

Label
(See instructions on page 16.)

Use the IRS label.
Otherwise, please print or type.

Presidential Election Campaign

LABEL HERE

For the year Jan. 1-Dec. 31, 2006, or other tax year beginning 2006, ending 20
Your first name and initial
CINDY H
Last name
MCCAIN
If a joint return, spouse's first name and initial
Last name
Home address (number and street). If you have a P.O. box, see page 16.
Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, see page 16.
PHOENIX, AZ 85016
Your social security number
Spouse's social security number
You must enter your SSN(s) above.
Checking a box below will not change your tax or refund.

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. **JOHN MCCAIN, III**
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 (see page 17)

Exemptions

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a
b ☐ Spouse
c Dependents:
(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) Is qualifying child for child tax credit (see page 19)
JAMES MCCAIN **CHILD**
BRIDGET MCCAIN **CHILD** **X**
d Total number of exemptions claimed **3**

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 **299,418.**
8a Taxable interest. Attach Schedule B if required **40,488.**
b Tax-exempt interest. Do not include on line 8a **19,284.**
9a Ordinary dividends. Attach Schedule B if required **283,240.**
b Qualified dividends (see page 23) **163,329.**
10 Taxable refunds, credits, or offsets of state and local income taxes **STMT 1 STMT 3 58,016.**
11 Alimony received
12 Business income or (loss). Attach Schedule C or C-EZ
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here
14 Other gains or (losses). Attach Form 4797
15a IRA distributions **15a** b Taxable amount **15b**
16a Pensions and annuities **16a** b Taxable amount **16b**
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E **4,551,901.**
18 Farm income or (loss). Attach Schedule F
19 Unemployment compensation
20a Social security benefits **20a** b Taxable amount (see page 27) **20b**
21 Other income. List type and amount (see page 29) **0.**
22 Add the amounts in the far right column for lines 7 through 21. This is your total income **6,066,431.**

Adjusted Gross Income

23 Archer MSA deduction. Attach Form 8853
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ
25 Health savings account deduction. Attach Form 8889
26 Moving expenses. Attach Form 3903
27 One-half of self-employment tax. Attach Schedule SE
28 Self-employed SEP, SIMPLE, and qualified plans
29 Self-employed health insurance deduction (see page 29)
30 Penalty on early withdrawal of savings
31a Alimony paid b Recipient's SSN
32 IRA deduction (see page 31)
33 Student loan interest deduction (see page 33)
34 Jury duty pay you gave to your employer
35 Domestic production activities deduction. Attach Form 8903
36 Add lines 23 through 31a and 32 through 35
37 Subtract line 36 from line 22. This is your adjusted gross income **6,066,431.**

Tax and Credits

Standard Deduction for -

• People who checked any box on line 39a or 39b of who can be claimed as a dependent.

• All others:

Single or Married filing separately, \$5,150

Married filing jointly or Qualifying widow(er), \$10,300

Head of household, \$7,550

38	Amount from line 37 (adjusted gross income)	38	6,066,431.
39a	Check <input type="checkbox"/> You were born before January 2, 1942, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1942, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a <input checked="" type="checkbox"/> 39b <input checked="" type="checkbox"/>		
b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 34 and check here <input checked="" type="checkbox"/>		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	569,737.
41	Subtract line 40 from line 38	41	5,496,694.
42	If line 38 is over \$112,875, or you provided housing to a person displaced by Hurricane Katrina, see page 36. Otherwise, multiply \$3,300 by the total number of exemptions claimed on line 6d	42	3,300.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	5,493,394.
44	Tax. Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	1,730,952.
45	Alternative minimum tax. Attach Form 6251	45	0.
46	Add lines 44 and 45	46	1,730,952.
47	Foreign tax credit. Attach Form 1116 if required	47	8,669.
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	Residential energy credits. Attach Form 5695	52	
53	Child tax credit (see page 42). Attach Form 8901 if required	53	
54	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8839 c <input type="checkbox"/> Form 8859	54	
55	Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55	
56	Add lines 47 through 55. These are your total credits	56	8,669.
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	1,722,283.

Other Taxes

58	Self-employment tax. Attach Schedule SE	58	EXEMPT COMMUNITY INCOME
59	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	59	
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
61	Advance earned income credit payments from Form(s) W-2, box 9	61	
62	Household employment taxes. Attach Schedule H	62	* 24,162.
63	Add lines 57 through 62. This is your total tax	63	1,746,445.

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	* 58,815.
65	2006 estimated tax payments and amount applied from 2005 return	65	1,915,239.
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election <input type="checkbox"/> 66b <input type="checkbox"/>		
67	Excess social security and tier 1 RRTA tax withheld (see page 60)	67	
68	Additional child tax credit. Attach Form 8812	68	
69	Amount paid with request for extension to file (see page 60)	69	68,460.
70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70	
71	Credit for federal telephone excise tax paid. Attach Form 8913 if required	71	50.
72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	2,042,564.

Refund

Direct deposit? See page 61 and fill in 74b, 74c, and 74d, or Form 8888.

73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid	73	296,119.
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="checkbox"/> c Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> d Account number <input type="checkbox"/>		
75	Amount of line 73 you want applied to your 2007 estimated tax	75	296,119.

Amount You Owe

76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62	76	
77	Estimated tax penalty (see page 62)	77	0.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 63)? ☐ Yes. Complete the following. ☒ No

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

Sign Here

Joint return? See page 17. Keep a copy for your records.

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.	Signature <input type="checkbox"/>	Date <input type="checkbox"/>	Your occupation	Daytime phone number
	<input type="checkbox"/>	<input type="checkbox"/>	EXECUTIVE	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation		

Paid**Preparer's****Use Only**

610002
11-07-06

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
<input type="checkbox"/>	10/04/07	<input type="checkbox"/>	<input type="checkbox"/>
Firm's name (or yours if self-employed), address, and ZIP code	EIN	Phone no.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	