

For the year Jan 1 - Dec 31, 2008, or other tax year beginning \_\_\_\_\_, 2008, ending \_\_\_\_\_, 20

**Label** (See instructions.)  
**Use the IRS label.** Otherwise, please print or type.

Your first name: **Richard** MI: **J** Last name: **Santorum**  
 Your social security number: [REDACTED]

If a joint return, spouse's first name: **Karen** MI: **G** Last name: **Santorum**  
 Spouse's social security number: [REDACTED]

**Presidential Election Campaign**  
 Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions)  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 & full name here ...  
 4  Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here ...  
 5  Qualifying widow(er) with dependent child (see instructions)

**Exemptions**

6a  Yourself. If someone can claim you as a dependent, do not check box 6a  
 b  Spouse

c Dependents:		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)	No. of children on 6c who:
(1) First name	Last name				• lived with you
Elizabeth A	Santorum		Daughter	<input type="checkbox"/>	7
Richard J	Santorum, Jr.		Son	<input checked="" type="checkbox"/>	
Daniel J	Santorum		Son	<input checked="" type="checkbox"/>	
Sarah M	Santorum		Daughter	<input checked="" type="checkbox"/>	

d Total number of exemptions claimed: **SEE STMT**

**Income**

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	357,641.
8a Taxable interest. Attach Schedule B if required	8a	69.
b Tax-exempt interest. Do not include on line 8a	8b	
9a Ordinary dividends. Attach Schedule B if required	9a	51.
b Qualified dividends (see instrs)	9b	25.
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	548,983.
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here	13	
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions	15a	
b Taxable amount (see instrs)	15b	
16a Pensions and annuities	16a	
b Taxable amount (see instrs)	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	45,886.
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits	20a	
b Taxable amount (see instrs)	20b	
21 Other income	21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income	22	952,630.

**Adjusted Gross Income**

23 Educator expenses (see instructions)	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 One-half of self-employment tax. Attach Schedule SE	27	7,530.
28 Self-employed SEP, SIMPLE, and qualified plans	28	
29 Self-employed health insurance deduction (see instructions)	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid b Recipient's SSN	31a	
32 IRA deduction (see instructions)	32	
33 Student loan interest deduction (see instructions)	33	
34 Tuition and fees deduction. Attach Form 8917	34	
35 Domestic production activities deduction. Attach Form 8903	35	
36 Add lines 23 - 31a and 32 - 35	36	7,530.
37 Subtract line 36 from line 22. This is your adjusted gross income	37	945,100.

<b>Tax and Credits</b>	38	Amount from line 37 (adjusted gross income)	38	945,100.
	39a	Check if: <input type="checkbox"/> You were born before January 2, 1944, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1944, <input type="checkbox"/> Blind. Total boxes checked ▶ 39a		
		b If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here ▶ 39b		
		c Check if standard deduction includes real estate taxes or disaster loss (see instructions) ▶ 39c		
	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	149,514.
	41	Subtract line 40 from line 38	41	795,586.
	42	If line 38 is over \$119,975, or you provided housing to a Midwestern displaced individual, see instructions. Otherwise, multiply \$3,500 by the total number of exemptions claimed on line 6d	42	20,997.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	774,589.
	44	Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	242,676.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Add lines 44 and 45	46	242,676.	
47	Foreign tax credit. Attach Form 1116 if required	47		
48	Credit for child and dependent care expenses. Attach Form 2441	48		
49	Credit for the elderly or the disabled. Attach Schedule R	49		
50	Education credits. Attach Form 8863	50		
51	Retirement savings contributions credit. Attach Form 8880	51		
52	Child tax credit (see instructions). Attach Form 8901 if required	52		
53	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	53		
54	Other crs from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54		
55	Add lines 47 through 54. These are your total credits	55		
56	Subtract line 55 from line 46. If line 55 is more than line 46, enter -0-	56	242,676.	
57	Self-employment tax. Attach Schedule SE	57	15,059.	
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58		
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59		
60	Additional taxes: a <input type="checkbox"/> AEIC payments b <input checked="" type="checkbox"/> Household employment taxes. Attach Schedule H	60	4,347.	
61	Add lines 56-60. This is your total tax	61	262,082.	
<b>Payments</b>	62	Federal income tax withheld from Forms W-2 and 1099	62	49,920.
	63	2008 estimated tax payments and amount applied from 2007 return	63	146,970.
	64a	Earned income credit (EIC)	64a	
		b Nontaxable combat pay election ▶ 64b		
	65	Excess social security and tier 1 RRTA tax withheld (see instructions)	65	13,541.
	66	Additional child tax credit. Attach Form 8812	66	
	67	Amount paid with request for extension to file (see instructions)	67	
	68	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	68	
	69	First-time homebuyer credit. Attach Form 5405	69	
	70	Recovery rebate credit (see worksheet)	70	0.
71	Add lines 62 through 70. These are your total payments	71	210,431.	
<b>Refund</b>	72	If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid	72	
	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here ▶ <input type="checkbox"/>	73a	
		▶ b Routing number <input type="text" value="XXXXXXXXXX"/> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	▶ d Account number <input type="text" value="XXXXXXXXXXXXXXXXXXXX"/>			
74	Amount of line 72 you want applied to your 2009 estimated tax	74		
<b>Amount You Owe</b>	75	Amount you owe. Subtract line 71 from line 61. For details on how to pay, see instructions	75	51,651.
	76	Estimated tax penalty (see instructions)	76	

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)?  Yes. Complete the following.  No

Designee's name	Phone no.	Personal identification number (PIN)
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**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	Daytime phone number
		Corporate Executive	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
		Housewife	

**Paid Preparer's Use Only**

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed) address, and ZIP code	Self-Prepared		EIN
			Phone no.

**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).

OMB No. 1545-0074

**2008**

Attachment  
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

**Richard J & Karen G Santorum**

<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 ..... <b>2</b>			
	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>  (See instructions.)	<b>5 State and local (check only one box):</b>				
	a	<input checked="" type="checkbox"/> Income taxes, or			
	b	<input type="checkbox"/> General sales taxes	5	39,818.	
	6	Real estate taxes (see instructions) .....	6	18,308.	
	7	Personal property taxes .....	7		
	8	Other taxes. List type and amount ▶ .....	8		
	9	Add lines 5 through 8 .....	9	58,126.	
	<b>Interest You Paid</b>	10	Home mtg interest and points reported to you on Form 1098 .....	10	77,250.
		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 number, and address ▶ .....		
12		Points not reported to you on Form 1098. See instrs for spcl rules .....	12		
13		Qualified mortgage insurance premiums (see instructions) .....	13		
14		Investment interest. Attach Form 4952 if required. (See instrs.) .....	14		
15		Add lines 10 through 14 .....	15	77,250.	
<b>Gifts to Charity</b>  If you made a gift and got a benefit for it, see instructions.	16	Gifts by cash or check. If you made any gift of \$250 or more, see instrs .....	16	21,990.	
	17	Other than by cash or check. If any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500 .....	17		
	18	Carryover from prior year .....	18		
	19	Add lines 16 through 18 .....	19	21,990.	
<b>Casualty and Theft Losses</b>	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.) .....	20		
(See instructions.)	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	60.	
	23	Other expenses – investment, safe deposit box, etc. List type and amount ▶ .....	23		
	24	Add lines 21 through 23 .....	24	60.	
	25	Enter amount from Form 1040, line 38 ..... <b>25</b> 945,100.			
	26	Multiply line 25 by 2% (.02) .....	26	18,902.	
	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 the instructions. List type and amount ▶ .....	28		
<b>Total Itemized Deductions</b>	29	Is Form 1040, line 38, over \$159,950 (over \$79,975 if married filing separately)? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See instructions for the amount to enter.	29	149,514.	
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ <input type="checkbox"/>			

Itemized Deductions Limited per IRC Sec. 68.

**SCHEDULE C**  
**(Form 1040)**

**Profit or Loss From Business**  
**(Sole Proprietorship)**

OMB No. 1545-0074

**2008**

Department of the Treasury  
Internal Revenue Service (99)

▶ 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).

Attachment  
Sequence No. **09**

Name of proprietor <b>Richard J Santorum</b>		Social security number (SSN)
<b>A</b> Principal business or profession, including product or service (see instructions) <b>Consulting</b>	<b>D</b> Error code from instructions ▶ 999999*	
<b>C</b> Business name. If no separate business name, leave blank. <b>Excelsior, LLC</b>	<b>D</b> Employer ID number (EIN), if any	
<b>E</b> Business address (including suite or room no.) ▶ City, town or post office, state, and ZIP code		
<b>F</b> Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
<b>G</b> Did you 'materially participate' in the operation of this business during 2008? If 'No,' see instructions for limit on losses .... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>H</b> If you started or acquired this business during 2008, check here ▶ <input type="checkbox"/>		

**Part I Income**

<b>1</b> Gross receipts or sales. <b>Caution.</b> See the instructions and check the box if: • This income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see instructions for limit on losses <input type="checkbox"/>	<b>1</b>	589,781.
<b>2</b> Returns and allowances	<b>2</b>	
<b>3</b> Subtract line 2 from line 1	<b>3</b>	589,781.
<b>4</b> Cost of goods sold (from line 42 on page 2)	<b>4</b>	
<b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3	<b>5</b>	589,781.
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	<b>6</b>	
<b>7</b> <b>Gross income.</b> Add lines 5 and 6	<b>7</b>	589,781.

**Part II Expenses.** Enter expenses for business use of your home **only** on line 30.

<b>8</b> Advertising	<b>8</b>		<b>18</b> Office expense	<b>18</b>	23,827.
<b>9</b> Car and truck expenses (see instructions)	<b>9</b>	4,735.	<b>19</b> Pension and profit-sharing plans	<b>19</b>	
<b>10</b> Commissions and fees	<b>10</b>	14,404.	<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions)	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment	<b>20a</b>	
<b>12</b> Depletion	<b>12</b>		<b>b</b> Other business property	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	<b>13</b>	241.	<b>21</b> Repairs and maintenance	<b>21</b>	
<b>14</b> Employee benefit programs (other than on line 19)	<b>14</b>		<b>22</b> Supplies (not included in Part III)	<b>22</b>	
<b>15</b> Insurance (other than health)	<b>15</b>		<b>23</b> Taxes and licenses	<b>23</b>	
<b>16</b> Interest:			<b>24</b> Travel, meals, and entertainment:		
<b>a</b> Mortgage (paid to banks, etc)	<b>16a</b>		<b>a</b> Travel	<b>24a</b>	301.
<b>b</b> Other	<b>16b</b>		<b>b</b> Deductible meals and entertainment (see instructions)	<b>24b</b>	286.
<b>17</b> Legal & professional services	<b>17</b>	120.	<b>25</b> Utilities	<b>25</b>	
<b>28</b> <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27	<b>28</b>		<b>26</b> Wages (less employment credits)	<b>26</b>	
<b>29</b> Tentative profit or (loss). Subtract line 28 from line 7	<b>29</b>		<b>27</b> Other expenses (from line 48 on page 2)	<b>27</b>	
<b>30</b> Expenses for business use of your home. Attach <b>Form 8829</b>	<b>30</b>				
<b>31</b> <b>Net profit or (loss).</b> Subtract line 30 from line 29. • If a profit, enter on both <b>Form 1040, line 12,</b> and <b>Schedule SE, line 2</b> or on <b>Form 1040NR, line 13</b> (if you checked the box on line 1, see instructions). Estates and trusts, enter on <b>Form 1041, line 3.</b> • If a loss, you <b>must</b> go to line 32.				<b>31</b>	545,867.
<b>32</b> If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both <b>Form 1040, line 12,</b> and <b>Schedule SE, line 2,</b> or on <b>Form 1040NR, line 13</b> (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on <b>Form 1041, line 3.</b> • If you checked 32b, you <b>must</b> attach <b>Form 6198.</b> Your loss may be limited.				<b>32a</b>	<input checked="" type="checkbox"/> All investment is at risk.
				<b>32b</b>	<input type="checkbox"/> Some investment is not at risk.



**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

**2008**

Attachment  
Sequence No. **09A**

Name of proprietor

Karen G Santorum

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.

**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

Author

**B** Enter code from instructions

► 999999

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

Karen G. Santorum

**D** Employer ID number (EIN), if any

**E** Business address (including suite or room number). Address not required if same as on page 1 of your tax return.

PO BOX 609,

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

Great Falls , VA 22066

**Part II** Figure Your Net Profit

**1** **Gross receipts. Caution.** See the instructions for Schedule C, line 1, and check the box if:  
• This income was reported to you on Form W-2 and the 'Statutory employee' box on that form was checked, or  
• You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax

**1** 3,116.

**2** **Total expenses** (see instructions). If more than \$5,000, you **must** use Schedule C

**2**

**3** **Net profit.** Subtract line 2 from line 1. 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**. (If you checked the box on line 1, **do not** report the amount from line 3 on Schedule SE, line 2.) Estates and trusts, enter on **Form 1041, line 3**

**3** 3,116.

**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 2008, enter the number of miles you used your vehicle for:

**a** Business \_\_\_\_\_ **b** Commuting (see instructions) \_\_\_\_\_ **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

**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**  
(From rental real estate, royalties, partnerships,  
S corporations, estates, trusts, REMICs, etc)  
▶ Attach to Form 1040, 1040NR, or Form 1041.  
▶ See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

**2008**

Attachment  
Sequence No. **13**

Name(s) shown on return

Richard J & Karen G Santorum

Your social security number

**Part I** **Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and address of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of: • 14 days, or • 10% of the total days rented at fair rental value? (See instructions.)	Yes	No
A	Rental Condominium				X
B	Rental Condominium				X
C	Rental Condominium				X

Income:		Properties			Totals (Add columns A, B, and C.)
		A	B	C	
3	Rents received	16,763.	16,762.	16,985.	99,560.
4	Royalties received				
<b>Expenses:</b>					
5	Advertising				
6	Auto and travel (see instructions)				
7	Cleaning and maintenance	1,250.	520.	1,592.	
8	Commissions				
9	Insurance	127.	127.	807.	
10	Legal and other professional fees	100.	100.	100.	
11	Management fees	1,006.	1,006.	1,019.	
12	Mortgage interest paid to banks, etc (see instructions)	1,326.	1,326.	1,326.	7,956.
13	Other interest				
14	Repairs	1,344.	711.	2,985.	
15	Supplies				
16	Taxes	1,703.	2,273.	1,583.	
17	Utilities		118.	13.	
18	Other (list) ▶				
	Condo Fee	2,088.	2,088.		
	Permit	21.			
	License Fee		21.	21.	
	Condo Fees			1,956.	
19	Add lines 5 through 18	8,965.	8,290.	11,402.	53,674.
20	Depreciation expense or depletion (see instructions)		0.		0.
21	Total expenses. Add lines 19 and 20	8,965.	8,290.	11,402.	
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see instructions to find out if you must file Form 6198	7,798.	8,472.	5,583.	
23	Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See instructions to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2				
24	Income. Add positive amounts shown on line 22. Do not include any losses				45,886.
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here				
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2				45,886.

**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships,  
S corporations, estates, trusts, REMICs, etc)  
▶ Attach to Form 1040, 1040NR, or Form 1041.  
▶ See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

**2008**

Attachment  
Sequence No. **13**

Name(s) shown on return

Richard J & Karen G Santorum

**Part I Income or Loss From Rental Real Estate and Royalties**

Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and address of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of: • 14 days, or • 10% of the total days rented at fair rental value? (See instructions.)	Yes	No
A	Rental Condominium	---			X
B	Rental Condominium	---			X
C	Rental Condominium	---			X

Income:		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3	Rents received	16,350.	16,350.	16,350.	3
4	Royalties received				4
<b>Expenses:</b>					
5	Advertising				
6	Auto and travel (see instructions)				
7	Cleaning and maintenance	315.	582.	1,087.	
8	Commissions				
9	Insurance	127.	127.	127.	
10	Legal and other professional fees	100.	100.	100.	
11	Management fees	981.	981.	981.	
12	Mortgage interest paid to banks, etc (see instructions)	1,326.	1,326.	1,326.	12
13	Other interest				
14	Repairs	1,300.	1,871.	1,430.	
15	Supplies				
16	Taxes	1,554.	1,571.	1,571.	
17	Utilities	7.	190.	6.	
18	Other (list) ▶				
	Condo Fee	1,956.			
	License Fee	21.	21.	21.	
	Condo Fees		1,956.	1,956.	
19	Add lines 5 through 18	7,687.	8,725.	8,605.	19
20	Depreciation expense or depletion (see instructions)				20
21	Total expenses. Add lines 19 and 20	7,687.	8,725.	8,605.	
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see instructions to find out if you must file Form 6198	8,663.	7,625.	7,745.	
23	Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See instructions to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2				
24	<b>Income.</b> Add positive amounts shown on line 22. Do not include any losses				24
25	<b>Losses.</b> Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here				25
26	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2				26

**SCHEDULE SE**  
**(Form 1040)**

**Self-Employment Tax**

OMB No. 1545-0074

**2008**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 1040.** ▶ See instructions for Schedule SE (Form 1040).

Attachment  
Sequence No. **17**

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

Social security number of person  
with self-employment income ▶

**Karen G Santorum**

**Who Must File Schedule SE**

You must file Schedule SE if:

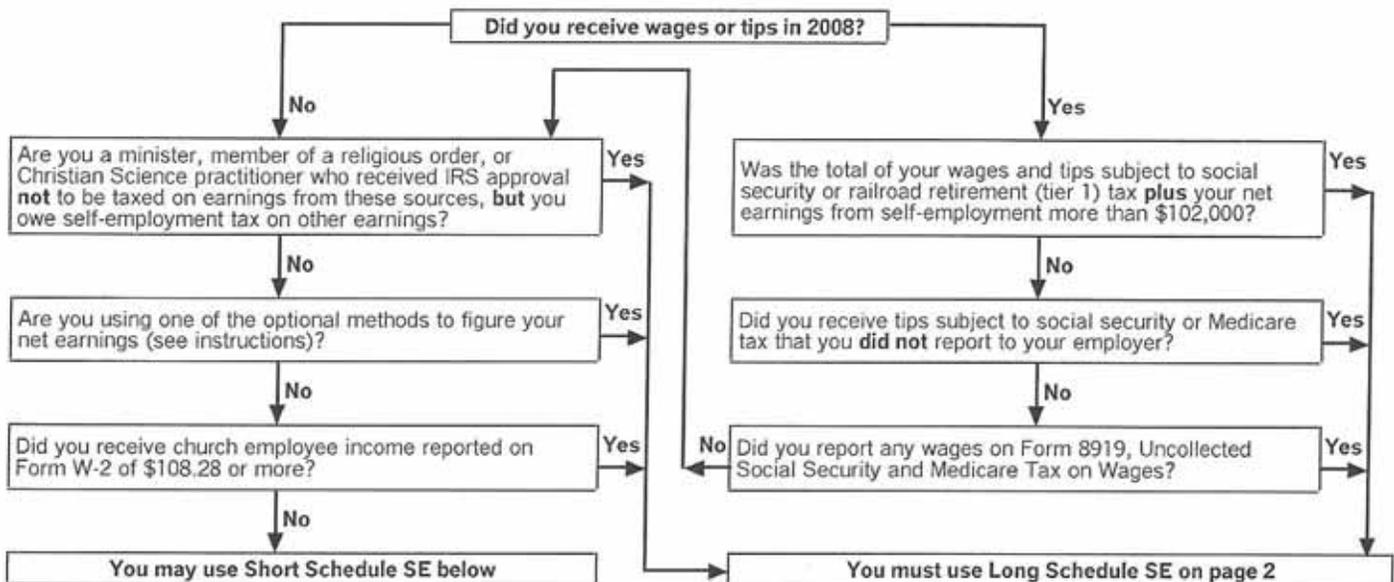
- You had net earnings from self-employment from **other than** church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, **or**
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious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

**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 instructions).

**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 57.

**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*, above.



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

<b>1 a</b> Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A .....	<b>1 a</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 6b, or listed on Schedule K-1 (Form 1065), box 20, code X .....	<b>1 b</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 instrs for types of income to report on this line. See instrs for other income to report .....	<b>2</b>	<b>3,116.</b>
<b>3</b> Combine lns 1a, 1b & 2 .....	<b>3</b>	<b>3,116.</b>
<b>4</b> <b>Net earnings from self-employment.</b> Multiply line 3 by 92.35% (.9235). If less than \$400, <b>do not</b> file this schedule; you do not owe self-employment tax .....	<b>4</b>	<b>2,878.</b>
<b>5</b> <b>Self-employment tax.</b> If the amount on line 4 is: • \$102,000 or less, multiply line 4 by 15.3% (.153). Enter the result here and on <b>Form 1040, line 57.</b> • More than \$102,000, multiply line 4 by 2.9% (.029). Then, add \$12,648 to the result. Enter the total here and on <b>Form 1040, line 57.</b>	<b>5</b>	<b>440.</b>
<b>6</b> <b>Deduction for one-half of self-employment tax.</b> Multiply line 5 by 50% (.5). Enter the result here and on <b>Form 1040, line 27</b> .....	<b>6</b>	<b>220.</b>

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

Richard J Santorum

Social security number of person with self-employment income ▶

**Section B – Long Schedule SE**

**Part I Self-Employment Tax**

**Note.** If your only income subject to self-employment tax is **church employee income**, skip lines 1 through 4b. Enter -0- on line 4c and go to line 5a. Income from services you performed as a minister or a member of a religious order is **not** church employee income. See instructions.

<p><b>A</b> If you are a minister, member of a religious order, or Christian Science practitioner <b>and</b> you filed Form 4361, but you had \$400 or more of <b>other</b> net earnings from self-employment, check here and continue with Part I <input type="checkbox"/></p>		
<b>1 a</b>	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. <b>Note.</b> Skip lines 1a and 1b if you use the farm optional method (see instructions)	
<b>1 b</b>	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 6b, or listed on Schedule K-1 (Form 1065), box 20, code X	
<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>Note.</b> Skip this line if you use the nonfarm optional method (see instructions)	545,867.
<b>3</b>	Combine lines 1a, 1b and 2	545,867.
<b>4 a</b>	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3	504,108.
<b>4 b</b>	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	
<b>4 c</b>	Combine lines 4a and 4b. If less than \$400, <b>stop</b> ; you do not owe self-employment tax. <b>Exception.</b> If less than \$400 and you had <b>church employee income</b> , enter -0- and continue ▶	504,108.
<b>5 a</b>	Enter your <b>church employee income</b> from Form W-2. See the instructions for definition of church employee income	5a
<b>5 b</b>	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	0.
<b>6</b>	<b>Net earnings from self-employment.</b> Add lines 4c and 5b	504,108.
<b>7</b>	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2008	102,000.
<b>8 a</b>	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$102,000 or more, skip lines 8b through 10, and go to line 11	320,389.
<b>8 b</b>	Unreported tips subject to social security tax (from Form 4137, line 10)	
<b>8 c</b>	Wages subject to social security tax (from Form 8919, line 10)	
<b>8 d</b>	Add lines 8a, 8b, and 8c	
<b>9</b>	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 ▶	
<b>10</b>	Multiply the <b>smaller</b> of line 6 or line 9 by 12.4% (.124)	
<b>11</b>	Multiply line 6 by 2.9% (.029)	14,619.
<b>12</b>	<b>Self-employment tax.</b> Add lines 10 and 11. Enter here and on <b>Form 1040, line 57</b>	14,619.
<b>13</b>	<b>Deduction for one-half of self-employment tax.</b> Multiply line 12 by 50% (.5). Enter the result here and on <b>Form 1040, line 27</b>	7,310.

**Part II Optional Methods To Figure Net Earnings** (see instructions)

<p><b>Farm Optional Method.</b> You may use this method <b>only</b> if (a) your gross farm income<sup>(1)</sup> was not more than \$6,300 or (b) your net farm profits<sup>(2)</sup> were less than \$4,548.</p>		
<b>14</b>	Maximum income for optional methods	4,200.
<b>15</b>	Enter the <b>smaller</b> of: two-thirds (2/3) of gross farm income <sup>(1)</sup> (not less than zero) or \$4,200. Also, include this amount on line 4b above	
<p><b>Nonfarm Optional Method.</b> You may use this method <b>only</b> if (a) your net nonfarm profits<sup>(3)</sup> were less than \$4,548 and also less than 72.189% of your gross nonfarm income<sup>(4)</sup> and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years.</p> <p><b>Caution.</b> You may use this method no more than five times.</p>		
<b>16</b>	Subtract line 15 from line 14	
<b>17</b>	Enter the <b>smaller</b> of: two-thirds (2/3) of gross nonfarm income <sup>(4)</sup> (not less than zero) or the amount on line 16. Also include this amount on line 4b above	

(1) From Schedule F, line 11, and Schedule K-1 (Form 1065), box 14, code B.  
 (2) From Schedule F, line 36, and Schedule K-1 (Form 1065), box 14, code A — minus the amount you would have entered on line 1b had you not used the optional method.

(3) From Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A; and Schedule K-1 (Form 1065-B), box 9, code J1.

(4) From Schedule C, line 7; Schedule C-EZ, line 1; Schedule K-1 (Form 1065), box 14, code C; and Schedule K-1 (Form 1065-B), box 9, code J2.

**SCHEDULE H**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Household Employment Taxes**  
(For Social Security, Medicare, Withheld Income, and  
Federal Unemployment (FUTA) Taxes)

▶ **Attach to Form 1040, 1040NR, 1040-SS, or 1041.**  
▶ **See separate instructions.**

OMB No. 1545-1971

**2008**

Attachment  
Sequence No. **44**

Name of employer

Social security number

Employer identification number

Richard J Santorum

**A** Did you pay **any one** household employee cash wages of \$1,600 or more in 2008? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions before you answer this question.)

- Yes.** Skip lines B and C and go to line 1.  
 **No.** Go to line B.

**B** Did you withhold federal income tax during 2008 for any household employee?

- Yes.** Skip line C and go to line 5.  
 **No.** Go to line C.

**C** Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2007 or 2008 to **all** household employees? (**Do not** count cash wages paid in 2007 or 2008 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Do not file this schedule.  
 **Yes.** Skip lines 1-9 and go to line 10 on page 2. (Calendar year taxpayers having no household employees in 2008 **do not** have to complete this form for 2008).

**Part I Social Security, Medicare, and Federal Income Taxes**

1	Total cash wages subject to social security taxes (see instructions) .....	1	28,050.
2	Social security taxes. Multiply line 1 by 12.4% (.124) .....	2	3,478.
3	Total cash wages subject to Medicare taxes (see instructions) .....	3	28,050.
4	Medicare taxes. Multiply line 3 by 2.9% (.029) .....	4	813.
5	Federal income tax withheld, if any .....	5	0.
6	Total social security, Medicare, and federal income taxes. Add lines 2, 4, and 5 .....	6	4,291.
7	Advance earned income credit (EIC) payments, if any .....	7	
8	<b>Net taxes</b> (subtract line 7 from line 6) .....	8	4,291.

**9** Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2007 or 2008 to **all** household employees? (**Do not** count cash wages paid in 2007 or 2008 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Include the amount from line 8 above on Form 1040, line 60, and check box **b** on that line. If you are not required to file Form 1040, see the line 9 instructions.  
 **Yes.** Go to line 10 on page 2.

**Part II Federal Unemployment (FUTA) Tax**

	Yes	No
10 Did you pay unemployment contributions to only one state? .....	X	
11 Did you pay all state unemployment contributions for 2008 by April 15, 2009? Fiscal year filers, see instructions .....	X	
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax? .....	X	

**Next:** If you checked the 'Yes' box on all the lines above, complete Section A.  
If you checked the 'No' box on any of the lines above, skip Section A and complete Section B.

**Section A**

13 Name of the state where you paid unemployment contributions .....	VA	
14 State reporting number as shown on state unemployment tax return .....		
15 Contributions paid to your state unemployment fund (see instructions) .....	15	200.
16 Total cash wages subject to FUTA tax (see instructions) .....	16	7,000.
17 <b>FUTA tax.</b> Multiply line 16 by .008. Enter the result here, skip Section B, and go to line 26 .....	17	56.

**Section B**

18 Complete all columns below that apply (if you need more space, see instructions):

(a) Name of state	(b) State reporting number as shown on state unemployment tax return	(c) Taxable wages (as defined in state act)	(d) State experience rate period		(e) State experience rate	(f) Multiply column (c) by .054	(g) Multiply column (c) by column (e)	(h) Subtract column (g) from column (f). If zero or less, enter -0-.	(i) Contributions paid to state unemployment fund
			From	To					
19 Totals .....							19		
20 Add columns (h) and (i) of line 19 .....							20		
21 Total cash wages subject to FUTA tax (see the line 16 instructions) .....							21		
22 Multiply line 21 by 6.2% (.062) .....							22		
23 Multiply line 21 by 5.4% (.054) .....							23		
24 Enter the <b>smaller</b> of line 20 or line 23 .....							24		
25 <b>FUTA tax.</b> Subtract line 24 from line 22. Enter the result here and go to line 26 .....							25		

**Part III Total Household Employment Taxes**

26 Enter the amount from line 8. If you checked the 'Yes' box on line C of page 1, enter -0- .....	26	4,291.
27 Add line 17 (or line 25) and line 26 (see instructions) .....	27	4,347.
28 Are you required to file Form 1040? <input checked="" type="checkbox"/> <b>Yes. Stop.</b> Include the amount from line 27 above on Form 1040, line 60, and check box <b>b</b> on that line. <b>Do not</b> complete Part IV below. <input type="checkbox"/> <b>No.</b> You may have to complete Part IV. See instructions.		

**Part IV Address and Signature** — Complete this part **only** if required. See the line 28 instructions.

Address (number and street) or P.O. box if mail is not delivered to street address

Apt, room, or suite number

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

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature \_\_\_\_\_ Date \_\_\_\_\_

**Paid Preparer's Use Only**

Preparer's signature \_\_\_\_\_

Date \_\_\_\_\_

Check if self-employed

Preparer's SSN or PTIN \_\_\_\_\_

Firm's name (or yours if self-employed), address, and ZIP code \_\_\_\_\_

Self-Prepared

EIN \_\_\_\_\_

Phone no. \_\_\_\_\_

**Depreciation and Amortization  
(Including Information on Listed Property)**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

**Richard J & Karen G Santorum**

Identifying number

Business or activity to which this form relates

**Sch C Consulting**

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	241.
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	250,000.
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
	copier	241.	241.
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	241.
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	241.
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	250,000.
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	241.
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	13	0.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)** (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	0.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.)** (See instructions)

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B – Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

**Section C – Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	241.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete *only* 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

24a Do you have evidence to support the business/investment use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									24b If 'Yes,' is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .....								25			
26 Property used more than 50% in a qualified business use:											
Audi A6	04/01/08	52.18									
27 Property used 50% or less in a qualified business use:											
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....								28			
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....								29			

**Section B – Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a)		(b)		(c)		(d)		(e)		(f)	
	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4	Vehicle 5	Vehicle 6	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles) .....	6,183											
31 Total commuting miles driven during the year .....												
32 Total other personal (noncommuting) miles driven .....	5,667											
33 Total miles driven during the year. Add lines 30 through 32 .....	11,850											
34 Was the vehicle available for personal use during off-duty hours? .....	X											
35 Was the vehicle used primarily by a more than 5% owner or related person? .....	X											
36 Is another vehicle available for personal use? .....	X											

**Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
39 Do you treat all use of vehicles by employees as personal use? .....		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) .....		

**Note:** If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2008 tax year (see instructions):					
43 Amortization of costs that began before your 2008 tax year .....					43
44 Total. Add amounts in column (f). See the instructions for where to report .....					44

