

For the year Jan. 1-Dec. 31, 2015, or other tax year beginning 2015, ending 20

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

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

Home address (number and street). If you have a P.O. box, see instructions. **1600 PENNSYLVANIA AVENUE, NW** Apt. no. **▲ Make sure the SSN(s) above and on line 6c are correct.**

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. **WASHINGTON, DC 20500** Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Foreign country name Foreign province/state/county Foreign postal code You Spouse

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

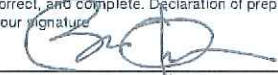


Exemptions
6a Yourself. If someone can claim you as a dependent, do not check box 6a
b Spouse
Boxes checked on 6a and 6b **2**

c Dependents:		(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	No. of children on 6c who: ● lived with you 2 ● did not live with you due to divorce or separation (see instructions)
(1) First name	Last name				
MALIA A	OBAMA		DAUGHTER		
NATASHA M	OBAMA		DAUGHTER	X	

d Total number of exemptions claimed **4**

Income			
7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	394,454.
8a	Taxable interest. Attach Schedule B if required	8a	348.
b	Tax-exempt interest. Do not include on line 8a	8b	
9a	Ordinary dividends. Attach Schedule B if required	9a	9.
b	Qualified dividends	9b	
10	Taxable refunds, credits, or offsets of state and local income taxes STMT 1 STMT 3	10	0.
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	56,069.
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	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	
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	447,880.

Adjusted Gross Income			
23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Deductible part of self-employment tax. Attach Schedule SE	27	751.
28	Self-employed SEP, SIMPLE, and qualified plans	28	11,064.
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN	31a	
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	11,815.
37	Subtract line 36 from line 22. This is your adjusted gross income	37	436,065.

Tax and Credits	38 Amount from line 37 (adjusted gross income)	38	436,065.
Standard Deduction for - ● People who check any box on line 39a or 39b of who can be claimed as a dependent, see instructions. ● All others: Single or Married filing separately, \$6,300 Married filing jointly or Qualifying widow(er), \$12,600 Head of household, \$9,250	39a Check <input type="checkbox"/> You were born before January 2, 1951, <input type="checkbox"/> Blind. Total boxes checked ... 39a <input type="checkbox"/>		
	if: <input type="checkbox"/> Spouse was born before January 2, 1951, <input type="checkbox"/> Blind. ... 39b <input type="checkbox"/>		
	b If your spouse itemizes on a separate return or you were a dual-status alien, check here ... 39b <input type="checkbox"/>		
	40 Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	145,425.
	41 Subtract line 40 from line 38	41	290,640.
	42 Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see inst.	42	0.
	43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	290,640.
	44 Tax. Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	71,440.
	45 Alternative minimum tax. Attach Form 6251	45	7,743.
	46 Excess advance premium tax credit repayment. Attach Form 8962	46	
47 Add lines 44, 45, and 46	47	79,183.	
48 Foreign tax credit. Attach Form 1116 if required	48	979.	
49 Credit for child and dependent care expenses. Attach Form 2441	49		
50 Education credits from Form 8863, line 19	50		
51 Retirement savings contributions credit. Attach Form 8880	51		
52 Child tax credit. Attach Schedule 8812, if required	52		
53 Residential energy credits. Attach Form 5695	53		
54 Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54		
55 Add lines 48 through 54. These are your total credits	55	979.	
56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	78,204.	
57 Self-employment tax. Attach Schedule SE	57	1,502.	
Other Taxes			
58 Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58		
59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59		
60a Household employment taxes from Schedule H	60a		
b First-time homebuyer credit repayment. Attach Form 5405 if required	60b		
61 Health care: Individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	61		
62 Taxes from: a <input checked="" type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Inst.; enter code(s)	62	1,766.	
63 Add lines 56 through 62. This is your total tax	63	81,472.	
Payments			
64 Federal income tax withheld from Forms W-2 and 1099	64	99,331.	STATEMENT 6
65 2015 estimated tax payments and amount applied from 2014 return	65	5,000.	
66a Earned income credit (EIC)	66a		
b Nontaxable combat pay election	66b		
67 Additional child tax credit. Attach Schedule 8812	67		
68 American opportunity credit from Form 8863, line 8	68		
69 Net premium tax credit. Attach Form 8962	69		
70 Amount paid with request for extension to file	70		
71 Excess social security and tier 1 RRTA tax withheld	71		
72 Credit for federal tax on fuels. Attach Form 4136	72		
73 Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73		
74 Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	104,331.	
Refund			
75 If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	22,859.	
76a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here	76a	22,859.	
Direct deposit? See instructions. ▶ b Routing number <input type="text"/> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings ▶ d Account number <input type="text"/>			
77 Amount of line 75 you want applied to your 2016 estimated tax	77		
Amount You Owe			
78 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78		
79 Estimated tax penalty (see instructions)	79		
Third Party Designee	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 Phone no ▶ _____ Personal identification number (PIN) ▶ _____			
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
Joint return? See instructions. Keep a copy for your records. ▶ Your signature  Date 04/07/16 Your occupation US PRESIDENT Daytime phone number _____			
Spouse's signature. If joint return, both must sign.  Date 04/09/2016 Spouse's occupation US FIRST LADY If the IRS sent you an Identity Protection PIN, enter it here _____			
Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> If PTIN self-employed
Paid Preparer Use Only	MICHAEL S SOLHEIM 	3/3/16	
Firm's name ▶ WINEBERG SOLHEIM HOWELL & SHAIN, PC Firm's EIN ▶ _____			
180 N LASALLE ST, STE 2200 Phone no. _____			
Firm's address ▶ CHICAGO, IL 60601			

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

Department of the Treasury
Internal Revenue Service

▶ Information about Form 2210 and its separate instructions is at www.irs.gov/form2210.

2015
Attachment
Sequence No. **06**

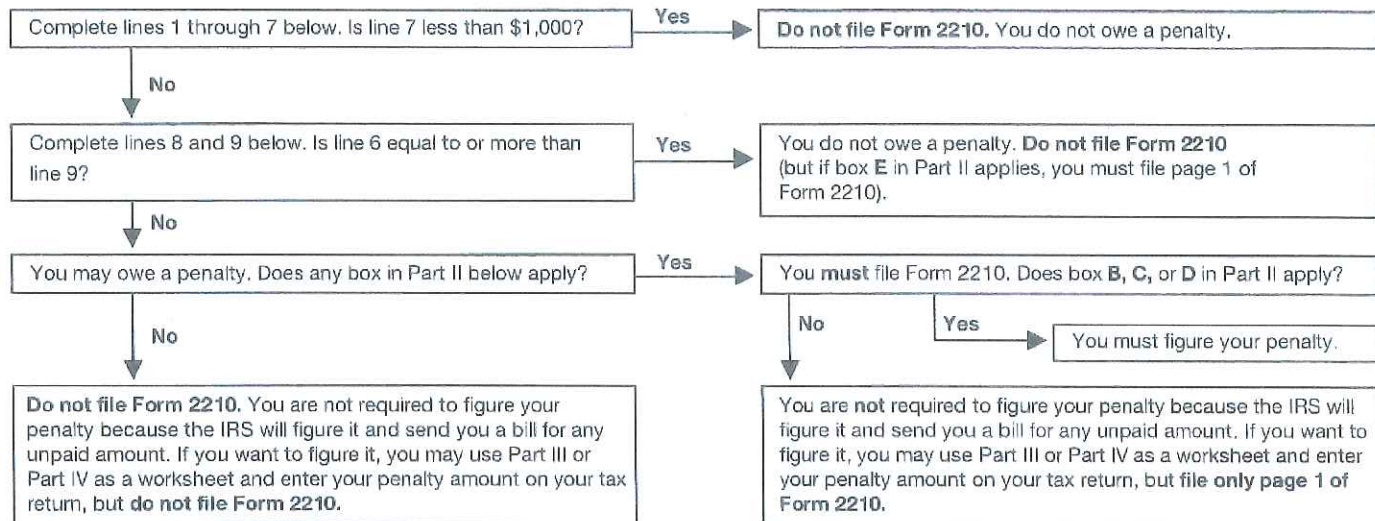
▶ Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

Name(s) shown on tax return

Identifying number

BARACK H. & MICHELLE L. OBAMA

Do You Have To File Form 2210?



Part I Required Annual Payment

1	Enter your 2015 tax after credits from Form 1040, line 56 (see instructions if not filing Form 1040)	1	78,204.
2	Other taxes, including self-employment tax and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions)	2	3,268.
3	Refundable credits, including the premium tax credit (see instructions)	3	()
4	Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop; you do not owe a penalty. Do not file Form 2210	4	81,472.
5	Multiply line 4 by 90% (.90)	5	73,325.
6	Withholding taxes. Do not include estimated tax payments (see instructions)	6	99,331.
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	0.
8	Maximum required annual payment based on prior year's tax (see instructions)	8	
9	Required annual payment. Enter the smaller of line 5 or line 8	9	

Next: Is line 9 more than line 6?

- No. You do not owe a penalty. Do not file Form 2210 unless box E below applies.
- Yes. You may owe a penalty, but do not file Form 2210 unless one or more boxes in Part II below applies.
- If box B, C, or D applies, you must figure your penalty and file Form 2210.
 - If box A or E applies (but not B, C, or D) file only page 1 of Form 2210. You are not required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or IV as a worksheet and enter your penalty on your tax return, but file only page 1 of Form 2210.

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

- A You request a waiver (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you are not required to figure your penalty.
- B You request a waiver (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C Your income varied during the year and your penalty is reduced or eliminated when figured using the annualized income installment method. You must figure the penalty using Schedule AI and file Form 2210.
- D Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E You filed or are filing a joint return for either 2014 or 2015, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you are not required to figure your penalty (unless box B, C, or D applies).

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2210 (2015)

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.
Attach to Form 1040.

OMB No. 1545-0074

2015
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 10% (.10). But if either you or your spouse was born before January 2, 1951, multiply line 2 by 7.5% (.075) instead.	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):		5		
	a	<input checked="" type="checkbox"/> Income taxes, or	SEE STATEMENT 7		
	b	<input type="checkbox"/> General sales taxes	6	18,390.	
	6	Real estate taxes (see instructions)	6	30,167.	
	7	Personal property taxes	7		
	8	Other taxes. List type and amount	8		
	9	Add lines 5 through 8	9	48,557.	
	Interest You Paid	10	Home mortgage interest and points reported to you on Form 1098	10	36,587.
		11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	11	
12		Points not reported to you on Form 1098. See instructions for special rules	12		
13		Mortgage insurance premiums (see instructions)	13		
14		Investment interest. Attach Form 4952 if required. (See instructions.)	14		
15		Add lines 10 through 14	15	36,587.	
Gifts to Charity		16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	64,066. STMT 8
		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	64,066.
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	
29		Is Form 1040, line 38, over \$154,950? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.	29	145,425. STMT 9	
30		If you elect to itemize deductions even though they are less than your standard deduction, check here			

SCHEDULE B
(Form 1040A or 1040)

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

Interest and Ordinary Dividends

▶ Attach to Form 1040A or 1040.

▶ Information about Schedule B and its instructions is at www.irs.gov/scheduleb.

OMB No. 1545-0074

2015
Attachment
Sequence No. **08**

Your social security number

BARACK H. & MICHELLE L. OBAMA

Part I
Interest

		Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶ BOND PREMIUM AMORTIZATION JP MORGAN NORTHERN TRUST SECURITIES US GOVT INTEREST	-12,629. 16. 12,961.
2	Add the amounts on line 1	348.
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 ▶	348.
Note: If line 4 is over \$1,500, you must complete Part III.		Amount

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.

Part II
Ordinary Dividends

5	List name of payer ▶ NORTHERN TRUST SECURITIES	9.
6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	9.
Note: If line 6 is over \$1,500, you must complete Part III.		

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.

Part III
Foreign Accounts and Trusts

		Yes	No
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 2015, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions		X
	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements		
b	If you are required to file FinCen Form 114, enter the name of the foreign country where the financial account is located ▶		
8	During 2015, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions		X

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**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business

(Sole Proprietorship)

▶ Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2015
Attachment
Sequence No. 09

Name of proprietor: **BARACK H. OBAMA**

Social security number (SSN):

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

B Enter code from instructions: **711510**

C Business name. If no separate business name, leave blank.
BARACK H. OBAMA

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

E Business address (including suite or room no.)
City, town or post office, state, and ZIP code

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

G Did you "materially participate" in the operation of this business during 2015? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2015, check here

I Did you make any payments in 2015 that would require you to file Form(s) 1099? (see instructions) Yes No

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

Part I Income			
1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <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)	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) SEE STATEMENT 10	6	60,745.
7	Gross income. Add lines 5 and 6	7	60,745.

Part II Expenses. Enter expenses for business use of your home only on line 30.			
8	Advertising	8	
9	Car and truck expenses (see instructions)	9	
10	Commissions and fees	10	4,456.
11	Contract labor (see instructions)	11	
12	Depletion	12	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	
14	Employee benefit programs (other than on line 19)	14	
15	Insurance (other than health)	15	
16	Interest:		
a	Mortgage (paid to banks, etc.)	16a	
b	Other	16b	
17	Legal and professional services	17	
18	Office expense	18	220.
19	Pension and profit-sharing plans	19	
20	Rent or lease (see instructions):		
a	Vehicles, machinery, and equipment	20a	
b	Other business property	20b	
21	Repairs and maintenance	21	
22	Supplies (not included in Part III)	22	
23	Taxes and licenses	23	
24	Travel, meals, and entertainment:		
a	Travel	24a	
b	Deductible meals and entertainment (see instructions)	24b	
25	Utilities	25	
26	Wages (less employment credits)	26	
27 a	Other expenses (from line 48)	27a	
b	Reserved for future use	27b	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a	28	4,676.
29	Tentative profit or (loss). Subtract line 28 from line 7	29	56,069.
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____ Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you 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	56,069.
32	If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you 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 the separate instructions.

Schedule C (Form 1040) 2015

**SCHEDULE D
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Capital Gains and Losses

▶ Attach to Form 1040 or Form 1040NR.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/scheduled.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2015

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	699,941.	701,627.		<1,686.>
2	Totals for all transactions reported on Form(s) 8949 with Box B checked				
3	Totals for all transactions reported on Form(s) 8949 with Box C checked				
4	Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5	Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6	Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7	Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2				7 <1,686.>

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	295,000.	295,000.		0.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked				
10	Totals for all transactions reported on Form(s) 8949 with Box F checked				
11	Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12	Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13	Capital gain distributions				13
14	Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 (106,057.)
15	Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on page 2				15 <106,057.>

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

Schedule D (Form 1040) 2015

Part III Summary

<p>16 Combine lines 7 and 15 and enter the result</p> <ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22. <p>17 Are lines 15 and 16 both gains? <input type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p> <p>18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions</p> <p>19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions</p> <p>20 Are lines 18 and 19 both zero or blank? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below. <input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.</p> <p>21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:</p> <ul style="list-style-type: none"> • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) <p style="text-align: center;">} SEE STATEMENT 11</p> <p>Note: When figuring which amount is smaller, treat both amounts as positive numbers.</p> <p>22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <input checked="" type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.</p>	<p>16</p> <p>18</p> <p>19</p> <p>21</p>	<p><107,743.></p> <p>(3,000.)</p>
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Form **8949**

Department of the Treasury
Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

2015

Attachment
Sequence No. **12A**

- ▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.
- ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

Social security number or taxpayer identification no.

BARACK H. & MICHELLE L. OBAMA

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.
Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)	
						(f) Code(s)	(g) Amount of adjustment		
	US TREASURY NOTES			699,941.	701,627.			<1,686.>	
2	Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶					699,941.	701,627.		<1,686.>

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

Social security number of person with self-employment income

BARACK H. OBAMA

Section B - Long Schedule SE

Part I Self-Employment Tax

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

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note. Skip lines 1a and 1b if you use the farm optional method (see instructions)	1a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	1b	
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. Note. Skip this line if you use the nonfarm optional method (see instructions) SEE STATEMENT 12	2	56,069.
3 Combine lines 1a, 1b, and 2	3	56,069.
4a If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3. Note. If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	51,780.
b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
c Combine lines 4a and 4b. If less than \$400, stop; you do not owe self-employment tax. Exception. If less than \$400 and you had church employee income, enter -0- and continue	4c	51,780.
5a Enter your church employee income from Form W-2. See instructions for definition of church employee income	5a	
b Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	5b	
6 Add lines 4c and 5b	6	51,780.
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 2015	7	118,500.00
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 \$118,500 or more, skip lines 8b through 10, and go to line 11	8a	118,500.
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	1,502.
12 Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 57, or Form 1040NR, line 55	12	1,502.
13 Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	13	751.

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

Farm Optional Method. You may use this method only if (a) your gross farm income ¹ was not more than \$7,320, or (b) your net farm profits ² were less than \$5,284.		
14 Maximum income for optional methods	14	4,880.00
15 Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$4,880. Also include this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits ³ were less than \$5,284 and also less than 72.189% of your gross nonfarm income ⁴ , 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 ⁴ (not less than zero) or the amount on line 16. Also include this amount on line 4b above	17	

¹ From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.

² From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A - minus the amount you would have entered on line 1b had you not used the optional method.

³ 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.

⁴ 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)

OMB No. 1545-0121

2015

Attachment
 Sequence No. **19**

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

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name **BARACK H. & MICHELLE L. OBAMA** Identifying number as shown on page 1 of your tax return

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 ▶ OTHER COUNTRIES				
1a Gross income from sources within country shown above and of the type checked above: 9,704.	9,704.			1a 9,704.
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"/>				
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement) SEE STATEMENT 13 3,951.	3,951.			
3 Pro rata share of other deductions not definitely related: a Certain itemized deductions or standard deduction 47,325. b Other deductions (attach statement)	47,325.			
c Add lines 3a and 3b 47,325.	47,325.			
d Gross foreign source income 9,704.	9,704.			
e Gross income from all sources 455,556.	455,556.			
f Divide line 3d by line 3e .02130	.02130			
g Multiply line 3c by line 3f 1,008.	1,008.			
4 Pro rata share of interest expense: a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) 760. b Other interest expense	760.			
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5 5,719.	5,719.			6 5,719.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 3,985.

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued							
		In foreign currency				In U.S. dollars			
		Taxes withheld at source on:				(n) Other foreign taxes paid or accrued	Taxes withheld at source on:		(r) Other foreign taxes paid or accrued
	(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(o) Dividends		(p) Rents and royalties	(q) Interest	
A						1,007.			1,007.
B									
C									
8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶									8 1,007.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2015)

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	1,007.	
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11	1,007.	
12	Reduction in foreign taxes	12		
13	Taxes reclassified under high tax kickout	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	1,007.	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	3,985.	
16	Adjustments to line 15	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	3,985.	
18	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption <i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>	18	290,640.	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	.01371	
20	Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 <i>Caution: If you are completing line 20 for separate category (lump-sum distributions), see instructions.</i>	20	71,440.	
21	Multiply line 20 by line 19 (maximum amount of credit)	21	979.	
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22	979.	

Part IV Summary of Credits From Separate Parts III

23	Credit for taxes on passive category income	23		
24	Credit for taxes on general category income	24		
25	Credit for taxes on certain income re-sourced by treaty	25		
26	Credit for taxes on lump-sum distributions	26		
27	Add lines 23 through 26	27		
28	Enter the smaller of line 20 or line 27	28	979.	
29	Reduction of credit for international boycott operations	29		
30	Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30	979.	

Alternative Minimum Tax - Individuals

Department of the Treasury
Internal Revenue Service (99)

▶ Information about Form 6251 and its separate instructions is at www.irs.gov/form6251.
▶ Attach to Form 1040 or Form 1040NR.

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

Your social security number

BARACK H. & MICHELLE L. OBAMA

Part I Alternative Minimum Taxable Income

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	290,640.
2	Medical and dental. If you or your spouse was 65 or older, enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3	Taxes from Schedule A (Form 1040), line 9	3	48,557.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6	If Form 1040, line 38, is \$154,950 or less, enter -0-. Otherwise, see instructions	6	-3,785.
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, see instructions	13	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17	Disposition of property (difference between AMT and regular tax gain or loss)	17	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19	Passive activities (difference between AMT and regular tax income or loss)	19	
20	Loss limitations (difference between AMT and regular tax income or loss)	20	
21	Circulation costs (difference between regular tax and AMT)	21	
22	Long-term contracts (difference between AMT and regular tax income)	22	
23	Mining costs (difference between regular tax and AMT)	23	
24	Research and experimental costs (difference between regular tax and AMT)	24	
25	Income from certain installment sales before January 1, 1987	25	
26	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$246,250, see instructions.)	28	335,412.

Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2015, see instructions.)																
	<table border="0"> <tr> <td>IF your filing status is...</td> <td>AND line 28 is not over...</td> <td>THEN enter on line 29...</td> <td></td> </tr> <tr> <td>Single or head of household</td> <td>\$119,200</td> <td>\$53,600</td> <td rowspan="3">} STMT 14</td> </tr> <tr> <td>Married filing jointly or qualifying widow(er)</td> <td>158,900</td> <td>83,400</td> </tr> <tr> <td>Married filing separately</td> <td>79,450</td> <td>41,700</td> </tr> </table>	IF your filing status is...	AND line 28 is not over...	THEN enter on line 29...		Single or head of household	\$119,200	\$53,600	} STMT 14	Married filing jointly or qualifying widow(er)	158,900	83,400	Married filing separately	79,450	41,700	29	39,272.
IF your filing status is...	AND line 28 is not over...	THEN enter on line 29...															
Single or head of household	\$119,200	\$53,600	} STMT 14														
Married filing jointly or qualifying widow(er)	158,900	83,400															
Married filing separately	79,450	41,700															
	If line 28 is over the amount shown above for your filing status, see instructions.																
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30	296,140.														
31	<ul style="list-style-type: none"> If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as figured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 64 here. All others: If line 30 is \$185,400 or less (\$92,700 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately) from the result. 	31	79,211.														
32	Alternative minimum tax foreign tax credit (see instructions)	32	1,007.														
33	Tentative minimum tax. Subtract line 32 from line 31	33	78,204.														
34	Add Form 1040, line 44 (minus any tax from Form 4972), and Form 1040, line 46. Subtract from the result any foreign tax credit from Form 1040, line 48. If you used Sch J to figure your tax on Form 1040, line 44, refigure that tax without using Schedule J before completing this line (see instructions)	34	70,461.														
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	7,743.														

Part III Tax Computation Using Maximum Capital Gains Rates

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

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for line 31	36
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the 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 \$185,400 or less (\$92,700 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately) from the result	42
43	Enter: <ul style="list-style-type: none"> • \$74,900 if married filing jointly or qualifying widow(er), • \$37,450 if single or married filing separately, or • \$50,200 if head of household. 	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 the amount from Form 1040, line 43; if zero or less, enter -0-. If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	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. This amount is taxed at 0%	47
48	Subtract line 47 from line 46	48
49	Enter: <ul style="list-style-type: none"> • \$413,200 if single • \$232,425 if married filing separately • \$464,850 if married filing jointly or qualifying widow(er) • \$439,000 if head of household 	49
50	Enter the amount from line 45	50
51	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 19 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040, line 43; if zero or less, enter -0-. If you are filing Form 2555 or Form 2555-EZ, see instructions for the amount to enter	51
52	Add line 50 and line 51	52
53	Subtract line 52 from line 49. If zero or less, enter -0-	53
54	Enter the smaller of line 48 or line 53	54
55	Multiply line 54 by 15% (.15)	55
56	Add lines 47 and 54 If lines 56 and 36 are the same, skip lines 57 through 61 and go to line 62. Otherwise, go to line 57.	56
57	Subtract line 56 from line 46	57
58	Multiply line 57 by 20% (.20) If line 38 is zero or blank, skip lines 59 through 61 and go to line 62. Otherwise, go to line 59.	58
59	Add lines 41, 56, and 57	59
60	Subtract line 59 from line 36	60
61	Multiply line 60 by 25% (.25)	61
62	Add lines 42, 55, 58, and 61	62
63	If line 36 is \$185,400 or less (\$92,700 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,708 (\$1,854 if married filing separately) from the result	63
64	Enter the smaller of line 62 or line 63 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31	64

ALTERNATIVE MINIMUM TAX

Foreign Tax Credit

(Individual, Estate, or Trust)

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

OMB No. 1545-0121

2015

Attachment Sequence No. 19

Form **1116**
Department of the Treasury
Internal Revenue Service (99)

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name **BARACK H. & MICHELLE L. OBAMA** Identifying number as shown on page 1 of your tax return

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

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 ▶ OTHER COUNTRIES				
1a Gross income from sources within country shown above and of the type checked above:	9,704.			1a 9,704.
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"/>				
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement)	3,951.			
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	9,704.			
e Gross income from all sources	455,556.			
f Divide line 3d by line 3e	.02130			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)	779.			
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	4,730.			6 4,730.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 4,974.

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (h) <input checked="" type="checkbox"/> Paid (i) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued							
		In foreign currency				In U.S. dollars			
		Taxes withheld at source on:				(n) Other foreign taxes paid or accrued	Taxes withheld at source on:		(r) Other foreign taxes paid or accrued
(j) Date paid or accrued	(k) Dividends	(l) Rents and royalties	(m) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends	(p) Rents and royalties	(q) Interest	(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
A						1,007.			1,007.
B									
C									

8 Add lines A through C, column (s). Enter the total here and on line 9, page 2 ▶ **8** 1,007.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2015)

ALTERNATIVE MINIMUM TAX

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	1,007.	
10	Carryback or carryover (attach detailed computation)	10		
11	Add lines 9 and 10	11	1,007.	
12	Reduction in foreign taxes	12		
13	Taxes reclassified under high tax kickout	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		1,007.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	4,974.	
16	Adjustments to line 15	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	4,974.	
18	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption <i>Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.</i>	18	335,412.	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		.01483
20	Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, enter the amounts from Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 <i>Caution: If you are completing line 20 for separate category (lump-sum distributions), see instructions.</i>	20		79,211.
21	Multiply line 20 by line 19 (maximum amount of credit)	21		1,175.
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV	22		1,007.

Part IV Summary of Credits From Separate Parts III

23	Credit for taxes on passive category income	23		
24	Credit for taxes on general category income	24		
25	Credit for taxes on certain income re-sourced by treaty	25		
26	Credit for taxes on lump-sum distributions	26		
27	Add lines 23 through 26	27		
28	Enter the smaller of line 20 or line 27	28		1,007.
29	Reduction of credit for international boycott operations	29		
30	Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	30		1,007.

Form 1116

U.S. and Foreign Source Income Summary

NAME

BARACK H. & MICHELLE L. OBAMA

INCOME TYPE	TOTAL	U.S.	FOREIGN GENERAL
Compensation	394,454.	394,454.	
Dividends/Distributions	9.	9.	
Interest	348.	348.	
Capital Gains			
Business/Profession	60,745.	51,041.	9,704.
Rent/Royalty			
State/Local Refunds			
Partnership/S Corporation			
Trust/Estate			
Other Income			
Gross Income	<u>455,556.</u>	<u>445,852.</u>	<u>9,704.</u>
Less:			
Section 911 Exclusion			
Capital Losses			
Capital Gains Tax Adjustment			
Total Income - Form 1116	<u>455,556.</u>	<u>445,852.</u>	<u>9,704.</u>
Deductions:			
Business/Profession Expenses	4,676.	3,929.	747.
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	751.	631.	120.
Self-employment Health Insurance			
Keogh Contributions	11,064.	9,297.	1,767.
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments		-1,317.	1,317.
Capital Gains Tax Adjustment			
Total Deductions	<u>19,491.</u>	<u>15,540.</u>	<u>3,951.</u>
Adjusted Gross Income	<u>436,065.</u>	<u>430,312.</u>	<u>5,753.</u>
Less Itemized Deductions:			
Specifically Allocated	62,441.	62,441.	
Home Mortgage Interest	35,659.	34,899.	760.
Other Interest			
Ratably Allocated	47,325.	46,317.	1,008.
Total Adjustments to Adjusted Gross Income	<u>145,425.</u>	<u>143,657.</u>	<u>1,768.</u>
Taxable Income Before Exemptions	<u>290,640.</u>	<u>286,655.</u>	<u>3,985.</u>

Form 1116

Allocation of Itemized Deductions

NAME

BARACK H. & MICHELLE L. OBAMA

	Total Itemized Deductions	Itemized Deductions After Sec. 68 Reduction	Form 1116		
			Specifically U.S.	Specifically Foreign	Ratable
Taxes	48,557.	47,325.			47,325.
Interest - Not Including Investment Interest	36,587.	35,659.	34,899.	760.	
Contributions	64,066.	62,441.	62,441.		
Miscellaneous Deductions Subject to 2%					
Other Miscellaneous Deductions - Not Including Gambling Losses					
Foreign Adjustment					
Total Itemized Deductions Subject to Sec. 68	149,210.	145,425.			
Add Itemized Deductions Not Subject to Sec. 68:					
Medical/Dental					
Investment Interest					
Casualty Losses					
Gambling Losses					
Foreign Adjustment					
Total Itemized Deductions	149,210.				
Total Allowed on Schedule A		145,425.	97,340.	760.	47,325.

NAME

BARACK H. & MICHELLE L. OBAMA

Foreign Income Category

GENERAL LIMITATION INCOME

Regular	2010	2011	2012	2013	2014	2015
1. Foreign tax paid/accrued						1,007.
2. FTC carryback to 2015 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						1,007.
5. Maximum credit allowable						979.
6. Unused foreign tax (+) or excess of limit (-)					-5,368.	28.
7. Foreign tax carryback					28.	28.
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining					-5,340.	
Total foreign taxes from all available years to be carried to next year						

	2005	2006	2007	2008	2009
1. Foreign tax paid/accrued					
2. FTC carryback to 2015 for amended returns					
3. Reduction in foreign taxes					
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. Foreign tax or excess limit remaining					

NAME

BARACK H. & MICHELLE L. OBAMA

Foreign Income Category

GENERAL LIMITATION INCOME

AMT	2010	2011	2012	2013	2014	2015
1. Foreign tax paid/accrued						1,007.
2. FTC carryback to 2015 for amended returns						
3. Reduction in foreign taxes						
4. Foreign tax available						1,007.
5. Maximum credit allowable						1,175.
6. Unused foreign tax (+) or excess of limit (-)					-5,753.	-168.
7. Foreign tax carryback						
8. Foreign tax carryforward						
9. Foreign tax or excess limit remaining					-5,753.	-168.
Total foreign taxes from all available years to be carried to next year						

	2005	2006	2007	2008	2009
1. Foreign tax paid/accrued					
2. FTC carryback to 2015 for amended returns					
3. Reduction in foreign taxes					
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. Foreign tax or excess limit remaining					

Form 1116

Foreign Wages, Salaries, Business and Profession Income

NAME

BARACK H. & MICHELLE L. OBAMA

Wages and Salaries:

Source	Amount
Total Foreign Wages and Salaries	

Business and Profession Income:

Source	Amount
BARACK H. OBAMA	9,704.
Total Foreign Business and Profession Income	9,704.

Reduction for Foreign Earned Income Exclusion/Deduction:

Total Foreign Wages and Salaries	
Foreign Earned Income Exclusion/Deduction	
Percent Applicable to Foreign Wages and Salaries	

Reduction Amount

Wages and Salaries Included on Form 1116, line 1

Total Foreign Business and Profession Income	
Foreign Earned Income Exclusion/Deduction	
Percent Applicable to Foreign Business and Profession Income	

Reduction Amount

Business and Profession Income Included on Form 1116, line 1 9,704.

Additional Medicare Tax

2015

Attachment
Sequence No. 71

Department of the Treasury
Internal Revenue Service

- ▶ If any line does not apply to you, leave it blank. See separate instructions.
- ▶ Attach to Form 1040, 1040NR, 1040-PR, or 1040-SS.
- ▶ Information about Form 8959 and its instructions is at www.irs.gov/form8959.

Name(s) shown on return
BARACK H. & MICHELLE L. OBAMA

Your social security number

Part I Additional Medicare Tax on Medicare Wages

1 Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1	394,454.	
2 Unreported tips from Form 4137, line 6	2		
3 Wages from Form 8919, line 6	3		
4 Add lines 1 through 3	4	394,454.	
5 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	5	250,000.	
6 Subtract line 5 from line 4. If zero or less, enter -0-	6		144,454.
7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (.009). Enter here and go to Part II	7		1,300.

Part II Additional Medicare Tax on Self-Employment Income

8 Self-employment income from Schedule SE (Form 1040), Section A, line 4, or Section B, line 6. If you had a loss, enter -0- (Form 1040-PR and Form 1040-SS filers, see instructions.)	8	51,780.	
9 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	9	250,000.	
10 Enter the amount from line 4	10	394,454.	
11 Subtract line 10 from line 9. If zero or less, enter -0-	11	0.	
12 Subtract line 11 from line 8. If zero or less, enter -0-	12		51,780.
13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (.009). Enter here and go to Part III	13		466.

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RTTA) Compensation

14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14		
15 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	15		
16 Subtract line 15 from line 14. If zero or less, enter -0-	16		
17 Additional Medicare Tax on railroad retirement (RTTA) compensation. Multiply line 16 by 0.9% (.009). Enter here and go to Part IV	17		

Part IV Total Additional Medicare Tax

18 Add lines 7, 13, and 17. Also include this amount on Form 1040, line 62, (Form 1040NR, 1040-PR, and 1040-SS filers, see instructions) and go to Part V	18		1,766.
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Part V Withholding Reconciliation

19 Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	7,470.	
20 Enter the amount from line 1	20	394,454.	
21 Multiply line 20 by 1.45% (.0145). This is your regular Medicare tax withholding on Medicare wages	21	5,720.	
22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22		1,750.
23 Additional Medicare Tax withholding on railroad retirement (RTTA) compensation from Form W-2, box 14 (see instructions)	23		
24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, line 64 (Form 1040NR, 1040-PR, and 1040-SS filers, see instructions)	24		1,750.

Net Investment Income Tax - Individuals, Estates, and Trusts

▶ Attach to your tax return.

▶ Information about Form 8960 and its separate instructions is at www.irs.gov/form8960.

Name(s) shown on your tax return: **BARACK H. & MICHELLE L. OBAMA** Your social security number or EIN

- Part I Investment Income**
- Section 6013(g) election (see instructions)
- Section 6013(h) election (see instructions)
- Regulations section 1.1411-10(g) election (see instructions)

1 Taxable interest (see instructions)				348.
2 Ordinary dividends (see instructions)				9.
3 Annuities (see instructions)				
4a Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a			
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b			
c Combine lines 4a and 4b			4c	
5a Net gain or loss from disposition of property (see instructions)	5a	-3,000.		
b Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b			
c Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c			
d Combine lines 5a through 5c			5d	-3,000.
6 Adjustments to investment income for certain CFCs and PFICs (see instructions)			6	
7 Other modifications to investment income (see instructions)			7	
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	-2,643.

Part II Investment Expenses Allocable to Investment Income and Modifications

9a Investment interest expenses (see instructions)	9a			
b State, local, and foreign income tax (see instructions)	9b			
c Miscellaneous investment expenses (see instructions)	9c			
d Add lines 9a, 9b, and 9c			9d	
10 Additional modifications (see instructions)			10	
11 Total deductions and modifications. Add lines 9d and 10			11	

Part III Tax Computation

12 Net investment income. Subtract Part II, line 11 from Part I, line 8. Individuals complete lines 13-17. Estates and trusts complete lines 18a-21. If zero or less, enter -0-				
Individuals:				
13 Modified adjusted gross income (see instructions)	13	436,065.		
14 Threshold based on filing status (see instructions)	14	250,000.		
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	186,065.		
16 Enter the smaller of line 12 or line 15			16	
17 Net investment income tax for individuals. Multiply line 16 by 3.8% (.038). Enter here and include on your tax return (see instructions)			17	
Estates and Trusts:				
18a Net investment income (line 12 above)	18a			
b Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b			
c Undistributed net investment income. Subtract line 18b from 18a (see instructions). If zero or less, enter -0-	18c			
19a Adjusted gross income (see instructions)	19a			
b Highest tax bracket for estates and trusts for the year (see instructions)	19b			
c Subtract line 19b from line 19a. If zero or less, enter -0-	19c			
20 Enter the smaller of line 18c or line 19c			20	
21 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (.038). Enter here and include on your tax return (see instructions)			21	

FORM 1040

STATE AND LOCAL INCOME TAX REFUNDS

STATEMENT 1

	2014	2013	2012
	<u>ILLINOIS</u>		
GROSS STATE/LOCAL INC TAX REFUNDS	1,243.		
LESS: TAX PAID IN FOLLOWING YEAR			
NET TAX REFUNDS ILLINOIS	<u>1,243.</u>		
TOTAL NET TAX REFUNDS	<u>1,243.</u>		

1. IS THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR FILING STATUS?
 NO. STOP. MULTIPLY \$4,000 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42.
 YES. CONTINUE
2. MULTIPLY \$4,000 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D 16,000.
3. ENTER THE AMOUNT FROM FORM 1040, LINE 38 436,065.
4. ENTER THE AMOUNT FOR YOUR FILING STATUS 309,900.

SINGLE	\$258,250
MARRIED FILING JOINTLY OR WIDOW(ER)	\$309,900
MARRIED FILING SEPARATELY	\$154,950
HEAD OF HOUSEHOLD	\$284,050
5. SUBTRACT LINE 4 FROM LINE 3. IF THE RESULT IS MORE THAN \$122,500 (\$61,250 IF MARRIED FILING SEPARATELY), STOP. ENTER -0- ON LINE 42 126,165.
6. DIVIDE LINE 5 BY \$2,500 (\$1,250 IF MARRIED FILING SEPARATELY). IF THE RESULT IS NOT A WHOLE NUMBER, INCREASE IT TO THE NEXT HIGHER WHOLE NUMBER (FOR EXAMPLE, INCREASE 0.0004 TO 1)
7. MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT AS A DECIMAL
8. MULTIPLY LINE 2 BY LINE 7
9. SUBTRACT LINE 8 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.

FORM 1040	TAXABLE STATE AND LOCAL INCOME TAX REFUNDS	STATEMENT	3
	2014	2013	2012
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.	1,243.		
LESS:REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION	1,243.		
1 NET REFUNDS FOR RECALCULATION			
2 TOTAL ITEMIZED DEDUCTIONS BEFORE PHASEOUT	164,668.		
3 DEDUCTION NOT SUBJ TO PHASEOUT			
4 NET REFUNDS FROM LINE 1			
5 LINE 2 MINUS LINES 3 AND 4	164,668.		
6 MULT LN 5 BY APPL SEC. 68 PCT	131,734.		
7 PRIOR YEAR AGI	477,383.		
8 ITEM. DED. PHASEOUT THRESHOLD	305,050.		
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)	172,333.		
10 MULT LN 9 BY APPL SEC. 68 PCT	5,170.		
11 ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10)	159,498.		
12 ITEM DED. NOT SUBJ TO PHASEOUT			
13A TOTAL ADJ. ITEMIZED DEDUCTIONS	159,498.		
13B PRIOR YR. STD. DED. AVAILABLE	12,400.		
14 PRIOR YR. ALLOWABLE ITEM. DED.	159,498.		
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.	159,498.		
18 PRIOR YEAR STD. DED. AVAILABLE	12,400.		
19 SUBTRACT LINE 18 FROM LINE 17	147,098.		
20 LESSER OF LINE 16 OR LINE 19			
21 PRIOR YEAR TAXABLE INCOME	317,885.		
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 2012			
TOTAL TO FORM 1040, LINE 10			0.

BARACK H. OBAMA

1. PLAN CONTRIBUTION RATE OR SELF-EMPLOYED PERSON'S RATE	.200000
2. NET EARNINGS FROM SCHEDULE C, SCHEDULE F, OR SCHEDULE K-1	56,069.
3. DEDUCTION FOR SELF-EMPLOYMENT TAX FROM 1040, LINE 27	751.
4. SUBTRACT LINE 3 FROM LINE 2	55,318.
5. MULTIPLY LINE 4 TIMES LINE 1	11,064.
6. MULTIPLY \$265,000 BY YOUR PLAN CONTRIBUTION RATE. ENTER THE RESULT BUT NOT MORE THAN \$53,000	53,000.
7. ENTER THE SMALLER OF LINE 5 OR LINE 6	11,064.
8. CONTRIBUTION DOLLAR LIMIT	53,000.
*IF ANY ELECTIVE DEFERRALS WERE MADE, GO TO LINE 9.	
*OTHERWISE, SKIP LINES 9 THROUGH 18 AND ENTER THE SMALLER OF LINE 7 OR LINE 8 ON LINE 19.	
9. ALLOWABLE ELECTIVE DEFERRALS	
10. SUBTRACT LINE 9 FROM LINE 8	
11. SUBTRACT LINE 9 FROM LINE 4	
12. ENTER ONE-HALF OF LINE 11	
13. ENTER THE SMALLEST OF LINES 7, 10 OR 12	
14. SUBTRACT LINE 13 FROM LINE 4	
15. ENTER THE SMALLER OF LINE 9 OR LINE 14	
*IF CATCH-UP CONTRIBUTIONS WERE MADE, GO TO LINE 16.	
*OTHERWISE, SKIP LINES 16 THROUGH 18.	
16. SUBTRACT LINE 15 FROM LINE 14	
17. CATCH-UP CONTRIBUTION (AGE 50 OR OLDER)	
18. ENTER THE SMALLER OF LINE 16 OR LINE 17	
19. ADD LINES 13, 15 AND 18. ENTER HERE AND ON LINE 28, FORM 1040	11,064.

T	AMOUNT	FEDERAL	STATE	CITY	FICA	MEDICARE
S EMPLOYER'S NAME	PAID	TAX	TAX	SDI	TAX	TAX
		WITHHELD	WITHHELD	TAX W/H		
T DFAS-CIVPAY DIRECTORATE	394,454.	97,581.	14,147.		7,347.	7,470.
TOTALS	394,454.	97,581.	14,147.		7,347.	7,470.

BARACK H. & MICHELLE L. OBAMA

FORM 1040 FEDERAL INCOME TAX WITHHELD STATEMENT 6

T S DESCRIPTION	AMOUNT
T DFAS-CIVPAY DIRECTORATE	97,581.
FORM 8959, LINE 24	1,750.
TOTAL TO FORM 1040, LINE 64	99,331.

SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 7

DESCRIPTION	AMOUNT
DFAS-CIVPAY DIRECTORATE	14,147.
ILLINOIS 1ST QTR ESTIMATE PAYMENTS	3,000.
ILLINOIS PRIOR YEAR OVERPAYMENT APPLIED	1,243.
TOTAL TO SCHEDULE A, LINE 5	18,390.

SCHEDULE A CASH CONTRIBUTIONS STATEMENT 8

DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT
AIDS UNITED	1,500.	
AMERICAN RED CROSS	2,000.	
BEAU BIDEN FOUNDATION	5,000.	
BOYS & GIRLS CLUB DC	1,000.	
CALVARY WOMEN'S SERVICES	1,500.	
CARE	2,000.	
CENTRAL ILLINOIS FOOD BANK	1,500.	
CHRISTOPHER HOUSE	1,500.	
CITIZENS UNITED FOR RESEARCH IN EPILEPSY	1,500.	
FISHER HOUSE	9,066.	
HABITAT FOR HUMANITY	1,500.	
ILLINOIS HEAD START ASSOCIATION	1,500.	
ILLINOIS READING COUNCIL	1,500.	
INTERNATIONAL RESCUE COMMITTEE	2,000.	
JUVENILE DIABETES RESEARCH FOUNDATION	1,500.	
LEUKEMIA & LYMPHOMA SOCIETY	1,500.	
LIFE PIECES TO MASTERPIECES	1,000.	
MIDTOWN EDUCATIONAL FOUNDATION	1,000.	

BARACK H. & MICHELLE L. OBAMA

MIRIAM'S KITCHEN	1,000.	
MOSAIC YOUTH THEATRE OF DETROIT	1,000.	
MUJERES LATINAS EN ACCION	1,000.	
NATIONAL COALITION FOR HOMELESS VETERANS	1,500.	
NATIONAL CONGRESS OF BLACK WOMEN	1,500.	
NATIONAL MS SOCIETY	1,500.	
NATIONAL OVARIAN CANCER COALITION	1,500.	
ROCHELLE LEE FUND / BOUNDLESS READERS	1,500.	
SANDY HOOK PROMISE FOUNDATION	2,000.	
ST. JOHN'S CHURCH	1,500.	
ST. JUDE'S	1,500.	
ST. LEO'S CAMPUS FOR VETERANS	1,500.	
SIDWELL FRIENDS SCHOOL	5,000.	
THE HARMONY PROJECT	1,500.	
UNITED NEGRO COLLEGE FUND	1,500.	
UNIVERSITY OF HAWAII FOUNDATION	1,000.	
	<hr/>	
SUBTOTALS	64,066.	
	<hr/> <hr/>	
TOTAL TO SCHEDULE A, LINE 16		64,066.
		<hr/> <hr/>

SCHEDULE A	ITEMIZED DEDUCTIONS WORKSHEET	STATEMENT	9
1.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28.		149,210.
2.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 14, AND 20, PLUS ANY GAMBLING AND CASUALTY OR THEFT LOSSES INCLUDED ON LINE 28.		0.
3.	IS THE AMOUNT ON LINE 2 LESS THAN THE AMOUNT ON LINE 1? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 2 FROM LINE 1.		149,210.
4.	MULTIPLY LINE 3 BY 80% (.80).	119,368.	
5.	ENTER THE AMOUNT FROM FORM 1040, LINE 38.	436,065.	
6.	ENTER \$309,900 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$284,050 IF HEAD OF HOUSEHOLD; \$258,250 IF SINGLE; OR \$154,950 IF MARRIED FILING SEPARATELY.	309,900.	
7.	IS THE AMOUNT ON LINE 6 LESS THAN THE AMOUNT ON LINE 5? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 6 FROM LINE 5.	126,165.	
8.	MULTIPLY LINE 7 BY 3% (.03).	3,785.	
9.	ENTER THE SMALLER OF LINE 4 OR LINE 8.		3,785.
10.	TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 9 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 29.		145,425.

SCHEDULE C	OTHER INCOME	STATEMENT	10
DESCRIPTION		AMOUNT	
DYSTELE & GODERICH		35,831.	
PENGUIN RANDOM HOUSE		24,914.	
TOTAL TO SCHEDULE C, LINE 6		60,745.	

BARACK H. & MICHELLE L. OBAMA

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 11
1. ENTER THE AMOUNT FROM FORM 1040, LINE 41		290,640.
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-		293,640.
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		1,686.
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15		
7. ADD LINES 4 AND 6		3,000.
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-		0.
9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT		106,057.
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7		
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-	1,314.	
12. ADD LINES 10 AND 11		1,314.
13. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0-		104,743.

SCHEDULE SE	NON-FARM INCOME	STATEMENT 12
DESCRIPTION		AMOUNT
AUTHOR		56,069.
TOTAL TO SCHEDULE SE, LINE 2		56,069.

FORM 1116	EXPENSES DIRECTLY ALLOCABLE TO FOREIGN INCOME	STATEMENT 13
DESCRIPTION	COUNTRY	AMOUNT
BARACK H. OBAMA	OTHER COUNTRIES	747.
KEOGH/SEP CONTRIBUTIONS	OTHER COUNTRIES	1,767.
SELF-EMPLOYMENT TAX DEDUCTION	OTHER COUNTRIES	120.
OTHER EXPENSES DIRECTLY ALLOCATED	OTHER COUNTRIES	1,317.
TOTAL TO FORM 1116, PART I, LINE 2		3,951.

1	ENTER: \$53,600 IF SINGLE OR HEAD OF HOUSEHOLD; \$83,400 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$41,700 IF MARRIED FILING SEPARATELY	83,400.
2	ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 28	335,412.
3	ENTER: \$119,200 IF SINGLE OR HEAD OF HOUSEHOLD; \$158,900 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$79,450 IF MARRIED FILING SEPARATELY	158,900.
4	SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS ENTER -0-	176,512.
5	MULTIPLY LINE 4 BY 25% (.25)	44,128.
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	39,272.
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	

Illinois Department of Revenue

2015 Form IL-1040

Individual Income Tax Return or for fiscal year ending _____

Over 80% of taxpayers file electronically. It is easy and you will get your refund faster. Visit tax.illinois.gov.

Do not write above this line.

Step 1: Personal Information

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

- C** Filing status (see instructions)
 Single or head of household Married filing jointly Married filing separately Widowed
- D** Check if you or your spouse are a military veteran and want your name and address shared with the Illinois Department of Veterans' Affairs. You Spouse

Step 2:	1 Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4.	(Whole dollars only)	1	<u>436,065</u>	.00
Income	2 Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 1040EZ.		2		.00
	3 Other additions. Attach Schedule M.		3		.00
	4 Total income. Add Lines 1 through 3.		4	<u>436,065</u>	.00

Staple W-2 and 1099 forms here

Step 3:	5 Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return.	5			.00
Base	6 Illinois Income Tax overpayment included in U.S. 1040, Line 10.	6			.00
Income	7 Other subtractions. Attach Schedule M. Check if Line 7 includes any amount from Schedule 1299-C. <input type="checkbox"/>	7		<u>332</u>	.00
	8 Add Lines 5, 6, and 7. This is the total of your subtractions.	8			332 .00
	9 Illinois base income. Subtract Line 8 from Line 4.	9		<u>435,733</u>	.00

Step 4:	10 a Number of exemptions from your federal return. <u>4</u> x \$2,150	a	<u>8,600</u>	.00	
Exemptions	b If someone can claim you as a dependent, see instructions. _____ x \$2,150	b		.00	
	c Check if 65 or older: <input type="checkbox"/> You + <input type="checkbox"/> Spouse = _____ x \$1,000	c		.00	
	d Check if legally blind: <input type="checkbox"/> You + <input type="checkbox"/> Spouse = _____ x \$1,000	d		.00	
	10 Exemption allowance. Add Lines a through d.	10		<u>8,600</u>	.00

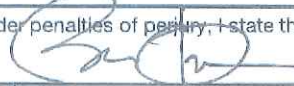


Staple your check and IL-1040-V

Step 5:	11 Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12.	11		<u>427,133</u>	.00
Net	12 Nonresidents and part-year residents: Check the box that applies to you during 2015 <input type="checkbox"/> Nonresident <input type="checkbox"/> Part-year resident, and enter the Illinois base income from Sch. NR. Attach Sch. NR.	12			.00
Income					

Step 6:	13 Residents: Multiply Line 11 by 3.75% (.0375). Cannot be less than zero. Nonresidents and part-year residents: Enter the tax from Schedule NR.	13		<u>16,017</u>	.00
Tax	14 Recapture of investment tax credits. Attach Schedule 4255.	14			.00
	15 Income tax. Add Lines 13 and 14. Cannot be less than zero.	15		<u>16,017</u>	.00

Step 7:	16 Income tax paid to another state while an Illinois resident. Attach Schedule CR.	16			.00
Tax After	17 Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.	17			.00
Non-refundable	18 Credit amount from Schedule 1299-C. Attach Schedule 1299-C.	18			.00
Credits	19 Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15.	19			.00
	20 Tax after nonrefundable credits. Subtract Line 19 from Line 15.	20		<u>16,017</u>	.00



	21 Tax after nonrefundable credits from Page 1, Line 20.	21	16,017 .00
Step 8:	22 Household employment tax. See instructions.	22	.00
Other Taxes	23 Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. Do not leave blank.	23	0 .00
	24 Compassionate Use of Medical Cannabis Pilot Program Act Surcharge	24	.00
	25 Total Tax. Add Lines 21, 22, 23, and 24.	25	16,017 .00
Step 9:	26 Illinois Income Tax withheld. Attach all W-2 and 1099 forms.	26	14,147 .00
Payments and Refundable Credit	27 Estimated payments from Forms IL-1040-ES and IL-505-I, including any overpayment applied from a prior year return.	27	4,243 .00
	28 Pass-through withholding payments. Attach Schedule K-1-P or K-1-T.	28	.00
	29 Earned Income Credit from Schedule ICR. Attach Schedule ICR.	29	.00
	30 Total payments and refundable credit. Add Lines 26 through 29.	30	18,390 .00
Step 10:	31 Overpayment. If Line 30 is greater than Line 25, subtract Line 25 from Line 30.	31	2,373 .00
Result	32 Underpayment. If Line 25 is greater than Line 30, subtract Line 30 from Line 25.	32	.00
Step 11:	33 Late-payment penalty for underpayment of estimated tax	33	.00
Underpayment of Estimated Tax Penalty and Donations	a Check if at least two-thirds of your federal gross income is from farming. <input type="checkbox"/>		
	b Check if you or your spouse are 65 or older and permanently living in a nursing home. <input type="checkbox"/>		
	c Check if your income was not received evenly during the year and you annualized your income on Form IL-2210. Attach Form IL-2210. <input type="checkbox"/>		
	d Check if you were not required to file an Illinois Individual Income Tax return in the previous tax year. <input type="checkbox"/>		
	34 Voluntary charitable donations. Attach Schedule G.	34	.00
	35 Total penalty and donations. Add Lines 33 and 34.	35	.00
Step 12:	36 If you have an overpayment on Line 31 and this amount is greater than Line 35, subtract Line 35 from Line 31. This is your remaining overpayment .	36	2,373 .00
Refund or Amount You Owe	37 Amount from Line 36 you want refunded to you . Check one box on Line 38. See instructions.	37	0 .00
	38 I choose to receive my refund by		
	<input type="checkbox"/> direct deposit - Complete the information below if you check this box.		
	Routing number _____ <input type="checkbox"/> Checking or <input type="checkbox"/> Savings Account number _____		
	<input type="checkbox"/> Illinois Individual Income Tax refund debit card		
	<input type="checkbox"/> paper check		
	39 Amount to be applied to estimated tax . Subtract Line 37 from Line 36. See instructions.	39	2,373 .00
	40 If you have an underpayment on Line 32, add Lines 32 and 35. OR If you have an overpayment on Line 31 and this amount is less than Line 35, subtract Line 31 from Line 35. This is the amount you owe . See instructions.	40	.00
Step 13:	Under penalties of perjury, I state that I have examined this return, and, to the best of my knowledge, it is true, correct, and complete.		
Sign and Date	 Your signature _____ Date 4/07/16	Daytime phone number _____	 Your spouse's signature _____ Date 04/08/2016
	 Paid preparer's signature _____ Date 3/31/16	Preparer's phone number _____	Preparer's FEIN, SSN, or PTIN _____
Third Party Designee	<input checked="" type="checkbox"/> Check, and complete the designee's name and phone number below, to allow another person to discuss this return and any previous return that affects the liability reported on this return with the Illinois Department of Revenue. MICHAEL S SOLHEIM Designee's name (please print) _____ Designee's phone number _____		
Form 1099-G Information	<input type="checkbox"/> If you are unable to obtain your Form 1099-G from our website, you may check the box to receive a paper 1099-G form next year. We will mail you a 1099-G form if you meet the criteria requiring us to issue one to you.		



If no payment enclosed, mail to:
 ILLINOIS DEPARTMENT OF REVENUE
 SPRINGFIELD IL 62719-0001



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

549002
 01-07-16

ID: 2BX



Illinois Department of Revenue
2015 Schedule M
 Attach to your Form IL-1040

Other Additions and Subtractions for Individuals

IL Attachment No. 15

Read this information first

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

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

Step 1: Provide the following information

BARACK H. & MICHELLE L. OBAMA

Your name as shown on Form IL-1040

Your Social Security number

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

Enter the amount of

(Whole dollars only)

1 Your child's federally tax-exempt interest and dividend income as reported on U.S. Form 8814.	1	_____	.00
2 Distributive share of additions you received from a partnership, S corporation, trust, or estate. Attach Illinois Schedule K-1-P or Schedule K-1-T.	2	_____	.00
3 Lloyds plan of operations loss, if reported on your behalf on Form IL-1065 and included in your adjusted gross income.	3	_____	.00
4 Earnings distributed from IRC Section 529 college savings and tuition programs if not included in your adjusted gross income (Do not include distributions from "Bright Start," "Bright Directions," or "College Illinois" programs or programs that meet certain disclosure requirements - see instructions.)	4	_____	.00
5 Illinois special depreciation addition amount from Form IL-4562, Step 2, Line 4. Attach Form IL-4562.	5	_____	.00
6 Business expense recapture (nonresidents only).	6	_____	.00
7 Recapture of deductions for contributions to Illinois college savings plans transferred to an out-of-state plan.	7	_____	.00
8 Credit taken on Schedule 1299-C for student-assistance contributions you made as an employer.	8	_____	.00
9 Recapture of deductions for contributions to college savings plans withdrawn for nonqualified expenses or refunded.	9	_____	.00
10 Other income - Identify each item _____	10	_____	.00
11 Total Additions. Add Lines 1 through 10. Enter the amount here and on Form IL-1040, Line 3.	11	_____	.00

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

Enter the amount of

12 Contributions made to the following college savings plans:			
a "Bright Start" College Savings Pool	12a	_____	.00
b "College Illinois" Prepaid Tuition Program	12b	_____	.00
c "Bright Directions" College Savings Pool	12c	_____	.00
13 Distributive share of subtractions from a partnership, S corporation, trust, or estate. (Do not claim these same subtractions on any other line of this schedule. See instructions.) Attach Illinois Schedule K-1-P or K-1-T identifying you as the partner, shareholder, or beneficiary and listing your Social Security number.	13	_____	.00
14 Restoration of amounts held under claim of right under Internal Revenue Code, Section 1341.	14	_____	.00
15 Contributions to a job training project.	15	_____	.00
16 Expenses related to federal credits or federally tax-exempt income.	16	_____	.00
17 Interest earned on investments through the Home Ownership Made Easy Program.	17	_____	.00
18 Illinois special depreciation subtraction amount from Form IL-4562, Step 3, Line 10. Attach Form IL-4562.	18	_____	.00
Enter the following only if included in Form IL-1040, Lines 1, 2, or 3:			
19 Military pay earned. Attach military W-2.	19	_____	.00
20 U.S. Treasury bonds, bills, notes, savings bonds, and U.S. agency interest from U.S. 1040A or 1040. Attach a copy of U.S. 1040A or 1040, Schedule B, if required federally. SEE STATEMENT 1	20	_____	332 .00
21 August 1, 1969, valuation limitation amount from your Schedule F, Line 17. Attach Schedule F and required federal forms.	21	_____	.00
22 River edge redevelopment zone and high impact business dividend subtraction amount from your Schedule 1299-C, Step 2, Line 7. Attach Schedule 1299-C.	22	_____	.00
23 Add Lines 12a through 22 and enter the amount here and on Page 2, Line 24.	23	_____	332 .00



Step 3: Continued

24	Enter the amount from Page 1, Line 23.	24	332 .00
25	Recovery of items previously deducted on U.S. 1040, Schedule A (including refunds of any state and local income taxes, other than Illinois). Attach a copy of U.S. 1040, Page 1, and required federal forms.	25	.00
26	Ridesharing money and other benefits.	26	.00
27	Payment of life insurance, endowment, or annuity benefits received.	27	.00
28	Lloyds plan of operations income if reported on your behalf on Form IL-1065.	28	.00
29	Income from Illinois pre-need funeral, burial, and cemetery trusts.	29	.00
30	Education loan repayments made for primary care physicians who agree to practice in designated shortage areas under the Family Practice Residency Act.	30	.00
31	Reparations or other amounts received as a victim of persecution by Nazi Germany.	31	.00
32	Interest on the following tax-exempt obligations of Illinois state and local government. Do not include interest you received indirectly through owning shares in a mutual fund.		
a	Illinois Housing Development Authority bonds and notes (except housing-related commercial facilities bonds and notes)	32a	.00
b	Tri-County River Valley Development Authority bonds	32b	.00
c	Illinois Development Finance Authority bonds, notes, and other obligations (venture fund and infrastructure bonds only)	32c	.00
d	Quad Cities Regional Economic Development Authority bonds and notes (if declared to be exempt from taxation by the Authority)	32d	.00
e	College Savings bonds	32e	.00
f	Illinois Sports Facilities Authority bonds	32f	.00
g	Higher Education Student Assistance Act bonds	32g	.00
h	Illinois Development Finance Authority bonds issued under the Illinois Development Finance Authority Act, Sections 7.80 through 7.87	32h	.00
i	Rural Bond Bank Act bonds and notes	32i	.00
j	Illinois Development Finance Authority bonds issued under the Asbestos Abatement Finance Act	32j	.00
k	Quad Cities Interstate Metropolitan Authority bonds	32k	.00
l	Southwestern Illinois Development Authority bonds	32l	.00
m	Illinois Finance Authority bonds issued under the Illinois Finance Authority Act, Sections 820.60 and 825.55 or the Asbestos Abatement Finance Act	32m	.00
n	Illinois Power Agency bonds issued by the Illinois Finance Authority	32n	.00
o	Central Illinois Economic Development Authority bonds	32o	.00
p	Eastern Illinois Economic Development Authority bonds	32p	.00
q	Southeastern Illinois Economic Development Authority bonds	32q	.00
r	Southern Illinois Economic Development Authority bonds	32r	.00
s	Illinois Urban Development Authority bonds	32s	.00
t	Downstate Illinois Sports Facilities Authority bonds	32t	.00
u	Western Illinois Economic Development Authority bonds	32u	.00
v	Upper Illinois River Valley Development Authority Act bonds	32v	.00
w	Will-Kankakee Regional Development Authority bonds	32w	.00
33	Interest on the following non-U.S. government bonds.		
a	Bonds issued by the government of Guam	33a	.00
b	Bonds issued by the government of Puerto Rico	33b	.00
c	Bonds issued by the government of the Virgin Islands	33c	.00
d	Bonds issued by the government of American Samoa	33d	.00
e	Bonds issued by the government of the Northern Mariana Islands	33e	.00
f	Mutual mortgage insurance fund bonds	33f	.00
34	Amount of your child's interest from U.S. Treasury and U.S. agency obligations or from sources in Line 20, 32 or 33 as reported on U.S. Form 8814	34	.00
35	Railroad sick pay and unemployment income. Attach Form 1099-G or W-2 and a copy of your federal return.	35	.00
36	Unjust imprisonment compensation awarded by Illinois Court of Claims.	36	.00
37	Distributions from "Bright Start," "College Illinois," and "Bright Directions" college savings plans if included in Line 1 because you claimed a federal American Opportunity or Lifetime Learning Credit	37	.00
38	Total Subtractions. Add Lines 24 through 37. Enter the amount here and on Form IL-1040, Line 7.	38	332 .00



2015 IL-2210 Computation of Penalties for Individuals

Attach to your Form IL-1040

IL Attachment No. 19

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

We will waive the late-payment penalty for underpayment of estimated tax if you timely paid the lesser of 100 percent of the prior year's tax liability or 90 percent of the current year's tax liability. If you elect to complete Form IL-2210, this form reflects that waiver.

The late-payment penalty for underpayment of estimated tax is based on the tax shown due on your original return. Do not use the tax shown on an amended return filed after the extended due date of the return to compute your required installments in Step 2.

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, enter that number here.

Step 2: Figure your required installments

	A This year	B Last year
1 Enter your total income tax and compassionate use of medical cannabis surcharge from each tax return. See instructions.	1 16,017.	22,640.
2 Enter the amount of credits from each tax return. See instructions.		
3 Subtract Line 2 from Line 1.	3 16,017.	22,640.
4a Enter the total amount of this year's Illinois withholding from your W-2 and 1099 forms.	4a 14,147.	
4b Enter the total amount of pass-through withholding payments made on your behalf.		
4c Add Lines 4a and 4b and enter the result here.	4c 14,147.	
5 Subtract Line 4c from Line 3.	5 1,870.	
6 Multiply Column A, Line 3, by 90% (.9).	6 14,415.	
7 If Line 5 is \$500 or less or if you are not required to make estimated tax payments, enter "0," and go to Step 3. Otherwise, enter the lesser of Column A, Line 6, or Column B, Line 3.	7 14,415.	
8 Divide the amount entered on Line 7 by four. This is the amount of each required installment. (If you use the annualized income installment method, see instructions.)	8 3,604.	

	Quarter 1 15th day of 4th month of tax year	Quarter 2 15th day of 6th month of tax year	Quarter 3 15th day of 9th month of tax year	Quarter 4 15th day of 1st mo. after end of tax year
9a Enter the installment due date for each quarter. See instructions.	04/15/15	06/15/15	09/15/15	01/15/16
9b Enter the required installment. See instructions.	3,604.	3,604.	3,604.	3,603.
10a Enter the amount of tax withheld.	3,537.	3,537.	3,537.	3,536.
10b Enter the amount of pass-through payments.				
10c Add Lines 10a and 10b in each column.	3,537.	3,537.	3,537.	3,536.
11 Subtract Line 10c from Line 9b. If the amount is negative, use brackets.	67.	67.	67.	67.
12 If the amount on Line 13 of the previous quarter is negative, enter that amount as a positive here. Otherwise, enter "0."	Skip this line for Quarter 1.	0.	0.	0.
13 Subtract Line 12 from Line 11. If the amount is negative, use brackets.	67.	67.	67.	67.

Continue with Step 3 on Page 2 →



Step 3: Figure your unpaid tax



14	Enter the amount from Column A, Line 3.	14	16,017.
15	Enter the amount of household employment tax from Form IL-1040, Line 22.	15	
16	Enter the amount of use tax from Form IL-1040, Line 23.	16	
17	Add Lines 14 through 16. Enter the total amount here.	17	16,017.
18	Calculate the total amount of all payments made on or before the original due date of your tax return. Include your credit(s) carried forward from a prior year (see instructions), your total estimated payments made this year, Form IL-505-I payments, the pass-through withholding payments made on your behalf, and your withholding as shown on your W-2 and 1099 forms. Compare that total to the total of Line 9b, Quarters 1 through 4, and enter the greater amount here.	18	18,390.
19	Subtract Line 18 from Line 17. If the amount is <ul style="list-style-type: none"> • positive, enter that amount here. Enter this amount in Penalty Worksheet 2, Line 23, Column C and continue to Step 4. • zero or negative, enter that amount here and, if negative, use brackets. 	19	<2,373.>

Step 4: Figure your late-payment penalty

Use Penalty Worksheet 1 to figure your late-payment penalty for underpayment of estimated tax.
Use Penalty Worksheet 2 to figure your late-payment penalty for unpaid tax.

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

20 Enter the amount and the date of each payment you made. Include any credit(s) carried forward from a prior year. See instructions.

	Amount	Date paid	Amount	Date paid	Amount	Date paid
a	1,243.	04/15/15	e		i	
b	3,000.	03/30/15	f		j	
c			g		k	
d			h		l	

Penalty rates

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

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

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

21 Enter the unpaid amounts from Line 13, Quarters 1 through 4, on the first line of the appropriate quarters in Column C below. If you have more than four payments to apply to any quarter, use a separate piece of paper following the same format as below and attach to this form.

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
Qtr 1	04/15/15	67.		67.	04/15/15			
		67.	3,000.	-2,933.	04/15/15			
Qtr 2	06/15/15	67.		67.	06/15/15			
		67.	2,933.	-2,866.	06/15/15			
Qtr 3	09/15/15	67.		67.	09/15/15			
		67.	2,866.	-2,799.	09/15/15			
Qtr 4	01/15/16	67.		67.	01/15/16			
		67.	2,799.	-2,732.	01/15/16			

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

Enter the total amount here and on your Form IL-1040, Line 33 (round to whole dollars). 22 0

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

Penalty Worksheet 2 - Late-payment penalty for unpaid tax

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

A	B	C	D	E	F	G	H	I
Return	Due date	Unpaid amount	Payment applied	Balance due (Col. C - Col. D)	Payment date	Number of days late	Penalty rate (See Page 2)	Penalty

24 Add Column I. This is your **late-payment penalty for unpaid tax**.
Enter the total amount here and on Step 5, Line 34.

24 _____

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

Note Figure your late-filing penalty only if

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

Figure your late-filing penalty.

25 Enter the amount from Form IL-1040, Line 15.	25 _____
26 Enter the amount of household employment tax from Form IL-1040, Line 22.	26 _____
27 Enter the amount of use tax from Form IL-1040, Line 23.	27 _____
28 Enter the amount of compassionate use of medical cannabis surcharge from Form IL-1040, Line 24.	28 _____
29 Add Lines 25 through 28. Enter the total amount here.	29 _____
30 Enter the total amount of credits and payments made on or before your original due date.	30 _____
31 Subtract Line 30 from Line 29.	31 _____
32 Multiply the amount on Line 31 by 2% (.02).	32 _____
33 Enter the lesser of Line 32 or \$250. This is your late-filing penalty .	33 _____

Figure the amount you owe.

34 Enter any late-payment penalty for unpaid tax from Line 24.	34 _____
35 Enter any late-filing penalty from Line 33.	35 _____
36 If you have an overpayment on Form IL-1040, Line 36, enter that amount as a <negative number>. If you have an amount due on Form IL-1040, Line 40, enter that amount as a positive number.	36 _____
37 Add Lines 34 through 36. If the result is a negative number, this is the amount you are overpaid. If the result is a positive number, this is the amount you owe. See Form IL-1040, Line 40, instructions for your payment options.	37 _____

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



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

Complete this worksheet only if your income was not received evenly throughout the year and you choose to annualize your income. Complete Lines 38 through 56 of one column before going to the next, beginning with Column A.

	A First 3 months	B First 5 months	C First 8 months	D All 12 months
38 Enter your Illinois base income for each period. See instructions.	38 _____	_____	_____	_____
39 Annualization factors.	39 _____ 4	_____ 2.4	_____ 1.5	_____ 1
40 Multiply Line 38 by Line 39. This is your annualized income.	40 _____	_____	_____	_____
41 Exemptions. See instructions.	41 _____	_____	_____	_____
42 Subtract Line 41 from Line 40. This is your Illinois net income.	42 _____	_____	_____	_____
43 Multiply Line 42 by 3.75% (.0375).	43 _____	_____	_____	_____
44 Compassionate use of medical cannabis surcharge. See instructions.	44 _____	_____	_____	_____
45 Add Lines 43 and 44.	45 _____	_____	_____	_____
46 For each period, enter the amount you entered on Step 2, Line 2, Column A.	46 _____	_____	_____	_____
47 Subtract Line 46 from Line 45.	47 _____	_____	_____	_____
48 Applicable percentage.	48 _____ 22.5% (.225)	_____ 45% (.450)	_____ 67.5% (.675)	_____ 90% (.900)
49 Multiply Line 47 by Line 48. This is your annualized installment.	49 _____	_____	_____	_____
50 Add the amounts on Line 56 of each of the preceding columns and enter the total here.	50 _____	_____	_____	_____
51 Subtract Line 50 from Line 49. If less than zero, enter "0."	51 _____	_____	_____	_____
52 Enter the amount you would have entered in Step 2, Line 9b, if you were not annualizing.	52 _____	_____	_____	_____
53 Enter the amount from Line 55 of the preceding column.	53 _____	_____	_____	_____
54 Add Lines 52 and 53.	54 _____	_____	_____	_____
55 If Line 54 is greater than Line 51, subtract Line 51 from Line 54. Otherwise, enter "0."	55 _____	_____	_____	Skip this line for Column D.
56 Enter the lesser of Line 51 or Line 54 here and on Step 2, Line 9b. This is your required installment.	56 _____	_____	_____	_____



BARACK H. & MICHELLE L. OBAMA

IL SCHEDULE M U.S. GOVERNMENT OBLIGATIONS STATEMENT 1

DESCRIPTION	AMOUNT
BOND PREMIUM AMORTIZATION	-12,629.00
NORTHERN TRUST SECURITIES US GOVT INTEREST	12,961.00
TOTAL TO SCHEDULE M, LINE 20	332.00

