

For the year Jan. 1-Dec. 31, 2011, or other tax year beginning , 2011, ending , 20 See separate instructions.

Your first name and initial **BARACK H.** Last name **OBAMA** Your social security number

If a joint return, spouse's first name and initial **MICHELLE L.** Last name **OBAMA** Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. **1600 PENNSYLVANIA AVENUE, NW** Apt. no. **▲ 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. **WASHINGTON, DC 20500** 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/county Foreign postal code **X You X Spouse**

**Filing Status** 1 Single 4 Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. 2 **X** Married filing jointly (even if only one had income) 3 Married filing separately. Enter spouse's SSN above and full name here. 5 Qualifying widow(er) with dependent child

**Exemptions** 6a **X** Yourself. If someone can claim you as a dependent, do not check box 6a 2 Boxes checked on 6a and 6b 6b **X** Spouse 2 No. of children on 6c who: 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  
MALIA A OBAMA DAUGHTER X  
NATASHA M OBAMA DAUGHTER X  
If more than four dependents, see instructions and check here **d Total number of exemptions claimed** 4

**Income** 7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 394,821.  
8a Taxable interest. Attach Schedule B if required 8a 10,694.  
8b Tax-exempt interest. Do not include on line 8a 8b  
9a Ordinary dividends. Attach Schedule B if required 9a 3.  
9b Qualified dividends 9b  
10 Taxable refunds, credits, or offsets of state and local income taxes 10  
11 Alimony received 11  
12 Business income or (loss). Attach Schedule C or C-EZ 12 441,369.  
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 13 -3,000.  
14 Other gains or (losses). Attach Form 4797 14  
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 17 698.  
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 22 844,585.

**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 5,911.  
28 Self-employed SEP, SIMPLE, and qualified plans 28 49,000.  
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 54,911.  
37 Subtract line 36 from line 22. This is your adjusted gross income 37 789,674.

110001  
11-07-11



<b>Tax and Credits</b>		38 Amount from line 37 (adjusted gross income) .....	38	789,674.
Standard Deduction for - • People who check any box on line 39a or 39b or who can be claimed as a dependent.  • All others: Single or Married filing separately, \$5,800 Married filing jointly or Qualifying widow(er), \$11,600 Head of household, \$8,500	39a Check <input type="checkbox"/> You were born before January 2, 1947, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1947, <input type="checkbox"/> Blind. Total boxes checked ... 39a <input type="checkbox"/>			
	b If your spouse itemizes on a separate return or you were a dual-status alien, check here ... 39b <input type="checkbox"/>			
	40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) .....	40	278,498.	
	41 Subtract line 40 from line 38 .....	41	511,176.	
	42 Exemptions. Multiply \$3,700 by the number on line 6d .....	42	14,800.	
	43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- .....	43	496,376.	
	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	143,603.	
	45 Alternative minimum tax. Attach Form 6251 .....	45	12,491.	
	46 Add lines 44 and 45 .....	46	156,094.	
	47 Foreign tax credit. Attach Form 1116 if required .....	47	5,841.	
48 Credit for child and dependent care expenses. Attach Form 2441 .....	48			
49 Education credits from Form 8863, line 23 .....	49			
50 Retirement savings contributions credit. Attach Form 8880 .....	50			
51 Child tax credit (see instructions) .....	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	5,841.		
55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- .....	55	150,253.		
<b>Other Taxes</b>		56 Self-employment tax. Attach Schedule SE .....	56	11,821.
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	162,074.		
<b>Payments</b>		62 Federal income tax withheld from Forms W-2 and 1099 .....	62	100,255.
63 2011 estimated tax payments and amount applied from 2010 return .....	63	86,334.		
64a Earned income credit (EIC) .....	64a			
b Nontaxable combat pay election .....	64b			
65 Additional child tax credit. Attach Form 8812 .....	65			
66 American opportunity credit from Form 8863, line 14 .....	66			
67 First-time homebuyer credit from Form 5405, line 10 .....	67			
68 Amount paid with request for extension to file .....	68			
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"/> 8839 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	186,589.		
<b>Refund</b>		73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid .....	73	24,515.
74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ... <input type="checkbox"/>	74a			
75 Amount of line 73 you want applied to your 2012 estimated tax .....	75	24,515.		
<b>Amount You Owe</b>		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	0.		
<b>Third Party Designee</b>				
Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No				
Designee's name <b>MICHAEL S. SOLHEIM, CPA</b>		Phone ( )		Personal identification number (PIN)
<b>Sign Here</b>				
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 <b>4-11-12</b>	Your occupation <b>US PRESIDENT</b>	Daytime phone number
Spouse's signature. If a joint return, both must sign. 		Date <b>04-09-12</b>	Spouse's occupation <b>US FIRST LADY</b>	If the IRS sent you an Identity Protection PIN, enter it here
Print/Type preparer's name <b>MICHAEL S. SOLHEIM, CPA</b>		Preparer's signature 	Date <b>4/9/12</b>	Check <input type="checkbox"/> self-employed <input type="checkbox"/> PTIN
Firm's name <b>WINEBERG SOLHEIM HOWELL &amp; SHAIN, PC</b>		Firm's EIN		Phone no.
Firm's address <b>180 N LASALLE ST, STE 2200 CHICAGO, IL 60601</b>				



Form **2210**Department of the Treasury  
Internal Revenue Service**Underpayment of  
Estimated Tax by Individuals, Estates, and Trusts**

▶ See separate instructions.

▶ Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

OMB No. 1545-0140

**2011**Attachment  
Sequence No. **06**

Name(s) shown on tax return

Identifying number

**BARACK H. & MICHELLE L. OBAMA****Do You Have To File Form 2210?**

Complete lines 1 through 7 below. Is line 7 less than \$1,000?	Yes	Do not file Form 2210. You do not owe a penalty.
No		
Complete lines 8 and 9 below. Is line 6 equal to or more than line 9?	Yes	You do not owe a penalty. Do not file Form 2210 (but if box E in Part II applies, you must file page 1 of Form 2210).
No		
You may owe a penalty. Does any box in Part II below apply?	Yes	You must file Form 2210. Does box B, C, or D in Part II apply?
No		
	No	You are not required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax return, but file only page 1 of Form 2210.
	Yes	You must figure your penalty.

**Part I Required Annual Payment**

1	Enter your 2011 tax after credits from Form 1040, line 55 (see instructions if not filing Form 1040)	1	150,253.
2	Other taxes, including self-employment tax (see instructions)	2	11,821.
3	Refundable credits. Enter the total of your earned income credit, additional child tax credit, American opportunity credit (Form 8863, line 14), first-time homebuyer credit (Form 5405, line 10), credit for federal tax paid on fuels, adoption credit, refundable credit for prior year minimum tax (Form 8801, line 27), health coverage tax credit, and credit determined under section 1341 (a)(5)(B) (see instructions)	3	
4	Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop; you do not owe a penalty. Do not file Form 2210	4	162,074.
5	Multiply line 4 by 90% (.90)	5	145,867.
6	Withholding taxes. Do not include estimated tax payments (see instructions)	6	100,255.
7	Subtract line 6 from line 4. If less than \$1,000, stop; you do not owe a penalty. Do not file Form 2210	7	61,819.
8	Maximum required annual payment based on prior year's tax (see instructions)	8	499,147.
9	Required annual payment. Enter the smaller of line 5 or line 8	9	145,867.

Next: Is line 9 more than line 6?

No. You do not owe a penalty. Do not file Form 2210 unless box E below applies.

☒ Yes. You may owe a penalty, but do not file Form 2210 unless one or more boxes in Part II below applies.

• If box B, C, or D applies, you must figure your penalty and file Form 2210.

• If box A or E applies (but not B, C, or D) file only page 1 of Form 2210. You are not required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or IV as a worksheet and enter your penalty on your tax return, but file only page 1 of Form 2210.

**Part II Reasons for Filing.** Check applicable boxes. If none apply, do not file Form 2210.

- A You request a waiver (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you are not required to figure your penalty.
- B You request a waiver (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C ☒ Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method**. You must figure the penalty using Schedule AI and file Form 2210.
- D Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E You filed or are filing a joint return for either 2010 or 2011, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you are not required to figure your penalty (unless box B, C, or D applies).

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **2210** (2011)

**Part IV Regular Method** (See the instructions if you are filing Form 1040NR or 1040NR-EZ.)

<b>Section A - Figure Your Underpayment</b>		<b>Payment Due Dates</b>			
		(a) 4/15/11	(b) 6/15/11	(c) 9/15/11	(d) 1/15/12
<b>18</b>	Required installments. If box C in Part II applies, enter the amounts from Schedule AI, line 25. Otherwise, enter 25% (.25) of line 9, Form 2210, in each column	17,748.	16,164.	72,034.	39,921.
<b>19</b>	Estimated tax paid and tax withheld. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 18 for all payment periods, stop here; you do not owe a penalty. Do not file Form 2210 unless you checked a box in Part II	43,398.	28,064.	90,064.	25,063.
<i>Complete lines 20 through 26 of one column before going to line 20 of the next column.</i>					
<b>20</b>	Enter the amount, if any, from line 26 in the previous column		25,650.	37,550.	55,580.
<b>21</b>	Add lines 19 and 20		53,714.	127,614.	80,643.
<b>22</b>	Add the amounts on lines 24 and 25 in the previous column				
<b>23</b>	Subtract line 22 from line 21. If zero or less, enter -0-. For column (a) only, enter the amount from line 19	43,398.	53,714.	127,614.	80,643.
<b>24</b>	If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0-		0.	0.	
<b>25</b>	Underpayment. If line 18 is equal to or more than line 23, subtract line 23 from line 18. Then go to line 20 of the next column. Otherwise, go to line 26				
<b>26</b>	Overpayment. If line 23 is more than line 18, subtract line 18 from line 23. Then go to line 20 of the next column	25,650.	37,550.	55,580.	
<b>Section B - Figure the Penalty</b> (Use the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty in the instructions.)					
<b>27</b>	Penalty. Enter the total penalty from line 14 of the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty. Also include this amount on Form 1040, line 77; Form 1040A, line 46; Form 1040NR, line 74; Form 1040NR-EZ, line 26; or Form 1041, line 26. Do not file Form 2210 unless you checked a box in Part II				0.

Form 2210 (2011)



**Schedule AI - Annualized Income Installment Method** (See the instructions.)

Estates and trusts, **do not** use the period ending dates shown to the right. Instead, use the following: 2/28/11, 4/30/11, 7/31/11, and 11/30/11.

(a)	(b)	(c)	(d)
1/1/11 - 3/31/11	1/1/11 - 5/31/11	1/1/11 - 8/31/11	1/1/11 - 12/31/11

**Part I Annualized Income Installments**

1 Enter your adjusted gross income for each period (see instructions). (Estates and trusts, enter your taxable income without your exemption for each period)	1	141,100.	232,570.	520,373.	789,674.
2 Annualization amounts. (Estates and trusts, see instructions)	2	4	2.4	1.5	1
3 Annualized income. Multiply line 1 by line 2	3	564,400.	558,168.	780,560.	789,674.
4 If you itemize, enter itemized deductions for the period shown in each column. All others enter -0-, and skip to line 7. <b>Exception:</b> Estates and trusts, skip to line 9 and enter amount from line 3	4	69,625.	116,041.	185,666.	278,498.
5 Annualization amounts	5	4	2.4	1.5	1
6 Multiply line 4 by line 5	6	278,500.	278,498.	278,499.	278,498.
7 In each column, enter the full amount of your standard deduction from Form 1040, line 40, or Form 1040A, line 24. (Form 1040NR or 1040NR-EZ filers, enter -0-. <b>Exception:</b> Indian students and business apprentices, see instructions)	7	11,600.	11,600.	11,600.	11,600.
8 Enter the larger of line 6 or line 7	8	278,500.	278,498.	278,499.	278,498.
9 Subtract line 8 from line 3	9	285,900.	279,670.	502,061.	511,176.
10 In each column, multiply \$3,700 by the total number of exemptions claimed. (Estates, trusts, and Form 1040NR or 1040NR-EZ filers, see instructions)	10	14,800.	14,800.	14,800.	14,800.
11 Subtract line 10 from line 9. If zero or less, enter -0-	11	271,100.	264,870.	487,261.	496,376.
12 Figure your tax on the amount on line 11 (see instructions)	12	66,918.	64,862.	140,413.	143,603.
13 Self-employment tax from line 34 (complete Part II below)	13	5,310.	3,847.	9,894.	11,821.
14 Enter other taxes for each payment period (see instructions)	14	12,491.	12,491.	12,491.	12,491.
15 Total tax. Add lines 12, 13, and 14	15	84,719.	81,200.	162,798.	167,915.
16 For each period, enter the same type of credits as allowed on Form 2210, Part I, lines 1 and 3 (see instructions)	16	5,841.	5,841.	5,841.	5,841.
17 Subtract line 16 from line 15. If zero or less, enter -0-	17	78,878.	75,359.	156,957.	162,074.
18 Applicable percentage	18	22.5%	45%	67.5%	90%
19 Multiply line 17 by line 18	19	17,748.	33,912.	105,946.	145,867.
<i>Complete lines 20-25 of one column before going to line 20 of the next column.</i>					
20 Enter the total of the amounts in all previous columns of line 25	20		17,748.	33,912.	105,946.
21 Subtract line 20 from line 19. If zero or less, enter -0-	21	17,748.	16,164.	72,034.	39,921.
22 Enter 25% (.25) of line 9 on page 1 of Form 2210 in each column	22	36,466.	36,467.	36,467.	36,467.
23 Subtract line 25 of the previous column from line 24 of that column	23		18,718.	39,021.	3,454.
24 Add lines 22 and 23	24	36,466.	55,185.	75,488.	39,921.
25 Enter the smaller of line 21 or line 24 here and on Form 2210, Part IV, line 18	25	17,748.	16,164.	72,034.	39,921.

**Part II Annualized Self-Employment Tax** (Form 1040 and Form 1040NR filers only)

26 Net earnings from self-employment for the period (see instructions)	26	45,772.	55,269.	227,448.	407,604.
27 Prorated social security tax limit	27	\$26,700	\$44,500	\$71,200	\$106,800
28 Enter actual wages for the period subject to social security tax or the 4.2% portion of the 5.65% railroad retirement (tier 1) tax. <b>Exception:</b> If you filed Form 4137 or Form 8919, see instructions	28	26,700.	44,500.	71,200.	106,800.
29 Subtract line 28 from line 27. If zero or less, enter -0-	29	0.	0.	0.	0.
30 Annualization amounts	30	0.416	0.2496	0.156	0.104
31 Multiply line 30 by the smaller of line 26 or line 29	31	0.	0.	0.	0.
32 Annualization amounts	32	0.116	0.0696	0.0435	0.029
33 Multiply line 26 by line 32	33	5,310.	3,847.	9,894.	11,821.
34 Add lines 31 and 33. Enter here and on line 13 above	34	5,310.	3,847.	9,894.	11,821.

**SCHEDULE A**  
**(Form 1040)**

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

**Itemized Deductions**

▶ Attach to Form 1040. ▶ See Instructions for Schedule A (Form 1040).

OMB No. 1545-0074

**2011**

Attachment  
Sequence No. **07**

Your social security number

**BARACK H. & MICHELLE L. OBAMA**

<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	2	
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>	5 State and local (check only one box):	5	31,941.
	a <input checked="" type="checkbox"/> Income taxes, or		
	b General sales taxes	6	26,863.
6	Real estate taxes (see instructions)	7	
7	Personal property taxes	8	
8	Other taxes. List type and amount ▶	9	58,804.
9	Add lines 5 through 8		
<b>Interest You Paid</b>	10 Home mortgage interest and points reported to you on Form 1098	10	47,564.
	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 no., and address ▶	11	
	12 Points not reported to you on Form 1098. See instructions for special rules	12	
	13 Mortgage insurance premiums (see instructions)	13	
	14 Investment interest. Attach Form 4952 if required. (See instructions.)	14	
	15 Add lines 10 through 14	15	47,564.
<b>Gifts to Charity</b>	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	172,130. STMT 3
	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	
	18 Carryover from prior year	18	
	19 Add lines 16 through 18	19	172,130.
<b>Casualty and Theft Losses</b>	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	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	
	23 Other expenses - investment, safe deposit box, etc. List type and amount ▶	23	
	24 Add lines 21 through 23	24	
	25 Enter amount from Form 1040, line 38	25	
	26 Multiply line 25 by 2% (.02)	26	
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	
<b>Other Miscellaneous Deductions</b>	28 Other - from list in instructions. List type and amount ▶	28	
<b>Total Itemized Deductions</b>	29 Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40	29	278,498.
	30 If you elect to itemize deductions even though they are less than your standard deduction, check here ▶		



**SCHEDULE B**  
(Form 1040A or 1040)

Department of the Treasury  
Internal Revenue Service (99)

**Interest and Ordinary Dividends**

▶ Attach to Form 1040A or 1040.

▶ See instructions.

OMB No. 1545-0074

**2011**

Attachment  
Sequence No. 08

Your social security number

**BARACK H. & MICHELLE L. OBAMA**

**Part I  
Interest**

- 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 instructions and list this interest first. Also, show that buyer's social security number and address ▶

NORTHERN TRUST SECURITIES US GOVT INTEREST

JP MORGAN

BOND PREMIUM AMORTIZATION

NORTHERN TRUST SECURITIES US GOVT INTEREST PAID

**Note.** If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

Amount

16,640.

71.

-5,546.

-471.

- 2 Add the amounts on line 1

- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989.

Attach Form 8815

- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶

**Note.** If line 4 is over \$1,500, you must complete Part III.

10,694.

10,694.

**Part II  
Ordinary  
Dividends**

- 5 List name of payer ▶

NORTHERN TRUST SECURITIES

**Note.** If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

Amount

3.

- 6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶

**Note.** If line 6 is over \$1,500, you must complete Part III.

3.

**Part III  
Foreign  
Accounts  
and  
Trusts**

You must complete this part if you (a) had over \$1,500 of taxable 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.

- 7a At any time during 2011, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions

If "Yes," are you required to file Form TD F 90-22.1 to report that financial interest or signature authority? See Form TD F 90-22.1 and its instructions for filing requirements and exceptions to those requirements

- b If you are required to file Form TD F 90-22.1, enter the name of the foreign country where the financial account is located ▶

- 8 During 2011, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

If "Yes," you may have to file Form 3520. See instructions

Yes

No

X

X

127501  
11-02-11

LHA For Paperwork Reduction Act Notice, see separate instructions.

Schedule B (Form 1040A or 1040) 2011

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

Department of the Treasury  
Internal Revenue Service (99)

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

► For information on Schedule C and its instructions, go to [www.irs.gov/schedulec](http://www.irs.gov/schedulec).  
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

**2011**

Attachment  
Sequence No. **09**

Name of proprietor

**BARACK H. OBAMA**

Social security number (SSN)

A Principal business or profession, including product or service (see instructions)

**AUTHOR**

B Enter code from instructions

► **711510**

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

**BARACK H. OBAMA**

D Employer ID number (EIN), (see instr.)

E Business address (including suite or room no.) ►

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

F Accounting method: (1) ☒ Cash (2) Accrual (3) Other (specify) ►

G Did you "materially participate" in the operation of this business during 2011? If "No," see instructions for limit on losses ☒ Yes ☐ No

H If you started or acquired this business during 2011, check here ►

I Did you make any payments in 2011 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

J If "Yes," did you or will you file all required Forms 1099? ☐ Yes ☒ No

**Part I Income**

1a	Merchant card and third party payments. For 2011, enter -0-	1a	0.
b	Gross receipts or sales not entered on line 1a (see instructions)	1b	
c	Income reported to you on Form W-2 if the "Statutory Employee" box on that form was checked. Caution. See instr. before completing this line	1c	
d	Total gross receipts. Add lines 1a through 1c	1d	
2	Returns and allowances plus any other adjustments (see instructions)	2	
3	Subtract line 2 from line 1d	3	
4	Cost of goods sold (from line 42)	4	
5	Gross profit. Subtract line 4 from line 3	5	
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) <b>SEE STATEMENT 4</b>	6	487,928.
7	Gross income. Add lines 5 and 6	7	487,928.

**Part II Expenses**

Enter expenses for business use of your home only on line 30.

8	Advertising	8		18	Office expense	18	628.
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10	45,931.	20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depreciation	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	
16	Interest:			24	Travel, meals, and entertainment:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals and entertainment (see instructions)	24b	
17	Legal and professional services	17		25	Utilities	25	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28		26	Wages (less employment credits)	26	
29	Tentative profit or (loss). Subtract line 28 from line 7	29	46,559.	27 a	Other expenses (from line 48)	27a	
30	Expenses for business use of your home. Attach Form 8829. Do not report such expenses elsewhere	30	441,369.	b	Reserved for future use	27b	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. If you entered an amount on line 1c, see instr. Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	441,369.				
32	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 Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. If you entered an amount on line 1c, see the instructions for line 31. Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.			32a	All investment is at risk.		
				32b	Some investment is not at risk.		

LHA For Paperwork Reduction Act Notice, see separate instructions.

Schedule C (Form 1040) 2011



**SCHEDULE D**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)  
Name(s) shown on return**Capital Gains and Losses**▶ Attach to Form 1040 or Form 1040NR. ▶ See Instructions for Schedule D (Form 1040).  
▶ Use Form 8949 to list your transactions for lines 1, 2, 3, 8, 9, and 10.

OMB No. 1545-0074

**2011**  
Attachment  
Sequence No. **12**

Your social security number

**BARACK H. & MICHELLE L. OBAMA****Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**Complete Form 8949 before completing line 1, 2, or 3.  
This form may be easier to complete if you round off  
cents to whole dollars.

	(e) Sales price from Form(s) 8949, line 2, column (e)	(f) Cost or other basis from Form(s) 8949, line 2, column (f)	(g) Adjustments to gain or loss from Form(s) 8949, line 2, column (g)	(h) Gain or (loss) Combine columns (e), (f), and (g)
1 Short-term totals from all Forms 8949 with box A checked in Part I		( )		
2 Short-term totals from all Forms 8949 with box B checked in Part I	199,870.	( 199,494.)		376.
3 Short-term totals from all Forms 8949 with box C checked in Part I	2,768,000.	( 2,768,000.)		0.
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions			6	( )
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2			7	376.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**Complete Form 8949 before completing line 8, 9, or 10.  
This form may be easier to complete if you round off  
cents to whole dollars.

	(e) Sales price from Form(s) 8949, line 4, column (e)	(f) Cost or other basis from Form(s) 8949, line 4, column (f)	(g) Adjustments to gain or loss from Form(s) 8949, line 4, column (g)	(h) Gain or (loss) Combine columns (e), (f), and (g)
8 Long-term totals from all Forms 8949 with box A checked in Part II		( )		
9 Long-term totals from all Forms 8949 with box B checked in Part II		( )		
10 Long-term totals from all Forms 8949 with box C checked in Part II		( )		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions			13	
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions			14	( 119,527.)
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (h). Then go to Part III on page 2			15	<119,527.>

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2011

**Part III Summary**

<b>16</b> Combine lines 7 and 15 and enter the result .....	<b>16</b>	<119,151.>
<ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.</li> </ul>		
<b>17</b> Are lines 15 and 16 <b>both</b> gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22.		
<b>18</b> Enter the amount, if any, from line 7 of the <b>28% Rate Gain Worksheet</b> in the instructions .....	<b>18</b>	
<b>19</b> Enter the amount, if any, from line 18 of the <b>Unrecaptured Section 1250 Gain Worksheet</b> in the instructions .....	<b>19</b>	
<b>20</b> Are lines 18 and 19 <b>both</b> zero or blank? Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <b>Do not</b> complete lines 21 and 22 below. No. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Do not</b> complete lines 21 and 22 below.		
<b>21</b> If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:		
<ul style="list-style-type: none"> <li>• The loss on line 16 or</li> <li>• (\$3,000), or if married filing separately, (\$1,500)</li> </ul>	} <b>SEE STATEMENT 7</b>	<b>21</b> ( <b>3,000.</b> )
Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
<b>22</b> Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <input checked="" type="checkbox"/> <b>No.</b> Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2011



### Sales and Other Dispositions of Capital Assets

▶ See Instructions for Schedule D (Form 1040).

▶ For more information about Form 8949, see [www.irs.gov/form8949](http://www.irs.gov/form8949)  
▶ Attach to Schedule D to list your transactions for lines 1, 2, 3, 8, 9, and 10.

OMB No. 1545-0074

2011

Attachment  
Sequence No. 12A

Name(s) shown on return

Your social security number

BARACK H. & MICHELLE L. OBAMA

Part I	Short-Term Capital Gains and Losses - Assets Held One Year or Less
--------	--

**Note:** You must check one of the boxes below. Complete a *separate* Form 8949, page 1, for each box that is checked.

\* **Caution.** Do not complete column (b) or (g) until you have read the instructions for those columns (see the Instructions for Schedule D (Form 1040)). Columns (b) and (g) do not apply for most transactions and should generally be left blank.

(A) Short-term transactions reported on Form 1099-B with basis reported to the IRS

**X (B)** Short-term transactions reported on Form 1099-B but basis not reported to the IRS

**(C)** Short-term transactions for which you cannot check box A or B

[illegible]

**2 Totals.** Add the amounts in columns (e) and (f). Also, combine the amounts in column (g). Enter here and include on Schedule D, **line 1** (if **box A** above is checked), **line 2** (if **box B** above is checked), or **line 3** (if **box C** above is checked) .....

2

199,870.

199,494.

### Sales and Other Dispositions of Capital Assets

▶ See Instructions for Schedule D (Form 1040).

► For more information about Form 8949, see [www.irs.gov/form8949](http://www.irs.gov/form8949)

▶ Attach to Schedule D to list your transactions for lines 1, 2, 3, 8, 9, and 10.

OMB No. 1545-0074

2011

Attachment  
Sequence No. **12A**

Name(s) shown on return

**Your social security number**

BARACK H. & MICHELLE L. OBAMA

Part I	Short-Term Capital Gains and Losses - Assets Held One Year or Less
--------	--

**Note:** You must check one of the boxes below. Complete a *separate* Form 8949, page 1, for each box that is checked.

\* **Caution.** Do not complete column (b) or (g) until you have read the instructions for those columns (see the Instructions for Schedule D (Form 1040)).

Columns (b) and (g) do not apply for most transactions and should generally be left blank.

(A) Short-term transactions reported on Form 1099-B with basis reported to the IRS

(B) Short-term transactions reported on Form 1099-B but basis not reported to the IRS

X (C) Short-term transactions for which you cannot check box A or B

[illegible]

**2 Totals.** Add the amounts in columns (e) and (f). Also, combine the amounts in column (g). Enter here and include on Schedule D, line 1 (if **box A** above is checked), line 2 (if **box B** above is checked), or line 3 (if **box C** above is checked) .....

2

2768000.

2768000.



**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 separate instructions.

OMB No. 1545-0074

**2011**

Attachment  
Sequence No. 13

Name(s) shown on return

Your social security number

**BARACK H. & MICHELLE L. OBAMA**

A Did you make any payments in 2011 that would require you to file Form(s) 1099? (see instructions)

Yes ☐ No ☒

B If "Yes," did you or will you file all required Forms 1099?

Yes ☐ No ☐

**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.

Caution. For each rental property listed on line 1, check the box in the last column only if you owned that property as a member of a qualified joint venture (QJV) reporting income not subject to self-employment tax.

1	Physical address of each property-street, city, state, ZIP	Type-from list below	2	For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.	Fair Rental Days	Personal Use Days	QJV
A		6			A		
B					B		
C					C		

**Type of Property:**

- 1 Single Family Residence      3 Vacation/Short-Term Rental      5 Land      7 Self-Rental  
2 Multi-Family Residence      4 Commercial      6 Royalties      8 Other (describe)

**Income:**

		Properties		
		A	B	C
3a	Merchant card and third party payments. For 2011, enter -0-	0.		
b	Payments not reported to you on line 3a	698.		
4	Total not including amounts on line 3a that are not income (see instructions)	698.		

**Expenses:**

5	Advertising	5		
6	Auto and travel (see instructions)	6		
7	Cleaning and maintenance	7		
8	Commissions	8		
9	Insurance	9		
10	Legal and other professional fees	10		
11	Management fees	11		
12	Mortgage interest paid to banks, etc. (see instructions)	12		
13	Other interest	13		
14	Repairs	14		
15	Supplies	15		
16	Taxes	16		
17	Utilities	17		
18	Depreciation expense or depletion	18		
19	Other (list) ▶	19		
20	Total expenses. Add lines 5 through 19	20		
21	Subtract line 20 from line 4. If result is a (loss), see instructions to find out if you must file Form 6198	21	698.	
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		

23a	Total of all amounts reported on line 3a for all rental properties	23a	
b	Total of all amounts reported on line 3a for all royalty properties	23b	
c	Total of all amounts reported on line 4 for all rental properties	23c	
d	Total of all amounts reported on line 4 for all royalty properties	23d	698.
e	Total of all amounts reported on line 12 for all properties	23e	
f	Total of all amounts reported on line 18 for all properties	23f	
g	Total of all amounts reported on line 20 for all properties	23g	
24	Income. Add positive amounts shown on line 21. Do not include any losses	24	698.
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	
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	26	698.

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

Social security number of  
person with self-employment  
income ▶

BARACK H. OBAMA

**Section B - Long Schedule SE****Part I Self-Employment Tax**

Note. If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I		▶	
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note. Skip lines 1a and 1b if you use the farm optional method (see instructions)	1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Y	1b	
2	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. Note. Skip this line if you use the nonfarm optional method (see instructions)	2	441,369.
3	Combine lines 1a, 1b, and 2	3	441,369.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3. Note. If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	407,604.
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
c	Combine lines 4a and 4b. If less than \$400, stop; you do not owe self-employment tax. Exception. If less than \$400 and you had church employee income, enter -0- and continue	4c	407,604.
5a	Enter your church employee income from Form W-2. See instructions for definition of church employee income	5a	
b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	5b	
6	Add lines 4c and 5b	6	407,604.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 4.2% portion of the 5.65% railroad retirement (tier 1) tax for 2011	7	106,800.00
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$106,800 or more, skip lines 8b through 10, and go to line 11	8a	106,800.
b	Unreported tips subject to social security tax (from Form 4137, line 10)	8b	
c	Wages subject to social security tax (from Form 8919, line 10)	8c	
d	Add lines 8a, 8b, and 8c	8d	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	
10	Multiply the smaller of line 6 or line 9 by 10.4% (.104)	10	
11	Multiply line 6 by 2.9% (.029)	11	11,821.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 56, or Form 1040NR, line 54	12	11,821.
13	Deduction for employer-equivalent portion of self-employment tax. Add the two following amounts. • 59.6% (.596) of line 10. • One-half of line 11.	13	5,911.

Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27

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

Farm Optional Method. You may use this method only if (a) your gross farm income <sup>1</sup> was not more than \$6,720, or (b) your net farm profits <sup>2</sup> were less than \$4,851.			
14	Maximum income for optional methods	14	4,480.00
15	Enter the smaller of: two-thirds (2/3) of gross farm income <sup>1</sup> (not less than zero) or \$4,480. Also include this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits <sup>3</sup> were less than \$4,851 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.			
Caution. You may use this method no more than five times.			
16	Subtract line 15 from line 14	16	
17	Enter the smaller 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	17	

<sup>1</sup> From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.<sup>2</sup> From Sch. F, line 34, and Sch. 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.<sup>3</sup> From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.<sup>4</sup> From Sch. C, line 7; Sch. C-EZ, line 1d; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.



# Foreign Tax Credit

(Individual, Estate, or Trust)  
▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

**2011**

Attachment  
Sequence No. 19

Name

Identifying number as shown on page 1 of your tax return

**BARACK H. & MICHELLE L. OBAMA**

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Passive category income      c Section 901(j) income      e Lump-sum distributions  
b ☒ General category income      d Certain income re-sourced by treaty

f Resident of (name of country) ▶ **UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

**Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)**

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
<b>9</b> Enter the name of the foreign country or U.S. possession	<b>OTHER COUNTRIES</b>			
<b>1a</b> Gross income from sources within country shown above and of the type checked above:	269,710.			1a 269,710.
<b>b</b> Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶				
<b>Deductions and losses (Caution: See instructions):</b>				
<b>2</b> Expenses definitely related to the income on line 1a (attach statement) <b>SEE STATEMENT 9</b>	46,559.			
<b>3</b> Pro rata share of other deductions not definitely related:				
<b>a</b> Certain itemized deductions or standard deduction	58,804.			
<b>b</b> Other deductions (attach statement)				
<b>c</b> Add lines 3a and 3b	58,804.			
<b>d</b> Gross foreign source income	269,710.			
<b>e</b> Gross income from all sources	894,520.			
<b>f</b> Divide line 3d by line 3e	.301514			
<b>g</b> Multiply line 3c by line 3f	17,730.			
<b>4</b> Pro rata share of interest expense:				
<b>a</b> Home mortgage interest (use worksheet on page 14 of the instructions)	14,341.			
<b>b</b> Other interest expense				
<b>5</b> Losses from foreign sources				
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5	78,630.			6 78,630.
<b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 191,080.

**Part II Foreign Taxes Paid or Accrued**

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued							(s) Total foreign taxes paid or accrued (add cols. (o) through (r))	
		In foreign currency			In U.S. dollars					
		Taxes withheld at source on:			Taxes withheld at source on:			(r) Other foreign taxes paid or accrued		
		(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends			(p) Rents and royalties
A								5,841.		5,841.
B										
C										
<b>8</b> Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶										8 5,841.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2011)

**Part III Figuring the Credit**

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	5,841.	
10 Carryback or carryover (attach detailed computation)	10		
11 Add lines 9 and 10	11	5,841.	
12 Reduction in foreign taxes	12		
13 Taxes reclassified under high tax kickout	13		
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		5,841.
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	191,080.	
16 Adjustments to line 15	16		
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	191,080.	
18 Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption <i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>	18	511,176.	
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		.373805
20 Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 <i>Caution: If you are completing line 20 for separate category (lump-sum distributions), see instructions.</i>	20		143,603.
21 Multiply line 20 by line 19 (maximum amount of credit)	21		53,680.
22 Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22		5,841.

**Part IV Summary of Credits From Separate Parts III**

23 Credit for taxes on passive category income	23		
24 Credit for taxes on general category income	24		
25 Credit for taxes on certain income re-sourced by treaty	25		
26 Credit for taxes on lump-sum distributions	26		
27 Add lines 23 through 26	27		
28 Enter the smaller of line 20 or line 27	28		5,841.
29 Reduction of credit for international boycott operations	29		
30 Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 47; Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30		5,841.

Form 1116 (2011)



Form **6251**Department of the Treasury  
Internal Revenue Service (99)**Alternative Minimum Tax - Individuals**

▶ Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

**2011**Attachment  
Sequence No. 32

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

**BARACK H. & MICHELLE L. OBAMA****Part I Alternative Minimum Taxable Income**

1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	511,176.
2 Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3 Taxes from Schedule A (Form 1040), line 9	3	58,804.
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4	
5 Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6 Skip this line. It is reserved for future use	6	
7 Tax refund from Form 1040, line 10 or line 21	7	
8 Investment interest expense (difference between regular tax and AMT)	8	
9 Depletion (difference between regular tax and AMT)	9	
10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11 Alternative tax net operating loss deduction	11	
12 Interest from specified private activity bonds exempt from the regular tax	12	
13 Qualified small business stock (7% of gain excluded under section 1202)	13	
14 Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17 Disposition of property (difference between AMT and regular tax gain or loss)	17	
18 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19 Passive activities (difference between AMT and regular tax income or loss)	19	
20 Loss limitations (difference between AMT and regular tax income or loss)	20	
21 Circulation costs (difference between regular tax and AMT)	21	
22 Long-term contracts (difference between AMT and regular tax income)	22	
23 Mining costs (difference between regular tax and AMT)	23	
24 Research and experimental costs (difference between regular tax and AMT)	24	
25 Income from certain installment sales before January 1, 1987	25	
26 Intangible drilling costs preference	26	
27 Other adjustments, including income-based related adjustments	27	
28 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$223,900, see instructions.)	28	569,980.

**Part II Alternative Minimum Tax (AMT)**

29 Exemption. (If you were under age 24 at the end of 2011, see instructions.) IF your filing status is ... AND line 28 is not over ... THEN enter on line 29 ... Single or head of household ... \$112,500 ... \$48,450 Married filing jointly or qualifying widow(er) ... 150,000 ... 74,450 Married filing separately ... 75,000 ... 37,225 If line 28 is over the amount shown above for your filing status, see instructions.	29	0.
30 Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30	569,980.
31 • If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 54 here. • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	31	156,094.
32 Alternative minimum tax foreign tax credit (see instructions)	32	5,841.
33 Tentative minimum tax. Subtract line 32 from line 31	33	150,253.
34 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	34	137,762.
35 AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	12,491.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 6251 (2011)

**Part III Tax Computation Using Maximum Capital Gains Rates**

Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in the instructions.

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for this line	36
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39
40	Enter the <b>smaller</b> of line 36 or line 39	40
41	Subtract line 40 from line 36	41
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	42
43	Enter: <ul style="list-style-type: none"> <li>• \$69,000 if married filing jointly or qualifying widow(er),</li> <li>• \$34,500 if single or married filing separately, or</li> <li>• \$46,250 if head of household.</li> </ul>	43
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	44
45	Subtract line 44 from line 43. If zero or less, enter -0-	45
46	Enter the <b>smaller</b> of line 36 or line 37	46
47	Enter the <b>smaller</b> of line 45 or line 46	47
48	Subtract line 47 from line 46	48
49	Multiply line 48 by 15% (.15)	49
If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50.		
50	Subtract line 46 from line 40	50
51	Multiply line 50 by 25% (.25)	51
52	Add lines 42, 49, and 51	52
53	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	53
54	Enter the <b>smaller</b> of line 52 or line 53 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31	54



**ALTERNATIVE MINIMUM TAX  
Foreign Tax Credit**

(Individual, Estate, or Trust)  
▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

**2011**

Attachment  
Sequence No. 19

Name

Identifying number as shown on page 1 of your tax return

**BARACK H. & MICHELLE L. OBAMA**

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Passive category income      c Section 901(j) income      e Lump-sum distributions  
b ☒ General category income      d Certain income re-sourced by treaty

f Resident of (name of country) ▶ **UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

**Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)**

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
<b>1</b> Enter the name of the foreign country or U.S. possession ▶ <b>OTHER COUNTRIES</b>				
<b>1a</b> Gross income from sources within country shown above and of the type checked above:	269,710.			<b>1a</b> 269,710.
<b>b</b> Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶				
<b>Deductions and losses (Caution: See instructions):</b>				
<b>2</b> Expenses definitely related to the income on line 1a (attach statement)	46,559.			
<b>3</b> Pro rata share of other deductions not definitely related:				
<b>a</b> Certain itemized deductions or standard deduction				
<b>b</b> Other deductions (attach statement)				
<b>c</b> Add lines 3a and 3b				
<b>d</b> Gross foreign source income	269,710.			
<b>e</b> Gross income from all sources	894,520.			
<b>f</b> Divide line 3d by line 3e	.301514			
<b>g</b> Multiply line 3c by line 3f				
<b>4</b> Pro rata share of interest expense:				
<b>a</b> Home mortgage interest (use worksheet on page 14 of the instructions)	14,341.			
<b>b</b> Other interest expense				
<b>5</b> Losses from foreign sources				
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5	60,900.			<b>6</b> 60,900.
<b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				<b>7</b> 208,810.

**Part II Foreign Taxes Paid or Accrued**

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:				Taxes withheld at source on:				
		(j) Dividends	(k) Rents and royalties	(l) Interest	(m) Other foreign taxes paid or accrued	(n) Dividends	(o) Rents and royalties	(p) Interest	(q) Other foreign taxes paid or accrued	
<b>A</b>						5,841.				
<b>B</b>										
<b>C</b>										
<b>8</b>		Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶								<b>8</b> 5,841.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2011)

**ALTERNATIVE MINIMUM TAX**

Form 1116 (2011) **BARACK H. & MICHELLE L. OBAMA**

Page 2

**Part III Figuring the Credit**

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	5,841.	
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11	5,841.	
12	Reduction in foreign taxes	12		
13	Taxes reclassified under high tax kickout	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	5,841.	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	208,810.	
16	Adjustments to line 15	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	208,810.	
18	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption <i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>	18	569,980.	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	.366346	
20	Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 <i>Caution: If you are completing line 20 for separate category (lump-sum distributions), see instructions.</i>	20	156,094.	
21	Multiply line 20 by line 19 (maximum amount of credit)	21	57,184.	
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22	5,841.	

**Part IV Summary of Credits From Separate Parts III**

23	Credit for taxes on passive category income	23		
24	Credit for taxes on general category income	24		
25	Credit for taxes on certain income re-sourced by treaty	25		
26	Credit for taxes on lump-sum distributions	26		
27	Add lines 23 through 26	27		
28	Enter the smaller of line 20 or line 27	28	5,841.	
29	Reduction of credit for international boycott operations	29		
30	Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 47; Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	5,841.	

Form 1116 (2011)



## Form 1116

## U.S. and Foreign Source Income Summary

NAME

BARACK H. &amp; MICHELLE L. OBAMA

INCOME TYPE	TOTAL	U.S.	FOREIGN GENERAL
Compensation	394,821.	394,821.	
Dividends/Distributions	3.	3.	
Interest	10,694.	10,694.	
Capital Gains	376.	376.	
Business/Profession	487,928.	487,928.	
Rent/Royalty	698.	698.	
State/Local Refunds			
Partnership/S Corporation			
Trust/Estate			
Other Income		-269,710.	269,710.
Gross Income	894,520.	624,810.	269,710.
Less:			
Section 911 Exclusion			
Capital Losses	3,376.	3,376.	
Capital Gains Tax Adjustment			
Total Income - Form 1116	891,144.	621,434.	269,710.
Deductions:			
Business/Profession Expenses	46,559.	46,559.	
Rent/Royalty Expenses			
Partnership/S Corporation Losses			
Trust/Estate Losses			
Capital Losses			
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction	5,911.	5,911.	
Self-employment Health Insurance			
Keogh Contributions	49,000.	49,000.	
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments		-46,559.	46,559.
Capital Gains Tax Adjustment			
Total Deductions	101,470.	54,911.	46,559.
Adjusted Gross Income	789,674.	566,523.	223,151.
Less Itemized Deductions:			
Specifically Allocated	172,130.	172,130.	
Home Mortgage Interest	47,564.	33,223.	14,341.
Other Interest			
Ratably Allocated	58,804.	41,074.	17,730.
Total Adjustments to Adjusted Gross Income	278,498.	246,427.	32,071.
Taxable Income Before Exemptions	511,176.	320,096.	191,080.

## Form 1116

## Allocation of Itemized Deductions

NAME

BARACK H. &amp; MICHELLE L. OBAMA

	Total Itemized Deductions	Itemized Deductions After Sec. 68 Reduction	Form 1116		
			Specifically U.S.	Specifically Foreign	Ratable
Taxes .....	58,804.				58,804.
Interest - Not Including Investment Interest .....	47,564.		33,223.	14,341.	
Contributions .....	172,130.		172,130.		
Miscellaneous Deductions Subject to 2% .....					
Other Miscellaneous Deductions - Not Including Gambling Losses .....					
Foreign Adjustment .....					
Total Itemized Deductions Subject to Sec. 68 .....	278,498.				
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental .....					
Investment Interest .....					
Casualty Losses .....					
Gambling Losses .....					
Foreign Adjustment .....					
Total Itemized Deductions .....	278,498.				
Total Allowed on Schedule A .....			205,353.	14,341.	58,804.



NAME

BARACK H. &amp; MICHELLE L. OBAMA

Foreign Income Category

GENERAL LIMITATION INCOME

## Regular

	2006	2007	2008	2009	2010	2011
1. Foreign tax paid/accrued						5,841.
2. FTC carryback to 2011 for amended returns						
3. Reduction allocated to excluded income						
4. Foreign tax available						5,841.
5. Maximum credit allowable						53,680.
6. Unused foreign tax ( + ) or excess of limit ( - )					-176100.	-47,839.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-176100.	-47,839.
Total foreign taxes from all available years to be carried to next year						

	2001	2002	2003	2004	2005
1. Foreign tax paid/accrued					
2. FTC carryback to 2011 for amended returns					
3. Reduction allocated to excluded income					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax ( + ) or excess of limit ( - )					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Less treaty adjustment					
10. Foreign tax or excess limit remaining					

NAME

BARACK H. &amp; MICHELLE L. OBAMA

## Foreign Income Category

## GENERAL LIMITATION INCOME

AMT	2006	2007	2008	2009	2010	2011
1. Foreign tax paid/accrued						5,841.
2. FTC carryback to 2011 for amended returns						
3. Reduction allocated to excluded income						
4. Foreign tax available						5,841.
5. Maximum credit allowable						57,184.
6. Unused foreign tax ( + ) or excess of limit ( - )					-156529.	-51,343.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-156529.	-51,343.
Total foreign taxes from all available years to be carried to next year						

	2001	2002	2003	2004	2005
1. Foreign tax paid/accrued					
2. FTC carryback to 2011 for amended returns					
3. Reduction allocated to excluded income					
4. Foreign tax available					
5. Maximum credit allowable					
6. Unused foreign tax ( + ) or excess of limit ( - )					
7. Foreign tax carryback					
8. Foreign tax carryforward					
9. Less treaty adjustment					
10. Foreign tax or excess limit remaining					



BARACK H. & MICHELLE L. OBAMA

FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 1

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
DFAS-CIVPAY DIRECTORATE	394,821.	100,255.	18,941.		4,486.	5,725.
TOTALS	394,821.	100,255.	18,941.		4,486.	5,725.

SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 2

DESCRIPTION	AMOUNT
DFAS-CIVPAY DIRECTORATE	18,941.
ILLINOIS 1ST QTR ESTIMATE PAYMENTS	2,000.
ILLINOIS 2ND QTR ESTIMATE PAYMENTS	1,000.
ILLINOIS 3RD QTR ESTIMATE PAYMENTS	10,000.
TOTAL TO SCHEDULE A, LINE 5	31,941.

SCHEDULE A CASH CONTRIBUTIONS STATEMENT 3

DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT
AMERICAN RED CROSS	2,000.	
AMERICAN RED CROSS NORTHERN NEW JERSEY	1,000.	
AMERICAN RED CROSS VERMONT/NEW HAMPSHIRE VALLEY	1,000.	
BOOK WORM ANGELS	500.	
BOYS & GIRLS CLUB	5,000.	
BOYS & GIRLS CLUB OF GREATER WASHINGTON	1,000.	
BREAD FOR THE CITY	500.	
CALVARY WOMEN'S SHELTER	1,000.	
CARE	2,000.	
CATHOLIC RELIEF SERVICES	500.	
CENTRAL ILLINOIS FOOD BANK	1,000.	
CITIZENS UNITED FOR RESEARCH IN EPILEPSY	1,000.	
CLINTON BUSH HAITI FOUNDATION	1,000.	
FISHER HOUSE FOUNDATION	117,130.	
GEORGE WASHINGTON HOSPITAL	2,000.	
HABITAT FOR HUMANITY	5,000.	

BARACK H. & MICHELLE L. OBAMA

ILLINOIS HEAD START ASSOCIATION	1,000.	
ILLINOIS READING COUNCIL	1,000.	
JUVENILE DIABETES RESEARCH FOUNDATION	1,000.	
LIFE PIECES TO MASTERPIECES	1,000.	
MIDTOWN EDUCATIONAL FOUNDATION	500.	
MIRIAM'S KITCHEN	500.	
MOSAIC YOUTH THEATRE OF DETROIT	500.	
MUJERES LATINAS EN ACCION	1,000.	
NATIONAL AIDS FUND	3,000.	
NATIONAL COALITION FOR HOMELESS VETERANS	1,000.	
NATIONAL CONGRESS OF BLACK WOMEN	500.	
NATIONAL MS SOCIETY	1,000.	
NATIONAL OVARIAN CANCER COALITION	500.	
NORTH STREET WOMEN'S SHELTER	1,000.	
ROCHELLE LEE FUND	1,000.	
ST. JOHN'S CHURCH	1,000.	
ST. LEO'S RESIDENCE FOR VETERANS	1,000.	
SIDWELL FRIENDS SCHOOL	5,000.	
THE CHRISTOPHER HOUSE	1,000.	
THE HARMONY PROJECT	1,000.	
TUSCALOOSA STORM RECOVERY FUND	1,000.	
UNITED NEGRO COLLEGE FUND	5,000.	
UNIVERSITY OF HAWAII FOUNDATION	1,000.	
SUBTOTALS	172,130.	
TOTAL TO SCHEDULE A, LINE 16		172,130.

SCHEDULE C	OTHER INCOME	STATEMENT	4
DESCRIPTION	AMOUNT		
DYSTEEL & GODERICH	269,710.		
RANDOM HOUSE	218,218.		
TOTAL TO SCHEDULE C, LINE 6	487,928.		

FORM 8949 B		SHORT-TERM CAPITAL GAINS AND LOSSES		STATEMENT	5
DESCRIPTION OF PROPERTY	SALES PRICE	COST OR OTHER BASIS	ADJUSTMENTS TO GAIN OR LOSS	GAIN OR LOSS	
200000 US TREASURY BILL	199,870.	199,494.		376.	
TOTAL TO SCH D, LINE 2	199,870.	199,494.		376.	



BARACK H. & MICHELLE L. OBAMA

FORM 8949 C

SHORT-TERM CAPITAL GAINS AND LOSSES

STATEMENT 6

DESCRIPTION OF PROPERTY	SALES PRICE	COST OR OTHER BASIS	ADJUSTMENTS TO GAIN OR LOSS	GAIN OR LOSS
US TREASURY REDEEMED	800,000.	800,000.		0.
US TREASURY REDEEMED	1,000,000.	1,000,000.		0.
US TREASURY REDEEMED	968,000.	968,000.		0.
TOTAL TO SCH D, LINE 3	2,768,000.	2,768,000.		0.

STATEMENT(S) 6

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT	7
1. ENTER THE AMOUNT FROM FORM 1040, LINE 41 . . . . .		511,176.	
2. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT.		3,000.	
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0- . . . . .		514,176.	
4. ENTER THE SMALLER OF LINE 2 OR LINE 3 . . . . .		3,000.	
5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT .			
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15 . . . . .			
7. ADD LINES 4 AND 6 . . . . .			
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0- . . .			
9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT.		119,527.	
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7 . . . . .		376.	
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0- . . . . .		3,000.	
12. ADD LINES 10 AND 11 . . . . .		3,376.	
13. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0- . . .		116,151.	

SCHEDULE SE	NON-FARM INCOME	STATEMENT	8
DESCRIPTION		AMOUNT	
AUTHOR		441,369.	
TOTAL TO SCHEDULE SE, LINE 2		441,369.	

FORM 1116	EXPENSES DIRECTLY ALLOCABLE TO FOREIGN INCOME	STATEMENT	9
DESCRIPTION	COUNTRY	AMOUNT	
OTHER EXPENSES DIRECTLY ALLOCATED	OTHER COUNTRIES	46,559.	
TOTAL TO FORM 1116, PART I, LINE 2		46,559.	



**United States Gift (and Generation-Skipping Transfer) Tax Return**  
(For gifts made during calendar year 2011)

OMB No. 1545-0020

**2011**

▶ See Instructions.

Part 1 - General Information

1 Donor's first name and middle initial <b>BARACK H.</b>	2 Donor's last name <b>OBAMA</b>	3 Donor's social security number
4 Address (number, street, and apartment number) <b>1600 PENNSYLVANIA AVENUE, NW</b>		5 Legal residence (domicile) <b>ILLINOIS</b>
6 City, state, and ZIP code <b>WASHINGTON, DC 20500</b>		7 Citizenship (see instructions) <b>UNITED STATES</b>
8 If the donor died during the year, check here <input type="checkbox"/> and enter date of death _____		Yes No
9 If you extended the time to file this Form 709, check here <input type="checkbox"/>		
10 Enter the total number of donees listed on Schedule A. Count each person only once. <b>2</b>		
11a Have you (the donor) previously filed a Form 709 (or 709-A) for any other year? If "No," skip line 11b. <input checked="" type="checkbox"/>		X
b If the answer to line 11a is "Yes," has your address changed since you last filed Form 709 (or 709-A)? <input type="checkbox"/>		X
12 Gifts by husband or wife to third parties. Do you consent to have the gifts (including generation-skipping transfers) made by you and by your spouse to third parties during the calendar year considered as made one-half by each of you? (See instr.) (If the answer is "Yes," the following information must be furnished and your spouse must sign the consent shown below. If the answer is "No," skip lines 13-18 and go to Sch. A.) <input checked="" type="checkbox"/>		X
13 Name of consenting spouse <b>MICHELLE L. OBAMA</b>	14 SSN	
15 Were you married to one another during the entire calendar year? (see instructions) <input checked="" type="checkbox"/>		X
16 If 15 is "No," check whether <input type="checkbox"/> married <input type="checkbox"/> divorced or <input type="checkbox"/> widowed/deceased, and give date ▶		
17 Will a gift tax return for this year be filed by your spouse? (If "Yes," mail both returns in the same envelope.) <input checked="" type="checkbox"/>		X
18 Consent of Spouse. I consent to have the gifts (and generation-skipping transfers) made by me and by my spouse to third parties during the calendar year considered as made one-half by each of us. We are both aware of the joint and several liability for tax created by the execution of this consent.		

Consenting spouse's signature *Michelle Obama* Date 07-09-12

Attach check or money order here.

1 Enter the amount from Schedule A, Part 4, line 11	1	0.
2 Enter the amount from Schedule B, line 3	2	0.
3 Total taxable gifts. Add lines 1 and 2	3	0.
4 Tax computed on amount on line 3 (see Table for Computing Gift Tax in Instructions)	4	0.
5 Tax computed on amount on line 2 (see Table for Computing Gift Tax in Instructions)	5	0.
6 Balance. Subtract line 5 from line 4	6	0.
7 Maximum unified credit (see instructions)	7	1,730,800.
8 Enter the unified credit against tax allowable for all prior periods (from Sch. B, line 1, col. C)	8	
9 Balance. Subtract line 8 from line 7. Do not enter less than zero	9	1,730,800.
10 Enter 20% (.20) of the amount allowed as a specific exemption for gifts made after September 8, 1976, and before January 1, 1977 (see instructions)	10	
11 Balance. Subtract line 10 from line 9. Do not enter less than zero	11	1,730,800.
12 Unified credit. Enter the smaller of line 6 or line 11	12	0.
13 Credit for foreign gift taxes (see instructions)	13	
14 Total credits. Add lines 12 and 13	14	
15 Balance. Subtract line 14 from line 6. Do not enter less than zero	15	0.
16 Generation-skipping transfer taxes (from Schedule C, Part 3, col. H, Total)	16	
17 Total tax. Add lines 15 and 16	17	0.
18 Gift and generation-skipping transfer taxes prepaid with extension of time to file	18	
19 If line 18 is less than line 17, enter balance due (see instructions)	19	0.
20 If line 18 is greater than line 17, enter amount to be refunded	20	

Under penalties of perjury, I declare that I have examined this return, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than donor) is based on all information of which preparer has any knowledge.

Signature of donor *[Signature]* Date 11-11-12

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name <b>MICHAEL S. SOLHEIM, CPA</b>	Preparer's signature <u><i>[Signature]</i></u>	Date <u>7/9/12</u>	Check <input type="checkbox"/> self-employed <input type="checkbox"/>	PTIN
	Firm's name <b>WINEBERG SOLHEIM HOWELL &amp; SHAIN, PC</b>	Firm's EIN		Phone no	
	Firm's address <b>180 N LASALLE ST, STE 2200 CHICAGO, IL 60601</b>				

**SCHEDULE A** Computation of Taxable Gifts (including transfers in trust) (see instructions)A Does the value of any item listed on Schedule A reflect any valuation discount? If "Yes," attach explanation Yes ☐ No ☒B ☐ Check here if you elect under section 529(c)(2)(B) to treat any transfers made this year to a qualified tuition program as made ratably over a 5-year period beginning this year. See instructions. Attach explanation.**Part 1 - Gifts Subject Only to Gift Tax.** Gifts less political organization, medical, and educational exclusions. (see instructions)

A Item number	B Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. If closely held entity, give EIN	C	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
1	MALIA A. OBAMA  CHICAGO, IL						

Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.

1	MALIA A. OBAMA  CHICAGO, IL						
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Total of Part 1. Add amounts from Part 1, column H

24,000.

**Part 2 - Direct Skips.** Gifts that are direct skips and are subject to both gift tax and generation-skipping transfer tax. You must list the gifts in chronological order.

A Item number	B Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. If closely held entity, give EIN	C 2632(b) election out	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)

Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.

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Total of Part 2. Add amounts from Part 2, column H

**Part 3 - Indirect Skips.** Gifts to trusts that are currently subject to gift tax and may later be subject to generation-skipping transfer tax. You must list these gifts in chronological order.

A Item number	B Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. If closely held entity, give EIN	C 2632(c) election	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)

Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.

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Total of Part 3. Add amounts from Part 3, column H

(If more space is needed, attach additional sheets of same size.)



**SCHEDULE A, PART I CONTINUATION SHEET**

Part 1 - Gifts Subject Only to Gift Tax. Gifts less political organization, medical, and educational exclusions. (see instructions)

A Item number	B • Donee's name and address • Relationship to donor (if any) • Description of gift • If the gift was of securities, give CUSIP no. • If closely held entity, give EIN	C	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col F)
	DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
2	NATASHA M. OBAMA  CHICAGO, IL DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
Total of column H							12,000.

**SCHEDULE A, PART I, GIFTS MADE BY SPOUSE CONTINUATION SHEET**

Part 1 - Gifts Subject Only to Gift Tax. Gifts less political organization, medical, and educational exclusions. (see instructions)

A Item number	B • Donee's name and address • Relationship to donor (if any) • Description of gift • If the gift was of securities, give CUSIP no. • If closely held entity, give EIN	C	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.							
	DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
2	NATASHA M. OBAMA  CHICAGO, IL DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
<b>Total of column H</b>							<b>12,000.</b>



**Part 4 - Taxable Gift Reconciliation**

1	Total value of gifts of donor. Add totals from column H of Parts 1, 2, and 3	1	24,000.
2	Total annual exclusions for gifts listed on line 1 (see instructions)	2	24,000.
3	Total included amount of gifts. Subtract line 2 from line 1	3	0.
<b>Deductions (see instructions)</b>			
4	Gifts of interests to spouse for which a marital deduction will be claimed, based on item numbers _____ of Schedule A	4	
5	Exclusions attributable to gifts on line 4	5	
6	Marital deduction. Subtract line 5 from line 4	6	
7	Charitable deduction, based on item nos. _____ less exclusions	7	
8	Total deductions. Add lines 6 and 7	8	
9	Subtract line 8 from line 3	9	0.
10	Generation-skipping transfer taxes payable with this Form 709 (from Schedule C, Part 3, col. H, Total)	10	
11	Taxable gifts. Add lines 9 and 10. Enter here and on page 1, Part 2 - Tax Computation, line 1	11	0.

**Terminable Interest (QTIP) Marital Deduction.** (See instructions for Schedule A, Part 4, line 4.)

If a trust (or other property) meets the requirements of qualified terminable interest property under section 2523(f), and:

- The trust (or other property) is listed on Schedule A, and
  - The value of the trust (or other property) is entered in whole or in part as a deduction on Schedule A, Part 4, line 4, then the donor shall be deemed to have made an election to have such trust (or other property) treated as qualified terminable interest property under section 2523(f).
- If less than the entire value of the trust (or other property) that the donor has included in Parts 1 and 3 of Schedule A is entered as a deduction on line 4, the donor shall be considered to have made an election only as to a fraction of the trust (or other property). The numerator of this fraction is equal to the amount of the trust (or other property) deducted on Schedule A, Part 4, line 6. The denominator is equal to the total value of the trust (or other property) listed in Parts 1 and 3 of Schedule A.

If you make the QTIP election, the terminable interest property involved will be included in your spouse's gross estate upon his or her death (section 2044). See instructions for line 4 of Schedule A. If your spouse disposes (by gift or otherwise) of all or part of the qualifying life income interest, he or she will be considered to have made a transfer of the entire property that is subject to the gift tax. See *Transfer of Certain Life Estates Received From Spouse* in the instructions.

**12 Election Out of QTIP Treatment of Annuities**

Check here if you elect under section 2523(f)(6) not to treat as qualified terminable interest property any joint and survivor annuities that are reported on Schedule A and would otherwise be treated as qualified terminable interest property under section 2523(f). See instructions. Enter the item numbers from Schedule A for the annuities for which you are making this election ▶

**SCHEDULE B Gifts From Prior Periods**

If you answered "Yes" on line 11a of page 1, Part 1, see the instructions for completing Schedule B. If you answered "No," skip to the Tax Computation on page 1 (or Schedule C, if applicable). See instructions for recalculation of the column C amounts. Attach calculations.

A Calendar year or calendar quarter (see instructions)	B Internal Revenue office where prior return was filed	C Amount of unified credit against gift tax for periods after December 31, 1976	D Amount of specific exemption for prior periods ending before January 1, 1977	E Amount of taxable gifts
2007	CINCINNATI, OH 45999			0.
2008	CINCINNATI, OH 45999			0.
2009	CINCINNATI, OH 45999			0.
2010	CINCINNATI, OH 45999			0.
<b>1 Totals for prior periods</b>				
				0.
<b>2 Amount, if any, by which total specific exemption, line 1, column D is more than \$30,000</b>				
<b>3 Total amount of taxable gifts for prior periods. Add amount on line 1, column E and amount, if any, on line 2. Enter here and on page 1, Part 2 - Tax Computation, line 2</b>				0.

(If more space is needed, attach additional sheets of same size.)

**SCHEDULE C** Computation of Generation-Skipping Transfer Tax

Note. Inter vivos direct skips that are completely excluded by the GST exemption must still be fully reported (including value and exemptions claimed) on Schedule C.

**Part 1 - Generation-Skipping Transfers**

A Item No. (from Schedule A, Part 2, col. A)	B Value (from Schedule A, Part 2, col. H)	C Nontaxable portion of transfer	D Net Transfer (subtract col. C from col. B)
Gifts made by spouse (for gift splitting only)			

**Part 2 - GST Exemption Reconciliation (Section 2631) and Section 2652(a)(3) Election**

Check here ☐ if you are making a section 2652(a)(3) (special QTIP) election (see instructions)

Enter the item numbers from Schedule A of the gifts for which you are making this election ☐

1 Maximum allowable exemption (see instructions)	1	5,000,000.
2 Total exemption used for periods before filing this return	2	
3 Exemption available for this return. Subtract line 2 from line 1	3	5,000,000.
4 Exemption claimed on this return from Part 3, column C total, below	4	
5 Automatic allocation of exemption to transfers reported on Schedule A, Part 3 (see instructions)	5	
6 Exemption allocated to transfers not shown on line 4 or 5, above. You must attach a "Notice of Allocation." (see instructions)	6	
7 Add lines 4, 5, and 6	7	
8 Exemption available for future transfers. Subtract line 7 from line 3	8	5,000,000.

**Part 3 - Tax Computation**

A Item No. (from Schedule C, Part 1)	B Net transfer (from Schedule C, Part 1, col. D)	C GST Exemption Allocated	D Divide col. C by col. B	E Inclusion Ratio (Subtract col. D from 1.000)	F Maximum Estate Tax Rate	G Applicable Rate (multiply col. E by col. F)	H Generation-Skipping Transfer Tax (multiply col. B by col. G)
					35% (.35)		
					35% (.35)		
					35% (.35)		
					35% (.35)		
					35% (.35)		
					35% (.35)		
Gifts made by spouse (for gift splitting only)							
					35% (.35)		
					35% (.35)		
					35% (.35)		
					35% (.35)		
					35% (.35)		
					35% (.35)		
Total exemption claimed. Enter here and on Part 2, line 4, above. May not exceed Part 2, line 3, above		Total generation-skipping transfer tax. Enter here; on page 3, Schedule A, Part 4, line 10; and on page 1, Part 2 - Tax Computation, line 16					

(If more space is needed, attach additional sheets of same size.)  
105531  
12-19-11



**United States Gift (and Generation-Skipping Transfer) Tax Return**  
(For gifts made during calendar year 2011)

OMB No. 1545-0020

**2011**

▶ See Instructions.

Part 1 - General Information

1 Donor's first name and middle initial <b>MICHELLE L.</b>	2 Donor's last name <b>OBAMA</b>	3 Donor's social security number
4 Address (number, street, and apartment number) <b>1600 PENNSYLVANIA AVENUE, NW</b>		5 Legal residence (domicile) <b>ILLINOIS</b>
6 City, state, and ZIP code <b>WASHINGTON, DC 20500</b>		7 Citizenship (see instructions) <b>UNITED STATES</b>
8 If the donor died during the year, check here <input type="checkbox"/> and enter date of death _____		Yes No
9 If you extended the time to file this Form 709, check here <input type="checkbox"/>		
10 Enter the total number of donees listed on Schedule A. Count each person only once. <b>2</b>		
11a Have you (the donor) previously filed a Form 709 (or 709-A) for any other year? If "No," skip line 11b <input checked="" type="checkbox"/>		X
b If the answer to line 11a is "Yes," has your address changed since you last filed Form 709 (or 709-A)? <input checked="" type="checkbox"/>		X
12 Gifts by husband or wife to third parties. Do you consent to have the gifts (including generation-skipping transfers) made by you and by your spouse to third parties during the calendar year considered as made one-half by each of you? (See instr.) (If the answer is "Yes," the following information must be furnished and your spouse must sign the consent shown below. If the answer is "No," skip lines 13-18 and go to Sch. A.) <input checked="" type="checkbox"/>		X
13 Name of consenting spouse <b>BARACK H. OBAMA</b>	14 SSN	
15 Were you married to one another during the entire calendar year? (see instructions) <input checked="" type="checkbox"/>		X
16 If 15 is "No," check whether <input type="checkbox"/> married <input type="checkbox"/> divorced or <input type="checkbox"/> widowed/deceased, and give date ▶		
17 Will a gift tax return for this year be filed by your spouse? (If "Yes," mail both returns in the same envelope.) <input checked="" type="checkbox"/>		X
18 Consent of Spouse. I consent to have the gifts (and generation-skipping transfers) made by me and by my spouse to third parties during the calendar year considered as made one-half by each of us. We are both aware of the joint and several liability for tax created by the execution of this consent.		

Consenting spouse's signature		Date <b>04-11-12</b>
1 Enter the amount from Schedule A, Part 4, line 1	1	0.
2 Enter the amount from Schedule B, line 3	2	0.
3 Total taxable gifts. Add lines 1 and 2	3	0.
4 Tax computed on amount on line 3 (see Table for Computing Gift Tax in Instructions)	4	0.
5 Tax computed on amount on line 2 (see Table for Computing Gift Tax in Instructions)	5	0.
6 Balance. Subtract line 5 from line 4	6	0.
7 Maximum unified credit (see instructions)	7	1,730,800.
8 Enter the unified credit against tax allowable for all prior periods (from Sch. B, line 1, col. C)	8	
9 Balance. Subtract line 8 from line 7. Do not enter less than zero	9	1,730,800.
10 Enter 20% (.20) of the amount allowed as a specific exemption for gifts made after September 8, 1976, and before January 1, 1977 (see instructions)	10	
11 Balance. Subtract line 10 from line 9. Do not enter less than zero	11	1,730,800.
12 Unified credit. Enter the smaller of line 8 or line 11	12	0.
13 Credit for foreign gift taxes (see instructions)	13	
14 Total credits. Add lines 12 and 13	14	
15 Balance. Subtract line 14 from line 6. Do not enter less than zero	15	0.
16 Generation-skipping transfer taxes (from Schedule C, Part 3, col. H, Total)	16	
17 Total tax. Add lines 15 and 16	17	0.
18 Gift and generation-skipping transfer taxes prepaid with extension of time to file	18	
19 If line 18 is less than line 17, enter balance due (see instructions)	19	0.
20 If line 18 is greater than line 17, enter amount to be refunded	20	

Attach check or money order here.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than donor) is based on all information of which preparer has any knowledge.		May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
			<b>10-07-12</b>	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	<b>MICHAEL S. SOLHEIM, CPA</b>		<b>1/9/12</b>	
	Firm's name ▶ <b>WINEBERG SOLHEIM HOWELL &amp; SHAIN, PC</b>	Firm's EIN ▶		
	Firm's address ▶ <b>180 N LASALLE ST, STE 2200 CHICAGO, IL 60601</b>	Phone no ▶		

**SCHEDULE A** Computation of Taxable Gifts (including transfers in trust) (see instructions)A Does the value of any item listed on Schedule A reflect any valuation discount? If "Yes," attach explanation Yes ☐ No ☒B ☐ Check here if you elect under section 529(c)(2)(B) to treat any transfers made this year to a qualified tuition program as made ratably over a 5-year period beginning this year. See instructions. Attach explanation.**Part 1 - Gifts Subject Only to Gift Tax.** Gifts less political organization, medical, and educational exclusions. (see instructions)

A Item number	B Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. If closely held entity, give EIN	C	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
1	MALIA A. OBAMA  CHICAGO, IL						

Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.

1	MALIA A. OBAMA  CHICAGO, IL						
---	-----------------------------------	--	--	--	--	--	--

Total of Part 1. Add amounts from Part 1, column H

24,000.

**Part 2 - Direct Skips.** Gifts that are direct skips and are subject to both gift tax and generation-skipping transfer tax. You must list the gifts in chronological order.

A Item number	B Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. If closely held entity, give EIN	C 2632(b) election out	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)

Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.

--	--	--	--	--	--	--	--

Total of Part 2. Add amounts from Part 2, column H

**Part 3 - Indirect Skips.** Gifts to trusts that are currently subject to gift tax and may later be subject to generation-skipping transfer tax. You must list these gifts in chronological order.

A Item number	B Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. If closely held entity, give EIN	C 2632(c) election	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)

Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.

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Total of Part 3. Add amounts from Part 3, column H

(If more space is needed, attach additional sheets of same size.)



**SCHEDULE A, PART I CONTINUATION SHEET**

Part 1 - Gifts Subject Only to Gift Tax. Gifts less political organization, medical, and educational exclusions. (see instructions)

A Item number	B • Donee's name and address • Relationship to donor (if any) • Description of gift • If the gift was of securities, give CUSIP no. • If closely held entity, give EIN	C EIN	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
	DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
2	NATASHA M. OBAMA  CHICAGO, IL DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
Total of column H							12,000.

**SCHEDULE A, PART I, GIFTS MADE BY SPOUSE CONTINUATION SHEET**

Part 1 - Gifts Subject Only to Gift Tax. Gifts less political organization, medical, and educational exclusions. (see instructions)

A Item number	B Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. If closely held entity, give EIN	C	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts.							
	DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
2	NATASHA M. OBAMA  CHICAGO, IL DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.  SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
<b>Total of column H</b>							<b>12,000.</b>



**Part 4 - Taxable Gift Reconciliation**

1	Total value of gifts of donor. Add totals from column H of Parts 1, 2, and 3	1	24,000.
2	Total annual exclusions for gifts listed on line 1 (see instructions)	2	24,000.
3	Total included amount of gifts. Subtract line 2 from line 1	3	0.
<b>Deductions (see instructions)</b>			
4	Gifts of interests to spouse for which a marital deduction will be claimed, based on item numbers of Schedule A	4	
5	Exclusions attributable to gifts on line 4	5	
6	Marital deduction. Subtract line 5 from line 4	6	
7	Charitable deduction, based on item nos. less exclusions	7	
8	Total deductions. Add lines 6 and 7	8	
9	Subtract line 8 from line 3	9	0.
10	Generation-skipping transfer taxes payable with this Form 709 (from Schedule C, Part 3, col. H, Total)	10	
11	Taxable gifts. Add lines 9 and 10. Enter here and on page 1, Part 2 - Tax Computation, line 1	11	0.

**Terminable Interest (QTIP) Marital Deduction.** (See instructions for Schedule A, Part 4, line 4.)

If a trust (or other property) meets the requirements of qualified terminable interest property under section 2523(f), and:

- The trust (or other property) is listed on Schedule A, and
  - The value of the trust (or other property) is entered in whole or in part as a deduction on Schedule A, Part 4, line 4, then the donor shall be deemed to have made an election to have such trust (or other property) treated as qualified terminable interest property under section 2523(f).
- If less than the entire value of the trust (or other property) that the donor has included in Parts 1 and 3 of Schedule A is entered as a deduction on line 4, the donor shall be considered to have made an election only as to a fraction of the trust (or other property). The numerator of this fraction is equal to the amount of the trust (or other property) deducted on Schedule A, Part 4, line 6. The denominator is equal to the total value of the trust (or other property) listed in Parts 1 and 3 of Schedule A.

If you make the QTIP election, the terminable interest property involved will be included in your spouse's gross estate upon his or her death (section 2044). See instructions for line 4 of Schedule A. If your spouse disposes (by gift or otherwise) of all or part of the qualifying life income interest, he or she will be considered to have made a transfer of the entire property that is subject to the gift tax. See *Transfer of Certain Life Estates Received From Spouse* in the instructions.

**12 Election Out of QTIP Treatment of Annuities**

Check here if you elect under section 2523(f)(6) not to treat as qualified terminable interest property any joint and survivor annuities that are reported on Schedule A and would otherwise be treated as qualified terminable interest property under section 2523(f). See instructions. Enter the item numbers from Schedule A for the annuities for which you are making this election

**SCHEDULE B Gifts From Prior Periods**

If you answered "Yes" on line 11a of page 1, Part 1, see the instructions for completing Schedule B. If you answered "No," skip to the Tax Computation on page 1 (or Schedule C, if applicable). See instructions for recalculation of the column C amounts. Attach calculations.

A Calendar year or calendar quarter (see instructions)	B Internal Revenue office where prior return was filed	C Amount of unified credit against gift tax for periods after December 31, 1976	D Amount of specific exemption for prior periods ending before January 1, 1977	E Amount of taxable gifts
2007	CINCINNATI, OH 45999			0.
2008	CINCINNATI, OH 45999			0.
2009	CINCINNATI, OH 45999			0.
2010	CINCINNATI, OH 45999			0.
<b>1 Totals for prior periods</b>				
				0.
<b>2</b> Amount, if any, by which total specific exemption, line 1, column D is more than \$30,000				
<b>3</b> Total amount of taxable gifts for prior periods. Add amount on line 1, column E and amount, if any, on line 2. Enter here and on page 1, Part 2 - Tax Computation, line 2				0.

(If more space is needed, attach additional sheets of same size.)

**Note.** Inter vivos direct skips that are completely excluded by the GST exemption must still be fully reported (including value and exemptions claimed) on Schedule C.

## Part 1 - Generation-Skipping Transfers

[illegible]

Check here ☐ if you are making a section 2652(a)(3) (special OTIP) election (see instructions)

Enter the item numbers from Schedule A of the gifts for which you are making this election ►

1	Maximum allowable exemption (see instructions)	1	5,000,000.
2	Total exemption used for periods before filing this return	2	
3	Exemption available for this return. Subtract line 2 from line 1	3	5,000,000.
4	Exemption claimed on this return from Part 3, column C total, below	4	
5	Automatic allocation of exemption to transfers reported on Schedule A, Part 3 (see instructions)	5	
6	Exemption allocated to transfers not shown on line 4 or 5, above. You must attach a "Notice of Allocation." (see instructions)	6	
7	Add lines 4, 5, and 6	7	
8	Exemption available for future transfers. Subtract line 7 from line 3	8	5,000,000.

### Part 3 - Tax Computation

[illegible]

Total exemption claimed. Enter here and on Part 2, line 4, above. May not exceed Part 2, line 3, above

Total generation-skipping transfer tax. Enter here; on page 3, Schedule A, Part 4, line 10; and on page 1, Part 2 - Tax Computation, line 16

(If more space is needed, attach additional sheets of same size.)  
105531  
12-19-11



## Step 1: Personal Information

BARACK H. OBAMA  
MICHELLE L. OBAMA  
1600 PENNSYLVANIA AVENUE NW  
WASHINGTON, DC 20500

## C Filing status (see instructions)

Single or head of household

☒ Married filing jointly

Married filing separately

Widowed

## D Check if same-sex civil union return (see instructions)

Step 2: Income	1	Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4.	1	789,674.00
	2	Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 1040EZ.	2	.00
	3	Other additions. Attach Schedule M.	3	.00
	4	Total income. Add Lines 1 through 3.	4	789,674.00

Step 3: Base Income	5	Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return.	5	.00
	6	Illinois Income Tax overpayment included in U.S. 1040, Line 10.	6	.00
	7	Other subtractions. Attach Schedule M. Check if Line 7 includes any amount from Schedule 1299-C.	7	10,623.00
	8	Add Lines 5, 6, and 7. This is the total of your subtractions.	8	10,623.00
	9	Illinois base income. Subtract Line 8 from Line 4.	9	779,051.00

Step 4: Exemptions	10	a	Number of exemptions from your federal return.	4	x	\$2,000	a	8,000.00
		b	If someone can claim you as a dependent, see instructions.		x	\$2,000	b	.00
		c	Check if 65 or older: You + Spouse =		x	\$1,000	c	.00
		d	Check if legally blind: You + Spouse =		x	\$1,000	d	.00
			Exemption allowance. Add Lines a through d.	10				8,000.00

Step 5: Net Income	11	Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12.	11	771,051.00
	12	Nonresidents and part-year residents: Check the box that applies to you during 2011 Nonresident Part-year resident, and write the Illinois base income from Sch. NR. Attach Sch. NR.	12	.00

Step 6: Tax	13	Residents: Multiply Line 11 by 5% (.05). Nonresidents and part-year residents: Write the tax from Schedule NR.	13	38,553.00
	14	Recapture of investment tax credits. Attach Schedule 4255.	14	.00
	15	Income tax. Add Lines 13 and 14. Cannot be less than zero.	15	38,553.00

Step 7: Tax After Non- refundable Credits	16	Income tax paid to another state while an Illinois resident. Attach Schedule CR.	16	.00
	17	Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.	17	.00
	18	Credit amount from Schedule 1299-C. Attach Schedule 1299-C.	18	.00
	19	Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15.	19	.00
	20	Tax after nonrefundable credits. Subtract Line 19 from Line 15.	20	38,553.00

	21	Tax after nonrefundable credits from Page 1, Line 20.	21	<u>38,553.00</u>
<b>Step 8:</b>	22	Household employment tax. See instructions.	22	<u>.00</u>
<b>Other Taxes</b>	23	Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. Do not leave blank.	23	<u>0.00</u>
	24	<b>Total Tax.</b> Add Lines 21, 22, and 23.	24	<u>38,553.00</u>
<b>Step 9:</b>	25	Illinois Income Tax withheld. Attach W-2 and 1099 forms.	25	<u>18,941.00</u>
<b>Payments</b>	26	Estimated payments from Forms IL-1040-ES and IL-505-I, including overpayment applied from 2010 return.	26	<u>19,000.00</u>
<b>and</b>	27	Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T.	27	<u>.00</u>
<b>Refundable</b>	28	Earned Income Credit from Schedule ICR. Attach Schedule ICR.	28	<u>.00</u>
<b>Credit</b>	29	<b>Total payments and refundable credit.</b> Add Lines 25 through 28.	29	<u>37,941.00</u>
<b>Step 10:</b>	30	<b>Overpayment.</b> If Line 29 is greater than Line 24, subtract Line 24 from Line 29.	30	<u>.00</u>
<b>Result</b>	31	<b>Underpayment.</b> If Line 24 is greater than Line 29, subtract Line 29 from Line 24.	31	<u>612.00</u>
<b>Step 11:</b>	32	Late-payment penalty for underpayment of estimated tax.	32	<u>.00</u>
<b>Underpayment</b>	a	Check if at least two-thirds of your federal gross income is from farming.	<input type="checkbox"/>	
<b>of Estimated</b>	b	Check if you or your spouse are 65 or older and permanently living in a nursing home.	<input type="checkbox"/>	
<b>Tax Penalty</b>	c	Check if your income was not received evenly during the year and you annualized your income on Form IL-2210. Attach Form IL-2210.	<input checked="" type="checkbox"/>	
<b>and Donations</b>	33	Voluntary charitable donations. Attach Schedule G.	33	<u>.00</u>
	34	<b>Total penalty and donations.</b> Add Lines 32 and 33.	34	<u>.00</u>
<b>Step 12:</b>	35	If you have an overpayment on Line 30 and this amount is greater than Line 34, subtract Line 34 from Line 30. This is your remaining overpayment.	35	<u>.00</u>
<b>Refund or</b>	36	Amount from Line 35 you want refunded to you.	36	<u>.00</u>
<b>Amount You</b>	37	Complete to direct deposit your refund Routing number _____ <input type="checkbox"/> Checking or <input type="checkbox"/> Savings Account number _____		
<b>Owe</b>	38	Subtract Line 36 from Line 35. This amount will be applied to your 2012 estimated tax.	38	<u>.00</u>
	39	If you have an underpayment on Line 31, add Lines 31 and 34. <b>OR</b> If you have an overpayment on Line 30 and this amount is less than Line 34, subtract Line 30 from Line 34. This is the amount you owe.	39	<u>612.00</u>

**Step 13:** Under penalties of perjury, I state that I have examined this return, and, to the best of my knowledge, it is true, correct, and complete.

**Sign and Date**

Your signature [Signature] Date 4/11/12 Daytime phone number \_\_\_\_\_ Your spouse's signature [Signature] Date \_\_\_\_\_

Paid preparer's signature [Signature] Date 4/11/12 Preparer's phone number \_\_\_\_\_ Preparer's FEIN, SSN, or PTIN \_\_\_\_\_

**Third Party Designee** ☐ Check, and complete below, if you want to allow another person to discuss this return with the Illinois Department of Revenue.

Designee's Name (please print) \_\_\_\_\_ Designee's Phone number \_\_\_\_\_

**Form 1099-G Information** ☐ Next year (in January 2013), we will no longer automatically mail 1099-G forms. Instead, we ask that you get this information from our website. Check the box if you still want us to mail you a paper Form 1099-G next year.

☐ If no payment enclosed, mail to:  
ILLINOIS DEPARTMENT OF REVENUE  
PO BOX 1040  
GALESBURG IL 61402-1040

☐ If payment enclosed, mail to:  
ILLINOIS DEPARTMENT OF REVENUE  
SPRINGFIELD IL 62728-0001

149002 12-22-11

ID: 2BX

IL-1040 page 2 (R-12/11)

DR \_\_\_\_\_ AP \_\_\_\_\_ RR \_\_\_\_\_ DC \_\_\_\_\_



Illinois Department of Revenue

2011 Schedule M

Other Additions and Subtractions for Individuals

Attach to your Form IL-1040

IL Attachment No. 15

Read this information first

Complete this schedule if you are required to add certain income on Form IL-1040, Line 3, or if you are entitled to take subtractions on Form IL-1040, Line 7.

**Note** If you are required to complete Schedule 1299-C, Schedule F, or Form IL-4562, you must do so before you complete this schedule.

Step 1: Provide the following information

BARACK H. & MICHELLE L. OBAMA

Your name as shown on Form IL-1040.

Your Social Security number.

Step 2: Figure your additions for Form IL-1040, Line 3

Write the amount of

(Whole dollars only)

1	Your child's federally tax-exempt interest and dividend income as reported on U.S. Form 8814	1	.00
2	Distributive share of additions you received from a partnership, S corporation, trust, or estate. Attach Illinois Schedule K-1-P or Schedule K-1-T.	2	.00
3	Lloyds plan of operations loss, if reported on your behalf on Form IL-1023-C and included in your adjusted gross income	3	.00
4	Earnings distributed from IRC Section 529 college savings and tuition programs if not included in your adjusted gross income (Do not include distributions from "Bright Start," "Bright Directions," or "College Illinois" programs or programs that meet certain disclosure requirements - see instructions.)	4	.00
5	Illinois special depreciation addition amount from Form IL-4562, Step 2, Line 4. Attach Form IL-4562.	5	.00
6	Business expense recapture (nonresidents only)	6	.00
7	Recapture of deductions for contributions to Illinois college savings plans transferred to an out-of-state plan	7	.00
8	Credit taken on Schedule 1299-C for student-assistance contributions you made as an employer	8	.00
9	Recapture of deductions for contributions to college savings plans withdrawn for nonqualified expenses or refunded	9	.00
10	Other income - Identify each item	10	.00
11	Add Lines 1 through 10. Write the amount here and on Form IL-1040, Line 3.	11	.00

Step 3: Figure your subtractions for Form IL-1040, Line 7

Write the amount of

12	Contributions made to the following college savings plans:		
a	"Bright Start" College Savings Pool	12a	.00
b	"College Illinois" Prepaid Tuition Program	12b	.00
c	"Bright Directions" College Savings Pool	12c	.00
13	Distributive share of subtractions from a partnership, S corporation, trust, or estate. (Do not include any amounts contained in Lines 20 or 22 of this schedule.) Attach Illinois Schedule K-1-P or K-1-T identifying you as the partner, shareholder, or beneficiary and listing your Social Security number.	13	.00
14	Restoration of amounts held under claim of right under Internal Revenue Code, Section 1341	14	.00
15	Contributions to a job training project	15	.00
16	Expenses related to federal credits or federally tax-exempt income	16	.00
17	Interest earned on investments through the Home Ownership Made Easy Program	17	.00
18	Illinois special depreciation subtraction amount from Form IL-4562, Step 3, Line 10. Attach Form IL-4562.	18	.00
19	Write the following only if included in Form IL-1040, Lines 1, 2, or 3:	19	.00
20	Military pay earned. Attach military W-2.		
20	U.S. Treasury bonds, bills, notes, savings bonds, and U.S. agency interest from U.S. 1040A or 1040. Attach a copy of U.S. 1040A or 1040, Schedule B, if required federally. SEE STATEMENT 3	20	10,623.00
21	August 1, 1969, valuation limitation amount from your Schedule F, Line 17. Attach Schedule F and required federal forms.	21	.00
22	Enterprise or river edge redevelopment zone and high impact business dividend subtraction amount from your Schedule 1299-C, Step 2, Line 10. Attach Schedule 1299-C.	22	.00
23	Add Lines 12a through 22 and write the amount here and on Page 2, Line 24.	23	10,623.00

### Step 3: Continued

24	Write the amount from Page 1, Line 23.	24	10,623.00
25	Recovery of items previously deducted on U.S. 1040, Schedule A (including refunds of any state and local income taxes, other than Illinois). <b>Attach</b> a copy of U.S. 1040, Page 1, and required federal forms.	25	.00
26	Ridesharing money and other benefits	26	.00
27	Payment of life insurance, endowment, or annuity benefits received	27	.00
28	Lloyds plan of operations income if reported on your behalf on Form IL-1023-C	28	.00
29	Income earned by certain trust accounts established under the Illinois Pre-Need Cemetery Sales Act	29	.00
30	Education loan repayments made for primary care physicians who agree to practice in designated shortage areas under the Family Practice Residency Act	30	.00
31	Reparations or other amounts received as a victim of persecution by Nazi Germany	31	.00
32	Interest on the following tax-exempt obligations of Illinois state and local government. Do not include interest you received indirectly through owning shares in a mutual fund.		
a	Illinois Housing Development Authority bonds and notes (except housing-related commercial facilities bonds and notes)	32a	.00
b	Export Development Act of 1983 bonds	32b	.00
c	Illinois Development Finance Authority bonds, notes, and other obligations (venture fund and infrastructure bonds only)	32c	.00
d	Quad Cities Regional Economic Development Authority bonds and notes (if declared to be exempt from taxation by the Authority)	32d	.00
e	College Savings bonds	32e	.00
f	Illinois Sports Facilities Authority bonds	32f	.00
g	Higher Education Student Assistance Act bonds	32g	.00
h	Illinois Development Finance Authority bonds issued under the Illinois Development Finance Authority Act, Sections 7.80 through 7.87	32h	.00
i	Rural Bond Bank Act bonds and notes	32i	.00
j	Illinois Development Finance Authority bonds issued under the Asbestos Abatement Finance Act	32j	.00
k	Quad Cities Interstate Metropolitan Authority bonds	32k	.00
l	Southwestern Illinois Development Authority bonds	32l	.00
m	Illinois Finance Authority bonds issued under the Illinois Finance Authority Act, Sections 820.60 and 825.55 or the Asbestos Abatement Finance Act	32m	.00
n	Illinois Power Agency bonds issued by the Illinois Finance Authority	32n	.00
o	Central Illinois Economic Development Authority bonds	32o	.00
p	Eastern Illinois Economic Development Authority bonds	32p	.00
q	Southeastern Illinois Economic Development Authority bonds	32q	.00
r	Southern Illinois Economic Development Authority bonds	32r	.00
s	Illinois Urban Development Authority bonds	32s	.00
t	Downstate Illinois Sports Facilities Authority bonds	32t	.00
u	Western Illinois Economic Development Authority bonds	32u	.00
v	Upper Illinois River Valley Development Authority Act bonds	32v	.00
33	Interest on the following non-U.S. government bonds.		
a	Bonds issued by the government of Guam	33a	.00
b	Bonds issued by the government of Puerto Rico	33b	.00
c	Bonds issued by the government of the Virgin Islands	33c	.00
d	Bonds issued by the government of American Samoa	33d	.00
e	Bonds issued by the government of the Northern Mariana Islands	33e	.00
f	Mutual mortgage insurance fund bonds	33f	.00
34	Amount of your child's interest from U.S. Treasury and U.S. agency obligations or from sources in Line 20, 32 or 33 as reported on U.S. Form 8814	34	.00
35	Railroad unemployment income. <b>Attach</b> Form 1099-G and a copy of page 1 of your federal return.	35	.00
36	Unjust imprisonment compensation awarded by Illinois Court of Claims	36	.00
37	Distributions from "Bright Start," "College Illinois," and "Bright Directions" college savings plan if included in Line 1 because you claimed a federal American Opportunity or Lifetime Learning Credit	37	.00
38	Add Lines 24 through 37. Write the amount here and on Form IL-1040, Line 7.	38	10,623.00



**2011 IL-2210** Computation of Penalties for Individuals

Attach to your Form IL-1040

IL Attachment No. 19

**Read this information first-** We encourage you to let us figure your penalties and send you a bill instead of completing this form yourself.

We will waive the late payment penalty for underpayment of estimated tax if you timely paid the lesser of 100 percent (rather than 150 percent, as previously published) of the prior year's tax liability or 90 percent of the current year's tax liability. If you elect to complete Form IL-2210, this form reflects that waiver. For original returns only. Do not use this form if you are filing Form IL-1040-X, Amended Individual Income Tax Return, after the extended due date of the return.

**Step 1: Provide the following information****BARACK H. & MICHELLE L. OBAMA**

Your name as shown on Form IL-1040

Your Social Security number

**Note:** If your prior year tax return was filed using a different Social Security number than the number above, write that number here.

**Step 2: Figure your required installments**

	<b>A</b> This year	<b>B</b> Last year
1 Write the amount of your total income tax from each tax return. See instructions.	1 38,553.	51,568.
2 Write the amount of credits from each tax return. See instructions.	2	
3 Subtract Line 2 from Line 1.	3 38,553.	51,568.
4a Write the total amount of this year's Illinois withholding from your W-2 forms.	4a 18,941.	
4b Write the total amount of any pass-through entity payments made on your behalf.	4b	
4c Add Lines 4a and 4b and write the result here.	4c 18,941.	
5 Subtract Line 4c from Line 3.	5 19,612.	
6 Multiply Column A, Line 3, by 90% (.9).	6 34,698.	
7 If Line 5 is \$500 or less or if you are not required to make estimated tax payments, write "0," and go to Step 3. Otherwise, write the lesser of Column A, Line 6, or Column B, Line 3.	7 34,698.	
8 Divide the amount written on Line 7 by four. This is the amount of each required installment. (If you use the annualized income installment method, see instructions.)	8 8,675.	

	Quarter 1 15th day of 4th month of tax year	Quarter 2 15th day of 6th month of tax year	Quarter 3 15th day of 9th month of tax year	Quarter 4 15th day of 1st mo. after end of tax year
9a Write the installment due date for each quarter. See instructions	04/15/11	06/15/11	09/15/11	01/17/12
9b Write the required installment. See instructions.	6,260.	6,119.	13,646.	8,673.
10a Write any credit carried forward from the prior year		Skip this line for Quarter 2.	Skip this line for Quarter 3.	Skip this line for Quarter 4.
10b Write the amount of tax withheld	4,735.	4,735.	4,735.	4,736.
10c Write the amount of pass-through payments				
10d Add Lines 10a through 10c in each column	4,735.	4,735.	4,735.	4,736.
11 Subtract Line 10d from Line 9b. If the amount is negative, use brackets.	1,525.	1,384.	8,911.	3,937.
12 If the amount on Line 13 of the previous quarter is negative, write that amount as a positive here. Otherwise, write "0."	Skip this line for Quarter 1.	0.	0.	0.
13 Subtract Line 12 from Line 11. If the amount is negative, use brackets.	1,525.	1,384.	8,911.	3,937.

Continue with Step 3 on Page 2 →

### Step 3: Figure your unpaid tax

- 14 Write the amount from Column A, Line 3. 14 38,553.  
 15 Write the amount of household employment tax from IL-1040, Line 22. 15 \_\_\_\_\_  
 16 Write the amount of use tax from IL-1040, Line 23. 16 \_\_\_\_\_  
 17 Add Lines 14 through 16. Write the total amount here. 17 38,553.  
 18 Write the total amount of all payments made on or before the original due date of your tax return. Include any credit carried forward from the prior year, your total estimated payments made this year, Form 505-1 payments, the pass-through entity payments made on your behalf, and your withholding as shown on your W-2 forms. Compare that total to the total of Line 9b, Quarters 1 through 4, and write the greater amount here. 18 38,553.  
 19 Subtract Line 18 from Line 17. If the amount is  
     • positive, write that amount here. Write this amount in Penalty Worksheet 2, Line 23, Column C and continue to Step 4.  
     • zero or negative, write that amount here and, if negative, use brackets. 19 0.

### Step 4: Figure your late-payment penalty

Use Penalty Worksheet 1 to figure your late-payment penalty for underpayment of estimated tax.

Use Penalty Worksheet 2 to figure your late-payment penalty for unpaid tax.

**Note** You must follow the instructions in order to properly complete the penalty worksheets.

- 20 Write the amount and the date of each payment you made. See instructions.

Amount	Date paid	Amount	Date paid	Amount	Date paid
a <u>2,000.</u>	<u>04/18/11</u>	e _____	_____	i _____	_____
b <u>1,000.</u>	<u>06/15/11</u>	f _____	_____	j _____	_____
c <u>10,000.</u>	<u>09/15/11</u>	g _____	_____	k _____	_____
d <u>6,000.</u>	<u>01/17/12</u>	h _____	_____	l _____	_____

#### Penalty rates

Number of days late	Penalty rate
1 - 30	.02
31 or more	.10

### Penalty Worksheet 1 - Late-payment penalty for underpayment of estimated tax

**Note** If you paid the required amount from Line 13 by the payment due date for each quarter, do not complete this worksheet.

- 21 Write the unpaid amounts from Line 13, Quarters 1 through 4, on the first line of the appropriate quarters in Column C below.

A Period	B Due date	C Unpaid amount	D Payment applied	E Balance due (Col. C - Col. D)	F Payment date	G Number of days late	H Penalty rate (See above)	I Penalty
Qtr 1	<u>04/15/11</u>	<u>1,525.</u>		<u>1,525.</u>	<u>04/18/11</u>			
		<u>1,525.</u>	<u>2,000.</u>	<u>-475.</u>	<u>04/18/11</u>			
Qtr 2	<u>06/15/11</u>	<u>1,384.</u>		<u>1,384.</u>	<u>06/15/11</u>			
		<u>1,384.</u>	<u>475.</u>	<u>909.</u>	<u>06/15/11</u>			
		<u>909.</u>	<u>1,000.</u>	<u>-91.</u>	<u>06/15/11</u>			
Qtr 3	<u>09/15/11</u>	<u>8,911.</u>		<u>8,911.</u>	<u>09/15/11</u>			
		<u>8,911.</u>	<u>91.</u>	<u>8,820.</u>	<u>09/15/11</u>			
		<u>8,820.</u>	<u>10,000.</u>	<u>-1,180.</u>	<u>09/15/11</u>			
Qtr 4	<u>01/17/12</u>	<u>3,937.</u>		<u>3,937.</u>	<u>01/17/12</u>			
		<u>3,937.</u>	<u>1,180.</u>	<u>2,757.</u>	<u>01/17/12</u>			
		<u>2,757.</u>	<u>6,000.</u>	<u>-3,243.</u>	<u>01/17/12</u>			

- 22 Add Column I, Quarters 1 through 4. This is your late-payment penalty for underpayment of estimated tax.

Write the total amount here and on your Form IL-1040, Line 32 (round to whole dollars).

22 0

**Note** You may apply any remaining overpayment from Quarter 4, Column E above to any underpayment when figuring Penalty Worksheet 2, only if the payment date in Column F is after the original due date of the return.



## Penalty Worksheet 2 - Late-payment penalty for unpaid tax

23 Write any positive amount from Line 19 on the first line of Column C below.

A Return	B Due date	C Unpaid amount	D Payment applied	E Balance due (Col. C - Col. D)	F Payment date	G Number of days late	H Penalty rate (See above)	I Penalty

24 Add Column I. This is your **late-payment penalty for unpaid tax**.  
Write the total amount here and on Line 33.

24 \_\_\_\_\_

## Step 5: Figure your late-filing penalty and the amount you owe

**Note** Figure your late-filing penalty only if

- you are filing your tax return after your extended due date, and
- your tax was not paid on or before your original due date.

### Figure your late-filing penalty.

- 25 Write the amount from Form IL-1040, Line 15. 25 \_\_\_\_\_
- 26 Write the amount of household employment tax from Form IL-1040, Line 22. 26 \_\_\_\_\_
- 27 Write the amount of use tax from Form IL-1040, Line 23. 27 \_\_\_\_\_
- 28 Add Lines 25 through 27. Write the total amount here. 28 \_\_\_\_\_
- 29 Write the total amount of credits and payments made on or before your original due date. 29 \_\_\_\_\_
- 30 Subtract Line 29 from Line 28. 30 \_\_\_\_\_
- 31 Multiply the amount on Line 30 by 2% (.02). 31 \_\_\_\_\_
- 32 Write the lesser of Line 31 or \$250. This is your **late-filing penalty**. 32 \_\_\_\_\_

### Figure the amount you owe.

- 33 Write any **late-payment penalty for unpaid tax** from Line 24. 33 \_\_\_\_\_
- 34 Write any **late-filing penalty** from Line 32. 34 \_\_\_\_\_
- 35 If you have an overpayment on Form IL-1040, Line 35, write that amount as a <negative number>. 35 \_\_\_\_\_  
If you have an amount due on Form IL-1040, Line 39, write that amount as a positive number.
- 36 Add Lines 33 through 35. If the result is a negative number, this is the amount you are overpaid (before any amount applied to next year's estimated tax). If the result is a positive number, this is the amount you owe. See Form IL-1040, Line 39, instructions for your payment options. 36 \_\_\_\_\_

Continue to Step 6 on Page 4, if annualizing your income. →

## Step 6: Complete the annualization worksheet for Step 2, Line 9b

Complete this worksheet only if your income was not received evenly throughout the year and you choose to annualize your income. Complete Lines 37 through 53 of one column before going to the next, beginning with Column A.

	A First 3 months	B First 5 months	C First 8 months	D All 12 months
37 Write your Illinois base income for each period. See instructions.	37 141,100.	232,570.	520,896.	779,051.
38 Annualization factors.	38 4	2.4	1.5	1
39 Multiply Line 37 by Line 38. This is your annualized income.	39 564,400.	558,168.	781,344.	779,051.
40 Exemptions. See instructions.	40 8,000.	8,000.	8,000.	8,000.
41 Subtract Line 40 from Line 39. This is your Illinois net income.	41 556,400.	550,168.	773,344.	771,051.
42 Multiply Line 41 by 5% (.05).	42 27,820.	27,508.	38,667.	38,553.
43 For each period, write the amount you wrote on Step 2, Line 2, Column A.	43 27,820.	27,508.	38,667.	38,553.
44 Subtract Line 43 from Line 42.	44 22.5% (.225)	45% (.450)	67.5% (.675)	90% (.900)
45 Applicable percentage.	45 6,260.	12,379.	26,100.	34,698.
46 Multiply Line 44 by Line 45. This is your annualized installment.	46 Skip this line for Column A.	6,260.	12,379.	26,025.
47 Add the amounts on Line 53 of each of the preceding columns and write the total here.	47 6,260.	6,119.	13,721.	8,673.
48 Subtract Line 47 from Line 46. If less than zero, write "0."	48 8,675.	8,675.	8,675.	8,673.
49 Write the amount you would have entered in Step 2, Line 9b, if you were not annualizing.	49 Skip this line for Column A.	2,415.	4,971.	
50 Write the amount from Line 52 of the preceding column.	50 8,675.	11,090.	13,646.	8,673.
51 Add Lines 49 and 50.	51 2,415.	4,971.	0.	Skip this line for Column D.
52 If Line 51 is greater than Line 48, subtract Line 48 from Line 51. Otherwise, write "0."	52 6,260.	6,119.	13,646.	8,673.
53 Write the lesser of Line 48 or Line 51 here and on Step 2, Line 9b. This is your required installment.				



For the year Jan. 1-Dec. 31, 2011, or other tax year beginning , 2011, ending , 20 See separate instructions.

Your first name and initial **JOSEPH R** Last name **BIDEN JR.** Your social security number

If a joint return, spouse's first name and initial **JILL T** Last name **BIDEN** Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. **▲** 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. **WILMINGTON, DE** Presidential Election Campaign

Foreign country name Foreign province/county Foreign postal code **X** You **X** Spouse

**Filing Status** 1 ☐ Single 4 ☐ Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. **2** ☒ Married filing jointly (even if only one had income) 5 ☐ Qualifying widow(er) with dependent child 3 ☐ Married filing separately. Enter spouse's SSN above and full name here. **2** ☒ Yourself. If someone can claim you as a dependent, do not check box 6a

**Exemptions** b ☒ Spouse 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 No. of children on 6c who: ☒ lived with you ☐ did not live with you due to divorce or separation (see instructions) Dependents on 6c not entered above Add numbers on lines above **2** d Total number of exemptions claimed

**Income** 7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 **307,543.** 8a Taxable interest. Attach Schedule B if required 8a **2,827.** b Tax-exempt interest. Do not include on line 8a 8b 9a Ordinary dividends. Attach Schedule B if required 9a b Qualified dividends 9b 10 Taxable refunds, credits, or offsets of state and local income taxes 10 11 Alimony received 11 12 Business income or (loss). Attach Schedule C or C-EZ 12 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐ 13 14 Other gains or (losses). Attach Form 4797 14 15a IRA distributions 15a **31,995.** b Taxable amount 15b **31,826.** 16a Pensions and annuities 16a **12,653.** b Taxable amount 16b **24,186.** 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 **379,035.** 18 Farm income or (loss). Attach Schedule F 18 19 Unemployment compensation 19 20a Social security benefits 20a **28,454.** 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

**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 28 Self-employed SEP, SIMPLE, and qualified plans 28 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 **379,035.** 37 Subtract line 36 from line 22. This is your **adjusted gross income** 37



**Tax and Credits**

Standard Deduction for -  
 • People who check any box on line 39a or 39b or who can be claimed as a dependent.

• All others:  
 Single or Married filing separately, \$5,800  
 Married filing jointly or Qualifying widow(er), \$11,600  
 Head of household, \$8,500

38	Amount from line 37 (adjusted gross income)	38	379,035.
39a	Check <input checked="" type="checkbox"/> You were born before January 2, 1947, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1947, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a <input type="checkbox"/> 39b <input type="checkbox"/> 1		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	60,628.
41	Subtract line 40 from line 38	41	318,407.
42	Exemptions. Multiply \$3,700 by the number on line 6d	42	7,400.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	311,007.
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	80,087.
45	Alternative minimum tax. Attach Form 6251	45	6,805.
46	Add lines 44 and 45	46	86,892.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 23	49	
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit (see instructions)	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	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	86,892.

**Other Taxes**

56	Self-employment tax. Attach Schedule SE	56	
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	1,008.
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	87,900.

**Payments**

If you have a qualifying child, attach Schedule EIC.

62	Federal income tax withheld from Forms W-2 and 1099	62	87,663.
63	2011 estimated tax payments and amount applied from 2010 return	63	
64a	Earned income credit (EIC)	64a	
b	Nontaxable combat pay election	64b	
65	Additional child tax credit. Attach Form 8812	65	
66	American opportunity credit from Form 8863, line 14	66	
67	First-time homebuyer credit from Form 5405, line 10	67	
68	Amount paid with request for extension to file	68	
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"/> 8839 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	87,663.

**Refund**

Direct deposit? See instructions.

73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here	74a	
b	Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number <input type="text"/>		
75	Amount of line 73 you want applied to your 2012 estimated tax	75	
76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	237.
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 WALTER H DEYHLE, CPA Phone no.  Personal identification number (PIN)

**Sign Here**

Joint return? See instructions. 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.

Your signature Walter H Deyhle Date 4-10-12 Your occupation VICE PRESIDENT Daytime phone number

Spouse's signature. If a joint return, both must sign. Jill T Biden Date 4-11-12 Spouse's occupation TEACHER If the IRS sent you an Identity Protection PIN, enter it here

**Paid**

Preparer Use Only

Print/Type preparer's name WALTER H DEYHLE Date 4/10/12 Check ☐ if self-employed ☐ PTIN

Firm's name GELMAN, ROSENBERG & FREEDMAN Firm's EIN

Firm's address 4550 MONTGOMERY AVE SUITE 650N Phone no.

BETHESDA, MD 20814-2930



**SCHEDULE A  
(Form 1040)**

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

**Itemized Deductions**

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedule A (Form 1040).**

OMB No. 1545-0074

**2011**  
Attachment  
Sequence No. **07**

Your social security number

**JOSEPH R BIDEN JR. & JILL T BIDEN**

<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	2	
	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>	5	State and local (check only one box): a <input checked="" type="checkbox"/> Income taxes, or b <input type="checkbox"/> General sales taxes	5	18,580.
	SEE STATEMENT 5			
	6	Real estate taxes (see instructions)	6	10,837.
	7	Personal property taxes	7	
	8	Other taxes. List type and amount ▶	8	
	9	Add lines 5 through 8	9	29,417.
	10	Home mortgage interest and points reported to you on Form 1098	10	25,671.
	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 no., and address ▶	11	
	12	Points not reported to you on Form 1098. See instructions for special rules	12	
<b>Note.</b> Your mortgage interest deduction may be limited (see instructions).	13	Mortgage insurance premiums (see instructions)	13	
	14	Investment interest. Attach Form 4952 if required. (See instructions.)	14	
	15	Add lines 10 through 14	15	25,671.
<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 instructions	16	5,540. STMT 6
	17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	
	18	Carryover from prior year	18	
	19	Add lines 16 through 18	19	5,540.
<b>Casualty and Theft Losses</b>	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	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	
	23	Other expenses - investment, safe deposit box, etc. List type and amount ▶	23	
	24	Add lines 21 through 23	24	
	25	Enter amount from Form 1040, line 38	25	
	26	Multiply line 25 by 2% (.02)	26	
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	
	28	Other - from list in instructions. List type and amount ▶	28	
<b>Other Miscellaneous Deductions</b>				
<b>Total Itemized Deductions</b>	29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40	29	60,628.
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>		

**SCHEDULE B**  
**(Form 1040A or 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Interest and Ordinary Dividends**

▶ **Attach to Form 1040A or 1040.**

▶ **See instructions.**

OMB No. 1545-0074

**2011**  
Attachment  
Sequence No. **08**

Name(s) shown on return

Your social security number

**JOSEPH R BIDEN JR. & JILL T BIDEN**

**Part I**  
**Interest**

- 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 instructions and list this interest first. Also, show that buyer's social security number and address ▶

MASS MUTUAL LIFE

NEW CASTLE COUNTY SCHOOL EMPLOYEE FCU

UNITED STATES SENATE FEDERAL CREDIT UNION

WILMINGTON SAVINGS FUND SOCIETY

MASS MUTUAL LIFE

MASS MUTUAL LIFE

MASS MUTUAL LIFE

MASS MUTUAL LIFE

**Note.** If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

**Amount**

36.

7.

6.

2,701.

12.

15.

42.

8.

- 2** Add the amounts on line 1

2,827.

- 3** Excludable interest on series EE and I U.S. savings bonds issued after 1989.

Attach Form 8815

- 4** Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶

2,827.

**Note.** If line 4 is over \$1,500, you must complete Part III.

**Part II**  
**Ordinary Dividends**

- 5** List name of payer ▶

**Note.** If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

**Amount**

- 6** Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶

**Note.** If line 6 is over \$1,500, you must complete Part III.

**Part III**  
**Foreign Accounts and Trusts**

You must complete this part if you (a) had over \$1,500 of taxable 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.

- 7a** At any time during 2011, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions

If "Yes," are you required to file Form TD F 90-22.1 to report that financial interest or signature authority? See Form TD F 90-22.1 and its instructions for filing requirements and exceptions to those requirements

- b** If you are required to file Form TD F 90-22.1, enter the name of the foreign country where the financial account is located ▶

- 8** During 2011, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

If "Yes," you may have to file Form 3520. See instructions

**Yes**

**No**

X

X

127501  
11-02-11

LHA For Paperwork Reduction Act Notice, see separate instructions.

Schedule B (Form 1040A or 1040) 2011



**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 separate instructions.

OMB No. 1545-0074

**2011**

 Attachment  
Sequence No. **13**

Name(s) shown on return

Your social security number

**JOSEPH R BIDEN JR. & JILL T BIDEN**
**A** Did you make any payments in 2011 that would require you to file Form(s) 1099? (see instructions)

☐ Yes ☒ No

**B** If "Yes," did you or will you file all required Forms 1099?

☐ Yes ☐ No

**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.

**Caution.** For each rental property listed on line 1, check the box in the last column only if you owned that property as a member of a qualified joint venture (QJV) reporting income not subject to self-employment tax.

1	Physical address of each property-street, city, state, ZIP	Type-from list below	2	For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	WILMINGTON, DE	1	A	365			
B			B				
C			C				

**Type of Property:**

- |                           |                              |             |                    |
|---------------------------|------------------------------|-------------|--------------------|
| 1 Single Family Residence | 3 Vacation/Short-Term Rental | 5 Land      | 7 Self-Rental      |
| 2 Multi-Family Residence  | 4 Commercial                 | 6 Royalties | 8 Other (describe) |

**Income:**

		Properties		
		A	B	C
3a	Merchant card and third party payments. For 2011, enter -0-	0.		
b	Payments not reported to you on line 3a	20,900.		
4	Total not including amounts on line 3a that are not income (see instructions)	20,900.		

**Expenses:**

5	Advertising	5			
6	Auto and travel (see instructions)	6			
7	Cleaning and maintenance	7			
8	Commissions	8			
9	Insurance	9			
10	Legal and other professional fees	10			
11	Management fees	11			
12	Mortgage interest paid to banks, etc. (see instructions)	12	5,799.		
13	Other interest	13			
14	Repairs	14			
15	Supplies	15			
16	Taxes	16	2,448.		
17	Utilities	17			
18	Depreciation expense or depletion	18			
19	Other (list) ▶	19			
20	Total expenses. Add lines 5 through 19	20	8,247.		
21	Subtract line 20 from line 4. If result is a (loss), see instructions to find out if you must file Form 6198	21	12,653.		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	( )	( )	( )

23a	Total of all amounts reported on line 3a for all rental properties	23a		
b	Total of all amounts reported on line 3a for all royalty properties	23b		
c	Total of all amounts reported on line 4 for all rental properties	23c	20,900.	
d	Total of all amounts reported on line 4 for all royalty properties	23d		
e	Total of all amounts reported on line 12 for all properties	23e	5,799.	
f	Total of all amounts reported on line 18 for all properties	23f		
g	Total of all amounts reported on line 20 for all properties	23g	8,247.	

24	Income. Add positive amounts shown on line 21. Do not include any losses	24	12,653.
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	( )
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	26	12,653.



# Alternative Minimum Tax - Individuals

OMB No. 1545-0074

**2011**  
Attachment  
Sequence No. **32**

▶ Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

**JOSEPH R BIDEN JR. & JILL T BIDEN**

## Part I Alternative Minimum Taxable Income

1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	318,407.
2 Medical and dental. Enter the <b>smaller</b> of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3 Taxes from Schedule A (Form 1040), line 9	3	29,417.
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4	
5 Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6 Skip this line. It is reserved for future use	6	
7 Tax refund from Form 1040, line 10 or line 21	7	
8 Investment interest expense (difference between regular tax and AMT)	8	
9 Depletion (difference between regular tax and AMT)	9	
10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11 Alternative tax net operating loss deduction	11	
12 Interest from specified private activity bonds exempt from the regular tax	12	
13 Qualified small business stock (7% of gain excluded under section 1202)	13	
14 Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17 Disposition of property (difference between AMT and regular tax gain or loss)	17	
18 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19 Passive activities (difference between AMT and regular tax income or loss) <b>SEE STATEMENT 7</b>	19	0.
20 Loss limitations (difference between AMT and regular tax income or loss)	20	
21 Circulation costs (difference between regular tax and AMT)	21	
22 Long-term contracts (difference between AMT and regular tax income)	22	
23 Mining costs (difference between regular tax and AMT)	23	
24 Research and experimental costs (difference between regular tax and AMT)	24	
25 Income from certain installment sales before January 1, 1987	25	
26 Intangible drilling costs preference	26	
27 Other adjustments, including income-based related adjustments	27	
28 <b>Alternative minimum taxable income.</b> Combine lines 1 through 27. (If married filing separately and line 28 is more than \$223,900, see instructions.)	28	347,824.

## Part II Alternative Minimum Tax (AMT)

29 Exemption. (If you were under age 24 at the end of 2011, see instructions.) IF your filing status is ... AND line 28 is not over ... THEN enter on line 29 ... Single or head of household ..... \$112,500 ..... \$48,450 Married filing jointly or qualifying widow(er) ..... 150,000 ..... 74,450 Married filing separately ..... 75,000 ..... 37,225 } <b>STMT 8</b>	29	24,994.
If line 28 is over the amount shown above for your filing status, see instructions.		
30 Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30	322,830.
31 • If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 54 here. • <b>All others:</b> If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	31	86,892.
32 Alternative minimum tax foreign tax credit (see instructions)	32	
33 Tentative minimum tax. Subtract line 32 from line 31	33	86,892.
34 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	34	80,087.
35 <b>AMT.</b> Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	6,805.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 6251 (2011)



**Part III Tax Computation Using Maximum Capital Gains Rates**

Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in the instructions.

<b>36</b> Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for this line		<b>36</b>
<b>37</b> Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	<b>37</b>	
<b>38</b> Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	<b>38</b>	
<b>39</b> If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	<b>39</b>	
<b>40</b> Enter the <b>smaller</b> of line 36 or line 39		<b>40</b>
<b>41</b> Subtract line 40 from line 36		<b>41</b>
<b>42</b> If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result		<b>42</b>
<b>43</b> Enter: <ul style="list-style-type: none"> <li>• \$69,000 if married filing jointly or qualifying widow(er),</li> <li>• \$34,500 if single or married filing separately, or</li> <li>• \$46,250 if head of household.</li> </ul>	<b>43</b>	
<b>44</b> Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	<b>44</b>	
<b>45</b> Subtract line 44 from line 43. If zero or less, enter -0-	<b>45</b>	
<b>46</b> Enter the <b>smaller</b> of line 36 or line 37	<b>46</b>	
<b>47</b> Enter the <b>smaller</b> of line 45 or line 46	<b>47</b>	
<b>48</b> Subtract line 47 from line 46	<b>48</b>	
<b>49</b> Multiply line 48 by 15% (.15)		<b>49</b>
If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50.		
<b>50</b> Subtract line 46 from line 40	<b>50</b>	
<b>51</b> Multiply line 50 by 25% (.25)		<b>51</b>
<b>52</b> Add lines 42, 49, and 51		<b>52</b>
<b>53</b> If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result		<b>53</b>
<b>54</b> Enter the <b>smaller</b> of line 52 or line 53 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31		<b>54</b>

Form 6251 (2011)

## ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s)	Social Security Number
JOSEPH R BIDEN JR. & JILL T BIDEN	

[illegible]



**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

**2011**  
Attachment  
Sequence No. **44**

Name of employer

Social security number

Employer identification number

**JOSEPH R BIDEN JR. & JILL T BIDEN**

**A** Did you pay **any one** household employee cash wages of \$1,700 or more in 2011? (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 2011 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 2010 or 2011 to **all** household employees? (Do not count cash wages paid in 2010 or 2011 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** **Stop.** Do not file this schedule.  
☐ **Yes.** Skip lines 1-7 and go to line 8. (Calendar year taxpayers having no household employees in 2011 **do not** have to complete this form for 2011.)

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

1	Total cash wages subject to social security taxes	1	7,200.	
2	Social security taxes. Multiply line 1 by 10.4% (.104)	2	749.	
3	Total cash wages subject to Medicare taxes	3	7,200.	
4	Medicare taxes. Multiply line 3 by 2.9% (.029)	4	209.	
5	Federal income tax withheld, if any	5		
6	Total social security, Medicare, and federal income taxes. Add lines 2, 4, and 5	6	958.	

**7** Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2010 or 2011 to **all** household employees? (Do not count cash wages paid in 2010 or 2011 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** **Stop.** Include the amount from line 6 above on Form 1040, line 59a. If you are not required to file Form 1040, see the line 7 instructions.  
☒ **Yes.** Go to line 8.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Schedule H (Form 1040) 2011

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

8 Did you pay unemployment contributions to only one state? (If you paid contributions to a credit reduction state, see instructions and check "No.")

	Yes	No
8	<input checked="" type="checkbox"/>	
9	<input checked="" type="checkbox"/>	
10	<input checked="" type="checkbox"/>	

9 Did you pay all state unemployment contributions for 2011 by April 17, 2012? Fiscal year filers see instructions

10 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?

**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**

11 Name of the state where you paid unemployment contributions	DE		
12 Contributions paid to your state unemployment fund	12	22.	
13 Total cash wages subject to FUTA tax		13	7,000.
14 FUTA tax. Multiply the portion of the wages on line 13 paid before July 1 by .008. Multiply the portion of the wages on line 13 paid after June 30 by .006. Enter the sum of those two amounts on line 14, skip Section B, and go to line 23		14	50.

**Section B**

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

(a) Name of state	(b) Taxable wages (as defined in state act)	(c) State experience rate period		(d) State experience rate	(e) Multiply col. (b) by .054	(f) Multiply col. (b) by col. (d)	(g) Subtract col. (f) from col. (e). If zero or less, enter -0-	(h) Contributions paid to state unemployment fund
		From	To					

16 Totals	16	
17 Add columns (g) and (h) of line 16	17	
18 Total cash wages subject to FUTA tax (see the line 13 instructions)	18	
19 Multiply the portion of the wages on line 18 paid before July 1 by 6.2% (.062). Multiply the portion of the wages on line 18 paid after June 30 by 6.0% (.060). Enter the sum of those amounts on line 19	19	
20 Multiply line 18 by 5.4% (.054)	20	
21 Enter the <b>smaller</b> of line 17 or line 20 (Employers in a credit reduction state must use the worksheet and check here)	21	<input type="checkbox"/>
22 FUTA tax. Subtract line 21 from line 19. Enter the result here and go to line 23	22	

**Part III Total Household Employment Taxes**

23 Enter the amount from line 6. If you checked the "Yes" box on line C of page 1, enter -0-	23	958.
24 Add line 14 (or line 22) and line 23	24	1,008.

25 Are you required to file Form 1040?  
☒ **Yes.** Stop. Include the amount from line 24 above on Form 1040, line 59a. **Do not** complete Part IV below.  
☐ **No.** You may have to complete Part IV. See instructions for details.

**Part IV Address and Signature - Complete this part only if required. See the line 25 instructions.**

Address (number and street) or P.O. box if mail is not delivered to street address	Apt., room, or suite no.
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 Use Only	
Print/Type preparer's name	Preparer's signature
Firm's name	Date
Firm's address	Check <input type="checkbox"/> if self-employed PTIN
	Firm's EIN
	Phone no.



FORM 1040	PENSIONS AND ANNUITIES	STATEMENT	1
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## OFFICE OF PENSIONS

AMOUNT RECEIVED THIS YEAR	31,995.	
NONTAXABLE AMOUNT	169.	
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D		
		31,826.
TOTAL INCLUDED IN FORM 1040, LINE 16B		31,826.

FORM 1040

SOCIAL SECURITY BENEFITS WORKSHEET

STATEMENT

2

## CHECK ONLY ONE BOX:

- A. SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)  
 X B. MARRIED FILING JOINTLY  
 C. MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE  
 AT ANY TIME DURING 2011  
 D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE  
 FOR ALL OF 2011

1. ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR  
 FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON  
 FORM 1040, LINE 20A. . . . . 28,454.  
 IF YOU CHECKED BOX B: TAXPAYER AMOUNT . . . . . 28,454.  
 SPOUSE AMOUNT . . . . .
2. ENTER ONE HALF OF LINE 1 . . . . . 14,227.
3. ADD THE AMOUNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 14,  
 15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT  
 INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099 . . . . . 354,849.
4. ENTER THE AMOUNT OF ANY EXCLUSIONS FROM FOREIGN EARNED  
 INCOME, FOREIGN HOUSING, INCOME FROM U.S. POSSESSIONS,  
 OR INCOME FROM PUERTO RICO BY BONA FIDE RESIDENTS OF  
 PUERTO RICO THAT YOU CLAIMED . . . . .
5. ADD LINES 2, 3, AND 4. . . . . 369,076.
6. ADD THE AMOUNTS ON FORM 1040, LINES 23 THROUGH LINE 32,  
 AND ANY WRITE-IN ADJUSTMENTS YOU ENTERED ON THE DOTTED  
 LINE NEXT TO LINE 36. . . . . 0.
7. SUBTRACT LINE 6 FROM LINE 5 . . . . . 369,076.
8. ENTER: \$25,000 IF YOU CHECKED BOX A OR D, OR  
 \$32,000 IF YOU CHECKED BOX B, OR  
 \$-0- IF YOU CHECKED BOX C. . . . . 32,000.
9. IS THE AMOUNT ON LINE 8 LESS THAN THE AMOUNT ON LINE 7?  
 [ ] NO. STOP. NONE OF YOUR SOCIAL SECURITY BENEFITS ARE  
 TAXABLE. ENTER -0- ON FORM 1040, LINE 20B. IF YOU ARE  
 MARRIED FILING SEPARATELY AND YOU LIVED APART FROM YOUR  
 SPOUSE FOR ALL OF 2011, BE SURE YOU ENTERED 'D' TO THE  
 RIGHT OF THE WORD "BENEFITS" ON LINE 20A.  
 [X] YES. SUBTRACT LINE 8 FROM LINE 7 . . . . . 337,076.
10. ENTER \$9,000 IF YOU CHECKED BOX A OR D,  
 \$12,000 IF YOU CHECKED BOX B  
 \$-0- IF YOU CHECKED BOX C . . . . . 12,000.
11. SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0-. . . . . 325,076.
12. ENTER THE SMALLER OF LINE 9 OR LINE 10 . . . . . 12,000.
13. ENTER ONE HALF OF LINE 12. . . . . 6,000.
14. ENTER THE SMALLER OF LINE 2 OR LINE 13 . . . . . 6,000.
15. MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0- . . . . . 276,315.
16. ADD LINES 14 AND 15. . . . . 282,315.
17. MULTIPLY LINE 1 BY 85% (.85) . . . . . 24,186.
18. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17 . . . . . 24,186.  
 \* ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B



FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 3

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T UNITED STATES SENATE	225,521.	65,069.	12,675.		4,486.	3,270.
S NORTHERN VIRGINIA COMMUNITY COLLEGE	82,022.	12,741.	4,181.		3,465.	1,196.
TOTALS	307,543.	77,810.	16,856.		7,951.	4,466.

FORM 1040 FEDERAL INCOME TAX WITHHELD STATEMENT 4

T S DESCRIPTION	AMOUNT
T UNITED STATES SENATE	65,069.
S NORTHERN VIRGINIA COMMUNITY COLLEGE	12,741.
S OFFICE OF PENSIONS	2,739.
T WITHHOLDING FROM FORM 1099-SSA	7,114.
TOTAL TO FORM 1040, LINE 62	87,663.

SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 5

DESCRIPTION	AMOUNT
OFFICE OF PENSIONS	553.
UNITED STATES SENATE	12,675.
NORTHERN VIRGINIA COMMUNITY COLLEGE	4,181.
DELAWARE PRIOR YEAR BALANCE DUE AND EXTENSION PAYMENTS - SPOUSE	690.
VIRGINIA PRIOR YEAR BALANCE DUE AND EXTENSION PAYMENTS - SPOUSE	481.
TOTAL TO SCHEDULE A, LINE 5	18,580.

SCHEDULE A	CASH CONTRIBUTIONS	STATEMENT	6
DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	
CHESAPEAKE CLIMATE ACTION NETWORK	50.		
BBHI	360.		
ANNUAL CATHOLIC APPEAL FOR THE DIOCESE OF WILMINGTON, DE	1,000.		
ST. JOSEPH'S ON THE BRANDYWINE	100.		
NORTHERN VIRGINIA COMMUNITY COLLEGE ALUMNI SCHOLARSHIP FUND	1,080.		
WORLD FOOD PROGRAM USA	1,000.		
WESTMINSTER PRESBYTERIAN CHURCH	500.		
YWCA OF DELAWARE	500.		
DELAWARE BOOTS ON THE GROUND	200.		
PHILADELPHIA CHAPTER ALS ASSOCIATION	200.		
WOUNDED WARRIOR PROJECT	50.		
PFLAG	50.		
ST. LOUIS UNIVERSITY HIGH SCHOOL	100.		
WORLD FOOD PROGRAMME	350.		
SUBTOTALS	5,540.		
TOTAL TO SCHEDULE A, LINE 16		5,540.	

FORM 6251	PASSIVE ACTIVITIES	STATEMENT	7
NAME OF ACTIVITY	FORM	NET INCOME (LOSS) AMT REGULAR	ADJUSTMENT
COTTAGE - WILMINGTON, DE	SCH E	12,653. 12,653.	
TOTAL TO FORM 6251, LINE 19			



FORM 6251

EXEMPTION WORKSHEET

STATEMENT 8

1	ENTER: \$48,450 IF SINGLE OR HEAD OF HOUSEHOLD; \$74,450 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$37,225 IF MARRIED FILING SEPARATELY. . . . .	74,450.
2	ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 28 . . . . .	347,824.
3	ENTER: \$112,500 IF SINGLE OR HEAD OF HOUSEHOLD; \$150,000 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$75,000 IF MARRIED FILING SEPARATELY . . . . .	150,000.
4	SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS ENTER -0- . . . . .	197,824.
5	MULTIPLY LINE 4 BY 25% (.25). . . . .	49,456.
6	SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0-. IF ANY OF THE THREE CONDITIONS UNDER CERTAIN CHILDREN UNDER AGE 24 APPLY TO YOU, COMPLETE LINES 7 THROUGH 10. OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30 . . . . .	24,994.
7	MINIMUM EXEMPTION AMOUNT FOR CERTAIN CHILDREN UNDER AGE 24. .	
8	ENTER YOUR EARNED INCOME, IF ANY. . . . .	
9	ADD LINES 7 AND 8 . . . . .	
10	ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251, LINE 29, AND GO TO FORM 6251, LINE 30 . . . . .	

SCHEDULE H		FUTA TAX LINE 14		STATEMENT	9
TIME PERIOD	LINE 13 WAGES	PERCENTAGE	SUM		
BEFORE 7/1/2011	4,050.	X .008	32.		
AFTER 6/30/2011	2,950.	X .006	18.		
SCHEDULE H, LINE 14		TOTAL	50.		



2011 R

DELAWARE INDIVIDUAL RESIDENT  
INCOME TAX RETURN  
FORM 200-01

or Fiscal year beginning \_\_\_\_\_ and ending \_\_\_\_\_

Your Social Security No. \_\_\_\_\_

Spouse's Social Security No. \_\_\_\_\_

Your Last Name, First Name and Middle Initial \_\_\_\_\_

Jr., Sr., III., etc. \_\_\_\_\_

BIDEN

JOSEPH R

JR

Spouse's Last Name, Spouse's First Name \_\_\_\_\_

Jr., Sr., III., etc. \_\_\_\_\_

BIDEN

JILL T

Present Home Address (Number and Street) \_\_\_\_\_

Apt. # \_\_\_\_\_

City, State, ZIP Code \_\_\_\_\_

WILMINGTON, DE

## FILING STATUS (MUST CHECK ONE)

1. ☐ Single, Divorced, Widow(er) 3. ☐ Married & Filing Separate Forms 5. ☐ Head of Household  
2. ☐ Joint 4. ☒ Married & Filing Combined Separate on this form

Form DE2210  
Attached ☐

If you were a part-year resident in 2011, give the dates you resided in Delaware.

From \_\_\_\_\_ 2011 To \_\_\_\_\_ 2011  
Month Day Month Day

Column A is for Spouse information, Filing Status 4 only. All other filing statuses use Column B.

	Column A	Column B
1. DELAWARE ADJUSTED GROSS INCOME. Enter amount from Page 2, Line 42	110,386.	225,521.
2a. If you elect the DELAWARE STANDARD DEDUCTION check here <input type="checkbox"/> Filing Statuses 1, 3 & 5 Enter \$3250 in Column B Filing Status 4 Enter \$3250 in Column A and in Column B Filing Status 2 Enter \$6500 in Column B If you elect the DELAWARE ITEMIZED DEDUCTIONS check here <input checked="" type="checkbox"/> Filing Statuses 1, 2, 3 and 5, enter Itemized Deductions from Page 2, Line 48 in Column B Filing status 4 enter Itemized Deductions from Page 2, Line 48 in Columns A and B	22,071.	21,025.
3. ADDITIONAL STANDARD DEDUCTIONS (Not Allowed with Itemized Deductions - see instructions) CHECK BOX(ES) Column A - if SPOUSE was 65 or over <input type="checkbox"/> Blind <input type="checkbox"/> Column B - if YOU were 65 or over <input type="checkbox"/> Blind <input type="checkbox"/> Multiply the number of boxes checked above by \$2500. If you are filing a combined separate return (Filing status 4) enter the total for each appropriate column. All others enter total in Column B		
4. TOTAL DEDUCTIONS - Add Lines 2 & 3 and enter here	22,071.	21,025.
5. TAXABLE INCOME - Subtract Line 4 from Line 1, and Compute Tax on this Amount	88,315.	204,496.
6. Tax Liability from Tax Rate Table/Schedule	4,911.	12,986.
7. Tax on Lump Sum Distribution (Form 329)		
8. TOTAL TAX - Add Lines 6 and 7 and enter here	4,911.	12,986.
PERSONAL CREDITS If you are Filing Status 3, see instructions. If you use Filing Status 4, enter the total for each appropriate column. All others enter total in Column B.		
9a. Enter number of exemptions claimed on Federal return 2 x \$110	110.	110.
On Line 9a, enter the number of exemptions for: Column A 1 Column B 1		
9b. CHECK BOX(ES) Spouse 60 or over (Column A) <input checked="" type="checkbox"/> Self 60 or over (Column B) <input checked="" type="checkbox"/> Enter number of boxes checked on Line 9b. 2 x \$110	110.	110.
10. Tax imposed by State of STMT 1. (Must attach copy of DE Schedule I and other state return)	3,614.	
11. Vol. Firefighter Co. # - Spouse (Column A) Self (Column B) Enter credit amount		
12. Other Non-Refundable Credits (see instructions)		
13. Child Care Credit. Must attach Form 2441. (Enter 50% of Federal credit)		
14. Earned Income Tax Credit. See instructions on Page 8 for ALL required documentation		
15. Total Non-Refundable Credits. Add Lines 9a, 9b, 10, 11, 12, 13 & 14 and enter here	3,834.	220.
16. BALANCE. Subtract Line 15 from Line 8. If Line 15 is greater than Line 8, enter "0" (Zero)	1,077.	12,766.
17. Delaware Tax Withheld (Attach W2s/1099s)	553.	12,675.
18. 2011 Estimated Tax Paid & Payments with Extensions		
19. S Corp Payments and Refundable Business Credits		
20. 2011 Real Estate Estimated Payments		
21. TOTAL Refundable Credits. Add Lines 17, 18, 19, and 20 and enter here	553.	12,675.
22. BALANCE DUE. If Line 16 is greater than Line 21, subtract 21 from 16 and enter here	524.	91.
23. OVERPAYMENT. If Line 21 is greater than Line 16, subtract 16 from 21 and enter here		
24. CONTRIBUTIONS TO SPECIAL FUNDS If electing a contribution, complete and attach DE Schedule III		
25. AMOUNT OF LINE 23 TO BE APPLIED TO 2012 ESTIMATED TAX ACCOUNT ENTER		
26. PENALTIES AND INTEREST DUE. If Line 22 is greater than \$400, see estimated tax instructions ENTER		
27. NET BALANCE DUE (For Filing Status 4, see instructions, page 9) For all other filing statuses, enter Line 22 plus Lines 24 and 26 PAY IN FULL		615.
28. NET REFUND (For Filing Status 4, see instructions, page 9) ZERO DUE/TO BE REFUNDED		

For all other filing statuses, subtract Lines 24, 25 and 26 from Line 23

ATTACH LABEL HERE

STAPLE W-2 FORMS HERE

STAPLE CHECK HERE

**COLUMNS:** Column A is reserved for the spouse of those couples choosing filing status 4. (Reconcile your Federal totals to the appropriate individual. See instructions.) Taxpayers using filing statuses 1, 2, 3, or 5 are to complete Column B only.

**MODIFICATIONS TO FEDERAL ADJUSTED GROSS INCOME**

Filing Status 4 ONLY Spouse Information COLUMN A	All other filing statuses You or You plus Spouse COLUMN B
--	---

**SECTION A - ADDITIONS (+)**

29. Enter Federal AGI amount from Federal 1040, Line 37; 1040A, Line 21; or 1040EZ, Line 4	29	122,886.	256,149.
30. Interest on State & Local obligations other than Delaware	30		
31. Fiduciary adjustment, oil depletion	31		
32. TOTAL - Add Lines 30 and 31	32		

33. Subtotal. Add Lines 29 and 32	33	122,886.	256,149.
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**SECTION B - SUBTRACTIONS (-)**

34. Interest received on U.S. Obligations	34		
35. Pension/Retirement Exclusions (For a definition of eligible income, see instructions)	35	12,500.	6,442.
36. Delaware State tax refund, fiduciary adjustment, work opportunity tax credit, Travelink Program, Delaware NOL Carry forward. - please see instructions	36		
37. Taxable Soc Sec/RR Retirement Benefits/Higher Educ. Excl/Certain Lump Sum Dist. (See instr.)	*37		24,186.
38. SUBTOTAL. Add Lines 34, 35, 36 and 37 and enter here * STMT 2	38	12,500.	30,628.
39. Subtotal. Subtract Line 38 from Line 33	39	110,386.	225,521.
40. Exclusion for certain persons 60 and over or disabled (See instructions)	40		
41. TOTAL - Add Lines 38 and 40	41	12,500.	30,628.
42. DELAWARE ADJUSTED GROSS INCOME. Subtract Line 41 from Line 33. Enter here and on Page 1, Line 1	42	110,386.	225,521.

**SECTION C - ITEMIZED DEDUCTIONS (MUST ATTACH FEDERAL SCHEDULE A) If Columns A and B are used and you are unable to specifically allocate deductions between spouses, you must prorate in accordance with income.**

43. Enter total Itemized Deductions from Schedule A, Federal Form 1040, Line 29	43	26,928.	33,700.
44. Enter Foreign Taxes Paid (See instructions)	44		
45. Enter Charitable Mileage Deduction (See instructions)	45		
46. SUBTOTAL - Add Lines 43, 44, and 45 and enter here	46	26,928.	33,700.
47a. Enter State Income Tax included in Line 43 above (See instructions)	47a	4,857.	12,675.
47b. Enter Form 700 Tax Credit Adjustment (See instructions)	47b		
48. TOTAL - Subtract Line 47a and 47b from Line 46. Enter here and on Page 1, Line 2 (See instructions)	48	22,071.	21,025.

**SECTION D - DIRECT DEPOSIT INFORMATION** If you would like your refund deposited directly to your checking or savings account, complete boxes a, b, c and d below. See instructions for details.

- a. Routing Number \_\_\_\_\_ b. Type: ☐ Checking ☐ Savings
- c. Account Number \_\_\_\_\_
- d. Is this refund going to or through an account that is located outside of the United States? ☐ Yes ☐ No

**Note:** If your refund is adjusted by \$100.00 or more, a paper check will be issued and mailed to the address on your return.

**DATE OF DEATH**

Column A	Column B
SPOUSE	TAXPAYER
/ /	/ /
Month Day Year	Month Day Year

**BE SURE TO SIGN YOUR RETURN BELOW AND KEEP A COPY FOR YOUR RECORDS**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and believe it is true, correct and complete.

Your Signature	Date	Signature of Paid Preparer	Date
	4-10-12	WALTER H DEYHLE, CPA	4/10/12
Spouse's Signature (if filing joint or combined return)	Date	Address-ZIP Code	
	4-11-12	GELMAN, ROSENBERG & FREEDMAN	
Home Phone	Business Phone	Business Phone	EIN, SSN OR PTIN
E-Mail Address		E-Mail Address	

**NET BALANCE DUE (LINE 27):**

DELAWARE DIVISION OF REVENUE  
P.O. BOX 508  
WILMINGTON, DE 19899-0508

**NET REFUND DUE (LINE 28):**

DELAWARE DIVISION OF REVENUE  
P.O. BOX 8765  
WILMINGTON, DE 19899-8765

**ZERO (LINE 28):**

DELAWARE DIVISION OF REVENUE  
P.O. BOX 8711  
WILMINGTON, DE 19899-8711

**MAKE CHECK PAYABLE TO: DELAWARE DIVISION OF REVENUE**

**PLEASE REMEMBER TO ATTACH APPROPRIATE SUPPORTING SCHEDULES WHEN FILING YOUR RETURN**



# 2011 DELAWARE RESIDENT SCHEDULES

Name(s): **JOSEPH R BIDEN JR. & JILL T BIDEN**

Social Security Number: \_\_\_\_\_

**COLUMNS:** Column A is reserved for the spouse of those couples choosing filing status 4. (Reconcile your Federal totals to the appropriate individual. See Page 9 worksheet.) Taxpayers using filing statuses 1, 2, 3, or 5 are to complete Column B only.

Filing Status 4 ONLY Spouse Information COLUMN A	All other filings statuses You or You plus Spouse COLUMN B
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## DE SCHEDULE I - CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE

See the instructions and complete the worksheet on Page 7 prior to completing DE Schedule I.

Enter the credit in **HIGHEST** to **LOWEST** amount order.

1. Tax imposed by State of <u>VA</u> (enter 2 character state name) .....	1	<u>3,614.</u>	
2. Tax imposed by State of <u>VA</u> (enter 2 character state name) .....	2		
3. Tax imposed by State of _____ (enter 2 character state name) .....	3		
4. Tax imposed by State of _____ (enter 2 character state name) .....	4		
5. Tax imposed by State of _____ (enter 2 character state name) .....	5		
6. Enter the total here and on EZ Return, Line 10 or Resident Return, Line 10. <b>You must attach a copy of the other state return(s) with your Delaware tax return</b> .....	6	<u>3,614.</u>	

## DE SCHEDULE II - EARNED INCOME TAX CREDIT (EITC)

Complete the Earned Income Tax Credit for each child **YOU CLAIMED** the Earned Income Credit for on your federal return.

Qualifying Child Information	CHILD 1	CHILD 2	CHILD 3
7. Child's Name (First and Last Name) .....			
8. Child's SSN .....			
9. Child's Year of Birth .....			
10. Was the child under age 24 at the end of 2011, a student, and younger than you (or your spouse, if filing jointly)? .....	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
11. Was the child permanently and totally disabled during any part of 2011? ...	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
12. Delaware State Income Tax from Line 8 (enter higher tax amount from Column A or B) .....			
13. Federal earned income credit from Federal Form 1040, Line 64a; Form 1040A, Line 38a; Form 1040 EZ, Line 8a .....			
14. Delaware EITC Percentage (20%) .....			<u>.20</u>
15. <b>Multiply Line 13 by Line 14</b> .....			
16. Enter the Smaller of Line 12 or Line 15 above. Enter here and on EZ Return, Line 11 or Resident Return, Line 14 .....			

See the instructions on Page 8 for **ALL** required documentation to attach.

## DE SCHEDULE III - CONTRIBUTIONS TO SPECIAL FUNDS

See Page 13 for a description of each worthwhile fund listed below.

17. A. Non-Game Wildlife		F. Diabetes Educ.		K. Ovarian Cancer Fund	
B. U.S. Olympics		G. Veteran's Home		L. 21st Fund for Children	
C. Emergency Housing		H. DE National Guard		M. White Clay Creek	
D. Breast Cancer Educ.		I. Juv. Diabetes Fund			
E. Organ Donations		J. Mult. Sclerosis Soc.			

Enter the total Contribution amount here and on EZ Return, Line 19 or Resident Return, Line 24 .....

17                     

This page **MUST** be sent in with your Delaware return if any of the sc \_\_\_\_\_ completed.

DE 200-01	CREDIT FOR TAX IMPOSED BY OTHER STATE	STATEMENT	1
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## STATE OF VIRGINIA, SPOUSE

DELAWARE AGI (FORM 200-01 OR 200-02, PAGE 1)	110,386.
VIRGINIA ADJUSTED GROSS INCOME	82,022.
DELAWARE TAX (FORM 200-01 OR 200-02, PAGE 1)	4,911.
TAX IMPOSED BY STATE OF VIRGINIA	3,614.
"PERCENTAGE FACTOR" = OTHER STATE'S AGI DIVIDED BY DELAWARE AGI	
= 82,022. / 110,386.	.743047
"PRO-RATA TAX" = DELAWARE TAX TIMES PERCENTAGE FACTOR	
= 4,911. X .743047	3,649.
AMOUNT OF CREDIT = LESSER OF: (A) DELAWARE TAX	
(B) TAX IMPOSED BY OTHER STATE	
(C) PRO-RATA TAX	

AMOUNT OF CREDIT, STATE OF VIRGINIA	3,614.
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TOTAL TO FORM 200-01, PAGE 1, LINE 10	3,614.
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DE 200-01 SOC SEC/RR RETIREMENT/HIGHER EDUC EXCL/LUMP SUM DIST	STATEMENT	2
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DESCRIPTION	SPOUSE	TAXPAYER OR JOINT
SOCIAL SECURITY BENEFITS	0.	24,186.
TOTAL TO FORM DE 200-01, PAGE 2, LINE 36	0.	24,186.



DE 200-01	DELAWARE ITEMIZED DEDUCTION WORKSHEET	STATEMENT	3
	SPOUSE	TAXPAYER	TOTAL
1A. MEDICAL EXPENSES, SCHEDULE A, LINE 4.			
B. TOTAL TAXES, SCHEDULE A, LINE 9 . . .	11,323.	18,094.	29,417.
C. INTEREST PAID, SCHEDULE A, LINE 15 .	12,835.	12,836.	25,671.
D. CONTRIBUTIONS, SCHEDULE A, LINE 19 .	2,770.	2,770.	5,540.
E. CASUALTY & THEFT, SCHEDULE A, LN 20 .			
F. MISCELLANEOUS, SCHEDULE A, LINE 27 .			
G. OTHER MISC., SCHEDULE A, LINE 28 . .			
TOTAL ITEMIZED DEDUCTIONS . . . . .	26,928.	33,700.	60,628.
TOTAL TO FORM 200-01, PAGE 2, LINE 42	26,928.	33,700.	

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DE 200-01 OTHER STATE TAXES SUBTRACTED FROM ITEMIZED DEDUCTIONS STATEMENT 4

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VIRGINIA

	SPOUSE	TAXPAYER
TAXES INCLUDED ON SCHEDULE A	0.	0.
TAX LIABILITY		0.
LESSER OF SCH A TAXES OR TAX LIABILITY	0.	0.

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VIRGINIA

	SPOUSE	TAXPAYER
TAXES INCLUDED ON SCHEDULE A	4,662.	0.
TAX LIABILITY	3,614.	
LESSER OF SCH A TAXES OR TAX LIABILITY	3,614.	0.
TOTAL OTHER STATE TAXES INCLUDED ON LINE 46A	3,614.	0.



2011  
Virginia Nonresident Income Tax Return  
Due May 1, 2012

Staple Here

Attach a complete copy of your federal tax return and all other required Virginia attachments.

First Name <b>JILL</b>	MI <b>T</b>	Last Name <b>BIDEN</b>	Suffix	Your Social Security Number	<input type="checkbox"/> Check if deceased
Spouse's First Name (Filing Status 2 Only)	MI	Last Name	Suffix	Spouse's Social Security Number	<input type="checkbox"/> Check if deceased
Present Home Address (Number and Street or Rural Route)				State of Residence <b>DELAWARE</b>	
City, Town or Post Office <b>WILMINGTON</b>				State <b>DE</b>	ZIP Code
Important - Name of Virginia City or County in which principal place of business, employment or income source is located <input type="checkbox"/> City OR <input type="checkbox"/> County				Locality Code from Instructions	
Your Home Phone Number		Your Business Phone Number		Spouse's Business Phone Number	
Preparer's PTIN	Filing Election	Code	<input checked="" type="checkbox"/> I (we) authorize the Department of Taxation to discuss my (our) return with my (our) preparer.		
<b>Check Applicable Boxes:</b> <input type="checkbox"/> Amended Return <input type="checkbox"/> Check if Result of NOL <input type="checkbox"/> Name(s) And Address Different Than Shown on 2010 VA Return <input type="checkbox"/> Overseas on Due Date <input type="checkbox"/> Dependent on Another's Return <input type="checkbox"/> Qualifying Farmer, Fisherman or Merchant Seaman EIC Claimed on federal return \$ <u>                    </u> .00					

## EXEMPTIONS (Enter Number below)

## Filing Status (Check Only One)

☐ (1) Single - Did you claim federal head of household? YES ☐☐ (2) Married, Filing Joint Return - BOTH must have Virginia source income☐ (3) Married, Spouse Has No Income From Any Source - Enter Spouse's SSN above

Spouse's full name

☒ (4) Married, Filing Separate Returns -

Enter Spouse's SSN above

Spouse's full name **JOSEPH R BIDEN JR.**

You		Dependents		Total Section 1		65 or over Blind		Total Section 2	
1	+		=	x \$930 =			+	x \$800 =	
2	+		=	x \$930 =			+	x \$800 =	
2	+		=	x \$930 =			+	x \$800 =	
1	+		=	x \$930 =	930		+	x \$800 =	

Add the Total of Section 1 plus the Total of Section 2. Enter the sum on Line 13

1	Adjusted Gross Income	1	122,886	00
2	Additions from Schedule 763 ADJ, Line 3	2		00
3	Add Lines 1 and 2	3	122,886	00
4	Age Deduction - (See instructions and the Age Deduction Worksheet). Enter your birth date. For filing status 2, 3 and 4, birth dates for Yourself and Spouse are required. You cannot claim the Age Deduction if you also take the Disability Subtraction on Schedule 763 ADJ, Line 5.	4a	Yourself (mm/dd/yyyy)	00
		4b	Spouse (mm/dd/yyyy)	00
5	Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported on your federal return	5		00
6	State income tax refund or overpayment credit reported as income on your federal return	6		00
7	Subtractions from Schedule 763 ADJ, Line 7	7		00
8	Add Lines 4a, 4b, 5, 6 and 7	8		00
9	Virginia Adjusted Gross Income (VAGI). Subtract Line 8 from Line 3	9	122,886	00
10	Deductions: Enter total Federal Itemized Deductions from Federal Schedule A	10	26,928	00
11	State and Local income taxes claimed from Federal Schedule A, if claiming Itemized Deductions	11	5,905	00
12	If claiming Itemized Deductions subtract Line 11 from Line 10 or enter Standard Deduction amount	12	21,023	00
13	Exemption amount. Enter the total amount from the Exemption Sections 1 and 2 above	13	930	00
14	Deductions from Schedule 763 ADJ, Line 9	14		00
15	Add Lines 12, 13, and 14	15	21,953	00

For Local Use Va. Dept. of Taxation 2601044 REV. 01/11

Coding

Staple Forms W-2, W-2G, 1099-R and VK-1 here. Staple check or money order here.

1019 183061 12-20-11

LTD ☐

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11330410 745960 54742

2011.03040 BIDEN JR., JOSEPH R

54742\_\_2





**2011 Virginia Schedule INC/CG**

Report all W2s, 1099s, and VK-1s with Virginia Withholding

JILL

T BIDEN

Your/ Spouse SSN	Withholding Type	Virginia Withholding	Employer FEIN	Virginia Account Number	Virginia Wages, tips, other comp.
	W	4181.			82022.

Virginia Approved Form

	Total Virginia Withholding:	SSN	VA Withholding
YOU			4181.

TOTAL NUMBER OF W2S, 1099S  
AND VK-1S

01