

00000511774

**UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT  
FOR ANNUAL AND TERMINATION REPORTS**

<input type="checkbox"/> Amendment			
Last Name	First Name and Middle Initial	Annual Report	
Durbin	Richard J.	Calendar Year Covered by Report: 2011	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	
U.S. Capitol, S-321, Washington, DC 20510	(202) 224-9447	Termination Date (mm/dd/yy):	Prior Office / Agency in Which Employed

**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 checked="" type="checkbox"/>	<input 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.**

**File this report and any amendments with the Secretary of the Senate, Office of Public Records, Room 232, Hart Senate Office Building, U.S. Senate, Washington, DC 20510. \$200 Penalty for filing more than 30 days after due date.**

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 4, § 104, and 18 U.S.C. § 1001.)

**FOR OFFICIAL USE ONLY  
Do Not Write Below This Line**

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		

RECEIVED  
 SECRETARY OF THE SENATE  
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It is the Opinion of the reviewer that the statements made in this form are in compliance with Title I of the Ethics in Government Act.	Signature of Reviewing Official	Date (Month, Day, Year)

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Reporting Individual's Name

 Amendment

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	None			
2				
3				
4				
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13				

A separate, confidential report which names the charitable organization receiving such payments must be filed directly with the Select Committee on Ethics.

## 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	US Senate	Wash., DC	salary	174,000
2	Gov't Affairs Specialists (Spouse)	Springfield, IL	salary	75,456
3	Social Security	Wash., DC	benefits	28,238
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13				

## **PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES**

4

**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.**

<b>Example:</b> DC, or J	S, <u><i>IBM Corp. (stock)</i></u> (S) <i>Keystone Fund</i>
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1 TSP/RJD-F Fund-\$239,450

2 TSP/RJD-C Fund-\$82,388

3 TSP/RJD-S Fund-\$82,53

4 Manulife (566 sh-\$6,226)

5  Cong ECII (\$40,026)

6  Pfizer (123 sb \$2.70)

Credit Union One, Lamb

R/R IT Evolution Asset Cost (\$33.815)

R/D-IT Evolution RDL TX (2014-1-15) (00-000)

**ANSWER**

Digitized by srujanika@gmail.com

**EXEMPTION TEST** (*see instructions before marking box*)  
\*\*\* This category applies only if the asset is/was held inde-

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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	\$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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**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.**

## **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.

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

1 RJD-JT Evolution LQD (27 sh) (\$3,071)

2 RJD-JT Evolution CSJ (9 sh) (\$937)

3 RJD-JT Evolution AMJ (55 sh) (\$2,143)

4 RJD-JT Evolution DBP (19 sh) (\$1,023)

5 RJD-JT Evolution PCY (132 sh) (\$3,611)

6 RJD-JT Evolution SPLV (126 sh) (\$3,267)

7 RJD-JT Evolution RSP (57 sh) (\$2,637)

8 RJD-JT Evolution XLU (90 sh) (\$3,238)

9 RJD-JT Evolution VIG (39 sh) (\$2,131)

10 Evolution Private Wealth (RJD/IRA) Cash: \$61,802

**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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## BLOCK B

# Valuation of Assets

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

Check the first column	
None (or less than \$1,001)	\$25,000,001 - \$50,000,000
\$1,001 - \$15,000	\$5,000,001 - \$25,000,000
\$15,001 - \$50,000	\$1,000,001 - \$5,000,000
\$50,001 - \$100,000	Over \$1,000,000***
\$100,001 - \$250,000	\$500,001 - \$1,000,000
\$250,001 - \$500,000	\$1,000,001 - \$5,000,000
\$500,001 - \$1,000,000	\$25,000,001 - \$50,000,000
\$1,000,001 - \$5,000,000	Over \$50,000,000

## BLOCK C

### Type and Amount of Income

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

## PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

6

## 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**	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)
X									\$1,001 - \$2,500
	X								\$2,501 - \$5,000
		X							\$5,001 - \$15,000
			X						\$15,001 - \$50,000
				X					\$50,001 - \$100,000
					X				\$100,001 - \$1,000,000
						X			Over \$1,000,000***
							X		\$1,000,001 - \$5,000,000
								X	Over \$5,000,000
									Actual Amount
									Required if "Other" Specified

**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.**

1

**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:

- (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.**

<b>Example:</b> DC, or J	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">S,</td><td style="padding: 5px;"><i>IBM Corp. (stock)</i></td></tr> <tr> <td style="padding: 5px;">(S)   </td><td style="padding: 5px;"><i>Keystone Fund</i></td></tr> </table>	S,	<i>IBM Corp. (stock)</i>	(S)	<i>Keystone Fund</i>
S,	<i>IBM Corp. (stock)</i>				
(S)	<i>Keystone Fund</i>				

1 Evolution Private Wealth (RJD/IRA)

2 " RSP (173 sh) \$8,461

3 " XLU (277 sh) \$9,600

4 " VIG (118 sh) \$6.616

5 Evolution I MD-SEP

6  "CASH (\$58,880)

3 | Page

1-800X(800-4372) \$2.975

[View Details](#) | [Edit](#) | [Delete](#)

**ANSWER**

10  FEDERAL (602 SW) 48,000

BLOCK B

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						

### BLOCK C

**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.**

## 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.

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

1 | Evolution LMD-SEP

2 " [AII (205 sh) \$3.122

3 [REDACTED] "LOD (50 sh) \$5,688

4 "CSL (33 sb) \$3,438

5 [redacted] "AMI (193 sb) \$7,531

6 [REDACTED] " DBB (60 ch) \$3,332

7 " BCY (221 sb) \$9.781

8 [redacted] "SPL V (404 sb) \$10.00

2 | P a g e " BSB (106 ch) \$0.070

10 [REDACTED] " YILL (288 ab) \$10.29

EXEMPTION TEST (a)(1)(A)(ii) (b)(6)(C)

## 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

**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.**

## 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

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	\$100,001 - \$1,000,000	Over \$1,000,000***	Over \$5,000,000
	X								X	X								

S, Example: DC, or J	IBM Corp. (stock)		X													
	(S) Keystone Fund			X												
1	RJD-JT Evolution VIG (133 sh) \$7,268		X													
2	IRA-LMD Mosaic (MOS) (500 sh) (\$26,335)			X												
3	LMD Def Comp State of Illinois (\$90,941)			X												
4																
5																
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9																
10																

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.

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

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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.

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	\$100,001 - \$1,000,000	Over \$1,000,000***	Over \$5,000,000	Actual Amount Required if "Other" Specified		

S, Example: DC, or J	JP Computer, Software Design, Wash DC
	Undeveloped land, Dubuque, Iowa

- 1 Residence: Springfield, IL (\$250,000 est)
- 2 Condo: Chicago, IL (\$290,000 est)
- 3 1996 Ford Ranger (\$5,540 est)
- 4 2010 Ford Fusion (\$22,959 est)
- 5 Furnishings (\$60,000 est)
- 6
- 7
- 8
- 9
- 10

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.

## 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	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
	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	X			2/1/1X	X	E	X	A	M	P	L	E
1	RJD-LMD-JT Evolution DBP (24 sh) (\$1,324)		X		12-19-11	X							
2	RJD-LMD-JT Evolution USCI (25 sh) (\$1,432)	+■	X		12-19-11	X							
3	RJD-LMD-JT Evolution DBLTX (600.2 sh) (\$6,699)		X		11-17-11	X							
4	RJD-LMD-JT Evolution IAU (61 sh) (\$1,024)		X		11-17-11	X							
5	RJD-LMD-JT Evolution LQD (27 sh) (\$3,024)	+■	X		11-17-11	X							
6	RJD-LMD-JT Evolution CSJ (9 sh) (\$937)		X		11-17-11	X							
7	RJD-LMD-JT Evolution AMJ (55 sh) (\$2,039)	+■	X		11-17-11	X							
8	RJD-LMD-JT Evolution DBP (43 sh) (\$2,580)		X		11-17-11	X							
9	RJD-LMD-JT Evolution PCY (132 sh) (\$3,593)	+■	X		11-17-11	X							
10	RJD-LMD-JT Evolution SPLV (1 sh) (\$24)		X		11-17-11	X							
11	RJD-LMD-JT Evolution RSP (23 sh) (\$1,041)		X		11-17-11	X							
12	RJD-LMD-JT Evolution XLU (1 sh) (\$34)	+■	X		11-17-11	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.

## PART IV. TRANSACTIONS

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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

	Example: S, 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		RJD-LMD-JT Evolution USCI (25 sh) (\$1,517)	X			2/1/1X	X	E	X	A	M	P	L	E		
2		RJD-LMD-JT Evolution VIG (10 sh) (\$528)		X		1/27/1X		X	E	X	A	M	P	L	E	
3		RJD-LMD-JT Evolution SPLV (63 sh) (\$1,557)		X		11-17-11	X									
4		RJD-LMD-JT Evolution XLU (44 sh) (\$1,522)		X		11-17-11	X									
5		RJD-LMD-JT Evolution SPLV (62 sh) (\$1,521)		X		11-17-11	X									
6		RJD-LMD-JT Evolution RSP (34 sh) (\$1,539)		X		11-1-11	X									
7		RJD-LMD-JT Evolution XLU (45 sh) (\$1,540)		X		11-1-11	X									
8		RJD-LMD-JT Evolution VIG (29 sh) (\$1,510)		X		11-1-11	X									
9		RJD-LMD-JT Evolution AAPL (50 sh) (\$19,830)		X	X	10-26-11		X								
10		RJD-IRA Evolution SPLV (148 sh) (\$3,631)		X		11-1-11	X									
11		RJD-IRA Evolution RSP (80 sh) (\$3,622)		X		11-1-11	X									
12		RJD-IRA Evolution XLU (106 sh) (\$3,628)		X	X	11-1-11	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 IV. TRANSACTIONS

13

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		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
	IBM Corp. (stock) NYSE	X			2/1/1X	X		E	X	A	M	P	L	E	
	(DC) Microsoft (stock) NASDAQ/OTC		X		1/27/1X			X	E	X	A	M	P	L	E
1	RJD-LMD-JT Evolution DBP (24 sh) (\$1324)		X		12-19-11	X									
2	RJD-LMD-JT Evolution USCI (25 sh) (\$1,432)	+	X		12-19-11	X									
3	RJD-LMD-JT Evolution DBLTX (600.2 sh) (\$6,699)		X		11-17-11	X									
4	RJD-LMD-JT Evolution IAU (61 sh) (\$1,024)		X		11-17-11	X									
5	RJD-LMD-JT Evolution LQD (27 sh) (\$3,024)	+	X		11-17-11	X									
6	RJD-LMD-JT Evolution CSJ (9 sh) (\$937)		X		11-17-11	X									
7	RJD-LMD-JT Evolution AMJ (55 sh) (\$2,039)	+	X		11-17-11	X									
8	RJD-LMD-JT Evolution DBP (43 sh) (\$2,580)		X		11-17-11	X									
9	RJD-LMD-JT Evolution PCY (132 sh) (\$3,593)	+	X		11-17-11	X									
10	RJD-LMD-JT Evolution SPLV (1 sh) (\$24)		X		11-17-11	X									
11	RJD-LMD-JT Evolution RSP (23 sh) (\$1,042)		X		11-17-11	X									
12	RJD-LMD-JT Evolution XLU (1 sh) (\$34)	+	X		11-17-11	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 IV. TRANSACTIONS

14

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		RJD-IRA Evolution VIG (70 sh) (\$3,646)	X			2/1/1X	X	E	X	A	M	P	L	E		
2		RJD-IRA Evolution AAPL (50 sh) (\$19,950)		X		1/27/1X		X	E	X	A	M	P	L	E	
3		RJD-IRA Evolution DBLTX (1341.6 sh) (\$15,000)	X			10-25-11	X									
4		RJD-IRA Evolution SATS (1000 sh) (\$26,230)		X		10-25-11		X								
5		RJD-IRA Evolution EWA (500 sh) (\$11,619.97)		X		10-25-11	X									
6		RJD-IRA Evolution DBP (50 sh) (\$3,011)	X			10-25-11	X									
7		RJD-IRA Evolution TEN (1000 sh) (\$33,999)		X		10-25-11		X								
8		RJD-IRA Evolution GABSX (644.3 sh) (\$20,393)		X		10-25-11		X								
9		RJD-IRA Evolution VIG (48 sh) (\$2,623)		X		12-07-11	X									
10		RJD-IRA Evolution JSOSX (211.7 sh) (\$2,440)	X			11-18-11	X									
11		RJD-IRA Evolution IAU (75 sh) (\$1,257)	X			11-17-11	X									
12		RJD-IRA Evolution LQD (50 sh) (\$5,595)		X		11-17-11	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

15

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

		Transaction Type (x)			Amount of Transaction (x)									
		Purchase	Sale	Exchange	Transaction Date (Mo., Day, Yr.)	\$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
Example: S, DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	X			2/1/1X	X		E	X	A	M	P	L	E
1	RJD-IRA Evolution CSJ (23 sh) (\$2,396)	X			11-17-11	X								
2	RJD-IRA Evolution AMJ (75 sh) (\$2,783)	+ X			11-17-11	X								
3	RJD-IRA Evolution DBP (52 sh) (\$3,111)	X			11-17-11	X								
4	RJD-IRA Evolution PCY (150 sh) (\$4,087)	X			11-17-11	X								
5	RJD-IRA Evolution LQD (60 sh) (\$3,637)	+ X			11-17-11	X								
6	RJD-IRA Evolution SPLV (148 sh) (\$3,660)	X			11-09-11	X								
7	RJD-IRA Evolution XLU (105 sh) (\$3,634)	+ X			11-09-11	X								
8	RJD-IRA Evolution USCI (20 sh) (\$1,203)	X			12-07-11	X								
9	LMD-SEP Evolution	+												
10	" DBP (15 sh) (\$827)	X			12-19-11	X								
11	" LDG (75 sh) (\$4,297)	X			12-19-11	X								
12	" SPLV (131 sh) (\$3,240)	+ X			11-09-11	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

16

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.

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## 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
1	LMD-SEP Evolution				2/1/1X	X	E	X	A	M	P	L	E
2	" XLU (96 sh) (\$3,325)	+ X			11-09-11	X							
3	" VNQ (50 sh) (\$2,615)		X		10-18-11	X							
4	" SPLV (132 sh) (\$3,148)	X			9-30-11	X							
5	" RSP (196 sh) (\$8,191)	+ X			9-30-11	X							
6	" LDG (91 sh) (\$3,074)	X			9-30-11	X							
7	" VB (69 sh) (\$4,284)	+ X			9-30-11	X							
8	" VWO (189 sh) (\$7,148)		X		9-28-11	X							
9	" DBLTX (392.5 sh) (\$4,423)	+ X			9-27-11	X							
10	" IAU (205 sh) (\$3,289)	X			9-27-11	X							
11	" VB (70 sh) (\$4,519)		X		8-08-11	X							
12	" PCY (221 sh) (\$6,028)	+ X			7-28-11	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

17

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

	Example: S, DC, or J	Description of Asset	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		LMD-SEP Evolution				2/1/1X	X								
2		" FLAT (75 sh) (\$3,700)	+	X		1/27/1X									
3		" IEF (46 sh) (\$4,473)		X		7-25-11	X								
4		" ILF (102 sh) (\$5,149)		X		7-13-11	X								
5		" IEF (47 sh) (\$4,479)	+	X		5-13-11	X								
6		" TGMNX (444 sh) (\$4,586)		X		5-13-11	X								
7		" JSOSX (298 sh) (\$3,584)	+	X		5-03-11	X								
8		" HDCSX (165 sh) (\$3,533)		X		4-15-11	X								
9		" USCI (75 sh) (\$5,185)	+	X		3-18-11	X								
10		" PNEAX (508 sh) (\$5,947)		X		3-15-11	X								
11		" FLAT (75 sh) (\$3,468)		X		3-15-11	X								
12		" LQD (50 sh) (\$5,433)	+	X		3-15-11	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

18

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.

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## Identification of Assets

	S, Example: DC, or J	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
1	LMD-SEP Evolution												
2	" ILF (102 sh) (\$5,216)	+ X			3-15-11	X							
3	" IFF (37 sh) (\$3,478)	X			3-15-11	X							
4	" CSJ (33 sh) (\$3,454)	X			3-15-11	X							
5	" PFF (100 sh) (\$3,931)	+ X			3-15-11	X							
6	" AMJ (56 sh) (\$2,012)	X			3-15-11	X							
7	" DBP (75 sh) (\$3,918)	+ X			3-15-11	X							
8	" PCY (100 sh) (\$2,629)	X			3-15-11	X							
9	" RSP (74 sh) (\$3,611)	+ X			3-15-11	X							
10	" GUR (100 sh) (\$5,217)	X			3-15-11	X							
11	" VSS (37 sh) (\$3,516)	X			3-15-11	X							
12	" VWO (38 sh) (\$1,749)	+ X			3-15-11	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

19

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	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	LMD-SEP Evolution				2/1/1X	X	E	X	A	M	P	L	E		
2	" VNQ (50 sh) (\$2,851)	+	X		1/27/1X		X	E	X	A	M	P	L	E	
3	" WIW (1000 sh) (\$12,399)		X		3-15-11	X									
4	" TGMNX (500 sh) (\$5,165)		X		3-15-11	X									
5	" GEPRA (800 sh) (\$20,920)	+	X		3-10-11		X								
6	" HCS PRB (600 sh) (\$16,399)		X		3-10-11		X								
7	" IGR (950 sh) (\$7,599)	+	X		3-10-11	X									
8	" IGK (600 sh) (\$15,318)		X		3-10-11		X								
9	" MGIAZ (101.2 sh) (\$2,541)	+	X		3-10-11	X									
10	" OPGIX (151 sh) (\$4,466)		X		3-10-11	X									
11	" RSP (177 sh) (\$8,694)		X		3-10-11	X									
12	" VWO (37 sh) (\$1,704)	+	X		3-10-11	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

20

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	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	LMD-SEP Evolution													
2	" VB (70 sh) (\$5,267)	+	X			3-10-11	X							
3	" CLARX (407 sh) (\$5,624)			X		3-10-11	X							
4	" IEF (56 sh) (\$5,221)		X			3-01-11	X							
5	" AMJ (137 sh) (\$5,197)	+	X			3-01-11	X							
6	" RSP (141 sh) (\$6,972)		X			3-01-11	X							
7	" TGMNX (846 sh) (\$8,696)	+	X			3-01-11	X							
8	" VWO (114 sh) (\$5,233)		X			3-01-11	X							
9	" VB (69 sh) (\$5,219)	+	X			3-01-11	X							
10	" BOW (500 sh) (\$9,370)			X		2-25-11	X							
11	" CHY (500 Sh) (\$6,719)			X		2-25-11	X							
12	" CHY (460 sh) (\$6,177)	+	X			2-25-11	X							

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## PART IV. TRANSACTIONS

21

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.

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## 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		LMD-SEP Evolution				2/1/1X	X	E	X	A	M	P	L	E		
2		" ETW (680 sh) (\$8,378)	+	X		1/27/1X			X	E	X	A	M	P	L	E
3		" EDD (700 sh) (\$11,056)		X		2-25-11	X									
4		" PNEBX (326 sh) (\$3,876)		X		2-17-11	X									
5		" OGGIX (425 sh) (\$11,570)	+	X		2-17-11	X									
6		" CRBCX (226 sh) (\$3,137)		X		2-17-11	X									
7		RJD-LMD-JT Schwab	+													
8		" TBGVX (421 sh) (\$9,544)		X		10-24-11	X									
9		" SCHA (250 sh) (\$7,240)	+	X		9-22-11	X									
10		" SCHA (421) (\$9,544)		X		10-24-11	X									
11		" AAPL (50 sh) (\$20,008)	+	X		9-26-11	X									
12		" BRKB (250 sh) (\$16,360)	+	X		9-22-11	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.

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

## PART IV. TRANSACTIONS

22

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	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	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	X			2/1/1X	X	E	X	A	M	P	L	E		
2	RJD-LMD-JT Schwab		X		1/27/1X		X	E	X	A	M	P	L	E	
3	" ILF (400 sh) (\$16,490)	+ X			8-09-11	X									
4	" A (Agilent) (250 sh) (\$9,428)		X		8-05-11	X									
5	RJD/IRA Schwab														
6	" EWA (500 sh) (\$12,072)	+ X			8-30-11	X									
7	" SATS (500 sh) (\$12,663)	+ X			8-12-11	X									
8	" BUFTX (646 sh) (\$9,353)	+ X			8-12-11	X									
9	" TEN (500 sh) (\$17,398)	+ X			8-09-11	X									
10	" SATS (500 sh) (\$12,825)	+ X			8-09-11	X									
11	" MAPIX (1465 sh) (\$19,204)	+ X			8-08-11		X								
12	" F (FORD) (1000 sh) (\$11,040)	+ X			8-05-11	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 IV. TRANSACTIONS

23

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## Identification of Assets

	S, Example: DC, or J	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
	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	X			2/1/1X	X	E	X	A	M	P	L	E		
1	RJD-IRA (Legg Mason) LMEMX (2,054.9 sh) (\$38,962.14)		X		11-18-11	X									
2	RJD-LMD-JT (Schwab) BRKB (250 sh) (\$20,043)	+■	X		5-09-11	X									
3	RJD-IRA Evolution LQD (55 sh) (\$2,477)		X		11-17-11	X									
4	RJD-IRA Evolution DBP (44 sh) (\$2,428)		X		12-19-11	X									
5	RJD-IRA Evolution USCI (80 sh) (\$4583)	+■	X		12-19-11	X									
6	RJD-IRA Evolution DBLTX (557.2 sh) (\$6,180)		X		12-07-11	X									
7	RJD-IRA Evolution IAU (114 sh) (\$1,935)	+■	X		12-07-11	X									
8	RJD-IRA Evolution LQD (36 sh) (\$4,042)		X		12-07-11	X									
9	RJD-IRA Evolution AMJ (97 sh) (\$3,642)	+■	X		12-07-11	X									
10	RJD-IRA Evolution JSOSX (68.6 sh) (\$792)		X		12-07-11	X									
11	RJD-IRA Evolution PCY (265 sh) (\$7,225)		X		12-07-11	X									
12	RJD-IRA Evolution SPLV (88 sh) (\$2,225)	+■	X		12-07-11	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 IV. TRANSACTIONS

24

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-IRA Evolution RSP (38 sh) (\$1,770)	X			2/1/1X	X		E	X	A	M	P	L	E	
2		RJD-IRA Evolution XLU (66 sh) (\$2,312)		X		1/27/1X			X	E	X	A	M	P	L	E
3		LMD-SEP Evolution HDCSX (173 sh) (\$3,504)	X			12-07-11	X									
4		LMD-SEP Evolution MHOAX (848.9 sh) (\$5,543)		X		3-30-11	X									
5		RJD-IRA (Legg-Mason) LMEMX (2,054.9 sh) (\$38,962.14)		X		3-10-11	X									
6		RJD-IRA Schwab Ford (600 sh) (\$8,396.89)		X		11-18-11	X									
7		RJD-IRA Schwab Ford (400 sh) (\$6,052)		X		5-19-11	X									
8		RJD-IRA FAIRHOLME (FAIRX) (293.93 sh) (\$9,881.94)		X		5-12-11	X									
9		RJD-IRA Evolution TEN (500 sh) (\$17,398.45)		X		8-12-11	X									
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.

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

Reporting Individual's Name

 Amendment

Page Number

## PART V. GIFTS

25

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	None			
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.

**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.

<b>Name of Income Source</b>		<b>Address of Source</b>	<b>Dates and Brief Description</b>
Example:	All States Company	Maintown, TX <b>EXAMPLE</b>	<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> <b>EXAMPLE</b>
1	None		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			

**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; (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  S, Example: DC, or J  (J) John Jones	Address	Type of Liability	Date Incurred	Interest Rate	Term if Applicable	Category of Amount of Value (x)									
							\$10,001 - \$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***			
	First District Bank	Wash., DC	Mortgage on undeveloped land	1992	13%	25yrs		X		E	X	A	M	P	L	E
	(J) John Jones	Wash., DC	Promissory Note	2000	10%	On dmd			X	E	X	A	M	P	L	E
1	Bank of Springfield (\$67,329)	Springfield, IL	Mortgage: Springfield, IL	2008	5.48	30 yr		X								
2	Fifth-Third Bank (\$192,971)	Cincinnati, OH	Mortgage: Chicago, IL	2010	4.375	30yr, 5 year			X							
3	Heartland Credit Union (\$23,981)	Springfield, IL	Auto loan	2010	2.24	5 yr	X									
4																
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.

**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	Present
	Jones & Smith	Hometown, USA      EXAMPLE	Law Firm	Partner	7/96	11/1X
1	None					
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.

## 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:	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)	Jones & Smith, Hometown, USA	EXAMPLE 1 / 94
	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	XYZ Co., Bethesda, MD	EXAMPLE 1 / 1X
1	None		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

**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.

	<b>Name of Source</b>	<b>Address of Source</b>	<b>Brief Description of Duties</b>	
<b>Example:</b>	<i>Jones &amp; Smith</i>	<i>Hometown, TX</i>	<i>Legal Services</i>	<b>EXAMPLE</b>
	<i>Metro University (client of Jones &amp; Smith</i>	<i>Moneytown, USA</i>	<i>Legal Services in connection with university construction</i>	<b>EXAMPLE</b>
1	None			
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

00000611803

**Richard J. & Loretta M. Durbin**

*Form 1040*

*2011 Income Tax Returns*

**Prepared by:**

**Michelle J. Usher, CPA**

# Form 1040 U.S. Individual Income Tax Return (2011)

OMB No. 1545-0074

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

Your first name and initial , 2011, ending

**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.

██████████

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

██████████

**SPRINGFIELD, IL** ██████████

Foreign country name

██████████

Foreign province/county

██████████

Foreign postal code

██████████

Apt no.

██████████

See separate instructions.

Your social security number

██████████

Spouse's social security number

██████████

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

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

You  Spouse

4  Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5  Qualifying widow(er) with dependent child

Boxes checked on line 6a and 6b

2

No. of children

(3) Dependent's relationship to you

(4) Filing 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

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

6a  Spouse

c Dependents:

(1) First name \_\_\_\_\_ Last name \_\_\_\_\_ (2) Dependent's social security number \_\_\_\_\_

b Tax-exempt interest. Attach Schedule B if required

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

8a Taxable interest. Attach Schedule B if required

8a  222,855.

b Ordinary dividends. Attach Schedule B if required

9a Qualified dividends

9a  1,037.

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

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

STMT 2 STMT 3

10  146.

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

14  12

15a IRA distributions

15a  15b  503.

16a Pensions and annuities

16a  16b  222,855.

b Taxable amount

b Taxable amount

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

17  18

18 Farm income or (loss). Attach Schedule F

18  19

19 Unemployment compensation

19  20b  24,002.

20a Social security benefits

20a  28,238.1 b Taxable amount

21 Other income. List type and amount

21  22  245,526.

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

22  23  245,526.

23 Educator expenses

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

24  24

25 Health savings account deduction. Attach Form 8889

25  26

26 Moving expenses. Attach Form 3903

26  27

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

27  28

28 Self-employed SEP, SIMPLE, and qualified plans

28  29

29 Self-employed health insurance deduction

29  30

30 Penalty on early withdrawal of savings

30  31a Alimony paid b Recipient's SSN ▶

31a  32

32 IRA deduction

32  33

33 Student loan interest deduction

33  34

34 Tuition and fees. Attach Form 8917

34  35

35 Domestic production activities deduction. Attach Form 8903

35  36

36 Add lines 23 through 35

36  37  245,526.

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

37  11-07-11

**Credits**      **39a Check**

You were born before January 1, 1960.

Credits		38	Amount from line 37 (adjusted gross income)
Standard Deduction for -		39a	Check if <input checked="" type="checkbox"/> You were born before January 2, 1947, <input type="checkbox"/> Blind.      Total boxes checked ► 39a <input type="checkbox"/> 2
● People who check any box on line 30a or 30b or who can be claimed as a dependent.		39b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ► 39b <input type="checkbox"/>
● All others: Single or Married filing separately.		40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)
\$5,800		41	Subtract line 40 from line 38
Married filing jointly or Qualifying widow(er), \$11,600		42	Exemptions. Multiply \$3,700 by the number on line 6d
Head of household, \$8,500		43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-
		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
		45	Alternative minimum tax. Attach Form 6251
		46	Add lines 44 and 45 ► 46 42,759.
		47	Foreign tax credit. Attach Form 1116 if required ► 47 88.
		48	Credit for child and dependent care expenses. Attach Form 2441 ► 48
		49	Education credits from Form 8863, line 23 ► 49
		50	Retirement savings contributions credit. Attach Form 8880 ► 50
		51	Child tax credit (see instructions) ► 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 88.

**55** Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-.

**Taxes**      57 Unreported social security and Medicare tax from Form: a  4137 b  8919

**59a Household employment taxes from Schedule H**

**60** Other taxes. Enter code(s) from instructions

**STATEMENT 6** **62** **38,462.**

If you have **64a** Earned income credit (EIC)

**65 Additional child tax credit. Attach Form 8812**

67	First-time homebuyer credit from Form 5405, line 10	67
68	American opportunity credit from Form 8863, line 14	68

68	Allowing paid with request for extension to life	68
69	Excess social security and tier 1 RRTA tax withheld	69

70 Credit for federal tax on dues. Attach Form 4136

**Refund** 72 If line 72 is more than line 61 subtract line 61 from line 72. This is the amount you overpaid  
73 **1/2** **A00 lines 62, 63, 64a, all 65 through 71.** These are your total payments  
**30,402.00**

**14a** Amount or line 13 you want refunded to you. If Form 8888 is attached, check here  
Direct deposit?  Routing  Account   
**14a**

**75** Amount of line 73 you want applied to your 2012 estimated tax ..... **15**

**You Owe** **77** Estimated tax penalty (see instructions)

**Designee** **MICHELLE USHER, CPA**  
Name **no.** **(**  
number (PIN) **)**

Here to return?	Your signature
Date	Your occupation
Daytime phone number	Mr.      or      Mrs.      or      Mr. & Mrs.

If the IRS sent you an Identity Protection PIN,  Spouse's occupation Date Spouse's signature. If a joint return, both must sign.  Keep a copy of your

PrintType preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if PTN
---------------------------	----------------------	------	---------------------------------------

Preparer MICHELLE USHER, CPA  
11/10/2014

Phone no. ( )

**SCHEDULE A**

(Form 1040)

**Itemized Deductions****2011**Attachment  
Sequence No. 07Department of the Treasury  
(99) **► Attach to Form 1040. ► See Instructions for Schedule A (Form 1040).**Internal Revenue Service  
Name(s) shown on Form 1040OMB No. 1545-0074  
Your social security number

<b>RICHARD J. &amp; LORETTA M. DURBIN</b>		<b>2011</b>
<b>Medical and Dental Expenses</b>	Caution. Do not include expenses reimbursed or paid by others.	Attachment Sequence No. 07
1	Medical and dental expenses (see instructions)	1
2	Enter amount from Form 1040, line 38	2
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
<b>Taxes You Paid</b>	State and local (check only one box):	
a <input checked="" type="checkbox"/>	Income taxes, or	5
b <input type="checkbox"/>	General sales taxes	6
6	Real estate taxes (see instructions)	
7	Personal property taxes	7
8	Other taxes. List type and amount	8
9	Add lines 5 through 8	9
<b>Interest You Paid</b>	Home mortgage interest and points 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 ►	
10	Home mortgage interest and points reported to you on Form 1098	10
11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►	11
12	Points not reported to you on Form 1098. See instructions for special rules	12
13	Mortgage insurance premiums (see instructions)	13
14	Investment interest. Attach Form 4952 if required. (See instructions.)	14
15	Add lines 10 through 14	15
<b>Interest to Charity</b>	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16
16	Gifts by cash or check. If any gift of \$250 or more, see instructions	16
17	You must attach Form 8283 if over \$500	17
18	Carryover from prior year	18
19	Add lines 16 through 18	19
<b>Casualty and Theft Losses</b>	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20
<b>Job Expenses and Certain Miscellaneous Deductions</b>	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ►	
21	UNION AND PROFESSIONAL DUES U.S. CONGRESS TRAVEL EXP	105.
22	Tax preparation fees	21
23	Other expenses - investment, safe deposit box, etc. List type and amount	22
<b>SEE STATEMENT 7</b>		23
24	Add lines 21 through 23	24
25	Enter amount from Form 1040, line 38	25
26	Multiply line 25 by 2% (.02)	26
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0.	27
28	Other - from list in instructions. List type and amount	28
<b>Total Itemized Deductions</b>	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40	29
29	If you elect to itemize deductions even though they are less than your standard deduction, check here ►	29
30	47,136.	

**SCHEDULE B**  
(Form 1040A or 1040)**Interest and Ordinary Dividends**OMB No. 1545-0074  
Attachment Sequence No. 08**2011**

Name(s) shown on return

(99)

► Attach to Form 1040A or 1040.

► See instructions.

**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 property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ►

**CHARLES SCHWAB & CO**  
**CONGRESSIONAL FEDERAL CREDIT UNION**  
**CREDIT UNION ONE**

1	Amount	
	1.	121.
	2.	381.

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

1

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.

5 List name of payer ►

**CHARLES SCHWAB & CO**  
**MANULIFE FINANCIAL CORPORATION**

**PFIZER**

**PERSHING, LLC**

2	Amount	
	3.	503.
	4.	503.
	5.	503.

6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ►

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

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

**Part III**  
**Foreign Accounts and Trusts**

7a At any time during 2011, 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 ►

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

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

8 During 2011, 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

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

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127501  
11-02-11

## Interest and Dividend Summary

Name: RICHARD J. & LORETTA M. DURBIN

FEIN/SSI

104

**TOTALS:**

3. 1,037 -

848

130491  
11-07-11

**SCHEDULE D**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (pg)  
Name(s) shown on return**Capital Gains and Losses**OMB No. 1545-0074  
**2011**  
Attachment Sequence No. 12

▶ Attach to Form 1040 or Form 1040NR. ▶ See Instructions for Schedule D (Form 1040).

Your social security number  
[REDACTED]**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.

	(e) Sales price from Form(s) 8949, line 2, column (e)	(f) Cost or other basis from Form(s) 8949, line 2, column (f)	(g) Adjustments to gain or loss from Form(s) 8949, line 2, column (g)	(h) Gain or (loss) Combine columns (e), (f), and (g)
1 Short-term totals from all Forms 8949 with <b>box A checked in Part I</b>	29,259.	31,193.		<1,934.0>
2 Short-term totals from all Forms 8949 with <b>box B checked in Part I</b>	36,031.	43,018.		<6,987.0>
3 Short-term totals from all Forms 8949 with <b>box C checked in Part I</b>	( )	( )		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824	STMT. 11	4		<120.0>
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1		5		
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions		6		15,818.4
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		7		<24,859.0>

**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 its to whole dollars.

	(e) Sales price from Form(s) 8949, line 4, column (e)	(f) Cost or other basis from Form(s) 8949, line 4, column (f)	(g) Adjustments to gain or loss from Form(s) 8949, line 4, column (g)	(h) Gain or (loss) Combine columns (e), (f), and (g)
8 Long-term totals from all Forms 8949 with <b>box A checked in Part II</b>	( )	( )		
9 Long-term totals from all Forms 8949 with <b>box B checked in Part II</b>	36,404.	26,012.		10,392.0
10 Long-term totals from all Forms 8949 with <b>box C checked in Part II</b>	( )	( )		
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 12	11		<180.0>
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1		12		
13 Capital gain distributions	13			
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions	14			5,958.0
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (h). Then go to Part III on page 2		15		4,254.0
LHA For Paperwork Reduction Act Notice, see your tax return instructions.				Schedule D (Form 1040) 2011

00000611800

**Part III Summary**

- |    |                        |
|----|------------------------|
| 16 | <b>&lt;20,605.&gt;</b> |
|----|------------------------|
- 16 Combine lines 7 and 15 and enter the result .....
- 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?
- 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 .....
- 19 Enter the amount, if any, from line 18 of the **Unrecaptured Section 1250 Gain Worksheet** in the instructions .....
- 20 Are lines 18 and 19 both zero or blank?
- Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then 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 Form 1040 through line 43, or Form 1040NR through line 41. Then 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)
- SEE STATEMENT 13**
- 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 Form 1040 through line 43, or Form 1040NR through line 41. Then 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

**2011**

Attachment Sequence No. **12A**

Department of the Treasury  
Internal Revenue Service (99)

► See Instructions for Schedule D (Form 1040).

\*Caution. Do not complete column (b) or (g) until you have read the instructions for those columns (see the Instructions for Schedule D (Form 1040)).

Columns (b) and (g) do not apply for most transactions and should generally be left blank.  
 (A) Short-term transactions reported on Form 1099-B with basis reported to the IRS  
 (B) Short-term transactions reported on Form 1099-B but basis not reported to the IRS  
 (C) Short-term transactions for which you cannot check box A or B

Name(s) shown on return

Your social security number

RICHARD J. & LORETTA M. DURBIN

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

Note: You must check one of the boxes below. Complete a separate Form 8949, page 1, for each box that is checked.

\*Caution. Do not complete column (b) or (g) until you have read the instructions for those columns (see the Instructions for Schedule D (Form 1040)).

Columns (b) and (g) do not apply for most transactions and should generally be left blank.

(A) Short-term transactions reported on Form 1099-B with basis reported to the IRS  
 (B) Short-term transactions reported on Form 1099-B but basis not reported to the IRS  
 (C) Short-term transactions for which you cannot check box A or B

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Code, if any, for column (g)*	(c) Date acquired (Mo., day, yr.)	(d) Date sold (Mo., day, yr.)	(e) Sales price	(f) Cost or other basis	(g) Adjustments to gain or loss, if any*
1 APPLE INC COM		09/26/11	10/26/11	19,831.	20,009.	
AGILENT TECHNOLOGIES INC		02/08/11	08/05/11	9,428.	11,184.	
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 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 3010 3011 3012 3013 3014 3015 3016 3017 3018 3019 3020 3021 3022 3023 3024 3025 3026 3027 3028 3029 3030 3031 3032 3033 3034 3035 3036 3037 3038 3039 30310 30311 30312 30313 30314 30315 30316 30317 30318 30319 30320 30321 30322 30323 30324 30325 30326 30327 30328 30329 30330 30331 30332 30333 30334 30335 30336 30337 30338 30339 30340 30341 30342 30343 30344 30345 30346 30347 30348 30349 30350 30351 30352 30353 30354 30355 30356 30357 30358 30359 30360 30361 30362 30363 30364 30365 30366 30367 30368 30369 30370 30371 30372 30373 30374 30375 30376 30377 30378 30379 30380 30381 30382 30383 30384 30385 30386 30387 30388 30389 30390 30391 30392 30393 30394 30395 30396 30397 30398 30399 303100 303101 303102 303103 303104 303105 303106 303107 303108 303109 303110 303111 303112 303113 303114 303115 303116 303117 303118 303119 303120 303121 303122 303123 303124 303125 303126 303127 303128 303129 303130 303131 303132 303133 303134 303135 303136 303137 303138 303139 303140 303141 303142 303143 303144 303145 303146 303147 303148 303149 303150 303151 303152 303153 303154 303155 303156 303157 303158 303159 303160 303161 303162 303163 303164 303165 303166 303167 303168 303169 303170 303171 303172 303173 303174 303175 303176 303177 303178 303179 303180 303181 303182 303183 303184 303185 303186 303187 303188 303189 303190 303191 303192 303193 303194 303195 303196 303197 303198 303199 3031000 3031001 3031002 3031003 3031004 3031005 3031006 3031007 3031008 3031009 30310010 30310011 30310012 30310013 30310014 30310015 30310016 30310017 30310018 30310019 30310020 30310021 30310022 30310023 30310024 30310025 30310026 30310027 30310028 30310029 30310030 30310031 30310032 30310033 30310034 30310035 30310036 30310037 30310038 30310039 30310040 30310041 30310042 30310043 30310044 30310045 30310046 30310047 30310048 30310049 30310050 30310051 30310052 30310053 30310054 30310055 30310056 30310057 30310058 30310059 30310060 30310061 30310062 30310063 30310064 30310065 30310066 30310067 30310068 30310069 30310070 30310071 30310072 30310073 30310074 30310075 30310076 30310077 30310078 30310079 30310080 30310081 30310082 30310083 30310084 30310085 30310086 30310087 30310088 30310089 30310090 30310091 30310092 30310093 30310094 30310095 30310096 30310097 30310098 30310099 303100100 303100101 303100102 303100103 303100104 303100105 303100106 303100107 303100108 303100109 303100110 303100111 303100112 303100113 303100114 303100115 303100116 303100117 303100118 303100119 303100120 303100121 303100122 303100123 303100124 303100125 303100126 303100127 303100128 303100129 303100130 303100131 303100132 303100133 303100134 303100135 303100136 303100137 303100138 303100139 303100140 303100141 303100142 303100143 303100144 303100145 303100146 303100147 303100148 303100149 303100150 303100151 303100152 303100153 303100154 303100155 303100156 303100157 303100158 303100159 303100160 303100161 303100162 303100163 303100164 303100165 303100166 303100167 303100168 303100169 303100170 303100171 303100172 303100173 303100174 303100175 303100176 303100177 303100178 303100179 303100180 303100181 303100182 303100183 303100184 303100185 303100186 303100187 303100188 303100189 303100190 303100191 303100192 303100193 303100194 303100195 303100196 303100197 303100198 303100199 3031001000 3031001001 3031001002 3031001003 3031001004 3031001005 3031001006 3031001007 3031001008 3031001009 30310010010 30310010011 30310010012 30310010013 30310010014 30310010015 30310010016 30310010017 30310010018 30310010019 30310010020 30310010021 30310010022 30310010023 30310010024 30310010025 30310010026 30310010027 30310010028 30310010029 30310010030 30310010031 30310010032 30310010033 30310010034 30310010035 30310010036 30310010037 30310010038 30310010039 30310010040 30310010041 30310010042 30310010043 30310010044 30310010045 30310010046 30310010047 30310010048 30310010049 30310010050 30310010051 30310010052 30310010053 30310010054 30310010055 30310010056 30310010057 30310010058 30310010059 30310010060 30310010061 30310010062 30310010063 30310010064 30310010065 30310010066 30310010067 30310010068 30310010069 30310010070 30310010071 30310010072 30310010073 30310010074 30310010075 30310010076 30310010077 303100						





# 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.

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.      848.

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.      848.

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.      848.

7. Subtract line 6 from line 1. If zero or less, enter -0- 7.      190,142.

8. Enter:

\$ 34,500 if single or married filing separately,  
\$ 69,000 if married filing jointly or qualifying widow(er),  
\$ 46,250 if head of household.

9.      69,000.

10.     69,000.

11.     0.

12.     848.

13.     0.

14.     848.

15.     848.

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

17. Add lines 15 and 16      16.      41,309.

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

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

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

00000061434



## **2011 Income from Passthroughs**

---

UNITED STATES COMMODITY INDEX FUND, L.P.

I.D. NUMBER: 27-1987039

TYPE: PUBLICLY TRADED PARTNERSHIP

### **ACTIVITY INFORMATION:**

UNITED STATES COMMODITY INDEX FUND L.P.

100% DISPOSITION AT A NET LOSS

ORDINARY INCOME (LOSS)

-17.

TOTAL NONPASSIVE INCOME (LOSS)

-17.

### **OTHER K-1 INFORMATION:**

SECTION 1256 CONTRACTS AND STRADDLES

-1.

00000611316

## 2011 Income from Passthroughs

---

POWERSHARES DB PRECIOUS METALS FUND

I.D. NUMBER: 87-0778065

TYPE: PUBLICLY TRADED PARTNERSHIP

### ACTIVITY INFORMATION:

POWERSHARES DB PRECIOUS METALS FUND

### OTHER PASSIVE ACTIVITY

### OTHER K-1 INFORMATION:

SECTION 1256 CONTRACTS AND STRADDLES  
DEDUCTIONS RELATED TO PORTFOLIO INCOME

-299.  
2.

00000614827

128021  
05-01-1

0440414 765862 DTRRTN 2011 03042 DTRRTN RICHARD T

DTRRTN 1

19

## **2011 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**

-300.  
2.

00000611818

128021

05-01-11

0440414 765862 INTRPN 2011 03042 INTRPN BYCNRD T

BYCNRD 1

20

**Schedule E**      **Publicly Traded Partnerships**

---

Name of Activity: UNITED STATES COMMODITY INDEX FUND L.P. - ACTIVITY NO. 1

Activity net income						
Activity net loss						- 17.
Prior year unallowed losses						
Net income (loss)						- 17. 100% DISPOSITION
Total loss allowed from the PTP for 2011						17.

Disallowed losses from this PTP

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
<b>SCH E</b>	<b>- 17.</b>	<b>0.</b>	<b>- 17.</b>	<b>- 17.</b>	<b>17.</b>

**Alternative Minimum Tax**

Activity net income					
Activity net loss					- 17.
Prior year unallowed losses					
Net income (loss)					- 17. 100% DISPOSITION
Total loss allowed from the PTP for 2011					17.

Disallowed losses from this PTP

Alternative minimum tax adjustment

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
<b>SCH E</b>	<b>- 17.</b>	<b>0.</b>	<b>- 17.</b>	<b>- 17.</b>	<b>17.</b>

000006128

000006128

**Alternative Minimum Tax - Individuals**

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

► Attach to Form 1040 or Form 1040NR.

Your social security number  
**[REDACTED]****RICHARD J. & LORETTA M. DURBIN****Part II Alternative Minimum Taxable Income**

Line	Description	Your social security number
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.)	1 <u>198,390.</u>
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-.)	2 <u>0.</u>
3	Taxes from Schedule A (Form 1040), line 9	3 <u>20,170.</u>
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5 <u>3,000.</u>
6	Skip this line. It is reserved for future use	6 <u>0.</u>
7	Tax refund from Form 1040, line 10 or line 21	7 <u>-146.</u>
8	Investment interest expense (difference between regular tax and AMT)	8 <u>0.</u>
9	Depletion (difference between regular tax and AMT)	9 <u>0.</u>
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10 <u>0.</u>
11	Alternative tax net operating loss deduction	11 <u>0.</u>
12	Interest from specified private activity bonds exempt from the regular tax	12 <u>0.</u>
13	Qualified small business stock (7% of gain excluded under section 1202)	13 <u>0.</u>
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14 <u>0.</u>
15	Estate and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15 <u>0.</u>
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16 <u>0.</u>
17	Disposition of property (difference between AMT and regular tax gain or loss)	17 <u>0.</u>
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18 <u>0.</u>
19	Passive activities (difference between AMT and regular tax income or loss)	19 <u>0.</u>
20	Loss limitations (difference between AMT and regular tax income or loss)	20 <u>0.</u>
21	Circulation costs (difference between AMT and regular tax and AMT)	21 <u>0.</u>
22	Long-term contracts (difference between regular tax and AMT)	22 <u>0.</u>
23	Mining costs (difference between regular tax and AMT)	23 <u>0.</u>
24	Research and experimental costs (difference between regular tax and AMT)	24 <u>0.</u>
25	Income from certain installment sales before January 1, 1987	25 <u>0.</u>
26	Intangible drilling costs preference	26 <u>0.</u>
27	Other adjustments, including income-based related adjustments	27 <u>0.</u>
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$223,900, see instructions.)	28 <u>221,414.</u>

**Part III Alternative Minimum Tax (AMT)**

29	Exemption. (If you were under age 24 at the end of 2011, see instructions.) IF your filing status is ... AND line 28 is not over ... THEN enter on line 29 ...	
	Single or head of household ..... \$112,500	1
	Married filing jointly or qualifying widow(er) ..... 150,000	2
	Married filing separately ..... 75,000	3
	If line 28 is over the amount shown above for your filing status, see instructions.	4
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 31, 33, and 35, and go to line 34	5
31	• If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • 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.	6
32	• 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.	7
33	Alternative minimum tax. Subtract line 32 from line 31	8
34	Tentative minimum tax. Subtract line 32 from line 31	9
35	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	10
LHA	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	11
LHA	For Paperwork Reduction Act Notice, see your tax return instructions.	12

**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 this line ..... **36 164,818.**
- 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 ..... **37 848.**
- 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 ..... **39 848.**
- 40 Enter the smaller of line 36 or line 39 ..... **40 848.**
- 41 Subtract line 40 from line 36 ..... **41 163,970.**
- 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 42,632.**
- Enter:
- \$69,000 if married filing jointly or qualifying widow(er),
  - \$34,500 if single or married filing separately, or
  - \$46,250 if head of household.
- 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- ..... **43 69,000.**
- 44 ..... **190,142.**
- 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 ..... **46 848.**
- 47 Enter the smaller of line 45 or line 46 ..... **47**
- 48 Subtract line 47 from line 46 ..... **48 848.**
- 49 Multiply line 48 by 15% (.15) ..... **49 127.**
- If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50. **50 50**
- 50 Subtract line 46 from line 40 ..... **51**
- 51 Multiply line 50 by 25% (.25) ..... **52**
- 52 Add lines 42, 49, and 51 ..... **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 42,853.**
- 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 42,759.**

**Form 6781**  
Department of the Treasury  
Internal Revenue Service  
Name(s) shown on tax return

**Gains and Losses From Section 1256 Contracts and Straddles**

OMB No. 1545-0844  
**2011**  
Attachment Sequence No. **82**

► Attach to your tax return.

Identifying number  
[REDACTED]

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

Check all applicable boxes    **A**  Mixed straddle election    **C**  Mixed straddle account election  
(see instructions).    **B**  Straddle-by-straddle identification election    **D**  Net section 1256 contracts loss election

**Part I**  **Section 1256 Contracts Marked to Market**

(a) Identification of account	(b) (Loss)	(c) Gain
1 SEE STATEMENT 15		
2 Add the amounts on line 1 in columns (b) and (c)	2 (	300 )
3 Net gain or (loss). Combine line 2, columns (b) and (c)	3	-300.
4 Form 1099-B adjustments. See instructions and attach schedule	4	
5 Combine lines 3 and 4	5	-300.
<b>Note:</b> 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	6	
7 Combine lines 5 and 6	7	-300.
<b>Short-term capital gain or (loss).</b> Multiply line 7 by 40% (.40). Enter here and include on the appropriate line of Schedule D (see instructions)	8	-120.
<b>Long-term capital gain or (loss).</b> Multiply line 7 by 60% (.60). Enter here and include on the appropriate line of Schedule D (see instructions)	9	-180.

**art. II Gains and Losses From Straddles.** Attach a separate schedule listing each straddle and its components.

**Section A - Gains and Losses From Straddles**

(b) Date entered into or acquired	(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-
(a) Description of property					
(c) Date closed out or sold					
Mo. Day Yr.					

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**

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

12 N 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

**Section C - Gains and Losses From Options and Warrants**

(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-
(a) Description of property			
Mo. Day Yr.			

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

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

**Section D - Gains and Losses From Options and Warrants Held on Last Day of Tax Year**

(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-
(a) Description of property			
Mo. Day Yr.			

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 2011
- D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE FOR ALL OF 2011

- 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 . . . . .  
SPOUSE AMOUNT . . . . .  
14,119.  
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
- 1. 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. . . . .  
235,643.
- 2. SUBTRACT LINE 6 FROM LINE 5. . . . .  
3. 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. . . . .  
0.  
4. IS THE AMOUNT ON LINE 8 LESS THAN THE AMOUNT ON LINE 7?  
[ ] NO. STOP. NONE OF YOUR SOCIAL SECURITY BENEFITS ARE TAXABLE. ENTER -0- ON FORM 1040, LINE 20B. IF YOU ARE MARRIED FILING SEPARATELY AND YOU LIVED APART FROM YOUR SPOUSE FOR ALL OF 2011, BE SURE YOU ENTERED 'D' TO THE RIGHT OF THE WORD "BENEFITS" ON LINE 20A.  
[X] YES. SUBTRACT LINE 8 FROM LINE 7. . . . .  
5. ENTER \$9,000 IF YOU CHECKED BOX A OR D,  
\$12,000 IF YOU CHECKED BOX B  
\$-0- IF YOU CHECKED BOX C  
12,000.  
6. SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0-.  
7. ENTER THE SMALLER OF LINE 9 OR LINE 10. . . . .  
8. ENTER ONE HALF OF LINE 12. . . . .  
9. ENTER THE SMALLER OF LINE 2 OR LINE 13. . . . .  
10. MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-  
ADD LINES 14 AND 15. . . . .  
11. MULTIPLY LINE 1 BY 85% (.85). . . . .  
12.000.  
13.6,000.  
14.6,000.  
15.162,897.  
16.168,897.  
17.24,002.
- 9. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17  
\* ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B  
17.24,002.

RICHARD J. & LORETTA M. DURBIN

RM 1040

STATE AND LOCAL INCOME TAX REFUNDS

STATEMENT 2

2010                  2009                  2008

ILLINOIS

146.

OSS STATE/LOCAL INC TAX REFUNDS  
SS: TAX PAID IN FOLLOWING YEAR

T TAX REFUNDS ILLINOIS

146.

TAX NET TAX REFUNDS

146.

00000614820

2011 03042 DURBIN RICHARD J

STATEMENT(S) 2

DURBIN 1

26

	2010	2009	2008
TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.			
-SALES TAX BENEFIT REDUCTION			
NET REFUNDS FOR RECALCULATION	146.		

ISS : REFUNDS - NO BENEFIT DUE TO AMT  
LOCAL INCOME TAX REFUNDS STMT.

-SALES TAX BENEFIT REDUCTION  
146.

## TOTAL ITEMIZED DEDUCTIONS

BEFORE PHASEOUT

48,227.

DEDUCTION NOT SUBJ TO PHASEOUT

NET REFUNDS FROM LINE 1

146.

LINE 2 MINUS LINES 3 AND 4

MULT LN 5 BY APPL SEC. 68 PCT

PRIOR YEAR AGI

ITEM. DED. PHASEOUT THRESHOLD

SUBTRACT LINE 8 FROM LINE 7

(IF ZERO OR LESS, SKIP LINES

10 THROUGH 15, AND ENTER

AMOUNT FROM LINE 1 ON LINE 16)

MULT LN 9 BY APPL SEC. 68 PCT

ALLOWABLE ITEMIZED DEDUCTIONS

(LINE 5 LESS THE LESSER OF

LINE 6 OR LINE 10)

ITEM DED. NOT SUBJ TO PHASEOUT

3A TOTAL ADJ. ITEMIZED DEDUCTIONS	48,081.
3B PRIOR YR. STD. DED. AVAILABLE	13,600.
PRIOR YR. ALLOWABLE ITEM. DED.	48,227.

SUBTRACT THE GREATER OF LINE

13A OR LINE 13B FROM LINE 14

146.

146.

; TAXABLE REFUNDS

(LESSER OF LINE 15 OR LINE 1)

48,227.

48,227.

; ALLOWABLE PRIOR YR. ITEM. DED.

13,600.

; PRIOR YEAR STD. DED. AVAILABLE

SUBTRACT LINE 18 FROM LINE 17

LESSER OF LINE 16 OR LINE 19

146.

; PRIOR YEAR TAXABLE INCOME

172,344.

;N AMOUNT TO INCLUDE ON FORM 1040, LINE 10

\* IF LINE 21 IS -0- OR MORE, USE AMOUNT FROM LINE 20

\* IF LINE 21 IS A NEGATIVE AMOUNT, NET LINES 20 AND 21

STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2008

TOTAL TO FORM 1040, LINE 10

146.

RICHARD J. & LORETTA M. DURBIN

RM 1040

WAGES RECEIVED AND TAXES WITHHELD

STATEMENT 4

EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
UNITED STATES SENATE GOVERNMENT AFFAIRS SPECIALISTS, INC.	147,398.	25,275.	6,931.	4,486.	2,364.	
TOTALS	75,457.	13,104.	3,500.	3,169.	1,094.	
	222,855.	38,379.	10,431.	7,655.	3,458.	

FORM 1040  
QUALIFIED DIVIDENDS  
STATEMENT 5

NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
CHARLES SCHWAB & CO	398.	381.
LIFE FINANCIAL CORPORATION	295.	295.
ER HING, LLC	98.	98.
	246.	74.
L INCLUDED IN FORM 1040, LINE 9B		848.

FORM 1040  
FEDERAL INCOME TAX WITHHELD  
STATEMENT 6

DESCRIPTION  
AMOUNT

UNITED STATES SENATE GOVERNMENT AFFAIRS SPECIALISTS, INC.	25,275.
MANULIFE FINANCIAL CORPORATION	13,104.
TOTAL TO FORM 1040, LINE 62	83.
	38,462.

00000614226

RICHARD J. & LORETTA M. DURBIN

SCHEDULE A MISCELLANEOUS DEDUCTIONS SUBJECT TO FLOOR STATEMENT 7

DESCRIPTION

DESCRIPTION	AMOUNT
TOTAL REFLECTS \$3000IRC 162(A) LIMIT ON DC LIVING EXPENSES FOR CONGRESSMEN	4,149.
FROM K-1 - POWERSHARES DB PRECIOUS METALS FUND	2.
TOTAL TO SCHEDULE A, LINE 23	4,151.

FORM 8949 A SHORT-TERM CAPITAL GAINS AND LOSSES STATEMENT 8

DESCRIPTION OF PROPERTY	SALES PRICE	COST OR OTHER BASIS	ADJUSTMENTS TO GAIN OR LOSS	GAIN OR LOSS
APPLE INC COM	19,831.	20,009.		-178.
ENT TECHNOLOGIES INC	9,428.	11,184.		-1,756.
L TO SCH D, LINE 1	29,259.	31,193.		-1,934.

8949 B SHORT-TERM CAPITAL GAINS AND LOSSES STATEMENT 9

DESCRIPTION OF PROPERTY	SALES PRICE	COST OR OTHER BASIS	ADJUSTMENTS TO GAIN OR LOSS	GAIN OR LOSS
POWERSHARES DB MULTI INDEX FD	1,325.	1,440.		-115.
SHARES TR S&P LATN AMER	1,432.	1,518.		-86.
SHARES TR S&P LATN AMER	8,245.	10,371.		-2,126.
CHW US SCAP ETF	8,245.	10,185.		-1,940.
VEEDY BROWNE GLOBAL VALUE FUND	7,240.	9,375.		-2,135.
WEEDY BROWNE GLOBAL VALUE FUND	9,422.	9,999.		-577.
VEEDY BROWNE GLOBAL VALUE FUND	22.	23.		-1.
VEEDY BROWNE GLOBAL VALUE FUND	100.	107.		-7.
TOTAL TO SCH D, LINE 2	36,031.	43,018.		-6,987.

RICHARD J. & LORETTA M. DURBIN

**FORM 8949 B**

**LONG-TERM CAPITAL GAINS AND LOSSES**

**STATEMENT 10**

LONG-TERM CAPITAL GAINS AND LOSSES

**STATEMENT 10**

ADJUSTMENTS SALES PRICE	COST OR OTHER BASIS	TO GAIN OR LOSS	GAIN OR LOSS
BERKSHIRE HATHAWAY B EWCLASS B	20,043.	13,006.	7,037.
BERKSHIRE HATHAWAY B EWCLASS B	16,361.	13,006.	3,355.
TOTAL TO SCH D, LINE 9	36,404.	26,012.	10,392.

**SCHEDULE D**

**NET SHORT-TERM GAIN OR LOSS FROM  
STATEMENT 11**

**FORMS 6252 - 4684 - 6781 AND 8824**

**DESCRIPTION OF PROPERTY**  
**GAIN OR LOSS**

L TO SCHEDULE D, PART I, LINE 4  
-120.

## **NET LONG-TERM GAIN OR LOSS FROM INVESTMENT**

JRM 6781, PART I  
-180.

TOTAL TO SCHEDULE D, PART II, LINE 11

SCHEDULE DCAPITAL LOSS CARRYOVER

STATEMENT 13

- |  |          |
|--|----------|
| • ENTER THE AMOUNT FROM FORM 1040, LINE 41 . . . . .               | 198,390. |
| • ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT.   | 3,000.   |
| 3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0- . . . . .     | 201,390. |
| 1. ENTER THE SMALLER OF LINE 2 OR LINE 3 . . . . .                 | 3,000.   |
| 5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT .  | 24,859.  |
| 6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D,                        |          |
| LINE 15 . . . . .  | 4,254.   |
| 7. ADD LINES 4 AND 6 . . . . .                                     | 7,254.   |
| 3. SHORT-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR.                 |          |
| SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0- . . . . .  | 17,605.  |
| 9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT.  |          |
| 10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D,                       |          |
| LINE 7 . . . . .   |          |
| 11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS,                  |          |
| ENTER -0- . . . . .  |          |
| 2. ADD LINES 10 AND 11 . . . . .                                   |          |
| 2. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR.                  |          |
| SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0- . . . . . |          |

00000511829

ENTER: \$48,430 IF SINGLE OR HEAD OF HOUSEHOLD; \$3,450 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$37,225 IF MARRIED FILING SEPARATELY. . . . . . . . . . . . .  
ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME  
(AMTI) FORM 6251, LINE 28 . . . . . . . . . .  
ENTER: \$112,500 IF SINGLE OR HEAD OF HOUSEHOLD;  
\$150,000 IF MARRIED FILING JOINTLY OR

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  
17,854.

AGE 24 APPLY TO YOU, COMPLETE LINES 7 THROUGH 10.  
OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251,  
LINE 29, AND GO TO FORM 6251, LINE 30 . . . . .  
56,596.

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 . . . . .

PART I - SECTION 1256 CONTRACTS MARKED TO MARKET STATEMENT 15 TERM 6781

## IDENTIFICATION OF ACCOUNT

• P.  
• ROM K-1 - UNITED STATES COMMODITY INDEX FUND,  
• ROM K-1 - POWERSHARES DB PRECIOUS METALS FUND

DATA, TO FORM 6781, LINE 1, COLUMNS B AND C

(B) LOSS (C) GAIN

Form **8879****IRS e-file Signature Authorization**

OMB No. 1545-0074

► Do not send to the IRS. This is not a tax return.  
 ► Keep this form for your records. See instructions.

**2011**

Declaration Control Number (DCN) ▶ **00 - 371219 - 19441 - 2**

Taxpayer's name

**RICHARD J. DURBIN**

Spouse's name

**LORETTA M. DURBIN**

**Part I Tax Return Information - Tax Year Ending December 31, 2011 (Whole Dollars Only)**

	Social security number
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	<b>1 245,526.</b>
2 Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10)	<b>2 42,671.</b>
3 Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7)	<b>3 38,462.</b>
4 Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11; Form 1040-SS, Part I, line 12a)	<b>4</b>
5 Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12)	<b>5 4,209.</b>

**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, 2011, 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, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). I authorize EFTPS to issue me a personal identification number (PIN) to access EFTPS. This authorization is remain in full force and effect until I notify the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received 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 of 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 **SIKICH LLP**

ERO firm name

as my signature on my tax year 2011 electronically filed income tax return.

 I will enter my PIN as my signature on my tax year 2011 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 PIN: check one box only

 I authorize **SIKICH LLP**

ERO firm name

as my signature on my tax year 2011 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2011 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.

Spouse's signature ▶ \_\_\_\_\_

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

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2011 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

## Illinois Department of Revenue

**2011 Form IL-1040**

Individual Income Tax Return or for fiscal year ending \_\_\_\_\_

Do not write above this line.

**Step 1: Personal Information**

RICHARD J. DURBIN

LORETTA M. DURBIN

SPRINGFIELD, IL [REDACTED]

**C** Filing status (see instructions)  Single or head of household  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 **1** **245,526.00**  
**U.S. 1040EZ, Line 4.**

**2** Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; **2** **.00**  
 or U.S. 1040EZ.

**3** Other additions. Attach Schedule M.

**4** Total income. Add Lines 1 through 3.

**Step 3:**  
**Base** **5** Social Security benefits and certain retirement plan income **5** **24,002.00**  
**Income** **6** Illinois Income Tax overpayment included in U.S. 1040, Line 10. **6** **146.00**  
**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** **24,148.00**  
**9** Illinois base income. Subtract Line 8 from Line 4. **9** **221,378.00**

**Step 4:** **10** **a** Number of exemptions from your federal return. **2** **x \$2,000 a 4,000.00**  
**Exemptions** **b** If someone can claim you as a dependent, see instructions. **5** **x \$2,000 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 = **10** **x \$1,000 d .00**  
 Exemption allowance. Add Lines a through d.

**Step 5:** **11** Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12. **11** **215,378.00**  
**Net** **12** Nonresidents and part-year residents:  
 Check the box that applies to you during 2011  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).  
**Tax** **14** Nonresidents and part-year residents: Write the tax from Schedule NR.  
**15** Recapture of investment tax credits. Attach Schedule 4255.  
**16** 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** **17** Attach Schedule CR.  
**Non-refundable** **17** Property tax and K-12 education expense credit amount from **17** **261.00**  
**Credits** **18** Schedule ICR. Attach Schedule ICR. **18** **.00**  
**19** Credit amount from Schedule 1299-C. Attach Schedule 1299-C. **19** Add Lines 16, 17, and 18. This is the total of your credits.  
**20** Cannot exceed the tax amount on Line 15.  
**20** Tax after nonrefundable credits. Subtract Line 19 from Line 15.

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

**21** 10,508.00

**Step 8:** **22** Household employment tax. See instructions.

**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.**

**24** Total Tax. Add Lines 21, 22, and 23.

**22** 10,508.00

**Step 9:** **25** Illinois Income Tax withheld. Attach W-2 and 1099 forms.

**Payments** **26** Estimated payments from Forms IL-1040-ES and IL-505-I, and including overpayment applied from 2010 return.

**25** 10,431.00

**Refundable Credit** **27** Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T.

**26** 0.00

**Credit** **28** Earned Income Credit from Schedule ICR. Attach Schedule ICR.

**27** 0.00

**29** Total payments and refundable credit. Add Lines 25 through 28.

**28** 0.00

**Step 10:** **30** Overpayment. If Line 29 is greater than Line 24, subtract Line 24 from Line 29.

**30** 0.00

**Result:** **31** Underpayment. If Line 24 is greater than Line 29, subtract Line 29 from Line 24.

**31** 157.00

**Step 11:** **32** Late-payment penalty for underpayment of estimated tax.

**32** 0.00

**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.

**33** Voluntary charitable donations. Attach Schedule G.

**33** 0.00

**34** Total penalty and donations. Add Lines 32 and 33.

**34** 0.00

**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** 0.00

**Amount You Want Refunded To You** **36** Amount from Line 35 you want refunded to you.

**36** 0.00

**We** **37** Complete to direct deposit your refund

**37** 0.00

Routing number \_\_\_\_\_

Checking or  Savings

Account number \_\_\_\_\_

**38** Subtract Line 36 from Line 35. This amount will be applied to your 2012 estimated tax.

**38** 0.00

**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**

**COPIED**

**11/14/12**

**Date**

**Preparer's signature**

**Paid preparer's signature**

**Date**

**Your signature**

**Date**

**Daytime phone number**

**Date**

**Your spouse's signature**

**Date**

**Preparer's phone number**

**Date**

**Preparer's FEIN, SSN, or PTIN**

**Date**

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

**Name (please print)**

**MICHELLE USHER, CPA**

**Designee's**

**Phone number**

**Date**

**My Information**  Next year (in January 2013), we will 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  
2011 Schedule ICR Illinois Credits**

Attach to your Form IL-1040

IL Attachment No. 23

**Read this information first**  
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 10,769.00
- 2 Write the amount of credit for tax paid to other states from your IL-1040, Line 16. 2 0.00
- 3 Subtract Line 2 from Line 1. 3 10,769.00

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

- 4 a Write the total amount of Illinois Property Tax paid during the tax year for the real estate that includes your principal residence. 4a 5,224.00
- b Write the property number for the property listed above. 4b 22-05-0-131-015
- c Write the property number for an 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 0.00  
4f 5,224.00
- f Subtract Line 4e from Line 4a. 4g 261.00
- g Multiply Line 4f by 5% (.05). 5 261.00
- 5 Compare Lines 3 and 4g, and write the lesser amount here. 6 Subtract Line 5 from Line 3. 6 10,508.00

**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.

- b You may not take a credit for the first \$250 paid. 7a 0.00
- c Subtract Line 7b from Line 7a. If the result is negative, enter "zero." 7b 250.00
- d Multiply Line 7c by 25% (.25). Compare the result and \$500, and write the lesser amount here. 7c 0.00
- e Compare Lines 6 and 7d, and write the lesser amount here. 7d 0.00

**Section C - Total Nonrefundable Credit**

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



9 261.00



# Schedule ICR - Page 2

## Step 3: Figure your refundable credit

### Earned Income Credit

- 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.
- b Multiply the amount on Line 10a by 5% (.05).
- c Illinois residents: Write 1.0.

Nonresidents and part-year residents: Write the decimal from Schedule-NR, Line 48.

- 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.

### 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
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



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149382  
12-22-11  
Page 2

This form is authorized as outlined under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information could result in a penalty.

# 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% (0.0006)

## 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.  
**1b** Multiply Line 1a by 6.25% (.0625). Round the result to whole dollars.  
**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.  
**2b** Multiply Line 2a by 1% (.01). Round the result to whole dollars.  
**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** \_\_\_\_\_ .00      **80** .00

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

# Form 1040 U.S. Individual Income Tax Return (2011)

**2011**

OMB No. 1545-0074

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

For the year Jan. 1-Dec. 31, 2011, or other tax year beginning \_\_\_\_\_, 2011, ending \_\_\_\_\_, 20\_\_\_\_\_.  
Your first name and initial \_\_\_\_\_ Last name \_\_\_\_\_ Your social security number \_\_\_\_\_

**RICHARD J.** Last name **DURBIN** Spouse's social security number \_\_\_\_\_

If a joint return, spouse's first name and initial \_\_\_\_\_ Last name **DURBIN**

**LORETTA M.**

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

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

**SPRINGFIELD, IL**

Foreign country name \_\_\_\_\_ Foreign province/country \_\_\_\_\_ Foreign postal code \_\_\_\_\_ Apt. no. \_\_\_\_\_

Foreign country name \_\_\_\_\_

**Filing Status** 1  Single 4  Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. ▶

2  Married filing jointly (even if only one had income) 5  Qualifying widow(er) with dependent child

3  Married filing separately. Enter spouse's SSN above

Check only one box. and full name here. ▶

**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 \_\_\_\_\_

(5) If child over age 17 \_\_\_\_\_

(6) If child not a dependent \_\_\_\_\_

(7) If child not a dependent \_\_\_\_\_

(8) If child not a dependent \_\_\_\_\_

(9) If child not a dependent \_\_\_\_\_

(10) If child not a dependent \_\_\_\_\_

(11) If child not a dependent \_\_\_\_\_

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(16) If child not a dependent \_\_\_\_\_

(17) If child not a dependent \_\_\_\_\_

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(24) If child not a dependent \_\_\_\_\_

(25) If child not a dependent \_\_\_\_\_

(26) If child not a dependent \_\_\_\_\_

(27) If child not a dependent \_\_\_\_\_

(28) If child not a dependent \_\_\_\_\_

(29) If child not a dependent \_\_\_\_\_

If more than four dependents, see instructions and check here ▶

d Total number of exemptions claimed \_\_\_\_\_

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

8a Taxable interest. Attach Schedule B if required

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

W-26 and 1099-R if tax was withheld.

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 ▶

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

14 Other gains or (losses). Attach Form 4797

15a IRA distributions

16a Pensions and annuities

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

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

24 Health savings account deduction. Attach Form 8889

25 Moving expenses. Attach Form 3903

26 Deductible part of self-employment tax. Attach Schedule SE

27 Self-employed SEP, SIMPLE, and qualified plans

28 Self-employed health insurance deduction

29 Penalty on early withdrawal of savings

30 Alimony paid b Recipient's SSN

7

8a

b

9a

b

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11

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14

15b

16b

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20b

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**RICHARD J. & LORETTA M. DURBIN****Tax and Credits**38 Amount from line 37 (adjusted gross income) **38 245,526.**

(see left margin)

Total boxes

checked

► 39a **2**► 39b 

39a Check if:

if:

b If your spouse itemizes on a separate return or you were a dual-status alien, check here

► 39a ► 39b 

check

if PTIN

- 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, \$5,800
- 40 Itemized deductions** (from Schedule A) or your **standard deduction** (see left margin) **40 47,136.**
- 41 Subtract line 40 from line 38** **41 198,390.**
- 42 Exemptions.** Multiply \$3,700 by the number on line 6d' **42 7,400.**
- 43 Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- **43 190,990.**
- 44 Tax.** Check if any from: a  Form(s) 8814 b  Form 4972 c  962 election **44 41,436.**
- 45 Alternative minimum tax.** Attach Form 6251 **45 1,323.**
- 46 Add lines 44 and 45** **46 42,759.**
- 47 Foreign tax credit.** Attach Form 1116 if required **47 88.**
- 48 Credit for child and dependent care expenses.** Attach Form 2441 **48**
- 49 Education credits from Form 8863, line 23** **49**
- 50 Retirement savings contributions credit.** Attach Form 8880 **50**
- 51 Child tax credit (see instructions)** **51**
- 52 Residential energy credits.** Attach Form 5695 **52**
- 53 Other credits from Form:** a  3800 b  8801 c  **53**

- 54 Add lines 47 through 53.** These are your **total credits** **54 88.**
- 55 Subtract line 54 from line 46.** If line 54 is more than line 46, enter -0- **55 42,671.**
- Other Taxes**
- 56 Self-employment tax.** Attach Schedule SE **56**
- 57 Unreported social security and Medicare tax from Form:** a  4137 b  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 42,671.**
- Payments**
- 62 Federal income tax withheld from Forms W-2 and 1099** **62 38,462.**
- 63 2011 estimated tax payments and amount applied from 2010 return** **63**
- 64a Earned income credit (EIC)** **64a**
- b Nontaxable combat pay election** **64b**
- 65 Additional child tax credit.** Attach Form 8812 **65**
- 66 American opportunity credit** **66**
- 67 First-time homebuyer credit from Form 8863, line 14** **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  8839 c  8801 d  8885 **71**
- 72 Add lines 62, 63, 64a, and 65 through 71.** This are your **total payments** **72 38,462.**
- 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**
- Direct deposit?**  Routing **74a** ► **c Type:**  Checking  Savings ► **d Account number:** **74a**
- See instructions.**
- 75 Amount of line 73 you want applied to your 2012 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 4,209.**

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)?  Yes. Complete below.  
**Name** ► **MICHELLE USHER, CPA** **Phone** ► **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, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

**W-Here** Date Your occupation **U. S. SENATOR** Spouse's occupation  
**W-Joint return?** Date Daytime phone number  
**W-See instructions.** Date If the IRS sent you an Identity Protection PIN, enter it here  
**W-Keep a copy of your records.** Date Spouse's signature. If a joint return, both must sign. **LOBBYIST**

**Paid** Print/Type preparer's name Preparer's signature Date Check  if self-employed

**Preparer MICHELLE USHER, CPA** Firm's name ► **STKICH LLP** Firm's EIN ► **██████████** Phone no. **██████████**

110002 Firm's address ► **SPRINGFIELD, IL** Phone no. **██████████**  
11-07-11

Illinois Department of Revenue

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**-8453** Illinois 2011 Individual Income Tax Electronic Filing Declaration  
Declaration Control Number (DCN)

**Step 1: Provide taxpayer information**

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

Journal of Health Politics, Policy and Law, Vol. 29, No. 3, June 2004  
DOI 10.1215/03616878-29-3 © 2004 by The University of Chicago

**Mailing address** Spouse's Social Security number  
**SPRINGFIELD**  
**IL**   
**City** **State** **ZIP**  
**Daytime phone number**

## Step 2: Complete information from tax return

**Net income from Form IL-1040, Line 11, or Schedule NIT, Step 3, Line 2:**

**2 Tax from Form IL-1040, Line 13**

**2** 10,769.0

**2** 10,431.0

**4** Overpayment from Form IL-1040, Line 35  
**4** \_\_\_\_\_ 0  
**E** \_\_\_\_\_ 1570

**Filing status:**        Single/head of household X Married filing jointly        Married filing separately        Widowed

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

To initiate a payment or refund transaction, the information in this Step must be included within the electronic transmission. Illinois does not

Payments must be made by personal check, money order, cashier's check or bank draft. International, non-governmental organizations, NGOs, foundations, and other entities are not eligible to apply for grants. Grants will not be issued to individuals, companies, or organizations located in the United States or those not funded by international funds. Electronic payments will not be accepted and refunds will be via paper check.

Account no. (AN): \_\_\_\_\_  
Type of account:      Checking      Savings

Date the payment is to be electronically withdrawn: \_\_\_\_\_  
Electronic funds withdrawal amount: \_\_\_\_\_ |00

12 Name on account: \_\_\_\_\_

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.

designated in the electronic portion of my 2011 Illinois income tax return. I authorize the financial institutions involved in the processing of any 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.

(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 DOR to notify the lessor(s) so the lessor may be contacted about possession.

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 instruction  
for signature)

**SIKICH LLP**

use  
only  
  
Mailing address  
  
[REDACTED]  
  
Federal employer identification no. (FEIN)  
[REDACTED]

**SPRINGFIELD, IL**  
City \_\_\_\_\_  
State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone number \_\_\_\_\_

**Step 0. Attach request**