

For the year Jan. 1-Dec. 31, 2012, or other tax year beginning 2012, ending 2012 See separate instructions.

Your first name and initial **JOHN R.** Last name **KASICH** Your social security number [REDACTED]

If a joint return, spouse's first name and initial **KAREN** Last name **KASICH** Spouse's social security number [REDACTED]

Home address (number and street). If you have a P.O. box, see instructions. [REDACTED] Apt. no. [REDACTED] Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. **WESTERVILLE, OH 43082** Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Foreign country name Foreign province/state/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 6b Spouse Boxes checked on 6a and 6b **2**
 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
EMMA KASICH [REDACTED] **DAUGHTER**
REESE KASICH [REDACTED] **DAUGHTER**
 No. of children on 6c who: lived with you **2**
 did not live with you due to divorce or separation (see instructions)
 Dependents on 6c not entered above
 Add numbers on lines above **4**

Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2 **7 127,494.**
 8a Taxable interest. Attach Schedule B if required **8a 5,426.**
 8b Tax-exempt interest. Do not include on line 8a **8b 98,422.**
 9a Ordinary dividends. Attach Schedule B if required **9a 76,092.**
 9b Qualified dividends **9b 40,421.**
 10 Taxable refunds, credits, or offsets of state and local income taxes **STMT 4 STMT 5 10 0.**
 11 Alimony received **11**
 12 Business income or (loss). Attach Schedule C or C-EZ **12 134,415.**
 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here **13 87,089.**
 14 Other gains or (losses). Attach Form 4797 **14 -1.**
 15a IRA distributions **15a** b Taxable amount **15b 279,016.**
 16a Pensions and annuities **16a** b Taxable amount **16b 1,553.**
 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E **17 -5,041.**
 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 **22 706,043.**

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 8,625.**
 28 Self-employed SEP, SIMPLE, and qualified plans **28 25,158.**
 29 Self-employed health insurance deduction **29**
 30 Penalty on early withdrawal of savings **30**
 31a Alimony paid b Recipient's SSN **31a**
 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 33,783.**
 37 Subtract line 36 from line 22. This is your adjusted gross income **37 672,260.**

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	672,260.
Standard Deduction for - <input type="checkbox"/> People who check any box on line 39a or 39b or who can be claimed as a dependent. <input type="checkbox"/> All others: Single or Married filing separately, \$5,950 <input type="checkbox"/> Married filing jointly or Qualifying widow(er), \$11,900 <input type="checkbox"/> Head of household, \$8,700	39a	Check <input type="checkbox"/> You were born before January 2, 1948, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1948, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	102,386.
	41	Subtract line 40 from line 38	41	569,874.
	42	Exemptions. Multiply \$3,800 by the number on line 6d	42	15,200.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	554,674.
	44	Tax. Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> 962 election	44	138,185.
	45	Alternative minimum tax. Attach Form 6251	45	25,459.
	46	Add lines 44 and 45	46	163,644.
	47	Foreign tax credit. Attach Form 1116 if required	47	1,965.
	48	Credit for child and dependent care expenses. Attach Form 2441	48	
	49	Education credits from Form 8863, line 19	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit. Attach Schedule 8812, if required	51	
	52	Residential energy credits. Attach Form 5695	52	
53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53		
54	Add lines 47 through 53. These are your total credits	54	1,965.	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	161,679.	
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	15,050.
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 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	176,729.	
Payments	62	Federal income tax withheld from Forms W-2 and 1099	62	28,556.
63	2012 estimated tax payments and amount applied from 2011 return	63	160,896.	
If you have a qualifying child, attach Schedule EIC.	64a	Earned income credit (EIC)	64a	
	b	Nontaxable combat pay election <input type="checkbox"/> 64b		
	65	Additional child tax credit. Attach Schedule 8812	65	
	66	American opportunity credit from Form 8863, line 8	66	
	67	Reserved	67	
	68	Amount paid with request for extension to file	68	19,000.
	69	Excess social security and tier 1 RRTA tax withheld	69	
	70	Credit for federal tax on fuels. Attach Form 4136	70	
	71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71	
	72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	208,452.
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	31,723.
Direct deposit? See instructions.	74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	74a	
	b	Routing number <input type="text"/> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account number <input type="text"/>		
75	Amount of line 73 you want applied to your 2013 estimated tax	75	31,723.	
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	
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)? Yes. Complete below. No

Designee's name Phone no. Personal identification number (PIN)

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 Date Your occupation **GOVERNOR OF OHIO** Daytime phone number

Spouse's signature. If a joint return, both must sign. Date Spouse's occupation **FIRST LADY** If the IRS sent you an Identity Protection PIN, enter it here

Paid Preparer Use Only

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

Firm's name Firm's EIN Phone no.

Firm's address