

Form **1040** U.S. Individual Income Tax Return (99) **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 **TIMOTHY M.** Last name **KAINE** See separate instructions.  
 Your social security number [REDACTED]

If a joint return, spouse's first name and initial **ANNE B.** Last name **HOLTON** Spouse's social security number [REDACTED]

Home address (number and street). If you have a P.O. box, see instructions. [REDACTED] Apt. no. [REDACTED]

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. **RICHMOND, VA 23227-4405**

Foreign country name Foreign province/county Foreign postal code

You  Spouse

**Filing Status**

1  Single

2  Married filing jointly (even if only one had income)

3  Married filing separately. Enter spouse's SSN above and full name here. ▶

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

**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
<b>NATHANIEL</b>	<b>KAINE</b>	[REDACTED]	<b>SON</b>	
<b>LINWOOD</b>	<b>KAINE</b>	[REDACTED]	<b>SON</b>	
<b>ANNELLA</b>	<b>KAINE</b>	[REDACTED]	<b>DAUGHTER</b>	<b>X</b>

Boxes checked on 6a and 6b: **2**

No. of children on 6c who:  
 • lived with you: **3**  
 • did not live with you due to divorce or separation (see instructions):

Dependents on 6c not entered above

Add numbers on lines above: **5**

d Total number of exemptions claimed **5**

**Income**

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	<b>156,795.</b>
8a	Taxable interest. Attach Schedule B if required	8a	<b>130.</b>
b	Tax-exempt interest. Do not include on line 8a	8b	
9a	Ordinary dividends. Attach Schedule B if required	9a	<b>761.</b>
b	Qualified dividends	9b	<b>761.</b>
10	Taxable refunds, credits, or offsets of state and local income taxes	10	
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	<b>106,224.</b>
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	
14	Other gains or (losses). Attach Form 4797	14	
15a	IRA distributions	15a	
b	Taxable amount	15b	
16a	Pensions and annuities	16a	
b	Taxable amount	16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	
20a	Social security benefits	20a	
b	Taxable amount	20b	
21	Other income. List type and amount	21	
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income	22	<b>263,910.</b>

**Adjusted Gross Income**

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Deductible part of self-employment tax. Attach Schedule SE	27	<b>7,503.</b>
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid	31a	
b	Recipient's SSN ▶		
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	<b>7,503.</b>
37	Subtract line 36 from line 22. This is your adjusted gross income	37	<b>256,407.</b>

Tax and Credits

Table with 2 columns: Line number and Amount. Rows include: 38 Amount from line 37 (adjusted gross income) 256,407; 39a Check (You were born before January 2, 1947, Blind. Spouse was born before January 2, 1947, Blind.) Total boxes checked 39a; 40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 36,007; 41 Subtract line 40 from line 38 220,400; 42 Exemptions. Multiply \$3,700 by the number on line 6d 18,500; 43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 201,900; 44 Tax. Check if any from: a Form(s) 8814 b Form 4972 c 962 election 44,502; 45 Alternative minimum tax. Attach Form 6251 3,997; 46 Add lines 44 and 45 48,499; 47 Foreign tax credit. Attach Form 1116 if required 47; 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; 55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- 48,499.

Other Taxes

Table with 2 columns: Line number and Amount. Rows include: 56 Self-employment tax. Attach Schedule SE 13,047; 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 61,546.

Payments

Table with 2 columns: Line number and Amount. Rows include: 62 Federal income tax withheld from Forms W-2 and 1099 25,516; 63 2011 estimated tax payments and amount applied from 2010 return 32,000; 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 from Form 8863, line 14 66; 67 First-time homebuyer credit from Form 5405, line 10 67; 68 Amount paid with request for extension to file 68; 69 Excess social security and tier 1 RRTA tax withheld STMT 2 2,173; 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. These are your total payments 59,689.

Refund

Table with 2 columns: Line number and Amount. Rows include: 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; 75 Amount of line 73 you want applied to your 2012 estimated tax 75; 76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions 1,857; 77 Estimated tax penalty (see instructions) 77.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? [X] Yes. Complete below. [ ] No. Designee's name: NANCY NEWTON ROGERS, Phone no: 804-565-2300, Personal identification number (PIN): 72024

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature: ATTORNEY, Date: , Your occupation: CONSULTANT, Daytime phone number: ( ) - . Spouse's signature: , Date: , Spouse's occupation: . If the IRS sent you an Identity Protection PIN, enter it here: .

Paid Preparer Use Only

Print/Type preparer's name: NANCY NEWTON ROGERS, Preparer's signature: , Date: , Check [ ] if self-employed [ ] PTIN: . Firm's name: VIRGINIA ESTATE PLANS, PLC, Firm's EIN: , Firm's address: 7202 GLEN FOREST DR STE 204 RICHMOND, VA 23226, Phone no: 804-565-2300.

**SCHEDULE A  
(Form 1040)**

**Itemized Deductions**

OMB No. 1545-0074

**2011**  
Attachment  
Sequence No. **07**

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

▶ Attach to Form 1040. ▶ See Instructions for Schedule A (Form 1040).

Your social security number

**TIMOTHY M. KAINE & ANNE B. HOLTON**

<b>Medical and Dental Expenses</b>		<b>Caution.</b> Do not include expenses reimbursed or paid by others.			
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>					
5	State and local (check only one box):	5			
a	<input checked="" type="checkbox"/> Income taxes, or			12,992.	
b	<input type="checkbox"/> General sales taxes				
6	Real estate taxes (see instructions)	6		4,308.	
7	Personal property taxes	7		712.	
8	Other taxes. List type and amount ▶	8			
9	Add lines 5 through 8	9			18,012.
<b>Interest You Paid</b>					
10	Home mortgage interest and points reported to you on Form 1098 <b>STMT 3</b>	10		4,390.	
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			4,390.
<b>Gifts to Charity</b>					
16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16		13,605.	
17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17			
18	Carryover from prior year	18			
19	Add lines 16 through 18	19			13,605.
<b>Casualty and Theft Losses</b>					
20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20			
<b>Job Expenses and Certain Miscellaneous Deductions</b>					
21	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶	21			
22	Tax preparation fees	22		1,196.	
23	Other expenses - investment, safe deposit box, etc. List type and amount ▶	23			
24	Add lines 21 through 23	24		1,196.	
25	Enter amount from Form 1040, line 38	25	256,407.		
26	Multiply line 25 by 2% (.02)	26		5,128.	
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27			0.
<b>Other Miscellaneous Deductions</b>					
28	Other - from list in instructions. List type and amount ▶	28			
<b>Total Itemized Deductions</b>					
29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40	29			36,007.
30	If you elect to itemize deductions even though they are less than your standard deduction, check here			<input type="checkbox"/>	

**SCHEDULE B**  
**(Form 1040A or 1040)**

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

**Interest and Ordinary Dividends**

▶ **Attach to Form 1040A or 1040.**

▶ **See instructions.**

OMB No. 1545-0074

**2011**  
Attachment  
Sequence No. **08**

Your social security number

**TIMOTHY M. KAINE & ANNE B. HOLTON**

**Part I  
Interest**

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

DEUTSCHE BANK ALEX BROWN

SUNTRUST

SUNTRUST

WELLS FARGO BANK

**Amount**

2.

95.

9.

24.

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

**2** Add the amounts on line 1

**3** Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815

**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.

130.

130.

**Part II  
Ordinary  
Dividends**

**5** List name of payer ▶

AMERICAN CENTURY INVESTMENTS

GENERAL ELECTRIC CO

**Amount**

23.

738.

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

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

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

761.

**Part III  
Foreign  
Accounts  
and  
Trusts**

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

**7a** At any time during 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 ▶

**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

Yes No

X

X

127501  
11-02-11

**SCHEDULE C-EZ  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Net Profit 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.

OMB No. 1545-0074

**2011**

Attachment  
Sequence No. **09A**

Name of proprietor

**ANNE B. HOLTON**

Social security number (SSN)



**Part I General Information**

**You May Use  
Schedule C-EZ  
Instead of  
Schedule C  
Only If You:**

- Had business expenses of \$5,000 or less.
- Use the cash method of accounting.
- Did not have an inventory at any time during the year.
- Did not have a net loss from your business.
- Had only one business as either a sole proprietor, qualified joint venture, or statutory employee.
- Did not receive any credit card or similar payments that included amounts that are not includible in your income (see instructions for line 1a).

**And You:**

- Had no employees during the year.
- Are not required to file Form 4562, Depreciation and Amortization, for this business. See the instructions for Schedule C, line 13, to find out if you must file.
- Do not deduct expenses for business use of your home.
- Do not have prior year unallowed passive activity losses from this business.

**A** Principal business or profession, including product or service

**MANAGEMENT CONSULTANT FOR THE ANNIE E. CASEY FOUNDATION**

**B** Enter business code (see inst)

▶ **541600**

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

**D** Enter your EIN (see inst)

**E** Business address (including suite or room no.). Address not required if same as on page 1 of your tax return.

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

**F** Did you make any payments in 2011 that would require you to file Form(s) 1099 (see the Schedule C instructions)

Yes  No

**G** If "Yes," did you or will you file all required Forms 1099?

Yes  No

**Part II Figure Your Net Profit**

<b>1a</b> Merchant card and third party payments. For 2011, enter -0-	<b>1a</b>	0.	
<b>b</b> Gross receipts or sales not entered on line 1a (see instructions) <b>STMT 4</b>	<b>1b</b>	106,224.	
<b>c</b> Income reported to you on Form W-2 if the "Statutory Employee" box on that form was checked. <b>Caution.</b> See Schedule C instructions before completing this line	<b>1c</b>		
<b>d</b> Total of lines 1a, 1b, and 1c. If any adjustments to line 1a, you must use Schedule C (see instructions)	<b>1d</b>	106,224.	
<b>2</b> Total expenses (see instructions). If more than \$5,000, you must use Schedule C	<b>2</b>	0.	
<b>3</b> Net profit. Subtract line 2 from line 1d. If less than zero, you must use Schedule C. Enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 and Schedule SE, line 2. (If you entered an amount on line 1c, do not report the amount from line 1c on Schedule SE, line 2.) Estates and trusts, enter on Form 1041, line 3	<b>3</b>	106,224.	

**Part III Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 2.**

**4** When did you place your vehicle in service for business purposes? (month, day, year) ▶ / /

**5** Of the total number of miles you drove your vehicle during 2011, enter the number of miles you used your vehicle for:

**a** Business \_\_\_\_\_ **b** Commuting \_\_\_\_\_ **c** Other \_\_\_\_\_

**6** Was your vehicle available for personal use during off-duty hours?  Yes  No

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

**8a** Do you have evidence to support your deduction?  Yes  No

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

LHA For Paperwork Reduction Act Notice, see separate instructions.

119191  
10-27-11

Schedule C-EZ (Form 1040) 2011

**SCHEDULE SE  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Self-Employment Tax**

OMB No. 1545-0074

**2011**

Attachment  
Sequence No. **17**

▶ **Attach to Form 1040 or Form 1040NR.** ▶ See separate instructions.

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

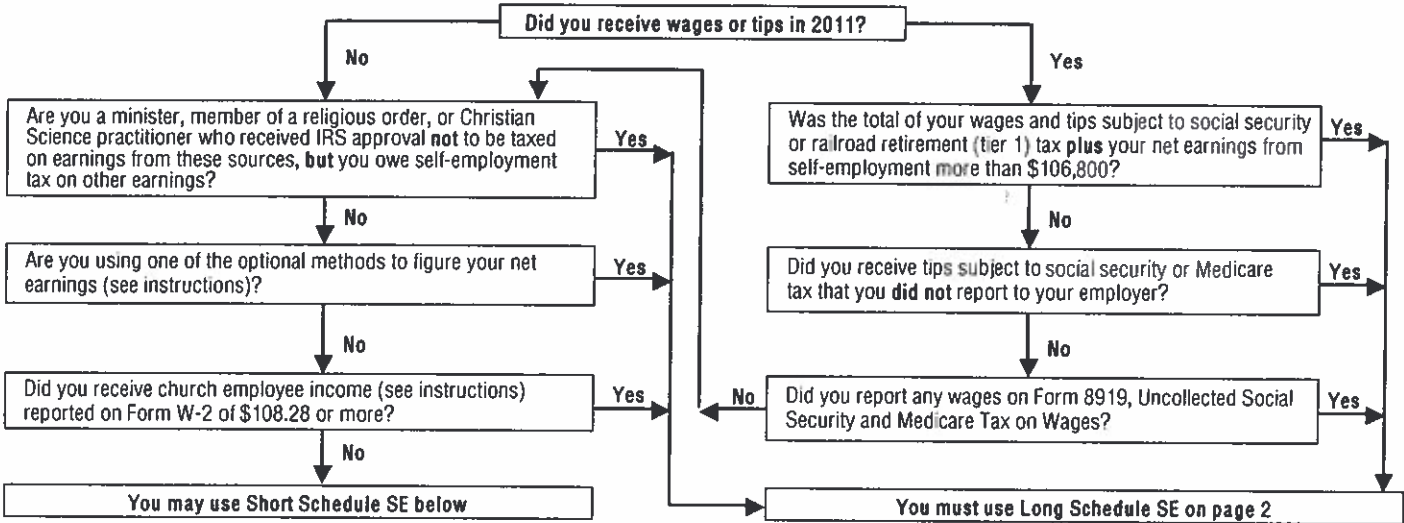
Social security number of  
person with self-employment  
income

**ANNE B. HOLTON**

**Before you begin:** To determine if you must file Schedule SE, see the instructions.

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

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



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

<b>1a</b> Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	<b>1a</b>	
<b>b</b> If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Y	<b>1b</b>	
<b>2</b> Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report <b>STMT 5</b>	<b>2</b>	<b>106,224.</b>
<b>3</b> Combine lines 1a, 1b, and 2	<b>3</b>	<b>106,224.</b>
<b>4</b> Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self employment tax; do not file this schedule unless you have an amount on line 1b <b>Note.</b> If line 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	<b>4</b>	<b>98,098.</b>
<b>5 Self-employment tax.</b> If the amount on line 4 is: • \$106,800 or less, multiply line 4 by 13.3% (.133). Enter the result here and on Form 1040, line 56, or Form 1040NR, line 54 • More than \$106,800, multiply line 4 by 2.9% (.029). Then, add \$11,107.20 to the result. Enter the total here and on Form 1040, line 56, or Form 1040NR, line 54	<b>5</b>	<b>13,047.</b>
<b>6 Deduction for employer-equivalent portion of self-employment tax.</b> If the amount on line 5 is: • \$14,204.40 or less, multiply line 5 by 57.51% (.5751) • More than \$14,204.40, multiply line 5 by 50% (.50) and add \$1,067 to the result. Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	<b>6</b>	<b>7,503.</b>

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

Schedule SE (Form 1040) 2011

**Alternative Minimum Tax - Individuals**

OMB No. 1545-0074

**2011**  
 Attachment  
 Sequence No. **32**

▶ Attach to Form 1040 or Form 1040NR.

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 Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	220,400.
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	
3	Taxes from Schedule A (Form 1040), line 9	3	18,012.
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	
6	Skip this line. It is reserved for future use	6	
7	Tax refund from Form 1040, line 10 or line 21	7	
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Alternative tax net operating loss deduction	11	
12	Interest from specified private activity bonds exempt from the regular tax	12	
13	Qualified small business stock (7% of gain excluded under section 1202)	13	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17	Disposition of property (difference between AMT and regular tax gain or loss)	17	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19	Passive activities (difference between AMT and regular tax income or loss)	19	
20	Loss limitations (difference between AMT and regular tax income or loss)	20	
21	Circulation costs (difference between regular tax and AMT)	21	
22	Long-term contracts (difference between AMT and regular tax income)	22	
23	Mining costs (difference between regular tax and AMT)	23	
24	Research and experimental costs (difference between regular tax and AMT)	24	
25	Income from certain installment sales before January 1, 1987	25	
26	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
28	<b>Alternative minimum taxable income.</b> Combine lines 1 through 27. (If married filing separately and line 28 is more than \$223,900, see instructions.)	28	238,412.

**Part II 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 ..... \$48,450 Married filing jointly or qualifying widow(er) ..... 150,000 ..... 74,450 Married filing separately ..... 75,000 ..... 37,225 } <b>STMT 6</b>	29	52,347.
30	If line 28 is over the amount shown above for your filing status, see instructions. 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	30	186,065.
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. • <b>All others:</b> 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.	31	48,499.
32	Alternative minimum tax foreign tax credit (see instructions)	32	
33	Tentative minimum tax. Subtract line 32 from line 31	33	48,499.
34	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	34	44,502.
35	<b>AMT.</b> Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	3,997.

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

**Part III Tax Computation Using Maximum Capital Gains Rates**

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

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for this line	36	186,065.
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 refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	761.
38	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	38	0.
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 refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39	761.
40	Enter the smaller of line 36 or line 39	40	761.
41	Subtract line 40 from line 36	41	185,304.
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	42	48,385.
43	Enter: <ul style="list-style-type: none"> <li>• \$69,000 if married filing jointly or qualifying widow(er),</li> <li>• \$34,500 if single or married filing separately, or</li> <li>• \$46,250 if head of household.</li> </ul>	43	69,000.
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	44	201,139.
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	761.
47	Enter the smaller of line 45 or line 46	47	
48	Subtract line 47 from line 46	48	761.
49	Multiply line 48 by 15% (.15)	49	114.
If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50.			
50	Subtract line 46 from line 40	50	
51	Multiply line 50 by 25% (.25)	51	
52	Add lines 42, 49, and 51	52	48,499.
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	48,598.
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	48,499.





FORM 1040

QUALIFIED DIVIDENDS

STATEMENT 1

NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
AMERICAN CENTURY INVESTMENTS GENERAL ELECTRIC CO	23. 738.	23. 738.
TOTAL INCLUDED IN FORM 1040, LINE 9B		761.



FORM 1040

EXCESS SOCIAL SECURITY TAX WORKSHEET

STATEMENT 2

	TAXPAYER	SPOUSE
1. ADD ALL SOCIAL SECURITY TAX WITHHELD BUT NOT MORE THAN \$4,485.60 FOR EACH EMPLOYER (THIS TAX SHOULD BE SHOWN IN BOX 4 OF YOUR W-2 FORMS). ENTER THE TOTAL HERE . . . . .	6,659.	
2. ENTER ANY UNCOLLECTED SOCIAL SECURITY TAX ON TIPS OR GROUP-TERM LIFE INSURANCE INCLUDED IN THE TOTAL ON FORM 1040, LINE 60 . . . . .		
3. ADD LINES 1 AND 2 . . . . .	6,659.	
4. SOCIAL SECURITY TAX LIMIT . . . . .	4,486.	
5. SUBTRACT LINE 4 FROM LINE 3. EXCESS SOCIAL SECURITY TAX INCLUDED IN FORM 1040, LINE 69. . . . .	2,173.	

SCHEDULE A MORTGAGE INTEREST AND POINTS REPORTED ON FORM 1098 STATEMENT 3

DESCRIPTION	AMOUNT
WELLS FARGO BANK NA, PO BOX 14411, DES MOINES, IA 50306	4,390.
TOTAL TO SCHEDULE A, LINE 10	4,390.

SCHEDULE C-EZ GROSS RECEIPTS STATEMENT 4

DESCRIPTION	AMOUNT
GROSS RECEIPTS	106,224.
TOTAL TO SCHEDULE C-EZ, LINE 1B	106,224.

TIMOTHY M. KAINE & ANNE B. HOLTON



SCHEDULE SE

NON-FARM INCOME

STATEMENT 5

DESCRIPTION

AMOUNT

MANAGEMENT CONSULTANT FOR THE ANNIE E. CASEY FOUND

106,224.

TOTAL TO SCHEDULE SE, LINE 2

106,224.



1	ENTER: \$48,450 IF SINGLE OR HEAD OF HOUSEHOLD; \$74,450 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$37,225 IF MARRIED FILING SEPARATELY. . . . .	74,450.
2	ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 28 . . . . .	238,412.
3	ENTER: \$112,500 IF SINGLE OR HEAD OF HOUSEHOLD; \$150,000 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$75,000 IF MARRIED FILING SEPARATELY . . . . .	150,000.
4	SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS ENTER -0- . . . . .	88,412.
5	MULTIPLY LINE 4 BY 25% (.25). . . . .	22,103.
6	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 . . . . .	52,347.
7	MINIMUM EXEMPTION AMOUNT FOR CERTAIN CHILDREN UNDER AGE 24. .	
8	ENTER YOUR EARNED INCOME, IF ANY. . . . .	
9	ADD LINES 7 AND 8 . . . . .	
10	ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30 . . . . .	

**IRS e-file Signature Authorization**

**2011**

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

Declaration Control Number (DCN) ▶ [REDACTED]

Taxpayer's name <b>TIMOTHY M. KAINE</b>	Social security number [REDACTED]
Spouse's name <b>ANNE B. HOLTON</b>	Spouse's social security number [REDACTED]

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

1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	256,407.
2 Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10)	2	61,546.
3 Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7)	3	25,516.
4 Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11; Form 1040-SS, Part I, line 12a)	4	
5 Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12)	5	1,857.

**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 to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To request that my PIN be mailed to me, or to revoke (cancel) a payment, I must contact 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 VIRGINIA ESTATE PLANS, PLC to enter or generate my PIN [REDACTED] as my signature on my tax year 2011 electronically filed income tax return. **ERO firm name** Enter five numbers, but do not enter all zeros

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 ▶ [Signature] Date ▶ 4/7/12

Spouse's PIN: check one box only

I authorize VIRGINIA ESTATE PLANS, PLC to enter or generate my PIN [REDACTED] as my signature on my tax year 2011 electronically filed income tax return. **ERO firm name** Enter five numbers, but do not enter all zeros

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 ▶ [Signature] Date ▶ 4/6/12

**Practitioner PIN Method Returns Only - continue below**

**Part III Certification and Authentication - Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. [REDACTED] **do not enter all zeros**

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 ▶ Nancy Newton Rogers Date ▶ 4/2/12

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