2 107	<u>'U</u>	U.S. Individual Income Tax Retur	m ZUI	(99) IRS Use	Only - Do	not write o	r staple in this space.	
Name.			. 20	10, ending	, 20		OMB No. 1545-00	74
Address,	î	Your first name and initial	Last name			,	Your social security num	iber
and SSN	Ď.	FIMOTHY M.	KAINE					
	' '	f a joint return, spouse's first name and initial	Last name				Spouse's social security	number
i			HOLTON					
Name, Address, and SSN See separate instructions. Presidential Election Campaign Filing Status Check only one box. Exemptions Filing Status Check only one box. Exemptions Filing Status Check only one box. Exemptions Gal N. If more than four dependents, see instructions and check here one of the composition of the composi	lome address (number and street). If you have a P	O. box, see instructions.		Apt. r	10.	Adaha gura tha CCAII		
See separate instructions. Presidential Election Camporate Exemptions If more than four dependents, see instructions and check here Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a W-2, see page 20. Inclose, but do not attach, any ayment. Also,	Ā				'	- 1	-	
instructions.	R T	ity, town or post office, state, and ZIP code.	- 		L			
Presidential	Ÿ]	RICHMOND, VA 23227-440)5				- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
Election Cam	paign			go to this fund				
E::: 0: :	1		3 (0.11.1)		old (with	qualifica		
Name, Address, and SNN TIMOTHY M. TIMOTH								
9	_		1. Coc. 31. 2010, or other tax, year beginning 2. 2010, enough 3. 2000, which is a special security number 4. I said name and initial 1. Last name 4. Last name 5. FOLTON 5. Social security number 6. S					
Name, Address, and SSN See separate instructions. Presidential Election Campa Filing Status Check only one box. Exemptions If more than four dependents, see instructions and check here Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. Inclose, but do not get a W-2, see page 20. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V. Inclusted iross Income	·		ON GDUVE	100.00	/			
Name, Address, and SSN See Separate instructions. Presidential Election Campaign Check only one box. Exemptions If more than four dependents, see instructions and check here Attach Forms W-26 and 1099-R if tax was withheld. Attach Forms W-26 ter a W-2, tee page 20. If you did not get a W-2, tee page 20. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V. If you did not get a W-2, tee page 20. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V. Income Attach Forms W-26 and the form of the tar W-2, the page 20. Inclose, but do not get a W-2, the page 20.		annodont de establech					2	
Exemption:		TP 6		ux oa			on 6a and 6b	
				/2) Dependentin	Military II	(4) Vit chil	on 6c who:	_
	'	' '		relationship to	Apt. no. Apt. no. Make sure the SSN(s) above And on line 6c are correct. Checking a box below will not change your tax or refund. Pyou Spouse seal security number is should (with qualifying person). If the qualifying child but not your dependent, enter this child should be apt to the last reful bacted in the control of the contr			
Name, Address, and SSN See separate instructions. Presidential Election Campa Filing Status Check only one box. Exemptions If more than four dependents, see instructions and check here Income Attach Form(s) W-2 here. Also attach Forms W-26 and 1099-R if tax was withheld. If you did not let a W-2, see page 20. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V.			· · · · · · · · · · · · · · · · · ·			tax credit	you due to divorce	•
See separate instructions. Presidential Election Campa Filing Status Check only one box. Exemptions If more than four dependents, see instructions and check here Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a W-2, see page 20. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V.							— Denendents on 6c	
		ANNELLA KAINE		DAUGHTER		X		
check here	لــا	Total number of supportions defined			i		Add numbers	
Income		, ,				7		
Attach Form(s)		ececec.				8a	1	<u>95.</u>
	_			_ 8b]		
		A 12 1 4 1 1 1 1		1 1		\rightarrow	5	<u>61.</u>
		**************************************			<u>561</u> .	4 1		
vas withheld.			ocal income taxes			10	1,0	<u>55.</u>
						11		
W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a W-2, see page 20.		Business income or (loss). Attach Schedule C or	C-EZ		*********	12	24,3	00.
			ed. If not required, check	here		13		<u> 26.</u>
If more than four dependents, see instructions and check here Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a W-2, see page 20. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V.						14		
nclose but do		S S S S S S S S S S S S S S S S S S S				15b		
		LOURS CONTRACT CONTRA		b Taxable amount		16b		
Name, Address, and SSN See separate instructions. Presidential Election Camp Filing Statu Check only one box. Exemptions If more than four dependents, see instructions and check here Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V.			prations, trusts, etc. Attac	h Schedule E		17		
				···		18		
OIII 1040-V.		Unemployment compensation				19		
		Social security benefits 20a		b Taxable amount	water or	20b		
	Taxable refunds, credits, or offsets of state and local income taxes 10 Taxable refunds, credits, or offsets of state and local income taxes 11 Alimony received 12 Business income or (loss). Attach Schedule C or C-EZ 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 13 age 20. 14 Other gains or (losses). Attach Form 4797 15a IRA distributions 15a b Taxable amount 15b ISA 16a Pensions and annuities 16a b Taxable amount 16b ent. Also, 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 19 Unemployment compensation 19 Unemployment compensation 20a Social security benefits 20a b Taxable amount 20b							
						21		number s) above orrect in not d. spouse lifying ald's 2 3 5 85. 95. 61. 22.
.			ines 7 through 21. This is	your total income		22	320,02	22.
المستحدثات		Educator expenses Certain business expenses of reservists, performing artists	and fee-basis government	23				
•				2010, ending 20				
			889	25				
		One-half of self-employment tax. Attach Schedule	SE	27 1,	717.			
		Self-employed SEP, SIMPLE, and qualified plans		28				
	_	Self-employed health insurance deduction		29				
	30	Penalty on early withdrawal of savings	***************************************	30				
	31a	Alimony paid b Recipient's SSN ▶	1 1	31a				
	32	IRA deduction		32				
	33	Student loan interest deduction		33				
	34	Tuition and fees. Attach Form 8917			Apt. no. Sehold (with qualifying child but not your dependent of to line) Apt. no. Sehold (with qualifying child but not your dependent of to line) Apt. no. Sehold (with qualifying child but not your dependent of to line) Apt. no. Apt. no. Sehold (with qualifying child but not your dependent of to line) Apt. no. Ap			
See separate instructions. Presidential Election Camp Filing Status Check only one box. Exemptions If more than four dependents, see instructions and check here Income Attach Form(s) W-2 here. Also attach Forms W-26 and 1099-R if tax was withheld. If you did not get a W-2, see page 20. Inclose, but do not attach, any ayment. Also, lease use orm 1040-V.	35	Domestic production activities deduction. Attach F	orm 8903	35				
	36	Add lines 23 through 31a and 32 through 35			55350101	36	1,71	7.
27-11	37	Subtract line 36 from line 22. This is your adjusted	d gross income	CANADA CONTRACTOR	. •	37	318,30	

2010



Form 1040 (20		TIMOTHY M. KAINE & ANNE B. HOLTON				Page
	38	Amount from line 37 (adjusted gross income)			38	318,305
Credits	398	Check \ \ \ You were born before January 2, 1946, \ \ \ Blind. \	Total boxes			
		if: Spouse was born before January 2, 1946, Blind.	checked > 39	a		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, ch	eck here	39b	12	
	40				40	44,191
	41	Continue Con				274,114
	42	Exemptions. Multiply \$3,650 by the number on line 6d			42	18,250
	43	Taxable income. Subtract line 42 from line 41, If line 42 is more than line 41, e	nter -0-	A.C. A. C.	42	255,864
	44	Tax. Check if any tax is from: a Form(s) 8814 b Form 4972			44	62,110
	45	Alternative minimum tax. Attach Form 6251			45	6,294
	46	Add lines 44 and 45				68,404
	47	Foreign tax credit. Attach Form 1116 if required	47		70	00,404
	48	Credit for child and dependent care expenses. Attach Form 2441	48		1	
	49	Education credits from Form 8863, line 23	40		-	
	50	Retirement savings contributions credit Attach Form 8880	50		1	
			7		-	
				 -	-	
		Other credits from Form: a 3800 b 8801 c	·		1 1	
		Add lines 47 through 53. These are your total credits	33		-	
		Subtract line 54 from line 46. If line 54 is more than line 46, enter .0.				CO 404
Same Amount from line 3 (adjusted gross income) 38	68,404.					
Payments If you have a qualifying child, attach Schedule EIC. Refund Direct deposit? See instructions. Amount You Owe	57	Incendited social security and Medicare tay from Form: a 4127 b	0040			3,433.
	58	Additional tax on IRAs, other qualified retirement clans, etc. Attach Form 5220 is	0919			·
	59	Form/s) W-2 hox 9 h Cohodulo H	required			
			U5, line 16	en nomarii		E1 03E
Payments	61	Federal income tay withheld from Forms W-2 and 1000		0 627		71,837.
	62	2010 estimated tax navments and amount applied from 2000 return		0,03/.		
	63	Making work nav credit. Attach Schadula M				
If you have	- 64 2	Farned income credit (EIC)				
	_ U-a	Nontavable combat pay election	64a			
	66	American expectable credit from Form 9002 line 44				
	67 (First-time homebuyer gradit from Form 5405, line 14				
	60	Amount noid with sequest for extension to file				
	60 1	Expans cooled convicts and first 4 DDTA to with held		- 600		
	70 (Predit for federal tay on fuels. Attach Form 4400		0,683.		
			71			
Refund				20000		56,320.
1010110						
	Re		tracer contraction		74a	
		The state of the s	1			
Amount						15 545
					76	15,517.
			**			
		you want to allow allower person to discuss this return with the IRS (see instructions). Phone Phone Phone Procedures are allower to the phone)W. Personal ident	
Sign	Under or	Shaltles of person, I declare that I have examined this return and economic selection and	444	71711 -	TOTAL TOTAL	
	a	properties	has any knowledge	or or any knowle		
oint return?		Date Four occupation			Daytime pl	none number
	- Sn				<u> </u>	<u> </u>
or your	- Jp	100				
	Durit				1,	
Paid	erint/1y			cki	PTIN	
	NT 2 27	The MENTION DOGENS HOMEN THUMEN FOUR	4/13/11 self-	employed		
		CI NEWION RUGERS 110				
Jac Offig	rim's r					
			Р	hone no 8 0 4	<u>-565</u> -	2300
	Firm's a	ddress ► KICHMOND VA. 23226				

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99

Itemized Deductions

Attach to Form 1040.

See Instructions for Schedule A (Form 1040).

2010
Attachment Sequence No. 07

TIMOTHY M. KAINE & ANNE B. HOLTON Medical Caution. Do not include expenses reimbursed or paid by others. and Medical and dental expenses (see instructions) **Dental** Enter amount from Form 1040, line 38 _______2 **Expenses** Multiply line 2 by 7.5% (.075) Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-Taxes You State and local (check only one box): Paid a X Income taxes, or 15,534 ы General sales taxes Real estate taxes (see instructions) 4,308. New motor vehicle taxes from line 11 of the worksheet on page 2 (for certain vehicles purchased in 2009). Skip this line if you checked box 5b 8 Other taxes. List type and amount PERSONAL PROPERTY TAX 716. 716 Add lines 5 through 8 20,558. 9 Interest Home mortgage interest and points reported to you on Form 1098 10 5,348 10 You Paid 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 Note. Your mortgage Points not reported to you on Form 1098. See instructions for special rules interest 12 deduction may 13 Mortgage insurance premiums (see instructions) 13 be limited (see Investment interest. Attach Form 4952 if required. (See instructions.) 14 instructions). Add lines 10 through 14 15 5,348. Gifts to Gifts by cash or check. If you made any gift of \$250 or more, see instructions 16 18,285. Charity Other than by cash or check. If any gift of \$250 or more, see instructions. If you made a You must attach Form 8283 if over \$500 gift and got a benefit for it, 17 Carryover from prior year 18 see instructions. 19 Add lines 16 through 18 19 18,285. Casualty and **Theft Losses** Casualty or theft loss(es). Attach Form 4684. (See instructions.) Unreimbursed employee expenses - job travel, union dues, job education, etc. Job Expenses and Certain Attach Form 2106 or 2106-EZ if required. (See instructions.) Miscellaneous **Deductions** 22 Tax preparation fees 1.077. 22 23 Other expenses - investment, safe deposit box, etc. List type and amount Add lines 21 through 23 24 1,077 Enter amount from Form 1040, line 38 Multiply line 25 by 2% (.02) 6,366 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-0. Other 28 Other - from list in instructions. List type and amount Miscellaneous **Deductions** 28 Total Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, **Itemized** line 40 44.191. **Deductions** If you elect to itemize deductions even though they are less than your standard deduction,

Worksheet for Line 7 - New motor	Before you begin: You cannot take this deduction if the amount (\$260,000 if married filing jointly). See the instructions for line 7 on page A-6.	on Form 1040, line 38, is equal to	or grea	Page ater than \$135,000
vehicle				
taxes	1 Enter the state or local sales or excise taxes you paid in 2010 for the purchase of any new motor vehicle(s) after February 16, 2009, and before January 1, 2010 (see instructions)	1		
Use this worksheet = to figure the amount to	2 Enter the purchase price (before taxes) of the new motor vehicle(s)	2		
enter on line 7.	3 is the amount on line 2 more than \$49,500? No. Enter the amount from line 1. Yes. Figure the portion of the tax from line 1			
Attach to	that is attributable to the first \$49,500			
Form 1040.)	of the purchase price of each new motor		3	
	vehicle and enter it here (see instructions).	1 1		
	4 Enter the amount from Form 1040, line 38	4		
	5 Enter the total of any			
	• Amounts from Form 2555, lines 45 and 50;			
	Form 2555-EZ, line 18; and Form 4563, line 15,	[_ [
	and	5		
	Exclusion of income from Puerto Rico			
	6 Add lines 4 and 5	6		
	7 Enter \$125,000 (\$250,000 if married filing jointly)	7		
	3 Is the amount on line 6 more than the amount on line 7?		- 1	
	No. Enter the amount from line 3 above on Schedule A,			
	line 7. Do not complete the rest of this worksheet.	ĺ		
	Yes. Subtract line 7 from line 6	8		
9	Divide the amount on line 8 by \$10,000. Enter the result as a		- 1	
	decimal (rounded to at least three places). If the result is 1,000			
	or more, enter 1.000	9		
10	Multiply line 3 by line 9		10	
11	Deduction for new motor vehicle taxes. Subtract line 10 from line 3. and on Schedule A, line 7	Enter the result here		

Schedule A (Form 1040) 2010

SCHEDULE B

(Form 1040A or 1040)
Department of the Treasury Internal Revenue Service
Name(s) shown on return

Attach to Form 1040A or 1040.

Interest and Ordinary Dividends

See instructions.

2010 Attachment Sequence No 08

Your social security number

TIMOTHY	M	. KAINE & ANNE B. HOLTON				
Part I		1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the			Amou	nt
Interest		property as a personal residence, see page B-1 and list this interest first. Also, show that	- 1			
Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form. Part II Ordinary Dividends Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.		buyer's social security number and address	_			
		DEUTSCHE BANK ALEX BROWN				24
		SUNTRUST #1855	_			13
		SUNTRUST	_			142
	m	WACHOVIA BANK	_			16
	,		_			
	,		_	1		
			- [<u> </u>		
list the firm's			-			
	ır		-			
the total interes			-			
			-	—		
			-	-		
			-			·
			-			
	2	Add the amounts on line 1		2	-	195.
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.				
		Attach Form 8815 Subtract line 3 from line 2. Enter the coult have and an Enter 10404 or Enter 10404 in Enter 10404 or Enter 1		3		
	4	1040A, or Form 1040, line 8a	<u> </u>			L95.
Don't II		ote. If line 4 is over \$1,500, you must complete Part III.			<u>Amoun</u>	t
	5	List name of payer	-			
		AMERICAN CENTURY INVESTMENTS	-			27.
		GENERAL ELECTRIC CO	-			34.
			.			
			-			
			.			
			.			
substitute			·			
	l.			-		
list the firm's	•		5			
	1					
			1			
	6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a	6		5	61.
Doct III		e. 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 fore	ign	Yes	No
		ount; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.			163	
and	7a	COUNTY, such as a bank account, securities account or other financial account? See page P.2 for exceptions of	a toreij d filing	gn 		
F		requirements for Form TD F 90-22.1				X
rusts	4.	If Voc anter the name of the fersion and the		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
rusts	ь 8	If "Yes," enter the name of the foreign country During 2010, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign				

SCHEDULE C (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business (Sole Proprietorship)

Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B. ► Attach to Form 1040, 1040NR, or 1041.

►See Instructions for Schedule C (Form 1040).

Name of proprietor

Social security number (S\$N)

<u> 2</u>						
	A Principal business or profession, incl	uding pr	oduct or service (see instructions	3)	B Enter code	from pages C-9, 10, & 11
<u>M</u>	ANAGEMENT CONSULTAL	VT F	OR THE ANNIE E	CASEY FOUNDATION		
(Business name. If no separate busine	ss name	, leave blank.		D Employe	
E) ▶			
F	Accounting method: (1) X C	ash	(2) Accrual (3) 0	ther (specify)		
G	Did you "materially participate" in the o	peration	of this business during 2010? If	"No." see instructions for limit on losses		7 V.
_	ii you started or acquired this busines	s during				
<u> </u>	Part I Income					
1	 This income was reported to you on on that form was checked, or You are a member of a qualified join 	Form W	-2 and the "Statutory employee" t	·····	1	24,300.
		t tax. Als	o see instructions for limit on los	ses.		
_					2	
C Business andress (michage business name, laws blanks. E Business address (michage state, and 2/P code F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P City, town or post office, state, and 2/P code F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) [X] Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Cash (2) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting method: (1) Accrual (3) Other (speachy) P F Accounting M	24,300.					
•					4	
_	Gross profit. Subtract line 4 from line 3	}			5	24,300.
	Other income, including federal and sta	te gasol	ne or fuel tax credit or refund (se	e instructions)		
	Gross income. Add lines 5 and 6					24,300.
				ly on line 30.		
	***************************************	8	### Table ### T			
9		or profession, including product or service (see instructions) CONSULTANT FOR THE ANNIE E. CASEY FOUNDATION or sperate business name, leave blank. Including suite or room no.) filice, state, and ZIP code (1) [X] Cash (2) Accrual (3) Other (specify) Included in losses uired this business during 2010, check here les. Caution. See instructions and check the box if: sported to you on Form W-2 and the "Statutory employee" box excet, or of a qualified joint venture reporting only rental real estate os self-semployment bax. Also see instructions for limit on losses. 2 line 1 from line 42 on page 2) 1 title 4 from line 3 1				
10		_	20			
		10	a	Vehicles, machinery, and equipment	20a	<u> </u>
•••		1		Other business property	20b	
12	D1-2			Repairs and maintenance	21	
. –	The transcript of the second o	12		D Employer ID number (Ell Other (specify) oth		
	• -		1		23	
		13	1		D Employer ID number (EIN).	
14		ness or profession, including product or service (see instructions) ■ Size retermination or page 21 it. a.t. ■ TOONSULTANT FOR THE ANNTE E. CASEY FOUNDATION ■ Sol Office, state, and ZIP code state of the profession of the business during 2010/18 wo," see instructions for limit on losses X Yes				
15	Insurance (other than health)					
16				The state of the s	D Employer ID number (EIN), if any specify) see instructions for limit on losses 1 24,300. 2 3 24,300. 4 5 24,300. 4 7 24,300. Intructions) 6 7 24,300. Intructions) 7 24,300. Intructions) 8 7 24,300. Intructions 9 7 24,300. Intructions 19 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
a	Mortgage (paid to banks, etc.)	16a	The property in number (EN), if any periody in the property in number (EN), if any periody in number (EN), if any periody in no.) ≥ e 2			
b	Other	16b			27	
17	Legal and professional	\Box				
					1 1	
	Total expenses before expenses for bus	iness us	of home. Add lines 8 through 2	7	28	0 .
	remative profit or (loss). Subtract line 28	from lin	e 7		20	
	Expenses for business use of your home	. Attach	orm 8829		1	
31	mer brount of (1088). Subtract line 30 It Off	i iine 29.			71.0	
	 If a profit, enter on both Form 1040, lin 	n e 12 , ai	nd Schedule SE, line 2, or on Fo	rm 1040NR, line 13 (if you checked the	7	
	box on line 1, see instructions). Estates a	nd trusts	, enter on Form 1041, line 3.		31	24.300.
00	•		The formulation of this business during 2010? If "No," see instructions for limit on losses wing 2010? If "No," see instructions for limit on losses wing 2010? If "No," see instructions for limit on losses wing 2010, check here ructions and check the box if: rm W-2 and the "Statutory employee" box inture reporting only rental real estate x. Also see instructions for limit on losses. 2 3 4 4 22) 3 3 4 4 5 6 7 for business use of your home only on line 30. 8 18 18 07 07 07 07 19 20 Rent or lease (see instructions) 19 20 20 21 21 22 33 24 44 45 46 47 48 49 40 40 40 40 40 40 40 40 40			
City, F Acco G Did y H If you Part I 1 Gross	If you have a loss, check the box that des	cribes yo	our investment in this activity (see	instructions).)	
	 If you checked 32a, enter the loss on be 	oth Form	1040, line 12, and Schedule S	E, line 2, or on Form 1040NR		
	line 13 (if you checked the box on line 1,	see the I	ine 31 instructions). Estates and	trusts, enter on Form 1041,	32a 🗔	
					32b	
	■ ii you checked 320, you must attach Fo	rm 6198	. Your loss may be limited.			7.1

SCHEDULE D (Form 1040)

Department of the Treasury Internat Revenue Service (99) Name(s) shown on return

Capital Gains and Losses

▶ Attach to Form 1040 or Form 1040NR.
 ▶ See Instructions for Schedule D (Form 1040).
 ▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

2010 Attachment Sequence No. 12

Your social security number

TIMOTHY M. KAINE & ANNE B. HOLTON

Part I Short-Term Capital Gains and	(b) Date	leta Held Offe Te	di Ui Less		
(2) Description of property (Example, 100 sh, XYZ Co.)	acquired	(C) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (c
1			_		
			579	•	
			! !		1
					
					1
				<u> </u>	
2 Enter your short-term totals, if any, from Sched	dule D-1, fine 2				
Total short-term sales price amounts.					
		3			
Short-term gain from Form 6252 and short-term	n gain or (loss)				
from Forms 4684, 6781, and 8824				4	
Net short-term gain or (loss) from partnerships,	S corporations,	estates, and trusts		1 .	
from Schedule(s) K-1 Short-term capital loss carryover. Enter the am				5	
inter your short-term totals, if any, from Schedule D-1, line 2 Cotal short-term sales price amounts. Idd lines 1 and 2 in column (d) For Form A684, 6781, and 8824 Let short-term gain or (loss) from partnerships, S corporations, estates, and trusts om Schedule(s) K-1 Hort-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss arryover Worksheet in the instructions et short-term capital gain or (loss). Combine lines 1 through 6 in column (f) II Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (B) Date (C) Date sold (Mo., day, yr.) (d) Sales price (d) Sales price (d) Sales pric					
Carryover worksneet in the instructions				6	(
Net short-term capital gain or (loss). Combin	e lines 1 through	6 in column (6		_	
Part II Long-Term Capital Gains and L	osses - Asse	ts Held More Th	an One Year	7	
(a) Description of property	(b) Date	(C) Date sold		(e) Cost or	(f) Gain or (loss)
	(Mo., day, yr.)	(Mo., day, yr.)	(d) Sales price	other basis	Subtract (e) from (d)
	VARIOUS	05/07/10	13.	0.	13
	TIAD TOTIC	11 (05 (10		_	
INVESTMENTS	VARIOUS	11/05/10	13.	0.	13
				_	
Enter your long-term totals, if any, from Schedule	D-1. line 9				<u> </u>
Total long-term sales price amounts.					
		10	26.		
Gain from Form 4797, Part I, long-term gain from	Forms 2439 and	6252; and			
long-term gain or (loss) from Forms 4684, 6781, a	nd 8824				
Net long-term gain or (loss) from partnerships, S o	corporations, esta	ates, and trusts			
trom Schedule(s) K-1 Capital gain distributions				12	
Long-term capital loss carriover. Enter the amount	t Many from "	45.4		13	
<u> </u>					
Net long-term capital gain or (loss). Combine lin	es 8 through 14	in column /0. Then as		14 (
Part III on page 2	=	17		15	26

	art in Odininary			
16	 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. 	16		26.
17	Are lines 15 and 16 both gains? X Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22.			
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18		
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions	19		
20	Are lines 18 and 19 both zero or blank? X 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 on page D-10 of 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:		9	
	 The loss on line 16 or (\$3,000), or if married filing separately, (\$1,500) 	21	, 	
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? Yes. Complete 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,			

Schedule D (Form 1040) 2010

SCHEDULE SE (Form 1040) Department of the Treasury

Internal Revenue Service

Self-Employment Tax

► Attach to Form 1040 or Form 1040NR. ► See Instructions for Schedule SE (Form 1040).

2010 Attachment

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

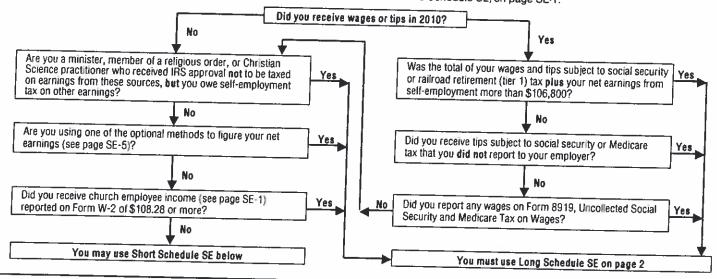
Social security number of person with self-employment income

ANNE B. HOLTON

Before you begin: To determine if you must file Schedule SE, see the instructions on page SE-1.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE, on page SE-1.



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

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A		2
-	if you received social security retirement or disability benefits, enter the amount of Conservation December	1a	
	Program payments included on Schedule F, line 6b, or listed on Schedule K:1 (Form 1065), box 20, parts V		
2	that profit of (loss) from schedule C, line 31; Schedule C-EZ, line 3: Schedule K-1 (Form 1065), how 14, and 14	1b	
	(other trial farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and mombers of religious and		
	see page SET for types of income to report on this line. See page SE3 for other income to report. SIMMIN 3		0.4. 0.00
3	Combine lines 1a, 1b, and 2. Subtract from that total the amount on Form 1040 line 29, or Form 1040ND, the	2	24,300.
	25, and enter the result (see page SE-3)		0.4.000
4	morphy mile 3 by 92,33% (.9233). If less than \$400, you do not owe self-employment toxide and finally	3	24,300.
	schedule unless you have an amount on line 1b Note, If line 4 is less than \$400 due to Consequence.	1	
	Note. If fine 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see page SE-3.	4	22,441.
5	Self-employment tax. If the amount on line 4 is:		
	\$106,800 or less, multiply line 4 by 15.3% (.153). Enter the result here and on	}	
	Form 1040, line 56, or Form 1040NR, line 54		
	 More than \$106,800, multiply line 4 by 2.9% (.029). Then, add \$13,243.20 to the result. 		
	Enter the total here and on Form 1040, line 56, or Form 1040NR, line 54	İ	
6	Deduction for one-half of self-employment tax, Multiply line 5 by 50% (.50).	5	<u>3,433.</u>
	Enter the result here and on Form 1040 King on the same to have		
1.14	5-2 Control and 617-0111 1040, line 27, of Form 1040NR, line 27 6 1,717.		

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

Schedule SE (Form 1040) 2010

Department of the Treasury Internal Revenue Service (99)

Alternative Minimum Tax - Individuals

Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

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

Your social security number

TIMOTHY M. KAINE & ANNE B. HOLTON		
Part I Alternative Minimum Taxable Income		
1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 and go to line 2. Otherwise, enter the		
amount from 1040, line 38 and go to line 6. (If less than zero, enter as a negative amount)	1.1	274 1
Weblicar and dental. Enter the Smaller of Schedule A (Form 1040), line 4, OF 2,594 (1035) of Fem. 1040, if the second	0.00	274,1
Taxos from Schedule A (Form 1040), lines 5, 6, and 8	-	
The month of the control of the standard of th		20,5
Wiscellaneous deductions from Schedule A (Form 1040), line 27	1000	
The second secon		
7 Pax reigno from Form 1040, line 10 or line 21	T .	
A TANK AND THE CONTROL OF WELL LEADING LAW I.		<1,0
Net operating loss deduction from Form 1040, line 21. Enter as a positive amount Alternative tax net operating loss deduction.	9	
Alternative tax net operating loss deduction	10	
Alternative tax net operating loss deduction Interest from specified private activity bonds exempt from the regular tax Qualified small business stock (7% of gain exempt from the regular tax)	11	
	13	
2 and waste (amount norm Scriedble K-) (Form 1041) hox 12 code Δ)	1 7	
2 . 2 . Language (composit storil polificially K-1 letting 1082 Et 200 Et		
The state of the s	17	
and AMT)	18	
(amount of potterior but and lentilat tax income or local	20	
and and costs (difference between fedular tax and AMT)		
A THE TAX COMMON TO DECIMENT AND AND THE TAX INCOME.		
A SACRAGO CONTROL OF SACRAGO CON	1 1	
The supplication costs (diliciating the matter than 150 and 1811)		
The state of the s	25	
- Sie v Erming doute protetering		
and adjustments, including income-based related adjustments	27	
29 is many than \$200 and the order of the control o		
20 is more than \$2 19,900, see instructions.)	28	293,617
Tax (Airi)	1 20 1	233,01
Exemption. (If you were under age 24 at the end of 2010, see instructions.)		
Single or head of bousehold AND line 28 is not over THEN enter on line 29		
Married filing jointly or qualifying widow/er) \$112,500 \$47,450		
75.000	20	36 546
in line 20 is over the amount shown above for your filing status, see instructions	29	36,546
Subtract line 29 from line 28, if more than zero, go to line 31. If zero or long coton 0, have an in-		
33 and 35 and skip the rest of Part II	20	257 454
	30	257,071
" you reported capital gain distributions directly on Form 1040 line 12		
The state of the s		CO 404
1 The state of the	31	68,404
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		
Alternative minimum tax foreign tax credit (see instructions)		
P	32	
entative minimum tax. Subtract line 32 from line 31	33	68,404
		
Fax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, fire 477)		
	34	62,110

3	Part III Tax Computation Using Maximum Capital Gains Rate 6 Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555 f	es Z ostastka			T
	line 3 of the worksheet in the instructions	z, enter the	amount from	-	
3	7 Enter the amount from line 6 of the Qualified Dividends and Conital Onio Tour			. 36	257,071
_	Worksheet in the instructions for Form 1040 line 44 or the annual fax			1	
	line 13 of the Schedule D Tay Workshoot in the instructions (c. 0)			ĺ	
				İ	TO .
	the instructional life way and Still Control and the instructional life way and Still Control and the instructional life way and Still Control and the instructional life way and Still Control and the instructional life way and Still Control and the instructional life way and Still Control and the instructional life way and still control and the instructional life way and still control and the instructional life way and still control and the instructional life way and still control and the instructional life way and still control and the instructional life way and still control and the instructional life way and still control and still				
_		. 37	<u>587</u>	<u>.</u>]	
3	B Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the			7	
	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			7 /	
	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			1 1	
	Worksheet (as refigured for the AMT, if necessary), If you are filing Form 2555			1 1	
	or 2555-EZ, see instructions for the amount to enter	20	507		
40	Enter the smaller of line 36 or line 39	. [39]	307	- 1	505
41	Subtract line 40 from line 36				587
42	If line 41 is \$175,000 or less (\$87,500 or less if married filling acceptable)			41	<u>256,484</u>
-	Otherwise multiply line 41 by 20% (20) and published the 500 (\$4.750 K	line 41 by 2 	6% (.26).		
	the result	ling separat	ely) from	1 1	
42	Enter			42	<u>68,31</u> 6.
40		1 1			
	\$500,000 if married filling jointly or qualifying widow(er),				
		43	<u>68,000.</u>		
		1 1			
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain				
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from			1 1	
	line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D				
	(Form 1040), whichever applies (as figured for the regular tax). If you did not				
	complete either worksheet for the regular tax, enter -0-	44	255.277.		
				1	
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	587		
			3071		
47	Enter the smaller of line 45 or line 46	47	i		
		7/		' !	
48	Subtract line 47 from line 46	40	E07	- 1	
		40			
49	Multiply line 48 by 15% (15)				
				49	88.
١	f line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go	to line 50.			
50 5	Subtract line 46 from line 40	1 1			
		50		j	
54 K	Authinky line EO by OEO/ (OE)				
0 1 1	riditiply life 30 by 25% (.25)			51	
50 4	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 worksheel in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheel in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheel in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see the instructions for the amount from Schedule D Tax Worksheel in the instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter 8 Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter 9 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 are filing Form 2555 or 2555-EZ, see instructions for the amount from line 10 of the Schedule D Tax Worksheet are filing form 2555 or 2555-EZ, see instructions for the amount from line 10 of the Schedule D Tax Worksheet are filing separately), multiply line 41 by 26% (26). 1 If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (26). 2 Subtract line 44 from line 36. 1 If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (26). 4 2 See 10 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. 5 Subtract line 44 from line 43. If zero or less, enter 0. 6 Enter the smaller of line 35 or line 37. 6 Enter the smaller of line 36 or line 37. 6 Enter the smaller of line 45 or line 46. 7 Subtract line 48 from line 40. 1 If line 38 is zero or blank, s				
52 F	Ndd lines 42, 49, and 51			52	<u>6</u> 8,404.
50 1					
53 II	line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply lin	e 36 by 26%	6 (.26).	l	
	merwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing	g separately) from		
tl	ne resuit		N. (- 1) 2 (1) 11 11 11 11 11 11 11 11 11 11 11 11	53	68,480.
34 E	(Form 1040), whichever applies (as refigured for the AMT, if necessary) (see the instructions). If you are filing Form 2555 or 2555 EZ, see instructions for the amount to enter BE Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555 EZ, see instructions for the amount to enter 9 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 refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter 10 Enter the smaller of line 36 or line 39 11 Subtract line 40 from line 38 2 If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (28) and subtract \$3,500 (\$1,750 if married filing separately) from the result. 1 Enter: • \$68,000 if married filing jointly or qualifying widow(er), • \$34,000 if single or married filing separately, or • \$45,550 if head of household. 1 Enter the amount from line 7 of the Qualified Dividends and Capital Gain 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. 2 Subtract line 44 from line 45 or line 37 Enter the smaller of line 36 or line 37 Enter the smaller of line 45 or line 46 Multiply line 48 by 15% (.15) 14 If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50. Subtract line 46 from line 40 50 Multiply line 50 by 25% (.25)		Z, do not enter		
t/	is amount on line 31, instead, enter it on line 4 of the worksheet in the instruction	S		54	68,404.
					Form 6251 (2010)

TIMOTHY M. KAINE & ANNE B. HOLTON

FORM 1040 QUALIFIED DI	VIDENDS	STATEMENT 1
NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
AMERICAN CENTURY INVESTMENTS GENERAL ELECTRIC CO	27. 534.	27. 534.
TOTAL INCLUDED IN FORM 1040, LINE 9B	-	561.

MANAGEMENT CONSULTANT FOR THE ANNIE E. CASEY FOUND

TOTAL TO SCHEDULE SE, LINE 2

ORM 1040	EXCESS	SOCIAL	SECURITY	TAX	WORKSHEET	ר כת	ATEMENT	-
					WORKDIEE		ALEMENT	
						TAXPAYER	SPOUS	E
1. ADD ALL SOCIA THAN \$6,621.6 BE SHOWN IN B TOTAL HERE .	0 FOR EACH E OX 4 OF YOUR	MPLOYER	(THIS T	X SE	TOTITO!	12,305.		
2. ENTER ANY UNC GROUP-TERM LI FORM 1040, LI	FE INSURANCE	IAL SEC	ED IN THE	ON	'AL ON			
3. ADD LINES 1 A	NTD 2	• • • •				12,305.		
4. SOCIAL SECURI	TY TAX LIMIT	• •		• •		6,622.		
S. SUBTRACT LINE	4 FROM LINE	3. EXC	ESS SOCIA	L SE	CURITY —			
TAX INCLUDED :	IN FORM 1040	, LINE	69	• •	=	5,683.		_
CHEDULE SE		NON-	FARM INCO	ME		STA	TEMENT	

24,300.

24,300.



F(ORM 6251 EXEMPTION WORKSHEET	STATEMENT 4
1	ENTER: \$47,450 IF SINGLE OR HEAD OF HOUSEHOLD; \$72,450 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$36,225 IF MARRIED FILING SEPARATELY.	
2	PATER TOOK ALIERNATIVE MINIMUM TAXABLE INCOME	
	(AMTI) FORM 6251, LINE 28	7.
4	SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS 150,000	
	ENTER -0	7 .
5 6	MULTIPLY LINE 4 BY 25% (.25). SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0 IF ANY OF THE THREE CONDITIONS UNDER CERTAIN CHILDREN UNDER AGE 24 APPLY TO YOU, COMPLETE LINES 7 THROUGH 10. OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30	
O	MINIMUM EXEMPTION AMOUNT FOR CERTAIN CHILDREN UNDER AGE 24. ENTER YOUR EARNED INCOME, IF ANY	•
	ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30	