

Name,  
Address,  
and SSNSee  
separate  
instructions.

## Presidential

## Election Campaign

For the year Jan. 1-Dec. 31, 2010, or other tax year beginning

, 2010, ending

, 20

OMB No. 1545-0074

Your first name and initial

Last name

Your social security number

BARACK H.

OBAMA

If a joint return, spouse's first name and initial

Last name

Spouse's social security number

MICHELLE L.

OBAMA

Home address (number and street). If you have a P.O. box, see instructions.

Apt. no.

Make sure the SSN(s) above

1600 PENNSYLVANIA AVENUE, NW

▲ and on line 6c are correct.

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

Checking a box below will not  
change your tax or refund.

WASHINGTON, DC 20500

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund

☒ You☒ Spouse

## Filing Status

Check only  
one box.1 ☐ Single4 ☐ 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)3 ☐ Married filing separately. Enter spouse's SSN above  
and full name here. ▶5 ☐ Qualifying widow(er) with dependent child

## Exemptions

If more than four  
dependents, see  
instructions and  
check here ▶ ☐6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6aBoxes checked  
on 6a and 6b

2

b ☒ SpouseNo. 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● lived with you  
● did not live with  
you due to divorce  
or separation  
(see instructions)

MALIA A OBAMA

DAUGHTER

☒

NATASHA M OBAMA

DAUGHTER

☒Dependents on 6c  
not entered aboveAdd numbers  
on lines  
above ▶

4

d Total number of exemptions claimed

## Income

Attach Form(s)  
W-2 here. Also  
attach Forms  
W-2G and  
1099-R if tax  
was withheld.If you did not  
get a W-2,  
see page 20.Enclose, but do  
not attach, any  
payment. Also,  
please use  
Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2

7

395,188.

8a Taxable interest. Attach Schedule B if required

8a

8,066.

b Tax-exempt interest. Do not include on line 8a

8b

9a Ordinary dividends. Attach Schedule B if required

9a

9,997.

b Qualified dividends

9b

2,159.

10 Taxable refunds, credits, or offsets of state and local income taxes

STMT 2

STMT 3

10

1,151.

11 Alimony received

11

12 Business income or (loss). Attach Schedule C or C-EZ

12

1,382,889.

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

1,323.

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

1,795,614.

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 One-half of self-employment tax. Attach Schedule SE

27

18,518.

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 31a and 32 through 35

36

67,518.

37 Subtract line 36 from line 22. This is your adjusted gross income ▶

37

1,728,096.

<b>Tax and Credits</b>	38	Amount from line 37 (adjusted gross income)	38	1,728,096.
39a	Check	<input type="checkbox"/> You were born before January 2, 1946, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1946, <input type="checkbox"/> Blind. Total boxes checked	39a	
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here		39b	
40	Itemized deductions (from Schedule A) or your standard deduction (see instructions)	40	373,289.	
41	Subtract line 40 from line 38	41	1,354,807.	
42	Exemptions. Multiply \$3,650 by the number on line 6d	42	14,600.	
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	1,340,207.	
44	Tax. Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	438,949.	
45	Alternative minimum tax. Attach Form 6251	45		
46	Add lines 44 and 45	46	438,949.	
47	Foreign tax credit. Attach Form 1116 if required	47	22,215.	
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	22,215.	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	416,734.	
<b>Other Taxes</b>	56	Self-employment tax. Attach Schedule SE	56	37,036.
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		
59	a <input type="checkbox"/> Form(s) W-2, box 9 b <input type="checkbox"/> Schedule H c <input type="checkbox"/> Form 5405, line 16	59		
60	Add lines 55 through 59. This is your total tax	60	453,770.	
<b>Payments</b>	61	Federal income tax withheld from Forms W-2 and 1099	61	100,817.
62	2010 estimated tax payments and amount applied from 2009 return	62	365,287.	
63	Making work pay credit. Attach Schedule M	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 61, 62, 63, 64a, and 65 through 71. These are your total payments	72	466,104.	
<b>Refund</b>	73	If line 72 is more than line 60, subtract line 60 from line 72. This is the amount you overpaid	73	12,334.
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here	74a		
Direct deposit? See instructions.	b	Routing number	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
75	Amount of line 73 you want applied to your 2011 estimated tax	75	12,334.	
<b>Amount You Owe</b>	76	Amount you owe. Subtract line 72 from line 60. 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	MICHAEL S. SOLHEIM, CPA		Phone no.	
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.			
Joint return? See page 12. Keep a copy for your records.	Your signature	Date	Your occupation	Daytime phone number
		4/13/11	US PRESIDENT	
	Spouse's signature. In a joint return, both must sign.	Date	Spouse's occupation	
		4-13-11	US FIRST LADY	
<b>Paid Preparer</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> If self-employed
Use Only	Firm's name	WINEBERG SOLHEIM HOWELL & SHAIN, PC	Firm's EIN	
	180 N LASALLE ST, STE 2200		Phone no.	
	CHICAGO, IL 60601			



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

**2010**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 must figure your penalty.
	Yes	
Do not file Form 2210. 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 do not file Form 2210.		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.

**Part I Required Annual Payment**

1	Enter your 2010 tax after credits from Form 1040, line 55 (see instructions if not filing Form 1040)	1	416,734.
2	Other taxes, including self-employment tax (see page 2 of the instructions)	2	37,036.
3	Refundable credits. Enter the total of your making work pay credit, 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), and health coverage tax credit	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	453,770.
5	Multiply line 4 by 90% (.90)	5	408,393.
6	Withholding taxes. Do not include estimated tax payments (see page 3 of the instructions)	6	100,817.
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	352,953.
8	Maximum required annual payment based on prior year's tax (see page 3 of the instructions)	8	1,971,655.
9	Required annual payment. Enter the smaller of line 5 or line 8	9	408,393.

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 page 2 of the 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 page 2 of the 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 2009 or 2010, 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 page 6 of separate instructions.

Form 2210 (2010)

**Part IV Regular Method** (See page 3 of the instructions if you are filing Form 1040NR or 1040NR-EZ.)

<b>Section A - Figure Your Underpayment</b>		<b>Payment Due Dates</b>				
		(a) 4/15/10	(b) 6/15/10	(c) 9/15/10	(d) 1/15/11	
<b>18</b>	<b>Required installments.</b> 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	18	35,575.	167,507.	103,212.	102,099.
<b>19</b>	<b>Estimated tax paid and tax withheld.</b> 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	19	74,491.	180,204.	156,204.	55,205.
Complete lines 20 through 26 of one column before going to line 20 of the next column.						
<b>20</b>	Enter the amount, if any, from line 26 in the previous column	20		38,916.	51,613.	104,605.
<b>21</b>	Add lines 19 and 20	21		219,120.	207,817.	159,810.
<b>22</b>	Add the amounts on lines 24 and 25 in the previous column	22				
<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	23	74,491.	219,120.	207,817.	159,810.
<b>24</b>	If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0-	24		0.	0.	
<b>25</b>	<b>Underpayment.</b> 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	25				
<b>26</b>	<b>Overpayment.</b> If line 23 is more than line 18, subtract line 18 from line 23. Then go to line 20 of the next column	26	38,916.	51,613.	104,605.	
<b>Section B - Figure the Penalty</b> (Use the Worksheet for Form 2210, Part IV, Section B in the instructions to figure your penalty.)						
<b>27</b>	<b>Penalty.</b> Enter the total penalty from line 8 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 49; Form 1040NR, line 73; Form 1040NR-EZ, line 26; or Form 1041, line 26. Do not file Form 2210 unless you checked a box in Part II	27				0.

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

Estates and trusts, do not use the period ending dates shown to the right. Instead, use the following: 2/28/10, 4/30/10, 7/31/10, and 11/30/10.

(a)  
1/1/10 - 3/31/10(b)  
1/1/10 - 5/31/10(c)  
1/1/10 - 8/31/10(d)  
1/1/10 - 12/31/10**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	228,973.	709,501.	1165278.	1728096.
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	915,892.	1702802.	1747917.	1728096.
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	93,322.	155,537.	248,859.	373,289.
5 Annualization amounts .....	5	4	2.4	1.5	1
6 Multiply line 4 by line 5 .....	6	373,288.	373,289.	373,289.	373,289.
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	11,400.	11,400.	11,400.	11,400.
8 Enter the larger of line 6 or line 7 .....	8	373,288.	373,289.	373,289.	373,289.
9 Subtract line 8 from line 3 .....	9	542,604.	1329513.	1374628.	1354807.
10 In each column, multiply \$3,650 by the total number of exemptions claimed. (Estates, trusts, and Form 1040NR or 1040NR-EZ filers, see instructions) .....	10	14,600.	14,600.	14,600.	14,600.
11 Subtract line 10 from line 9. If zero or less, enter -0- .....	11	528,004.	1314913.	1360028.	1340207.
12 Figure your tax on the amount on line 11 (see instructions) .....	12	155,109.	430,528.	446,318.	438,949.
13 Self-employment tax from line 34 (complete Part II below) .....	13	25,216.	42,981.	40,878.	37,036.
14 Enter other taxes for each payment period (see instructions) .....	14	0.	0.	0.	0.
15 Total tax. Add lines 12, 13, and 14 .....	15	180,325.	473,509.	487,196.	475,985.
16 For each period, enter the same type of credits as allowed on Form 2210, Part I, lines 1 and 3 (see instructions) .....	16	22,215.	22,215.	22,215.	22,215.
17 Subtract line 16 from line 15. If zero or less, enter -0- .....	17	158,110.	451,294.	464,981.	453,770.
18 Applicable percentage .....	18	22.5%	45%	67.5%	90%
19 Multiply line 17 by line 18 .....	19	35,575.	203,082.	313,862.	408,393.
<b>Complete lines 20-25 of one column before going to line 20 of the next column.</b>					
20 Enter the total of the amounts in all previous columns of line 25 .....	20		35,575.	203,082.	306,294.
21 Subtract line 20 from line 19. If zero or less, enter -0- .....	21	35,575.	167,507.	110,780.	102,099.
22 Enter 25% (.25) of line 9 on page 1 of Form 2210 in each column .....	22	102,098.	102,098.	102,098.	102,099.
23 Subtract line 25 of the previous column from line 24 of that column .....	23		66,523.	1,114.	0.
24 Add lines 22 and 23 .....	24	102,098.	168,621.	103,212.	102,099.
25 Enter the smaller of line 21 or line 24 here and on Form 2210, Part IV, line 18 .....	25	35,575.	167,507.	103,212.	102,099.

**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	131,758.	522,393.	863,604.	1277098.
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 6.2% portion of the 7.65% railroad retirement (tier 1) tax. <b>Exception:</b> If you filed Form 4137 or Form 8919, see instructions .....	28	6,675.	22,250.	53,400.	106,800.
29 Subtract line 28 from line 27. If zero or less, enter -0- .....	29	20,025.	22,250.	17,800.	0.
30 Annualization amounts .....	30	0.496	0.2976	0.186	0.124
31 Multiply line 30 by the smaller of line 26 or line 29 .....	31	9,932.	6,622.	3,311.	0.
32 Annualization amounts .....	32	0.116	0.0696	0.0435	0.029
33 Multiply line 26 by line 32 .....	33	15,284.	36,359.	37,567.	37,036.
34 Add lines 31 and 33. Enter here and on line 13 above .....	34	25,216.	42,981.	40,878.	37,036.

**SCHEDULE A  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Itemized Deductions**

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

OMB No. 1545-0074

**2010**

Attachment  
Sequence No. 07

Name(s) shown on Form 1040

Your social security number

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

**Medical and Dental Expenses**

**Caution.** 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

**Taxes You Paid**

- 5 State and local (check only one box):
- a ☒ Income taxes, or **SEE STATEMENT 6**
- b ☐ General sales taxes
- 6 Real estate taxes (see instructions) ..... 6 25,742.
- 7 New motor vehicle taxes from line 11 of the worksheet on page 2 (for certain vehicles purchased in 2009). Skip this line if you checked box 5b ..... 7
- 8 Other taxes. List type and amount ▶ ..... 8
- 9 Add lines 5 through 8 ..... 9 78,269.

**Interest You Paid**

- 10 Home mortgage interest and points reported to you on Form 1098 ..... 10 49,945.
- 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

**Note.**  
Your mortgage interest deduction may be limited (see instructions).

- 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 49,945.

**Gifts to Charity**

- 16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions ..... 16 245,075. STMT 7
- 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 ..... 19 245,075.

**Casualty and Theft Losses**

- 20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) ..... 20

**Job Expenses and Certain Miscellaneous Deductions**

- 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  
▶ **EXCESS DEDUCTIONS ON**  
**TERMINATION - MADELYN**  
**DUNHAM TRUST** ..... 23 1,984.
- 24 Add lines 21 through 23 ..... 24 1,984.
- 25 Enter amount from Form 1040, line 38 ..... 25 1,728,096.
- 26 Multiply line 25 by 2% (.02) ..... 26 34,562.
- 27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- ..... 27 0.

**Other Miscellaneous Deductions**

- 28 Other - from list in instructions. List type and amount  
▶ ..... 28

**Total Itemized Deductions**

- 29 Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40 ..... 29 373,289.
- 30 If you elect to itemize deductions even though they are less than your standard deduction, check here ..... 30

**Worksheet Before you begin:** ✓ You cannot take this deduction if the amount on Form 1040, line 38, is equal to or greater than \$135,000 (\$260,000 if married filing jointly).  
 for Line 7 -  
 New motor vehicle taxes ✓ See the instructions for line 7 on page A-6.

Use this worksheet to figure the amount to enter on line 7.  (Attach to Form 1040.)	1	Enter the state or local sales or excise taxes you paid in 2010 for the purchase of any new motor vehicle(s) after February 16, 2009, and before January 1, 2010 (see instructions) .....	1		3
	2	Enter the purchase price (before taxes) of the new motor vehicle(s) .....	2		
	3	Is the amount on line 2 more than \$49,500? <input type="checkbox"/> No. Enter the amount from line 1. <input type="checkbox"/> Yes. Figure the portion of the tax from line 1 that is attributable to the first \$49,500 of the purchase price of each new motor vehicle and enter it here (see instructions).			
	4	Enter the amount from Form 1040, line 38 .....	4		
	5	Enter the total of any - • Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15, and • Exclusion of income from Puerto Rico	5		
	6	Add lines 4 and 5 .....	6		
	7	Enter \$125,000 (\$250,000 if married filing jointly) .....	7		
	8	Is the amount on line 6 more than the amount on line 7? <input type="checkbox"/> No. Enter the amount from line 3 above on Schedule A, line 7. Do not complete the rest of this worksheet. <input type="checkbox"/> Yes. Subtract line 7 from line 6 .....	8		
	9	Divide the amount on line 8 by \$10,000. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000 .....	9		
	10	Multiply line 3 by line 9 .....	10		
	11	Deduction for new motor vehicle taxes. Subtract line 10 from line 3. Enter the result here and on Schedule A, line 7 .....	11		

Schedule A (Form 1040) 2010



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

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

**Interest and Ordinary Dividends**

▶ Attach to Form 1040A or 1040.

▶ See instructions.

OMB No. 1545-0074

**2010**  
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 page B-1 and list this interest first. Also, show that buyer's social security number and address ▶

**JP MORGAN**

**NORTHERN TRUST SECURITIES US GOVT INTEREST**

**BOND PREMIUM AMORTIZATION US GOVT INTEREST**

**NORTHERN TRUST SECURITIES US GOVT INTEREST PAID**

**FROM K-1 - FREEMAN HENRY G. JR. DECD TW**

**Amount**

311.

34,575.

-26,592.

-232.

4.

**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.

- 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 ▶

8,066.

8,066.

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

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

- 5** List name of payer ▶
- NORTHERN TRUST SECURITIES**
- FROM K-1 - FREEMAN HENRY G. JR. DECD TW**

**Amount**

1.

9,996.

**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.

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

9,997.

**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.

**Yes** **No**

- 7a** At any time during 2010, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1

**X**

- b** If "Yes," enter the name of the foreign country ▶

- 8** During 2010, 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 page B-2

**X**

027501  
10-18-10

LHA For Paperwork Reduction Act Notice, see separate instructions.

Schedule B (Form 1040A or 1040) 2010

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

Department of the Treasury  
Internal Revenue Service (99)

**Profit or Loss From Business**

(Sole Proprietorship)

Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.  
Attach to Form 1040, 1040NR, or 1041. See Instructions for Schedule C (Form 1040).

OMB No. 1545-0074

**2010**  
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 pages C-9, 10, & 11

**711510**

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

**BARACK H. OBAMA**

D Employer ID number (EIN), if any

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 2010? If "No," see instructions for limit on losses ☒ Yes ☐ No

H If you started or acquired this business during 2010, check here ☐

**Part I Income**

1	Gross receipts or sales. Caution. See instructions and check the box if: • This income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, or • You are a member of a qualified joint venture reporting only rental real estate income not subject to self-employment tax. Also see instructions for limit on losses.	<input type="checkbox"/>	1	
2	Returns and allowances		2	
3	Subtract line 2 from line 1		3	
4	Cost of goods sold (from line 42 on page 2)		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 8</b>		6	<b>1,568,273.</b>
7	Gross income. Add lines 5 and 6		7	<b>1,568,273.</b>

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

8	Advertising	8		18	Office expense	18	<b>873.</b>
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10	<b>184,511.</b>	20	Rent or lease (see instructions):	20a	
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20b	
12	Depletion	12		21	Repairs and maintenance	21	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		22	Supplies (not included in Part III)	22	
14	Employee benefit programs (other than on line 19)	14		23	Taxes and licenses	23	
15	Insurance (other than health)	15		24	Travel, meals, and entertainment:	24a	
16	Interest:			a	Travel	24b	
a	Mortgage (paid to banks, etc.)	16a		b	Deductible meals and entertainment (see instructions)	25	
b	Other	16b		26	Utilities	26	
17	Legal and professional services	17		27	Wages (less employment credits)	27	
					Other expenses (from line 48 on page 2)		
28	Total expenses before expenses for business use of home. Add lines 8 through 27	28	<b>185,384.</b>				
29	Tentative profit or (loss). Subtract line 28 from line 7	29	<b>1,382,889.</b>				
30	Expenses for business use of your home. Attach Form 8829	30					
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	<b>1,382,889.</b>				
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, and Schedule SE, line 2, or on Form 1040NR, line 13 (if you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.			32a	<input type="checkbox"/> All investment is at risk.		
				32b	<input type="checkbox"/> Some investment is not at risk.		

LHA For Paperwork Reduction Act Notice, see separate Instructions.

Schedule C (Form 1040) 2010

**SCHEDULE D  
(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Capital Gains and Losses**▶ Attach to Form 1040 or Form 1040NR. ▶ See Instructions for Schedule D (Form 1040).  
▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

**2010**  
Attachment  
Sequence No. **12**

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**

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
1					
2 Enter your short-term totals, if any, from Schedule D-1, line 2			2		
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)			3		
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 10 of your Capital Loss Carryover Worksheet in the instructions				6	( )
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)				7	

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
U.S. TREASURY NOTE REDEMPTION	04/14/09	08/02/10	967,000.	967,000.	0.
9 Enter your long-term totals, if any, from Schedule D-1, line 9			9		
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)			10	967,000.	
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 15 of your Capital Loss Carryover Worksheet in the instructions				14	( 122,527.)
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on page 2				15	-122,527.

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

Schedule D (Form 1040) 2010

**Part III Summary**

<b>16</b> Combine lines 7 and 15 and enter the result .....	<b>16</b>	<b>-122,527.</b>
<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? <input type="checkbox"/> <b>Yes.</b> Go to line 18. <input type="checkbox"/> <b>No.</b> 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> on page D-8 of 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> on page D-9 of the instructions .....	<b>19</b>	
<b>20</b> Are lines 18 and 19 <b>both</b> zero or blank? <input type="checkbox"/> <b>Yes.</b> 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. <input type="checkbox"/> <b>No.</b> Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the <b>Schedule D Tax Worksheet</b> on page D-10 of 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 <b>smaller</b> 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>21</b>	<b>( 3,000.)</b>
<b>Note.</b> 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? <input checked="" type="checkbox"/> <b>Yes.</b> 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 type="checkbox"/> <b>No.</b> Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2010

**Qualified Dividends and Capital Gain Tax Worksheet - Line 44**

Keep for Your Records

Name(s) shown on return

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

Your SSN

**Before you begin:** ✓ See the instructions for line 44 on page 35 to see if you can use this worksheet to figure your tax.

✓ If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on line 13 of Form 1040.

1. Enter the amount from Form 1040, line 43. However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from line 3 of the worksheet on page 36	1.	<u>1,340,207.</u>
2. Enter the amount from Form 1040, line 9b*	2.	<u>2,159.</u>
3. Are you filing Schedule D?*		
<input checked="" type="checkbox"/> <b>Yes.</b> Enter the <b>smaller</b> of line 15 or 16 of Schedule D. If either line 15 or line 16 is blank or a loss, enter -0-	3.	<u>0.</u>
<input type="checkbox"/> <b>No.</b> Enter the amount from Form 1040, line 13		
4. Add lines 2 and 3	4.	<u>2,159.</u>
5. If filing Form 4952 (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise, enter -0-	5.	<u>0.</u>
6. Subtract line 5 from line 4. If zero or less, enter -0-	6.	<u>2,159.</u>
7. Subtract line 6 from line 1. If zero or less, enter -0-	7.	<u>1,338,048.</u>
8. Enter:		
\$34,000 if single or married filing separately,		
\$68,000 if married filing jointly or qualifying widow(er),	8.	<u>68,000.</u>
\$45,550 if head of household.		
9. Enter the smaller of line 1 or line 8	9.	<u>68,000.</u>
10. Enter the smaller of line 7 or line 9	10.	<u>68,000.</u>
11. Subtract line 10 from line 9. This amount is taxed at 0%	11.	<u>0.</u>
12. Enter the smaller of line 1 or line 6	12.	<u>2,159.</u>
13. Enter the amount from line 11	13.	<u>0.</u>
14. Subtract line 13 from line 12	14.	<u>2,159.</u>
15. Multiply line 14 by 15% (.15)	15.	<u>324.</u>
16. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet	16.	<u>438,625.</u>
17. Add lines 15 and 16	17.	<u>438,949.</u>
18. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet	18.	<u>439,380.</u>
19. <b>Tax on all taxable income.</b> Enter the <b>smaller</b> of line 17 or line 18. Also include this amount on Form 1040, line 44. If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44. Instead, enter it on line 4 of the worksheet on page 36	19.	<u>438,949.</u>

\* If you are filing Form 2555 or 2555-EZ, see the footnote in the worksheet on page 36 before completing this line.



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

Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships,  
S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ See instructions for Schedule E (Form 1040).

OMB No. 1545-0074

**2010**

Attachment  
Sequence No. **13**

Name(s) shown on return

Your social security number

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

**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 page E-3). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and address of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:	Yes	No
A	INHERITED BOOK ROYALTY		• 14 days or		
B			• 10% of the total days rented at fair rental value?		
C			(See page E-4)		

Income:	Properties			Totals
	A	B	C	(Add columns A, B, and C.)
3 Rents received	3			3
4 Royalties received	4	1,323.		4 1,323.
<b>Expenses:</b>				
5 Advertising	5			
6 Auto and travel (see page E-5)	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 page E-5)	12			12
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			
17 Utilities	17			
18 Other (list) ▶	18			
19 Add lines 5 through 18	19			19
20 Depreciation expense or depletion (see page E-5)	20			20
21 Total expenses. Add lines 19 and 20	21			
22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-6 to find out if you must file Form 6198.	22	1,323.		
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-6 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23			
24 Income. Add positive amounts shown on line 22. Do not include any losses	24			1,323.
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. 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			1,323.

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

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

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

**Part II Income or Loss From Partnerships and S Corporations** Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See page E-2.

- 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☒ No  
If you answered "Yes," see page E-7 before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A					
B					
C					
D					

Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A				
B				
C				
D				
29a Totals				
b Totals				
30 Add columns (g) and (j) of line 29a			30	
31 Add columns (f), (h), and (i) of line 29b			31	( )
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below			32	

**Part III Income or Loss From Estates and Trusts**

33	(a) Name	(b) Employer identification number
A	FREEMAN HENRY G. JR. DECD TW	
B	MADELYN DUNHAM TRUST	

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A		0.	
B	0.		
34a Totals			
b Totals			
35 Add columns (d) and (f) of line 34a			35
36 Add columns (c) and (e) of line 34b			36
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below			37

**Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder**

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b

39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below

**Part V Summary \* ENTIRE DISPOSITION OF PASSIVE ACTIVITY**

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	1,323.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see page E-8)	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Schedule E			PASSTHROUGH RECAP - BASIC INFORMATION											2010	
BARACK H. & MICHELLE L. OBAMA															
Schedule K-1 Line Reference: (1065/1120S/1041)			1/1/6	2/2/7	3/3/8	*	*	5/4/1	*	6a/5a/2a	7/6/*	8/7/3	9a/8a/4a	4/*/*	
TYPE	Entity No.	Act. No.	Name	Ordinary Income (Loss)	Rental Real Estate Inc. (Loss)	Other Rental Income (Loss)	Passive Activity Loss C/O	AMT Passive Activity Loss C/O	Interest	US Treasury Bond Interest	Dividends	Royalties	Short-Term Capital Gain (Loss)	Net Long-Term Capital Gain (Loss)	Guaranteed Payments to Partner
SE	1	1	FREEMAN HENRY G. JR. DECD TW						4.		9,996.				
TE	2	2	MADelyn DUNHAM TRUST												
Totals									4.		9,996.				
Component of:				Schedule E, Page 2, Various	Schedule E, Page 2, Various	Schedule E, Page 2, Various	Form 8582 Line 3c	Form 8582 AMT, Line 3c	Schedule B, Line 1	Schedule B, Line 1	Schedule B, Line 5	Schedule E, Line 4	Schedule D, Line 5	Schedule D, Line 12	Schedule E, Page 2, Various

Schedule K-1 Line Reference: (1065/1120S/1041)																	
10/9/*		*	11/10/*		13/12/*	12/11/*	13/12/*	13/12/*	13/12/*	*/*	20/17/14	13/*/*	*	14/*/*	17/15/12	*/12	*/12
Entity No.	Act. No.	Section 1231 Gain (Loss)	Ordinary Gain (Loss) Form 4797	Other Income	Charitable Contributions 50%	Section 179 Expense	Deductions Related to Portfolio Income (2%)	Other Deductions	Investment Int. Expense (Schedule A)	Investment Int. Expense (Schedule E)	Investment Income	SE Health Insurance Premium	Wages for More Than 2% Shareholders	Net SE Earnings	AMT Depr Adj on Post '86 Property	Minimum Tax Adjustment	Exclusion Items
Totals																	
Component of:		Form 4797, Line 2	Form 4797, Line 10	Schedule E, Page 2, Various	Schedule A, Lines 16 & 17	Form 4562, Line 6	Schedule A, Line 23	Schedule E, Page 2, Various	Schedule A, Line 14	Schedule E, Page 2, Various	Form 4952, Line 4a	Form 1040, Line 29	Form 1040, Line 7	Schedule SE, Line 2	Form 6251, Line 19	Form 6251, Line 16	2010 Form 8801

\* - No specific Schedule K-1 line reference for these amounts.

028071 05-01-10

Schedule E PASSTHROUGH RECAP - ADDITIONAL INCOME, DEDUCTIONS, AND PRIOR YEAR CARRYOVERS															2010		
BARACK H. & MICHELLE L. OBAMA																	
Schedule K-1 Line Reference: (1065/1120S/1041)																	
Entity No.	Act. No.	17/15/*	15/13/13	15/13/*	*/*/10	*/*/11	18/16/14	18/16/*	18/16/*	*	*	*	*	*	*	*	
Entity No.	Act. No.	AMT Adj. Gain or Loss	Low Income Housing Cr Pre '08	Low Income Housing Cr Post '07	Estate Tax Deduction	Excess Deductions on Termination	Tax-exempt Interest Income	Other Tax-exempt Income	Nondeductible Expenses	Section 1231 PAL Carryover	AMT Section 1231 PAL Carryover	ST Capital PAL C/O	AMT ST Capital PAL C/O	LT Capital PAL C/O	AMT LT Capital PAL C/O	Form 4797 Ordinary PAL C/O	AMT 4797 Ordinary PAL C/O
2	2					1,984.											
Totals						1,984.											
Component of:		Form 6251, Line 18	Form 8586 Line 4	Form 8586 Line 11	Schedule A, Line 28	Schedule A, Line 23	Schedule B, Line 1	Schedule B, Line 1	Form 6198, Line 4 Basic Lmt.	Form 8582, Line 3c	Form 8582 AMT, Line 3c	Form 8582, Line 3c	Form 8582 AMT, Line 3c	Form 8582, Line 3c	Form 8582 AMT, Line 3c	Form 8582, Line 3c	Form 8582 AMT, Line 3c

Schedule K-1 Line Reference: (1065/1120S/1041)																
Entity No.	Act. No.	*/*	13/12/*	13/12/*	13/12/*	13/*/*	13/*/*	13/*/*	11/10/5	*	9c/8c/4c	20/17/*	*	*/*/9	13/12/*	*
Entity No.	Act. No.	Section 179 Carryover	Charitable Contributions 30% Regular	Charitable Contributions 30% Special	Charitable Contributions 20%	Keogh Payments	SEP Payments	IRA Contributions	Other Portfolio Income (loss)	Other Nonportfolio Nonpassive Income	Unrecaptured Section 1250 Gain	Investment Expenses	Investment Interest Expense C/O (Sch. E)	Nonpassive Depreciation and Amortization	Deductions Related to Portfolio Income (not 2%)	Medical Payments for 2% Owner
Totals																
Component of:		Form 4562, Line 10	Schedule A, Lines 16 & 17	Schedule A, Lines 16 & 17	Schedule A, Lines 16 & 17	Form 1040, Line 28	Form 1040, Line 28	Form 1040, Line 32	Schedule E, Page 2, Various	Schedule E, Page 2, Various	Schedule D, Line 19	Form 4952, Line 5	Form 4952, Line 2	Schedule E, Line 33	Schedule A, Line 28	Schedule A, Line 1





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 page SE-3 for specific instructions. Also see page SE-1 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 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. <b>Note.</b> Skip lines 1a and 1b if you use the farm optional method (see page SE-5)	1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 6b, or listed on Schedule K-1 (Form 1065), box 20, code 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 pg SE-1 for types of income to report on this line. See pg SE-4 for other income to report. <b>Note.</b> Skip this line if you use the nonfarm optional method (see page SE-5) <b>SEE STATEMENT 10</b>	2	1,382,889.
3	Combine lines 1a, 1b, and 2. Subtract from that total the amount on Form 1040, line 29, or Form 1040NR, line 29, and enter the result (see page SE-3)	3	1,382,889.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3 <b>Note.</b> If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see page SE-3.	4a	1,277,098.
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, <b>stop</b> ; you do not owe self-employment tax. <b>Exception.</b> If less than \$400 and you had church employee income, enter -0- and continue	4c	1,277,098.
5a	Enter your church employee income from Form W-2. See page SE-1 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	1,277,098.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2010	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 12.4% (.124)	10	
11	Multiply line 6 by 2.9% (.029)	11	37,036.
12	<b>Self-employment tax.</b> Add lines 10 and 11. Enter here and on Form 1040, line 56, or Form 1040NR, line 54	12	37,036.
13	<b>Deduction for one-half of self-employment tax.</b> Multiply line 12 by 50% (.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	13	18,518.

## Part II Optional Methods To Figure Net Earnings (see page SE-4)

**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 11, and Sch. K-1 (Form 1065), box 14, code B.

<sup>2</sup> From Sch. F, line 36, 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 1; 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

**2010**

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

**1 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 Enter the name of the foreign country or U.S. possession</b> ▶ <b>VARIOUS</b>				
<b>1a</b> Gross income from sources within country shown above and of the type checked above:	820,751.			<b>1a</b> 820,751.
<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) ▶ <input type="checkbox"/>				
<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 11</b>	156,729.			
<b>3</b> Pro rata share of other deductions not definitely related:				
<b>a</b> Certain itemized deductions or standard deduction	78,269.			
<b>b</b> Other deductions (attach statement)				
<b>c</b> Add lines 3a and 3b	78,269.			
<b>d</b> Gross foreign source income	820,751.			
<b>e</b> Gross income from all sources	1,983,998.			
<b>f</b> Divide line 3d by line 3e	.413685			
<b>g</b> Multiply line 3c by line 3f	32,379.			
<b>4</b> Pro rata share of interest expense:				
<b>a</b> Home mortgage interest (use worksheet on page 14 of the instructions)	20,661.			
<b>b</b> Other interest expense				
<b>5</b> Losses from foreign sources				
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5	209,769.			<b>6</b> 209,769.
<b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 14, page 2				<b>7</b> 610,982.

**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 (j) Date paid or accrued	Foreign taxes paid or accrued						(r) Other 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:				
		(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends	(p) Rents and royalties		
A						22035.			22,035.
B									
C									
<b>8</b> Add lines A through C, column (s). Enter the total here and on line 9, page 2									<b>8</b> 22,035.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2010)

**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	22,035.	
10 Carryback or carryover (attach detailed computation) .....	10		
11 Add lines 9 and 10 .....	11	22,035.	
12 Reduction in foreign taxes .....	12		
13 Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit .....	13		22,035.
14 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 .....	14	610,982.	
15 Adjustments to line 14 .....	15		
16 Combine the amounts on lines 14 and 15. 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 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.) .....	16	610,982.	
17 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 ..... <b>SEE STATEMENT 12</b>	17	1,353,573.	
Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
18 Divide line 16 by line 17. If line 16 is more than line 17, enter "1" .....	18		.451385
19 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 .....	19		438,949.
Caution: If you are completing line 19 for separate category e (lump-sum distributions), see instructions.			
20 Multiply line 19 by line 18 (maximum amount of credit) .....	20		198,135.
21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV .....	21		22,035.

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

22 Credit for taxes on passive category income .....	22	180.	
23 Credit for taxes on general category income .....	23	22,035.	
24 Credit for taxes on certain income re-sourced by treaty .....	24		
25 Credit for taxes on lump-sum distributions .....	25		
26 Add lines 22 through 25 .....	26		22,215.
27 Enter the smaller of line 19 or line 26 .....	27		22,215.
28 Reduction of credit for international boycott operations .....	28		
29 Subtract line 28 from line 27. 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 .....	29		22,215.

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

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	
g Enter the name of the foreign country or U.S. possession ▶ <b>VARIOUS</b>				
1a Gross income from sources within country shown above and of the type checked above:	<b>1,571.</b>			<b>1,571.</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) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See instructions):</b>				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction	<b>78,269.</b>			
b Other deductions (attach statement)				
c Add lines 3a and 3b	<b>78,269.</b>			
d Gross foreign source income	<b>1,571.</b>			
e Gross income from all sources	<b>1,983,998.</b>			
f Divide line 3d by line 3e	<b>.000792</b>			
g Multiply line 3c by line 3f	<b>62.</b>			
4 Pro rata share of interest expense:				
a Home mortgage interest (use worksheet on page 14 of the instructions)	<b>40.</b>			
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	<b>102.</b>			<b>102.</b>
7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2				<b>1,469.</b>

**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						(r) Other 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:					
		(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									<b>180.</b>	<b>180.</b>
B										
C										
8 Add lines A through C, column (s). Enter the total here and on line 9, page 2									<b>180.</b>	

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2010)

**Part III Figuring the Credit**

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	<b>9</b>	<b>180.</b>	
<b>10</b> Carryback or carryover (attach detailed computation) .....	<b>10</b>		
<b>11</b> Add lines 9 and 10 .....	<b>11</b>	<b>180.</b>	
<b>12</b> Reduction in foreign taxes .....	<b>12</b>		
<b>13</b> Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit .....	<b>13</b>		<b>180.</b>
<b>14</b> 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 .....	<b>14</b>	<b>1,469.</b>	
<b>15</b> Adjustments to line 14 .....	<b>15</b>		
<b>16</b> Combine the amounts on lines 14 and 15. 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 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.) .....	<b>16</b>	<b>1,469.</b>	
<b>17</b> 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 .....	<b>17</b>	<b>1,353,573.</b>	
<i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>			
<b>18</b> Divide line 16 by line 17. If line 16 is more than line 17, enter "1" .....	<b>18</b>		<b>.001085</b>
<b>19</b> 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 .....	<b>19</b>		<b>438,949.</b>
<i>Caution: If you are completing line 19 for separate categories (lump-sum distributions), see instructions.</i>			
<b>20</b> Multiply line 19 by line 18 (maximum amount of credit) .....	<b>20</b>		<b>476.</b>
<b>21</b> Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV .....	<b>21</b>		<b>180.</b>

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

<b>22</b> Credit for taxes on passive category income .....	<b>22</b>		
<b>23</b> Credit for taxes on general category income .....	<b>23</b>		
<b>24</b> Credit for taxes on certain income re-sourced by treaty .....	<b>24</b>		
<b>25</b> Credit for taxes on lump-sum distributions .....	<b>25</b>		
<b>26</b> Add lines 22 through 25 .....	<b>26</b>		
<b>27</b> Enter the smaller of line 19 or line 26 .....	<b>27</b>		
<b>28</b> Reduction of credit for international boycott operations .....	<b>28</b>		
<b>29</b> Subtract line 28 from line 27. 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 .....	<b>29</b>		



**ALTERNATIVE MINIMUM TAX  
Foreign Tax Credit**  
(Individual, Estate, or Trust)  
▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

**2010**

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	
9 Enter the name of the foreign country or U.S. possession ▶ <b>VARIOUS</b>				
1a Gross income from sources within country shown above and of the type checked above:	820,751.			1a 820,751.
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) ▶ <input type="checkbox"/>				
<b>Deductions and losses (Caution: See instructions):</b>				
2 Expenses definitely related to the income on line 1a (attach statement)	156,729.			
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction				
b Other deductions (attach statement)				
c Add lines 3a and 3b				
d Gross foreign source income	820,751.			
e Gross income from all sources	1,982,847.			
f Divide line 3d by line 3e	.413926			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use worksheet on page 14 of the instructions)	20,674.			
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	177,403.			6 177,403.
7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2				7 643,348.

**Part II Foreign Taxes Paid or Accrued**

Country	Foreign taxes paid or accrued									
	In foreign currency				In U.S. dollars					
	Taxes withheld at source on:			(n) Other foreign taxes paid or accrued	Taxes withheld at source on:		(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))		
	(h) <input checked="" type="checkbox"/> Paid	(i) <input type="checkbox"/> Accrued	(j) Date paid or accrued		(k) Dividends	(l) Rents and royalties			(m) Interest	(o) Dividends
A								22035.		22,035.
B										
C										
8 Add lines A through C, column (s). Enter the total here and on line 9, page 2										8 22,035.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2010)

# ALTERNATIVE MINIMUM TAX

Form 1116 (2010) **BARACK H. & MICHELLE L. OBAMA**

Page **2**

## Part III Figuring the Credit

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	<b>9</b>	<b>22,035.</b>	
<b>10</b> Carryback or carryover (attach detailed computation) .....	<b>10</b>		
<b>11</b> Add lines 9 and 10 .....	<b>11</b>	<b>22,035.</b>	
<b>12</b> Reduction in foreign taxes .....	<b>12</b>		
<b>13</b> Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit .....	<b>13</b>		<b>22,035.</b>
<b>14</b> 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 .....	<b>14</b>	<b>643,348.</b>	
<b>15</b> Adjustments to line 14 .....	<b>15</b>		
<b>16</b> Combine the amounts on lines 14 and 15. 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 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.) .....	<b>16</b>	<b>643,348.</b>	
<b>17</b> <b>Individuals:</b> Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption ..... <b>SEE STATEMENT 13</b>	<b>17</b>	<b>1,430,923.</b>	
<b>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</b>			
<b>18</b> Divide line 16 by line 17. If line 16 is more than line 17, enter "1" .....	<b>18</b>		<b>.449604</b>
<b>19</b> <b>Individuals:</b> Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 .....	<b>19</b>		<b>397,158.</b>
<b>Caution: If you are completing line 19 for separate category (lump-sum distributions), see instructions.</b>			
<b>20</b> Multiply line 19 by line 18 (maximum amount of credit) .....	<b>20</b>		<b>178,564.</b>
<b>21</b> Enter the <b>smaller</b> of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV .....	<b>21</b>		<b>22,035.</b>

## Part IV Summary of Credits From Separate Parts III

<b>22</b> Credit for taxes on passive category income .....	<b>22</b>	<b>180.</b>	
<b>23</b> Credit for taxes on general category income .....	<b>23</b>	<b>22,035.</b>	
<b>24</b> Credit for taxes on certain income re-sourced by treaty .....	<b>24</b>		
<b>25</b> Credit for taxes on lump-sum distributions .....	<b>25</b>		
<b>26</b> Add lines 22 through 25 .....	<b>26</b>		<b>22,215.</b>
<b>27</b> Enter the <b>smaller</b> of line 19 or line 26 .....	<b>27</b>		<b>22,215.</b>
<b>28</b> Reduction of credit for international boycott operations .....	<b>28</b>		
<b>29</b> Subtract line 28 from line 27. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 47; Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a .....	<b>29</b>		<b>22,215.</b>

Form **1116** (2010)

**ALTERNATIVE MINIMUM TAX  
Foreign Tax Credit**  
(Individual, Estate, or Trust)

▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

**2010**

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	
9 Enter the name of the foreign country or U.S. possession ▶ <b>VARIOUS</b>					
1a Gross income from sources within country shown above and of the type checked above:		<b>1,571.</b>			<b>1,571.</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) ▶ <input type="checkbox"/>					
<b>Deductions and losses (Caution: See instructions):</b>					
2 Expenses definitely related to the income on line 1a (attach statement) .....					
3 Pro rata share of other deductions not definitely related:					
a Certain itemized deductions or standard deduction .....					
b Other deductions (attach statement) .....					
c Add lines 3a and 3b .....					
d Gross foreign source income .....		<b>1,571.</b>			
e Gross income from all sources .....		<b>1,982,847.</b>			
f Divide line 3d by line 3e .....		<b>.000792</b>			
g Multiply line 3c by line 3f .....					
4 Pro rata share of interest expense:					
a Home mortgage interest (use worksheet on page 14 of the instructions) .....		<b>40.</b>			
b Other interest expense .....					
5 Losses from foreign sources .....					
6 Add lines 2, 3g, 4a, 4b, and 5 .....		<b>40.</b>			<b>40.</b>
7 Subtract line 6 from line 1a. Enter the result here and on line 14, page 2 ▶					<b>1,531.</b>

**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 (j) Date paid or accrued	Foreign taxes paid or accrued							(r) Other 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:				
		(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends	(p) Rents and royalties	(q) Interest		
A									<b>180.</b>	<b>180.</b>
B										
C										
8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶										<b>180.</b>

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2010)

# ALTERNATIVE MINIMUM TAX

Form 1116 (2010) **BARACK H. & MICHELLE L. OBAMA**

Page **2**

## **Part III Figuring the Credit**

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	<b>9</b>	180.	
<b>10</b> Carryback or carryover (attach detailed computation) .....	<b>10</b>		
<b>11</b> Add lines 9 and 10 .....	<b>11</b>	180.	
<b>12</b> Reduction in foreign taxes .....	<b>12</b>		
<b>13</b> Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit .....	<b>13</b>		180.
<b>14</b> 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 .....	<b>14</b>	1,531.	
<b>15</b> Adjustments to line 14 .....	<b>15</b>		
<b>16</b> Combine the amounts on lines 14 and 15. 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 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.) .....	<b>16</b>	1,531.	
<b>17</b> <b>Individuals:</b> Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption .....	<b>17</b>	1,430,923.	
<i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>			
<b>18</b> Divide line 16 by line 17. If line 16 is more than line 17, enter "1" .....	<b>18</b>		.001070
<b>19</b> <b>Individuals:</b> Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 .....	<b>19</b>		397,158.
<i>Caution: If you are completing line 19 for separate category (lump-sum distributions), see instructions.</i>			
<b>20</b> Multiply line 19 by line 18 (maximum amount of credit) .....	<b>20</b>		425.
<b>21</b> Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 26 and enter this amount on line 27. Otherwise, complete the appropriate line in Part IV .....	<b>21</b>		180.

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

<b>22</b> Credit for taxes on passive category income .....	<b>22</b>		
<b>23</b> Credit for taxes on general category income .....	<b>23</b>		
<b>24</b> Credit for taxes on certain income re-sourced by treaty .....	<b>24</b>		
<b>25</b> Credit for taxes on lump-sum distributions .....	<b>25</b>		
<b>26</b> Add lines 22 through 25 .....	<b>26</b>		
<b>27</b> Enter the smaller of line 19 or line 26 .....	<b>27</b>		
<b>28</b> Reduction of credit for international boycott operations .....	<b>28</b>		
<b>29</b> Subtract line 28 from line 27. 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 .....	<b>29</b>		

Form **1116** (2010)

## Form 1116

## U.S. and Foreign Source Income Summary

NAME

BARACK H. &amp; MICHELLE L. OBAMA

INCOME TYPE	TOTAL	U.S.	FOREIGN	
			GENERAL	PASSIVE
Compensation	395,188.	395,188.		
Dividends/Distributions	9,997.	9,997.		
Interest	8,066.	8,066.		
Capital Gains				
Business/Profession	1,568,273.	1,568,273.		
Rent/Royalty	1,323.	1,323.		
State/Local Refunds	1,151.	1,151.		
Partnership/S Corporation				
Trust/Estate	STMT 14	-1,571.		1,571.
Other Income		-820,751.	820,751.	
Gross Income	1,983,998.	1,161,676.	820,751.	1,571.

## Less:

Section 911 Exclusion  
Capital Losses  
Capital Gains Tax Adjustment

Total Income - Form 1116

1,983,998.	1,161,676.	820,751.	1,571.
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## Deductions:

Business/Profession Expenses 185,384. 185,384.  
Rent/Royalty Expenses  
Partnership/S Corporation Losses  
Trust/Estate Losses  
Capital Losses 3,000. 3,000.  
Non-capital Losses  
Individual Retirement Account  
Moving Expenses  
Self-employment Tax Deduction 18,518. 18,518.  
Self-employment Health Insurance  
Keogh Contributions 49,000. 49,000.  
Alimony  
Forfeited Interest  
Foreign Housing Deduction  
Other Adjustments -156,729. 156,729.  
Capital Gains Tax Adjustment

Total Deductions	255,902.	99,173.	156,729.	
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Adjusted Gross Income	1,728,096.	1,062,503.	664,022.	1,571.
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## Less Itemized Deductions:

Specifically Allocated 245,075. 245,075.  
Home Mortgage Interest 49,945. 29,244. 20,661. 40.  
Other Interest  
Ratably Allocated 78,269. 45,828. 32,379. 62.  
Total Adjustments to Adjusted Gross Income 373,289. 320,147. 53,040. 102.

Taxable Income Before Exemptions	1,354,807.	742,356.	610,982.	1,469.
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## 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 .....	78,269.				78,269.
Interest - Not Including Investment Interest .....	49,945.		29,244.	20,701.	
Contributions .....	245,075.		245,075.		
Miscellaneous Deductions Subject to 2% .....					
Other Miscellaneous Deductions - Not Including Gambling Losses .....					
Foreign Adjustment .....					
Total Itemized Deductions Subject to Sec. 68 .....	373,289.				
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental .....					
Investment Interest .....					
Casualty Losses .....					
Gambling Losses .....					
Foreign Adjustment .....					
Total Itemized Deductions .....	373,289.				
Total Allowed on Schedule A .....			274,319.	20,701.	78,269.



NAME

BARACK H. &amp; MICHELLE L. OBAMA

## Foreign Income Category

## GENERAL LIMITATION INCOME

Regular	2005	2006	2007	2008	2009	2010
1. Foreign tax paid/accrued						22,035.
2. FTC carryback to 2010 for amended returns						
3. Reduction allocated to excluded income						
4. Foreign tax available						22,035.
5. Maximum credit allowable						198,135.
6. Unused foreign tax ( + ) or excess of limit ( - )					-314290.	-176100.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-314290.	-176100.
Total foreign taxes from all available years to be carried to next year						

	2000	2001	2002	2003	2004
1. Foreign tax paid/accrued					
2. FTC carryback to 2010 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	2005	2006	2007	2008	2009	2010
1. Foreign tax paid/accrued						22,035.
2. FTC carryback to 2010 for amended returns						
3. Reduction allocated to excluded income						
4. Foreign tax available						22,035.
5. Maximum credit allowable						178,564.
6. Unused foreign tax ( + ) or excess of limit ( - )					-256750.	-156529.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-256750.	-156529.
Total foreign taxes from all available years to be carried to next year						

	2000	2001	2002	2003	2004
1. Foreign tax paid/accrued					
2. FTC carryback to 2010 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

PASSIVE INCOME

Regular	2005	2006	2007	2008	2009	2010
1. Foreign tax paid/accrued						180.
2. FTC carryback to 2010 for amended returns						
3. Reduction allocated to excluded income						
4. Foreign tax available						180.
5. Maximum credit allowable						476.
6. Unused foreign tax ( + ) or excess of limit ( - )					-539.	-296.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-539.	-296.
Total foreign taxes from all available years to be carried to next year						

	2000	2001	2002	2003	2004
1. Foreign tax paid/accrued					
2. FTC carryback to 2010 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

PASSIVE INCOME

AMT	2005	2006	2007	2008	2009	2010
1. Foreign tax paid/accrued						180.
2. FTC carryback to 2010 for amended returns						
3. Reduction allocated to excluded income						
4. Foreign tax available						180.
5. Maximum credit allowable						425.
6. Unused foreign tax ( + ) or excess of limit ( - )					-429.	-245.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Less treaty adjustment						
10. Foreign tax or excess limit remaining					-429.	-245.
Total foreign taxes from all available years to be carried to next year						

1. Foreign tax paid/accrued
2. FTC carryback to 2010  
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

2000	2001	2002	2003	2004

BARACK H. & MICHELLE L. OBAMA

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FOOTNOTES

STATEMENT

1

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ELECTION TO AMORTIZE BOND PREMIUM

TAXPAYER HEREBY MAKES THE BOND PREMIUM AMORTIZATION ELECTION  
PURSUANT TO CODE SEC. 171(C).

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STATEMENT(S) 1

BARACK H. & MICHELLE L. OBAMA

FORM 1040 STATE AND LOCAL INCOME TAX REFUNDS STATEMENT 2

	2009	2008	2007
	ILLINOIS		
GROSS STATE/LOCAL INC TAX REFUNDS	1,151.		
LESS: TAX PAID IN FOLLOWING YEAR			
NET TAX REFUNDS ILLINOIS	1,151.		
TOTAL NET TAX REFUNDS	1,151.		



FORM 1040		TAXABLE STATE AND LOCAL INCOME TAX REFUNDS		STATEMENT	3
		2009	2008	2007	
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.		1,151.			
LESS: REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION					
1	NET REFUNDS FOR RECALCULATION	1,151.			
2	TOTAL ITEMIZED DEDUCTIONS BEFORE PHASEOUT	568,205.			
3	DEDUCTION NOT SUBJ TO PHASEOUT				
4	NET REFUNDS FROM LINE 1	1,151.			
5	LINE 2 MINUS LINES 3 AND 4	567,054.			
6	MULT LN 5 BY APPL SEC. 68 PCT	151,214.			
7	PRIOR YEAR AGI	5,505,409.			
8	ITEM. DED. PHASEOUT THRESHOLD	166,800.			
9	SUBTRACT LINE 8 FROM LINE 7 (IF ZERO OR LESS, SKIP LINES 10 THROUGH 15, AND ENTER AMOUNT FROM LINE 1 ON LINE 16)	5,338,609.			
10	MULT LN 9 BY APPL SEC. 68 PCT	53,386.			
11	ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10)	513,668.			
12	ITEM DED. NOT SUBJ TO PHASEOUT				
13A	TOTAL ADJ. ITEMIZED DEDUCTIONS	513,668.			
13B	PRIOR YR. STD. DED. AVAILABLE	12,400.			
14	PRIOR YR. ALLOWABLE ITEM. DED.	514,819.			
15	SUBTRACT THE GREATER OF LINE 13A OR LINE 13B FROM LINE 14	1,151.			
16	TAXABLE REFUNDS (LESSER OF LINE 15 OR LINE 1)	1,151.			
17	ALLOWABLE PRIOR YR. ITEM. DED.	514,819.			
18	PRIOR YEAR STD. DED. AVAILABLE	12,400.			
19	SUBTRACT LINE 18 FROM LINE 17	502,419.			
20	LESSER OF LINE 16 OR LINE 19	1,151.			
21	PRIOR YEAR TAXABLE INCOME	4,980,858.			
22	AMOUNT TO INCLUDE ON FORM 1040, LINE 10 * IF LINE 21 IS -0- OR MORE, USE AMOUNT FROM LINE 20 * IF LINE 21 IS A NEGATIVE AMOUNT, NET LINES 20 AND 21				1,151.
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2007					
TOTAL TO FORM 1040, LINE 10					1,151.

FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 4

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T DFAS-CIVPAY DIRECTORATE	395,188.	100,817.	11,376.		6,622.	5,730.
TOTALS	395,188.	100,817.	11,376.		6,622.	5,730.

FORM 1040 QUALIFIED DIVIDENDS STATEMENT 5

NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
FROM K-1 - FREEMAN HENRY G. JR. DECD TW	9,996.	2,159.
TOTAL INCLUDED IN FORM 1040, LINE 9B		2,159.

SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 6

DESCRIPTION	AMOUNT
DFAS-CIVPAY DIRECTORATE	11,376.
ILLINOIS 1ST QTR ESTIMATE PAYMENTS	4,000.
ILLINOIS 2ND QTR ESTIMATE PAYMENTS	15,000.
ILLINOIS 3RD QTR ESTIMATE PAYMENTS	11,000.
ILLINOIS 4TH QTR ESTIMATE PAYMENTS	10,000.
ILLINOIS PRIOR YEAR OVERPAYMENT APPLIED	1,151.
TOTAL TO SCHEDULE A, LINE 5	52,527.

SCHEDULE A	CASH CONTRIBUTIONS	STATEMENT	7
DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	
AMERICAN RED CROSS	2,000.		
BOOK WORM ANGELS	1,000.		
BOYS & GIRLS CLUB OF GREATER WASHINGTON	2,000.		
BOYS AND GIRLS CLUB OF AMERICA	10,000.		
BREAD FOR THE CITY	1,000.		
CALVARY WOMEN'S SHELTER	2,000.		
CARE	5,000.		
CENTRAL ILLINOIS FOOD BANK	2,000.		
CITIZENS UNITED FOR RESEARCH IN EPILEPSY	2,000.		
DIRECT RELIEF INTERNATIONAL	1,000.		
FISHER HOUSE FOUNDATION, INC.	131,075.		
GREATER CHICAGO FOOD DEPOSITORY	2,000.		
GREATER NEW ORLEANS FOUNDATION	2,000.		
HABITAT FOR HUMANITY	2,000.		
ILLINOIS HEAD START ASSOCIATION	2,000.		
ILLINOIS READING COUNCIL	2,000.		
JUVENILE DIABETES RESEARCH FOUNDATION	2,000.		
LIFE PIECES TO MASTERPIECES	5,000.		
MARTIN LUTHER KING NATIONAL MEMORIAL PROJECT	2,000.		
MIDTOWN EDUCATIONAL FOUNDATION	2,000.		
MIRIAM'S KITCHEN	2,000.		
MOSAIC YOUTH THEATRE OF DETROIT	5,000.		
MUJERES LATINAS EN ACCION	2,000.		
NATIONAL AIDS FUND	5,000.		
NATIONAL COALITION FOR HOMELESS VETERANS	5,000.		
NATIONAL CONGRESS OF BLACK WOMEN	1,000.		
NATIONAL MS SOCIETY	5,000.		
OVARIAN CANCER NATIONAL ALLIANCE	5,000.		
ROCHELLE LEE FUND	2,000.		
SIDWELL FRIENDS SCHOOL	5,000.		
ST. LEO'S RESIDENCE FOR VETERANS	2,000.		
THE CHRISTOPHER HOUSE	2,000.		
THE CLINTON BUSH HAITI FUND	15,000.		
THE HARMONY PROJECT	2,000.		
UNIVERSITY OF HAWAII FOUNDATION	2,000.		
UNITED NEGRO COLLEGE FUND	5,000.		
SUBTOTALS	245,075.		
TOTAL TO SCHEDULE A, LINE 16		245,075.	

BARACK H. & MICHELLE L. OBAMA

SCHEDULE C		OTHER INCOME	STATEMENT	8
DESCRIPTION			AMOUNT	
DYSTEL & GODERICH			1,108,058.	
RANDOM HOUSE			460,215.	
TOTAL TO SCHEDULE C, LINE 6			1,568,273.	

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT	9
1. ENTER THE AMOUNT FROM FORM 1040, LINE 41 . . . . .		1,354,807.	
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- . . . . .		1,357,807.	
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.		122,527.	
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7 . . . . .			
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0- . . . . .		3,000.	
12. ADD LINES 10 AND 11 . . . . .		3,000.	
13. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR.			
SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0- . . .		119,527.	

SCHEDULE SE	NON-FARM INCOME	STATEMENT	10
DESCRIPTION		AMOUNT	
AUTHOR		1,382,889.	
TOTAL TO SCHEDULE SE, LINE 2		1,382,889.	

FORM 1116	EXPENSES DIRECTLY ALLOCABLE TO FOREIGN INCOME	STATEMENT	11
DESCRIPTION	COUNTRY	AMOUNT	
OTHER EXPENSES DIRECTLY ALLOCATED	VARIOUS	156,729.	
TOTAL TO FORM 1116, PART I, LINE 2		156,729.	

FORM 1116

WORLDWIDE CAPITAL GAINS  
WORKSHEET FOR LINE 17

STATEMENT 12

1	ENTER THE AMOUNT FROM FORM 1040, LINE 41. IF YOU ARE A NONRESIDENT ALIEN, ENTER THE AMOUNT FROM FORM 1040NR, LINE 38	1,354,807.
2	ENTER WORLDWIDE 28% GAINS	
3	MULTIPLY LINE 2 BY 0.2000	
4	ENTER WORLDWIDE 25% GAINS	
5	MULTIPLY LINE 4 BY 0.2857	
6	ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS	2,159.
7	MULTIPLY LINE 6 BY 0.5714	1,234.
8	ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS	
9	ADD LINES 3, 5, 7, AND 8	1,234.
10	SUBTRACT LINE 9 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116, LINE 17	1,353,573.



FORM 1116	ALTERNATIVE MINIMUM TAX FOREIGN TAX CREDIT WORLDWIDE CAPITAL GAINS WORKSHEET FOR LINE 17	STATEMENT 13
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1	ENTER THE AMOUNT FROM FORM 6251, LINE 29	1,431,925.
2	ENTER WORLDWIDE 25% GAINS	
3	MULTIPLY LINE 2 BY 0.1071	
4	ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS	2,159.
5	MULTIPLY LINE 4 BY 0.4643	1,002.
6	ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS	
7	ADD LINES 3, 5, AND 6	1,002.
8	SUBTRACT LINE 7 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116 AMT, LINE 17	1,430,923.

FORM 1116	U.S. AND FOREIGN SOURCE INCOME SUMMARY FOREIGN TRUST/ESTATE INCOME	STATEMENT 14
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DESCRIPTION	AMOUNT
FREEMAN HENRY G. JR. DECD TW	1,571.
TOTAL FOREIGN TRUST/ESTATE INCOME	1,571.

**United States Gift (and Generation-Skipping Transfer) Tax Return**

(For gifts made during calendar year 2010)

OMB No. 1545-0020

**2010**

▶ See separate 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		X
b If the answer to line 11a is "Yes," has your address changed since you last filed Form 709 (or 709-A)?		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.)		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)		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.)		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 ▶ <i>Michelle Obama</i>		Date ▶ <b>4-13-11</b>

Part 2 - Tax Computation

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 separate instructions)	4	0.
5 Tax computed on amount on line 2 (see Table for Computing Gift Tax in separate instructions)	5	0.
6 Balance. Subtract line 5 from line 4	6	0.
7 Maximum unified credit (nonresident aliens, see instructions)	7	330,800.
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	330,800.
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	330,800.
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	

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	
	Signature of donor <i>[Signature]</i>		Date <b>4/13/11</b>	
	Print/Type preparer's name <b>MICHAEL S. SOLHEIM,</b>	Preparer's signature <i>[Signature]</i>	Date <b>4/17/11</b>	Check <input type="checkbox"/> if self-employed
Paid Preparer Use Only	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)
	SEE STATEMENT 1						

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

	SEE STATEMENT 2						
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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.

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

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

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

**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:

- a. The trust (or other property) is listed on Schedule A, and  
 b. 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 separate 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.
<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.)

**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 RESERVED	E RESERVED	F RESERVED	G Applicable Rate	H Generation-Skipping Transfer Tax (multiply col. B by col. G)

Gifts made by spouse (for gift splitting only)


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 .....

BARACK H. OBAMA

FORM 709

SCHEDULE A, PART 1

STATEMENT 1

ITEM NO	DESCRIPTION	ADJUSTED BASIS	DATE	VALUE	SPLIT 1/2	NET TRANSFER
1	MALITA A. 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.	01/01/10	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.	01/01/10	12,000.	6,000.	6,000.
TOTAL						12,000.

STATEMENT(S) 1



FORM 709 SCHEDULE A, PART 1, GIFTS MADE BY SPOUSE STATEMENT 2

ITEM NO	DESCRIPTION	ADJUSTED BASIS	DATE	VALUE	SPLIT 1/2	NET TRANSFER
1	MALITA A. 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.	01/01/10	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.	01/01/10	12,000.	6,000.	6,000.
TOTAL SCHEDULE A, PART 1, GIFTS MADE BY SPOUSE						12,000.

**United States Gift (and Generation-Skipping Transfer) Tax Return**  
(For gifts made during calendar year 2010)

OMB No. 1545-0020

**2010**

▶ See separate instructions.

<b>1</b> Donor's first name and middle initial <b>MICHELLE L.</b>	<b>2</b> Donor's last name <b>OBAMA</b>	<b>3</b> Donor's social security number 
<b>4</b> Address (number, street, and apartment number) <b>1600 PENNSYLVANIA AVENUE, NW</b>		<b>5</b> Legal residence (domicile) <b>ILLINOIS</b>
<b>6</b> City, state, and ZIP code <b>WASHINGTON, DC 20500</b>		<b>7</b> Citizenship (see instructions) <b>UNITED STATES</b>
<b>8</b> If the donor died during the year, check here <input type="checkbox"/> and enter date of death _____, _____. <span style="float:right;">Yes No</span>		
<b>9</b> If you extended the time to file this Form 709, check here <input type="checkbox"/>		
<b>10</b> Enter the total number of donees listed on Schedule A. Count each person only once. <span style="float:right;"><b>2</b></span>		
<b>11a</b> Have you (the donor) previously filed a Form 709 (or 709-A) for any other year? If "No," skip line 11b. <span style="float:right;">X</span>		
<b>b</b> If the answer to line 11a is "Yes," has your address changed since you last filed Form 709 (or 709-A)? <span style="float:right;">X</span>		
<b>12</b> 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.) <span style="float:right;">X</span>		
<b>13</b> Name of consenting spouse <b>BARACK H. OBAMA</b>		<b>14</b> SSN
<b>15</b> Were you married to one another during the entire calendar year? (see instructions) <span style="float:right;">X</span>		
<b>16</b> If 15 is "No," check whether <input type="checkbox"/> married <input type="checkbox"/> divorced or <input type="checkbox"/> widowed/deceased, and give date ▶		
<b>17</b> Will a gift tax return for this year be filed by your spouse? (If "Yes," mail both returns in the same envelope.) <span style="float:right;">X</span>		
<b>18</b> 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 <input checked="" type="checkbox"/>		Date <b>4/13/11</b>

<b>1</b> Enter the amount from Schedule A, Part 4, line 11 .....	1	0.
<b>2</b> Enter the amount from Schedule B, line 3 .....	2	0.
<b>3</b> Total taxable gifts. Add lines 1 and 2 .....	3	0.
<b>4</b> Tax computed on amount on line 3 (see Table for Computing Gift Tax in separate instructions) .....	4	0.
<b>5</b> Tax computed on amount on line 2 (see Table for Computing Gift Tax in separate instructions) .....	5	0.
<b>6</b> Balance. Subtract line 5 from line 4 .....	6	0.
<b>7</b> Maximum unified credit (nonresident aliens, see instructions) .....	7	330,800.
<b>8</b> Enter the unified credit against tax allowable for all prior periods (from Sch. B, line 1, col. C) .....	8	0.
<b>9</b> Balance. Subtract line 8 from line 7. Do not enter less than zero .....	9	330,800.
<b>10</b> 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	0.
<b>11</b> Balance. Subtract line 10 from line 9. Do not enter less than zero .....	11	330,800.
<b>12</b> Unified credit. Enter the smaller of line 6 or line 11 .....	12	0.
<b>13</b> Credit for foreign gift taxes (see instructions) .....	13	0.
<b>14</b> Total credits. Add lines 12 and 13 .....	14	0.
<b>15</b> Balance. Subtract line 14 from line 6. Do not enter less than zero .....	15	0.
<b>16</b> Generation-skipping transfer taxes (from Schedule C, Part 3, col. H, Total) .....	16	0.
<b>17</b> Total tax. Add lines 15 and 16 .....	17	0.
<b>18</b> Gift and generation-skipping transfer taxes prepaid with extension of time to file .....	18	0.
<b>19</b> If line 18 is less than line 17, enter balance due (see instructions) .....	19	0.
<b>20</b> If line 18 is greater than line 17, enter amount to be refunded .....	20	0.

<b>Sign Here</b>	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
	Signature of donor	Date <b>4-13-11</b>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MICHAEL S. SOLHEIM,</b>	Preparer's signature
	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)
	SEE STATEMENT 3						

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

	SEE STATEMENT 4						
--	-----------------	--	--	--	--	--	--

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.

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

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

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

**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	<b>Taxable gifts.</b> 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 separate 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.
<b>1 Totals for prior periods</b>				
		1		0.
<b>2</b> Amount, if any, by which total specific exemption, line 1, column D is more than \$30,000				2
<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				3
				0.

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



BARACK H. OBAMA

MICHELLE L. OBAMA

STATEMENT 3

FORM 709

SCHEDULE A, PART 1

ITEM NO	DESCRIPTION	ADJUSTED BASIS	DATE	VALUE	SPLIT 1/2	NET TRANSFER
1	MALIA A. 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.	01/01/10	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.	01/01/10	12,000.	6,000.	6,000.
TOTAL						<u>12,000.</u>

STATEMENT(S) 3

BARACK H. OBAMA

MICHELLE L. OBAMA

STATEMENT 4

FORM 709

SCHEDULE A, PART 1, GIFTS MADE BY SPOUSE

ITEM NO	DESCRIPTION	ADJUSTED BASIS	DATE	VALUE	SPLIT 1/2	NET TRANSFER
1	MALIA A. 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.	01/01/10	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.	01/01/10	12,000.	6,000.	6,000.
TOTAL SCHEDULE A, PART 1, GIFTS MADE BY SPOUSE						12,000.

STATEMENT(S) 4

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

Step 2: Income

(Whole dollars only)

1 Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4. **1** 1,728,096 .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 to your income. **Attach** Schedule M. **3** .00

4 Total income. Add Lines 1 through 3. **4** 1,728,096 .00

Step 3: Base Income

5 Income received from Social Security benefits and certain retirement plans if included in Line 1. **Attach** federal Page 1. **5** .00

6 Illinois Income Tax overpayment included in U.S. 1040, Line 10. **6** 1,151 .00

7 Other subtractions to your income. **Attach** Schedule M. **7** .00

Check if Line 7 includes any amount from Schedule 1299-C. ☐

8 Add Lines 5, 6, and 7. This is the total of your subtractions. **8** 1,151 .00

9 Illinois base income. Subtract Line 8 from Line 4. **9** 1,726,945 .00

Step 4: Exemptions

See instructions before figuring exemptions.

10 a Number of exemptions from your federal return. 4 x \$2,000 a 8,000 .00

b If someone else claimed or could have claimed you or your spouse as a dependent on their return, see instructions to figure the number to write here.      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 Only: Net Income. Subtract Line 10 from Line 9. **Skip** Line 12. **11** 1,718,945 .00

12 Nonresidents and part-year residents Only:  
Check the box that applies to you during 2010 ☐ 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 3% (.03). Write the result here.  
Nonresidents and part-year residents: Write the tax before recapture of investment credits from Schedule NR. **13** 51,568 .00

14 Recapture of investment tax credits. **Attach** Schedule 4255. **14** .00

15 Total tax. Add Lines 13 and 14. This amount may not be less than zero. **15** 51,568 .00



16 Total tax amount from Page 1, Line 15 16 51,568 .00  
Step 7: Tax After Nonrefundable Credits and Use Tax

17 Income tax paid to another state while an Illinois resident. 17 .00  
Attach Schedule CR.  
18 Property tax and K-12 education expense credit amount from  
Schedule ICR. Attach Schedule ICR. 18 .00  
19 Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 19 .00  
20 Add Lines 17, 18, and 19. This is the total of your credits. This amount  
may not exceed the tax amount on Line 16. 20 .00  
21 Tax after nonrefundable credits. Subtract Line 20 from Line 16. 21 51,568 .00  
22 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. 22 0 .00  
23 Tax after nonrefundable credits and use tax. Add Lines 21 and 22. 23 51,568 .00

Step 8: Payments and Refundable Credit

24 Illinois Income Tax withheld. Attach W-2 and 1099 forms. 24 11,376 .00  
25 Estimated payments from Forms IL-505-I and IL-1040-ES,  
including overpayment applied from 2009 return. 25 41,151 .00  
26 Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T. 26 .00  
27 Earned Income Credit from Schedule ICR. Attach Schedule ICR. 27 .00  
28 Total payments and refundable credit. Add Lines 24 through 27. 28 52,527 .00

Step 9: Overpayment or Underpayment

29 Overpayment. If Line 28 is greater than Line 23, subtract Line 23 from Line 28. 29 959 .00  
30 Underpayment. If Line 23 is greater than Line 28, subtract Line 28 from Line 23. 30 .00

Step 10: Underpayment of Estimated Tax Penalty and Donations

31 Late payment penalty for underpayment of estimated tax. 31 .00  
a Check if at least two-thirds of your federal gross income is from farming. ☐  
b Check if you or your spouse are 65 or older and permanently  
living in a nursing home. ☐  
c Check if your income was not received evenly during the year and you  
annualized your income on Form IL-2210, otherwise we will figure this  
penalty for you. Attach Form IL-2210. ☒  
32 Voluntary charitable donations. Attach Schedule G. 32 .00  
33 Total penalty and donations. Add Lines 31 and 32. 33 .00

Step 11: Refund or Amount You Owe

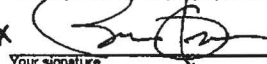
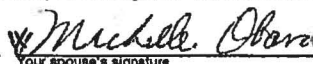
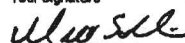
34 If you have an overpayment on Line 29 and this amount is greater than  
Line 33, subtract Line 33 from Line 29. This is your remaining overpayment. 34 959 .00  
35 Amount from Line 34 you want refunded to you. 35 0 .00

Direct  
Deposit

36 Complete to direct deposit your refund  
Routing number ☐ Checking or ☐ Savings  
Account number  
37 Subtract Line 35 from Line 34. This amount will be applied to your 2011 estimated tax. 37 959 .00  
38 If you have an underpayment on Line 30, add Lines 30 and 33. Or  
If you have an overpayment on Line 29 and this amount is less than Line 33,  
subtract Line 29 from Line 33. This is the amount you owe. 38 .00

Step 12: Sign and Date

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 here x  4/13/11 Date Daytime phone number  4-13-11 Date  
Paid preparer's signature  4/7/11 Date Preparer's phone number Preparer's firm, company, or other identification

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

049002 11-19-10  
ID: 2BX

IL-1040 page 2 (R-12/10)

DR AP RR DC

If payment enclosed, mail to:  
ILLINOIS DEPARTMENT OF REVENUE  
SPRINGFIELD IL 62726-0001

**2010 IL-2210** Computation of Penalties for Individuals

Attach to your Form IL-1040

IL Attachment No. 19

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

**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
<b>1</b> Write the amount of your total income tax from each tax return. See instructions.	1 51,568.	164,426.
<b>2</b> Write the amount of credits from each tax return. See instructions.	2	1,123.
<b>3</b> Subtract Line 2 from Line 1.	3 51,568.	163,303.
<b>4a</b> Write the total amount of this year's Illinois withholding from your W-2 forms.	4a 11,376.	
<b>4b</b> Write the total amount of any pass-through entity payments made on your behalf.	4b	
<b>4c</b> Add Lines 4a and 4b and write the result here.	4c 11,376.	
<b>5</b> Subtract Line 4c from Line 3.	5 40,192.	
<b>6</b> Multiply Column A, Line 3, by 90% (.9).	6 46,411.	
<b>7</b> If Line 5 is \$500 or less or if you are exempt from estimated tax, write "0," and go to Step 3. Otherwise, write the lesser of Column A, Line 6, or Column B, Line 3.	7 46,411.	
<b>8</b> 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 11,603.	

	Quarter 1 April 15, 2010	Quarter 2 June 15, 2010	Quarter 3 September 15, 2010	Quarter 4 January 18, 2011
<b>9</b> Write the required installment. See instructions.	6,253.	16,953.	11,603.	11,602.
<b>10a</b> Write any credit carried forward from the prior year	1,151.	Skip this line for Quarter 2.	Skip this line for Quarter 3.	Skip this line for Quarter 4.
<b>10b</b> Write the amount of tax withheld	2,844.	2,844.	2,844.	2,844.
<b>10c</b> Write the amount of pass-through payments				
<b>10d</b> Add Lines 10a through 10c in each column	3,995.	2,844.	2,844.	2,844.
<b>11</b> Subtract Line 10d from Line 9. If the amount is negative, use brackets.	2,258.	14,109.	8,759.	8,758.
<b>12</b> 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.
<b>13</b> Subtract Line 12 from Line 11. If the amount is negative, use brackets.	2,258.	14,109.	8,759.	8,758.

Continue with Step 3 on Page 2 →

### Step 3: Figure your unpaid tax

- 14 Write the amount from Column A, Line 3. 14 51,568.
- 15 Write the amount of use tax from IL-1040, Line 22. 15 \_\_\_\_\_
- 16 Add Lines 14 and 15. Write the total amount here. 16 51,568.
- 17 Add your credit carried forward from the prior year (credited on or before April 18, 2011), your total estimated payments made on or before April 18, 2011, your withholding as shown on your W-2 forms, and the pass-through entity payments made on your behalf. Compare that total to **either** the amount written on Line 7, or, **if you annualized**, the total of Line 9, Quarters 1 through 4, and write the **greater** amount here. 17 52,527.
- 18 Write other payments made on or before April 18, 2011.
- a Write the amount and the date of your Form IL-505-I. 18a \_\_\_\_\_ Date: \_\_\_\_\_
- b Write the amount and the date of any other payment. 18b \_\_\_\_\_ Date: \_\_\_\_\_
- Add Lines 18a and 18b. Write the amount here. 18 \_\_\_\_\_
- 19 Add Lines 17 and 18. Write the total amount here. 19 52,527.
- 20 Subtract Line 19 from Line 16. If the amount is
- **positive**, write that amount here. Continue to Step 4, and write this amount in Penalty Worksheet 1, Line 22, Column C.
  - **zero or negative**, write that amount here, if negative use brackets. Continue to Step 4, skip Penalty Worksheet 1, and go to Penalty Worksheet 2. You may apply this amount to any underpayment when figuring your Penalty Worksheet 2. See instructions. 20 <959.>

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

Use Penalty Worksheet 1 to figure your late-payment penalty for unpaid tax.

Use Penalty Worksheet 2 to figure your late-payment penalty for underpayment of estimated tax.

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

#### Penalty rates

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

#### Penalty Worksheet 1 - Late-payment penalty for unpaid tax

- 21 Write the amount and the date of any payment you made on or after April 19, 2011. See instructions.

Amount	Date paid	Amount	Date paid
a _____	_____	c _____	_____
b _____	_____	d _____	_____

- 22 Write the amount from Line 20 on the first line of Column C below.

A	B	C	D	E	F	G	H	I
Period	Due date	Unpaid amount	Payment applied	Balance due (Col. C - Col. D)	Payment date	Number of days late	Penalty rate (See above)	Penalty
Return April 18, 2011	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____

- 23 Add Column I. This is your **late-payment penalty for unpaid tax**.

Write the total amount here and on Line 34.

23 \_\_\_\_\_

**Note** You may apply any remaining overpayment in Column E above to any underpayment when figuring the Penalty Worksheet 2.

## Penalty Worksheet 2 - 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.

**24** Write the amount and the date of each estimated income tax payment you made. See instructions.

Estimated Income Tax Payments					
Amount	Date paid	Amount	Date paid	Amount	Date paid
a 4,000.	04/15/10	c 11,000.	09/15/10	e	
b 15,000.	06/15/10	d 10,000.	12/31/10	f	

**25** 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 April 15, 2010		2,258.		2,258.	04/15/10			
		2,258.	4,000.	-1,742.	04/15/10			
Qtr 2 June 15, 2010		14,109.		14,109.	06/15/10			
		14,109.	1,742.	12,367.	06/15/10			
		12,367.	15,000.	-2,633.	06/15/10			
Qtr 3 Sept. 15, 2010		8,759.		8,759.	09/15/10			
		8,759.	2,633.	6,126.	09/15/10			
		6,126.	11,000.	-4,874.	09/15/10			
Qtr 4 Jan. 18, 2011		8,758.		8,758.	01/18/11			
		8,758.	4,874.	3,884.	01/18/11			
		3,884.	10,000.	-6,116.	01/18/11			

**26** 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 31 (round to whole dollars).

26 0

### 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 October 15, 2011, and
- your tax was not paid on or before April 18, 2011.

#### Figure your late-filing penalty.

<b>27</b> Write the amount from Form IL-1040, Line 16.	27
<b>28</b> Write the amount of use tax from Form IL-1040, Line 22.	28
<b>29</b> Add Lines 27 and 28. Write the total amount here.	29
<b>30</b> Write the total amount of credits and payments made on or before April 18, 2011.	30
<b>31</b> Subtract Line 30 from Line 29.	31
<b>32</b> Multiply the amount on Line 31 by 2% (.02).	32
<b>33</b> Write the lesser of Line 32 or \$250. This is your late-filing penalty.	33

#### Figure the amount you owe.

<b>34</b> Write any late-payment penalty for unpaid tax from Line 23.	34
<b>35</b> Write any late-filing penalty from Line 33.	35
<b>36</b> If you have an overpayment on Form IL-1040, Line 34, write that amount as a <negative number>. If you have an amount due on Form IL-1040, Line 38, write that amount as a positive number.	36
<b>37</b> Add Lines 34 through 36. 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 instructions for your payment options.	37

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

Complete this worksheet only if your income was not received evenly throughout the year and you choose to annualize your income. Complete Lines 38 through 54 of one column before going to the next, beginning with Column A.

	A January 1, 2010 to March 31, 2010	B January 1, 2010 to May 31, 2010	C January 1, 2010 to August 31, 2010	D January 1, 2010 to December 31, 2010
38 Write your Illinois base income for each period. See instructions.	38 233,602.	747,417.	1,207,824.	1,726,945.
39 Annualization factors.	39 4	2.4	1.5	1
40 Multiply Line 38 by Line 39. This is your annualized income.	40 934,408.	1,793,801.	1,811,736.	1,726,945.
41 Exemptions. See instructions.	41 8,000.	8,000.	8,000.	8,000.
42 Subtract Line 41 from Line 40. This is your Illinois net income.	42 926,408.	1,785,801.	1,803,736.	1,718,945.
43 Multiply Line 42 by 3% (.03).	43 27,792.	53,574.	54,112.	51,568.
44 For each period, write the amount you wrote on Step 2, Line 2, Column A.	44			
45 Subtract Line 44 from Line 43.	45 27,792.	53,574.	54,112.	51,568.
46 Applicable percentage.	46 22.5% (.225)	45% (.450)	67.5% (.675)	90% (.900)
47 Multiply Line 45 by Line 46. This is your annualized installment.	47 6,253.	24,108.	36,526.	46,411.
48 Add the amounts on Line 54 of each of the preceding columns and write the total here.	48 Skip this line for Column A.	6,253.	23,206.	34,809.
49 Subtract Line 48 from Line 47. If less than zero, write "0."	49 6,253.	17,855.	13,320.	11,602.
50 Write the amount from Step 2, Line 8 in each column.	50 11,603.	11,603.	11,603.	11,602.
51 Write the amount from Line 53 of the preceding column.	51 Skip this line for Column A.	5,350.		
52 Add Lines 50 and 51.	52 11,603.	16,953.	11,603.	11,602.
53 If Line 52 is greater than Line 49, subtract Line 49 from Line 52. Otherwise, write "0."	53 5,350.	0.	0.	Skip this line for Column D.
54 Write the lesser of Line 49 or Line 52 here and on Line 9. This is your required installment.	54 6,253.	16,953.	11,603.	11,602.

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-0031

Form 1040		U.S. Individual Income Tax Return		2010		(99) IRS Use Only - Do not write or staple in this space.	
Name, Address, and SSN	P R I N T C L E A R L Y	For the year Jan. 1-Dec. 31, 2010, or other tax year beginning , 2010, ending , 20				OMB No. 1545-0074	
		Your first name and initial		Last name		Your social security number	
		JOSEPH R		BIDEN JR.			
		If a joint return, spouse's first name and initial		Last name		Spouse's social security number	
JILL T		BIDEN					
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 8c are correct.	
City, town or post office, state, and ZIP code.						Checking a box below will not change your tax or refund.	
WILMINGTON, DE							
Presidential Election Campaign		Check here if you, or your spouse if filing jointly, want \$3 to go to this fund				<input checked="" type="checkbox"/> You <input checked="" type="checkbox"/> Spouse	
Filing Status		1 <input type="checkbox"/> Single				4 <input type="checkbox"/> Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.	
2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income)							
3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here.						5 <input type="checkbox"/> Qualifying widow(er) with dependent child	
Exemptions		6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a				Boxes checked on 6a and 6b 2	
b <input checked="" type="checkbox"/> Spouse						No. of children on 6c who: • lived with you • did not live with you due to divorce or separation (see instructions)	
c Dependents:		(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) <input checked="" type="checkbox"/> If child under age 17 qualifying for child tax credit				Dependents on 6c not entered above	
If more than four dependents, see instructions and check here						Add numbers on lines above 2	
d Total number of exemptions claimed							
Income		7 Wages, salaries, tips, etc. Attach Form(s) W-2				7 308,376.	
8a Taxable interest. Attach Schedule B if required						8a 4,014.	
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		STMT 3 STMT 4				10 0.	
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		b Taxable amount		15b	
16a Pensions and annuities		16a 31,995.		b Taxable amount		16b 31,826.	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E						17 11,000.	
18 Farm income or (loss). Attach Schedule F						18	
19 Unemployment compensation						19	
20a Social security benefits		20a 28,190.		b Taxable amount		20b 23,962.	
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						22 379,178.	
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 One-half 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 31a and 32 through 35						36	
37 Subtract line 36 from line 22. This is your adjusted gross income						37 379,178.	

010001  
01-27-11



<b>Tax and Credits</b>	38	Amount from line 37 (adjusted gross income)	38	379,178.
	39a	Check <input checked="" type="checkbox"/> You were born before January 2, 1946, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a <b>1</b> if: <input type="checkbox"/> Spouse was born before January 2, 1946, <input type="checkbox"/> Blind. <input type="checkbox"/> <b>39b</b>		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/>		
	40	Itemized deductions (from Schedule A) or your standard deduction (see instructions)	40	67,038.
	41	Subtract line 40 from line 38	41	312,140.
	42	Exemptions. Multiply \$3,650 by the number on line 6d	42	7,300.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	304,840.
	44	Tax. Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	78,378.
	45	Alternative minimum tax. Attach Form 6251	45	7,669.
	46	Add lines 44 and 45	46	86,047.
	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	86,047.
<b>Other Taxes</b>	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	
	59	a <input type="checkbox"/> Form(s) W-2, box 9 b <input checked="" type="checkbox"/> Schedule H. c <input type="checkbox"/> Form 5405, line 16	59	579.
	60	Add lines 55 through 59. This is your total tax	60	86,626.
<b>Payments</b>	61	Federal income tax withheld from Forms W-2 and 1099	61	79,446.
	62	2010 estimated tax payments and amount applied from 2009 return	62	
	63	Making work pay credit. Attach Schedule M	63	
	64a	Earned income credit (EIC)	64a	
	b	Nontaxable combat pay election <input type="checkbox"/> 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 61, 62, 63, 64a, and 65 through 71. These are your total payments	72	79,446.
<b>Refund</b>	73	If line 72 is more than line 60, subtract line 60 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 <input type="checkbox"/>	74a	
Direct deposit? See instructions.	75	Amount of line 73 you want applied to your 2011 estimated tax	75	
<b>Amount You Owe</b>	76	Amount you owe. Subtract line 72 from line 60. For details on how to pay, see instructions	76	7,180.
	77	Estimated tax penalty (see instructions)	77	
<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	WALTER H DEYHLE, CPA	Phone no.	
<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.			
Joint return? See page 12. Keep a copy for your records.	Your signature	Date	Your occupation	Daytime phone number
	<i>Walter H Deyhle</i>	4.14.11	VICE PRESIDENT	
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
	<i>Jill T Biden</i>	4.14.11	TEACHER	
<b>Paid Preparer Use Only</b>	Print preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> If PTIN self-employed
	WALTER H DEYHLE, CPA	<i>Walter H Deyhle</i>	4/12/11	
	Firm's name	GELMAN, ROSENBERG & FREEDMAN		
	Firm's address	4550 MONTGOMERY AVE., SUITE 650 NORTH BETHESDA, MD 20814-2930		

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

Department of the Treasury  
Internal Revenue Service (99)

**Itemized Deductions**

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

OMB No. 1545-0074

**2010**

Attachment  
Sequence No. 07

Name(s) shown on Form 1040

Your social security number

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

**Medical  
and  
Dental  
Expenses**

Caution. 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 |  |

**Taxes You  
Paid**

- |   |   |   |         |
|---|---|---|---------|
| 5 | State and local (check only one box):<br>a <input checked="" type="checkbox"/> Income taxes, or<br>b <input type="checkbox"/> General sales taxes | 5 | 18,300. |
| 6 | Real estate taxes (see instructions)  | 6 | 13,369. |
| 7 | New motor vehicle taxes from line 11 of the worksheet on page 2 (for certain vehicles purchased in 2009). Skip this line if you checked box 5b    | 7 |         |
| 8 | Other taxes. List type and amount ▶   | 8 |         |
| 9 | Add lines 5 through 8   | 9 | 31,669. |

**Interest  
You Paid**

- |    |  |    |         |
|----|--|----|---------|
| 10 | Home mortgage interest and points reported to you on Form 1098   | 10 | 30,019. |
| 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 |         |

**Note.**  
Your mortgage  
interest  
deduction may  
be limited (see  
instructions).

- |    |   |    |         |
|----|---|----|---------|
| 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 | 30,019. |

**Gifts to  
Charity**

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 | 4,400. |
| 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 | 950.   |
| 18 | Carryover from prior year  | 18 |        |
| 19 | Add lines 16 through 18  | 19 | 5,350. |

**Casualty and  
Theft Losses**

- |    |   |    |  |
|----|---|----|--|
| 20 | Casualty or theft loss(es). Attach Form 4684. (See instructions.) | 20 |  |
|----|---|----|--|

**Job Expenses  
and Certain  
Miscellaneous  
Deductions**

- |    |   |    |  |
|----|---|----|--|
| 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 |  |

**Other  
Miscellaneous  
Deductions**

- |    |   |    |  |
|----|---|----|--|
| 28 | Other - from list in instructions. List type and amount ▶ | 28 |  |
|----|---|----|--|

**Total  
Itemized  
Deductions**

- |    |   |    |         |
|----|---|----|---------|
| 29 | Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40 | 29 | 67,038. |
| 30 | If you elect to itemize deductions even though they are less than your standard deduction, check here         |    |         |

LHA 019501 12-21-10 For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2010



Worksheet Before you begin: ☒ You cannot take this deduction if the amount on Form 1040, line 38, is equal to or greater than \$135,000 (\$260,000 if married filing jointly).  
 for Line 7 - ☒ See the instructions for line 7 on page A-6.  
 New motor vehicle taxes

Use this worksheet to figure the amount to enter on line 7.  (Attach to Form 1040.)	1	Enter the state or local sales or excise taxes you paid in 2010 for the purchase of any new motor vehicle(s) after February 16, 2009, and before January 1, 2010 (see instructions) .....	1		3
	2	Enter the purchase price (before taxes) of the new motor vehicle(s) .....	2		
	3	Is the amount on line 2 more than \$49,500? <input type="checkbox"/> No. Enter the amount from line 1. <input type="checkbox"/> Yes. Figure the portion of the tax from line 1 that is attributable to the first \$49,500 of the purchase price of each new motor vehicle and enter it here (see instructions).			
	4	Enter the amount from Form 1040, line 38 .....	4		
	5	Enter the total of any - • Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15, and • Exclusion of income from Puerto Rico	5		
	6	Add lines 4 and 5 .....	6		
	7	Enter \$125,000 (\$250,000 if married filing jointly) .....	7		
	8	Is the amount on line 6 more than the amount on line 7? <input type="checkbox"/> No. Enter the amount from line 3 above on Schedule A, line 7. Do not complete the rest of this worksheet: <input type="checkbox"/> Yes. Subtract line 7 from line 6 .....	8		
	9	Divide the amount on line 8 by \$10,000. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000 .....	9		
	10	Multiply line 3 by line 9 .....	10		
	11	Deduction for new motor vehicle taxes. Subtract line 10 from line 3. Enter the result here and on Schedule A, line 7 .....	11		

Schedule A (Form 1040) 2010

**SCHEDULE B**

(Form 1040A or 1040)

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

**Interest and Ordinary Dividends**

▶ Attach to Form 1040A or 1040.

▶ See instructions.

OMB No. 1545-0074

**2010**

Attachment  
Sequence No. 08

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 page B-1 and list this interest first. Also, show that buyer's social security number and address ▶

NEW CASTLE COUNTY SCHOOL EFCU  
US SENATE FEDERAL CREDIT UNION  
WILMINGTON SAVINGS FUND  
MASSACHUSETTS 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

19.  
18.  
3,966.  
11.

- 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: ... ▶

4,014.  
4,014.

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 2010, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1

- b If "Yes," enter the name of the foreign country ▶

- 8 During 2010, 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 page B-2

Yes No

X

X

027501  
10-18-10

LHA For Paperwork Reduction Act Notice, see separate instructions.

Schedule B (Form 1040A or 1040) 2010

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

 Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**

 (From rental real estate, royalties, partnerships,  
S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040NR, or Form 1041.

See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

**2010**

 Attachment  
Sequence No. **13**

Name(s) shown on return

Your social security number

**JOSEPH R BIDEN JR. & JILL T BIDEN**
**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 page E-3). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and address of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of: • 14 days or • 10% of the total days rented at fair rental value? (See page E-4)	Yes	No
A	COTTAGE WILMINGTON, DE			A	X
B				B	
C				C	

Income:	Properties			Totals (Add columns A, B, and C.)
	A	B	C	
3 Rents received	3 13,200.			3 13,200.
4 Royalties received	4			4
<b>Expenses:</b>				
5 Advertising	5			
6 Auto and travel (see page E-5)	6			
7 Cleaning and maintenance	7			
8 Commissions	8 2,200.			
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see page E-5)	12			12
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			
17 Utilities	17			
18 Other (list) ▶	18			
19 Add lines 5 through 18	19 2,200.			19 2,200.
20 Depreciation expense or depletion (see page E-5)	20			20
21 Total expenses. Add lines 19 and 20	21 2,200.			
22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-6 to find out if you must file Form 6198	22 11,000.			
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-6 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23			
24 Income. Add positive amounts shown on line 22. Do not include any losses				24 11,000.
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. 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 11,000.

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

OMB No. 1545-0074

**2010**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 6. (If less than zero, enter as a negative amount.)	1	312,140.
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), lines 5, 6, and 8	3	31,669.
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
5 Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6 If filing Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 17 from that schedule	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 9</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 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$219,900, see instructions.)	28	343,809.

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

29 Exemption. (If you were under age 24 at the end of 2010, 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 \$47,450 Married filing jointly or qualifying widow(er) 150,000 72,450 Married filing separately 75,000 36,225 } <b>STMT 10</b>	29	23,998.
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 33 and 35 and skip the rest of Part II	30	319,811.
31 • If you are filing Form 2555 or 2555-EZ, see page 9 of the 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	86,047.
32 Alternative minimum tax foreign tax credit (see instructions)	32	
33 Tentative minimum tax. Subtract line 32 from line 31	33	86,047.
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	78,378.
35 AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	7,669.

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

Form 6251 (2010)

019481  
12-21-10

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

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		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 the 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 smaller 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 smaller 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>• \$68,000 if married filing jointly or qualifying widow(er),</li> <li>• \$34,000 if single or married filing separately, or</li> <li>• \$45,550 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 smaller of line 36 or line 37	46	
47	Enter the smaller of line 45 or line 46	47	
48	Subtract line 47 from line 46	48	
49	Multiply line 48 by 15% (.15) If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go to line 50.		49
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 smaller 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		54

Form 6251 (2010)

# ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s) <b>JOSEPH R BIDEN JR. &amp; JILL T BIDEN</b>	Social Security Number
---	------------------------

Form Name	Description	Income	Adjustment				
			Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251 Other Adjustment
E-	COTTAGE - , WILMINGTON, * REGULAR INCOME * AMT NET INCOME	11,000. 11,000.					

**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

**2010**

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 2010? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions on page H-4 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 2010 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 2009 or 2010 to all household employees? (Do not count cash wages paid in 2009 or 2010 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** Stop. Do not file this schedule.  
☐ **Yes.** Skip lines 1-9 and go to line 10 on page 2. (Calendar year taxpayers having no household employees in 2010 do not have to complete this form for 2010.)

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

<b>1</b> Total cash wages subject to social security taxes (see page H-4)	<b>1</b>	<b>3,600.</b>	
<b>2</b> Social security taxes. Multiply line 1 by 12.4% (.124)	<b>2</b>		<b>446.</b>
<b>3</b> Total cash wages subject to Medicare taxes (see page H-4)	<b>3</b>	<b>3,600.</b>	
<b>4</b> Medicare taxes. Multiply line 3 by 2.9% (.029)	<b>4</b>		<b>104.</b>
<b>5</b> Federal income tax withheld, if any	<b>5</b>		
<b>6</b> Total social security, Medicare, and federal income taxes. Add lines 2, 4, and 5	<b>6</b>		<b>550.</b>
<b>7</b> Advance earned income credit (EIC) payments, if any	<b>7</b>		
<b>8</b> Net taxes (subtract line 7 from line 6)	<b>8</b>		<b>550.</b>

**9** Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2009 or 2010 to all household employees? (Do not count cash wages paid in 2009 or 2010 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** Stop. Include the amount from line 8 above on Form 1040, line 59, and check box b on that line. If you are not required to file Form 1040, see the line 9 instructions on page H-4.  
☒ **Yes.** Go to line 10 on page 2.

LHA For Privacy Act and Paperwork Reduction Act Notice, see page H-7 of the instructions.

Schedule H (Form 1040) 2010



<b>Part II</b>	<b>Federal Unemployment (FUTA) Tax</b>
----------------	--

		Yes	No
10	Did you pay unemployment contributions to only one state? (If you paid contributions to a credit reduction state, see page H-5 and check "No.") .....	10	X
11	Did you pay all state unemployment contributions for 2010 by April 18, 2011? Fiscal year filers, see page H-5 .....	11	X
12	Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax? .....	12	X

## Section A

13	Name of the state where you paid unemployment contributions .....	DE	
14	Contributions paid to your state unemployment fund (see page H-5) .....	14	11.
15	Total cash wages subject to FUTA tax (see page H-5) .....	15	3,600.
16	FUTA tax. Multiply line 15 by .008. Enter the result here, skip Section B, and go to line 25 .....	16	29.

## Section B

17 Complete all columns below that apply (if you need more space, see page H-5):								
(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					
							18	
18 Totals.....						19		
19 Add columns (g) and (h) of line 18 .....						20		
20 Total cash wages subject to FUTA tax (see the line 15 instructions on page H-5) .....						21		
21 Multiply line 20 by 6.2% (.062).....						22		
22 Multiply line 20 by 5.4% (.054).....								
23 Enter the smaller of line 19 or line 22 (Employers in a credit reduction state must use the worksheet on page H-5 and check here) .....						<input type="checkbox"/>	23	
24 FUTA tax. Subtract line 23 from line 21. Enter the result here and go to line 25 .....							24	

<b>Part III</b>	<b>Total Household Employment Taxes</b>
-----------------	---

25 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0-	25	550.
26 Add line 16 (or line 24) and line 25 (see page H-6)	26	579.

27 Are you required to file Form 1040?

☒ **Yes.** Stop. Include the amount from line 26 above on Form 1040, line 59, and check box **b** on that line. Do not complete Part IV below.

☐ **No.** You may have to complete Part IV. See page H-6 for details.

**Part IV Address and Signature** - Complete this part only if required. See the line 27 instructions on page H-6.

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	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date
	Check <input type="checkbox"/> if self-employed		PTIN
	Firm's name ▶		Firm's EIN ▶
	Firm's address ▶		Phone no.



## Noncash Charitable Contributions

▶ Attach to your tax return if you claimed a total deduction  
of over \$500 for all contributed property.

▶ See separate Instructions.

OMB. No. 1545-0008

Attachment  
Sequence No. 155

Name(s) shown on your income tax return

Identifying number

JOSEPH R BIDEN JR. &amp; JILL T BIDEN

Note. Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

Section A. Donated Property of \$5,000 or Less and Certain Publicly Traded Securities - List in this section only items (or groups of similar items) for which you claimed a deduction of \$5,000 or less. Also, list certain publicly traded securities even if the deduction is more than \$5,000 (see instructions).

**Part I** Information on Donated Property - If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) Description of donated property (For a donated vehicle, enter the year, make, model, condition, and mileage, and attach Form 1098-C if required.)
A	GOODWILL OF DELAWARE & DELAWARE COUNTY 300 EAST LEA BOULEV, WILMINGTON, DE 19802	CLOTHING AND HOUSEHOLD GOODS
B	GOODWILL OF DELAWARE & DELAWARE COUNTY 300 EAST LEA BOULEV, WILMINGTON, DE 19802	CLOTHING AND HOUSEHOLD GOODS
C	GOODWILL OF DELAWARE & DELAWARE COUNTY 300 EAST LEA BOULEV, WILMINGTON, DE 19802	CLOTHING AND HOUSEHOLD GOODS
D	CLOTHING BANK OF DELAWARE	CLOTHING
E	CLOTHING BANK OF DELAWARE	CLOTHING

Note. If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (d), (e), and (f).

	(c) Date of the contribution	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) Fair market value (see instructions)	(h) Method used to determine the fair market value
A		VAR.	PURCHASE	1,200.	300.	THRIFT SHOP VALUE
B		VAR.	PURCHASE	800.	200.	THRIFT SHOP VALUE
C		VAR.	PURCHASE	800.	200.	THRIFT SHOP VALUE
D		VAR.	PURCHASE	200.	50.	THRIFT SHOP VALUE
E		VAR.	PURCHASE	800.	200.	THRIFT SHOP VALUE

**Part II** Partial Interests and Restricted Use Property - Complete lines 2a through 2e if you gave less than an entire interest in a property listed in Part I. Complete lines 3a through 3c if conditions were placed on a contribution listed in Part I; also attach the required statement (see instructions).

2 a Enter the letter from Part I that identifies the property for which you gave less than an entire interest ▶ \_\_\_\_\_.

If Part II applies to more than one property, attach a separate statement.

b Total amount claimed as a deduction for the property listed in Part I: (1) For this tax year ▶ \_\_\_\_\_.  
(2) For any prior tax years ▶ \_\_\_\_\_.

c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above):

Name of charitable organization (donee)

Address (number, street, and room or suite no.)

City or town, state, and ZIP code

d For tangible property, enter the place where the property is located or kept ▶ \_\_\_\_\_.

e Name of any person, other than the donee organization, having actual possession of the property ▶ \_\_\_\_\_.

3 a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property? .....

b Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire? .....

c Is there a restriction limiting the donated property for a particular use? .....

Yes	No

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 8283 (Rev. 12-2006)

FORM 1040

PENSIONS AND ANNUITIES

STATEMENT 1

## 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 2010  
 D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE  
 FOR ALL OF 2010

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. . . . . 28,190.  
 IF YOU CHECKED BOX B: TAXPAYER AMOUNT . . . . . 28,190.  
 SPOUSE AMOUNT . . . . .
2. ENTER ONE HALF OF LINE 1 . . . . . 14,095.
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 . . . . . 355,216.
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. . . . . 369,311.
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 . . . . . 369,311.
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 2010, BE SURE YOU ENTERED 'D' TO THE  
 RIGHT OF THE WORD "BENEFITS" ON LINE 20A.  
 [X] YES. SUBTRACT LINE 8 FROM LINE 7 . . . . . 337,311.
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-. . . . . 325,311.
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-. . . . . 276,514.
16. ADD LINES 14 AND 15. . . . . 282,514.
17. MULTIPLY LINE 1 BY 85% (.85) . . . . . 23,962.
18. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17  
 \* ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B . . . . . 23,962.

FORM 1040

STATE AND LOCAL INCOME TAX REFUNDS

STATEMENT

3

2009

2008

2007

DELAWARE

GROSS STATE/LOCAL INC TAX REFUNDS  
LESS: TAX PAID IN FOLLOWING YEAR

4,749.

NET TAX REFUNDS DELAWARE

4,749.

TOTAL NET TAX REFUNDS

4,749.

FORM 1040		TAXABLE STATE AND LOCAL INCOME TAX REFUNDS		STATEMENT	4
		2009	2008	2007	
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.		4,749.			
LESS: REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION		4,749.			
1	NET REFUNDS FOR RECALCULATION				
2	TOTAL ITEMIZED DEDUCTIONS BEFORE PHASEOUT	66,207.			
3	DEDUCTION NOT SUBJ TO PHASEOUT				
4	NET REFUNDS FROM LINE 1				
5	LINE 2 MINUS LINES 3 AND 4	66,207.			
6	MULT LN 5 BY APPL SEC. 68 PCT	17,655.			
7	PRIOR YEAR AGI	333,182.			
8	ITEM. DED. PHASEOUT THRESHOLD	166,800.			
9	SUBTRACT LINE 8 FROM LINE 7 (IF ZERO OR LESS, SKIP LINES 10 THROUGH 15, AND ENTER AMOUNT FROM LINE 1 ON LINE 16)	166,382.			
10	MULT LN 9 BY APPL SEC. 68 PCT	1,664.			
11	ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10)	64,543.			
12	ITEM DED. NOT SUBJ TO PHASEOUT				
13A	TOTAL ADJ. ITEMIZED DEDUCTIONS	64,543.			
13B	PRIOR YR. STD. DED. AVAILABLE	13,500.			
14	PRIOR YR. ALLOWABLE ITEM. DED.	64,543.			
15	SUBTRACT THE GREATER OF LINE 13A OR LINE 13B FROM LINE 14				
16	TAXABLE REFUNDS (LESSER OF LINE 15 OR LINE 1)				
17	ALLOWABLE PRIOR YR. ITEM. DED.	64,543.			
18	PRIOR YEAR STD. DED. AVAILABLE	13,500.			
19	SUBTRACT LINE 18 FROM LINE 17	51,043.			
20	LESSER OF LINE 16 OR LINE 19				
21	PRIOR YEAR TAXABLE INCOME	262,994.			
22	AMOUNT TO INCLUDE ON FORM 1040, LINE 10 * IF LINE 21 IS -0- OR MORE, USE AMOUNT FROM LINE 20 * IF LINE 21 IS A NEGATIVE AMOUNT, NET LINES 20 AND 21				0.
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2007					
TOTAL TO FORM 1040, LINE 10					0.

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FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 5

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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	225,888.	57,807.	12,701.		6,622.	3,275.
S NORTHERN VIRGINIA COMMUNITY COLLEGE	82,488.	12,417.	3,034.		5,144.	1,203.
TOTALS	308,376.	70,224.	15,735.		11766.	4,478.

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FORM 1040 FEDERAL INCOME TAX WITHHELD STATEMENT 6

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T S DESCRIPTION	AMOUNT
T UNITED STATES SENATE	57,807.
S NORTHERN VIRGINIA COMMUNITY COLLEGE	12,417.
S OFFICE OF PENSIONS	2,174.
T WITHHOLDING FROM FORM 1099-SSA	7,048.
TOTAL TO FORM 1040, LINE 61	79,446.

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SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 7

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DESCRIPTION	AMOUNT
OFFICE OF PENSIONS	1,088.
UNITED STATES SENATE	12,701.
NORTHERN VIRGINIA COMMUNITY COLLEGE	3,034.
OTHER STATE AND LOCAL INCOME TAXES	1,477.
TOTAL TO SCHEDULE A, LINE 5	18,300.

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SCHEDULE A	CASH CONTRIBUTIONS	STATEMENT	8
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DESCRIPTION	AMOUNT	AMOUNT
	50% LIMIT	30% LIMIT
AMYOTROPHIC LATERAL SCLEROSIS GREATER PHILADELPHIA CHAPTER	200.	
WESTMINSTER PRESBYTERIAN CHURCH	1,000.	
NORTHERN VIRGINIA COMMUNITY COLLEGE ALUMNI SCHOLARSHIP FUND	1,400.	
YWCA	500.	
THE MINISTRY OF CARING	500.	
ANNUAL CATHOLIC APPEAL FOR THE DIOCESE OF WILMINGTON, DE	500.	
ANNA & SEYMOUR GITENSTEIN FOUNDATION	250.	
INSPIRATION FOR EXCELLENCE, TALENTED TEENS INTERNATIONAL DELAWARE	50.	
SUBTOTALS	4,400.	
TOTAL TO SCHEDULE A, LINE 16		4,400.

FORM 6251	PASSIVE ACTIVITIES	STATEMENT	9
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NAME OF ACTIVITY	FORM	NET INCOME (LOSS)		ADJUSTMENT
		AMT	REGULAR	
COTTAGE -- , WILMINGTON, DE	SCH E	11,000.	11,000.	
TOTAL TO FORM 6251, LINE 19				

FORM 6251

EXEMPTION WORKSHEET

STATEMENT 10

1	ENTER: \$47,450 IF SINGLE OR HEAD OF HOUSEHOLD; \$72,450 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$36,225 IF MARRIED FILING SEPARATELY. . . . .	72,450.
2	ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 28 . . . . .	343,809.
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- . . . . .	193,809.
5	MULTIPLY LINE 4 BY 25% (.25). . . . .	48,452.
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 . . . . .	23,998.
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 . . . . .	



2010 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 2010, give the dates you resided in Delaware.

From 2010 To 2010  
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 41 1 121,804. 225,888.

2a. If you elect the DELAWARE STANDARD DEDUCTION check here ☐  
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 Bb. If you elect the DELAWARE ITEMIZED DEDUCTIONS check here ☒  
Filing Statuses 1, 2, 3 and 5, enter Itemized Deductions from Page 2, Line 47 in Column B  
Filing status 4 enter Itemized Deductions from Page 2, Line 47 in Columns A and B 2 24,368. 24,370.

3. ADDITIONAL STANDARD DEDUCTIONS (Not Allowed with Itemized Deductions - see instructions)

CHECK BOX(ES).

Column A - if SPOUSE was

Column B - if YOU were

65 or over ☐ Blind ☐65 or over ☐ Blind ☐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 3

4. TOTAL DEDUCTIONS - Add Lines 2 &amp; 3 and enter here 4 24,368. 24,370.

5. TAXABLE INCOME - Subtract Line 4 from Line 1, and Compute Tax on this Amount 5 97,436. 201,518.

6. Tax Liability from Tax Rate Table/Schedule 6 5,545. 12,779.

7. Tax on Lump Sum Distribution (Form 329) 7

8. TOTAL TAX - Add Lines 6 and 7 and enter here 8 5,545. 12,779.

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 9a 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) ☐ Self 60 or over (Column B) ☒  
Enter number of boxes checked on Line 9b. 1 x \$110 9b 110.

10. Tax imposed by State of STMT 1. (Must attach copy of DE Schedule I and other state return) 10 3,515.

11. Vol. Firefighter Co. # - Spouse (Column A) Self (Column B) Enter credit amount 11

12. Other Non-Refundable Credits (see instructions) 12

13. Child Care Credit. Must attach Form 2441. (Enter 50% of Federal credit) 13

14. Earned Income Tax Credit. See instructions on Page 8 for ALL required documentation 14

15. Total Non-Refundable Credits. Add Lines 9a, 9b, 10, 11, 12, 13 &amp; 14 and enter here 15 3,625. 220.

16. BALANCE. Subtract Line 15 from Line 8. If Line 15 is greater than Line 8, enter "0" (Zero) 16 1,920. 12,559.

17. Delaware Tax Withheld (Attach W2s/1099s) 17 1,088. 12,701.

18. 2010 Estimated Tax Paid &amp; Payments with Extensions 18

19. S Corp Payments and Refundable Business Credits 19

20. TOTAL Refundable Credits. Add Lines 17, 18 and 19 and enter here 20 1,088. 12,701.

21. BALANCE DUE. If Line 16 is greater than Line 20, subtract 20 from 16 and enter here 21 832.

22. OVERPAYMENT. If Line 20 is greater than Line 16, subtract 16 from 20 and enter here 22 142.

23. CONTRIBUTIONS TO SPECIAL FUNDS If electing a contribution, complete and attach DE Schedule III 23

24. AMOUNT OF LINE 22 TO BE APPLIED TO 2011 ESTIMATED TAX ACCOUNT ENTER 24

25. PENALTIES AND INTEREST DUE. If Line 21 is greater than \$400, see estimated tax instructions ENTER 25

26. NET BALANCE DUE (For Filing Status 4, see Instructions, Page 9) For all other filing statuses, enter Line 21 plus Lines 23 and 25 PAY IN FULL 26 690.

27. NET REFUND (For Filing Status 4, see instructions, Page 9) ZERO DUE/TO BE REFUNDED 27

For all other filing statuses, subtract Lines 23, 24 and 25 from Line 22

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 (+)

28. Enter Federal AGI amount from Federal 1040, Line 37; 1040A, Line 21; or 1040EZ, Line 4	28	123,804.	255,374.
29. Interest on State & Local obligations other than Delaware	29		
30. Fiduciary adjustment, oil depletion	30		
31. TOTAL - Add Lines 29 and 30	31		
32. Subtotal. Add Lines 28 and 31	32	123,804.	255,374.

## SECTION B - SUBTRACTIONS (-)

33. Interest received on U.S. Obligations	33		
34. Pension/Retirement Exclusions (For a definition of eligible income, see instructions)	34	2,000.	5,524.
35. Delaware State tax refund, fiduciary adjustment, work opportunity tax credit, Travelink Program, Delaware NOL Carry forward. - please see instructions	35		
36. Taxable Soc Sec/RR Retirement Benefits/Higher Educ. Excl/Certain Lump Sum Dist. (See instr.)	*36		23,962.
37. SUBTOTAL. Add Lines 33, 34, 35 and 36 and enter here	37	2,000.	29,486.
38. Subtotal. Subtract Line 37 from Line 32	38	121,804.	225,888.
39. Exclusion for certain persons 60 and over or disabled (See instructions)	39		
40. TOTAL - Add Lines 37 and 39	40	2,000.	29,486.
41. DELAWARE ADJUSTED GROSS INCOME. Subtract Line 40 from Line 32. Enter here and on Page 1, Line 1	41	121,804.	225,888.

**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.

42. Enter total Itemized Deductions from Schedule A, Federal Form 1040, Line 29	42	29,228.	37,810.
43. Enter Foreign Taxes Paid (See instructions)	43		
44. Enter Charitable Mileage Deduction (See instructions)	44		
45. SUBTOTAL. - Add Lines 42, 43, and 44 and enter here	45	29,228.	37,810.
46a. Enter State Income Tax included in Line 42 above (See instructions)	46a	4,860.	13,440.
46b. Enter Form 700 Tax Credit Adjustment (See instructions)	46b		
47. TOTAL - Subtract Line 46a and 46b from Line 45. Enter here and on Page 1, Line 2 (See instructions)	47	24,368.	24,370.

**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 <i>R. B. [Signature]</i>	Date 4.14.11	Signature of Paid Preparer WALTER H DEYHLE, CPA	Date 4/14/11
Spouse's Signature (if filing joint or combined return) <i>[Signature]</i>	Date 4.14.11	Address-ZIP Code GELMAN, ROSENBERG & FREEDMAN BETHESDA, MD 20814-2930	
Home Phone	Business Phone	Business Phone EIN, SSN OR PTIN	
E-Mail Address		E-Mail Address	

If a 2D barcode (black and white box) appears in the upper right hand corner of page 1 of this form, send the return to one of the following addresses:

MAKE CHECKS PAYABLE AND MAIL TO: DELAWARE DIVISION OF REVENUE, P.O. BOX 8753, WILMINGTON, DELAWARE 19899-8753  
MAIL REFUND DUE RETURNS TO: DELAWARE DIVISION OF REVENUE, P.O. BOX 8710, WILMINGTON, DELAWARE 19899-8710  
MAIL ZERO DUE RETURNS TO: DELAWARE DIVISION OF REVENUE, P.O. BOX 8711, WILMINGTON, DELAWARE 19899-8711

If a 2D barcode (black and white box) DOES NOT appear in the upper right hand corner of page 1 of this form, send the return to one of the following addresses:

MAKE CHECKS PAYABLE AND MAIL TO: DELAWARE DIVISION OF REVENUE, P.O. BOX 508, WILMINGTON, DELAWARE 19899-0508  
MAIL REFUND DUE RETURNS TO: DELAWARE DIVISION OF REVENUE, P.O. BOX 8765, WILMINGTON, DELAWARE 19899-8765  
MAIL ZERO DUE RETURNS TO: DELAWARE DIVISION OF REVENUE, P.O. BOX 8711, WILMINGTON, DELAWARE 19899-8711

MAKE CHECK PAYABLE TO: DELAWARE DIVISION OF REVENUE

PLEASE REMEMBER TO ATTACH APPROPRIATE SUPPORTING SCHEDULES WHEN FILING YOUR RETURN

# 2010 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>3,515.</u>	
2. Tax imposed by State of _____ (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. You must attach a copy of the other state return(s) with your Delaware tax return .....	6	<u>3,515.</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 2010, 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 2010? ...	<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 41a; Form 1040 EZ, Line 9a .....			
14. Delaware EITC Percentage (20%) .....			<u>.20</u>
15. Multiply Line 13 by Line 14 .....			
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		E. Organ Donations		I. Juv. Diabetes Fund	
B. U.S. Olympics		F. Diabetes Educ.		J. Mult. Sclerosis Soc.	
C. Emergency Housing		G. Veteran's Home		K. Ovarian Cancer Fund	
D. Breast Cancer Educ.		H. DE National Guard		L. 21st Fund for Children	

Enter the total Contribution amount here and on EZ Return, Line 19 or Resident Return, Line 23 .....

17

**This page MUST be sent in with your Delaware return if any of the schedules (above) are 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)	121,804.
VIRGINIA ADJUSTED GROSS INCOME	82,453.
DELAWARE TAX (FORM 200-01 OR 200-02, PAGE 1)	5,545.
TAX IMPOSED BY STATE OF VIRGINIA	3,515.
"PERCENTAGE FACTOR" = OTHER STATE'S AGI DIVIDED BY DELAWARE AGI	
= 82,453. / 121,804.	.676932
"PRO-RATA TAX" = DELAWARE TAX TIMES PERCENTAGE FACTOR	
= 5,545. X .676932	3,754.
AMOUNT OF CREDIT = LESSER OF: (A) DELAWARE TAX	
(B) TAX IMPOSED BY OTHER STATE	
(C) PRO-RATA TAX	

AMOUNT OF CREDIT, STATE OF VIRGINIA	3,515.
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TOTAL TO FORM 200-01, PAGE 1, LINE 10	3,515.
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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.	23,962.
TOTAL TO FORM DE 200-01, PAGE 2, LINE 36	0.	23,962.

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 . . .	11,544.	20,125.	31,669.
C. INTEREST PAID, SCHEDULE A, LINE 15 .	15,009.	15,010.	30,019.
D. CONTRIBUTIONS, SCHEDULE A, LINE 19 .	2,675.	2,675.	5,350.
E. CASUALTY & THEFT, SCHEDULE A, LN 20 .			
F. MISCELLANEOUS, SCHEDULE A, LINE 27 .			
G. OTHER MISC., SCHEDULE A, LINE 28 . .			
TOTAL ITEMIZED DEDUCTIONS . . . . .	29,228.	37,810.	67,038.
TOTAL TO FORM 200-01, PAGE 2, LINE 42	29,228.	37,810.	

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

VIRGINIA	SPOUSE	TAXPAYER
TAXES INCLUDED ON SCHEDULE A	3,034.	0.
TAX LIABILITY	3,515.	
LESSER OF SCH A TAXES OR TAX LIABILITY	3,034.	0.
TOTAL OTHER STATE TAXES INCLUDED ON LINE 46A	3,034.	0.

2010  
Virginia Nonresident Income Tax Return  
Due May 2, 2011

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>	
Important - Name of Virginia City or County in which principal place of business, employment or income source is located				ZIP Code	
				Locality Code from Instructions	
				<input type="checkbox"/> City OR <input type="checkbox"/> County	
Your Home Phone Number		Your Business Phone Number		Spouse's Business Phone Number	
Preparer's FEIN/PTIN/SSN		Filing Election		Code	
				<input checked="" type="checkbox"/> I (we) authorize the Department of Taxation to discuss my (our) return with my (our) preparer.	
Check Applicable Boxes:		Amended Return <input type="checkbox"/>			
		Check if Result of NOL <input type="checkbox"/>			
		Name(s) And Address Different Than Shown on 2009 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 <input type="checkbox"/>			
		EIC Claimed on federal return \$ <u>.00</u>			

## 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 =		
2	+	=	x \$930 =		
2	+	=	x \$930 =		
1	+	= 1	x \$930 = 930		

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

1	Adjusted Gross Income	1	123,804	00
2	Additions from Schedule 763 ADJ, Line 3	2		00
3	Add Lines 1 and 2	3	123,804	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	123,804	00
10	Deductions: Enter total Federal Itemized Deductions from Federal Schedule A	10	29,228	00
11	State and Local income taxes claimed from Federal Schedule A, if claiming Itemized Deductions	11	4,860	00
12	If claiming Itemized Deductions subtract Line 11 from Line 10 or enter Standard Deduction amount	12	24,368	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	0	00
15	Add Lines 12, 13, and 14	15	25,298	00

For Local Use Va. Dept. of Taxation 2601044 REV. 09/10

Coding

1019 083061 12-28-10

LTD ☐

5

17450413 745960 54742

2010.03040 BIDEN JR., JOSEPH R

54742\_\_1



Your Name <b>JILL T BIDEN</b>	Your SSN
----------------------------------	----------

16	Virginia Taxable Income computed as a resident. Subtract Line 15 from Line 9.	16	98,506	00
17	Percentage from Nonresident Allocation Section below (Enter to one decimal place only).	17	66.6	%
18	Nonresident Taxable Income. (Multiply Line 16 by percentage on Line 17).	18	65,605	00
19	Income Tax from Tax Table or Tax Rate Schedule.	19	3,515	00
20a	Your Virginia income tax withheld, Attach Forms W-2, 1099, W-2G and VK-1.	20a	3,034	00
20b	Spouse's Virginia income tax withheld, Attach Forms W-2, 1099, W-2G and VK-1.	20b		00
21	2010 Estimated Tax Payments (Include credit from 2009).	21		00
22	Extension Payment - submitted using Form 760IP.	22		00
23	Tax Credit for Low Income Individuals or Virginia Earned Income Credit from Schedule 763 ADJ, Line 17.	23		00
24	Total credits from Schedule OSC.	24		00
25	Credits from Schedule CR, Section 4, Line 1A. If claiming Political Contribution Credit only, check box. <input type="checkbox"/>	25		00
26	Total payments and credits. Add Lines 20a, 20b, 21, 22, 23, 24 and 25.	26	3,034	00
27	If Line 19 is larger than Line 26, enter the difference. This is the <b>INCOME TAX YOU OWE</b> . Skip to Line 30.	27	481	00
28	If Line 26 is larger than Line 19, enter the difference. This is the <b>OVERPAYMENT AMOUNT</b> .	28		00
29	Amount of overpayment on Line 28 to be <b>CREDITED TO 2011 ESTIMATED INCOME TAX</b> .	29		00
30	Adjustments and Voluntary Contributions from attached Schedule 763 ADJ, Line 24.	30		00
31	Add Lines 29 and 30.	31		00
32	If you owe tax on Line 27, add Lines 27 and 31 - <b>OR</b> - If you have an overpayment on Line 28 and Line 31 is larger than Line 28, enter the difference. This is the <b>AMOUNT YOU OWE</b> . Attach payment. Check here if credit card payment has been made. <input type="checkbox"/>	32	481	00
33	If Line 28 is larger than Line 31, subtract Line 31 from Line 28. This is the amount to be <b>REFUNDED TO YOU</b> .	33		00

**NONRESIDENT ALLOCATION PERCENTAGE.** Enter negative numbers in brackets.

1	Wages, salaries, tips, etc.	1	82,488	00
2	Interest income.	2	3,990	00
3	Dividends.	3		00
4	Alimony received.	4		00
5	Business income or loss.	5		00
6	Capital gain or loss/capital gain distributions.	6		00
7	Other gains or losses.	7		00
8	Taxable pensions, annuities and IRA distributions.	8	31,826	00
9	Rents, royalties, partnerships, estates, trusts, S corporations, etc.	9	5,500	00
10	Farm income or loss.	10		00
11	Other income.	11		00
12	Interest on obligations of other states from Schedule 763 ADJ, Line 1.	12		00
13	Lump-sum distributions/accumulation distributions included on Schedule 763 ADJ, Line 3.	13		00
14	<b>TOTAL</b> - Add Lines 1 through 13 and enter each column total here.	14	123,804	00
15	Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. Compute percentage to one decimal place but not more than 100% (example 5.4%). ENTER here and on Line 17 on Page 2.	15		66.6 %

**A - All Sources****B - Virginia Sources**

I (We), the undersigned, declare under penalty provided by law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

Please Sign Here	Your Signature <i>Jill T. Biden</i>	Date 4-14-11	Spouse's Signature (If a joint return, both must sign)	Date
	Preparer's Signature <i>Walter H. Deyhle</i>	Date 4/12/11	Firm's Name (or Yours if Self-Employed) <b>GELMAN, ROSENBERG &amp; BETHESDA, MD 20814-2</b>	Preparer's Phone Number

1019  
083062  
12-28-10

**Attach A Complete Copy Of Your Federal Tax Return And All Other Required Virginia Attachments**



**2010 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

3034.

82488.

Total Virginia Withholding:

SSN

VA Withholding

YOU

3034.

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

01

# Your Federal Taxpayer Receipt

UNDERSTAND HOW AND WHERE YOUR TAX DOLLARS ARE BEING SPENT

## PROGRAMS & SERVICES

## YOUR TAX PAYMENT

<b>Social Security Tax</b>		<b>\$6,622.00</b>
Social Security Retirement, Survivors, and Disability Insurance		<b>\$6,622.00</b>
<b>Medicare Tax</b>		<b>\$42,766.00</b>
Medicare Hospital Insurance		<b>\$42,766.00</b>
<b>Income Tax</b>	<b>% of Total Income Tax Payment</b>	<b>\$416,734.00</b>
<b>National Defense</b>	<b>26.3%</b>	<b>\$109,601.04</b>
Military personnel salaries and benefits	6.0%	\$25,004.04
Ongoing operations, equipment, and supplies	10.5%	\$43,757.07
Research, development, weapons, and construction	8.8%	\$36,672.59
Atomic energy defense activities	0.7%	\$2,917.14
Defense-related FBI activities and additional national defense	0.3%	\$1,250.20
<b>Health Care</b>	<b>24.3%</b>	<b>\$101,266.36</b>
Medicaid and Children's Health Insurance Program (CHIP)	10.7%	\$44,590.54
Medicare doctor payments and prescription drug payments	10.3%	\$42,923.60
Health research and food safety	1.5%	\$6,251.01
Disease control and public health services	1.0%	\$4,167.34
COBRA tax credit and additional health care activities	0.9%	\$3,750.61
<b>Job and Family Security</b>	<b>21.9%</b>	<b>\$91,264.75</b>
Unemployment insurance	4.4%	\$18,336.30
Food and nutrition assistance	3.6%	\$15,002.42
Housing assistance	2.2%	\$9,168.15
Earned income, making work pay, and child tax credits	3.5%	\$14,585.69
Supplemental Security Insurance	1.8%	\$7,501.21
Federal military and civilian employee retirement and disability	4.6%	\$19,169.76
Child care, foster care, and adoption support	0.6%	\$2,500.40
Temporary Assistance for Needy Families	0.8%	\$3,333.87
Railroad retirement and additional income security	0.5%	\$2,083.67

<b>Education and Job Training</b>	<b>4.8%</b>	<b>\$20,003.23</b>
<i>Elementary, secondary, and vocational education</i>	2.8%	\$11,668.55
<i>Student financial aid for college</i>	0.8%	\$3,333.87
<i>Job training and employment services</i>	0.4%	\$1,666.94
<i>Employment training for people with disabilities and additional education and job services</i>	0.9%	\$3,750.61
<b>Veterans Benefits</b>	<b>4.1%</b>	<b>\$17,086.09</b>
<i>Income and housing support</i>	1.9%	\$7,917.95
<i>Health care</i>	1.7%	\$7,084.48
<i>Education, training, and additional veterans benefits</i>	0.5%	\$2,083.67
<b>Natural Resources, Energy and Environment</b>	<b>2.1%</b>	<b>\$8,751.41</b>
<i>Water and land management</i>	0.9%	\$3,750.61
<i>Energy supply and conservation</i>	0.4%	\$1,666.94
<i>Pollution control and other natural resources, energy and environment</i>	0.8%	\$3,333.87
<b>International Affairs</b>	<b>1.7%</b>	<b>\$7,084.48</b>
<i>Development and humanitarian assistance</i>	0.7%	\$2,917.14
<i>Security assistance</i>	0.4%	\$1,666.94
<i>Foreign affairs, embassies, and additional international affairs</i>	0.6%	\$2,500.40
<b>Science, Space, and Technology Programs</b>	<b>1.2%</b>	<b>\$5,000.81</b>
<i>NASA</i>	0.7%	\$2,917.14
<i>National Science Foundation, additional science research, and laboratories</i>	0.5%	\$2,083.67
<b>Immigration, Law Enforcement and Administration of Justice</b>	<b>2.0%</b>	<b>\$8,334.68</b>
<b>Agriculture</b>	<b>0.8%</b>	<b>\$3,333.87</b>
<b>Community, Area, and Regional Development</b>	<b>0.5%</b>	<b>\$2,083.67</b>
<b>Response to Natural Disasters</b>	<b>0.4%</b>	<b>\$1,666.94</b>
<b>Additional Government Programs</b>	<b>2.4%</b>	<b>\$10,001.62</b>
<b>Net Interest</b>	<b>7.4%</b>	<b>\$30,838.32</b>

TOTAL INCOME AND PAYROLL TAXES YOU PAID

**\$466,122.00**

# Your Federal Taxpayer Receipt

UNDERSTAND HOW AND WHERE YOUR TAX DOLLARS ARE BEING SPENT

## PROGRAMS & SERVICES

## YOUR TAX PAYMENT

<b>Social Security Tax</b>		<b>\$11,766.00</b>
Social Security Retirement, Survivors, and Disability Insurance		<b>\$11,766.00</b>
<b>Medicare Tax</b>		<b>\$4,478.00</b>
Medicare Hospital Insurance		<b>\$4,478.00</b>
<b>Income Tax</b>	<b>% of Total Income Tax Payment</b>	<b>\$86,626.00</b>
<b>National Defense</b>	<b>26.3%</b>	<b>\$22,782.64</b>
<i>Military personnel salaries and benefits</i>	6.0%	\$5,197.56
<i>Ongoing operations, equipment, and supplies</i>	10.5%	\$9,095.73
<i>Research, development, weapons, and construction</i>	8.8%	\$7,623.09
<i>Atomic energy defense activities</i>	0.7%	\$606.38
<i>Defense-related FBI activities and additional national defense</i>	0.3%	\$259.88
<b>Health Care</b>	<b>24.3%</b>	<b>\$21,050.12</b>
<i>Medicaid and Children's Health Insurance Program (CHIP)</i>	10.7%	\$9,268.98
<i>Medicare doctor payments and prescription drug payments</i>	10.3%	\$8,922.48
<i>Health research and food safety</i>	1.5%	\$1,299.39
<i>Disease control and public health services</i>	1.0%	\$866.26
<i>COBRA tax credit and additional health care activities</i>	0.9%	\$779.63
<b>Job and Family Security</b>	<b>21.9%</b>	<b>\$18,971.09</b>
<i>Unemployment insurance</i>	4.4%	\$3,811.54
<i>Food and nutrition assistance</i>	3.6%	\$3,118.54
<i>Housing assistance</i>	2.2%	\$1,905.77
<i>Earned income, making work pay, and child tax credits</i>	3.5%	\$3,031.91
<i>Supplemental Security Insurance</i>	1.8%	\$1,559.27
<i>Federal military and civilian employee retirement and disability</i>	4.6%	\$3,984.80
<i>Child care, foster care, and adoption support</i>	0.6%	\$519.76
<i>Temporary Assistance for Needy Families</i>	0.8%	\$693.01
<i>Railroad retirement and additional income security</i>	0.5%	\$433.13

<b>Education and Job Training</b>	<b>4.8%</b>	<b>\$4,158.05</b>
<i>Elementary, secondary, and vocational education</i>	2.8%	\$2,425.53
<i>Student financial aid for college</i>	0.8%	\$693.01
<i>Job training and employment services</i>	0.4%	\$346.50
<i>Employment training for people with disabilities and additional education and job services</i>	0.9%	\$779.63
<b>Veterans Benefits</b>	<b>4.1%</b>	<b>\$3,551.67</b>
<i>Income and housing support</i>	1.9%	\$1,645.89
<i>Health care</i>	1.7%	\$1,472.64
<i>Education, training, and additional veterans benefits</i>	0.5%	\$433.13
<b>Natural Resources, Energy and Environment</b>	<b>2.1%</b>	<b>\$1,819.15</b>
<i>Water and land management</i>	0.9%	\$779.63
<i>Energy supply and conservation</i>	0.4%	\$346.50
<i>Pollution control and other natural resources, energy and environment</i>	0.8%	\$693.01
<b>International Affairs</b>	<b>1.7%</b>	<b>\$1,472.64</b>
<i>Development and humanitarian assistance</i>	0.7%	\$606.38
<i>Security assistance</i>	0.4%	\$346.50
<i>Foreign affairs, embassies, and additional international affairs</i>	0.6%	\$519.76
<b>Science, Space, and Technology Programs</b>	<b>1.2%</b>	<b>\$1,039.51</b>
<i>NASA</i>	0.7%	\$606.38
<i>National Science Foundation, additional science research, and laboratories</i>	0.5%	\$433.13
<b>Immigration, Law Enforcement and Administration of Justice</b>	<b>2.0%</b>	<b>\$1,732.52</b>
<b>Agriculture</b>	<b>0.8%</b>	<b>\$693.01</b>
<b>Community, Area, and Regional Development</b>	<b>0.5%</b>	<b>\$433.13</b>
<b>Response to Natural Disasters</b>	<b>0.4%</b>	<b>\$346.50</b>
<b>Additional Government Programs</b>	<b>2.4%</b>	<b>\$2,079.02</b>
<b>Net Interest</b>	<b>7.4%</b>	<b>\$6,410.32</b>

TOTAL INCOME AND PAYROLL TAXES YOU PAID

**\$102,870.00**