

UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION FILERS

<input type="checkbox"/> Amendment			
Last Name	First Name and Middle Initial	Annual Report	
Durbin	Richard J.	Calendar Year Covered by Report 2012	Senate Office / Agency in Which Employed Office of Senator Richard J. Durbin
Senate Office Address (Number, Street, City, State, and ZIP Code)	Senate Office Telephone Number (Include Area Code)	Termination Report	Prior Office / Agency in Which Employed
U.S. Capitol, S-321, Washington, DC 20510	(202) 224-9447	Termination Date (mm/dd/yy)	

AFTER READING THE INSTRUCTIONS – ANSWER EACH OF THESE QUESTIONS AND ATTACH THE RELEVANT PART

	YES	NO		YES	NO
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If Yes, complete and attach PART I.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$350 from one source)? If Yes, complete and attach PART VI.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If Yes, complete and attach PART II.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If Yes, complete and attach PART VII.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Did you, your spouse, or dependent child hold any reportable asset worth more than \$1,000 at the end of the period, or receive unearned or investment income of more than \$200 in the reporting period? If Yes, complete & attach PART IIIA and/or IIIB.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you hold any reportable positions on or before the date of filing in the current calendar year? If Yes, complete and attach PART VIII.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If Yes, complete and attach PART IV.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you have any reportable agreement or arrangement with an outside entity? If Yes, complete and attach PART IX.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If Yes, complete and attach PART V.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If this is your FIRST Report: Did you receive compensation of more than \$5,000 from a single source in the two prior years? If Yes, complete and attach PART X.	<input type="checkbox"/>	<input type="checkbox"/>

Each question must be answered and the appropriate PART attached for each “YES” response.

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PROJECTARY OF THE
PUBLIC RECORDS
SERIALS SECTION

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Reporting Individual's Name

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Richard J. Durbin

Page Number

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PART I. PAYMENTS TO PAY CHARITABLE ORGANIZATIONS IN LIEU OF HONORARIA

Report the source (name and address), date, and amount of any payment from each source to a charitable organization made in lieu of honoraria to you during the reporting period. Identify the activity (speech, article, or appearance), which generated the payment. For further information, see Instructions.

Note: Travel expenses in excess of \$350 related to activities giving rise to these payments must be reported in Part VI, Reimbursements.

Date of Payment	Name of Source	Address (City, State)	Speech, Article, or Appearance	Amount
Example: 3/26/1X	Association of American Associations	Wash., DC	EXAMPLE	Speech \$1,000
7/23/1X	XYZ Magazine	NY, NY	EXAMPLE	Article \$500
1	not applicable			
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A separate, confidential report which names the charitable organization receiving such payments must be filed directly with the Select Committee on Ethics.

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PART II. EARNED AND NON-INVESTMENT INCOME

Report the source (name and address), type, and amount of earned income to you from any source aggregating \$200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate \$1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:

For you and /or your spouse, report honoraria income received which aggregates \$200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

	Name of Income Source	Address (City, State)	Type of Income	Amount
Example:	JP Computers	Wash., DC	EXAMPLE	Salary \$15,000
	MCI (Spouse)	Arlington, VA	EXAMPLE	Salary Over \$1,000
1	U.S. Senate	Washington, DC	Salary	\$174,000
2	Soc. Sec.	Washington, DC	Benefits	\$29,500
3	Soc. Sec. (Spouse)	Washington, DC	Benefits	\$21,085
4	Gov't. Affairs Consulting, LLC (Spouse)	Springfield, IL	Salary	\$68,108
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PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number

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BLOCK A

Identity of Publicly Traded Assets
And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child. (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
- (2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

S,
Example: DC,

IBM Corp. (stock)

(S) Keystone Fund

		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actual Amount	Required if "Other" Specified	Example
1		Manulife Financial Corp. (\$6,519)	x												x				x													Example				
2		Credit Union One, Lombard (\$99,310)													x		x				x											Example				
3		Cong Federal Credit Union (\$63,845)														x		x				x											Example			
4		Pfizer (123 sh - \$3,086)	x												x				x				x										Example			
5		TSP - F Fund (\$341,546)										x					x				x												Example			
6		TSP - C Fund (\$112,875)									x				x				x			x											Example			
7	J	Evolution Acct (\$54,516)(cash \$11,153)				x											x				x												Example			
8																																		Example		
9																																		Example		
10																																		Example		

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

Click...to create an additional page for this part.

Richard J. Durbin

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A

Identity of Publicly Traded Assets
And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which:

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- (2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B

Valuation of Assets

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
S, Example: DC, or J												

IBM Corp. (stock)

X

(S) Keystone Fund

X

	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	Over \$5,000,000	Actual Amount Required if "Other" Specified
1 J Evolution DBLTX (949 sh: \$10,756)	x						x			x	x									Example
2 J Evolution JSOSX (91 sh: \$1,077)	x									x	x									Example
3 J Evolution RNDLX (388 sh: \$16,191)		x								x	x									Example
4 J Evolution VQT (32 sh: \$4,136)	x									x	x									Example
5 J Evolution IAU (160 sh: \$2604)	x									x	x									Example
6 J Evolution LQD (18 sh: \$2177)	x									x	x									Example
7 J Evolution AMJ (53 sh: \$2038)	x									x	x									Example
8 J Evolution PCY (94 sh: \$2955)	x									x	x									Example
9 J Evolution SPLV (162 sh: \$4484)	x									x	x									Example
10 J Evolution RSP (53 sh: \$2825)	x									x	x									Example

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

Click...to create an additional page for this part.

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PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A

Identity of Publicly Traded Assets
And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
- (2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B
Valuation of Assets

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
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BLOCK C
Type and Amount of Income

Type of Income								Amount of Income				Actual Amount Required if "Other" Specified					
None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$100,001 - \$1,000,000	Over \$1,000,000***	Over \$5,000,000	
	X				X					X							Example
		X									X						Example
1 J Evolution VIG (55 sh: \$3,276)	X										X						
2 J Evolution VWO (60 sh: \$2,671)	X										X						
3 S Evolution Acct (SEP) (\$175,547) (cash: \$33,083)		X									X						
4 S Evolution DBLTX (3,067 sh: \$34,753)	X										X						
5 S Evolution JSOSX (298 sh: \$3,525)	X										X						
6 S Evolution RNDLX (1253 sh: \$14,077)	X										X						
7 S Evolution VQT (104 sh: \$13,444)	X										X						
8 S Evolution IAU (515 sh: \$8,383)	X										X						
9 S Evolution LQD (58 sh: \$7,014)	X										X						
10 S Evolution AMJ (193 sh: \$7,422)	X										X						

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

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Click...to create an additional page for this part.

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A

Identity of Publicly Traded Assets
And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, *CONTENTS OF REPORTS Part B of Instructions*) for production of income or investment which:

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Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

S,
Example: DC,
or J IBM Corp. (stock)

(S) Keystone Fund

1 S Evolution PCY (301 sh: \$9,465)

2 S Evolution SPLV (525 sh: \$14,532)

3 S Evolution RSP (196 sh: \$10,450)

4 S Evolution VIG (179 sh: \$10,663)

5 S Evolution VWO (196 sh: \$8,727)

6 RJD - Evolution - IRA (\$170,076)
(cash: \$33,712)7 RJD - Evolution DBLTX (2961.1 sh: \$33,549)8 RJD - Evolution JSOSX (283.2 sh: \$3,350)9 RJD - Evolution RNDLX (1,210 sh: \$13,590)10 RJD - Evolution VQT (101 sh: \$13,056)BLOCK B
Valuation of Assets

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Type of Income							Amount of Income						
														S Example: DC, or J	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000
1	S Evolution PCY (301 sh: \$9,465)	X													X		X										
2	S Evolution SPLV (525 sh: \$14,532)	X														X		X									
3	S Evolution RSP (196 sh: \$10,450)	X															X		X								
4	S Evolution VIG (179 sh: \$10,663)	X															X		X								
5	S Evolution VWO (196 sh: \$8,727)	X															X		X								
6	RJD - Evolution - IRA (\$170,076) (cash: \$33,712)		X														X		X								
7	RJD - Evolution DBLTX (2961.1 sh: \$33,549)		X														X		X								
8	RJD - Evolution JSOSX (283.2 sh: \$3,350)	X															X		X								
9	RJD - Evolution RNDLX (1,210 sh: \$13,590)	X															X		X								
10	RJD - Evolution VQT (101 sh: \$13,056)	X															X		X								

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A

Identity of Publicly Traded Assets
And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
- (2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

S,

IBM Corp. (stock)

Example: DC,
or J

(S) Keystone Fund

BLOCK B
Valuation of Assets

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

	None (or less than \$1,001)	Type of Income							Amount of Income			Actual Amount Required if "Other" Specified
		\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
1	RJD - Evolution IAU (500 sh: \$8,139)	x							x			x
2	RJD - Evolution LQD (57 sh: \$6,896)	x							x			
3	RJD - Evolution AMJ (172 sh: \$6,615)	x							x			
4	RJD - Evolution PCY (293 sh: \$9,213)	x							x			
5	RJD - Evolution SPLV (506 sh: \$14,006)	x							x			
6	RJD - Evolution RSP (173 sh: \$9,224)	x							x			
7	RJD - Evolution VIG (173 sh: \$10,305)	x							x			
8	RJD - Evolution VWO (189 sh: \$8,416)	x							x			
9	S Schwab IRA (\$3,216) (cash: \$272)	x							x			
10	S Schwab MOS (52 sh: \$2,944)	x							x			

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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Richard J. Durbin

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A

Identity of Publicly Traded Assets
And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3,

CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
- (2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

S,
Example: DC,
or J IBM Corp. (stock)
 (S) Keystone Fund

1 S Def Comp. State of Illinois
 Vanguard Inst. (\$105,492)

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BLOCK B
Valuation of Assets

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
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BLOCK C
Type and Amount of Income

Type of Income							Amount of Income													
None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	Over \$1,000,000***	Over \$5,000,000	Actual Amount	Required if "Other" Specified	
X					X				X	X										Example

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
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Click...to create an additional page for this part.

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PART IIIB. NON-PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number

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BLOCK A

Identity of Non-Publicly Traded Assets and Unearned Income Sources

Report the name, address (city, state and description) of each interest held by you, your spouse, or your dependent child (See p.3, CONTENTS OF REPORTS Part B of Instructions) for the production of income or investment in a non-public trade or business which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
- (2) generated over \$200 in "unearned" income during the reporting period.

Include the above report for each underlying asset, which is not incidental to the trade or business. Publicly traded assets held by non-public entity may be listed on Part IIIA.

S, Example: DC, or J	JP Computer, Software Design, Wash DC Undeveloped land, Dubuque, Iowa
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1 S Govt Affairs Specialists, Inc., lobbying firm,
Springfield, IL

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BLOCK B
Valuation of Assets

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
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Type of Income												Amount of Income											
	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	Over \$5,000,000	Actual Amount			
	X									X	X	X	X	X	X	X	X	X	X	Required if "Other" Specified			
																							Example
																							Example

BLOCK C
Type and Amount of Income

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
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Richard J. Durbin

PART IV. TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000.

Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	Transaction Type (x)			Amount of Transaction (x)										
		Purchase	Sale	Exchange	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000**	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	
1	RJD - Evolution IRA VWO (Stock) (118 sh: \$4,863)	X			2/1/1X	X		E	X	A	M	P	L	E	
2	RJD - DBLTX (305.1 sh: \$3,408)		X		1/27/1X			X	E	X	A	M	P	L	E
3	RJD - JSOSX (2.8 sh: \$32) (amount of transaction less than \$1,001)	X			1/18/12	X									
4	RJD - RNDLX (751.7 sh: \$8,193)	X			2/13/12			X							
5	RJD - IAU (6 sh: \$100) (amount of transaction less than \$1,001)	X			2/15/12										
6	RJD - CSJ (8 sh: \$838) (amount of transaction less than \$1,001)	X			2/15/12										
7	RJD - DBO (168 sh: \$4,904)	X			2/15/12	X									
8	RJD - SPLV (122 sh: \$3,154)	X			2/15/12	X									
9	RJD - XLU (99 sh: \$3,446)	X			2/15/12	X									
10	RJD - VIG (55 sh: \$3,120)	X			2/15/12	X									
11	RJD - VWO (71 sh: \$3,072)	X			2/15/12	X									
12	RJD - IAU (195 sh: \$3157)	X			3/20/12	X									

XEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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PART IV. TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000.

Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	Transaction Type (x)			Amount of Transaction (x)									
		Purchase	Sale	Exchange	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	Over \$25,000,000
1	RJD - DBLTX (756.9 sh: \$8,455)	X			2/1/1X	X			E	X	A	M	P	L
2	RJD - RNDLX (10.9 sh: \$5,010)		X		1/27/1X		X	E	X	A	M	P	L	
3	RJD - CSJ (104.7 sh: \$3,247)		X		4/5/12	X								
4	RJD - VQT (63 sh: \$8,126)		X		4/17/12	X								
5	RJD - DBP (58 sh: \$3,161)		X		5/16/12	X								
6	RJD - DBO (169 sh: \$4,478)		X		5/22/12	X								
7	RJD - LQD (29 sh: \$3,353)		X		5/29/12	X								
8	RJD - PCY (122 sh: \$3,381)		X		5/29/12	X								
9	RJD - VQT (38 sh: \$4,881)	X			6/19/12	X								
10	RJD - IAU (500 sh: \$8,460)	X			9/12/12	X								
11	RJD - XLU (182 sh: \$6,399)		X		12/21/12	X								
12	RJD - XLU (194 sh: \$6,823)		X		12/27/12	X								

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

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Click...to create an additional page for this part.

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Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	Transaction Type (x)			Amount of Transaction (x)								
		Purchase	Sale	Exchange	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	Over \$50,000,000
1 J	Evolution - VWO (37 sh: \$1,525)	X			2/1/1X	X		E	X	A	M	P	L
2 J	DBLTX (305.1 sh: \$3,408)		X		1/27/1X		X	E	X	A	M	P	L
3 J	JSOSX (2.8 sh: \$32) (amount of transaction less than \$1,001)	X			1/23/12	X							E
4 J	RNDLX (751.7 sh: \$8,193)	X			2/13/12	X							
5 J	IAU (6 sh: \$100) (amount of transaction less than \$1,001)	X			2/15/12								
6 J	CSJ (8 sh: \$838) (amount of transaction less than \$1,001)	X			2/15/12								
7 J	DBO (169 sh: \$4,904)	X			2/15/12	X							
8 J	SPLV (122 sh: \$3,154)	X			2/15/12	X							
9 J	XLU (99 sh: \$3,446)	X			2/15/12	X							
10 J	VIG (55 sh: \$3,120)	X			2/15/12	X							
11 J	VWO (71 sh: \$3,072)	X			2/15/12	X							
12 J	IAU (61 sh: \$986) (amount of transaction less than \$1,001)		X		3/20/12								

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
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PART IV. TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	Transaction Type (x)			Transaction Date (Mo., Day, Yr.)	Amount of Transaction (x)								
		Purchase	Sale	Exchange		\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
1 J	DBLTX (340 sh: \$3,798)	X			2/1/1X	X		E	X	A	M	P	L	E
2 J	RNDLX (146.9 sh: \$1,606)	X	X		1/27/1X		X	E	X	A	M	P	L	E
3 J	CSJ (9 sh: \$942) (amount of transaction less than \$1,001)	X	X		4/5/12	X								
4 J	VQT (12 sh: \$2,580)	X			4/5/23	X								
5 J	DBP (18 sh: \$981) (amount of transaction less than \$1001)	X			4/17/12									
6 J	DBO (54 sh: \$1,434)	X			5/16/12	X								
7 J	LQD (9 sh: \$1,040)	X			5/22/12	X								
8 J	PCY (38 sh: \$1,053)	X			5/29/12	X								
9 J	VQT (12 sh: \$1,547)	X			5/29/12	X								
10 J	IAU (160 sh: \$2,708)	X			6/19/12	X								
11 J	XLU (58 sh: \$2,041)	X			9/12/12	X								
12 J	XLU (62 sh: \$2,182)	X			12/21/12	X								
		X			12/27/12	X								

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
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PART IV. TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	Transaction Type (x)			Transaction Date (Mo., Day, Yr.)	Amount of Transaction (x)										
		Purchase	Sale	Exchange		\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
1 S	Evolution - SEP - VWO (122 sh: \$5,028)	X			2/1/1X	X			E	X	A	M	P	L	E	
2 S	XLU (190 sh: \$6,681)		X		1/27/1X				X	E	X	A	M	P	L	E
3 S	XLU (200 sh: \$7,034)		X		12/21/12	X										
4 S	HDCSX (506.9 sh: \$8,603)		X		12/27/12	X										
5 S	IAU (515 sh: \$8,713)	X			9/11/12	X										
6 S	VQT (39 sh: \$5,010)	X			9/12/12	X										
7 S	VQT (65 sh: \$8,384)	X			6/19/12	X										
8 S	DBP (60 sh: \$3,270)		X		5/16/12	X										
9 S	HDCSX (51.3 sh: \$849) (amount of transaction less than \$1,001)	X			5/18/12											
10 S	DBO (176 sh: \$4,663)		X		5/22/12	X										
11 S	LQD (29 sh: \$3,353)		X		5/29/12	X										
12 S	PCY (129 sh: \$3,575)		X		5/29/12	X										

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
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PART IV. TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

	S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	Transaction Type (x)			Transaction Date (Mo., Day, Yr.)	Amount of Transaction (x)									
			Purchase	Sale	Exchange		\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000
1	S	DBLTX (783.8 sh: \$8,755)		X		2/1/1X	X		E	X	A	M	P	L	E	
2	S	RNDLX (474.5 sh: \$5,186)		X		1/27/1X			X	E	X	A	M	P	L	E
3	S	CSJ (33 sh: \$3,456)		X		4/17/12										
4	S	IAU (205 sh: \$3,319)		X		3/20/12										
5	S	DBLTX (383 sh: \$4,278)		X		2/13/12										
6	S	HDCSX (220 sh: \$3,996)		X		2/13/12										
7	S	RNDLX (779 sh: \$8,491)		X		2/13/12										
8	S	TGMNX (902 sh: \$9155)		X		2/13/12										
9	S	LQD (37 sh: \$4,292)		X		2/15/12										
10	S	DBO (176 sh: \$5,107)		X		2/15/12										
11	S	PCY (109 sh: \$3,012)		X		2/15/12										
12	S	SPLV (121 sh: \$3,129)		X		2/15/12										

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
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PART IV. TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

	S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	Transaction Type (x)			Amount of Transaction (x)									
			Purchase	Sale	Exchange	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,001 - \$5,000,000	\$1,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	
1	S	XLU (102 sh: \$3,550)		X		2/1/1X		X		E	X	A	M	P	L
2	S	VIG (46 sh: \$2,610)		X		1/27/1X			X	E	X	A	M	P	L
3	S	VWO (74 sh: \$3,202)		X		2/15/12	X								E
4						2/15/12	X								
5															
6															
7															
8															
9															
10															
11															
12															

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
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PART V. GIFTS

Report the source, brief description and value of all gifts aggregating more than \$350 in value received by you, your spouse, or your dependent child, (See p.3 CONTENTS OF REPORTS Part B of Instructions), from each source. Gifts with a value of \$140 or less need not be aggregated towards the disclosure threshold. "Gift" is defined in the Instructions.

Exclude: (1) Bequests and other forms of inheritance; (2) Political campaign contributions; (3) Communications to your offices including subscriptions to newspapers and periodicals; (4) Consumable products provided by home state businesses to your offices, if those products are intended for consumption by persons other than yourself; (5) Gifts received prior to your Federal employment; (6) Gifts to your spouse or dependent child totally independent of his or her relationship to you; (7) Gifts from relatives; (8) Personal hospitality of any individual (see instructions); (9) meals and beverages unless consumed in connection with a gift of overnight lodging; and (10) Food, lodging, transportation, and entertainment provided by a foreign government within a foreign country, or by federal, state, D.C., or local governments.

Name of Income Source		Address of Source	Dates and Brief Description	Gift Value
Example:	Mr. John Q. Smith	Anytown, VA	EXAMPLE	August 12, 201X, Silver platter - Ethics Committee wedding waiver granted
1	Not applicable			\$400
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				

Note: The Senate Gift Rule prohibits most gifts from lobbyists and foreign agents and most gifts from other sources in excess of \$49.99.

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PART VI. REIMBURSEMENTS

Report necessary travel related expenses from each source aggregating more than \$350 in value during the reporting period received by you, your spouse and/or dependent child in connection with your provision of services at a speaking engagement, fact-finding event, or other event (personal campaign, or otherwise). Disclosure is required regardless of whether those expenses were **reimbursed to the individual or paid directly by the sponsoring organization**. A description of the itinerary, including date(s) and the nature of expenses is required. If you are reimbursed for more than one trip from the same sponsor (and the trips added together are worth more than \$350), then you must report each trip individually, even if the reimbursement for each separate trip does not equal more than \$350. Report Gifts of travel in Part V.

Exclude: Travel related expenses provided by federal, state, D.C., and local governments; or by a foreign government; reimbursements from campaign funds which are reported to the FEC; reimbursements to a spouse or dependent child totally independent of his or her relationship to you; and reimbursements reported to the Office of Public Records pursuant to Senate Rule 35. For further information, see Instructions.

Name of Income Source		Address of Source	Dates and Brief Description
Example:	All States Company	Maintown, TX EXAMPLE	<i>Roundtrip air travel from Washington, D.C. to Maintown, TX and lunch for self and spouse for speaking engagement: May 1-3, 201X</i> EXAMPLE
1	Not applicable		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			

Click...to create an additional page for this part.

PART VII. LIABILITIES

Report liabilities over \$10,000 owed by you, your spouse, or dependent child (See p.3, CONTENTS OF REPORTS, Part B of Instructions), to any one creditor at any time during the reporting period. Check the highest amount owed during the reporting period. Exclude: (1) mortgages on your personal residences unless rented (except for Senators); (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities owed to certain relatives listed in Instructions. See Instructions for reporting revolving charge accounts.

Name of Creditor		Address	Type of Liability	Date Incurred	Interest Rate	Discount Points Paid for Mortgage (Senators Only)	Term if Applicable	Category of Amount of Value (x)				
Example: S, DC, or J	First District Bank	Wash., DC	Mortgage on undeveloped land	1992	13%	1 pt	25 yrs		X	E	X	M
	(J) John Jones	Wash., DC	Promissory Note	2000	10%	n/a	On dmd		X	E	X	P
1	Bank of Springfield	Springfield, IL	Mortgage (pre-Refi) - Springfield, IL	2012	5.48	n/a	30 yr	X				L
2	Bank of Springfield (\$54,018)	Springfield, IL	Mortgage (after Refi) – Springfield, IL	2012	3.475	n/a	30 yr	X				E
3	Fifth-Third (\$189,325)	Cincinnati, OH	Mortgage -- Chicago, IL	2010	4.375	n/a	30 yr				X	
4	Heartland Credit Union (\$19,390)	Springfield, IL	Auto Loan	2010	2.24	n/a	5 yr	X				
5												
6												
7												
8												
9												
10												
11												
12												

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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PART VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT

Report any positions held by you during the applicable reporting period whether compensated or not. Positions include, but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Both the year and month must be reported for the period of time that the position was held.

Exclude: Positions with federal government, religious, social, fraternal, or political entities, and those solely of an honorary nature.

Name of Organization		Address (City, State)	Type of Organization	Position Held	From (Mo/Yr)	To (Mo/Yr)
Example:	National Assn. of Rock Collectors	NY, NY	EXAMPLE	Non-profit education	President	6/91
	Jones & Smith	Hometown, USA	EXAMPLE	Law Firm	Partner	Present
1	Not applicable				7/96	11/1X
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

Compensation in excess of \$200 from any position must be reported in Part II.

Click...to create an additional page for this part.

PART IX. AGREEMENTS OR ARRANGEMENTS

Report your agreements or arrangements for future employment (including agreements with a publisher for writing a book or sale of other intellectual property), leaves of absence, continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan. See Instructions regarding the reporting of negotiations for any of these arrangements or benefits.

	Status and Terms of any Agreement or Arrangement	Parties	Date
Example:	<p>Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on services performed through 11/0X and retained pension benefits (diversified, independently managed, fully funded, defined contribution plan)</p> <p>Employment agreement with XYZ Co. to become Vice President of Government Relations. Terms of agreement include salary between \$50,001-\$100,000, signing bonus between \$2,501-\$5,000 and stock options</p>	<p>Jones & Smith, Hometown, USA EXAMPLE</p> <p>XYZ Co., Bethesda, MD EXAMPLE</p>	<p>1 / 94</p> <p>1 / 1X</p>
1	Not applicable		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

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PART X. COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

FIRST TIME FILERS ONLY: (Except Candidate Reports - All Candidate Reports Must Include Part X If Applicable)

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any non-profit organization when you directly provided the services to the clients and/or customers of the firm that generated a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Name of Source		Address of Source	Brief Description of Duties	
Example:	Jones & Smith Metro University (client of Jones & Smith)	Hometown, TX Moneytown, USA	Legal Services Legal Services in connection with university construction	EXAMPLE EXAMPLE
1	not applicable			
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
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15				

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1040 U.S. Individual Income Tax Return (99)

2012

OMB No. 1545-0074

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

For the year Jan. 1-Dec. 31, 2012, or other tax year beginning
Your first name and initial

RICHARD J.

If a joint return, spouse's first name and initial

LORETTA M.

Home address (number and street). If you have a P.O. box, see instructions.

SPRINGFIELD, IL

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
2 Married filing jointly (even if only one had income)
3 Married filing separately. Enter spouse's SSN above
and full name here. ►

Apt. no.

Qualifying widow(er) with dependent child

Presidential Election Campaign

Make sure the SSN(s) above
and on line 6c are correct.

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

Check only one box.

Exemptions

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

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 _____

No. of children on line 6c who:
● lived with you
● did not live with you due to divorce
or separation (see instructions)

Add numbers on lines above ► 2

d Total number of exemptions claimed

7 Wages, salaries, tips, etc. Attach Form(s) W-2 _____ 7 150,406.
8a Taxable interest. Attach Schedule B if required 8a 638.
b Tax-exempt interest. Do not include on line 8a
9a Ordinary dividends. Attach Schedule B if required
b Qualified dividends
10 Taxable refunds, credits, or offsets of state and local income taxes
11 Alimony received
12 Business income or (loss). Attach Schedule C or C-EZ
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ►
14 Other gains or (losses). Attach Form 4797
15a IRA distributions
16a Pensions and annuities 15a 9b 860. 10
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E
18 Farm income or (loss). Attach Schedule F
19 Unemployment compensation
20a Social security benefits 20a 50,585. b Taxable amount
21 Other income. List type and amount
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ► 22 286,959.
23 Educator expenses 23.
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2108 or 2108-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. 4,811.
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 IRA deduction 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.
37 Subtract line 36 from line 22. This is your adjusted gross income ► 37 282,148.

210801 01-11-13 LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

RICHARD J. & LORETTA M. DURBIN**Tax and Credits**

38 Amount from line 37 (adjusted gross income) **38** **282,148.**

39a Check if:

- People who check any box on line 39a or 39b or who can be claimed as a dependent.
 - All others: Single or Married filing separately, \$5,950
- b** If your spouse itemizes on a separate return or you were a dual-status alien, check here **39a** **2**
- 40** Itemized deductions (from Schedule A) or your standard deduction (see left margin) **40** **48,014.**

- 41** Subtract line 40 from line 38 **41** **2,347,134.**
- 42** Exemptions. Multiply \$3,800 by the number on line 6d **42** **7,600.**
- 43** Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- **43** **226,534.**

44 Tax. Check if any from:

a Form(s) 8814 **b** Form 4972 **c** 962 election

- 45 Alternative minimum tax. Attach Form 6251** **45** **48,147.**

46 Add lines 44 and 45 **46** **2,615.****47 Foreign tax credit. Attach Form 1116 if required** **47** **51.****48 Credit for child and dependent care expenses. Attach Form 2441** **48****49 Education credits from Form 8863, line 19** **49****50 Retirement savings contributions credit. Attach Form 8880** **50****51 Child tax credit. Attach Schedule 8812, if required** **51****52 Residential energy credits. Attach Form 5695** **52****53 Other credits from Form: a** **3800 b** **8801 c** **54 Add lines 47 through 53. These are your total credits** **54** **51.****55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-** **55** **50,711.****56 Self-employment tax. Attach Schedule SE** **56** **8,365.****57 Unreported social security and Medicare tax from Form: a** **4137 b** **8919****58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required** **58****59a Household employment taxes from Schedule H** **59a****b First-time homebuyer credit repayment. Attach Form 5405 if required** **59b****60 Other taxes. Enter code(s) from instructions** **60****61 Add lines 55 through 60. This is your total tax** **54****payments** **62 Federal income tax withheld from Forms W-2 and 1099** **62** **35,771.****63 2012 estimated tax payments and amount applied from 2011 return** **63** **21,680.****64a Earned income credit (EIC)** **64a****b Nontaxable combat pay election** **64b****65 Additional child tax credit. Attach Schedule 8812** **65****66 American opportunity credit from Form 8863, line 8** **66****67 Reserved** **67****68 Amount paid with request for extension to file** **68****69 Excess social security and tier 1 RRTA tax withheld** **69****70 Credit for federal tax on fuels. Attach Form 4136** **70****71 Credits from Form: a** **2439 b** **Received** **8801 d** **8885** **71****72 Add lines 62, 63, 64a, and 65 through 71. These are your total payments** **72****73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid** **73****74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here** **74a****b Routing** **c Type:** **Checking** **Savings** **d Account** **Number** **See instructions.****75 Amount of line 73 you want applied to your 2013 estimated tax** **75****76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions** **76****77 Estimated tax penalty (see instructions)** **77****Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Designee's name **COPY** **Phone no.** **Account no.** **Personal identification number (PIN)**

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true.

Your signature **COOPY** Date **Your occupation**

Joint return? **Keep a copy of your return? See instructions. Spouse's signature. If a joint return, both must sign. For your records.**

3 Print/type preparer's name **Paid Preparer Use Only** Firm's name **LOBBYIST** Date **Check** **if self-employed** Date **Check** **if PTIN** If the IRS sent you an identity Protection PIN, enter it here **Firm's EIN** **Phone no.**

SCHEDULE A
(Form 1040)

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

► Information about Schedule A and its separate instructions is at www.irs.gov/form1040.
► Attach to Form 1040.

OMB No. 1545-0074
2012
Attachment
Sequence No. 07

Itemized Deductions

RICHARD J. & LORETTA M. DURBIN

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

Medical
and
1 Medical and dental expenses (see instructions) **1**

Dental
2 Enter amount from Form 1040, line 38 **2**

Expenses
3 Multiply line 2 by 7.5% (.075) **3**

4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- **4**

Taxes You Paid 5 State and local (check only one box):

a Income taxes, or

b General sales taxes

SEE STATEMENT 6.

7 Personal property taxes **5**

8 Other taxes. List type and amount ► **6**

OTHER REAL ESTATE TAXES

9 Add lines 5 through 8 **7**

10 Home mortgage interest and points reported to you on Form 1098 **10**

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 ► **9**

11 **10,097.**

12 **5,053.**

13 **4,496.**

14 **4,496.**

15 Add lines 10 through 14 **15**

16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions **16**

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**

19 Add lines 16 through 18 **19**

20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) **20**

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**

23 Other expenses - investment, safe deposit box, etc. List type and amount ► **23**

U.S. CONGRESS TRAVEL EXP **3,000.**

- SEE STATEMENT 5 **24**

- Add lines 21 through 23 **25**

Enter amount from Form 1040, line 38 **25**

Multiply line 25 by 2% (.02) **26**

Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- **27**

Other - from list in instructions. List type and amount ► **28**

Other Miscellaneous Deductions **29**

Subtract line 29 from line 28. Also, enter this amount on Form 1040, line 40 **29**

If you elect to itemize deductions even though they are less than your standard deduction, check here ► **30**

SCHEDULE B

(Form 1040A or 1040)

Department of the Treasury

(99) Internal Revenue Service

Name(s) shown on return

Interest and Ordinary Dividends**2012**

Attachment Sequence No. 08

OMB No. 1545-0074

► Attach to Form 1040A or 1040.

► Information about Schedule B (Form 1040A or 1040) and its instructions is at www.irs.gov/form1040.

Your social security number

RICHARD J. & LORETTA M. DURBIN**Part I**

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the buyer's social security number and address ►

CHARLES SCHWAB & CO**CONGRESSIONAL FEDERAL CREDIT UNION****CREDIT UNION ONE****161.477.****Note.** If you received a Form 1099-INT, Form 1099-QID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.**1****Amount**

1	161.477.
2	538.
3	638.
4	293.
5	1,718.
6	108.

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.**2 Add the amounts on line 1**

3 Excludable interest on series EE and I U.S. savings bonds issued after 1989.

4 Subtract line 3 from line 2. Enter the result here and on Form 1040A or Form 1040, line 8a ►**Note.** If line 4 is over \$1,500, you must complete Part III.**Part II****Ordinary****Dividends****CHARLES SCHWAB & CO****MANULIFE FINANCIAL CORPORATION****PERSHING, LLC****PFIZER****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.**5 List name of payer ►****CHARLES SCHWAB & CO****MANULIFE FINANCIAL CORPORATION****PERSHING, LLC****PFIZER****Amount****638.****293.****1,718.****108.****6 Add the amounts on line 5. Enter the total here and on Form 1040A or Form 1040, line 9a** ►**6 2,119.****Note.** If line 6 is over \$1,500, you must complete Part III.**Part III Foreign Accounts and Trusts****7a** At any time during 2012, 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

If "Yes," are you required to file Form TD F 90-22.1 to report that financial interest or signature authority? See

Form TD F 90-22.1 and its instructions for filing requirements and exceptions to those requirements

b If you are required to file Form TD F 90-22.1, enter the name of the foreign country where the financial account is located ►

8 During 2012, 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

00000623964

Interest and Dividend Summary

Name: RICHARD J. & LORETTA M. DURBIN

FEIN/SSN:

Payer	Interest	Interest on U.S. Savings Bonds	Tax-Exempt Interest	Original Issue Discount (OID)	Ordinary Dividends	Qualified Dividends	Capital Gain Distributions	Federal Income Tax Withheld	State Tax Withheld	Foreign Tax Paid
CHARLES SCHWAB & CO										
CONGRESSIONAL FEDERAL CREDIT										
UNION	161.									
CREDIT UNION ONE	477.									
CHARLES SCHWAB & CO										
MANULIFE FINANCIAL CORPORATION					293.	293.		82.		44.
PERSHING, LLC					1,718.	459.	4.			7.
PFIZER					108.	108.				
TOTALS	638.				2,119.	860.	4.	82.		51.

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

▼ For information on Schedule C and its instructions, go to www.irs.gov/schedulec.
▼ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

LORETTA M. DURBIN

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

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

E GOVERNMENT AFFAIRS CONSULTING, LLC

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

SPRINGFIELD, IL

G Accounting method:

(1) Cash

(2) Accrual

(3) Other (specify) ▶

H If you started or acquired this business during 2012, check here

►

I Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions)

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

Part I Income

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

► □

1

78,106.

2 Returns and allowances (see instructions)

► □

2

78,106.

3 Subtract line 2 from line 1

► □

3

78,106.

4 Cost of goods sold (from line 42)

► □

4

78,106.

5 Gross profit. Subtract line 4 from line 3

► □

5

78,106.

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

► □

6

78,106.

7 Gross income. Add lines 5 and 6

► □

7

78,106.

Part II Expenses

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

		Enter expenses for business use of your home only on line 30.
1	Advertising	8 1,500.
2	Car and truck expenses (see instructions)	9
3	Commissions and fees	10 350.
4	Contract labor (see instructions)	11
5	Depreciation	12
6	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13
7	Employee benefit programs (other than on line 19)	14
8	Insurance (other than health)	15
9	Interest	16
10	Mortgage (paid to banks, etc.)	17 a
11	Other	17 b
12	Legal and professional services	17
13	Total expenses before expenses for business use of home. Add lines 8 through 27a	28 1,508.
14	Tentative profit or (loss). Subtract line 28 from line 7	29 9,998.
15	Expenses for business use of your home. Attach Form 8829. Do not report such expenses elsewhere	30 68,108.
16	Net profit or (loss). Subtract line 30 from line 29.	31 68,108.
17	• If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. • If a loss, you must go to line 32.	
18	If you checked the box on line 1, see instructions. Estates and trusts, enter on Form 1041, line 3.	
19	If you have a loss, check the box that describes your investment in this activity (see instructions).	
20	• 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.	
21	UHA For Paperwork Reduction Act Notice, see separate instructions.	
22	O O	

Social security number (SSN)
B Enter code from instructions
D Employer ID number (EIN). (see instr.)
► 541600

OMB No. 1545-0074
2012
Attachment
Sequence No. 09

220001
12-28-12

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory:

a Cost b Lower of cost or market c Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation

Yes No

- 35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation
- | | |
|----|--|
| 35 | |
|----|--|
- 36 Purchases less cost of items withdrawn for personal use
- | | |
|----|--|
| 36 | |
|----|--|
- 37 Cost of labor. Do not include any amounts paid to yourself
- | | |
|----|--|
| 37 | |
|----|--|
- 38 Materials and supplies
- | | |
|----|--|
| 38 | |
|----|--|
- 39 Other costs
- | | |
|----|--|
| 39 | |
|----|--|

40 Add lines 35 through 39

41 Inventory at end of year

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

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 2012, 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.**TELEPHONE**

672.

SUBSCRIPTIONS, DUES AND CONFERENCE FEES

1,317.

TRAVEL

100.

MEALS

100.

ENTERTAINMENT

100.

DEPENSES

100.

OTHER

100.

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

48

1,989.

SCHEDULE D

(Form 1040)

Department of the Treasury
Internal Revenue Service (89)

Name(s) shown on return

OMB No. 1545-0074

2012Attachment Sequence No. **12****Capital Gains and Losses**

► Attach to Form 1040 or Form 1040NR.

► Use Form 8949 to list your transactions for lines 1, 2, 3, 8, 9, and 10.

Your social security number

RICHARD J. & LORETTA M. DURBIN**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**Complete Form 8949 before completing line 1, 2, or 3.
This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price) from Form(s) 8949, Part I, line 2, column (d)	(e) Cost or other basis from Form(s) 8949, Part I, line 2, column (e)	(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)
1 Short-term totals from all Forms 8949 with box A checked in Part I	2,490.	2,570.		<80. >
2 Short-term totals from all Forms 8949 with box B checked in Part I	5,349.	5,301.		48.
3 Short-term totals from all Forms 8949 with box C checked in Part I				

- 4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 **STMT. 7**
- 5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss

Carryover Worksheet in the instructions

Net short-term capital gain or (loss). Combine lines 1 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

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

Complete Form 8949 before completing line 8, 9, or 10.

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

	(d) Proceeds (sales price) from Form(s) 8949, Part II, line 4, column (d)	(e) Cost or other basis from Form(s) 8949, Part II, line 4, column (e)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 4, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8 Long-term totals from all Forms 8949 with box A checked in Part II				
9 Long-term totals from all Forms 8949 with box B checked in Part II	3,167.	3,097.		70.
10 Long-term totals from all Forms 8949 with box C checked in Part II	40,749.	500.		40,249.
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 8			11	3.
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions SEE STATEMENT 9			13	4.
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 8 through 14 in column (h). Then go to Part III on page 2 For Paperwork Reduction Act Notice, see your tax return instructions.			15	40,326.

Schedule D (Form 1040) 2012

220511
12-31-12

16 Combine lines 7 and 15 and enter the result

16 **22,691.**

- 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?

X Yes. Go to line 18.

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

19 _____

20 Are lines 18 and 19 both zero or blank?

X 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). Do not complete lines

21 and 22 below.

- No. Complete the **Schedule D Tax Worksheet** in the instructions. Do not 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:

- 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?

- 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).

- No. Complete the rest of Form 1040 or Form 1040NR.

Form **8949****Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (89)► 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 1, 2, 3, 8, 9, and 10 of Schedule D.

Name(s) shown on return

2012Attachment Sequence No. **12A****RICHARD J. & LORETTA M. DURBIN**

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

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

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
 (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
 (C) Short-term transactions not reported to you on Form 1099-B

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	(f) 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) and combine the result with column (g)
					(f) Code(s)	(g) Amount of adjustment	
POWERSHARES DB MULTI SECTOR COMMODITY TR POWER SHARES DB							
OIL SELECT SECTOR SPDR T R UTILS	02/10/12 05/17/12 02/10/12 12/21/12		1,434. 1,056. 1,043.	1,527. 1,043. 13.			<93.>

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.

- (1) 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 1 (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ► **2,490.** **2,570.** <80.>
- (2) 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**Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

► 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 1, 2, 3, 8, 9, and 10 of Schedule D.

2012Attachment
Sequence No. 12A**RICHARD J. & LORETTA M. DURBIN**

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

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

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.

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> | (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS |
| <input checked="" type="checkbox"/> | (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS |
| <input type="checkbox"/> | (C) Short-term transactions not reported to you on Form 1099-B |

**1. (a) Description of property
(Example: 100 sh. XYZ Co.)**

**Date acquired
(Mo., day, yr.)**

**Date sold or
disposed
(Mo., day, yr.)**

**Proceeds
(sales price)**

**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.**

(f)

(g)

(h)
Gain or (loss).

**Subtract column (e)
from column (d) and
combine the result
with column (g)**

**PERSHING, LLC ST
- SEE ATTACHED**

5,346.

5,301.

45.

ISHARES COMEX

GOLD T R ISHARES VARIOUS

12/31/12

3.

3.

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.

① Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your

② Schedule D, line 1 (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)

► **5,349.** **5,301.**

48.

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.

223011 01-02-13 LHA For Paperwork Reduction Act Notice, see separate instructions

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

RICHARD J. & LORETTA M. DURBIN
[REDACTED]

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

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

You must check Box A, B, or C 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.

(A) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS

(B) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

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

3 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (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) and combine the result with column (g)
					(f) Code(s)	(g) Amount of adjustment	
SELECT SECTOR							
SPDR T R UTILS	VARIOUS	12/21/12	3,167.	3,097.		70.	
N							
O							
P							
Q							
R							
S							
T							
U							
V							
W							
X							
Y							
Z							
④	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 8 (if Box A above is checked), line 9 (if Box B above is checked), or line 10 (if Box C above is checked) ►		3,167.	3,097.		70.	

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.)

RICHARD J. & LORETTA M. DURBIN

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

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

You must check **Box A, B, or C** 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.

- (A) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS
 (B) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
 (C) Long-term transactions not reported to you on Form 1099-B

3	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	(f) 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) and combine the result with column (g)
GOVERNMENT	AFFAIRS	SPECIALISTS INC	VARIOUS	06/30/12	40,749.	500.	40,249.
1	2	3	4				
5	6	7	8				
9	10	11	12				
13	14	15	16				
17	18	19	20				
21	22	23	24				
25	26	27	28				
29	30	31	32				
33	34	35	36				
37	38	39	40				
41	42	43	44				
45	46	47	48				
49	50	51	52				
53	54	55	56				
57	58	59	60				
61	62	63	64				
65	66	67	68				
69	70	71	72				
73	74	75	76				
77	78	79	80				
81	82	83	84				
85	86	87	88				
89	90	91	92				
93	94	95	96				
97	98	99	100				

- 4** 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 8 (if Box A above is checked), line 9 (if Box B above is checked), or line 10 (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.

Qualified Dividends and Capital Gain Tax Worksheet - Line 44

Keep for Your Records

Name(s) shown on return

RICHARD J. & LORETTA M. DURBIN

Your SSN

Before you begin:

✓ See the instructions for line 44 to see if you can use this worksheet to figure your tax.

✓ Before completing this worksheet, complete Form 1040 through line 43.

If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on line 13 of Form 1040.

1. Enter the amount from Form 1040, line 43. However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet.

2. Enter the amount from Form 1040, line 9b*. 2. 860. 1. 226,534.

3. Are you filing Schedule D?*

Yes. Enter the smaller of line 15 or 16 of

Schedule D. If either line 15 or line 16 is

blank or a loss, enter -0-

No. Enter the amount from Form 1040, line 13

4. Add lines 2 and 3

4. 23,551.

5. If filing Form 4952 (used to figure investment

interest expense deduction), enter any amount

from line 4g of that form. Otherwise, enter -0- 5. 0.

6. Subtract line 5 from line 4. If zero or less, enter -0-

6. 23,551.

7. Subtract line 6 from line 1. If zero or less, enter -0-

7. 202,983.

8. Enter:

\$ 35,350 if single or married filing separately,

\$ 47,350 if married filing jointly or qualifying widow(er).

8. 70,700.

9. Enter the smaller of line 1 or line 8

9. 70,700.

10. Enter the smaller of line 7 or line 9

10. 70,700.

11. Subtract line 10 from line 9. This amount is taxed at 0%

11. 0.

12. Enter the smaller of line 1 or line 6

12. 23,551.

13. Enter the amount from line 11

13. 0.

14. Subtract line 13 from line 12

14. 23,551.

15. Multiply line 14 by 15% (.15)

15. 3,533.

16. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to

figure this tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet

16. 44,614.

17. Add lines 15 and 16

17. 48,147.

18. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to

figure this tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet

18. 51,663.

19. Tax on all taxable income. Enter the smaller of line 17 or line 18. Also include this amount on Form

1040, line 44. If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44.

Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet

19. 48,147.

* If you are filing Form 2555 or 2555-EZ, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

0000062597

RICHARD J. & LORETTA M. DURBIN

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 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 if foreign corporation

(c) Check if foreign partnership

(d) Employer identification number

(e) Check if any amount is not at risk

TPA PB	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
P			0.	
B			0.	
C				
D				
a Totals				
b Totals				
1 Add columns (g) and (j) of line 29a				
1 Add columns (f), (h), and (i) of line 29b				
? 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				

(b) Employer identification number

43

Part III Income or Loss From Estates and Trusts

33 (a) Name _____

(b) Employer identification number

A 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	

(b) Employer identification number

42

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

38 (a) Name _____

(b) Employer identification number

43

Part V T	Summary * ENTIRE DISPOSITION OF PASSIVE ACTIVITY			
	(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		

39

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

42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income

42

43 Reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1

43

44 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), box 14, code F (see instructions)

44

45 Reconciliation for real estate professionals. If you were a real estate professional (see Instructions),

45

46 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

46

2012 Income from Passthroughs

POWERSHARES DB PRECIOUS METALS FUND

I.D. NUMBER: [REDACTED]

TYPE: PUBLICLY TRADED PARTNERSHIP

ACTIVITY INFORMATION:

POWERSHARES DB PRECIOUS METALS FUND

100% DISPOSITION

OTHER K-1 INFORMATION:

SECTION 1256 CONTRACTS AND STRADDLES
DEDUCTIONS RELATED TO PORTFOLIO INCOME
INVESTMENT EXPENSE

37.
3.
3.

2012 Income from Passthroughs

POWERSHARES DB OIL FUND
I.D. NUMBER: [REDACTED]
TYPE: PUBLICLY TRADED PARTNERSHIP

ACTIVITY INFORMATION:

POWERSHARES DB OIL FUND

100% DISPOSITION

OTHER K-1 INFORMATION:

SECTION 1256 CONTRACTS AND STRADDLES
DEDUCTIONS RELATED TO PORTFOLIO INCOME
INVESTMENT EXPENSE

2012 Income from Passthroughs

SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

OTHER K-1 INFORMATION:

SECTION 1256 CONTRACTS AND STRADDLES
DEDUCTIONS RELATED TO PORTFOLIO INCOME

INVESTMENT INTEREST EXPENSE:

INVESTMENT EXPENSE

6.

5.
6.

0000623977

SCHEDULE SE**(Form 1040)**Department of the Treasury
Internal Revenue Service
(99)

OMB No. 1545-0074

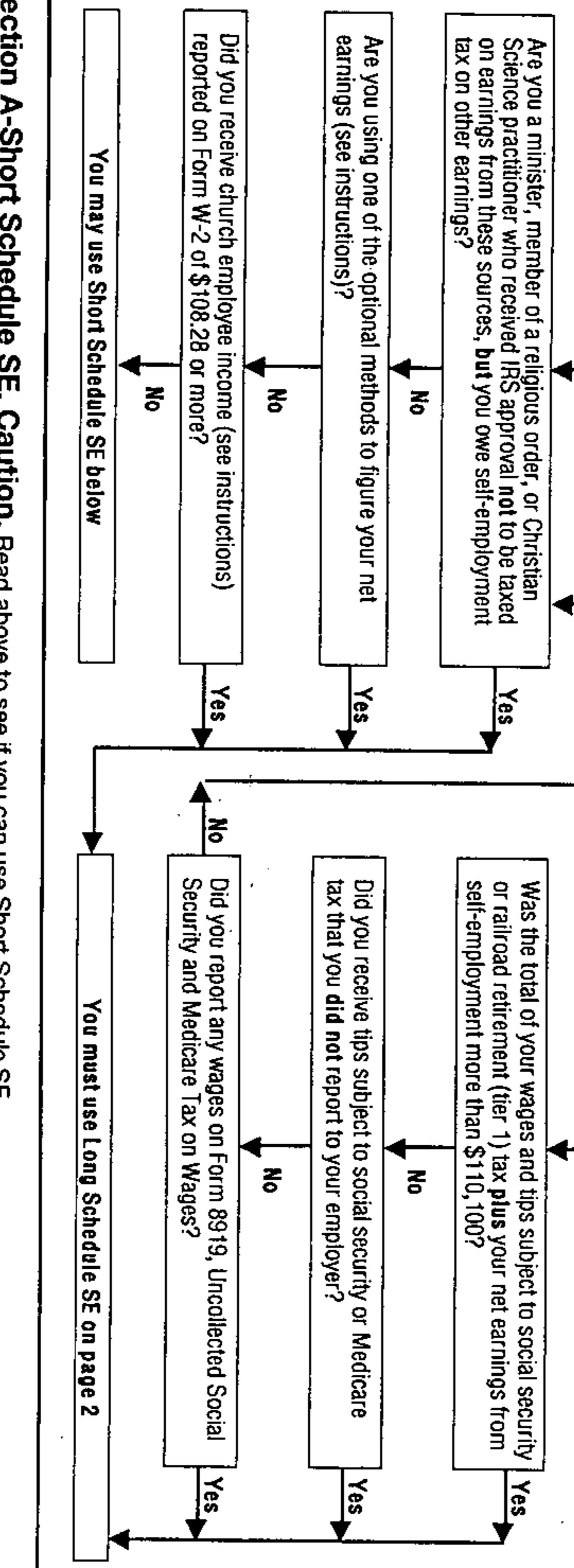
2012Attachment
Sequence No. 17

Name of person with self-employment income (as shown on Form 1040)

Social security number of
person with self-employment
income**Before you begin:** To determine if you must file Schedule SE, see the instructions.**May I Use Short Schedule SE or Must I Use Long Schedule SE?**

Note. Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE in the instructions.

► Attach to Form 1040 or Form 1040NR.

**Section A-Short Schedule SE. Caution.** Read above to see if you can use Short Schedule SE.

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

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 Y

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 **STM**T 10

3 Combine lines 1a, 1b, and 2

4 Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; do not file this schedule unless you have an amount on line 1b

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

5 Self-employment tax. If the amount on line 4 is:

- \$110,100 or less, multiply line 4 by 13.3% (.133). Enter the result here and on Form 1040, line 56, or Form 1040NR, line 54

- More than \$110,100, multiply line 4 by 2.9% (.029). Then, add \$11,450.40 to the result.

Enter the total here and on Form 1040, line 56, or Form 1040NR, line 54

- \$14,643.30 or less, multiply line 5 by 57.51% (.5751)
- More than \$14,643.30, multiply line 5 by 50% (.50) and add \$1,100 to the result.

Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27

6 Deduction for employer-equivalent portion of self-employment tax.

- CO If the amount on line 5 is:
 - \$14,643.30 or less, multiply line 5 by 57.51% (.5751)
 - More than \$14,643.30, multiply line 5 by 50% (.50) and add \$1,100 to the result.

Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27

7A For Paperwork Reduction Act Notice, see your tax return instructions.

Form 6251

Form

Alternative Minimum Tax - Individuals

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on Form 1040 or Form 1040NR

Attachment
Sequence No. 32

2012

Your social security number

RICHARD J. & LORETTA M. DURBIN

Part I Alternative Minimum Taxable Income

- 1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)
- 2 Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38.
If zero or less, enter -0.
- 3 Taxes from Schedule A (Form 1040), line 9
- 4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line
- 5 Miscellaneous deductions from Schedule A (Form 1040), line 27
- 6 Skip this line. It is reserved for future use
- 7 Tax refund from Form 1040, line 10 or line 21
- 8 Investment interest expense (difference between regular tax and AMT)
- 9 Depletion (difference between regular tax and AMT)
- 10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount
- 11 Alternative tax net operating loss deduction
- 12 Interest from specified private activity bonds exempt from the regular tax
- 13 Qualified small business stock (7% of gain excluded under section 1202)
- 14 Exercise of incentive stock options (excess of AMT income over regular tax income)
- 15 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)
- 16 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)
- 17 Disposition of property (difference between AMT and regular tax gain or loss)
- 18 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)
- 19 Passive activities (difference between AMT and regular tax income or loss)
- 20 Loss limitations (difference between regular tax and AMT)
- 21 Circumstances (difference between regular tax and AMT)
- 22 Long-term contracts (difference between regular tax and AMT)
- 23 Mining costs (difference between regular tax and AMT)
- 24 Research and experimental costs (difference between regular tax and AMT)
- 25 Income from certain installment sales before January 1, 1987
- 26 Intangible drilling costs preference
- 27 Other adjustments, including income-based related adjustments
- 28 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately, see instructions.)

Part II Alternative Minimum Tax (AMT)

- | SEE STATEMENT | 11 | 29 | 52,055. |
|--|----|----------|---------|
| 30 Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0 here and on lines | 30 | 204,725. | |
| 31 • If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. | 31 | 50,762. | |
| • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 54 here. | 32 | 51. | |
| • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result. | 33 | 50,711. | |
| 32 Alternative minimum tax foreign tax credit (see instructions) | 34 | 48,096. | |
| 10 Tentative minimum tax. Subtract line 32 from line 31 | 35 | 2,615. | |
| 33 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). | | | |
| 34 If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J | | | |
| 35 AMT. Subtract line 34 from line 33. If zero or less, enter -0. Enter here and on Form 1040, line 45 | | | |
| LHA For Paperwork Reduction Act Notice, see your tax return instructions. | | | |

Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in the instructions.

- 36 Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for line 31 **36 204,725.**
- 37 Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter **37 23,551.**
- 38 Enter the amount from Schedule D (Form 1040), line 19 (as figured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter **38**
- 39 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as figured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter **39 23,551.**
- 40 Enter the smaller of line 36 or line 39 **40 23,551.**
- 41 Subtract line 40 from line 36 **41 181,174.**
- 42 If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result **42 47,229.**
- 43 Enter:
- \$70,700 if married filing jointly or qualifying widow(er),
 - \$35,350 if single or married filing separately, or
 - \$47,350 if head of household.
- 44 Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0 **44 202,983.**
- 45 Subtract line 44 from line 43. If zero or less, enter -0 **45 0.**
- 46 Enter the smaller of line 36 or line 37 **46 23,551.**
- 47 Enter the smaller of line 45 or line 46 **47**
- 48 Subtract line 47 from line 46 **48 23,551.**
- 49 Multiply line 48 by 15% (.15) **49 3,533.**
- If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50. **50 50**
- 51 Multiply line 50 by 25% (.25) **51**
- 52 Add lines 42, 49, and 51 **52 50,762.**
- 53 If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result **53 53,823.**
- 54 Enter the smaller of line 52 or line 53 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31 **54 50,762.**

Form 6781

Gains and Losses From Section 1256 Contracts and Straddles

OMB No. 1545-0644
2012
Attachment Sequence No. 82

Department of the Treasury
Internal Revenue Service
Name(s) shown on tax return

► Information about Form 6781 and its instructions is at www.irs.gov/form6781.

► Attach to your tax return.

RICHARD J. & LORETTA M. DURBIN

Check all applicable boxes

A Mixed straddle election

B Straddle-by-straddle identification election

C Mixed straddle account election

D Net section 1256 contracts loss election

Identifying number

Part I Section 1256 Contracts Marked to Market

(a) Identification of account	(b) (Loss)	(c) Gain
-------------------------------	------------	----------

1 FROM K-1 - POWERSHARES DB PRECIOUS METALS FUND		
2 Add the amounts on line 1 in columns (b) and (c)	2 (32)
3 Net gain or (loss). Combine line 2, columns (b) and (c)	3	37.
4 Form 1099-B adjustments. See instructions and attach statement	4	5.
5 Combine lines 3 and 4	5	5.

Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions.

6 If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be carried back. Enter the loss as a positive number

7 Combine lines 5 and 6

8 Short-term capital gain or (loss). Multiply line 7 by 40% (.40). Enter here and include on the appropriate line of Schedule D (see instructions)

9 Long-term capital gain or (loss). Multiply line 7 by 60% (.60). Enter here and include on the appropriate line of Schedule D (see instructions)

Part II Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components.

Section A - Gains and Losses From Straddles

(a) Description of property	(b) Date entered into or acquired	(c) Date closed out or sold	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Loss. If column (e) is more than (d), enter difference. Otherwise, enter -0-	(g) Unrecognized gain on offsetting positions	(h) Recognized loss. If column (f) is more than (g), enter difference. Otherwise, enter -0-
10	Mo. Day Yr.	Mo. Day Yr.					
11a							

11a Enter the short-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions)

b Enter the long-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions)

Section B - Gains From Straddles

(a) Description of property	(b) Date entered into or acquired	(c) Gross sales price	(d) Cost or other basis plus expense of sale	(e) Unrecognized gain. If column (d) is more than (c), enter difference. Otherwise, enter -0-
12	Mo. Day Yr.	Mo. Day Yr.		

13a Enter the short-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D

b Enter the long-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D

Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions)

(a) Description of property	(b) Date acquired	(c) Fair market value on last business day of tax year	(d) Cost or other basis as adjusted	(e) Unrecognized gain. If column (c) is more than (d), enter difference. Otherwise, enter -0-
13	Mo. Day Yr.	Mo. Day Yr.		
14				

CHECK ONLY ONE BOX:

- A. SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)
- B. MARRIED FILING JOINTLY
- C. MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE AT ANY TIME DURING 2012
- D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE FOR ALL OF 2012

- ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON FORM 1040, LINE 20A.
- | | | |
|---------------------------------------|---------|---------|
| IF YOU CHECKED BOX B: TAXPAYER AMOUNT | 29,500. | 50,585. |
| SPOUSE AMOUNT | 21,085. | 25,293. |
- ENTER ONE HALF OF LINE 1 ADD THE AMOUNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 14, 15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099 ENTER THE AMOUNT OF ANY EXCLUSIONS FROM FOREIGN EARNED INCOME, FOREIGN HOUSING, INCOME FROM U.S. POSSESSIONS, OR INCOME FROM PUERTO RICO BY BONA FIDE RESIDENTS OF PUERTO RICO THAT YOU CLAIMED ADD LINES 2, 3, AND 4. ADD THE AMOUNTS ON FORM 1040, LINES 23 THROUGH LINE 32, AND ANY WRITE-IN ADJUSTMENTS YOU ENTERED ON THE DOTTED LINE NEXT TO LINE 36.
- | | | |
|---|----------|----------|
| ENTER: \$25,000 IF YOU CHECKED BOX A OR D, OR \$32,000 IF YOU CHECKED BOX B, OR \$-0- IF YOU CHECKED BOX C. | 4,811. | 264,444. |
| | 269,255. | |
- SUBTRACT LINE 6 FROM LINE 5
- | | | |
|--------------------------------------|---------|----------|
| ENTER: \$12,000 IF YOU CHECKED BOX B | 12,000. | 220,444. |
| \$-0- IF YOU CHECKED BOX C | 12,000. | 6,000. |
| | 6,000. | 187,377. |
- SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0-. ENTER THE SMALLER OF LINE 9 OR LINE 10 ENTER ONE HALF OF LINE 12. ENTER THE SMALLER OF LINE 2 OR LINE 13. *MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-. *ADD LINES 14 AND 15. *MULTIPLY LINE 1 BY 85% (.85).
- | | |
|---|---------|
| ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON FORM 1040, LINE 20B | 42,997. |
|---|---------|

RICHARD J. & LORETTA M. DURBIN

FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 2

FEDERAL AMOUNT PAID	STATE WITHHELD	CITY TAX WITHHELD	TAX WITHHELD TAX W/H	FICA SDI	MEDICARE TAX
UNITED STATES SENATE 150,406.	25,736.	7,320.		4,624.	2,408.
TOTALS 150,406.	25,736.	7,320.		4,624.	2,408.

FORM 1040 QUALIFIED DIVIDENDS STATEMENT 3

ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
MANULIFE FINANCIAL CORPORATION SHING, LLC ZER 293. 1,718. 108.	293. 459. 108. 860.

AL INCLUDED IN FORM 1040, LINE 9B

FORM 1040 FEDERAL INCOME TAX WITHHELD STATEMENT 4

DESCRIPTION	AMOUNT
UNITED STATES SENATE MANULIFE FINANCIAL CORPORATION GOVERNMENT AFFAIRS SPECIALISTS INC	25,736. 82. 9,953.
OTAL TO FORM 1040, LINE 62	35,771.

SCHEDULE A MISCELLANEOUS DEDUCTIONS SUBJECT TO FLOOR STATEMENT 5

DESCRIPTION	AMOUNT
OTAL REFLECTS \$3000IRC 162(A) LIMIT ON DC LIVING EXPENSES FOR PUBLISHING ADVISORY FEES ROM K-1 - POWERSHARES DB PRECIOUS METALS FUND ROM K-1 - POWERSHARES DB OIL FUND OTAL TO SCHEDULE A, LINE 23	4,149. 798. 3. 3. 4,953.

RICHARD J. & LORETTA M. DURBIN

SCHEDULE A

STATE AND LOCAL INCOME TAXES

STATEMENT 6

DESCRIPTION

DESCRIPTION	AMOUNT
UNITED STATES SENATE	
ILLINOIS 1ST QTR ESTIMATE PAYMENTS	7,320.
ILLINOIS 2ND QTR ESTIMATE PAYMENTS	900.
ILLINOIS 3RD QTR ESTIMATE PAYMENTS	900.
ILLINOIS PRIOR YEAR BALANCE DUE AND EXTENSION PAYMENTS	900.
TOTAL TO SCHEDULE A, LINE 5	77.
	10,097.

SCHEDULE D

SCHEDULE D	NET SHORT-TERM GAIN OR LOSS FROM FORMS 6252, 4684, 6781 AND 8824	STATEMENT 7
------------	--	-------------

DESCRIPTION OF PROPERTY

DESCRIPTION OF PROPERTY	GAIN OR LOSS
SCHEDULE D	
NET LONG-TERM GAIN OR LOSS FROM FORMS 4797, 2439, 6252, 4684, 6781 AND 8824	28% GAIN

SCHEDULE D, PART I

SCHEDULE D, PART I	GAIN OR LOSS
TOTAL TO SCHEDULE D, PART I, LINE 11	2.
	2.

SCHEDULE D

CAPITAL GAIN DISTRIBUTIONS

STATEMENT 9

NAME OF PAYER

NAME OF PAYER	TOTAL CAPITAL GAIN	28% GAIN
WASHING, LLC	4.	
TOTAL TO SCHEDULE D, LINE 13	4.	

00000000

RICHARD J. & LORETTA M. DURBIN

SCHEDULE SE

NON-FARM INCOME

STATEMENT 10

SCRIPTION

AMOUNT

68,108.

68,108.

TAL TO SCHEDULE SE, LINE 2

0000062398 16

IRM 6251

EXEMPTION WORKSHEET

STATEMENT 11

ENTER: \$50,600 IF SINGLE OR HEAD OF HOUSEHOLD; \$78,750 IF

IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$39,375

ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME

(AMTI) FORM 6251, LINE 28

78,750.

ENTER: \$112,500 IF SINGLE OR HEAD OF HOUSEHOLD;
\$150,000 IF MARRIED FILING JOINTLY OR

QUALIFYING WIDOW(ER); \$75,000 IF MARRIED

FILING SEPARATELY

SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS

150,000.

ENTER -0-

106,780.

MULTIPLY LINE 4 BY 25% (.25).

SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0-. IF

ANY OF THE THREE CONDITIONS UNDER CERTAIN CHILDREN UNDER

AGE 24 APPLY TO YOU, COMPLETE LINES 7 THROUGH 10.

OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251,

52,055.

MINIMUM EXEMPTION AMOUNT FOR CERTAIN CHILDREN UNDER AGE 24.

ENTER YOUR EARNED INCOME, IF ANY

DD LINES 7 AND 8

ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251,

LINE 29, AND GO TO FORM 6251, LINE 30

00000621980

8879**IRS e-file Signature Authorization**

OMB No. 1545-0074

Form

Department of the Treasury

Internal Revenue Service

► Do not send to the IRS. This is not a tax return.

► Keep this form for your records.

2012

Declaration Control Number (DCN) ►

Taxpayer's name

RICHARD J. DURBIN

Spouse's name

LORETTA M. DURBINSocial security number
██████████**Part I Tax Return Information - Tax Year Ending December 31, 2012 (Whole Dollars Only)**

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	282,148.
2	Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10)	2	59,076.
3	Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7)	3	35,771.
4	Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11a; Form 1040-SS, Part I, line 12a)	4	
5	Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12)	5	1,625.

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2012, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, d the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be given no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

 I authorize ██████████

ERO firm name

as my signature on my tax year 2012 electronically filed income tax return.

 I will enter my PIN as my signature on my tax year 2012 electronically filed income tax return. Check this box only if you are entering your own

PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Spouse's signature ►

Spouse's PIN: check one box only

 I authorize ██████████

to enter or generate my PIN

██████████

as my signature on my tax year 2012 electronically filed income tax return.

 I will enter my PIN as my signature on my tax year 2012 electronically filed income tax return. Check this box only if you are entering your own

PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Date ► 04/10/2013

Practitioner PIN Method Returns Only - continue below**Part III Certification and Authentication - Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2012 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Publication 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ►

ERO Must Retain This Form - See Instructions**Do Not Submit This Form to the IRS Unless Requested To Do So**

219985

10-04-12

LHA For Paperwork Reduction Act Notice, see separate instructions.

Declaration Control Number (DCN)



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

Form 8453

U.S. Individual Income Tax Transmittal

for an IRS e-file Return

OMB No. 1545-0074

Internal Revenue Service

For the year January 1 - December 31, 2012

2012

P R I N T C L E A R Y		Your first name and initial RICHARD J. DURBIN <small>If a joint return, spouse's first name and initial LORETTA M. DURBIN</small>	Last name DURBIN	Your social security number ██████████
			Spouse's social security number ██████████	
			Apt. no. ██████████	▲ Important! ▲ You must enter your SSN(s) above.
E A R L Y		City, town or post office, state, and ZIP code (if a foreign address also complete spaces below.) SPRINGFIELD, IL	Foreign province/county ██████████	Foreign postal code ██████████

FILE THIS FORM ONLY IF YOU ARE ATTACHING ONE OR MORE OF THE FOLLOWING FORMS OR SUPPORTING DOCUMENTS.

Check the applicable box(es) to identify the attachments.

- Appendix A, Statement by Taxpayer Using the Procedures in Rev. Proc. 2009-20 to Determine a Theft Loss Deduction Related to a Fraudulent Investment Arrangement
- Form 1098-C, Contributions of Motor Vehicles, Boats, and Airplanes (or equivalent contemporaneous written acknowledgment)
- Form 2848, Power of Attorney and Declaration of Representative (or POA that states the agent is granted authority to sign the return)
- Form 3115, Application for Change in Accounting Method
- Form 3468 - attach a copy of the first page of NPS Form 10-168a, Historic Preservation Certification Application (Part 2 - Description of Rehabilitation), with an indication that it was received by the Department of the Interior or the State Historic Preservation Officer, together with proof that the building is a certified historic structure (or that such status has been requested)
- Form 4136 - attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller or a certificate from the provider identifying the product as renewable diesel and, if applicable, a statement from the reseller
- Form 5713, International Boycott Report
- Form 8283, Noncash Charitable Contributions, Section A, (if any statement or qualified appraisal is required) or Section B, Donated Property, and any related attachments (including any qualified appraisal or partnership Form 8283)
- Form 8332, Release / Revocation of Release of Claim to Exemption for Child by Custodial Parent (or certain pages from a divorce decree or separation agreement, that went into effect after 1984 and before 2009) (see instructions)
- Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities
- Form 8864 - attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller or a certificate from the provider identifying the product as renewable diesel and, if applicable, a statement from the reseller
- Form 8885, Health Coverage Tax Credit, and all required attachments
- Form 8949, Sales and Other Dispositions of Capital Assets, (or a statement with the same information), if you elect not to report your transactions electronically on Form 8949
- Form 8949, Sales and Other Dispositions of Capital Assets, (or a statement with the same information), if you elect not to report your transactions electronically on Form 8949

Recipient's Name and Address:

RICHARD J DURBIN
LORETTA M DURBIN JT TEN

Account Number: [REDACTED]

Recipient's Identification
Number: ***-**-[REDACTED]

2012 TAX and
YEAR-END STATEMENT
As of 02/25/2013

Summary Of Transactions We Do Not Report To The IRS (See instructions for additional information)

Advisory Fees	Amount
	797.87

Advisory Fees. Certain advisory fees charged to your account will be summarized in the "Summary of Transactions We Do Not Report to The IRS" section of the tax information statement. This amount represents the total amount for advisory fees charged in 2012. Advisory fees are generally deductible to the extent they exceed 2% of your AGI on IRS Form 1040, Schedule A, line 23.

2012 Form 1099-B Proceeds From Broker and Barter Exchange Transactions OMB No. 1545-0715
(For individuals report details on Form 1040 Schedule D Line 1, 2, 3, 8, 9 or 10)

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Quantity (Box 1e)	Disposition Transaction	Disposition Method	Date of Acquisition (Box 1b)	Date of Sale or Exchange (Box 1a)	Gross Proceeds Less Commissions and Fees (Box 2a)	Cost or Other Basis (Box 3)	Adjustments W=Wash Sale Loss (Box 5) O=Option Premium R=Return of Capital	Realized Gain or (Loss)
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**Short-Term Transactions for Which Basis Is Reported to the IRS: Report on Form 8949, Part I, with Box A Checked
Covered (Box 6b)**

Description (Box 8): POWERSHARES DB MULTI SECTOR COMMODITY TR POWER SHARES DB OIL								
54	SELL	FIRST IN FIRST OUT	02/10/2012	05/17/2012	1,434.23	1,562.16		(127.93)
Description (Box 8): SELECT SECTOR SPDR T R UTILS								
30	SELL	FIRST IN FIRST OUT	02/10/2012	12/21/2012	1,055.83	1,043.03		12.80
Short-Term Covered Total								
					2,490.06	2,605.19	0.00	(115.13)

**Short-Term Transactions for Which Basis Is Not Reported to the IRS: Report on Form 8949, Part I, with Box B Checked
Uncovered (Box 6a)**

Description (Box 8): ISHARES COMEX GOLD T R ISHARES								
61	SELL	FIRST IN FIRST OUT	11/17/2011	03/15/2012	986.38	1,024.80		(38.42)

Recipient's Name and Address:

RICHARD J DURBIN
LORETTA M DURBIN JT TEN

Account Number: [REDACTED]

Recipient's Identification
Number: ***-**-[REDACTED]

**2012 TAX and
YEAR-END STATEMENT
As of 02/25/2013**

2012 Form 1099-B Proceeds From Broker and Barter Exchange Transactions OMB No. 1545-0715 (Continued)
 (For individuals report details on Form 1040 Schedule D Line 1, 2, 3, 8, 9 or 10)

Quantity (Box 1e)	Disposition Transaction	Disposition Method	Date of Acquisition (Box 1b)	Date of Sale or Exchange (Box 1a)	Gross Proceeds Less Commissions and Fees (Box 2a)	Cost or Other Basis (Box 3)	Adjustments W=Wash Sale Loss (Box 5) O=Option Premium R=Return of Capital	Realized Gain or (Loss)
Short-Term Transactions for Which Basis Is Not Reported to the IRS: Report on Form 8949, Part I, with Box B Checked								
Noncovered (Box 6a) (continued)								
					CUSIP (Box 1d): 464287242			
9	SELL	FIRST IN FIRST OUT	11/17/2011	05/23/2012	1,040.82	1,008.09		32.73
Description (Box 8): ISHARES TR IBOXX USD INV GRADE CORP BD FD								
					CUSIP (Box 1d): 464288646			
9	SELL	FIRST IN FIRST OUT	11/17/2011	04/12/2012	942.76	937.35		5.41
Description (Box 8): ISHARES TR BARCLAYS 1-3 YR CR BD FD								
					CUSIP (Box 1d): 46625H365			
2	SELL	FIRST IN FIRST OUT	11/17/2011	02/10/2012	80.17	74.18		5.99
Description (Box 8): JPMORGAN CHASE & CO ALERIAN MLP INDEX ETN BASED ON WAP (LEVE								
					CUSIP (Box 1d): 73936B200			
1	SELL	FIRST IN FIRST OUT	11/17/2011	02/10/2012	60.33	60.01		0.32
18	SELL	FIRST IN FIRST OUT	11/17/2011	05/11/2012	981.70	1,080.18		(98.48)
SECURITY TOTAL								
					1,042.03	1,140.19		(98.16)
Description (Box 8): POWERSHARES DB MULTI SECTOR COMMODITY TR POWER SHARES DB PRE								
					CUSIP (Box 1d): 73936T573			
38	SELL	FIRST IN FIRST OUT	11/17/2011	05/23/2012	1,053.35	1,034.63		18.72
Description (Box 8): POWERSHARES GLOBAL EXCHANGE TRADED FD TR EMERGING MARKETS SO								
					CUSIP (Box 1d): 78355W106			
4	SELL	FIRST IN FIRST OUT	11/01/2011	02/10/2012	200.64	181.15		19.49
Short-Term Noncovered Total								
					5,346.15	5,400.39	0.00	(54.24)
Short-Term Total								
					7,836.21	8,005.58	0.00	(169.37)



00000625991

Recipient's Name and Address:RICHARD J DURBIN
LORETTA M DURBIN JT TEN**Account Number:** [REDACTED]Recipient's Identification
Number: ***-** [REDACTED]**2012 TAX and**
YEAR-END STATEMENT
As of 02/25/2013**2012 Form 1099-B****Proceeds From Broker and Barter Exchange Transactions OMB No. 1545-0715 (Continued)**
(For individuals report details on Form 1040 Schedule D Line 1, 2, 3, 8, 9 or 10)

Quantity (Box 1e)	Disposition Transaction	Disposition Method	Date of Acquisition (Box 1b)	Date of Sale or Exchange (Box 1a)	Gross Proceeds Less Commissions and Fees (Box 2a)	Cost or Other Basis (Box 3)	Adjustments W= Wash Sale Loss (Box 5) O= Option Premium R= Return of Capital	Realized Gain or (Loss)
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Long-Term Transactions for Which Basis Is Not Reported to the IRS: Report on Form 8949, Part II, with Box B Checked**noncovered (Box 6a)**

Description (Box 8): SELECT SECTOR SPDR T R UTILS							CUSIP (Box 1d): 81369Y886			
45	SELL	FIRST IN FIRST OUT	11/01/2011	12/21/2012	1,583.75	1,540.22	43.53			
13	SELL	FIRST IN FIRST OUT	11/09/2011	12/21/2012	457.53	449.37	8.16			
1	SELL	FIRST IN FIRST OUT	11/09/2011	12/21/2012	35.19	34.57	0.62			
30	SELL	FIRST IN FIRST OUT	11/09/2011	12/21/2012	1,055.83	1,038.53	17.30			
1	SELL	FIRST IN FIRST OUT	11/17/2011	12/21/2012	35.19	34.38	0.81			
90	SALE DATE TOTAL		VARIOUS	12/21/2012	3,167.49	3,097.07	70.42			
	SECURITY TOTAL				3,167.49	3,097.07	70.42			
Long-Term Noncovered Total							3,167.49	3,097.07	0.00	70.42
Long-Term Total							3,167.49	3,097.07	0.00	70.42

Transactions for Which Basis Is Not Reported to the IRS and for Which Short- or Long-Term Determination is Unknown (to Broker); Report on Form 8949, in either Part I or Part II as appropriate, with Box B Checked
noncovered (Box 6a)

Description (Box 8): ISHARES COMEX GOLD TR ISHARES CASH INCOME 2012							CUSIP (Box 1d): 464285105
61	TRUST SALE		01/31/2012		0.20		
61	TRUST SALE		02/29/2012		0.20		
160	TRUST SALE		09/28/2012		0.54		
160	TRUST SALE		10/31/2012		0.57		

Recipient's Name and Address:

RICHARD J DURBIN
LORETTA M DURBIN JT TEN

Account Number:

Recipient's Identification
Number: ***.**

**2012 TAX and
YEAR-END STATEMENT
As of 02/25/2013**

2012 Form 1099-B**Proceeds From Broker and Barter Exchange Transactions**

OMB No. 1545-0715 (Continued)

(For individuals report details on Form 1040 Schedule D Line 1, 2, 3, 8, 9 or 10)

Quantity (Box 1e)	Disposition Transaction	Disposition Method	Date of Acquisition (Box 1b)	Date of Sale or Exchange (Box 1a)	Gross Proceeds Less Commissions and Fees (Box 2a)	Cost or Other Basis (Box 3)	Adjustments W=Wash Sale Loss (Box 5) O=Option Premium R=Return of Capital Realized Gain or (Loss)

Transactions for Which Basis Is Not Reported to the IRS and for Which Short- or Long-Term Determination is Unknown (to Broker); Report on Form 8949, in either Part I or Part II as appropriate, with Box B Checked

Noncovered (Box 6a) (continued)

Description (Box 8): ISHARES COMEX GOLD TR ISHARES CASH INCOME 2012				CUSIP (Box 1d): 464285105 (continued)
160	TRUST SALE		11/30/2012	0.54
160	TRUST SALE		12/31/2012	0.55
	SECURITY TOTAL			2.60
	Other Noncovered Total			2.60
	Total			11,006.30 11,102.65 0.00 (98.95)

Important Cost Basis Information for 2012 Tax Reporting

Effective January 1, 2012, the cost basis reporting rules have been extended to mutual fund shares, stock in eligible dividend reinvestment plans (DRPs) and exchange-traded funds (ETFs) that are treated like mutual funds for tax purposes. Additional phased-in rules for debt instruments (e.g., bonds) and options will be implemented in 2014, or perhaps later. The new tax rules require us to report the original or adjusted purchase price (cost basis) both to you and the Internal Revenue Service (IRS) when covered mutual fund shares, stock in DRPs and ETFs that are treated like mutual funds for tax purposes, in your taxable (non-retirement) account are disposed of by sale, exchange or redemption. (The rules for reporting of covered securities¹ previously rolled out in 2011 continue to apply.) As a result, you will see changes in your account statement, trade confirmations, Form 1099-B and other reporting documents.²

Covered vs. Noncovered Mutual Funds. Similar to 2011 changes for stock, the new tax rules make a distinction between "covered" and "noncovered" in taxable accounts. For example, under the new rules, in general, if you own a mutual fund, but the shares were acquired *before* January 1, 2012, those shares may be considered noncovered, and their cost basis generally will not be reported to the IRS. Mutual funds acquired on or after January 1, 2012, including shares acquired by reinvesting dividends or capital gain distributions, will be considered covered and will be reported. This distinction between covered and noncovered, which is required by the IRS, creates two accounts for cost basis—one for covered and one for noncovered shares—held by you. Please note that how shares are categorized does not change your responsibility for reporting the correct adjusted cost basis, and there are many reasons why shares are marked as noncovered.

First Time Effects on Mutual Funds. Your 2012 Form 1099-B will now report the cost basis of all covered mutual funds (and other covered securities) that are sold, redeemed or exchanged during the year. Additional information for those covered mutual funds will be reported. Along with these changes and other enhancements, it should be easier to use the cost basis information in Pershing's substitute Form 1099-B when completing Form 8949 as part of your tax preparation.



**Illinois Department of Revenue
2012 Form IL-1040
WebFile
tax.ilinois.gov Individual Income Tax Return or for fiscal year ending _____**

Step 1: Personal Information

Do not write above this line.

RICHARD J. DURBIN
LORETTA M. DURBIN
[REDACTED]
SPRINGFIELD, IL [REDACTED]

C Filing status (see instructions) Married filing jointly Married filing separately Widowed
D Check if same-sex civil union return (see instructions)

Step 2: 1 Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 104EZ, Line 4. 1 282,148.00
2 Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 104EZ. 2 .00
3 Other additions. Attach Schedule M. 3 .00
4 Total income. Add Lines 1 through 3. 4 282,148.00

Step 3: 5 Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return. 5 42,997.00
Base Income 6 Illinois Income Tax overpayment included in U.S. 1040, Line 10. 6 .00
7 Other subtractions. Attach Schedule M. 7 .00
Check if Line 7 includes any amount from Schedule 1299-C.
8 Add Lines 5, 6, and 7. This is the total of your subtractions. 8 42,997.00
9 Illinois base income. Subtract Line 8 from Line 4. 9 239,151.00
10 6,100.00

Step 4: 10 a Number of exemptions from your federal return. 2 x \$2,050 a 4,100.00
Exemptions b If someone can claim you as a dependent, see instructions. b .00
c Check if 65 or older: You + Spouse = 2 x \$1,000 c 2,000.00
d Check if legally blind: You + Spouse = x \$1,000 d .00
Exemption allowance. Add Lines a through d. 10 6,100.00

Step 5: 11 Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12. 11 233,051.00
Net Income 12 Nonresidents and part-year residents: Nonresident Part-year resident, and write the Illinois base income from Sch. NR. Attach Sch. NR. 12 .00

Step 6: 13 Residents: Multiply Line 11 by 5% (.05). 13 11,653.00
Tax Nonresidents and part-year residents: Write the tax from Schedule NR. 14 .00
Credits 14 Recapture of investment tax credits. Attach Schedule 4255. 15 11,653.00
15 Income tax. Add Lines 13 and 14. Cannot be less than zero.

Step 7: 16 Income tax paid to another state while an Illinois resident. 16 .00
Tax After Attach Schedule CR. 16 .00
Non-refundable Credits 17 Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR. 17 253.00
18 Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 18 .00
19 Add Lines 16, 17, and 18. This is the total of your credits. 19 253.00
20 Cannot exceed the tax amount on Line 15. 20 11,400.00
20 Tax after nonrefundable credits. Subtract Line 19 from Line 15.



21 Tax after nonrefundable credits from Page 1, Line 20. 21 11,400.00

Step 8: 22 Household employment tax. See instructions. 22 _____ .00
Other Taxes 23 Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. Do not leave blank. 23 _____ 35 .00
24 Total Tax. Add Lines 21, 22, and 23. 24 _____ 11,435.00

Step 9: 25 Illinois Income Tax withheld. Attach W-2 and 1099 forms. 25 _____ 7,320.00
Payments 26 Estimated payments from Forms IL-1040-ES and IL-505-I, and including overpayment applied from 2011 return. 26 _____ 3,600.00
Refundable Credit 27 Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T. 27 _____ .00
28 Earned Income Credit from Schedule ICR. Attach Schedule ICR. 28 _____ .00
29 Total payments and refundable credit. Add Lines 25 through 28. 29 _____ 10,920.00

Step 10: 30 Overpayment. If Line 29 is greater than Line 24, subtract Line 24 from Line 29. 30 _____ .00
Result 31 Underpayment. If Line 24 is greater than Line 29, subtract Line 29 from Line 24. 31 _____ 515.00

Step 11: 32 Late-payment penalty for underpayment of estimated tax. 32 _____ .00
Underpayment of Estimated Tax Penalty and Donations
a Check if at least two-thirds of your federal gross income is from farming.
b Check if you or your spouse are 65 or older and permanently living in a nursing home.
c Check if your income was not received evenly during the year and you annualized your income on Form IL-2210. Attach Form IL-2210.
d Check if you were not required to file an Illinois Individual Income Tax return in the previous tax year.

33 Voluntary charitable donations. Attach Schedule G. 33 _____
34 Total penalty and donations. Add Lines 32 and 33. 34 _____ .00

Step 12: 35 If you have an overpayment on Line 30 and this amount is greater than Line 34, subtract Line 34 from Line 30. This is your remaining overpayment. 35 _____ .00
Refund or Amount You Owe 36 Amount from Line 35 you want refunded to you. If you want to deposit your refund directly into your checking or savings account, complete the direct deposit information on Line 37. 36 _____ .00

37 Complete to direct deposit your refund

Routing number _____ Checking or Savings

Account number _____

38 Subtract Line 36 from Line 35. This amount will be applied to your 2013 estimated tax. 38 _____ .00
39 If you have an underpayment on Line 31, add Lines 31 and 34. Or If you have an overpayment on Line 30 and this amount is less than Line 34, subtract Line 30 from Line 34. This is the amount you owe. 39 _____ 515.00

Step 13: Under penalties of perjury, I state that I have examined this return, and, to the best of my knowledge, it is true, correct, and complete.
Sign and Date **COPY** **Date** _____ **Daytime phone number** _____ **Your spouse's signature** _____ **Date** _____
Your signature _____ **Paid preparer's signature** _____ **Date** _____ **Preparer's phone number** _____ **Preparer's FEIN, SSN, or PTIN** _____

Third Party Designee Check, and complete below, to allow another person to discuss this return with the Illinois Department of Revenue.

Designee's Name (please print) _____ **Designee's Phone number** _____

Form 1099-G Information We no longer automatically mail 1099-G forms. Instead, we ask that you get this information from our website. Check the box if you still want us to mail you a paper Form 1099-G next year.

If no payment enclosed, mail to:

ILLINOIS DEPARTMENT OF REVENUE

PO BOX 1040

GALESBURG IL 61402-1040

If payment enclosed, mail to:

ILLINOIS DEPARTMENT OF REVENUE

SPRINGFIELD IL 62726-0001

**Illinois Department of Revenue
2012 Schedule ICR**

Attach to your Form IL-1040

Illinois Credits

IL Attachment No. 23

Complete this schedule only if you are eligible for the

- Illinois Property Tax Credit
- K-12 Education Expense Credit
- Earned Income Credit (EIC)

- You must complete IL-1040 through Line 15 and Schedule CR, if applicable, before completing this schedule.
- The total amount of Illinois Property Tax Credit and K-12 Education Expense Credit cannot exceed tax. Only the Earned Income Credit may exceed tax.

Step 1: Provide the following information

RICHARD J. & LORETTA M. DURBIN

Your name as shown on your Form IL-1040

Your Social Security number

Step 2: Figure your nonrefundable credit

- 1 Write the amount of tax from your IL-1040, Line 15. **1 1,653.00**
- 2 Write the amount of credit for tax paid to other states from your IL-1040, Line 16. **2 .00**
- 3 Subtract Line 2 from Line 1. **3 11,653.00**

Section A - Illinois Property Tax Credit (See instructions for directions on how to obtain your property number)

- 1 a Write the total amount of Illinois Property Tax paid during the tax year for the real estate that includes your principal residence. **4a 5,053.00**
- b Write the property number for the property listed above. **4b [REDACTED]**
- c Write the property number for another adjoining lot, if included in Line 4a. **4c _____**
- d Write the property number for another adjoining lot, if included in Line 4a. **4d _____**
- e Write the portion of your tax bill that is deductible as a business expense on U.S. income tax forms or schedules, even if you did not take the federal deduction. **4e 5,053.00**
- f Subtract Line 4e from Line 4a. **4f 253.00**
- g Multiply Line 4f by 5% (.05). **4g 253.00**
- h Compare Lines 3 and 4g, and write the lesser amount here. **5 253.00**
- Subtract Line 5 from Line 3. **6 11,400.00**

Section B - K-12 Education Expense Credit

[Note] You must complete the K-12 Education Expense Credit Worksheet on page 2 of this schedule and attach any receipt you received from your student's school.

- 7 a Write the total amount of K-12 education expenses from Line 13 of the worksheet on page 2 of this schedule. **7a .00**
- b You may not take a credit for the first \$250 paid. **7b 250.00**
- c Subtract Line 7b from Line 7a. If the result is negative, enter "zero." **7c .00**
- d Multiply Line 7c by 25% (.25). Compare the result and \$500, and write the lesser amount here. **7d .00**
- e Compare Lines 6 and 7d, and write the lesser amount here. **8 0.00**

Section C - Total Nonrefundable Credit

- f Add Lines 5 and 8. This is your nonrefundable credit amount. Write this amount on Form IL-1040, Line 17. **9 253.00**

Step 3: Sign and Date

IL-1040 Schedule ICR (R-12/12)

249381
01-08-13

ID: 2BX

Continued on Page 2 →

Schedule ICR - Page 2

Step 3: Figure your refundable credit

Earned Income Credit

Note If you were in a same-sex civil union as of December 31, 2012, you must recompute the federal EIC on your "as-if-married" federal return before computing this step.

- 10 a Write the amount of federal EIC as shown on your U.S. 1040, Line 64a; U.S. 1040A, Line 38a; or U.S. 1040EZ, Line 8a.
10a _____ .00
10b _____ .00
- b Multiply the amount on Line 10a by 7.5% (.075).
- c Illinois residents: Write 1.0.
- Nonresidents and part-year residents: Write the decimal from Schedule-NR, Line 48.
10c _____
10d _____ .00
- d Multiply Line 10b by the decimal on Line 10c.
- 11 Write the amount from Line 10d here. This is your Illinois' Earned Income Credit. Write this amount on Form IL-1040, Line 28.
→ 11 _____ .00

Section B Continued - K-12 Education Expense Credit Worksheet (continued from Step 2, Section B)

Note You must complete this section and attach any receipt you received from your student's school.

- 12 Complete the following information for each of your qualifying students. If a student attended more than one qualifying school during the calendar year, please list separately. If you need more space, attach a separate piece of paper following this format.

A Student's name	B Social Security number	C Grade (K-12 only)	D School name (IL K-12 schools only or write "home school," if applicable)	E School city (IL cities only)	F Total tuition, book/lab fees
---------------------	--------------------------------	---------------------------	---	--------------------------------------	--------------------------------------

1					
c					
d					
e					
f					
g					
h					
i					
j					

- 13 Add the amounts in Column F for Lines 12a through 12j (and the amounts from Column F of any additional pages you attached). This is the total amount of your qualified education expenses for this year. Write this amount here and on Step 2, Line 7a of this schedule.
→ 13 _____ .00



Line 23

Note If we find that you owe additional tax, we may assess the additional tax plus applicable penalties and interest. We conduct routine audits based on information received from third parties, including the U.S. Customs Service and other states.

Use Tax (UT) Table

If you had no major purchases and you do not have receipts to figure your purchases, use this table to estimate your annual Illinois Use Tax liability.

<u>AGI</u> (from IL-1040, Line 1)	<u>Use Tax</u>
\$0 - \$10,000	\$3
\$10,001 - \$20,000	\$9
\$20,001 - \$30,000	\$15
\$30,001 - \$40,000	\$21
\$40,001 - \$50,000	\$27
\$50,001 - \$75,000	\$38
\$75,001 - \$100,000	\$52
Above \$100,000	Multiply AGI by 0.06% (.0006)

Use Tax (UT) Worksheet

Complete this worksheet to report and pay your use tax on Form IL-1040. If your annual use tax liability is over \$600 (\$1,200 if married filing jointly), you must file and pay your use tax with Form ST-44.

Note:

Do not include any

- items for which you paid sales tax in another state (but not in another country) of
 - 6.25% or more on Line 1a and
 - 1% or more on Line 2a.
- sales tax you paid in another state, on Line 4, for items not included in Lines 1a or 2a.

1a Write the total cost of general merchandise you purchased to use in Illinois on which you did not pay the required amount of Illinois Use Tax.

1a _____ 556 .00

1b Multiply Line 1a by 6.25% (.0625). Round the result to whole dollars.

1b _____ 3.5 .00

2a Write the total cost of qualifying food, non-prescription drugs, and medical appliances you purchased to use in Illinois on which you did not pay the required amount of Illinois Use Tax.

2a _____ .00

2b Multiply Line 2a by 1% (.01). Round the result to whole dollars.

2b _____ .00

3 Add Lines 1b and 2b. This is your use tax on purchases.

4 Write the amount of sales tax you paid in another state (not in another country) on the items included on Lines 1a and 2a.

5 Subtract Line 4 from Line 3. Write the result here and on Form IL-1040, Line 23 (if the result is less than zero, write zero).

5 _____ 3.5 .00

Note: Be sure to keep this worksheet with your income tax records. You must send us this information if we request it.

0000062101101101

1040

U.S. Individual Income Tax Return (99)

2012

OMB No. 1545-0074

, 2012, ending

, 20

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

For the year Jan. 1-Dec. 31, 2012, or other tax year beginning _____, 2012, ending _____, 20_____, 20_____, 20_____

Your first name and initial

RICHARD J.

If a joint return, spouse's first name and initial

LORETTA M.

Home address (number and street). If you have a P.O. box, see instructions.

SPRINGFIELD, IL

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

[REDACTED]

Foreign country name

Foreign province/state/county

Foreign postal code

You

Spouse

Filing Status1 Single2 Married filing jointly (even if only one had income)3 Married filing separately. Enter spouse's SSN above4 Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. ►5 Qualifying widow(er) with dependent child6a Yourself. If someone can claim you as a dependent, do not check box 6a6b Spouse**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 _____

- lived with you _____
 ● did not live with you due to divorce or separation (see instructions) _____

Dependents on line 6c not entered above _____

Add numbers on lines above ►

2

more than four dependents, see instructions and check here ►

d Total number of exemptions claimed _____

income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 _____

8a Taxable interest. Attach Schedule B if required _____

8b Tax-exempt interest. Do not include on line 8a _____

Attach Form(s) W-2 here. Also attach Forms

9a Ordinary dividends. Attach Schedule B if required _____

b Qualified dividends _____

W-2G and 1099-R if tax was withheld.

10 Taxable refunds, credits, or offsets of state and local income taxes _____

If you did not get a W-2, see instructions.

11 Alimony received _____

12 Business income or (loss). Attach Schedule C or C-EZ _____

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ►

14 Other gains or (losses). Attach Form 4797 _____

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

15a IRA distributions _____

16a Pensions and annuities _____

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E _____

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

18 Farm income or (loss). Attach Schedule F _____

19 Unemployment compensation _____

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

20a Social security benefits _____

21 Other income. List type and amount _____

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ►

23 Educator expenses _____

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ _____

25 Health savings account deduction. Attach Form 8889 _____

26 Moving expenses. Attach Form 3903 _____

27 Deductible part of self-employment tax. Attach Schedule SE _____

28 Self-employed SEP, SIMPLE, and qualified plans _____

29 Self-employed health insurance deduction _____

30 Penalty on early withdrawal of savings _____

31a Alimony paid b Recipient's SSN ►

32 IRA deduction _____

33 Student loan interest deduction _____

34 Tuition and fees. Attach Form 8917 _____

35 Domestic production activities deduction. Attach Form 8903 _____

36 Add lines 23 through 35 _____

37 Subtract line 36 from line 22. This is your adjusted gross income. ►

Tax and Credits	38 Amount from line 37 (adjusted gross income)	38	282,148.
39a Check if: <input checked="" type="checkbox"/> You were born before January 2, 1948, <input type="checkbox"/> Blind.	Total boxes checked	► 39a	2
39a or 39b or who can be claimed as a dependent.	► 39b		
• All others: Single or Married filing separately, \$5,950 Married filing jointly or Qualifying widow(er), \$11,800 Head of household, \$8,700			
b If your spouse itemizes on a separate return or you were a dual-status alien, check here	40 Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	48,014.
	41 Subtract line 40 from line 38	41	234,134.
42 Exemptions. Multiply \$3,800 by the number on line 6d	42	7,600.	
43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	226,534.	
44 Tax. Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> 962 election	44	48,147.	
45 Alternative minimum tax. Attach Form 6251	45	2,615.	
46 Add lines 44 and 45	46	50,762.	
47 Foreign tax credit. Attach Form 1116 if required	47	51.	
48 Credit for child and dependent care expenses. Attach Form 2441	48		
49 Education credits from Form 8863, line 19	49		
50 Retirement savings contributions credit. Attach Form 8880	50		
51 Child tax credit. Attach Schedule 8812, if required	51		
52 Residential energy credits. Attach Form 5695	52		
53 Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53		
54 Add lines 47 through 53. These are your total credits	54	51.	
55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	50,711.	
56 Self-employment tax. Attach Schedule SE	56	8,365.	
57 Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57		
58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58		
59a Household employment taxes from Schedule H	59a		
b First-time homebuyer credit repayment. Attach Form 5405 if required	59b		
60 Other taxes. Enter code(s) from instructions	60		
61 Add lines 55 through 60. This is your total tax	61	59,076.	
Other Taxes			
62 Federal income tax withheld from Forms W-2 and 1099	62	35,771.	
63 2012 estimated tax payments and amount applied from 2011 return	63	21,680.	
64a Earned income credit (EIC)	64a		
b Nontaxable combat pay election	64b		
See Schedule EIC.			
65 Additional child tax credit. Attach Schedule 8812	65		
66 American opportunity credit from Form 8863, line 8	66		
67 Reserved	67		
68 Amount paid with request for extension to file	68		
69 Excess social security and tier 1 RRTA tax withheld	69		
70 Credit for federal tax on fuels. Attach Form 4136	70		
71 Credits from Form: a <input type="checkbox"/> 2439 b <input checked="" type="checkbox"/> Resvdc <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71		
72 Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	57,451.	
Refund			
73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73		
74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here	74a		
See Routing <input type="checkbox"/> b number <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> d Account number			
instructions.			
75 Amount of line 73 you want applied to your 2013 estimated tax	75		
Amount You Owe	76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	1,625.

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below.
 Name: No
 Phone no. ()
 See instructions. Your signature
 Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Don't return? Spouse's signature. If a joint return, both must sign.
 See instructions. Date Your occupation
 Keep a copy of your records. U.S. SENATOR
 Preparer Firm's name ► Print/Type preparer's name
 Paid Preparer Firm's name ► Preparer's signature
 Use Only Firm's name ►

Print/Type preparer's name

Preparer's signature

Date

U.S. SENATOR

Spouse's occupation

Daytime phone number

Phone no. () Firm's EIN ►

PTIN

If the IRS sent you an Identity Protection PIN, enter it here

P00121212

Illinois Department of Revenue

IL-8453 Illinois 2012 Individual Income Tax Electronic Filing Declaration

(Do not mail Form IL-8453 to the Illinois Department of Revenue unless it is requested for review.)

Step 1: Provide taxpayer information

Print First name and middle initial _____ Spouse's first name (and last name if different) _____
 or type _____ Last name _____ Social Security number _____
 Mailing address _____ Spouse's Social Security number _____

SPRINGFIELD

City _____ State _____ Zip _____

Day/time phone number _____

Step 2: Complete information from tax return

- | | | | |
|---|--|---|------------|
| 1 | Net income from Form IL-1040, Line 11, or Schedule NR, Step 5, Line 51 | 1 | 233,051.00 |
| 2 | Tax from Form IL-1040, Line 13 | 2 | 11,653.00 |
| 3 | Illinois Income Tax withheld from Form IL-1040, Line 25 only (write "0" if none) | 3 | 7,320.00 |
| 4 | Overpayment from Form IL-1040, Line 35 | 4 | 0.00 |
| 5 | Total amount due from Form IL-1040, Line 39 | 5 | 515.00 |
| 6 | Filing status: _____ Single/head of household <input checked="" type="checkbox"/> Married filing jointly <input type="checkbox"/> Married filing separately <input type="checkbox"/> Widowed | | |

Step 3: Complete direct deposit of refund or electronic funds withdrawal information (Optional)

I initiate a payment or refund transaction, the information in this Step must be included within the electronic transmission. Illinois does not support international ACH transactions. IDOR will only perform direct transactions (i.e., debit, deposit) with financial institutions located within the United States or those not funded by international funds. Electronic payments will not be accepted and refunds will be via paper check.

Routing no. (RN): _____

Account no. (AN): _____

Type of account: _____ Checking _____ Savings _____

Date the payment is to be electronically withdrawn: _____

11 Electronic funds withdrawal amount: _____ 100

12 Name on account: _____

Step 4: Taxpayer declaration and signature (Sign only after Step 2 and Step 3 (if applicable) is completed.)

- I consent that my refund may be directly deposited as designated in Step 3 and declare the information on lines 7 through 9 is correct. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
- I authorize the Illinois Department of Revenue (IDOR) and its designated financial agent to initiate an ACH electronic funds withdrawal as designated in the electronic portion of my 2012 Illinois income tax return. I authorize the financial institutions involved in the processing of an electronic overpayment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

I do not want direct deposit of my refund, or an electronic funds withdrawal (direct debit) of my balance due.

Under penalties of perjury, I declare the information on my electronic IL-1040 return and the information I provided to my electronic return originator (ERO) are identical. To the best of my knowledge, my return is true, correct, and complete. I consent that my return, this declaration, and accompanying information may be sent to IDOR by my ERO. I authorize IDOR to inform my ERO and/or the transmitter when my return has been accepted or rejected. If rejected, I authorize IDOR to identify the reason(s) so the return may be corrected and retransmitted if possible.

Sign here _____ Your signature _____ Date _____ Spouse's signature (if joint return, both must sign) _____ Date _____

Step 5: Electronic return originator (ERO) and paid preparer declaration and signature

I declare that I have examined this taxpayer's electronic IL-1040 return, the information on this Form IL-8453, and accompanying information. I have followed all requirements of this program and declare, under penalties of perjury, that to the best of my knowledge the taxpayer's return and accompanying information are true, correct, and complete.

Check if paid preparer: (See instructions.)
 Date _____

ERO's signature _____

Firm's name or your name if self-employed _____

Use _____
only
Mailing address _____

City _____

State _____

ZIP _____

Phone number _____

Your Social Security number (SSN) or PTIN _____

Federal employer identification no. (FEIN) _____

Phone number _____

Step 6: Attach required documents (e.g., Forms W-2, W-2G, 1099-G, 1099-R, IL-1310).

ID: 2BX 249091

IL-8453 (R-12/12) 12-13-12