§104	n	epartment of the Treasury - Inte			(22)   (2)	<b>@11</b>		N- 4545							
			onic i	ax iv		2011 endi		No. 1545		IKS USE		o not write or staple in this e separate instruction			
For the year Jan. 1-Dec. 31, 2011, or other tax year beginning  Your first name and initial				, 2011, ending , 20							Your social security number				
WILLARD M				ROMNEY											
If a joint return, spouse's first name and initial				Last name								Spouse's social security number			
ANN D				ROMNEY											
Home address	(number	and street). If you have a P.O. b	ox, see ins	truction	S.				A	pt. no.	1	Make sure the SSN( and on line 6c are			
City, town or po	ost office	, state, and ZIP code. If you har	ve a foreigi	n addres	ss, also complete sp	aces bel	ow (see in:	structions).			P	Presidential Election Camp	paign		
BELMON	Γ	MA	0247	78								ck here if you, or your spouse i ly, want \$3 to go to this fund.			
Foreign country name US A				Foreign province/county Foreign postal code						ode	a bux below will not change your taxor refund. X You X Spouse				
Filing Stat	1110 1	Single				4	Head	of house	hold (wit	th qual	lifying p	person). (See instructi	ions.) If		
i iiiig Stat	2	X Married filing jointly	(even if	only on	e had income)							ot your dependent, e			
Check only one	3	Married filing separately. Enter spouse's SSN above child's name here.							e. 🕨 _						
box.		and full name here.	<u> </u>			5	Qual	fying wid	ow(er) v	with de	pende				
Exemption	s 6a	1 1		-							• • ]	Boxes checked on 6a and 6b No. of children on 6c who:	2		
	С	Dependents:	1				(3) Dependent's relationship to you (4)√ if child us qualifying for chi (see instru				<ul> <li>lived with you</li> </ul>				
	(1) Firs	st name Last na	me	social security number re							<ul> <li>did not live with you due to divorce</li> </ul>				
If more than four						<del> </del>				++		or separation (see instructions)			
dependents, see instructions and check here						<del> </del>				+-+		Dependents on 6c			
						+				++		not entered above			
	d	Total number of everntic	ne claim						L			Add numbers on lines above	2		
Income	7	Total number of exemption Wages, salaries, tips, etc.									7				
		Taxable interest. Attach S									8a	3,012,7	775		
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 instructions.  Enclose, but do		Tax-exempt interest. Do n					1	1	1,3			070127			
		Ordinary dividends. Attac									9a	3,649,5	567.		
	b	Qualified dividends			STN	T. 1.	. 9b	2,2	21,9	56.	,				
	10	Taxable refunds, credits, or offsets of state and local income taxes									10	352,9	05.		
	11	Alimony received								11					
	12	Business income or (loss). Attach Schedule C or C-EZ							<del></del> .	12	450,7				
	13	, ,			edule D if required. If not required, check here						13	6,810,1			
	14	Other gains or (losses). A	rm 4797							14	-484,5	572.			
	15a	IRA distributions	–	5a				le amoun			15b				
	16a	Pensions and annuities .									16b	100	.7.		
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E							17	120,3	3/5.				
Enclose, but do	18	Farm income or (loss). Attach Schedule F								18					
not attach, any	4.0	Unemployment compensation								19 20h					
not attach, any payment. Also, please use	19	Cooled coourity bandits	1 2								20b				
not attach, any payment. Also,	20a	Social security benefits			SEF	STAT	PEMEN	כ ידו			21	-202 3	358		
not attach, any payment. Also, please use	20a 21	Other income. List type a	nd amour	nt					al incor	ne 🌬	21	-202,3 13,709,6			
not attach, any payment. Also, please use Form 1040-V.	20a 21 22	Other income. List type at Combine the amounts in	nd amour the far ri	nt ght col	umn for lines 7 t	nrough 2	21. This is		al incor	ne 🕨	21	-202,3 13,709,6			
not attach, any payment. Also, please use Form 1040-V.	20a 21 22 23	Other income. List type at Combine the amounts in Educator expenses	nd amour the far ri	nt ght col	umn for lines 7 t	nrough 2	21. This is		al incor	ne 🕨					
not attach, any payment. Also, please use Form 1040-V.	20a 21 22	Other income. List type at Combine the amounts in	nd amour the far ri	ght col	umn for lines 7 to	nrough 2	21. This is		al incor	ne ▶					

26 26 12,657 Deductible part of self-employment tax. Attach Schedule SE . . . . 27 27 28 Self-employed SEP, SIMPLE, and qualified plans . . . . . . . . . . . 28 29 29 30 30 Alimony paid b Recipient's SSN > \_\_\_ 31a 31a 32 

Student loan interest deduction......... Tuition and fees. Attach Form 8917....... 34 35 Domestic production activities deduction. Attach Form 8903. . . . 13,696,951.

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Subtract line 36 from line 22. This is your adjusted gross income . . For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. 1A1210 2.000

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