Department of the Treasury - Internal Revenue Service 2000 1040. U.S. Individual Income Tax Return IRS Use Only - Do not write or staple in this space. OMB No. 1545-0074 For the year Jan. 1 - Dec. 31, 2000, or other tax year beginning. Your social security number Label Your first name and initial Last name See William J. Clinton LABEL instructions Spouse's social security number Last name If a joint return, spouse's first name and initial on page 19.) Hillary Rodham Clinton Use the IRS Apt. no. Home address (number and street). If you have a P.O. box, see page 19. label. IMPURIANT! HERE Otherwise. You must enter please print your SSN(s) above. or type. City, town or post office, state, and ZIP code. If you have a foreign address, see page 19. NY 10514 Presidential Spouse You Note. Checking "Yes" will not change your tax or reduce your refund. **Election Campaign** Yes No (See page 19.) 1 Filing Status 2 Χ Married filing joint return (even if only one had income) Married filing separate return. Enter spouse's soc. sec. no. above & full name here ▶ 3 Head of household (with qualifying person). (See page 19.) If the qualifying person is a child but not your dependent, 4 Check only one box. enter this child's name here > Qualifying widow(er) with dependent child (year spouse died > 5 Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax Exemptions return, do not check box 6a..... No. of boxes checked on 2 6a and 6b (4) Chk if qualifying (2) Dependent's social (3) Dependent's No. of your Dependents: child for child tax relationship to you (1) First Name security number credit (see page 20) Last name Daughter Clinton lived with you Chelsea V. did not live with you due to divorce If more than six or separation (see page 20) dependents. see page 20. Dependents entered above Add numbers 199,573 Wages, salaries, tips, etc. Attach Form(s) W-2..... 7 7 1,828 8a Income 8a Tax-exempt interest. Do not include on line 8a 8b b 11,648 Ordinary dividends. Attach Schedule B if required 9 9 Attach Forms W-2 and 10 10 W-2G here. Alimony received 11 Also attach 11 Form 1099-R if 8,534 12 12 tax was withheld. 136,046 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □...... 13 13 14 14 15b b Taxable amount (see pg. 23) 15a Total IRA distributions..... 15a 16b b Taxable amount (see pg. 23) Total pensions and annuities | 16a 16a Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E...... 17 17 If you did not get a W-2. 18 18 see page 21. 19 19 Unemployment compensation . . Enclose, but do not 20b b Taxable amount (see pg. 25) attach any payment. Social security benefits | 20a 20a Also, please use 21 Form 1040-V. 21 Other income. 357,629 Add the amounts in the far right column for lines 7 through 21. This is your total income . . . 22 22 23 23 IRA deduction (see page 27) Student loan interest deduction (see page 27) 24 Adjusted Medical savings account deduction. Attach Form 8853..... 25 25 Gross 26 Moving expenses. Attach Form 3903 26 Income 603 One-half of self-employment tax. Attach Schedule SE..... 27

KEA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 56.

Alimony paid. b Recipient's SSN ▶

28

29

30 31a

32

Self-employed health insurance deduction (see page 29) . . .

Self-employed SEP, SIMPLE, and qualified plans

Penalty on early withdrawal of savings

IE0US1 11/07/00

28

29

026 Form 1040 (2000)

603

357

Form 1040 (200	0) W I	Illam'J., and Hillary Rodna	m Clinton					age 2
Tax and		Amount from line 33 (adjusted gross income)					34	357,026
Credits	35a	· · · · · · · · · · · · · · · · · · ·	Spouse was 68					
Orcans		Add the number of boxes checked above and enter i	the total here		.▶ 35a			
	b	If you are married filing separately and your spouse if	temizes deduction	s, or you were		_		.
tandard Deduction		a dual-status alien, see page 31 and check here			.▶ 35b	ЦΙ		
for Most People	36	Enter your itemized deductions from Schedule A, lin	ne 28, or standard	i deduction				
Single:		shown on the left. But see page 31 to find your stand any box on line 35a or 35b or if someone can claim y	iard deduction if y vou as a depende	ou cneckea nt			36	150,796
\$4,400	37	Subtract line 36 from line 34					37	206,230
Head of household:		If line 34 is \$96,700 or less, multiply \$2,800 by the tot						
\$6,450		If line 34 is over \$96,700, see the worksheet on page	32 for the amoun	t to enter			38	0
Married filing jointly or	39						39	206,230
Qualifying	40	Tax (see page 32). Check if any tax is from a \square For	rm(s) 8814 b 🗌 F	Form 4972		[40	41,607
widow(er): \$7,350	41	Alternative minimum tax. Attach Form 6251					41	6,991
Married	42	Add lines 40 and 41					42	48,598
filing separately	43	Foreign tax credit. Attach Form 1116 if required			3			
\$3,675.	44	Credit for child and dependent care expenses. Att. F						
	45	Credit for the elderly or the disabled. Attach Schedule						
	46	Education credits. Attach Form 8863						
	47	Child tax credit (see page 36)						
	48	Adoption credit. Attach Form 8839		48		-		
***************************************	49	Other. Check if from a Form 3800 b Form		70				
-	49			49				
		c ☐ Form 8801 d ☐ Form (specify)					50	3
	50	Add lines 43 through 49. These are your total credit	5					48,595
	51	Subtract line 50 from line 42. If line 50 is more than li Self-employment tax. Att. Sch. SE	ne 42, enter -0				52	1,206
Other		Self-employment tax. Att. Scn. SE		Attack Form 41			53	1,200
Taxes	53	Social security and Medicare tax on tip income not re					54	
	54	Tax on IRAs, other retirement plans, and MSAs. Attac	on Form 5329 if re	quirea			55	
	55	Advance earned income credit payments from Form	(s) W-2				56	
	56	Household employment taxes. Attach Schedule H					57	49,801
	57	Add lines 51 through 56. This is your total tax					5 <i>1</i>	49,001
Payments	58	Federal income tax withheld from Forms W-2 and 10			3,278			
If you have a	_ 59			59	3,2/0			
qualifying		Earned income credit (EIC)	1 1 5	60a		_		
child, attach Schedule EIC.	ı	Nontaxable earned income: amt. >				· ~ .		
		and type▶						
	61	Excess social security and RRTA tax withheld (see page	ge 50)	61	• • • • • • • • • • • • • • • • • • • •			
	62	Additional child tax credit. Attach Form 8812	t t	62				
	63	Amount paid with request for extension to file (see		63		_		
	64	Other payments. Check if from a Term 2439 b		64				
	65	Add lines 58, 59, 60a, and 61 through 64. These are	your total payme	nts		▶	65	53,666
Refund	66	If line 65 is more than line 57, subtract line 57 from li	ne 65. This is the	amount you overp	oaid		66	3,865
Have it	678	Amount of line 66 you want refunded to you				▶	67a	
directly deposited!								
See page 50	1	Routing number	▶ c Type: ☐ Ct	necking 🗌 Savi	ings			
and fill in 67b, 67c, and 67d.		Account number						
	68	Amount of line 66 you want applied to your 2001 es	stimated tax	68	3,865	5		
		If line 57 is more than line 65, subtract line 65 from li		amount vou owe.	•			
Amount	03	For details on how to pay, see page 51				▶	69	
You Owe	70	Estimated tax penalty. Also include on line 69		70				
	Und	er popultion of parities. I dealare that I have examined this return	and accompanying sc	hedules and statemer	nts, and to th	e best	of my	knowledge and belief, they are
Sign	true	correct, and complete. Declaration of preparer (other than taxpo	ayer) is based on all in	formation of which pr	reparer has a	ıny kno	wiedg	e.
Here	.	our signature	Date !	Your occupation			- 1	Daytime phone number
Joint return?	U.S. President							•
See page 19. Keep a copy		Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation				May the IRS discuss this return
, IL.		Spould of Signature. It a joint rotal of partition of the signature of the sinterest of the signature of the signature of the signature of the					with the preparer shown below? (see page 52)? Yes No	
	Attorney						Preparer's SSN or PTIN	
Deid		arer's			Check if self-emplo	,,,, r	_	•
Paid	sign	Hamiton Manguage S	TODOG					
Preparer's		's name (or yours Hariton, Mancuso &				IN		
Use Only It is a first in the control of the con								
		ess, and ZIP code, Rockville, MD 2085)		<u> </u>	hone n	u.	

OMB No. 1545-0074 Schedule A - Itemized Deductions SCHEDULES A&B (Form 1040) 2000 Attachment Department of the Treasury Sequence No. See Instructions for Schedules A and B (Form 1040). Attach to Form 1040. Internal Revenue Service (99) Your social security number Name(s) shown on Form 1040 and Hillary Rodham Clinton illiam J. Caution. Do not include expenses reimbursed or paid by others. Medical Medical and dental expenses (see page A-2) and Dental Enter amount from Form 1040, line 34 2 Expenses 3 Multiply line 2 above by 7.5% (.075)..... 3 0 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-.... 22,374 Taxes You 17,864 Paid 6 Personal property taxes Other taxes. List type and amount (See page A-2.) 8 40,238 Add lines 5 through 8. 82,500 10 Home mortgage interest and points reported on Form 1098 10 Interest You Paid Home mortgage interest not reported to you on Form 1098. If paid to the person from 11 whom you bought the home, see page A-3 & show that person's name, ID no. & address (See page A-3.) Note. Personal interest is 11 Points not reported to you on Form 1098. See pg. A-3 12 12 deductible. Investment interest. Attach Form 4952, if required. 13 (See page A-3.)..... 82,500 Add lines 10 through 13..... Gifts by cash or check. If any gift of \$250 or more, see pg. A-4..... 15 15 to ...ity Other than by cash or check. If any gift of \$250 or more, see page A-4. 16 16 If you made a gift and got a 17 17 benefit for it. 34,900 18 see page A-4. 18 Add lines 15 through 17..... Casualty and Casualty or theft loss(es). Attach Form 4684. 19 0 19 Theft Losses (See page A-5.)..... Unreimbursed employee expenses - job travel, union dues, job education, Job Expenses 20 and Most Other etc. You must attach Form 2106 or 2106-EZ if required. (See page A-5.) Miscellaneous **Deductions** Tax preparation fees..... Other expenses - investment, safe deposit box, etc. List type and amount Pell Rudman Trust Co. Tax Prep. & Acctng. Serv. (See page A-5 for expenses to 6,640 deduct here.) 6,640 23 Add lines 20 through 22 . . . 23 Enter amount from Form 1040, line 34 | 24 | 24

25

26

Other

Total

Itemized

Deductions

ellaneous ctions

0

150,796

26

27

Reduction

-6,842

Multiply line 24 above by 2% (.02)

Other - from list on page A-6. List type and amount

Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-....

Is Form 1040, line 34, over \$128,950 (over \$64,475 if married filing separately)?

for lines 4 through 27. Also, enter this amount on Form 1040, line 36.

Page 2

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side.

Your social security number

William 'J. and Hillary Rodham Clinton

Schedule B - Interest and Ordinary Dividends

Attachment 08

	Schedule B - Interest and Ordinary Dividends		Sequ	ence N	0.
	Note. If you had over \$400 in taxable interest, you must also complete Part III.				
Part I Interest			Amo	unt	
See page B-1	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 page B-1 and list this interest first. Also, show that buyer's social security				
instructions for	number and address ►			6	73
Form 1040, line 8a.)	Bank of America Checking	1			62
		1		1	04
	Citibank Pell Rudman Trust Company, N.A.			9	20
	Riggs Bank N.A.				69
Note. If you		1			
received a Form 1099-INT, Form 1099-OID, or		1			
substitute statement from a brokerage firm.					
list the firm's name as the payer and enter		1			
the total interest shown on that					
form.		-			
	2 Add the amounts on line 1	2		1,8	328
	3 Excludable interest on series EE and I U.S. savings bonds issued after 1989 from Form 8815, line 14. You must attach Form 8815	3			
	4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a	4		1,8	328
٦ ١١	Note. If you had over \$400 in ordinary dividends, you must also complete Part III.	т			
ıary			Amo	unt	
Dividends	5 List name of payer. Include only ordinary dividends. If you received any capital gain distributions, see the				
(See page B-1	instructions for Form 1040, line 13. ▶				27
and the instructions for	1st Union National Bank Trustee	-		.1,3	
Form 1040, line 9.)	Pell Rudman Trust Company, N.A.	1			321_
		_			
		_ 5			
Note. If you					
received a Form 1099-DIV or		_			
substitute statement from		_			
a brokerage		_			
firm, list the firm's name as		4			
the payer and enter		4			
the ordinary		4			
dvidends show on that form.		4			
		-			
	6 Add the amounts on line 5. Enter the total here and on Form 1040, line 9	6	-	11,6	548
			I		
Part III Foreign	You must complete this part if you (a) had over \$400 of 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.			Yes	No
Accounts and Trusts	7a At any time during 2000, did you have an interest in or a signature or other authority over a financial account in country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions are requirements for Form TD F 90-22.1	and fillr	1 g		X
(b If "Yes," enter the name of foreign country				
μ. υ=2.)	8 During 2000, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?				Ισ
	If "Yes," you may have to file Form 3520. See page B-2				X

KFA For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule B (Form 1040) 2000

SCHEDULE C-EZ (Form 1040)

Department of the Treasury nternal Revenue Service (99)

Name of proprietor

Net Profit From Business

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065–B.

► Attach to Form 1040 or Form 1041. ► See instructions on back.

OMB No. 1545-0074

Social security number (SSN)

2000

Attachment Sequence No. **09A**

<u> 1 </u>	rary Rodna	am Clincon			_				
Pa	rt I Genera	al Information							
Schei nstea Schei	May Use dule C-EZ ad of dule C	 Had business expenses of \$2,500 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 a sole proprietor. 	And You:	 Had no employee Are not required to Depreciation and business. See the Schedule C, line find out if you musted to be not deduct expuse of your home Do not have prior passive activity lost business. 	o file Fo Amortiza instruct 13, on pa st file. penses f year un	rm 4562, ation, for this ions for age C-3 to for business allowed			
A	Principal business	or profession, including product or service			B En	ter code fro			
С	Author	no separate business name, leave blank.			C-7 &	8 ▶ nployer ID r	7115		
C	business name. II	no separate business name, leave blank.				.p.oyoz .			
E	Business address	(including suite or room no.). Address not required	l if same as on Form 1	040, page 1.					
	City, town or post	office, state, and ZIP code							
Pa	rt II Figure	Your Net Profit							
1	on that form was o	Caution: If this income was reported to you on Forn checked, see Statutory Employees in the instruction	ons for Schedule C, lin	ne 1, on page C-2			8,5	34	
2	Total expenses.	if more than \$2,500, you must use Schedule C. See	e instructions		2				
3	and also on Sche	ct line 2 from line 1. If less than zero, you must use edule SE, line 2. (Statutory employees do not repo, enter on Form 1041, line 3.)	rt this amount on Sche	edule SE, line 2.	3		8,5	34	
Pa		nation on Your Vehicle. Complete this part				<u>2</u> .			
4	When did you place	ce your vehicle in service for business purposes? (month, day, year) ▶_	·					
5	Of the total number	er of miles you drove your vehicle during 2000, enter	er the number of miles	you used your vehicle f	or:				
а	Business	b Commuting	c Other						
6	Do you (or your sp	pouse) have another vehicle available for personal	use?				Yes		No
7	Was your vehicle	available for use during off-duty hours?					Yes		No
8 a	Do you have evide	ence to support your deduction?					Yes		No
b	If "Yes," is the evid	dence written?			Oches	dule C-EZ (Yes		No
or E	Danamuork Daduct	tion Act Notice, see Form 1040 instructions.			Sched	Juie U-EZ (rvi III	1040)	としい

SCHEDULE D (Form 1040)

Capital Gains and Losses

▶ See Instructions for Schedule D (Form 1040).

Attach to Form 1040.

OMB No. 1545-0074

2000

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

Use Schedule D-1 for more space to list transactions for lines 1 and 8.

Attachment Sequence No. Your social security number

/Y	lliam J. and	<u> Hillary R</u>	lodham, Cli	TILOII				
F	Part I Short-Term	Capital Gains	and Losses	- Assets Held O	ne Year or Less			
1	(a) Description of property	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or	Ì	(f) Gain or (loss)	
	(Example, 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see page D-6)	other basis (see page D-6)	1	Subtract (e) from (d)	
 -					 			
						-+		
						\dashv		
						- 1		

2	Enter your short-term total	als if any from						
-	Schedule D-1, line 2	210, 11 2117, 11 0111	2					
3	Total short-term sales p							
	Add column (d) of lines 1	and 2				*****		
4	Short-term gain from For	m 6252 and short-	term gain or (loss) from			*	
•	Forms 4684, 6781, and 8	824				4		
_	A		ine Coorporation	e actatos and trusts fr	om Schedule(s) K-1	5	5,528	•
	Net short-term gain or (lo				om ochedule(3) (**)	- +		
6	Short-term capital loss ca	arryover. Enter the	amount, if any, fro	om line 8 of your		_ [.	,	
	1999 Capital Loss Carryo	ver Worksheet				6 ()	
. 7	Net short-term capital g	rain or (loss). Con	abine column (f) o	f lines 1 through.6	▶	7	5,528	
	art II Long-Term	Capital Gains	and Losses	- Assets Held Me	ore Than One Ye	ar		
					(e) Cost or	$-\top$	(f) Gain or (loss)	(g) 28% rate gain
	(a) Description of property (Example, 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D-6)	other basis		Subtract (e) from (d)	or (loss) * (see instr. below)
	IEXAMBLE, 100 SH, A12 CO.1	(IVIO., GEY, YI-)	(10,00)					
	,				(see page D-6)			
					(see page D=6)			
					(see page D-6)			
					(see page D-6)			
					(see page U-o)			
					(see page U-o)			
					(see page Uo)			
					(see page U-o)			
					(see page U-o)			
					(see page U-o)			
					(see page U-o)			
	Enter your long-term tota	als, if any, from			(see page U-o)			
		als, if any, from	9		(see page U-o)			
9	Enter your long-term total schedule D-1, line 9 Total long-term sales p	als, if any, from			(see page U-o)			
9	Enter your long-term tota Schedule D-1, line 9	als, if any, from			(see page U-o)			
9	Enter your long-term total Schedule D-1, line 9 Total long-term sales punction and column (d) of lines is gain from Form 4797. Pos	als, if any, from price amounts. and 9		9 and 6252:				
9	Enter your long-term total Schedule D-1, line 9 Total long-term sales punction and column (d) of lines is gain from Form 4797. Pos	als, if any, from price amounts. and 9		9 and 6252:		111		
9	Enter your long-term total Schedule D-1, line 9 Total long-term sales padd column (d) of lines 8	als, if any, from price amounts. and 9		9 and 6252:		11		
9 10	Enter your long-term total Schedule D-1, line 9 Total long-term sales produced and column (d) of lines and long-term gain or (lines).	als, if any, from orice amounts. 8 and 9 art I; long-term gaioss) from Forms 46	10 n from Forms 2439 884, 6781, and 882	9 and 6252; 24			120 518	
9 10	Enter your long-term total Schedule D-1, line 9 Total long-term sales punction and column (d) of lines is gain from Form 4797. Pos	als, if any, from orice amounts. 8 and 9 art I; long-term gaioss) from Forms 46	10 n from Forms 2439 884, 6781, and 882	9 and 6252; 24			130,518	
9 10	Enter your long-term total Schedule D-1, line 9 Total long-term sales produced and column (d) of lines and long-term gain or (lines).	als, if any, from orice amounts. 8 and 9 art I; long-term gaioss) from Forms 46	10 n from Forms 2439 884, 6781, and 882	9 and 6252; 24			130,518	
9 10 11 . 12	Enter your long-term total Schedule D-1, line 9 Total long-term sales public Add column (d) of lines and long-term gain or (long-term gain or	als, if any, from orice amounts. 8 and 9 art I; long-term gainess) from Forms 46 oss) from partnersh	n from Forms 2439 884, 6781, and 882 sips, S corporation	9 and 6252; 24	om Schedule(s) K-1 .		130,518	
9 10 11	Enter your long-term total Schedule D-1, line 9 Total long-term sales public Add column (d) of lines and long-term gain or (later to the later to the	als, if any, from orice amounts. B and 9 art I; long-term gainess) from Forms 46 oss) from partnersh s. See page D-1	n from Forms 2439 684, 6781, and 882 hips, S corporation	9 and 6252; 24	om Schedule(s) K-1 .	12	130,518	
9 10 11	Enter your long-term total Schedule D-1, line 9 Total long-term sales punched and column (d) of lines and long-term gain or (lotal long-term gain or (lotal long-term gain distributions).	als, if any, from price amounts. B and 9 art I; long-term gainess) from Forms 46 poss) from partnersh s. See page D-1 arryover. Enter in h	n from Forms 2439 684, 6781, and 882 hips, S corporation	9 and 6252; 24s, estates, and trusts fr	om Schedule(s) K-1 .	12	130,518	
9 10 11	Enter your long-term total Schedule D-1, line 9 Total long-term sales public Add column (d) of lines and long-term gain or (later to the later to the	als, if any, from price amounts. B and 9 art I; long-term gainess) from Forms 46 poss) from partnersh s. See page D-1 arryover. Enter in h	n from Forms 2439 684, 6781, and 882 hips, S corporation	9 and 6252; 24s, estates, and trusts fr	om Schedule(s) K-1 .	12	130,518	
9 10 11 . 12 13 14	Enter your long-term total Schedule D-1, line 9 Total long-term sales punched Add column (d) of lines and long-term gain or (later long-term gain or (later long-term gain or (later long-term gain distributions). Capital gain distributions. Long-term capital loss of if any, from line 13 of your	als, if any, from orice amounts. B and 9 art I; long-term gai coss) from Forms 46 coss) from partnersh s. See page D-1 arryover. Enter in tur 1999 Capital Los	n from Forms 2439 884, 6781, and 882 sips, S corporation both columns (f) and ss Carryover Work	e and 6252; 24	om Schedule(s) K-1 .	12 13 14	130,518	
9 10 11 . 12 13 14	Enter your long-term total Schedule D-1, line 9 Total long-term sales punched Add column (d) of lines and long-term gain or (later long-term gain or (later long-term gain or (later long-term gain distributions). Capital gain distributions. Long-term capital loss of if any, from line 13 of your	als, if any, from orice amounts. B and 9 art I; long-term gai coss) from Forms 46 coss) from partnersh s. See page D-1 arryover. Enter in tur 1999 Capital Los	n from Forms 2439 884, 6781, and 882 sips, S corporation both columns (f) and ss Carryover Work	e and 6252; 24	om Schedule(s) K-1 .	12 13 14	130,518	
9 10 11 . 12 13 14	Enter your long-term total Schedule D-1, line 9 Total long-term sales punched and column (d) of lines and long-term gain or (lotal long-term gain or (lotal long-term gain distributions).	als, if any, from orice amounts. B and 9 art I; long-term gai coss) from Forms 46 coss) from partnersh s. See page D-1 arryover. Enter in tur 1999 Capital Los	n from Forms 2439 884, 6781, and 882 sips, S corporation both columns (f) and ss Carryover Work	e and 6252; 24	om Schedule(s) K-1 .	12 13 14	(
9 10 11 . 12 13 14	Enter your long-term total Schedule D-1, line 9 Total long-term sales punched and column (d) of lines and long-term gain or (lotal long-term gain or (lotal long-term gain or (lotal long-term capital loss of any, from line 13 of your combine column (g) of lotal long-term (g) of	als, if any, from price amounts. B and 9	n from Forms 2439 684, 6781, and 882 hips, S corporation both columns (f) and ses Carryover Work	e and 6252; 24	om Schedule(s) K-1 .	12 13 14	130,518	
9 10 11 . 12 13 14	Enter your long-term total Schedule D-1, line 9 Total long-term sales punched Add column (d) of lines and long-term gain or (let long-term gain or (let long-term gain distributions). Long-term capital loss of if any, from line 13 of your combine column (g) of late long-term capital gain distributions.	als, if any, from orice amounts. 8 and 9 art I; long-term gainess) from Forms 46 oss) from partnersh s. See page D-1 arryover. Enter in the sur 1999 Capital Loss tines 8 through 14. gain or (loss). Com	n from Forms 2439 684, 6781, and 882 hips, S corporation both columns (f) and ss Carryover Work	e and 6252; 24	om Schedule(s) K-1 .	12 13 14 15	(
9 10 11 . 12 13 14	Enter your long-term total Schedule D-1, line 9 Total long-term sales punched and column (d) of lines and long-term gain or (lotal long-term gain or (lotal long-term gain or (lotal long-term capital loss of any, from line 13 of your combine column (g) of lotal long-term (g) of	als, if any, from orice amounts. B and 9	n from Forms 2439 884, 6781, and 882 sips, S corporation both columns (f) and ss Carryover Work	e and 6252; 24	om Schedule(s) K–1 .	12 13 14 15 16	130,518	

stock (see page D-4).

Schedule D (Form 1040) 2000

P	art III Summary of Parts I and II		
17	Combine lines 7 and 16. If a loss, go to line 18. If a gain, enter the gain on Form 1040, line 13	17	136,046
•	iext: Complete Form 1040 through line 39. Then, go to Part IV to figure your tax if:		
	Both lines 16 and 17 are gains and		
	● Form 1040, line 39, is more than zero.		
	Otherwise, stop here.		
18	If line 17 is a loss, enter here and as a (loss) on Form 1040, line 13, the smaller of these losses:		
	A The loss on line 17 or		. ,
	• (\$3,000) or, if married filing separately, (\$1,500)	18 (<u> </u>
	Next: Skip Part IV below. Instead, complete Form 1040 through line 37. Then, complete the		
	Capital Loss Carryover Worksheet on page D-6 if:		
	 The loss on line 17 exceeds the loss on line 18 or 		
	● Form 1040, line 37, is a loss.	**********	
P	art IV Tax Computation Using Maximum Capital Gains Rates		
19	Enter your taxable income from Form 1040, line 39.	19	206,230
20	Enter the smaller of line 16 or line 17 of Schedule D		
21	If you are filing Form 4952, enter the amount from Form 4952, line 4e		
22	Subtract line 21 from line 20. If zero or less, enter -0		
23	Combine lines 7 and 15. If zero or less, enter -0		
24	Enter the smaller of line 15 or line 23, but not less than zero		
25	Enter your unrecaptured section 1250 gain, if any, from line 17 of the worksheet on page D-8		
26	Add lines 24 and 25		
27	Subtract line 26 from line 22. If zero or less, enter =0=	27	130,518
21	Subtract line 27 from line 19. If zero or less, enter -0	28	75,712
	Enter the smaller of:		
29	The amount on line 19 or The amount on line 19 or		
	\$26,250 if single; \$43,850 if married filing jointly or qualifying widow(er);	29	43,850
	\$21,925 if married filing separately; or \$35,150 if head of household		
	Enter the smaller of line 28 or line 29		
30	Subtract line 22 from line 19. If zero or less, enter -0		
31	Enter the larger of line 30 or line 31		
32	Figure the tax on the amount on line 32. Use the Tax Table or Tax Rate Schedules, whichever applies	33	15,503
33	Note: If the amounts on lines 29 and 30 are the same, skip lines 34 through 37 and go to line 38.		
	Enter the amount from line 29		
34	Enter the amount from line 25		
35	Subtract line 35 from line 34		
36	Multiply line 36 by 10% (.10)	37	
37	Note: If the amounts on lines 19 and 29 are the same, skip lines 38 through 51 and go to line 52.		
	Note: If the amounts on lines 19 and 29 are the same, skip lines 30 through or and 3		
38	Enter the smaller of line 19 of line 27		
39	Enter the amount from line 36		
40	Subtract line 39 from line 38	41	26,104
41	Multiply line 40 by 20% (.20)		
	Note: If line 26 is zero or blank, skip lines 42 through 51 and go to line 52.		
42	2 Enter the smaller of line 22 or line 25	-	
43	3 Add lines 22 and 32		
44	Finite the amount from line 19		
45	5 Subtract line 44 from line 43. If zero or less, enter -0	-	
46	S Subtract line 45 from line 42. If zero or less, enter -0	47	
47	7 Multiply line 46 by 25% (.25)		
	Note: If line 24 is zero or blank, skip lines 48 through 51 and go to line 52.		
48	3 Enter the amount from line 19	-	
	Add lines 32, 36, 40, and 46	-	
	3. When at line 40 from line 48	. 51	
51	4. MANUSTER (IOD EO by 200/ / 20)	51	41,607
E 4	9. Add lines 22: 27: 41: 47; and 51	. 52	57,291
53	3 Figure the tax on the amount on line 19. Use the Tax Table or Tax Rate Schedules, whichever applies	. 53	31,231
		1	41,60 7
54	4 Tax on all taxable income (including capital gains). Enter the smaller of line 52 or line 53 here and on Form 1040, line 40	. 54	te D (Form 1040) 200

SCHEDULE SE (Form 1040)

Department of the Treasury

iternal Revenue Service (99)

Self-Employment Tax

➤ See Instructions for Schedule SE (Form 1040).

➤ Attach to Form 1040.

OMB No. 1545-0074

2000

Attachment Sequence No. 17

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

Hillary Rodham Clinton

Social security number of person with self-employment income . . .

Who Must File Schedule SE

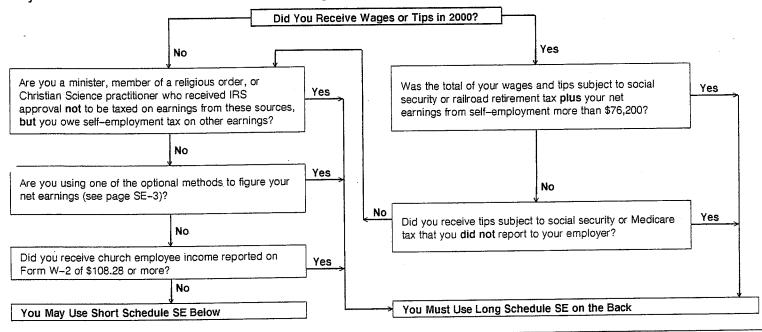
You must file Schedule SE if:

- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is not church employee income. See page SE-1.

Note. Even if you had a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either "optional method" in Part II of Long Schedule SE. See page SE-3.

Exception. If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner, and you filed Form 4361 and received IRS approval not to be taxed on those earnings, do not file Schedule SE. Instead, write "Exempt-Form 4361" on Form 1040, line 52.

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



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), line 15a	1	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), line 15a (other than farming); and Schedule K-1 (Form 1065-B), box 9. Ministers and members of religious orders, see page SE-1 for amounts to report on this line. See page SE-2 for other income to report	2	8,534
3	Combine lines 1 and 2	3	8,534
4	Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If less than \$400, do not file this schedule; you do not owe self-employment tax	4	7,881
5	Self-employment tax. If the amount on line 4 is: \$76,200 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 52. More than \$76,200, multiply line 4 by 2.9% (.029). Then, add \$9,448.80 to the result. Enter the total here and on Form 1040, line 52.	5	1,206
-	Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 27		L 1 - 05 (5 1010) 0000

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule SE (Form 1040) 2000

Form 6251

Alternative Minimum Tax - Individuals

QMB No. 1545-0227

2000

32

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No.

ne(s) shown on Form 1040

Your social security number

	art I Adjustments and Preferences		
	If you itemized deductions on Schedule A (Form 1040), go to line 2. Otherwise, enter your standard deduction from Form 1040, line 36, here and go to line 6	1	
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4 or 2 1/2% of Form 1040, line 34	2	10.020
3	Taxes, Enter the amount from Schedule A (Form 1040), line 9	3	40,238
4	Certain interest on a home mortgage not used to buy, build, or improve your home	4	
5	Miscellaneous itemized deductions. Enter the amount from Schedule A (Form 1040), line 26	5	
6	Refund of taxes. Enter any tax refund from Form 1040, line 10 or line 21	6 ()
7	Investment interest. Enter difference between regular tax and AMT deduction	7	
8	Post-1986 depreciation. Enter difference between regular tax and AMT depreciation	8	
9	Adjusted gain or loss. Enter difference between AMT and regular tax gain or loss	9	
10	Incentive stock options. Enter excess of AMT income over regular tax income	10	
11	Passive activities. Enter difference between AMT and regular tax income or loss	11	
12	Beneficiaries of estates and trusts. Enter the amount from Schedule K-1 (Form 1041), line 9	12	
13	Tax-exempt interest from private activity bonds issued after 8/7/86	13	
14	Other. Enter the amount, if any, for each item below and enter the total on line 14.		
	a Circulation expenditures. h Loss limitations		
	b Depletion i Mining costs		•
	c Depreciation (pre-1987). j Patron's adjustment		
	d Installment sales k Pollution control facilities .		
	e Intangible drilling costs I Research & experimental.		
	f Large partnerships m Section 1202 exclusion		
	g Long-term contracts n Tax shelter farm activities.		
	o Related adjustments	14	40,238
ر	Total Adjustments and Preferences. Combine lines 1 through 14	15	40,2301
	art II Alternative Minimum Taxable Income	16	206,230
16	Enter the amount from Form 1040, line 37. If less than zero, enter as a (loss)	17	200,230
	Net operating loss deduction, if any, from Form 1040, line 21. Enter as a positive amount	''	
18	If Form 1040, line 34, is over \$128,950 (over \$64,475 if married filing separately), and you itemized deductions, enter the amount, if any, from line 9 of the worksheet for Schedule A (Form 1040), line 28	18	(6,842)
	Combine lines 15 through 18	19	239,626
19	Alternative tax net operating loss deduction. See page 6 of the instructions.	20	
20	Alternative tax net operating loss deduction. See page of the instruction of the contract of t		
21	Alternative Minimum Taxable Income. Subtract line 20 from line 19. (If married filing separately and line 21 is more than \$165,000, see page 7 of the instructions.)	21	239,626
₩ p	art III Exemption Amount and Alternative Minimum Tax		
22	Exemption Amount. (If this form is for a child under age 14, see page 7 of the instructions.)		
~~	AND line 21 is THEN enter		
	IF your filing status is: not over on line 22		
	Single or head of household		
	Married filing jointly or gualifying widow(er) 150,000 45,000 }	22	22,593
	Married filing separately		
	If line 21 is ove r the amount shown above for your filing status, see page 7 of the instructions.		
23	Subtract line 22 from line 21. If zero or less, enter -0- here and on lines 26 and 28 and stop here ▶	23	217,033
24	If you reported capital gain distributions directly on Form 1040, line 13, or you completed Schedule D (Form 1040) and have an amount on line 25 or line 27 (or would have had an amount on either line if you had completed Part IV) (as refigured for the AMT, if necessary), go to Part IV of Form 6251 to figure line 24. All others: If line 23 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 23 by 26% (.26). Otherwise, multiply		40 500
	line 23 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	24	48,598
~5	Alternative minimum tax foreign tax credit. See page 7 of the instructions	. 25	48,595
	Tentative minimum tax. Subtract line 25 from line 24	26	40,000
	Enter your tax from Form 1040, line 40 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 43)	. 27	41,604
28	Alternative Minimum Tax. Subtract line 27 from line 26. If zero or less, enter -0	20	6,991
	Enter here and on Form 1040, line 41	20	Form 6251 (2000)
			10111 0=0 1 12000

44 Enter the amount from line 29.....

45 Add lines 35, 38, and 42.....

Multiply line 46 by 25% (.25).....

Add lines 36, 39, 43, and 47.........

Part IV Line 24 Computation Using Maximum Capital Gains Rates Caution: If you did not complete Part IV of Schedule D (Form 1040), see page 8 of the instructions before you complete this part. 217,033 29 30 Enter the amount from Schedule D (Form 1040), line 27 (as refigured for the AMT, 130,518 if necessary). See page 8 of the instructions..... 31 Enter the amount from Schedule D (Form 1040), line 25 (as refigured for the AMT, 0 31 if necessary). See page 8 of the instructions..... 130,518 **32** Add lines 30 and 31 33 Enter the amount from Schedule D (Form 1040), line 22 (as refigured for the AMT, 33 130,518 if necessary). See page 8 of the instructions..... 130,518 34 34 Enter the smaller of line 32 or line 33...... 35 86,515 35 Subtract line 34 from line 29. If zero or less, enter -0- 36 If line 35 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 35 by 26% (.26). Otherwise, 22,494 multiply line 35 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result. 36 37 Enter the amount from Schedule D (Form 1040), line 36 (as figured for the regular tax). See page 8 of the instructions..... 0 37 38 Enter the smallest of line 29, line 30, or line 37..... 39 Multiply line 38 by 10% (.10)..... 130,518 Enter the amount from line 38..... 41 130,518 43 26,104 **43** Multiply line 42 by 20% (.20)..... Note: If line 31 is zero or blank, skip lines 44 through 47 and go to line 48.

45

46

Form 6251 (2000)

48,598

57,269

48,598

47

48

49

If line 29 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 29 by 26% (.26). Otherwise,

multiply line 29 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.....

50 Enter the smaller of line 48 or line 49 here and on line 24