity Protection PIN, enter it here	

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
DONALD BENDER		10/11/17		
Firm's name	Firm's EIN	Phone no.		
MAZARS USA LLP	13 1459550	(516) 488-1200		

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on Form 1040

Itemized Deductions

► Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.
► Attach to Form 1040.

OMB No. 1545-0074

2016
Attachment
Sequence No. **07**

Your social security number

DONALD J. & MELANIA TRUMP

Medical and Dental Expenses	Caution: Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see instructions)	1	14,393.
	2	Enter amount from Form 1040, line 38	2	-32,409,674.
	3	Multiply line 2 by 10% (0.10). But if either you or your spouse was born before January 2, 1952, multiply line 2 by 7.5% (0.075) instead	3	0.
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	14,393.
Taxes You Paid	5 State and local (check only one box):		5	4,254,329.
	a	<input checked="" type="checkbox"/> Income taxes, or	SEE STATEMENT 11	
	b	<input type="checkbox"/> General sales taxes	SEE STATEMENT 14	
	6	Real estate taxes (see instructions)	6	949,944.
	7	Personal property taxes	7	
	8	Other taxes. List type and amount ►	8	
	9	Add lines 5 through 8	9	5,204,273.
	Interest You Paid	10	Home mortgage interest and points reported to you on Form 1098	10
11		Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►	11	
12		Points not reported to you on Form 1098. See instructions for special rules	12	
13		Mortgage insurance premiums (see instructions)	13	
14		Investment interest. Attach Form 4952 if required. (See instructions.) STMT 13	14	1,513,220.
15		Add lines 10 through 14	15	1,513,220.
16		Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	1,191,210. STMT 12
17		Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	
18		Carryover from prior year	18	5,273,458.
19		Add lines 16 through 18	19	0.
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20	
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ►	21	
	22	Tax preparation fees	22	1,295,385.
	23	Other expenses - investment, safe deposit box, etc. List type and amount ► SEE STATEMENT 9	23	91,859.
	24	Add lines 21 through 23	24	1,387,244.
	25	Enter amount from Form 1040, line 38	25	-32,409,674.
	26	Multiply line 25 by 2% (0.02)	26	0.
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	1,387,244.
	28	Other - from list in instructions. List type and amount ► SEE STATEMENT 10	28	39,587.
Total Itemized Deductions	29	Is Form 1040, line 38, over \$155,650? <input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.	29	8,158,717.
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here		

Schedule A - Charitable Contributions Worksheet Page 1

NAME

DONALD J. & MELANIA TRUMP

		50% of AGI				0.	AGI	-32,409,674.
Year		100% Limit	50% Limit	30% Limit	Appreciated Property 30% Limit	Appreciated Property 20% Limit	Total Contributions Allowed	Total Contributions Carryover
2006	Contributions							
	Less: Allowed							
	Less: NOL Abs. CRP							
	CRP C/O							
2007	Contributions							
	Less: Allowed							
	Less: NOL Abs. CRP							
	CRP C/O							
2008	Contributions							
	Less: Allowed							
	Less: NOL Abs. CRP							
	CRP C/O							
2009	Contributions							
	Less: Allowed							
	Less: NOL Abs. CRP							
	CRP C/O							
2010	Contributions							
	Less: Allowed							
	Less: NOL Abs. CRP							
	CRP C/O							
2011	Contributions							
	Less: Allowed							
	Less: NOL Absorb.							
	Less: NOL Abs. CRP							
	Carryover							
	CRP C/O							
2012	Contributions							
	Less: Allowed							
	Less: NOL Absorb.							
	Less: NOL Abs. CRP							
	Carryover							
	CRP C/O							
2013	Contributions							
	Less: Allowed							
	Less: NOL Absorb.							
	Less: NOL Abs. CRP							
	Carryover							
	CRP C/O							

Schedule A

Charitable Contributions Limitation

NAME DONALD J. & MELANIA TRUMP

50% Contributions

1. 50% of AGI 0.
2. Contributions qualifying for 50% limit 1,191,210.
3. Allowable 50% contributions 0.

30% Contributions

4. Remaining 50% limit (Line 1 - Line 3) 0.
5. Less capital gain property - special 30% limits
6. Balance of 50% of AGI 0.
7. 30% of AGI
8. Contributions qualifying for 30% limit
9. Allowable 30% contributions (lesser of Line 6, 7 or 8) 0.

30% Special Contributions

10. 30% of AGI
11. Contributions qualifying for 30% special limit
12. Remaining 50% limit (line 1 less lines 3 and 9) 0.
13. Allowable 30% special contribution (lesser of Line 10, 11 or 12) 0.

20% Contributions

14. 20% of AGI
15. 30% of AGI
16. Allowed 30% regular contributions
17. Line 15 less line 16 0.
18. Allowed 30% special contributions
19. Line 15 less line 18 0.
20. Remaining 50% limit (line 1 less the sum of lines 3, 9, and 13) 0.
21. Contributions subject to the 20% limitation
22. Allowable 20% contributions (lesser of Line 14, 17, 19, 20 or 21) 0.

50% and 100% Conservation Real Property Contributions

23. Remaining 50% limit (line 1 less the sum of lines 3, 9, 13 and 22)
24. Conservation real property contribution subject to 50% limit
25. Allowable 50% conservation real property contribution (lesser of Line 23 or 24) 0.
26. Remaining 100% of AGI
27. Conservation real property contribution subject to 100% limit
28. Allowable 100% conservation real property contribution (lesser of Line 26 or 27) 0.
29. Total 2016 contributions allowed on Schedule A
30. Total prior year carryovers allowed on Schedule A
31. Total charitable contributions to Schedule A, Line 19

Schedule A - Charitable Contributions Worksheet Page 2

NAME

DONALD J. & MELANIA TRUMP

		50% of AGI				0.	AGI	-32,409,674.
Year		100% Limit	50% Limit	30% Limit	Appreciated Property 30% Limit	Appreciated Property 20% Limit	Total Contributions Allowed	Total Contributions Carryover
2014	Contributions			5,273,458.				
	Less: Allowed ...							
	Less: NOL Absorb.			5,273,458.				
	Less: NOL Abs. CRP Carryover ...							
	CRP C/O ...							
2015	Contributions							
	Less: Allowed ...							
	Less: NOL Absorb.							
	Less: NOL Abs. CRP Carryover ...							
	CRP C/O ...							
2016	Contributions		1,191,210.					
	Less: Allowed ...	0.	0.	0.	0.	0.		
	Less: NOL Absorb.		1,191,210.					
	Less: NOL Abs. CRP Carryover ...							
	CRP C/O ...							
Charitable contributions to Schedule A, Line 19								

Interest and Ordinary Dividends

OMB No. 1545-0074

2016
Attachment
Sequence No. **08**

▶ Attach to Form 1040A or 1040.

▶ Information about Schedule B and its instructions is at www.irs.gov/scheduleb

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

Part I

Interest

- 1** List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶
SEE STATEMENT 15

Amount

8,994,141.

1

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

- 2** Add the amounts on line 1 **2** 8,994,141.
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 **3**
4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ... ▶ **4** 8,994,141.

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

Amount

Part II

Ordinary Dividends

- 5** List name of payer ▶
SEE STATEMENT 16

337,938.

5

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

- 6** Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ... ▶ **6** 337,938.

Note: If line 6 is over \$1,500, you must complete Part III.

Part III

Foreign Accounts and Trusts

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a** At any time during 2016, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions **X**
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements **X**
b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ▶ UNITED KINGDOM, IRELAND, CHINA, SAINT MARTIN
8 During 2016, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions **X**

Yes

No

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)

ICE SKATING RINK

B Enter code from instructions

713900

C Business name. If no separate business name, leave blank.

WOLLMAN RINK OPERATIONS LLC

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

13-4191030

E Business address (including suite or room no.)

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No

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

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1 22900282 9,742,900.
2 Returns and allowances	2 175387
3 Subtract line 2 from line 1	3 22724895 8,742,900.
4 Cost of goods sold (from line 42)	4 1702330 8,68,802.
5 Gross profit. Subtract line 4 from line 3	5 9,674,098.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6 237342
7 Gross income. Add lines 5 and 6	7 9,674,098.

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

8 Advertising	8 3,470.	18 Office expense	18 45127 X5,696.
9 Car and truck expenses (see instructions)	9 18879 X6,151.	19 Pension and profit-sharing plans	19
10 Commissions and fees	10	20 Rent or lease (see instructions):	
11 Contract labor (see instructions)	11	a Vehicles, machinery, and equipment	20a 10,400.
12 Depletion	12	b Other business property	20b 3,162,654.
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13 223453 X152,824.	21 Repairs and maintenance	21 595935 X41,676.
14 Employee benefit programs (other than on line 19)	14 213607 53,391.	22 Supplies (not included in Part III)	22 126,332.
15 Insurance (other than health)	15 X199,411.	23 Taxes and licenses	23 64,685.
16 Interest:		24 Travel, meals, and entertainment:	
a Mortgage (paid to banks, etc.)	16a	a Travel	24a 1996 X1,110.
b Other	16b	b Deductible meals and entertainment (see instructions)	24b 38420 X6,809.
17 Legal and professional services	17 53079 X6,942.	25 Utilities	25 320315 X251,265.
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28 2385271	26 Wages (less employment credits)	26 4836519 X426,883.
29 Tentative profit or (loss). Subtract line 28 from line 7	29 297,623.	27 a Other expenses (from line 48)	27a 2128853 X597,776.
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	b Reserved for future use	27b
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31 297,623.		
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 Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.		32a <input type="checkbox"/> All investment is at risk.	
		32b <input type="checkbox"/> Some investment is not at risk.	

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
Attachment
Sequence No. **09**

Name of proprietor

DONALD J. TRUMP

Social security number (SSN)

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

REAL ESTATE DEVELOPMENT

B Enter code from instructions

► 531310

C Business name. If no separate business name, leave blank.

TRUMP LAS VEGAS DEVELOPMENT LLC

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

11-3668692

E Business address (including suite or room no.) ► 7

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses

☐ Yes ☒ No

H If you started or acquired this business during 2016, check here

☐ Yes ☒ No

I Did you make any payments in 2016 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

► ☐

1 6,115,606.

2 Returns and allowances

2

3 Subtract line 2 from line 1

3 6,115,606.

4 Cost of goods sold (from line 42)

4

5 Gross profit. Subtract line 4 from line 3

5 6,115,606.

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

6

7 Gross income. Add lines 5 and 6

7 6,115,606.

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

8 Advertising

8

18 Office expense

18

9 Car and truck expenses
(see instructions)

9

19 Pension and profit-sharing plans

19

10 Commissions and fees

10

20 Rent or lease (see instructions):

20

11 Contract labor (see instructions)

11

a Vehicles, machinery, and equipment

20a

12 Depletion

12

b Other business property

20b

13 Depreciation and section 179
expense deduction (not included in
Part III) (see instructions)

13

21 Repairs and maintenance

21

14 Employee benefit programs (other
than on line 19)

14

22 Supplies (not included in Part III)

22

15 Insurance (other than health)

15

23 Taxes and licenses

23 573.

16 Interest:

16

24 Travel, meals, and entertainment:

24

a Mortgage (paid to banks, etc.)

16a

a Travel

24a

b Other

16b

b Deductible meals and
entertainment (see instructions)

24b

17 Legal and professional services

17

25 Utilities

25

26 Wages (less employment credits)

26

27 a Other expenses (from line 48)

27a

b Reserved for future use

27b

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

28 655.

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

29 6,114,951.

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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

31 6,114,951.

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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☐ All investment is at risk.

32b ☐ Some investment is not at risk.

**SCHEDULE C
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Profit or Loss From Business**

(Sole Proprietorship)

▶ Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)**B** Enter code from instructions

MANAGEMENT SERVICES

▶ 541600

C Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), (see instr.)

DONALD J. TRUMP

E Business address (including suite or room no.) ▶

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

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No**H** If you started or acquired this business during 2016, check here ☐**I** Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No**J** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No**Part I Income**

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	214,500.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	214,500.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	214,500.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) SEE STATEMENT 17	6	225,884.
7 Gross income. Add lines 5 and 6	7	440,384.

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

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	225,884.
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17		25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28	225,884.	26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29	214,500.	27 a Other expenses (from line 48)	27a	
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		b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	214,500.			
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a <input type="checkbox"/> All investment is at risk.		
			32b <input type="checkbox"/> Some investment is not at risk.		

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

Schedule C (Form 1040) 2016

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)

REAL ESTATE DEVELOPMENT

B Enter code from instructions

► 531310

C Business name. If no separate business name, leave blank.

TRUMP LAS VEGAS DEVELOPMENT LLC

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

11-3668692

E Business address (including suite or room no.) ►

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses

☐ Yes ☒ No

H If you started or acquired this business during 2016, check here

☐ Yes ☒ No

I Did you make any payments in 2016 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

► ☐

1 2,038,536.

2 Returns and allowances

2

3 Subtract line 2 from line 1

3 2,038,536.

4 Cost of goods sold (from line 42)

4

5 Gross profit. Subtract line 4 from line 3

5 2,038,536.

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

6

7 Gross income. Add lines 5 and 6

7 2,038,536.

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

8 Advertising

8

18 Office expense

18

9 Car and truck expenses
(see instructions)

9

19 Pension and profit-sharing plans

19

10 Commissions and fees

10

20 Rent or lease (see instructions):

20

11 Contract labor (see instructions)

11

a Vehicles, machinery, and equipment

20a

12 Depletion

12

b Other business property

20b

13 Depreciation and section 179
expense deduction (not included in
Part III) (see instructions)

13

21 Repairs and maintenance

21

14 Employee benefit programs (other
than on line 19)

14

22 Supplies (not included in Part III)

22

15 Insurance (other than health)

15

23 Taxes and licenses

23 191.

16 Interest:

16

24 Travel, meals, and entertainment:

24

a Mortgage (paid to banks, etc.)

16a

a Travel

24a

b Other

16b

b Deductible meals and
entertainment (see instructions)

24b

17 Legal and professional services

17

25 Utilities

25

26 Wages (less employment credits)

26

27 a Other expenses (from line 48)

27a

b Reserved for future use

27b

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

28 219.

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

29 2,038,317.

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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

31 2,038,317.

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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☐ All investment
is at risk.

32b ☐ Some investment
is not at risk.

**SCHEDULE C
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Profit or Loss From Business**

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
Attachment
Sequence No. 09

Name of proprietor

DONALD J. TRUMP

Social security number (SSN)

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

RESTAURANT

B Enter code from instructions

722513

C Business name. If no separate business name, leave blank.

TRUMP RESTAURANTS LLC

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

20-0343943

E Business address (including suite or room no.) ►

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

F Accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No**H** If you started or acquired this business during 2016, check here ☐ Yes ☒ No**I** Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No**J** If "Yes," did you or will you file required Forms 1099? ☒ Yes ☐ No**Part I Income**

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	4,122,012.
2	Returns and allowances	2	175,387.
3	Subtract line 2 from line 1	3	3,946,625.
4	Cost of goods sold (from line 42)	4	1,633,528.
5	Gross profit. Subtract line 4 from line 3	5	2,313,097.
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6	7	2,313,097.

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

8	Advertising	8	656.	18	Office expense	18	9,431.
9	Car and truck expenses (see instructions)	9	2,728.	19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	7,650.
12	Depletion	12		b	Other business property	20b	119,784.
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	55,433.	21	Repairs and maintenance	21	157,383.
14	Employee benefit programs (other than on line 19)	14	22,700.	22	Supplies (not included in Part III)	22	18,262.
15	Insurance (other than health)	15	14,196.	23	Taxes and licenses	23	15,998.
16	Interest:			24	Travel, meals, and entertainment:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	886.
b	Other	16b		b	Deductible meals and entertainment (see instructions)	24b	1,315.
17	Legal and professional services	17	21,479.	25	Utilities	25	68,391.
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26	Wages (less employment credits)	26	1,370,165.
29	Tentative profit or (loss). Subtract line 28 from line 7	29		27 a	Other expenses (from line 48)	27a	296,895.
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		b	Reserved for future use	27b	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	129,745.				
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.	32a	<input type="checkbox"/> All investment is at risk.	32b	<input type="checkbox"/> Some investment is not at risk.		

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

Schedule C (Form 1040) 2016

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory:	a <input checked="" type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	179,042.	
36	Purchases less cost of items withdrawn for personal use	36	1,650,024.	
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	1,829,066.	
41	Inventory at end of year	41	195,538.	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	1,633,528.	

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 2016, enter the number of miles you used your vehicle for:		
a	Business	b	Commuting
c	Other		
45	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

UNIFORM EXPENSE	49,467.
PAYROLL TAXES	132,800.
BANK CHARGES	84,259.
COMPUTER PAYROLL EXPENSE	10,463.
TELEPHONE	3,113.
COMPUTER SERVICES	6,216.
EXTERMINATING	8,792.
NYS FILING FEE	25.
AMORTIZATION	1,760.
48 Total other expenses. Enter here and on line 27a	48 296,895.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
Attachment
Sequence No. **09**

Name of proprietor

DONALD J. TRUMP

Social security number (SSN)

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

REAL ESTATE

B Enter code from instructions

531310

C Business name. If no separate business name, leave blank.

TIHT HOLDING COMPANY LLC

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

20-2249347

E Business address (including suite or room no.) ►

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ► ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No

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

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	86,005.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	86,005.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	86,005.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	86,005.

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

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	15,696.	21 Repairs and maintenance	21	52.
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	23,309.
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17	3,055.	25 Utilities	25	659.
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27 a Other expenses (from line 48)	27a	30,345.
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		b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	12,889.			
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a <input type="checkbox"/> All investment is at risk.		
			32b <input type="checkbox"/> Some investment is not at risk.		

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

Schedule C (Form 1040) 2016

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation <input type="checkbox"/> Yes <input type="checkbox"/> 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		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		

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 2016, enter the number of miles you used your vehicle for:	
a	Business	b Commuting
c	Other	
45	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

COMMON CHARGES	30,320.
NYS FILING FEE	25.
48 Total other expenses. Enter here and on line 27a	48 30,345.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)
GOLF

B Enter code from instructions
713900

C Business name. If no separate business name, leave blank.
TRUMP GOLF ACQUISITIONS LLC

D Employer ID number (EIN), (see instr.)
27-2412721

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

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

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	
4	Cost of goods sold (from line 42)	4	
5	Gross profit. Subtract line 4 from line 3	5	
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) SEE STATEMENT 19	6	11,458.
7	Gross income. Add lines 5 and 6	7	11,458.

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

8	Advertising	8		18	Office expense	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	300.
16	Interest:			24	Travel, meals, and entertainment:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals and entertainment (see instructions)	24b	
17	Legal and professional services	17	55.	25	Utilities	25	
				26	Wages (less employment credits)	26	
				27 a	Other expenses (from line 48)	27a	
				b	Reserved for future use	27b	

28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	355.
29	Tentative profit or (loss). Subtract line 28 from line 7	29	11,103.

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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☐ All investment is at risk.
32b ☐ Some investment is not at risk.

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

Schedule C (Form 1040) 2016

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
Attachment
Sequence No. 09

Name of proprietor

DONALD J. TRUMP

Social security number (SSN)

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

AVIATION

B Enter code from instructions

532290

C Business name. If no separate business name, leave blank.

DJT OPERATIONS CX LLC

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

46-0980157

E Business address (including suite or room no.) ►

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐ Yes ☒ No

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No

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

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	580,723.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	580,723.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	580,723.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	580,723.

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

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	196,824.
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	49,340.
15 Insurance (other than health)	15		23 Taxes and licenses	23	3,009.
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	31,296.
17 Legal and professional services	17	1,438.	25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26 Wages (less employment credits)	26	39,471.
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27 a Other expenses (from line 48)	27a	203,837.
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		b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	55,508.			
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a <input type="checkbox"/> All investment is at risk.		
			32b <input type="checkbox"/> Some investment is not at risk.		

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

Schedule C (Form 1040) 2016

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? ☐ Yes ☐ No
If "Yes," attach explanation

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
41 Inventory at end of year	41
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42

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 2016, enter the number of miles you used your vehicle for:
a Business b Commuting c Other

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

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

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

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

FUEL EXPENSE	165,720.
TELEPHONE	5,297.
EQUIPMENT LEASES	32,820.
48 Total other expenses. Enter here and on line 27a	203,837.

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)

REAL ESTATE

B Enter code from instructions

531390

C Business name. If no separate business name, leave blank.

THC HOTEL DEVELOPMENT LLC

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

46-1174418

E Business address (including suite or room no.) ►

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses

☐ Yes ☒ No

H If you started or acquired this business during 2016, check here

☐

I Did you make any payments in 2016 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

☐

1 332034

2 Returns and allowances

2

3 Subtract line 2 from line 1

3

4 Cost of goods sold (from line 42)

4

5 Gross profit. Subtract line 4 from line 3

5

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

6

7 Gross income. Add lines 5 and 6

7

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

8 Advertising

8

18 Office expense

18

9 Car and truck expenses
(see instructions)

9

19 Pension and profit-sharing plans

19

10 Commissions and fees

10

20 Rent or lease (see instructions):

20

11 Contract labor (see instructions)

11

a Vehicles, machinery, and equipment

20a

12 Depletion

12

b Other business property

20b

13 Depreciation and section 179
expense deduction (not included in
Part III) (see instructions)

13

21 Repairs and maintenance

21

14 Employee benefit programs (other
than on line 19)

14

22 Supplies (not included in Part III)

22

15 Insurance (other than health)

15

23 Taxes and licenses

23

16 Interest:

16

24 Travel, meals, and entertainment:

24

a Mortgage (paid to banks, etc.)

16a

a Travel

24a

b Other

16b

b Deductible meals and
entertainment (see instructions)

24b

17 Legal and professional services

17

25 Utilities

25

26 Wages (less employment credits)

26

27 a Other expenses (from line 48)

27a

b Reserved for future use

27b

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

28

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

29

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).

30

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.

31

• If a profit, enter on both **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

PAL

32 If you have a loss, check the box that describes your investment in this activity (see instructions).

32

• If you checked 32a, enter the loss on both **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a

32b

☒ All investment
is at risk.

☐ Some investment
is not at risk.

**SCHEDULE C
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Profit or Loss From Business**

(Sole Proprietorship)

▶ Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)

REAL ESTATE DEVELOPMENT

B Enter code from instructions

▶ 531310

C Business name. If no separate business name, leave blank.

TRUMP C DEVELOPMENT LLC

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

11-3626042

E Business address (including suite or room no.) ▶

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

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No**H** If you started or acquired this business during 2016, check here ☐**I** Did you make any payments in 2016 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 ☐**2** Returns and allowances**3** Subtract line 2 from line 1**4** Cost of goods sold (from line 42)**5** Gross profit. Subtract line 4 from line 3**6** Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)**7** Gross income. Add lines 5 and 6**Part II Expenses.** Enter expenses for business use of your home **only** on line 30.**8** Advertising**9** Car and truck expenses
(see instructions)**10** Commissions and fees**11** Contract labor (see instructions)**12** Depletion**13** Depreciation and section 179
expense deduction (not included in
Part III) (see instructions)**14** Employee benefit programs (other
than on line 19)**15** Insurance (other than health)**16** Interest:**a** Mortgage (paid to banks, etc.)**b** Other**17** Legal and professional services**18** Office expense**19** Pension and profit-sharing plans**20** Rent or lease (see instructions):**a** Vehicles, machinery, and equipment**b** Other business property**21** Repairs and maintenance**22** Supplies (not included in Part III)**23** Taxes and licenses**24** Travel, meals, and entertainment:**a** Travel**b** Deductible meals and
entertainment (see instructions)**25** Utilities**26** Wages (less employment credits)**27 a** Other expenses (from line 48)**b** 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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.• If a loss, you **must** go to line 32.**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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.**32a** ☒ All investment
is at risk.**32b** ☐ Some investment
is not at risk.

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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

532290

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No

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

Part I Income

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

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

8 Advertising	8	18 Office expense	18
9 Car and truck expenses (see instructions)	9	19 Pension and profit-sharing plans	19
10 Commissions and fees	10	20 Rent or lease (see instructions):	
11 Contract labor (see instructions)	11	a Vehicles, machinery, and equipment	20a
12 Depletion	12	b Other business property	20b
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	21 Repairs and maintenance	21
14 Employee benefit programs (other than on line 19)	14	22 Supplies (not included in Part III)	22
15 Insurance (other than health)	15	23 Taxes and licenses	23 357.
16 Interest:		24 Travel, meals, and entertainment:	
a Mortgage (paid to banks, etc.)	16a	a Travel	24a
b Other	16b	b Deductible meals and entertainment (see instructions)	24b
17 Legal and professional services	17 3,055.	25 Utilities	25
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28 3,437.	26 Wages (less employment credits)	26
29 Tentative profit or (loss). Subtract line 28 from line 7	29 -3,437.	27 a Other expenses (from line 48)	27a 25.
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	b Reserved for future use	27b
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31 -3,437.		
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

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

Schedule C (Form 1040) 2016

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

41 Inventory at end of year

41

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4

42

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 2016, enter the number of miles you used your vehicle for:

a Business **b** Commuting **c** Other

45 Was your vehicle available for personal use during off-duty hours?

☐ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use?

☐ Yes ☐ No

47 a Do you have evidence to support your deduction?

☐ Yes ☐ No

b If "Yes," is the evidence written?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

NYS FILING FEE

25.

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

48

25.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
Attachment
Sequence No. 09

Name of proprietor

DONALD J. TRUMP

Social security number (SSN)

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

REAL ESTATE

B Enter code from instructions

531390

C Business name. If no separate business name, leave blank.

CHICAGO UNIT ACQUISITION 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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐ Yes ☒ No

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No

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

Part I Income

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

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

8	Advertising	8		18	Office expense	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	607.
16	Interest:			24	Travel, meals, and entertainment:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals and entertainment (see instructions)	24b	
17	Legal and professional services	17	1,110.	25	Utilities	25	
26	Wages (less employment credits)	26		27 a	Other expenses (from line 48)	27a	
27 b	Reserved for future use	27b					
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	1,717.				
29	Tentative profit or (loss). Subtract line 28 from line 7	29	-1,717.				
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 Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	-1,717.				
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a	<input checked="" type="checkbox"/> All investment is at risk.		
				32b	<input type="checkbox"/> Some investment is not at risk.		

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

Schedule C (Form 1040) 2016

**SCHEDULE C
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Profit or Loss From Business**

(Sole Proprietorship)

▶ Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)**B** Enter code from instructions**SALES**

▶ 423990

C Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), (see instr.)

TRUMP ICE LLC

20-0956212

E Business address (including suite or room no.) ▶

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

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No**H** If you started or acquired this business during 2016, check here ☐**I** Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No**J** If "Yes," did you or will you file required Forms 1099? ☒ Yes ☐ No**Part I Income**

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	332,034.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	332,034.
4 Cost of goods sold (from line 42)	4	380,656.
5 Gross profit. Subtract line 4 from line 3	5	-48,622.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	-48,622.

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

8 Advertising	8	17,358.	18 Office expense	18	
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14	57.	22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	553.
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17	3,110.	25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27 a Other expenses (from line 48)	27a	25.
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 Reserved for future use	27b	
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 Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 .	31	-69,725.			
• 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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 .	32a	<input checked="" type="checkbox"/> All investment is at risk.			
• If you checked 32b, you must attach Form 6198 . Your loss may be limited.	32b	<input type="checkbox"/> Some investment is not at risk.			

PAL

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

If "Yes," attach explanation _____ ☐ Yes ☐ No

42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	380,656.
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a Business _____ **b** Commuting _____ **c** Other _____

b	If "Yes," is the evidence written?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
----------	--	--------------------------	-----	--------------------------	----

NYS FILING FEE

25.

48 Total other expenses. Enter here and on line 27a	48	25.
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**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

▶ Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
Attachment
Sequence No. **09**

Name of proprietor

DONALD J. TRUMP

Social security number (SSN)

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

REAL ESTATE DEVELOPMENT

B Enter code from instructions

▶ 531390

C Business name. If no separate business name, leave blank.

TRUMP PHOENIX DEVELOPMENT LLC

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

20-0238198

E Business address (including suite or room no.) ▶

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ▶ ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

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

Part I Income

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

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

8	Advertising	8		18	Office expense	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	357.
16	Interest:			24	Travel, meals, and entertainment:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals and entertainment (see instructions)	24b	
17	Legal and professional services	17	55.	25	Utilities	25	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26	Wages (less employment credits)	26	
29	Tentative profit or (loss). Subtract line 28 from line 7	29		27 a	Other expenses (from line 48)	27a	
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		b	Reserved for future use	27b	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31					
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.						

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

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

Schedule C (Form 1040) 2016

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)
GOLF MANAGEMENT

B Enter code from instructions
713900

C Business name. If no separate business name, leave blank.
TRUMP GOLF MANAGEMENT LLC

D Employer ID number (EIN), (see instr.)
20-2306412

E Business address (including suite or room no.) ►
City, town or post office, state, and ZIP code

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐ Yes ☒ No

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

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

Part I Income

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

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

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

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

Schedule C (Form 1040) 2016

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

If "Yes," attach explanation

☐ Yes ☐ No

35

36

37

38

39

40

41

42

a Business _____ b Commuting _____ c Other _____

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

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

25.

48

25.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
Attachment
Sequence No. 09

Name of proprietor

DONALD J. TRUMP

Social security number (SSN)

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

REAL ESTATE DEVELOPMENT

B Enter code from instructions

531310

C Business name. If no separate business name, leave blank.

TRUMP CHICAGO DEVELOPMENT LLC

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

30-0050040

E Business address (including suite or room no.)

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

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

Part I Income

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

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

8 Advertising	8	18 Office expense	18
9 Car and truck expenses (see instructions)	9	19 Pension and profit-sharing plans	19
10 Commissions and fees	10	20 Rent or lease (see instructions):	
11 Contract labor (see instructions)	11	a Vehicles, machinery, and equipment	20a
12 Depletion	12	b Other business property	20b
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	21 Repairs and maintenance	21
14 Employee benefit programs (other than on line 19)	14	22 Supplies (not included in Part III)	22
15 Insurance (other than health)	15	23 Taxes and licenses	23 114.
16 Interest:		24 Travel, meals, and entertainment:	
a Mortgage (paid to banks, etc.)	16a	a Travel	24a
b Other	16b	b Deductible meals and entertainment (see instructions)	24b
17 Legal and professional services	17	25 Utilities	25
		26 Wages (less employment credits)	26
		27 a Other expenses (from line 48)	27a
		b Reserved for future use	27b
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28 114.		
29 Tentative profit or (loss). Subtract line 28 from line 7	29 -114.		
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 Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31 -114.	PAL	
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 Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.		32a <input checked="" type="checkbox"/> All investment is at risk. 32b <input type="checkbox"/> Some investment is not at risk.	

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

Schedule C (Form 1040) 2016

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)

MANAGEMENT SERVICES

B Enter code from instructions

541600

C Business name. If no separate business name, leave blank.

TRUMP ORGANIZATION LLC

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

13-4076569

E Business address (including suite or room no.) ►

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 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 ☐

2 Returns and allowances

3 Subtract line 2 from line 1

4 Cost of goods sold (from line 42)

5 Gross profit. Subtract line 4 from line 3

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

7 Gross income. Add lines 5 and 6

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

8 Advertising

9 Car and truck expenses
(see instructions)

10 Commissions and fees

11 Contract labor (see instructions)

12 Depletion

13 Depreciation and section 179
expense deduction (not included in
Part III) (see instructions)

14 Employee benefit programs (other
than on line 19)

15 Insurance (other than health)

16 Interest:

a Mortgage (paid to banks, etc.)

b Other

17 Legal and professional services

18 Office expense

19 Pension and profit-sharing plans

20 Rent or lease (see instructions):

a Vehicles, machinery, and equipment

b Other business property

21 Repairs and maintenance

22 Supplies (not included in Part III)

23 Taxes and licenses

24 Travel, meals, and entertainment:

a Travel

b Deductible meals and
entertainment (see instructions)

25 Utilities

26 Wages (less employment credits)

27 a Other expenses (from line 48)

b 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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☒ All investment
is at risk.

32b ☐ Some investment
is not at risk.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)

MORTGAGE BROKER

B Enter code from instructions

541940

C Business name. If no separate business name, leave blank.

TRUMP REALTY SERVICES LLC

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

13-4116884

E Business address (including suite or room no.)

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

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

Part I Income

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

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

8 Advertising	8	18 Office expense	18
9 Car and truck expenses (see instructions)	9	19 Pension and profit-sharing plans	19
10 Commissions and fees	10	20 Rent or lease (see instructions):	
11 Contract labor (see instructions)	11	a Vehicles, machinery, and equipment	20a
12 Depletion	12	b Other business property	20b
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	21 Repairs and maintenance	21
14 Employee benefit programs (other than on line 19)	14	22 Supplies (not included in Part III)	22 57.
15 Insurance (other than health)	15	23 Taxes and licenses	23 657.
16 Interest:		24 Travel, meals, and entertainment:	
a Mortgage (paid to banks, etc.)	16a	a Travel	24a
b Other	16b	b Deductible meals and entertainment (see instructions)	24b
17 Legal and professional services	17 55.	25 Utilities	25
		26 Wages (less employment credits)	26
		27 a Other expenses (from line 48)	27a 25.
		b Reserved for future use	27b

28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28 794.
29 Tentative profit or (loss). Subtract line 28 from line 7	29 -794.

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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

PAL

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

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

Schedule C (Form 1040) 2016

Part III	Cost of Goods Sold (see instructions)
-----------------	--

- | | | | |
|--|--|---|--|
| 33 Method(s) used to value closing inventory: | a <input type="checkbox"/> Cost | b <input type="checkbox"/> Lower of cost or market | c <input type="checkbox"/> Other (attach explanation) |
|--|--|---|--|

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation	<input type="checkbox"/> Yes	<input type="checkbox"/> 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	
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	

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 2016, enter the number of miles you used your vehicle for:

a Business b Commuting c Other

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

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

47 a 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.
---------------	--

NYS FILING FEE		25.
48	Total other expenses. Enter here and on line 27a	48 25.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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
532290

C Business name. If no separate business name, leave blank.

DT ENDEAVOR I LLC

D Employer ID number (EIN), (see instr.)
35-2555712

E Business address (including suite or room no.) ►
City, town or post office, state, and ZIP code

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No

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

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	1057379 680,886.
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	1057379 680,886.
4	Cost of goods sold (from line 42)	4	
5	Gross profit. Subtract line 4 from line 3	5	680,886.
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6	7	680,886.

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

8	Advertising	8		18	Office expense	18	1581
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	58,823.
12	Depletion	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	34,523.
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	32,438.
15	Insurance (other than health)	15	83801 66,974.	23	Taxes and licenses	23	4,907.
16	Interest:			24	Travel, meals, and entertainment:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	3523
b	Other	16b		b	Deductible meals and entertainment (see instructions)	24b	
17	Legal and professional services	17	5089 3,961.	25	Utilities	25	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a			26	Wages (less employment credits)	26	68,604.
29	Tentative profit or (loss). Subtract line 28 from line 7			27 a	Other expenses (from line 48)	27a	210,656.
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			b	Reserved for future use	27b	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.			28		28	680,886.
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 Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.			29		29	0.
				30		30	
				31		31	0.

32a ☐ All investment is at risk.
32b ☐ Some investment is not at risk.

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

Schedule C (Form 1040) 2016

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach explanation			
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		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		

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 2016, enter the number of miles you used your vehicle for:	
a	Business	b Commuting
		c Other
45	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

FUEL EXPENSE	188,767.
LICENSES & PERMITS	744.
TELEPHONE	21,145.
48 Total other expenses. Enter here and on line 27a	48 210,656.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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

532290

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐

I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No

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

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	376,493.
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	376,493.
4	Cost of goods sold (from line 42)	4	
5	Gross profit. Subtract line 4 from line 3	5	376,493.
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6	7	376,493.

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

8	Advertising	8		18	Office expense	18	1,581.
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depreciation	12		b	Other business property	20b	59,367.
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	116,119.
14	Employee benefit programs (other than on line 19)	14	56.	22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15	16,827.	23	Taxes and licenses	23	202.
16	Interest:			24	Travel, meals, and entertainment:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	3,523.
b	Other	16b		b	Deductible meals and entertainment (see instructions)	24b	
17	Legal and professional services	17	1,128.	25	Utilities	25	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	376,493.	26	Wages (less employment credits)	26	129,056.
29	Tentative profit or (loss). Subtract line 28 from line 7	29	0.	27 a	Other expenses (from line 48)	27a	48,634.
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	Reserved for future use	27b	

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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☐ All investment is at risk.

32b ☐ Some investment is not at risk.

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? ☐ Yes ☐ No
If "Yes," attach explanation

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
41 Inventory at end of year	41
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42

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 2016, enter the number of miles you used your vehicle for:
a Business b Commuting c Other

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

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

47 a 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.

AUTO EXPENSES	420.
DUES AND SUBSCRIPTIONS	1,079.
TELEPHONE	1,151.
TEMPORARY HELP	11,027.
MOVING & STORAGE	962.
LANDING FEES	8,282.
MISCELLANEOUS FEES	814.
FUEL	23,585.
MAINTENANCE AND CLEANING	1,314.
48 Total other expenses. Enter here and on line 27a	48 48,634.

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

► Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2016
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)

B Enter code from instructions

AVIATION

► 532290

C Business name. If no separate business name, leave blank.

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

DJT OPERATIONS I LLC

27-3212458

E Business address (including suite or room no.) ►

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

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

G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses ☐ Yes ☒ No

H If you started or acquired this business during 2016, check here ☐ Yes ☒ No

I Did you make any payments in 2016 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 ☐

2 Returns and allowances

3 Subtract line 2 from line 1

4 Cost of goods sold (from line 42)

5 Gross profit. Subtract line 4 from line 3

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

7 Gross income. Add lines 5 and 6

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

8 Advertising

9 Car and truck expenses
(see instructions)

10 Commissions and fees

11 Contract labor (see instructions)

12 Depletion

13 Depreciation and section 179
expense deduction (not included in
Part III) (see instructions)

14 Employee benefit programs (other
than on line 19)

15 Insurance (other than health)

16 Interest:

a Mortgage (paid to banks, etc.)

b Other

17 Legal and professional services

18 Office expense

19 Pension and profit-sharing plans

20 Rent or lease (see instructions):

a Vehicles, machinery, and equipment

b Other business property

21 Repairs and maintenance

22 Supplies (not included in Part III)

23 Taxes and licenses

24 Travel, meals, and entertainment:

a Travel

b Deductible meals and
entertainment (see instructions)

25 Utilities

26 Wages (less employment credits)

27 a Other expenses (from line 48)

b 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 **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you **must** go to line 32.

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 **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.

(If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☐ All investment
is at risk.

32b ☐ Some investment
is not at risk.

**SCHEDULE D
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Capital Gains and Losses**

▶ Attach to Form 1040 or Form 1040NR.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/scheduled.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2016Attachment
Sequence No. **12**

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b	37,237,653.	37,820,284.		<582,631.>
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	325,000.	324,760.	240.	480.
2 Totals for all transactions reported on Form(s) 8949 with Box B checked	10,760,315.	10,807,840.		<47,525.>
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	<126,708.>
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6	()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2			7	<756,384.>

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b	25,478,203.	23,308,236.		2,169,967.
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	7,218,764.	6,742,778.		475,986.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	43,075,527.	45,750,033.		<2,674,506.>
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	11,884,132.
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	<158,240.>
13 Capital gain distributions			13	98.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14	()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on page 2			15	11,697,437.

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

Schedule D (Form 1040) 2016

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	10,941,053.
<ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22. 		
17 Are lines 15 and 16 both gains? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions	18	
19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions SEE STATEMENT 26	19	796,160.
20 Are lines 18 and 19 both zero or blank? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Don't complete lines 21 and 22 below. <input checked="" type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: <ul style="list-style-type: none"> • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) 	21	()
Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2016

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

2016

Attachment Sequence No. 12A

- Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.
► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

DONALD J. & MELANIA TRUMP

Social security number or taxpayer identification no.

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☒ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☐ (C) Short-term transactions not reported to you on Form 1099-B

[illegible]

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Form **8949**Department of the Treasury
Internal Revenue Service**Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

2016
Attachment
Sequence No. **12A**

- Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.
► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

Social security number or
taxpayer identification no.

DONALD J. & MELANIA TRUMP

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
☒ (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
☐ (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	US T NTS DTD 11/15/13	02/06/15	01/05/16	26,151.	26,800.			<649.>
	US T NTS DTD 11/15/13	02/18/15	01/05/16	104,605.	106,004.			<1,399.>
	US T NTS DTD 09/15/13	05/12/16	09/15/16	100,000.	100,188.			<188.>
	ENERGY TRANSFER PARTNERS	VARIOUS	02/16/16	27,261.	47,601.			<20,340.>
	ENERGY TRANSFER PARTNERS	VARIOUS	07/12/16	29,629.	18,911.			10,718.
	US T BILLS DTD 11/12/15	04/14/16	05/12/16	119,982.	119,982.			0.
	US T BILLS DTD 12/17/15	05/17/16	06/16/16	599,890.	599,890.			0.
	US T BILLS DTD 2/4/16	11/02/16	12/22/16	299,733.	299,733.			0.
	US T BILLS DTD 3/31/16	08/22/16	09/29/16	599,851.	599,851.			0.
	US T BILLS DTD 5/5/16	09/14/16	11/03/16	499,825.	499,825.			0.
	US T BILLS DTD 7/14/16	12/14/16	12/22/16	499,814.	499,814.			0.
	US T BILLS DTD 7/28/16	12/07/16	12/22/16	599,694.	599,694.			0.
	US T BILLS DTD 8/11/16	12/15/16	12/22/16	649,557.	649,557.			0.
	US T NTS DTD 09/15/13	06/02/16	09/15/16	100,000.	100,133.			<133.>
	US T NTS DTD 3/15/14	11/03/16	12/23/16	500,293.	500,586.			<293.>
	US T NTS	09/29/16	12/15/16	500,000.	500,410.			<410.>
	US T NTS DTD 2/15/06	11/18/15	02/03/16	600,797.	606,328.			<5,531.>
	US T NTS DTD 09/15/13	10/07/15	09/15/16	350,000.	351,764.			<1,764.>
	US T NTS DTD 4/15/13	04/21/15	04/15/16	120,000.	120,028.			<28.>
	US T NTS DTD 4/15/13	04/21/15	03/11/16	469,982.	470,146.			<164.>
	US T NTS DTD 4/15/13	04/21/15	03/11/16	10,000.	10,002.			<2.>
	US T NTS DTD 4/15/14	11/18/16	12/23/16	400,391.	400,453.			<62.>
	US T NTS DTD 3/15/13	11/18/15	02/22/16	365,014.	365,214.			<200.>
	US T NTS DTD 3/15/13	04/24/16	02/22/16	235,009.	235,367.			<358.>
	US T NTS DTD 3/15/13	04/24/15	02/16/16	50,004.	50,078.			<74.>
	US T NTS DTD 3/15/13	11/18/15	02/23/16	235,009.	235,138.			<129.>
	US T NTS DTD 09/30/11	09/28/15	01/08/16	601,336.	603,656.			<2,320.>
	US T NTS DTD 8/31/09	09/25/15	08/31/16	600,000.	614,625.			<14,625.>
	US T NTS DTD 3/31/15	12/15/16	12/23/16	499,980.	499,902.			78.
	US T NTS DTD 10/31/11	06/17/16	10/31/16	600,000.	601,406.			<1,406.>
	US T NTS DTD 11/15/13	02/02/15	01/05/16	26,151.	27,344.			<1,193.>
	US T NTS DTD 11/15/13	01/06/15	01/05/16	156,908.	161,121.			<4,213.>
2	Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►			10,760,315.	10,807,840.			<47,525.>

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or
taxpayer identification no.

DONALD J. & MELANIA TRUMP

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ **(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☒ **(E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☐ **(F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	BARON GROWTH FUND INST							
	CLASS	VARIOUS	01/27/16	638,589.	509,066.			129,523.
	US T NTS DTD 7/31/16	04/02/15	06/30/16	300,304.	304,465.			<4,161.>
	AMERICAN EXPRESS	10/10/12	01/05/16	151,656.	158,113.			<6,457.>
	AMGEN INC DTD 5/15/12	05/15/12	01/05/16	151,081.	149,463.			1,618.
	FMCC DTD 6/12/12	09/16/13	01/05/16	151,204.	152,652.			<1,448.>
	GENERAL ELEC CAP CORP	10/16/13	01/05/16	84,484.	82,134.			2,350.
	GEORGIA POWER	11/13/13	01/05/16	160,437.	165,915.			<5,478.>
	INTEL CORP	02/26/13	01/05/16	150,283.	150,513.			<230.>
	IBM CORP DTD 11/1/11	10/25/12	01/05/16	25,381.	26,584.			<1,203.>
	IBM CORP DTD 11/1/11	07/19/13	01/05/16	50,763.	50,105.			658.
	US T BDS DTD 5/15/19	06/19/12	01/05/16	52,807.	56,973.			<4,166.>
	US T BDS DTD 5/15/19	09/19/13	01/05/16	52,807.	53,906.			<1,099.>
	UNITED TECHNOLOGIES CORP	10/25/12	01/05/16	102,424.	107,032.			<4,608.>
	US T NTS DTD 6/30/09	04/02/15	05/17/16	602,133.	621,610.			<19,477.>
	US T NTS DTD 5/15/08	11/20/14	01/05/16	53,207.	54,650.			<1,443.>
	US T NTS DTD 8/15/12	01/08/13	01/05/16	48,803.	49,135.			<332.>
	US T NTS DTD 8/15/12	10/28/14	01/05/16	48,803.	48,668.			135.
	US T NTS DTD 8/15/12	11/06/14	01/05/16	24,401.	24,208.			193.
	US T NTS DTD 8/15/12	11/24/14	01/05/16	73,204.	72,827.			377.
	BARON REAL ESTATE FUND							
	INST	VARIOUS	01/27/16	460,852.	253,857.			206,995.
	BARON SMALL CAP FUND INST							
	CLASS	VARIOUS	01/27/16	892,421.	765,885.			126,536.
	BARON ASSET FUND INST							
	CLASS	VARIOUS	01/27/16	604,887.	584,805.			20,082.
	BARON PARTNERS FUND INST							
	CLASS	10/29/10	01/27/16	817,058.	500,000.			317,058.
	WACHOVIA CORP	05/10/12	01/05/16	162,268.	176,539.			<14,271.>
	US T NTS DTD 5/15/08	05/29/13	01/05/16	53,207.	56,975.			<3,768.>
	US T NTS DTD 7/31/16	04/02/15	08/01/16	300,000.	304,465.			<4,465.>
	ENERGY TRANSFER PARTNERS	VARIOUS	02/16/16	405,300.	630,264.			<224,964.>
	US T NTS DTD 5/15/06	04/02/15	05/16/16	600,000.	631,969.			<31,969.>

2 Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, **line 8b** (if **Box D** above is checked), **line 9** (if **Box E** above is checked), or **line 10** (if **Box F** above is checked) ▶

7,218,764.

6,742,778.

475,986.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

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Social security number or taxpayer identification no.

DONALD J. & MELANIA TRUMP

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Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☒ (F) Long-term transactions not reported to you on Form 1099-B

[illegible]

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

**SCHEDULE D
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Capital Gains and Losses**

▶ Attach to Form 1040 or Form 1040NR.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/scheduled.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2016Attachment
Sequence No. **12**

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b	37,237,653.	37,820,284.		<582,631.>
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	325,000.	324,760.	240.	480.
2 Totals for all transactions reported on Form(s) 8949 with Box B checked	10,760,315.	10,807,840.		<47,525.>
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1		SEE STATEMENT 32	5	<126,708.>
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6	()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2			7	<756,384.>

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b	25,478,203.	23,308,236.		2,169,967.
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	7,218,764.	6,742,778.		475,986.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	43,075,527.	45,750,033.		<2,674,506.>
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824		SEE STATEMENT 31 SEE STATEMENT 27	11	11,884,132.
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	<158,240.>
13 Capital gain distributions		SEE STATEMENT 28	13	98.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14	()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on page 2			15	11,697,437.

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

Schedule D (Form 1040) 2016

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	10,941,053.
<ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22. 		
17 Are lines 15 and 16 both gains? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions	18	
19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions SEE STATEMENT 33	19	796,160.
20 Are lines 18 and 19 both zero or blank? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Don't complete lines 21 and 22 below. <input checked="" type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: <div style="display: flex; align-items: center;"> <ul style="list-style-type: none"> • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) <div style="font-size: 3em; margin: 0 10px;">}</div> <div style="border-bottom: 1px solid black; flex-grow: 1;"></div> </div>	21	()
Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2016

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Form **8949**Department of the Treasury
Internal Revenue Service

- Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.
► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2016Attachment
Sequence No. **12A**

Name(s) shown on return

Social security number or
taxpayer identification no.

DONALD J. & MELANIA TRUMP

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☒ (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☐ (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	US T NTS DTD 11/15/13	02/06/15	01/05/16	26,151.	26,800.			<649.>
	US T NTS DTD 11/15/13	02/18/15	01/05/16	104,605.	106,004.			<1,399.>
	US T NTS DTD 09/15/13	05/12/16	09/15/16	100,000.	100,188.			<188.>
	ENERGY TRANSFER PARTNERS	VARIOUS	02/16/16	27,261.	47,601.			<20,340.>
	ENERGY TRANSFER PARTNERS	VARIOUS	07/12/16	29,629.	18,911.			10,718.
	US T BILLS DTD 11/12/15	04/14/16	05/12/16	119,982.	119,982.			0.
	US T BILLS DTD 12/17/15	05/17/16	06/16/16	599,890.	599,890.			0.
	US T BILLS DTD 2/4/16	11/02/16	12/22/16	299,733.	299,733.			0.
	US T BILLS DTD 3/31/16	08/22/16	09/29/16	599,851.	599,851.			0.
	US T BILLS DTD 5/5/16	09/14/16	11/03/16	499,825.	499,825.			0.
	US T BILLS DTD 7/14/16	12/14/16	12/22/16	499,814.	499,814.			0.
	US T BILLS DTD 7/28/16	12/07/16	12/22/16	599,694.	599,694.			0.
	US T BILLS DTD 8/11/16	12/15/16	12/22/16	649,557.	649,557.			0.
	US T NTS DTD 09/15/13	06/02/16	09/15/16	100,000.	100,133.			<133.>
	US T NTS DTD 3/15/14	11/03/16	12/23/16	500,293.	500,586.			<293.>
	US T NTS	09/29/16	12/15/16	500,000.	500,410.			<410.>
	US T NTS DTD 2/15/06	11/18/15	02/03/16	600,797.	606,328.			<5,531.>
	US T NTS DTD 09/15/13	10/07/15	09/15/16	350,000.	351,764.			<1,764.>
	US T NTS DTD 4/15/13	04/21/15	04/15/16	120,000.	120,028.			<28.>
	US T NTS DTD 4/15/13	04/21/15	03/11/16	469,982.	470,146.			<164.>
	US T NTS DTD 4/15/13	04/21/15	03/11/16	10,000.	10,002.			<2.>
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	US T NTS DTD 3/31/15	12/15/16	12/23/16	499,980.	499,902.			78.
	US T NTS DTD 10/31/11	06/17/16	10/31/16	600,000.	601,406.			<1,406.>
	US T NTS DTD 11/15/13	02/02/15	01/05/16	26,151.	27,344.			<1,193.>
	US T NTS DTD 11/15/13	01/06/15	01/05/16	156,908.	161,121.			<4,213.>
2	Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►			10,760,315.	10,807,840.			<47,525.>

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949

Department of the Treasury
Internal Revenue Service

► Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.
► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2016

Attachment
Sequence No. **12A**

Name(s) shown on return

Social security number or taxpayer identification no.

DONALD J. & MELANIA TRUMP

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☒ (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☐ (C) Short-term transactions not reported to you on Form 1099-B

[illegible]

2 Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, **line 1b** (if **Box A** above is checked), **line 2** (if **Box B** above is checked), or **line 3** (if **Box C** above is checked) ►

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

ALTERNATIVE MINIMUM TAX

Form 8949 (2016)

Attachment Sequence No. **12A**Page **2**

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or
taxpayer identification no.

DONALD J. & MELANIA TRUMP

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ **(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
☒ **(E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
☐ **(F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	BARON GROWTH FUND INST							
	CLASS	VARIOUS	01/27/16	638,589.	509,066.			129,523.
	US T NTS DTD 7/31/16	04/02/15	06/30/16	300,304.	304,465.			<4,161.>
	AMERICAN EXPRESS	10/10/12	01/05/16	151,656.	158,113.			<6,457.>
	AMGEN INC DTD 5/15/12	05/15/12	01/05/16	151,081.	149,463.			1,618.
	FMCC DTD 6/12/12	09/16/13	01/05/16	151,204.	152,652.			<1,448.>
	GENERAL ELEC CAP CORP	10/16/13	01/05/16	84,484.	82,134.			2,350.
	GEORGIA POWER	11/13/13	01/05/16	160,437.	165,915.			<5,478.>
	INTEL CORP	02/26/13	01/05/16	150,283.	150,513.			<230.>
	IBM CORP DTD 11/1/11	10/25/12	01/05/16	25,381.	26,584.			<1,203.>
	IBM CORP DTD 11/1/11	07/19/13	01/05/16	50,763.	50,105.			658.
	US T BDS DTD 5/15/19	06/19/12	01/05/16	52,807.	56,973.			<4,166.>
	US T BDS DTD 5/15/19	09/19/13	01/05/16	52,807.	53,906.			<1,099.>
	UNITED TECHNOLOGIES CORP	10/25/12	01/05/16	102,424.	107,032.			<4,608.>
	US T NTS DTD 6/30/09	04/02/15	05/17/16	602,133.	621,610.			<19,477.>
	US T NTS DTD 5/15/08	11/20/14	01/05/16	53,207.	54,650.			<1,443.>
	US T NTS DTD 8/15/12	01/08/13	01/05/16	48,803.	49,135.			<332.>
	US T NTS DTD 8/15/12	10/28/14	01/05/16	48,803.	48,668.			135.
	US T NTS DTD 8/15/12	11/06/14	01/05/16	24,401.	24,208.			193.
	US T NTS DTD 8/15/12	11/24/14	01/05/16	73,204.	72,827.			377.
	BARON REAL ESTATE FUND							
	INST	VARIOUS	01/27/16	460,852.	253,857.			206,995.
	BARON SMALL CAP FUND INST							
	CLASS	VARIOUS	01/27/16	892,421.	765,885.			126,536.
	BARON ASSET FUND INST							
	CLASS	VARIOUS	01/27/16	604,887.	584,805.			20,082.
	BARON PARTNERS FUND INST							
	CLASS	10/29/10	01/27/16	817,058.	500,000.			317,058.
	WACHOVIA CORP	05/10/12	01/05/16	162,268.	176,539.			<14,271.>
	US T NTS DTD 5/15/08	05/29/13	01/05/16	53,207.	56,975.			<3,768.>
	US T NTS DTD 7/31/16	04/02/15	08/01/16	300,000.	304,465.			<4,465.>
	ENERGY TRANSFER PARTNERS	VARIOUS	02/16/16	405,300.	630,264.			<224,964.>
	US T NTS DTD 5/15/06	04/02/15	05/16/16	600,000.	631,969.			<31,969.>
2 Totals.	Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			7,218,764.	6,742,778.			475,986.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Social security number or taxpayer identification no.

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- [illegible]

<2,674,506.>

623012 12-07-16

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.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.

OMB No. 1545-0074

2016

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

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 or C-EZ (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 2016 that would require you to file Form(s) 1099? (see instructions) ☒ Yes ☐ No
B If "Yes," did you or will you file required Forms 1099? ☒ Yes ☐ No

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

A ENERGY TRANSFER PARTNERS LP - Royalty

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 QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days		Personal Use Days		QJV
			A				
A	6						<input type="checkbox"/>
B							<input type="checkbox"/>
C							<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
3	Rents received	3			
4	Royalties received	4	4.		
Expenses:					
5	Advertising	5			
6	Auto and travel (see instructions)	6			
7	Cleaning and maintenance	7			
8	Commissions	8			
9	Insurance	9			
10	Legal and other professional fees	10			
11	Management fees	11			
12	Mortgage interest paid to banks, etc. (see instructions)	12			
13	Other interest	13			
14	Repairs	14	4732	3609	
15	Supplies	15			
16	Taxes	16			
17	Utilities	17			
18	Depreciation expense or depletion	18			
19	Other (list) ▶	19			
20	Total expenses. Add lines 5 through 19	20			
21	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 Form 6198	21	4.		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22			

23a	Total of all amounts reported on line 3 for all rental properties	23a	75,634.
b	Total of all amounts reported on line 4 for all royalty properties	23b	2,877,187.
c	Total of all amounts reported on line 12 for all properties	23c	8,782.
d	Total of all amounts reported on line 18 for all properties	23d	55,987.
e	Total of all amounts reported on line 20 for all properties	23e	1,115,714.
24	Income. Add positive amounts shown on line 21. Do not include any losses	24	2,114,912.
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	(277,805.)
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 Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26	1,837,107.

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

Schedule E (Form 1040) 2016

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.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.

OMB No. 1545-0074

2016

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

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 or C-EZ (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 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☐ No

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

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

A PALM BEACH, FL 33480

B PALM BEACH, FL 33480

C 1, NY

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 QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A 1		A 366		<input type="checkbox"/>
B 1		B 366		<input type="checkbox"/>
C 1		C 366		<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
3 Rents received	3		75,634.	
4 Royalties received	4			
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8		7,563.	
9 Insurance	9	4,610.	2,382.	
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12	5,992.	2,790.	
13 Other interest	13			
14 Repairs	14	4,732.	3,609.	
15 Supplies	15			
16 Taxes	16	142,402.	40,638.	57.
17 Utilities	17	18,463.	15,772.	
18 Depreciation expense or depletion	18	42,627.	13,360.	
19 Other (list) ▶ STMT 35 STMT 36 STMT 37	19	14,175.	5,784.	25.
20 Total expenses. Add lines 5 through 19	20	233,001.	91,898.	82.
21 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 Form 6198	21	-233,001.	-16,264.	-82.
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	233,001.	16,264.	82.
23a Total of all amounts reported on line 3 for all rental properties	23a			
b Total of all amounts reported on line 4 for all royalty properties	23b			
c Total of all amounts reported on line 12 for all properties	23c			
d Total of all amounts reported on line 18 for all properties	23d			
e Total of all amounts reported on line 20 for all properties	23e			
24 Income. Add positive amounts shown on line 21. Do not include any losses	24			
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25			
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 Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26			

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

Schedule E (Form 1040) 2016

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.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.

OMB No. 1545-0074

2016

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

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 or C-EZ (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 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☐ No
B If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

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

A _____
B _____
C _____

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 QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	6		A		<input type="checkbox"/>
B	6		B		<input type="checkbox"/>
C	6		C		<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
3 Rents received	3			
4 Royalties received	4	256,927.	2,477,732.	

Expenses:

5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8		315,000.	
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			253.
17 Utilities	17			
18 Depreciation expense or depletion	18			
19 Other (list) ▶ STMT 38 STMT 39	19	256,927.	86,391.	
20 Total expenses. Add lines 5 through 19	20	256,927.	401,391.	253.
21 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 Form 6198	21	0.	2,076,341.	-253.
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22			253.)

23a Total of all amounts reported on line 3 for all rental properties	23a	
b Total of all amounts reported on line 4 for all royalty properties	23b	
c Total of all amounts reported on line 12 for all properties	23c	
d Total of all amounts reported on line 18 for all properties	23d	
e Total of all amounts reported on line 20 for all properties	23e	

24 Income. Add positive amounts shown on line 21. Do not include any losses	24	
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	
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 Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26	

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.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.

OMB No. 1545-0074

2016

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

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 or C-EZ (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 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☐ No
B If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

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

A
B
C

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 QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	6		A		<input type="checkbox"/>
B	6		B		<input type="checkbox"/>
C	1		C	366	<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
3 Rents received	3			
4 Royalties received	4		142,500.	

Expenses:

5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10		92,145.	
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16	300.	139.	196.
17 Utilities	17			
18 Depreciation expense or depletion	18			
19 Other (list) ▶ STMT 41 STMT 42	19		11,673.	714.
20 Total expenses. Add lines 5 through 19	20	300.	103,957.	910.
21 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 Form 6198	21	-300.	38,543.	-910.
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	300.		910.

23a Total of all amounts reported on line 3 for all rental properties	23a	
b Total of all amounts reported on line 4 for all royalty properties	23b	
c Total of all amounts reported on line 12 for all properties	23c	
d Total of all amounts reported on line 18 for all properties	23d	
e Total of all amounts reported on line 20 for all properties	23e	

24 Income. Add positive amounts shown on line 21. Do not include any losses	24	
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	
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 Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26	

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

Schedule E (Form 1040) 2016

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.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.

OMB No. 1545-0074

2016

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

DONALD J. & MELANIA TRUMP

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 or C-EZ (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 2016 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☐ No

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

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

A

B

C

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 QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	1		366		<input type="checkbox"/>
B	6				<input type="checkbox"/>
C	1		366		<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

3 Rents received 3

4 Royalties received 4 24.

Expenses:

5 Advertising 5

6 Auto and travel (see instructions) 6

7 Cleaning and maintenance 7

8 Commissions 8

9 Insurance 9

10 Legal and other professional fees 10 55. 55.

11 Management fees 11

12 Mortgage interest paid to banks, etc. (see instructions) 12

13 Other interest 13

14 Repairs 14

15 Supplies 15

16 Taxes 16 9. 139.

17 Utilities 17

18 Depreciation expense or depletion 18

19 Other (list) ▶ STMT 44 STMT 45 19 25. 26,712.

20 Total expenses. Add lines 5 through 19 20 89. 26,906.

21 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 Form 6198 21 -89. 24. -26,906.

22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 89. 26,906.

23a Total of all amounts reported on line 3 for all rental properties 23a

b Total of all amounts reported on line 4 for all royalty properties 23b

c Total of all amounts reported on line 12 for all properties 23c

d Total of all amounts reported on line 18 for all properties 23d

e Total of all amounts reported on line 20 for all properties 23e

24 Income. Add positive amounts shown on line 21. Do not include any losses 24

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25

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 Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 26

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

Schedule E (Form 1040) 2016

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

DONALD J. & MELANIA TRUMP

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 from an at-risk activity for which any amount is not at risk, you must check column (e) 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, excess farm loss, 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? ☒ Yes ☐ No
- If you answered "Yes," see instructions before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	SEE STATEMENT 47				
B					
C					
D					

Passive Income and Loss			Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1	
A					
B					
C					
D					
29a Totals	74,310,980.			11,559,240.	
b Totals	31,479,807.	72,167,043.			
30 Add columns (g) and (j) of line 29a				85,870,220.	30
31 Add columns (f), (h), and (i) of line 29b				(103,646,850.)	31
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				-17,776,630.	32

Part III Income or Loss From Estates and Trusts

33	(a) Name			(b) Employer identification number	
A	SEE STATEMENT 48				
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	(e) Deduction or loss from Schedule K-1		(f) Other income from Schedule K-1
A					
B					
34a	Totals				
b	Totals				
35	Add columns (d) and (f) of line 34a				35
36	Add columns (c) and (e) of line 34b				36
37	Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below				37

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 * ENTIRE DISPOSITION OF PASSIVE ACTIVITY

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	-15,939,523.
42	Reconciliation of farming and fishing income. 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 1120S), box 17, code V; and Schedule K-1 (Form 1041), box 14, code F (see instructions)	42	-309.
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Schedule E

Publicly Traded Partnerships

Name of Activity: ENERGY TRANSFER PARTNERS LP

Activity net income 1,024.
 Activity net loss -19.
 Prior year unallowed losses -277,030.
 Net income (loss) -276,025. 100% DISPOSITION
 Total loss allowed from the PTP for 2016 277,049.
 Disallowed losses from this PTP

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
SCH E	1,024.	273,363.	-272,339.		272,339.
FORM 4797	-19.	3,667.	-3,686.		3,686.
	1,005.	277,030.	-276,025.		276,025.

Alternative Minimum Tax

Activity net income 1,067.
 Activity net loss -19.
 Prior year unallowed losses -275,094.
 Net income (loss) -274,046. 100% DISPOSITION
 Total loss allowed from the PTP for 2016 275,113.
 Disallowed losses from this PTP

Alternative minimum tax adjustment

1,979.

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
SCH E	1,067.	271,427.	-270,360.		270,360.
FORM 4797	-19.	3,667.	-3,686.		3,686.
	1,048.	275,094.	-274,046.		274,046.

Name of person with **self-employment** income (as shown on Form 1040 or Form 1040NR)Social security number of
person with **self-employment**
income ▶

DONALD J. TRUMP

Section B - Long Schedule SE**Part I Self-Employment Tax****Note.** If your only income subject to self-employment tax is **church employee income**, see instructions. Also see instructions for the definition of church employee income.

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

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note. Skip lines 1a and 1b if you use the farm optional method (see instructions)	1a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	1b	
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. Note. Skip this line if you use the nonfarm optional method (see instructions) SEE STATEMENT 49	2	15,848,092.
3 Combine lines 1a, 1b, and 2	3	15,848,092.
4a If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 Note. If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	14,635,713.
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 do not owe self-employment tax. Exception. If less than \$400 and you had church employee income , enter -0- and continue ▶	4c	14,635,713.
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	14,635,713.
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 2016	7	118,500.00
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 \$118,500 or more, skip lines 8b through 10, and go to line 11	8a	978.
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	978.
9 Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 ▶	9	117,522.
10 Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	14,573.
11 Multiply line 6 by 2.9% (0.029)	11	424,436.
12 Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 57, or Form 1040NR, line 55	12	439,009.
13 Deduction for one-half of self-employment tax. Multiply line 12 by 50% (0.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	13	219,505.

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 was not more than \$7,560, or (b) your net farm profits² were less than \$5,457.

14 Maximum income for optional methods	14	5,040.00
15 Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$5,040. Also include this amount on line 4b above	15	

Nonfarm Optional Method. You may use this method **only** if (a) your net nonfarm profits³ were less than \$5,457 and also less than 72.189% of your gross nonfarm income,⁴ and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution.** You may use this method no more than five times.

16 Subtract line 15 from line 14	16	
17 Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also include this amount on line 4b above	17	

¹ From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.² 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.³ From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.⁴ From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.

Foreign Tax Credit

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

OMB No. 1545-0121

2016
Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☒ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☐ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	OTHER COUNTRIES	AZERBAIJAN	PANAMA	
1a Gross income from sources within country shown above and of the type checked above:				
	339,083.		422,151.	761234
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	27,985.			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income	339,083.		422,151.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00197	.00000	.00245	
g Multiply line 3c by line 3f	13,092.		16,303.	
4 Pro rata share of interest expense:				
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	41,077.		16,303.	5380
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				755854

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued										
		In foreign currency				In U.S. dollars						
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))	
A							691.				7,394.	8,085.
B												
C												

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

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	8,085.	
10 Carryback or carryover (attach detailed computation) SEE STATEMENT 52	10	8,596.	
11 Add lines 9 and 10	11	16,681.	
12 Reduction in foreign taxes	12		
13 Taxes reclassified under high tax kickout	13		
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	15	1,520,887.	
16 Adjustments to line 15	16	-1,520,887.	
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17		
18 Individuals: Enter the amount from Form 1040, line 41; or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption	18		
Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		
20 Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 36, 37, and 39	20		
Caution: If you are completing line 20 for separate category e (lump-sum distributions), see instructions.			
21 Multiply line 20 by line 19 (maximum amount of credit)	21		
22 Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22		0.

Part IV Summary of Credits From Separate Parts III

23 Credit for taxes on passive category income	23		
24 Credit for taxes on general category income	24		
25 Credit for taxes on certain income re-sourced by treaty	25		
26 Credit for taxes on lump-sum distributions	26		
27 Add lines 23 through 26	27		0.
28 Enter the smaller of line 20 or line 27	28		0.
29 Reduction of credit for international boycott operations	29		
30 Subtract line 29 from line 28. This is your foreign tax credit . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 41a	30		0.

Form 1116 (2016)

Foreign Tax Credit

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

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Name

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DONALD J. & MELANIA TRUMP

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- a ☒ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☐ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	INDIA	CANADA	QATAR	
1a Gross income from sources within country shown above and of the type checked above:		858,558.		1,619,792.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement) <small>SEE STATEMENT 51</small>			8,408.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income		858,558.		
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00498	.00000	
g Multiply line 3c by line 3f		33,117.		
4 Pro rata share of interest expense:				
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		33,117.	8,408.	98,905.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				1,520,887.

Part II Foreign Taxes Paid or Accrued

SEE STATEMENT 50

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

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

8 8,085.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2016Attachment
Sequence No. **19**▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession ▶	CANADA	KOREA, SOUTH	UNITED KINGDOM	
1a Gross income from sources within country shown above and of the type checked above:				
	5,462,223.		11,964,980.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement) ▶	930,576.	100.	24,143,235.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction ▶	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement) ▶				
c Add lines 3a and 3b ▶	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income ▶	5,462,223.		11,964,980.	
e Gross income from all sources ▶	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e ▶	.03171	.00000	.06947	
g Multiply line 3c by line 3f ▶	210,778.		461,651.	
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) ▶				
b Other interest expense ▶				
5 Losses from foreign sources ▶				
6 Add lines 2, 3g, 4a, 4b, and 5 ▶	1,141,354.	100.	24,604,886.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued										
		In foreign currency				In U.S. dollars						
		Taxes withheld at source on:				(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))	
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest		(o) Dividends	(p) Rents and royalties	(q) Interest			
A 05/27/16											247,378.	247,378.
B												
C												

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

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

OMB No. 1545-0121

2016Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	CHINA	DOMINICAN REPUBLIC	PANAMA	
1a Gross income from sources within country shown above and of the type checked above:			913,053.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	3,887,451.	34,803.	370,205.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income			913,053.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00000	.00530	
g Multiply line 3c by line 3f			35,223.	
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	3,887,451.	34,803.	405,428.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7

Part II Foreign Taxes Paid or Accrued

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

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Foreign Tax Credit

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2016
Attachment
Sequence No. **19**

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Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	UNITED ARAB EMIRATES	PUERTO RICO	CANADA	
1a Gross income from sources within country shown above and of the type checked above:	41,251.	1,930.	6,288,301.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	166,383.	296.	210,420.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income	41,251.	1,930.	6,288,301.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00024	.00001	.03651	
g Multiply line 3c by line 3f	1,600.	59.	242,610.	
4 Pro rata share of interest expense:				
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	167,983.	355.	453,030.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued (j) Date paid or accrued	Foreign taxes paid or accrued							(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
		In foreign currency			(n) Other foreign taxes paid or accrued	In U.S. dollars				
		Taxes withheld at source on:				Taxes withheld at source on:				
		(k) Dividends	(l) Rents and royalties	(m) Interest		(o) Dividends	(p) Rents and royalties	(q) Interest		
A										
B										
C								622,227.	622,227.	

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

Form **1116** (2016)

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

OMB No. 1545-0121

2016Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

		Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A	B	C	
g Enter the name of the foreign country or U.S. possession		PHILIPPINES	GRENADA	INDIA	
1a Gross income from sources within country shown above and of the type checked above:					
		10,879.		3,533,001.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>					
Deductions and losses (Caution: See instructions.):					
2 Expenses definitely related to the income on line 1a (attach statement)		3,117.	341.	751,817.	
3 Pro rata share of other deductions not definitely related:					
a Certain itemized deductions or standard deduction		6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)					
c Add lines 3a and 3b		6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income		10,879.		3,533,001.	
e Gross income from all sources		172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e		.00006	.00000	.02051	
g Multiply line 3c by line 3f		398.		136,322.	
4 Pro rata share of interest expense:					
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)					
b Other interest expense					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5		3,515.	341.	888,139.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2					7

Part II Foreign Taxes Paid or Accrued

Country		Foreign taxes paid or accrued							(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))	
		In foreign currency				In U.S. dollars					
		Taxes withheld at source on:				Taxes withheld at source on:					
(h) <input checked="" type="checkbox"/> Paid	(i) <input type="checkbox"/> Accrued					(n) Other foreign taxes paid or accrued					
(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest		(o) Dividends	(p) Rents and royalties	(q) Interest				
A									1,019.	1,019.	
B											
C									381,748.	381,748.	

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Form 1116

Department of the Treasury
Internal Revenue Service (99)

Foreign Tax Credit

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2016

Attachment
Sequence No. 19▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	GEORGIA	ISRAEL	AZERBAIJAN	
1a Gross income from sources within country shown above and of the type checked above:				
			64.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	4,901.	9,732.	37,392.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income			64.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00000	.00000	
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	4,901.	9,732.	37,392.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

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

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2016)

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

OMB No. 1545-0121

2016Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	BRAZIL	SAINT MARTIN	MEXICO	
1a Gross income from sources within country shown above and of the type checked above:		1,010,648.		1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	195,842.	1,885,754.	4,907.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income		1,010,648.		
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00587	.00000	
g Multiply line 3c by line 3f		38,973.		
4 Pro rata share of interest expense:				
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	195,842.	1,924,727.	4,907.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

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

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Foreign Tax Credit
(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2016
Attachment
Sequence No. **19**

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	QATAR	INDONESIA	IRELAND	
1a Gross income from sources within country shown above and of the type checked above:		730,213.	7,762,717.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions)				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	364.	648,301.	10,303,521.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.	6,645,497.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.	6,645,497.	
d Gross foreign source income		730,213.	7,762,717.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00424	.04507	
g Multiply line 3c by line 3f		28,185.	299,516.	
4 Pro rata share of interest expense:				
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	364.	676,486.	10,603,037.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued (j) Date paid or accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
		(k) Dividends	(l) Rents and royalties	(m) Interest		(o) Dividends	(p) Rents and royalties	(q) Interest		
A										
B									1,736.	1,736.
C										

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

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2016Attachment
Sequence No. **19**▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)**

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	TURKEY	ST. VINCENT AND THE GR		
1a Gross income from sources within country shown above and of the type checked above:	888,815.			1a 38,608,075.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement) SEE STATEMENT 54	153,879.	323.		
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	6,645,497.	6,645,497.		
b Other deductions (attach statement)				
c Add lines 3a and 3b	6,645,497.	6,645,497.		
d Gross foreign source income	888,815.			
e Gross income from all sources	172,229,279.	172,229,279.		
f Divide line 3d by line 3e	.00516	.00000		
g Multiply line 3c by line 3f	34,272.			
4 Pro rata share of interest expense:				
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	188,151.	323.		6 45,233,247.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7 -6,625,172.

Part II Foreign Taxes Paid or Accrued

SEE STATEMENT 53

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

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶ 8 1,254,108.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

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	1,254,108.	
10	Carryback or carryover (attach detailed computation) SEE STATEMENT 55	10	8,091,785.	
11	Add lines 9 and 10	11	9,345,893.	
12	Reduction in foreign taxes	12		
13	Taxes reclassified under high tax kickout	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		9,345,893.
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	15	-6,625,172.	
16	Adjustments to line 15	16	1,520,887.	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	-5,104,285.	
18	Individuals: Enter the amount from Form 1040, line 41; or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption	18		
Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.				
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		
20	Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 36, 37, and 39	20		
Caution: If you are completing line 20 for separate category e (lump-sum distributions), see instructions.				
21	Multiply line 20 by line 19 (maximum amount of credit)	21		
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22		0.

Part IV Summary of Credits From Separate Parts III

23	Credit for taxes on passive category income	23		
24	Credit for taxes on general category income	24		
25	Credit for taxes on certain income re-sourced by treaty	25		
26	Credit for taxes on lump-sum distributions	26		
27	Add lines 23 through 26	27		
28	Enter the smaller of line 20 or line 27	28		
29	Reduction of credit for international boycott operations	29		
30	Subtract line 29 from line 28. This is your foreign tax credit . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 41a	30		

Form 1116 (2016)

ALTERNATIVE MINIMUM TAX

OMB No. 1545-0121

Form

1116**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

2016Attachment
Sequence No. **19**Department of the Treasury
Internal Revenue Service (99)▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☒ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☐ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	OTHER COUNTRIES	AZERBAIJAN	PANAMA	
1a Gross income from sources within country shown above and of the type checked above:				
	239,433.		422,151.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	27,985.			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income	339,083.		422,151.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00197	.00000	.00245	
g Multiply line 3c by line 3f	106.		132.	
4 Pro rata share of interest expense:				
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	28,091.		132.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency				In U.S. dollars					
		Taxes withheld at source on:				Taxes withheld at source on:					
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends	(p) Rents and royalties	(q) Interest	(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
A						691.				7,394.	8,085.
B											
C											

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

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

ALTERNATIVE MINIMUM TAX

OMB No. 1545-0121

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.**2016**Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☒ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☐ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	INDIA	CANADA	QATAR	
1a Gross income from sources within country shown above and of the type checked above:		858,558.		1,520,142.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement)			8,408.	
3 Pro rata share of other deductions not definitely related :				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income		858,558.		
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00498	.00000	
g Multiply line 3c by line 3f		269.		
4 Pro rata share of interest expense:				
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		269.	8,408.	36,900.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				1,483,242.

Part II Foreign Taxes Paid or Accrued

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

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶ 8 8,085.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

ALTERNATIVE MINIMUM TAX

Form 1116 (2016) **DONALD J. & MELANIA TRUMP**

Page **2**

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	8,085.	
10 Carryback or carryover (attach detailed computation) SEE STATEMENT 64	10	17,192.	
11 Add lines 9 and 10	11	25,277.	
12 Reduction in foreign taxes	12		
13 Taxes reclassified under high tax kickout	13		
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		25,277.
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	15	1,483,242.	
16 Adjustments to line 15	16	-1,483,242.	
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17		
18 Individuals: Enter the amount from Form 1040, line 41; or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18		
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		
20 Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 36, 37, and 39 Caution: If you are completing line 20 for separate category e (lump-sum distributions), see instructions.	20		5,259,735.
21 Multiply line 20 by line 19 (maximum amount of credit)	21		
22 Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22		0.

Part IV Summary of Credits From Separate Parts III

23 Credit for taxes on passive category income	23		
24 Credit for taxes on general category income	24	3,025,010.	
25 Credit for taxes on certain income re-sourced by treaty	25		
26 Credit for taxes on lump-sum distributions	26		
27 Add lines 23 through 26	27		3,025,010.
28 Enter the smaller of line 20 or line 27	28		3,025,010.
29 Reduction of credit for international boycott operations	29		
30 Subtract line 29 from line 28. This is your foreign tax credit . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 41a	30		3,025,010.

Form **1116** (2016)

Form

1116**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

2016Attachment
Sequence No. **19**Department of the Treasury
Internal Revenue Service (99)▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

		Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A	B	C	
g Enter the name of the foreign country or U.S. possession ▶		CANADA	KOREA, SOUTH	UNITED KINGDOM	
1a Gross income from sources within country shown above and of the type checked above:					
		5,462,223.		11,964,980.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>					
Deductions and losses (Caution: See instructions.):					
2 Expenses definitely related to the income on line 1a (attach statement) ▶		930,576.	100.	24,143,235.	
3 Pro rata share of other deductions not definitely related:					
a Certain itemized deductions or standard deduction ▶		53,980.	53,980.	53,980.	
b Other deductions (attach statement) ▶					
c Add lines 3a and 3b ▶		53,980.	53,980.	53,980.	
d Gross foreign source income ▶		5,462,223.		11,964,980.	
e Gross income from all sources ▶		172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e ▶		.03171	.00000	.06947	
g Multiply line 3c by line 3f ▶		1,712.		3,750.	
4 Pro rata share of interest expense:					
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 ▶		932,288.	100.	24,146,985.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶					7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued									
		In foreign currency				In U.S. dollars					
		Taxes withheld at source on:				Taxes withheld at source on:					
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends	(p) Rents and royalties	(q) Interest	(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
A		05/27/16								247,378.	247,378.
B											
C											

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.**2016**Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	CHINA	DOMINICAN REPUBLIC	PANAMA	
1a Gross income from sources within country shown above and of the type checked above:			913,053.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	3,887,451.	34,803.	370,205.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income			913,053.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00000	.00530	
g Multiply line 3c by line 3f			286.	
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	3,887,451.	34,803.	370,491.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

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

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

ALTERNATIVE MINIMUM TAX

OMB No. 1545-0121

Form

1116Department of the Treasury
Internal Revenue Service (99)**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.**2016**Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	UNITED ARAB EMIRATES	PUERTO RICO	CANADA	
1a Gross income from sources within country shown above and of the type checked above:				
	41,251.	1,930.	6,288,301.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	166,383.	296.	210,420.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income	41,251.	1,930.	6,288,301.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00024	.00001	.03651	
g Multiply line 3c by line 3f	13.	1.	1,971.	
4 Pro rata share of interest expense:				
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	166,396.	297.	212,391.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued							(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:				Taxes withheld at source on:				
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends	(p) Rents and royalties		
A										
B										
C									622,227.	622,227.

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

Form **1116****Foreign Tax Credit**

(Individual, Estate, or Trust)

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.**2016**
Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	PHILIPPINES	GRENADA	INDIA	
1a Gross income from sources within country shown above and of the type checked above:	10,879.		3,533,001.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	3,117.	341.	751,817.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income	10,879.		3,533,001.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00006	.00000	.02051	
g Multiply line 3c by line 3f	3.		1,107.	
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	3,120.	341.	752,924.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties		(m) Interest	(o) Dividends	(p) Rents and royalties		
A									1,019.	1,019.
B										
C									381,748.	381,748.

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

ALTERNATIVE MINIMUM TAX

OMB No. 1545-0121

Form

1116**Foreign Tax Credit**

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

2016Attachment
Sequence No. **19**Department of the Treasury
Internal Revenue Service (99)▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	GEORGIA	ISRAEL	AZERBAIJAN	
1a Gross income from sources within country shown above and of the type checked above:				
			64.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	4,901.	9,732.	37,392.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income			64.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00000	.00000	
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	4,901.	9,732.	37,392.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

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

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

ALTERNATIVE MINIMUM TAX

Foreign Tax Credit

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2016

Attachment
Sequence No. 19

Form 1116

Department of the Treasury
Internal Revenue Service (99)▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	BRAZIL	SAINT MARTIN	MEXICO	
1a Gross income from sources within country shown above and of the type checked above:		1,010,648.		1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	195,842.	1,885,754.	4,907.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income		1,010,648.		
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00587	.00000	
g Multiply line 3c by line 3f		317.		
4 Pro rata share of interest expense:				
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	195,842.	1,886,071.	4,907.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

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

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2016)

ALTERNATIVE MINIMUM TAX

OMB No. 1545-0121

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

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

2016Attachment
Sequence No. **19**▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
 b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession	QATAR	INDONESIA	IRELAND	
1a Gross income from sources within country shown above and of the type checked above:		730,213.	7,762,717.	1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	364.	648,301.	10,303,521.	
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.	53,980.	
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.	53,980.	
d Gross foreign source income		730,213.	7,762,717.	
e Gross income from all sources	172,229,279.	172,229,279.	172,229,279.	
f Divide line 3d by line 3e	.00000	.00424	.04507	
g Multiply line 3c by line 3f		229.	2,433.	
4 Pro rata share of interest expense:				
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	364.	648,530.	10,305,954.	6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:			(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
	(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest			(o) Dividends	(p) Rents and royalties		
A										
B									1,736.	1,736.
C										

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

8

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

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

(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.**2016**Attachment
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

DONALD J. & MELANIA TRUMP

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 ☐ Passive category income c ☐ Section 901(j) income e ☐ Lump-sum distributions
b ☒ General category income d ☐ Certain income re-sourced by treaty

f Resident of (name of country) ▶ UNITED STATES

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)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
g Enter the name of the foreign country or U.S. possession TURKEY	ST. VINCENT AND THE GR			
1a Gross income from sources within country shown above and of the type checked above:	888,815.			1a 38,608,075.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)	153,879.	323.		
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	53,980.	53,980.		
b Other deductions (attach statement)				
c Add lines 3a and 3b	53,980.	53,980.		
d Gross foreign source income	888,815.			
e Gross income from all sources	172,229,279.	172,229,279.		
f Divide line 3d by line 3e	.00516	.00000		
g Multiply line 3c by line 3f	279.			
4 Pro rata share of interest expense:				
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	154,158.	323.		6 43,755,761.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7 -5,147,686.

Part II Foreign Taxes Paid or Accrued

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

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶ 8 1,254,108.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2016)

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	1,254,108.	
10	Carryback or carryover (attach detailed computation) SEE STATEMENT 65	10	1,770,902.	
11	Add lines 9 and 10	11	3,025,010.	
12	Reduction in foreign taxes	12		
13	Taxes reclassified under high tax kickout	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		3,025,010.
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	15	-5,147,686.	
16	Adjustments to line 15	16	16,379,029.	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	11,231,343.	
18	Individuals: Enter the amount from Form 1040, line 41; or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption SEE STATEMENT 66	18	18,798,241.	
19	Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions. Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		.59747
20	Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 36, 37, and 39 Caution: If you are completing line 20 for separate category e (lump-sum distributions), see instructions.	20		5,259,735.
21	Multiply line 20 by line 19 (maximum amount of credit)	21		3,142,534.
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22		3,025,010.

Part IV Summary of Credits From Separate Parts III

23	Credit for taxes on passive category income	23		
24	Credit for taxes on general category income	24		
25	Credit for taxes on certain income re-sourced by treaty	25		
26	Credit for taxes on lump-sum distributions	26		
27	Add lines 23 through 26	27		
28	Enter the smaller of line 20 or line 27	28		
29	Reduction of credit for international boycott operations	29		
30	Subtract line 29 from line 28. This is your foreign tax credit . Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 41a	30		

**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, 1040NR, 1040-SS, or 1041.

▶ Information about Schedule H and its separate instructions is at www.irs.gov/scheduleh.

OMB No. 1545-1971

2016
Attachment
Sequence No. **44**

Name of employer

Social security number

Employer identification number

DONALD J. TRUMP

13-3440039

Calendar year taxpayers having no household employees in 2016 don't have to complete this form for 2016.

A Did you pay **any one** household employee cash wages of \$2,000 or more in 2016? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions before you answer this question.)

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

B Did you withhold federal income tax during 2016 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 2015 or 2016 to **all** household employees? (Don't count cash wages paid in 2015 or 2016 to your spouse, your child under age 21, or your parent.)

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

Part I Social Security, Medicare, and Federal Income Taxes

1	Total cash wages subject to social security tax	1	155,543.		
2	Social security tax. Multiply line 1 by 12.4% (0.124)			2	19,287.
3	Total cash wages subject to Medicare tax	3	155,543.		
4	Medicare tax. Multiply line 3 by 2.9% (0.029)			4	4,511.
5	Total cash wages subject to Additional Medicare Tax withholding	5			
6	Additional Medicare Tax withholding. Multiply line 5 by 0.9% (0.009)			6	
7	Federal income tax withheld, if any			7	21,125.
8	Total social security, Medicare, and federal income taxes. Add lines 2, 4, 6, and 7			8	44,923.

9 Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2015 or 2016 to **all** household employees? (Don't count cash wages paid in 2015 or 2016 to your spouse, your child under age 21, or your parent.)

- ☐ **No. Stop.** Include the amount from line 8 above on Form 1040, line 60a. 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
10 Did you pay unemployment contributions to only one state? If you paid contributions to a credit reduction state, see instructions and check "No."	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 Did you pay all state unemployment contributions for 2016 by April 18, 2017? Fiscal year filers see instructions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Next: If you checked the "Yes" box on **all** the lines above, complete Section A.

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

Section A

13 Name of the state where you paid unemployment contributions	NY	
14 Contributions paid to your state unemployment fund	14	553.
15 Total cash wages subject to FUTA tax	15	22,885.
16 FUTA tax. Multiply line 15 by 0.6% (0.006). Enter the result here, skip Section B, and go to line 25	16	137.

Section B

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

(a) Name of state	(b) Taxable wages (as defined in state act)	(c) State experience rate period		(d) State experience rate	(e) Multiply col. (b) by 0.054	(f) Multiply col. (b) by col. (d)	(g) Subtract col. (f) from col. (e). If zero or less, enter -0-.	(h) Contributions paid to state unemployment fund
		From	To					

18 Totals	18	
19 Add columns (g) and (h) of line 18	19	
20 Total cash wages subject to FUTA tax (see the line 15 instructions)	20	
21 Multiply line 20 by 6.0% (0.060)	21	
22 Multiply line 20 by 5.4% (0.054)	22	
23 Enter the smaller of line 19 or line 22 (Employers in a credit reduction state must use the worksheet and check here)	23	<input type="checkbox"/>
24 FUTA tax. Subtract line 23 from line 21. Enter the result here and go to line 25	24	

Part III Total Household Employment Taxes

25 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0-	25	44,923.
26 Add line 16 (or line 24) and line 25	26	45,060.
27 Are you required to file Form 1040?		
<input checked="" type="checkbox"/> Yes. Stop. Include the amount from line 26 above on Form 1040, line 60a. Don't complete Part IV below.		
<input type="checkbox"/> No. You may have to complete Part IV. See instructions for details.		

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

Address (number and street) or P.O. box if mail isn't delivered to street address	Apt., room, or suite no.
City, town or post office, state, and ZIP code	

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

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

**Paid
Preparer
Use Only**

Form **4952**Department of the Treasury
Internal Revenue Service (99)**Investment Interest Expense Deduction**► Information about Form 4952 and its instructions is at www.irs.gov/form4952.

► Attach to your tax return.

OMB No. 1545-0191

2016Attachment
Sequence No. **51**

Name(s) shown on return

Identifying number

DONALD J. & MELANIA TRUMP

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2016 (see instructions) SEE STATEMENT 67	1	1,513,220.
2	Disallowed investment interest expense from 2015 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	1,513,220.

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) STMT 68	4a	9,160,118.
b	Qualified dividends included on line 4a	4b	292,068.
c	Subtract line 4b from line 4a	4c	8,868,050.
d	Net gain from the disposition of property held for investment	4d	
e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e	
f	Subtract line 4e from line 4d	4f	
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)	4g	
h	Investment income. Add lines 4c, 4f, and 4g	4h	8,868,050.
5	Investment expenses (see instructions) SEE STATEMENT 69	5	796,887.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-	6	8,071,163.

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2017. Subtract line 6 from line 3. If zero or less, enter -0-	7	0.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions STMT 70	8	1,513,220.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4952** (2016)

Form **4952**Department of the Treasury
Internal Revenue Service (99)**Investment Interest Expense Deduction**▶ Information about Form 4952 and its instructions is at www.irs.gov/form4952.
▶ Attach to your tax return.

OMB No. 1545-0191

2016Attachment
Sequence No. **51**

Name(s) shown on return

Identifying number

DONALD J. & MELANIA TRUMP

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2016 (see instructions)	SEE STATEMENT 71	1	1,513,220.
2	Disallowed investment interest expense from 2015 Form 4952, line 7		2	
3	Total investment interest expense. Add lines 1 and 2		3	1,513,220.

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	9,165,720.	
b	Qualified dividends included on line 4a	4b	297,670.	
c	Subtract line 4b from line 4a			4c 8,868,050.
d	Net gain from the disposition of property held for investment	4d		
e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e		
f	Subtract line 4e from line 4d			4f
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)			4g
h	Investment income. Add lines 4c, 4f, and 4g			4h 8,868,050.
5	Investment expenses (see instructions)			5 39,587.
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-			6 8,828,463.

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2017. Subtract line 6 from line 3. If zero or less, enter -0-	7	0.
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	1,513,220.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4952** (2016)

REGULAR FORM 4952, LINE 8

1,513,220.

LESS RECOMPUTED FORM 4952, LINE 8

1,513,220.

INTEREST ADJUSTMENT - FORM 6251, LINE 8

Additional Medicare Tax

OMB No. 1545-0074

2016Attachment
Sequence No. 71Department of the Treasury
Internal Revenue Service

▶ If any line does not apply to you, leave it blank. See separate instructions.

▶ Attach to Form 1040, 1040NR, 1040-PR, or 1040-SS.

▶ Information about Form 8959 and its instructions is at www.irs.gov/form8959.

Name(s) shown on return

DONALD J. & MELANIA TRUMP

Your social security number

Part I Additional Medicare Tax on Medicare Wages

1 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	1	978.	
2 Unreported tips from Form 4137, line 6	2		
3 Wages from Form 8919, line 6	3		
4 Add lines 1 through 3	4	978.	
5 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	5	250,000.	
6 Subtract line 5 from line 4. If zero or less, enter -0-	6		0.
7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7		

Part II Additional Medicare Tax on Self-Employment Income

8 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 and Form 1040-SS filers, see instructions.)	8	14,635,713.	
9 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	9	250,000.	
10 Enter the amount from line 4	10	978.	
11 Subtract line 10 from line 9. If zero or less, enter -0-	11	249,022.	
12 Subtract line 11 from line 8. If zero or less, enter -0-	12		14,386,691.
13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III	13		129,480.

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

14 Railroad retirement (RTTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14		
15 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	15		
16 Subtract line 15 from line 14. If zero or less, enter -0-	16		
17 Additional Medicare Tax on railroad retirement (RTTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV	17		

Part IV Total Additional Medicare Tax

18 Add lines 7, 13, and 17. Also include this amount on Form 1040, line 62, (Form 1040NR, 1040-PR, and 1040-SS filers, see instructions) and go to Part V	18		129,480.
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Part V Withholding Reconciliation

19 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	19	14.	
20 Enter the amount from line 1	20	978.	
21 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	14.	
22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22		0.
23 Additional Medicare Tax withholding on railroad retirement (RTTA) compensation from Form W-2, box 14 (see instructions)	23		
24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, line 64 (Form 1040NR, 1040-PR, and 1040-SS filers, see instructions)	24		

Passive Activity Loss Limitations

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1041.

▶ Information about Form 8582 and its instructions is available at www.irs.gov/form8582.

Name(s) shown on return

Identifying number

DONALD J. & MELANIA TRUMP

Part I 2016 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a	
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	(277,163.)
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	()
d Combine lines 1a, 1b, and 1c	1d	-277,163.

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a	()
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	()
c Add lines 2a and 2b	2c	()

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	96,831,970.
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	(31,795,226.)
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	()
d Combine lines 3a, 3b, and 3c	3d	65,036,744.

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	64,759,581.
--	----------	-------------

- 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)	7	
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.		
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	
16 Total losses allowed from all passive activities for 2016. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	16	

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

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

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c		-277,163.			

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

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b.			

Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
	SEE ATTACHED STATEMENT FOR WORKSHEET 3				
Total. Enter on Form 8582, lines 3a, 3b, and 3c	96,831,970.	-31,795,226.			

Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total					

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
Total				

Form **8582-CR**(Rev. January 2012)
Department of the Treasury
Internal Revenue Service
Name(s) shown on return**Passive Activity Credit Limitations**

- ▶ See separate instructions.
▶ Attach to Form 1040 or 1041.

OMB No. 1545-1034

Attachment
Sequence No. **89**

Identifying number

DONALD J. & MELANIA TRUMP

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**

260,795.

b Prior year unallowed credits from Worksheet 4, column (b)**4b**

1,031,320.

c Add lines 4a and 4b**4c**

1,292,115.

5 Add lines 1c, 2c, 3c, and 4c**5**

1,292,115.

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**

1,292,115.

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**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8582-CR** (Rev. 01-2012)

Part III Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990)*Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.*

17	Enter the amount from line 7	17	
18	Enter the amount from line 16	18	
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V	19	
20	Enter the smaller of line 2c or line 19	20	
21	Enter \$250,000. If married filing separately, see instructions to find out if you can skip lines 21 through 26	21	
22	Enter modified adjusted gross income, but not less than zero. (See instructions for line 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	22	
23	Subtract line 22 from line 21	23	
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see instructions	24	
25a	Enter the amount, if any, from line 10 of Form 8582	25a	
b	Enter the amount, if any, from line 14 of Form 8582	25b	
c	Add lines 25a and 25b	25c	
26	Subtract line 25c from line 24	26	
27	Enter the tax attributable to the amount on line 26 (see instructions)	27	
28	Enter the amount, if any, from line 18	28	
29	Subtract line 28 from line 27	29	
30	Enter the smaller of line 20 or line 29	30	

Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989*Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V.*

31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7	31	
32	Enter the amount from line 30	32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33	
34	Enter the smaller of line 3c or line 33	34	
35	Tax attributable to the remaining special allowance (see instructions)	35	
36	Enter the smaller of line 34 or line 35	36	

Part V Passive Activity Credit Allowed

37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See instructions to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) in the instructions.	37	0.
----	---	----	----

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	▶ \$

Form

8846Department of the Treasury
Internal Revenue Service**Credit for Employer Social Security and Medicare Taxes
Paid on Certain Employee Tips**

▶ Attach to your tax return.

▶ Information about Form 8846 and its instructions is at www.irs.gov/form8846.

OMB No. 1545-0123

2016Attachment
Sequence No. **98**

Name(s) shown on return

Identifying number

DONALD J. & MELANIA TRUMP

Note: Claim this credit **only** for employer social security and Medicare taxes paid by a food or beverage establishment where tipping is customary for providing food or beverages. See the instructions for line 1.

1	Tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year (see instructions)	1	237,185.
2	Tips not subject to the credit provisions (see instructions)	2	
3	Creditable tips. Subtract line 2 from line 1	3	237,185.
4	Multiply line 3 by 7.65% (0.0765). If you had any tipped employees whose wages (including tips) exceeded \$118,500, see instructions and check here ▶ <input type="checkbox"/>	4	18,145.
5	Credit for employer social security and Medicare taxes paid on certain employee tips from partnerships and S corporations	5	355,835.
6	Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 4f	6	373,980.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8846** (2016)

Form **5471****Information Return of U.S. Persons With
Respect To Certain Foreign Corporations**

OMB No. 1545-0704

(Rev. December 2015)

Department of the Treasury
Internal Revenue Service► For more information about Form 5471, see www.irs.gov/form5471Information furnished for the foreign corporation's annual accounting period (tax year required by
section 898) (see instructions) beginning , and endingAttachment
Sequence No. **121**

Name of person filing this return

DONALD J. TRUMP

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)

City or town, state, and ZIP code

NEW YORK, NY 10022

A Identifying number**B Category of filer** (See instructions. Check applicable box(es)):1 (repealed) 2 ☐ 3 ☐ 4 ☒ 5 ☒**C Enter the total percentage of the foreign corporation's voting stock
you owned at the end of its annual accounting period** %

Filer's tax year beginning JAN 1 , 2016 , and ending DEC 31 , 2016

D Check if any excepted specified foreign financial assets are reported on this form (see instructions) ☐**E** 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.**1a** Name and address of foreign corporation

THC BARRA HOTELARIA

NEW YORK, NY 10022

b(1) Employer identification number, if any
32-0447181**b(2)** Reference ID number (see instructions)**c** Country under whose laws incorporated
BRAZIL**d** Date of
incorporation

04/15/14

e Principal place of business**f** Principal
business activity
code number**g** Principal business activity**h** Functional currency**2** Provide the following information for the foreign corporation's accounting period stated above.**a** Name, address, and identifying number of branch office or agent (if any) in the United States**b** If a U.S. income tax return was filed, enter:

(i) Taxable income or (loss)

(ii) U.S. income tax paid
(after all credits)**c** Name and address of foreign corporation's statutory or resident agent
in country of incorporation**d** Name and address (including corporate department, if applicable) of
person (or persons) with custody of the books and records of the foreign
corporation, and the location of such books and records, if different**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

LHA For Paperwork Reduction Act Notice, see instructions.

Form **5471** (Rev. 12-2015)

Form **8865**Department of the Treasury
Internal Revenue Service**Return of U.S. Persons With Respect to
Certain Foreign Partnerships**

► **Attach to your tax return.**
► **Information about Form 8865 and its separate instructions is at www.irs.gov/form8865.**
Information furnished for the foreign partnership's tax year
beginning **JAN 1**, 2016, and ending **DEC 31**, 2016

OMB No. 1545-1668

2016Attachment
Sequence No. **118**

Name of person filing this return

DONALD J. & MELANIA TRUMP

Filer's identifying number

Filer's address (if you are not filing this form with your tax return)

A Category of filer (see Categories of Filers in the instructions and check applicable box(es)):1 ☒ 2 ☐ 3 ☐ 4 ☐**B** Filer's tax year beginning **JAN 1**, 2016, and ending **DEC 31**, 2016**C** Filer's share of liabilities: Nonrecourse \$ **691,219**. 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)

(1) Name	(2) Address	(3) Identifying 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

C/O TRUMP ORGANIZATION

NEW YORK, NY 10022

2(a) EIN (if any)

98-0485744

2(b) Reference ID number**3** Country under whose laws organized

UNITED KINGDOM

4 Date of organization
10/21/2005**5** Principal place of business
UNITED KINGDOM**6** Principal business activity code number
713900**7** Principal business activity
AMUSEMENT & REC**8a** Functional currency
UK POUNDS**8b** Exchange rate (see instr.)
.812000**H** Provide the following information for the foreign partnership's tax year:**1** Name, address, and identifying number of agent (if any) in the United States**2** Check if the foreign partnership must file:☐ Form 1042 ☐ Form 8804 ☐ Form 1065 or 1065-B
Service Center where Form 1065 or 1065-B 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 C/O JEFF MCCONNEY

NEW YORK, NY 10022

5 Were any special allocations made by the foreign partnership? ☐ Yes ☒ No**6** Enter the no. of Forms 8858, Info Return of U.S. Persons With Respect To Foreign Disregarded Entities, attached to this return ☐ Yes ☒ No**7** How is this partnership classified under the law of the country in which it is organized? ☐ PRIVATE LIMITED CO**8a** Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that is 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 8b. ☐ Yes ☒ 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**9** Does this partnership meet **both** of the following requirements?

• The partnership's total receipts for the tax year were less than \$250,000 and

• The value of the partnership's total assets at the end of the tax year was less than \$1 million.

If "Yes," **do not** complete Schedules L, M-1, and M-2. ☐ Yes ☒ NoSign Here
Only If You
Are Filing
This Form
Separately
and Not With
Your Tax
Return.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is 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 ☐ if
self-employed

PTIN

DONALD BENDER

Firm's name ► MAZARS USA LLP

Firm's EIN ► 13-1459550

Firm's address
WOODBURY, NY 11797-2003Phone no.
(516) 488-1200

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 identifying number (if any) of the person(s) whose interest you constructively own. See instructions.**a** ☒ Owns a direct interest**b** ☐ Owns a constructive interest

Name	Address	Identifying number (if any)	Check if foreign person	Check if direct partner

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

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

Does the partnership have any other foreign person as a direct partner? ☐ Yes ☒ No**Schedule A-2** **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.

Income	1 a Gross receipts or sales	1a		1c	
	b Less returns and allowances	1b			
	2 Cost of goods sold			2	
	3 Gross profit. Subtract line 2 from line 1c			3	
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4	
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5	
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6	-14,864.
7 Other income (loss) (attach statement)		STATEMENT 81	7	3,534,819.	
8 Total income (loss). Combine lines 3 through 7			8	3,519,955.	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9	
	10 Guaranteed payments to partners			10	
	11 Repairs and maintenance			11	
	12 Bad debts			12	
	13 Rent			13	
	14 Taxes and licenses			14	
	15 Interest			15	
	16 a Depreciation (if required, attach Form 4562)	16a	1,526,266.		
	b Less depreciation reported elsewhere on return	16b		16c	1,526,266.
	17 Depletion (Do not deduct oil and gas depletion.)			17	
	18 Retirement plans, etc.			18	
	19 Employee benefit programs			19	
	20 Other deductions (attach statement)		STATEMENT 82	20	4,904,519.
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21	6,430,785.
	22 Ordinary business income (loss) from trade or business activities. Subtract line 21 from line 8			22	-2,910,830.

Schedule K Partners' Distributive Share Items

		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 2, line 22)	1	-2,910,830.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments	4	
	5 Interest income	5	
	6 Dividends: a Ordinary dividends	6a	
	b Qualified dividends	6b	
	7 Royalties	7	
	8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a		
b Collectibles (28%) gain (loss)	9b		
c Unrecaptured section 1250 gain (attach statement)	9c		
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type ▶	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
d Other deductions (see instructions) Type ▶	13d		
Self-Employment	14a Net earnings (loss) from self-employment	14a	
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	15c	
	d Other rental real estate credits (see instructions) Type ▶	15d	
	e Other rental credits (see instructions) Type ▶	15e	
	f Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16a Name of country or U.S. possession ▶ UNITED KINGDOM		
	b Gross income from all sources	16b	3,534,819.
	c Gross income sourced at partner level	16c	
	Foreign gross income sourced at partnership level		
	d Passive category ▶ e General category ▶ 3,534,819. f Other (att. stmt.) ▶	16f	
	Deductions allocated and apportioned at partner level		
	g Interest expense ▶ h Other ▶	16h	
	Deductions allocated and apportioned at partnership level to foreign source income		
	i Passive category ▶ j General category ▶ 6,376,959. k Other (att. stmt.) ▶	16k	
	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	16l	
	m Reduction in taxes available for credit (attach statement)	16m	
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a	
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties - gross income	17d	
	e Oil, gas, and geothermal properties - deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19a Distributions of cash and marketable securities	19a	196,628.
	b Distributions of other property	19b	
	20a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach statement)			

Schedule L Balance Sheets per Books. (Not required if Item H9, page 1, is answered "Yes.")

Assets		Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
1	Cash		193,651.		187,252.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories		279,716.		168,333.
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (attach statement) ...	STMT 85	76,957.		10,559.
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach statement)				
9a	Buildings and other depreciable assets	30,881,684.		25,779,116.	
b	Less accumulated depreciation	5,390,892.	25,490,792.	5,796,486.	19,982,630.
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)		13,797,216.		11,469,361.
12a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
13	Other assets (attach statement)	STMT 84	6,490,588.		12,907,113.
14	Total assets		46,328,920.		44,725,248.
Liabilities and Capital					
15	Accounts payable		483,679.		307,034.
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach statement)	STMT 83	389,652.		384,185.
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more				
20	Other liabilities (attach statement)	STMT 86	127,156.		45,331.
21	Partners' capital accounts		45,328,433.		43,988,698.
22	Total liabilities and capital		46,328,920.		44,725,248.

Form 8865 (2016)

Schedule M Balance Sheets for Interest Allocation

	(a) Beginning of tax year	(b) End of tax year
1 Total U.S. assets	531.	
2 Total foreign assets:		
a Passive category	46,328,389.	44,725,248.
b General category		
c Other (attach statement)		

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return. (Not required if Item H9, page 1, is answered "Yes.")

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

Schedule M-2 Analysis of Partners' Capital Accounts. (Not required if Item H9, page 1, is answered "Yes.")

1 Balance at beginning of year	42,417,603.	6 Distributions: a Cash	43,673,417.
2 Capital contributed:		b Property	
a Cash	45,244,512.	7 Other decreases (itemize):	
b Property			
3 Net income (loss) per books			
4 Other increases (itemize):		8 Add lines 6 and 7	43,673,417.
5 Add lines 1 through 4	87,662,115.	9 Balance at end of year. Subtract line 8 from line 5	43,988,698.

Form 8865 (2016)

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				

Form **8938**Department of the Treasury
Internal Revenue Service**Statement of Specified Foreign Financial Assets**► Information about Form 8938 and its separate instructions is at www.irs.gov/form8938.
► Attach to your tax return.

OMB No. 1545-2195

2016Attachment
Sequence No. **175**For calendar year **2016** or tax year beginning and endingIf you have attached continuation statements, check here ☐

Number of continuation statements

1 Name(s) shown on return
DONALD J. & MELANIA TRUMP**2** TIN**3** Type of filer**a** ☒ Specified individual **b** ☐ Partnership **c** ☐ Corporation **d** ☐ Trust**4** If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust.
(See instructions for definitions and what to do if you have more than one specified individual or specified person to list.)**a** Name**b** TIN**Part I Foreign Deposit and Custodial Accounts Summary**

- 1** Number of Deposit Accounts (reported in Part V) **▶**
- 2** Maximum Value of All Deposit Accounts \$
- 3** Number of Custodial Accounts (reported in Part V) **▶**
- 4** Maximum Value of All Custodial Accounts \$
- 5** Were any foreign deposit or custodial accounts closed during the tax year? ☐ Yes ☐ No

Part II Other Foreign Assets Summary

- 1** Number of Foreign Assets (reported in Part VI) **▶**
- 2** Maximum Value of All Assets (reported in Part VI) \$
- 3** Were any foreign assets acquired or sold during the tax year? ☐ Yes ☐ No

Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions)

(a) Asset Category	(b) Tax item	(c) Amount reported on form or schedule	Where reported	
			(d) Form and line	(e) Schedule and line
1 Foreign Deposit and Custodial Accounts	1a Interest	\$		
	1b Dividends	\$		
	1c Royalties	\$		
	1d Other income	\$		
	1e Gains (losses)	\$		
	1f Deductions	\$		
	1g Credits	\$		
2 Other Foreign Assets	2a Interest	\$		
	2b Dividends	\$		
	2c Royalties	\$		
	2d Other income	\$		
	2e Gains (losses)	\$		
	2f Deductions	\$		
	2g Credits	\$		

Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

1. Number of Forms 3520 2. Number of Forms 3520-A 3. Number of Forms 5471 1
4. Number of Forms 8621 5. Number of Forms 8865 1

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary
(see instructions)

If you have more than one account to report in Part V, attach a continuation statement for each additional account (see instructions).

1 Type of account <input type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset	
4 Maximum value of account during tax year \$	
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6 If you answered "Yes" to line 5, complete all that apply.	
(a) Foreign currency in which account is maintained	(b) Foreign currency exchange rate used to convert to U.S. dollars
(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service	

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) _____

Form **4562**Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization**
(Including Information on Listed Property)

▶ Attach to your tax return. SCHEDULE C- 36

OMB No. 1545-0172

2016Attachment
Sequence No. 179

Name(s) shown on return

Business or activity to which this form relates

Identifying number

DONALD J. & MELANIA TRUMP

TRUMP RESTAURANTS LLC

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	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	
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 2015 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	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 2017. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	15,221.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	387.

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 2016	17	35,443.
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 2016 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		10,300.	3 YRS.	HY	200DB	3,433.
b 5-year property						
c 7-year property		4,919.	7 YRS.	HY	200DB	703.
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	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	6 / 16	17,650.	39 yrs.	MM	S/L	246.
	/			MM	S/L	

Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	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 instr.	22	55,433.
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, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	

26 Property used more than 50% in a qualified business use:

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
		%						
		%						
		%						

27 Property used 50% or less in a qualified business use:

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
		%				S/L -		
		%				S/L -		
		%				S/L -		

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.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
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?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
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 EmployeesAnswer 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.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2016 tax year:					
43 Amortization of costs that began before your 2016 tax year:					43
					1,760.
44 Total. Add amounts in column (f). See the instructions for where to report					44
					1,760.