See necessaries Seed 1 See	1040	U.S	3. Individual Incom	e Tax Return	2011	OMB No. 1545-0074	IRS Use Only - Do	not write	or stap	le In this space.	
BARACK H DBAMA Spotses first name and winds DBAMA Spotses south recordy number Spotses south record number	For the year Jan, 1-Dec.	31, 20	11, or other tax year beginning			2011, anding	, 20		See	separate instruc	tions.
Map Per	Your first name and I	initial		Last name					Your	social security num	oer
DRAMA	BARACK H.			OBAMA							
Appl. 60	If a joint return, spou	se's fi	rst name and initial	Last name					Spou	se's social security	number
1.600 PENNSYLVANTA AVENUE, NW Permitted the proposed content of the property and research appearance of the property and property a	MICHELLE	L.		ОВАМА							
1.600 PENNSYLVANTA AVENUE, NW Permitted the proposed content of the property and research appearance of the property and property a			d street). If you have a P.O.		S.		Apt.	по.		Jako rivo tha CCN/a) above
Comparison productions, where year of the color involvment in recipies observed. Providing country trainer Providing provided by Providing providing by Provid			er over all emperorises ordinarion community over a				A-V-2-4000		A a	ind on line 6c are co	rrect.
Foreign country name					ete spaces below.				Presi	dential Election Can	npaign
Fireign province Fire				• 0000000000000000000000000000000000000					Chec	k here if you, or you id iointly, want \$3 to	r spouse
Filing Status Filing Status Single			20 2000	Foreign n	rovince/county		Enraign posts	looda	this f	und, Checking a bo	c below
Single	r Groigh Gobina y Ham			Troreign p	(Ovince/Gounty		roleigii post	ii cone			
Check only one box	-	1	Cingle			d Unad	of boundhald (with	o avalla			
Married filing separately, Enter spouse's SSN above name here. S Qualifying widow/(er) with dependent child	Filing Status			· · · · · · · · · · · · · · · · · · ·	U a						
Second					And the second second	A CONTRACTOR OF THE PARTY OF TH		t your d	epend	ient, enter this ch	ild's
Exemptions Sax Yourself, If someone can claim you as a dependent, so a boundary number Younger Y		J		34	SN above			10 E	a 5		
No. of distance Security running Col Dependent's security running Col Dependent's Col Depend	one box.					5 Quali	fying widow(er) wi	th deper	ndent		
The component	Exemptions										_2_
If more than four dependents Colopeanders accordly remined Society remined S							***********	Lower)		
If more than tour dependents, see instructions and check here						al (3)	Dependent's ationship to	dodera	child ge 17	a lived with you	_2_
MATASHA MOBAMA DAUGHTER X		-			-		you) 9
Total number of exemptions claimed		-								or separation (see instructions)	
Income		Ī.	IATASHA M OBA	MA		DAUGH	rer	X			
Check here		_			1 1						
Income		-			3 1					Add numbers	
Income	7	d	Total number of exemption	s claimed	**********					on lines	4
Attach Form(s) W-2 here. Also Tax-exempt interest. Do not include on line 8a Ba 10,694.	Income	7								www.	321.
Attach Form(s) W-2 here. Also attach Forms b Unalfield dividends, Attach Schedule B if required 9a 3 3 3	moome	8a	Taxable interest, Attach So	hedule B if required							
Var 2 hire Also attach Forms Sand Var 2 hire Also attach Forms Sand Var 2 hire Also attach Forms Sand Var 3 hire Var 4 hire	S PARTY OF MODERNIA	b	Tax-exempt interest. Do n	ot include on line 8a	***************************************	85					
attach Forms b Usualfied dividends 9b 1 W-26 and 1099-R if tax was withheld. 10 Taxable refunds, credits, or offsets of state and local income taxes 10 If you did not get a W-2, see instructions. 13 Capital gain or (loss). Attach Schedule C or C-EZ 12 441,369 + 1		9a	Ordinary dividends, Attach	Schedule B if requir	red		***************************************	9	9		3.
10 1099-R if tax 10 10 1099-R if tax 11 11 12 14 13 12 14 14 15 12 14 14 15 15 15 15 15 15	200		Qualified dividends			9b			-		
Mas withheld			Tayable refunds credits o	r offeete of etate and	local income taxes			- 1			
12 Business income or (loss). Attach Schedule C or C-EZ 12 441,369 13 3 -3,000 14 14 15 15 14 14 14 14		200	Alimony raceived	Unacia di atate ant	i local lileoffic lakes		***************		-		
13	was withheld.		Rusiness income or (logs)	Attach Schodula C	or C E7				-	//1	360
See instructions 14 Other gains or (losses). Attach Form 4797 14 15b 15b 15a 16a Pensions and annutities 16a Densions annutities 16a De			Capital gain or (loca). Attac	h Cobadula D if rac	ulred If not required a	hook bosa					
15a									-		000.
16a Pensions and annulties 16a			IDA distributions	1 de - 1							
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	see manuchons.		Descion and annilled	108					-		
Enclose, but do not attach, any payment. Also, please use Form 1040-V. 18 Farm income or (loss). Attach Schedule F 19 19 19 19 19 19 19			Pensions and annumes	[10a]		b Taxable an	iount	16			
10	Enclose but do		Rental real estate, royalties	, partnerships, 5 co	rporations, trusts, etc.	Attach Schedule E		1			98.
Description Social security benefits 20a		1/0/12/0	Farm income or (loss). Att	ach Schedule F				1	_		
21 Other income. List type and amount 22 Comblne the amounts in the far right column for lines 7 through 21. This is your total income ≥ 22 8 4 4 , 585 . 23 Educator expenses 24 Cortain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2105 or 2106-EZ 25 Health savings account deduction. Attach Form 8889 26 Moving expenses. Attach Form 3903 27 Deductible part of self-employment tax. Attach Schedule SE 27 Deductible part of self-employment tax. Attach Schedule SE 28 Self-employed SEP, SIMPLE, and qualified plans 29 Self-employed health insurance deduction 29 Self-employed health insurance deduction 29 Self-employed health insurance deduction 30 Penalty on early withdrawal of savings 31a Alimony paid b Recipient's SSN ▶ : 31a 31a Alimony paid b Recipient's SSN ▶ : 31a 32 IRA deduction 33 Student loan Interest deduction 34 Tuition and fees. Attach Form 8917 35 Domestic production activities deduction. Attach Form 8903 36 Add lines 23 through 35 37 Add lines 23 through 35		19	Unemployment compensa	tion			*****************	1	9		
21						b Taxable an	nount	20	b	***************************************	
Adjusted Adjusted Gross Income 23 Educator expenses Certain business expenses of reservisis, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-E2 24 24 Gross Income 25 Health savings account deduction. Attach Form 8889 26 Moving expenses. Attach Form 3903 27 Deductible part of self-employment tax. Attach Schedule SE 28 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Self-employed health insurance deduction 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN 31a 32 IRA deduction 33 Student loan interest deduction 34 Tuition and fees. Attach Form 8917 35 Domestic production activities deduction. Attach Form 8903 36 Add lines 23 through 35 36 36 36 37 38 39 39 30 31 30 31 31 32 33 34 35 36 36 37 38 39 39 30 30 31 30 31 31 32 33 34 35 36 36 37 38 39 39 30 30 30 31 31 31 32 33 34 35 36 36 37 38 39 39 30 30 31 30 31 31 32 33 34 35 36 36 37 38 38 39 39 30 30 30 31 30 31 31 32 33 34 35 36 37 38 38 39 39 30 30 30 30 31 31 32 33 34 35 36 37 38 38 39 39 30 30 30 30 30 31 31 32 33 34 35 36 37 38 38 39 39 30 30 30 30 30 30 31 31 32 33 34 35 36 37 38 38 39 39 30 30 30 30 30 30 31 31 32 33 34 35 36 37 38 38 39 39 30 30 30 30 30 30 30 30	TOTAL TOTAL X.							2	1		
Adjusted 24	Ner-2-4-t-		Combine the amounts in the	ie far right column f	or lines 7 through 21.	This is your total i	ncome	2	2	844,.	585.
25 Health savings account deduction. Attach Form 8889 25			Educator expenses	eserviste performing ar	tiete and tag hasis govern	23				•6	
### Processor ### P		24	officials. Attach Form 2106 or 2	106-EZ	uata, and ree-basia govern	24					
26 27 Deductible part of self-employment tax. Attach Schedule SE 27 5 , 911 . 28 Self-employed SEP, SIMPLE, and qualified plans 28 49 , 000 . 29 Self-employed health insurance deduction 29 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN 31a 32 IRA deduction 32 33 Student loan interest deduction 33 34 Tuition and fees. Attach Form 8917 34 35 Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 35 36 54 , 911 .		25	Health savings account de	duction. Attach Forn	n 8889	25			-22		
28	income	26							20		
29 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN		27					5,91	1.			
29 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN		28	Self-employed SEP, SIMPI	E, and qualified pla	ns	28	49,00	0.			
30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN ▶ ; 31a 32 IRA deduction 32 33 Student loan Interest deduction 33 34 Tuition and fees. Attach Form 8917 34 35 Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 35 36 54,911.		29	Self-employed health insur	ance deduction		29					
31a Alimony paid b Recipient's SSN ▶ : 31a 32 33 34 35 35 36 36 37 38 39 39 39 39 39 39 39		30	Penalty on early withdrawa	l of savings		30					
32 IRA deduction 32 33 34 35 36 36 54 , 911 .		31a	Alimony paid b Recipier	it's SSN ⊳	1 1	31a					
33 Student loan Interest deduction 34 Tuition and fees. Attach Form 8917 35 Domestic production activities deduction. Attach Form 8903 36 Add lines 23 through 35 36 54,911.		32	A PER CALL TO A CONTRACT OF THE PARTY OF THE			2000					
34 Tuition and fees. Attach Form 8917 35 Domestic production activities deduction. Attach Form 8903 36 Add lines 23 through 35 36 54,911.		33					V - V - V - V - V - V - V - V - V - V -				
Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 35 36 54,911.		34	Tuition and fees, Attach Fo	rm 8917			West and the second				
36 Add lines 23 through 35		35	Domestic production activ	ities deduction. Atta	ch Form 8903	35				/ű	
110001 11-07-11 37 Subtract line 36 from line 22. This is your adjusted gross income 37 789.674.		36						3	6	54	911.
	110001 11-07-11		Subtract line 36 from line	22. This is your adj	usted gross income		*******************	-	_		

Form 1040 (2011)	B.	ARACK H. & MICHELLE L. OBAMA				Page 2
Tax and	38	Amount from line 37 (adjusted gross income)		*******	38	789,674.
Credits		그렇게 하면 그 사이지 💉 하는 🕶 🕶 그래요요요 어느 어느 어느 어느 그래요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요	otal boxes			
Standard			hecked 🕨 39	al I		
Deduction for -	h	If your spouse itemizes on a separate return or you were a dual-status alien, check		1		26
People who L	40	Itemized deductions (from Schedule A) or your standard deduction (see left many			40	278,498.
box on line 39a or 39b or					41	511,176.
who can be	41	FIFT+++4TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT				14,800.
claimed as a dependent.	42	***************************************		dimension	42	
	49	Taxable Income. Subtract line 42 from line 41. If line 42 is more than line 41, ente			43	496,376.
	44	Tax. Check if any from: a Form(s) 8814 b Form 4972 c 9			44	143,603.
	45	Alternative minimum tax. Attach Form 6251			45	12,491.
All others: Single or	46	Add lines 44 and 45	************	▶	46	156,094.
Married filling	47	Foreign tax credit. Attach Form 1116 if required	47	5,841.		
separately, \$5,800	48	Credit for child and dependent care expenses. Attach Form 2441	48		0.40	
Married filing	49	Education credits from Form 8863, line 23	49		1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Jointly or	50	Retirement savings contributions credit. Attach Form 8880	50		y to	
widow(er),	51	Child tax credit (see instructions)	51		20 (15 m) 24 (15 m)	
\$11,600 Head of		Desidential assess and the Atlant Francisco				
household,	52	Residential energy credits. Attach Form 5695	52		1	
\$8,500	53		53			F 0 4 4
	54	Add lines 47 through 53. These are your total credits			54	5,841.
•	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-			55	150,253.
Other	56	Self-employment tax, Attach Schedule SE Unreported social security and Medicare tax from Form: a 4137 b 8		,	56	11,821.
Taxes	57	Unreported social security and Medicare tax from Form: a 4137 b 8	919	******	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if re			58	
	59a	Household employment taxes from Schedule H			59a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required			59b	
	60	Other terms Fator and also tents rathers		. The 100 M N N	60	
	61	Add lines 55 through 60. This is your total tax			61	162,074.
Payments		Fadarel income to withhold from Farms W. Roard 1000	62 10	0,255.		102,073
rayments		Federal income tax withheld from Forms W-2 and 1099	02 I.U	6 224	多質所	
If you have	63	2011 estimated tax payments and amount applied from 2010 return		6,334.	70,0	
a qualifying	641	Earned income credit (EIC)	64a		N. Trian	
child, attach Schedule EIC.		The control of the co	市域等		Add.	
Scriedule ElC.	65	Additional child tax credit. Attach Form 8812	65		1.7.	
	66	American opportunity credit from Form 8863, line 14	66	277.0	26	
	67	First-time homebuyer credit from Form 5405, line 10	67	NAME OF TAXABLE PARTY.	1 52	
	68	Amount paid with request for extension to file	68			
	69	Excess social security and tier 1 RRTA tax withheld	69	· · · · · · · · · · · · · · · · · · ·		
	70	Credit for federal tax on fuels. Attach Form 4136	70		#	
	71	Credits from Form: a 2439 b 8839 c 8801 d 8885	71		30	
	A1112	THE RESIDENCE OF THE PROPERTY		b	72	186,589.
Refund	- Historia				-	24,515.
neiulia	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you	n overbaio		73	44,313.
Direct deposit?	/41	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here	B		74a	
See Instructions.		Routing C Type: C Checking Savings d Account				
	75	Amount of line 73 you want applied to your 2012 estimated tax		4,515.	77	
Amount	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see ins	tructions		76	
You Owe	77	Estimated tax penalty (see instructions)	77	0.	1-10	
Third Part		Oo you want to allow another person to discuss this return with the IRS (see instruct	tions)? X Yes	. Complete be	low.	No No
Designee	Di	signee's MICHAEL S. SOLHEIM, CPA Phone Phone			HIGHHOU	il identification (PIN)
Sign		Under penalties of perjusy, I declare that I have examined this return and accompanying schedules correct; and complete. Declaration of preparer (other than texpayer) is based on all information of v	and statements, and	to the best of my	knowled	ige and belief, they are true,
Here		Your signature Date Your occupation	which propagation has enty	KI IOWIOOGO.	Dayt	time phone number
Joint return? See instructions.		4-11-12 US PRES:	TDENT			
Кеер а сору	1	Spouse's signature. If a joint return, 001h must sign. Date Spouse's occupati			If the	IRS sent you an Identity
for your records.	3	Mchelle Obera 04-09-12 US FIRST	r Lady			ection PIN,
	Del-	t/Type preparer's name Preparer's signature		Check	-	r It here
Paid		CHAEL S. SOLHEIM.		self-employed	" "	LON
Preparer		1// 5//	4/9/12	ani-ambiokao		
	2.70			T		
use uniy	- HT	A'S NAME WINEBERG SOLHEIM HOWELL & SHAIN	, PC	Firm's EIN		
110002		180 N LASALLE ST, STE 2200		Phone no.		Minute Control of the
11-07-11	Firm	o's address ▶ CHICAGO, IL 60601				

_{Earn} 2210

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

See separate instructions.

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

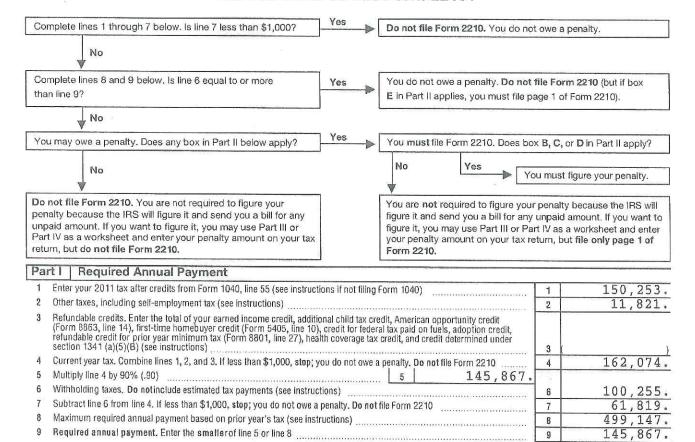
OMB No. 1545-0140

Name(s) shown on tax return

Identifying number

BARACK H. & MICHELLE L. OBAMA

Do You Have To File Form 2210?



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.

- X 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 Eapplies (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.

- 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.
- X 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 Al and file Form 2210.
- 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.
- You filled or are filling a joint return for either 2010 or 2011, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 22 10, but you are not required to figure your penalty (unless box B, C, or D applies).

145,867.

9

			Payment Du	e Dates	
Section A - Figure Your Underpayment	6 A. F	(a) 4/15/11	(b) 6/15/11	(c) 9/15/11	(d) 1/15/12
18 Required installments. If box C in Part II applies, enter					
the amounts from Schedule AI, line 25. Otherwise, enter			ow the last time		8
25% (.25) of line 9, Form 2210, in each column	18	17,748.	16,164.	72,034.	39,921
19 Estimated tax paid and tax withheld. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 16 for all payment periods, stop here; you do not owe a penalty. Do not file Form 2210 unless you checked a box in Part II.	19	43,398.	28,064.	90,064.	25,063
Complete lines 20 through 26 of one column before going to line 20 of the next column.					
20 Enter the amount, if any, from line 26 in the previous		20 10 10 10 10 10 10 10 10 10 10 10 10 10			
column	20		25,650.	37,550.	55,580
21 Add lines 19 and 20	21		53,714.	127,614.	80,643
Add the amounts on lines 24 and 25 in the previous column	22				
23 Subtract line 22 from line 21. If zero or less, enter -0 For column (a) only, enter the amount from line 19	23	43,398.	53,714.	127,614.	80,643
24 If line 23 is zero, subtract line 21 from line 22. Otherwise, enter -0-	24		0.	0.	
25 Underpayment. If line 18 is equal to or more than line					
23, subtract line 23 from line 18. Then go to line 20 of					
the next column. Otherwise, go to line 26	25				
26 Overpayment, If line 23 is more than line 18, subtract line	-				
18 from line 23. Then go to line 20 of the next column	26	25,650.	37,550.	55,580.	
Section B - Figure the Penalty (Use the Works)	neet fo	r Form 2210, Part IV, Se	ction B - Figure the Pe	nalty in the instructi	ons.)
27 Penalty. Enter the total penalty from line 14 of the Workshe					**************************************
this amount on Form 1040, line 77; Form 1040A, line 46; Fo					
26. Do not file Form 2210 unless you checked a box in Pa	rt II				0

Form 2210 (2011)

_	hedule Al - Annualized Income Installment Met	hod		γ		4.11
	ates and trusts, do not use the period ending dates shown to the		(a)	(b)	(c)	(d)
	nt. Instead, use the following: 2/28/11, 4/30/11, 7/31/11, and	. Y	1/1/11 - 3/31/11	1/1/11 - 5/31/11	1/1/11 - 8/31/11	1/1/11 - 12/31/11
	30/11. art I Annualized Income Installments			J		
_		7	1			
1	Enter your adjusted gross income for each period (see instructions). (Estates and trusts, enter your taxable income without your				-	
	exemption for each period)	1	141,100.	232,570.	520,373.	700 674
n	Annualization amounts. (Estates and trusts, see instructions)	2	4	2.4	1.5	789,674
3	a to the participant of the part	3	564,400.	558,168.	780,560.	789,674
	Annualized income. Multiply line 1 by line 2 If you itemize, enter itemized deductions for the period shown in	3	304,400.	JJ0,100.	700,300.	109,014
×	each column. All others enter -0-, and skip to line 7. Exception:					
	Estates and trusts, skip to line 9 and enter amount from line 3	4	69,625.	116,041.	185,666.	278,498
5	. W. 75	5	1	2.4	1.5	
8	FA W-1 V- 4 L V- =	6	278,500.	278,498.	278,499.	270 400
7	In each column, enter the full amount of your standard deduction	-0	270,300.	470,430.	410,499.	278,498
1	from Form 1040, line 40, or Form 1040A, line 24. (Form 1040NR					
	or 1040NR-EZ filers, enter -0 Exception: Indian students and				" 0	
	business apprentices, see instructions)	7	11,600.	11,600.	11,600.	11 600
Ω	Enter the larger of line 6 or line 7	- 8	278,500.	278,498.	278,499.	11,600 278,498
9	Enter the larger of line 6 or line 7 Subtract line 8 from line 3	0	285,900.	279,670.	502,061.	511,176
	(1114) 111111 11111 11111 11111 11111 11111 1111	a	203,900.	213,070.	302,001.	211,1/0
0	In each column, multiply \$3,700 by the total number of exemptions					
	claimed. (Estates, trusts, and Form 1040NR or 1040NR-EZ filers,	40	1/ 000	14 000	14 000	14 000
4	see instructions)	10	14,800.	14,800.	14,800.	14,800
	Subtract line 10 from line 9. If zero or less, enter -0-	12	271,100.	264,870.	487,261.	496,376
	Figure your tax on the amount on line 11 (see instructions)	12	66,918.	64,862.	140,413.	143,603
3	Self-employment tax from line 34	13	F 210	2 0 4 17	0 004	11 001
	(complete Part II below)		5,310.	3,847.	9,894.	11,821
4	Enter other taxes for each payment period (see Instructions)	14	12,491.	12,491.	12,491.	12,491
	Total tax. Add lines 12, 13, and 14	15	84,719.	81,200.	162,798.	167,915
6	For each period, enter the same type of credits as allowed on Form					
	2210, Part I, lines 1 and 3 (see instructions)	16	5,841.	5,841.	5,841.	5,841
	Subtract line 16 from line 15. If zero or less, enter -0-	17	78,878.	75,359.	156,957.	162,074
	Applicable percentage	18	22.5%	45%	67.5%	- 90%
9	Multiply line 17 by line 18	19	17,748.	33,912.	105,946.	145,867
	Complete lines 20-25 of one column before going			ia a		
	to line 20 of the next column.			70 40 50 50 50		
	Enter the total of the amounts in all previous columns of line 25	20		17,748.	33,912.	105,946
	Subtract line 20 from line 19. If zero or less, enter -0-	21	17,748.	16,164.	72,034.	39,921
	Enter 25% (.25) of line 9 on page 1 of Form 2210 in each column \dots	22	36,466.	36,467.	36,467.	36,467
23	Subtract line 25 of the previous column from line 24 of that		BI SEE	8 256 (BUTA BU	22702	
	column	23	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18,718.	39,021.	3,454
4	Add lines 22 and 23	24	36,466.	55,185.	75,488.	39,921
25	Enter the smaller of line 21 or line 24 here and on Form 2210,		788 807 107 10 07	V ser er etwer	-12 Web 9	
-	Part IV, line 18	25	17,748.	16,164.	72,034.	39,921
_	art II Annualized Self-Employment Tax (Form 10	40 ar			111.1	
	Net earnings from self-employment for the period (see instructions)	26	45,772.	55,269.	227,448.	407,604
7	Prorated social security tax limit	27	\$26,700	\$44,500	\$71,200	\$106,800
8	Enter actual wages for the period subject to social security tax or		The second of th			
	the 4.2% portion of the 5.65% railroad retirement (tier 1) tax.					
	Exception: If you filed Form 4137 or Form 8919, see instructions	28	26,700.	44,500.	71,200.	106,800
9	Subtract line 28 from line 27. If zero or less, enter -0-	29	0.	0.	0.	
0	Annualization amounts	30	0.416	0.2496	0.156	0.104
1	Multiply line 30 by the smaller of line 26 or line 29	31	0.	0.	0.	
	Annualization amounts	32	0.116	0.0696	0.0435	0.029
13	Multiply line 26 by line 32	33	5,310.	3,847.	9,894.	11,821
2 A	Add lines 31 and 33. Enter here and on line 13 above	34	5,310.	3,847.	9,894.	11,821

SCHEDULE A (Form 1040)

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

Attach to Form 1040.

Itemized Deductions

See Instructions for Schedule A (Form 1040).

2011 Attachment Sequence No. 07

BARACK H. & MICHELLE L. OBAMA Medical Caution. Do not include expenses reimbursed or paid by others. and Medical and dental expenses (see instructions) Dental Expenses 3 Multiply line 2 by 7.5% (.075) Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-Taxes You State and local (check only one box): Paid SEE STATEMENT 2 31,941 X Income taxes, or 5 General sales taxes 6 Real estate taxes (see instructions) 26,863 6 7 Personal property taxes 8 Other taxes. List type and amount 🕨 ______ 58,804. 9 Add lines 5 through 8 47,564 Interest Home mortgage interest and points reported to you on Form 1098 You Paid 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 Note. 11 Your mortgage Points not reported to you on Form 1098. See instructions for special rules 12 interest Mortgage insurance premiums (see instructions) deduction may 13 be limited (see 14 Investment interest. Attach Form 4952 if required. (See instructions.) instructions). 47,564. 15 Add lines 10 through 14. 15 Gifts to STMT 3 172,130. Gifts by cash or check. If you made any gift of \$250 or more, see instructions Charity Other than by cash or check. If any gift of \$250 or more, see instructions. If you made a You must attach Form 8283 if over \$500 gift and got a Carryover from prior year benefit for it. Add lines 16 through 18 see instructions. 19 19 172,130. Casualty and Theft Losses Casualty or theft loss(es). Attach Form 4684. (See instructions.) Job Expenses 21 Unreimbursed employee expenses - job travel, union dues, job education, etc. and Certain Attach Form 2106 or 2106-EZ if required. (See instructions.) Miscellaneous Deductions 22 Tax preparation fees 22 Other expenses - investment, safe deposit box, etc. List type and amount Add lines 21 through 23 24 Multiply line 25 by 2% (.02) Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-27 Other Other · from list in instructions. List type and amount ▶ Miscellaneous Deductions Total Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, Itemized 278,498. Deductions If you elect to itemize deductions even though they are less than your standard deduction,

SCHEDULE B

(Form 1040A or 1040)

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

Interest and Ordinary Dividends

Attach to Form 1040A or 1040.

See instructions.

OMB No. 1545-0074

2011

Attachment

Your social security number

BARACK H.	1	EXAMPLE L. OBAMA List name of payer. If any interest is from a seller-financed mortgage and the buyer used the		l Ar	nount	
Interest	5.00	property as a personal residence, see instructions and list this interest first. Also, show that		F		
		buyer's social security number and address ▶				
		NORTHERN TRUST SECURITIES US GOVT INTEREST		1	6,6	40.
		JP MORGAN				71.
		BOND PREMIUM AMORTIZATION			5,5	With the American Street
Note. If you received a Form		NORTHERN TRUST SECURITIES US GOVT INTEREST PAID			-4	71.
1099-INT,						
Form 1099-OID, or substitute			1			
statement from a brokerage firm,						-
list the firm's				-		
name as the payer and enter				<u> </u>		
the total interest				-		
shown on that form.						
					,	
	2	Add the amounts on line 1	2		10,6	94.
	3	The state of the s				
	а	Attach Form 8815 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a	3		10,6	0.4
9	-	te. If line 4 is over \$1,500, you must complete Part III.	4			74.
Part II	NAME OF TAXABLE PARTY.	List name of payer	+	A	mount	
Ordinary	.155	NORTHERN TRUST SECURITIES				3.
Dividends						
Name If you						
Note, If you received a Form		The state of the s		-		
1099-DIV or substitute				-		
statement from				-		
a brokerage firm, list the firm's			5			
name as the payer and enter						
the ordinary						
dividends shown on that form.						
				T VOLUME		
	323					
	6	The state of the s	6			3.
Part III		ite. If line 6 is over \$1,500, you must complete Part III. u must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had				1
Foreign		o most complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividences; (b) had count; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	a fore	eign	Yes	No
Accounts		a At any time during 2011, did you have a financial interest in or signature authority over a financial	accour	nt /such		-
and Trusts		as a bank account, securities account, or brokerage account) located in a foreign country? See in:				X
Trusts		If "Yes," are you required to file Form TD F 90-22.1 to report that financial interest or signature auti	ority?	See		
		Form TD F 90-22.1 and its instructions for filling requirements and exceptions to those requirement	s		TX.	5 M
	ķ	If you are required to file Form TD F 90-22.1, enter the name of the foreign country where the finan	cial ac	count		
	323	is located				
127501 11-02-11	8	During 2011, did you receive a distribution from, or were you the grantor of, or transferor to, a fore	ign tru	st?		72

SCHEDULE C (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

For information on Schedule C and its instructions, go to www.irs.gov/schedulec

Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1085.

OMB No. 1545-0074

Name o	f proprietor		in and the state of the state o	and the second		Social securi	y number (SSN)
DAD	ACK H. OBAMA						
A	Principal business or profession, includin	a product or samina feed instruc	tione\			P Enter code	from instructions
1000	HOR	a biogner of setalog (see marino	tions)			B Elles Code	▶ 711510
C	Business name. If no separate business n	ame, leave blank				DEmployer	D number (EIN), (see instr.)
un Tiller	ACK H. OBAMA	arro, roavo blarita			¥	-	
Ε	Business address (including suite or room	n no.) ▶					
	City, town or post office, state, and ZIP co	ode	N			No.	
F	Accounting method: (1) X Cash						
G	Did you "materially participate" in the oper		11? If "No," see instructions	for lim	it on losses		X Yes No
Н	If you started or acquired this business d		***************************		*************		
1	Did you make any payments in 2011 that	would require you to file Form(s) 1099? (see instructions)	****			Yes X No
J	If "Yes," dld you or will you file all required	l Forms 1099?					Yes No
No.	t I Income	C (0.11 L 0.			0	1 1	
1 a b	Merchant card and third party payments.	For 2011, enter -U-		1a	0	4	
C	Gross receipts or sales not entered on lin Income reported to you on Form W-2 if the	e Ta (see instructions)	hat favor was absoluted	1b		-	
U				10			
d	Caution. See instr. before completing this	oh ta		10			
2	Total gross receipts. Add lines 1a through	III IG		******		1d 2	
3	Returns and allowances plus any other ac Subtract line 2 from line 1d	njustinents (see instructions)					
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	pasoline or fuel tax credit or refu	and (see instructions) SE	F S	TATEMENT 4	6	487,928.
7	Gross income, Add lines 5 and 6					7	487,928.
Pai	t II Expenses	Enter expenses	for business use	of vo	ur home only o	and the second second	
8	Advertising	8		The state of the s		7	628.
9	Car and truck expenses		N/5		ng plans		
	(see instructions)	9	20 Rent or lease (se				
10	Commissions and fees	10 45,931.			d equipment	20a	
11	Contract labor (see instructions)	11			**********************		
12	Depletion	12			θ		
13	Depreciation and section 179				n Part III)		
	expense deduction (not included in	2	23 Taxes and license	es	,,,.,	23	
	Part III) (see instructions)	13	24 Travel, meals, an				
14	Employee benefit programs (other	been a			**************************	24a	
	than on line 19)	14	b Deductible meals				
15	Insurance (other than health)	15			uctions)		
16	Interest:		25 Utilities		************************	25	
a b	Mortgage (paid to banks, etc.)	16a			nt credits)		
1000	Other	16b	27 a Other expenses (* **************	. 27a	
17	Legal and professional services Total expenses before expenses for bus		D Reserved for fut	ure use		. 27b	46 550
29	Tentative profit or (loss). Subtract line 28						46,559. 441,369.
30	Expenses for business use of your home		urt such avnances alsewher	ο		30	441,303.
31	Net profit or (loss). Subtract line 30 from		it spell expellaca elacivilisi			, 30	
• 1	 If a profit, enter on both Form 1040, Ii 		L) and on Schedule SE lin	o 2)		
	If you entered an amount on line 1c, see			0 4.		31	441,369.
	• If a loss, you must go to line 32.					01	,JUJ.
32	If you have a loss, check the box that des	scribes your investment in this a	ctivity (see instructions).		ر ۲		
	• If you checked 32a, enter the loss on b			n Sche	dule SE, line 2.		
	If you entered an amount on line 1c, see					32a	All investment is at risk.
	 If you checked 32b, you must attach F 				*/	32b	Some investment is not at risk,
LHA	For Paperwork Reduction Act Notice, se	e separate instructions.				Schedu	le C (Form 1040) 2011

SCHEDULE D (Form 1040)

Capital Gains and Losses

Attach to Form 1040 or Form 1040NR. See Instructions for Schedule D (Form 1040). ▶ Use Form 8949 to list your transactions for lines 1, 2, 3, 8, 9, and 10.

OMB No. 1545-0074 Attachment Sequence No. 12 Your social security number

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

	RACK H. & MICHELLE L. OBAM		10		www.commission.com	Parker Marie Company
Com This	plete Form 8949 before completing line 1, 2, or 3. form may be easier to complete if you round off	(e) Sales price from Form(s) 8949, line 2,	(f) Cost or other basis from Form(s) 8949,	(g) Adjustments gain or loss from Form(s) 8949,		(h) Gain or (loss) Combine columns (e),
cents	s to whole dollars.	column (e)	line 2, column (f)	line 2, column (g)		(f), and (g)
1	Short-term totals from all Forms 8949 with box A checked in Part I		(**************************************			
2	Short-term totals from all Forms 8949 with box B checked in Part I	199,870.	(199,494.)			376.
3	Short-term totals from all Forms 8949 with box C checked in Part I		(2,768,000 ,)			0.
4	Short-term gain from Form 6252 and short-term ga		***************************************		4	
5	Net short-term gain or (loss) from partnerships, S from Schedule(s) K-1	corporations, estates, a	and trusts		5	The state of the s
6	Short-term capital loss carryover. Enter the amount	nt, if any, from line 8 of	your Capital Loss			*
7	Carryover Worksheet in the instructions Net short-term capital gain or (loss). Combine li capital gains or losses, go to Part II below. Otherw	ines 1 through 6 in colu	mn (h). If you have any lo	ng-term	7	376.
Pa	rt II Long-Term Capital Gains and Los	· · · · · · · · · · · · · · · · · · ·			1-1-1	3708
Comp	plete Form 8949 before completing line 8, 9, or 10.	(e) Sales price from	(f) Cost or other basis	(g) Adjustments		(h) Gain or (loss)
	form may be easier to complete if you round off s to whole dollars.	Form(s) 8949, line 4, column (e)	from Form(s) 8949, line 4, column (f)	gain or loss from Form(s) 8949, line 4, column (g		Combine columns (e), (f), and (g)
8	Long-term totals from all Forms 8949 with box A checked in Part II		(ulia vivie		And the second s
9	Long-term totals from all Forms 8949 with box B checked in Part II	Sec. 1				- management of the second
10	Long-term totals from all Forms 8949 with box C checked in Part II			0.00		***************************************
11	Gain from Form 4797, Part I; long-term gain from	Forms 2439 and 6252:	and long-term gain or flos	(9:	Г	
	from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S of	corporations, estates, a	nd trusts from Schedule(s) K-1	12	
13	Capital gain distributions	****************************			13	
14	Long-term capital loss carryover. Enter the amour Worksheet in the instructions	nt, if any, from line 13 o	f your Capital Loss Carr	yover	14	119,527,
15	Net long-term capital gain or (loss). Combine li	nes 8 through 14 in col	umn (h). Then go to	********************	15	<119.527.

Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44

(or in the instructions for Form 1040NR, line 42).

X No. Complete the rest of Form 1040 or Form 1040NR.

Schedule D (Form 1040) 2011

8949

Department of the Treasury Internal Revenue Service (98

Sales and Other Dispositions of Capital Assets

See Instructions for Schedule D (Form 1040).

► For more information about Form 8949, see www.irs.gov/form8949

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

OMB No. 1545-0074

2011

Attachment Sequence No. 12A

Name(s) shown on return

BARACK H. & MICHELLE L. OBAMA

Your social security number

Part I Short-Term Capital Ga	ains and	Losses - Asse	ts Held One Yea	ar or Less		
Note: You must check one of the boxes	below. Co	mplete a separate F	orm 8949, page 1, fo	or each box that is c	hecked.	
* Caution. Do not complete column (b)						ule D (Form 1040)).
Columns (b) and (g) do not apply for me						· · · · · · · · · · · · · · · · · · ·
(A) Short-term transactions reporte			m transactions repo		(C) Short-term tran	sactions for which
Form 1099-B with basis reported t			basis not reported to		you cannot check	
(a)	(b)	, (c)	(d)	(e)	(f)	(g)
Description of property	Code, if	Date acquired	Date sold	Sales price	Cost or	Adjustments to
(Example: 100 sh. XYZ Co.)	any, for column (g)*	(Mo., day, yr.)	(Mo., day, yr.)		other basis	gain or loss, if any*
200000 US TREASURY						
BILL		12/16/10	06/07/11	199,870.	199,494.	
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		TUTO O BILLIO STORES				

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No.			<u> </u>			
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	TO THE WORLD					
Waterwick, T. C.						<u> </u>
97-77-100-100-100-100-100-100-100-100-100						
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	 		0.00	1		
					N	-
						-
S-9-17 - Tray Stray Colonia	1		-	<u> </u>		
	†					_
2 Totals. Add the amounts in column	is (a) and (f	Also combine the			h	1
amounts in column (a). Enter here a			^5 III	2		

(if box A above is checked), line 2 (if box B above is checked), or

line 3 (if box C above is checked) ...

8949

Department of the Treasury Internal Revenue Service (99 Sales and Other Dispositions of Capital Assets

See Instructions for Schedule D (Form 1040).

► For more information about Form 8949, see www.irs.gov/form8949

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

OMB No. 1545-0074

Attachment Sequence No. 12A

Name(s) shown on return

Your social security number

				MICHELLE			3	
Part I	Sh	ort-	-Te	rm Capital Ga	ins :	and Losses	- Assets Held One Year or Less	- William - Commerce -

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

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

	(A) Short-term transactions repo		(B) Short-ter	m transactions repo	rted on Form X	(C) Short-term tran	sactions for which
	Form 1099-B with basis reporte	d to the IRS	1099-B but	basis not reported to	the IRS	you cannot check	box A or B
	(a)	(b)	(c)	(d)	(e)	(f)	(g)
	Description of property	Code, if	Date acquired	Date sold	Sales price	Cost or	Adjustments to
1	(Example: 100 sh. XYZ Co.)	any, for column (g)*	(Mo., day, yr.)	(Mo., day, yr.)		other basis	gain or loss, if any*
1	US TREASURY					1	
	REDEEMED		12/16/10	12/15/11	800,000.	800,000.	
	US TREASURY						
	REDEEMED		04/08/10	04/07/11	1000000.	1000000.	
	US TREASURY						
	REDEEMED		08/02/10	01/27/11	968,000.	968,000.	
-			30,02,20	02,21,21	300,000	500,000.	
	The sale of the sa						
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Section 1		- AU-3 -					
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-							<u> </u>
1	The state of the s			***************************************			-
2	Totals. Add the amounts in colu	mna (a) and 4	Alaa aambin ti				
-	amounts in column (g). Enter her						
	(if box A above is checked), line			2 1			-
	line 3 (if box C above is checked	יי עופים אטטיוון אי	ove is checked), or		2768000.	2768000.	
	TIME O (II DOX C ADDVE IS CHECKED	J			1 4/000000	1 4/000000	1

SCHEDULE E

(Form 1040)

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

Supplemental Income and Loss

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

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

See separate instructions.

OMB No. 1545-0074

Attachment Sequence No. 13

Your social security number

TO A TO A CYTE	T W	•	BAT MITTIE T TO Y	000000
BARALK	Н.	Or.	MICHELLE L	- UHAMA

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

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

X No Yes

No

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

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

1 Physical address of each property-street, city, state, ZIP	Type-from below	list :	estate p	For each rental real estate property listed, report the number of			Fair Rental Days	Personal Use Days	QJV
A	6		days rer	ted at f	air rental	Α			
В			value ar	d days	air rental with ee	В			
С			instruct	ons.	ee	C			
Type of Property:									-
1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land	2 17	7 Se	lf-Rental						
2 Multi-Family Residence 4 Commercial 6 Royalti	ies 8	3 Oth	ner (descrit	e)					
Income:					Prop	erti	es		
			A			В		С	
3a Merchant card and third party payments. For 2011, enter -0-	3a			0.					
b Payments not reported to you on line 3a			6.9	8.					wee
4 Total not including amounts on line 3a that are not income (see instructions)				8.					
Expenses:		-				-			
	5								
5 Advertising 6 Auto and travel (see instructions)	,			-					
7. Closeing and maintenance	7			-					
7 Cleaning and maintenance	. 8	-							
8 Commissions						-			
9 Insurance	. 9								
10 Legal and other professional fees	10								
11 Management fees	11								
12 Mortgage interest paid to banks, etc. (see instructions)									
13 Other interest		***							
14 Repairs	. 14								
15 Supplies	15								
16 Taxes	16								
17 Utilities	. 17								
18 Depreciation expense or depletion	18								
19 Other (list)	19								
20 Total expenses. Add lines 5 through 19	20	27410011							
21 Subtract line 20 from line 4. If result is a (loss), see instructions to find out if you									
must file Form 6198			6	98.					
22 Deductible rental real estate loss after limitation, if any, on Form 8582							***		
(see instructions)	22			y) 1		
23 a Total of all amounts reported on line 3a for all rental properties				23a	-			War at Page	
b Total of all amounts reported on line 3a for all royalty properties			*******	23b					
A STANDARD CONTRACTOR				23c		-			
d Total of all amounts reported on line 4 for all rental properties d Total of all amounts reported on line 4 for all royalty properties				23d			698.		
e Total of all amounts reported on line 12 for all properties				23e			030.		
f Total of all amounts reported on line 18 for all properties	*************		3313333133	231					
a Total of all amounts reported on line 10 for all properties				-					
g Total of all amounts reported on line 20 for all properties 24 Income. Add positive amounts shown on line 21. Do not include any losses				23g			1 04		0.0
25 Legace Add roughly legacy from the O1 and rental real extent legacy from the O0						•••••	. 24		598.
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22.	. chier total l	usses	nere				. 25		
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25.						40			
on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or F								17.	- ^ ^
amount in the total on line 41 on page 2							. 26	(598.

<u>Schedule SE (</u>	(Form 1040) 2011		Attachment Sequence No	17	Page 2
Vame of perso	on with self-employment income (as shown on Form 1040)		al security number of		
	C. 8 2		on with self-employme	nt	
	H. OBAMA	inco	ne		
	- Long Schedule SE				
	elf-Employment Tax				
Note. If your o church emplo	only income subject to self-employment tax is church employee inco yee income.	me, see instr	uctions. Also see instru	ctions for	the definition of
A If you as more of	re a minister, member of a religious order, or Christian Science practit other net earnings from self-employment, check here and continue v	ioner and you vith Part I	filed Form 4361, but yo	ou had \$4	400 or
1a Net farm	n profit or (loss) from Schedule F, line 34, and farm partnerships, Sch- code A. Note. Skip lines 1a and 1b if you use the farm optional meth	edule K-1 (For	m 1065),	1a	
	eceived social security retirement or disability benefits, enter the amo n payments included on Schedule F, line 4b, or listed on Schedule K-			1b	
	fit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule		The second contract of		
(other th	han farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Minist	ers and mem	bers of religious		
	see instructions for types of income to report on this line. See instruc-		127),		
Note. S	kip this line if you use the nonfarm optional method (see instructions)	SEE ST	ATEMENT 8	2	441,369.
	ne lines 1a, 1b, and 2			3	441,369.
4a If line 3	is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter	amount from	l line 3	4a	407,604.
	line 4a is less than \$400 due to Conservation Reserve Program payn				
	lect one or both of the optional methods, enter the total of lines 15 ar			4b	
c Combin	ne lines 4a and 4b. If less than \$400, stop; you do not owe self-emplo	vment tax. Ex	ception.		
	han \$400 and you had church employee income, enter -0- and conti	20	95%	4c	407,604.
	our church employee income from Form W-2. See instructions	1 1			
	nition of church employee income	5a		8 =	
	/ line 5a by 92.35% (.9235). If less than \$100, enter -0-			5b	
	es 4c and 5b			6	407,604.
	um amount of combined wages and self-employment earnings subjec				
	% portion of the 5.65% railroad retirement (tier 1) tax for 2011			7	106,800.00
	ocial security wages and tips (total of boxes 3 and 7 on Form(s)		*****************************		100,000.00
	nd railroad retirement (tier 1) compensation. If \$106,800 or more, skip	1 1			
	o through 10, and go to line 11		106,800.	700	
b Unrepo	orted tips subject to social security tax (from Form 4137, line 10)	8b	100,000.	Sec.	
	subject to social security tax (from Form 8919, line 10)			77.7	
d Add line 9 Subtrac	es 8a, 8b, and 8c			8d	
	ct line 8d from line 7, If zero or less, enter -0- here and on line 10 and			9	
10 Multiply	y the smaller of line 6 or line 9 by 10.4% (.104)	************		10	11,821.
11 Multiply	y line 6 by 2.9% (.029)			11	11,821.
	nployment tax. Add lines 10 and 11. Enter here and on Form 1040, I			12	
	tion for employer-equivalent portion of self-employment tax. Add 6% (.596) of line 10.	the two follov	ving amounts.		
	e-half of line 11.				
		1 1	5,911.		
	he result here and on Form 1040, line 27, or Form 1040NR, line 27 Optional Methods To Figure Net Earnings (see instructio	13	5,311.	0.38	The state of the s
					10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
	al Method. You may use this method only if (a) your gross farm incol arm profits ² were less than \$4.851.	me' was not	nore than \$6,720, or		
14 Maximi	um income for optional methods			14	4,480.00
		ro) or \$4,480	. Also include		
	nount on line 4b above tional Method. You may use this method, only if (a) your net nonfarm		L H 04.054 L	15	
also less thar east \$400 in	n 72.189% of your gross nonfarm income; and (b) you had net earnin 2 of the prior 3 years.	gs from self-e	mployment of at		7)
	u may use this method no more than five times.				
	ct line 15 from line 14			16	
	he smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less that				
	Also include this amount on line 4b above	- Cab C !!- 1	od. C-L O E7 "	17	1000
amount you v	line 9, and Sch. K-1 (Form 1065), box 14, code B. line 34, and Sch. K-1 (Form 1065), box 14, code A - minus the would have entered on line 1b had you not used the optional	n Scn. C , line 3 Sch. K-1 (Forn n Sch. C , line 7	81; Sch. C-EZ, line 3; Sch. I n 1065-B), box 9, code J1. '; Sch. C-EZ, line 1d; Sch. I n 1065-B), box 9, code J2	<-1 (Form <-1 (Form	1065), box 14, code A;
method.	and	Sch. K-1 (Forn	1065-B), box 9, code J2.		

1116

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

OMB No. 1545-0121

Name

Identifying number as shown on page 1 of your tax return

≥ 8

5,841.

Form 1116 (2011)

	RACK H. & MICHELLE L. OBAMA			i				
Use	a separate Form 1116 for each category of income listed belo ounts in U.S. dollars except where specified in Part II below.	w. See Categories	of Income in th	a instructions. Ch	eck only one bo	x on eac	h Form	l116. Report all
		(f)\			W . W . W			
a b	Passive category income c Section 901 X General category income d Certain inco		AL DAN	e Lump-	sum distribution	S		
U	X General category income d Certain inco	me re-sourced by t	reaty					
f R	esident of (name of country) UNITED STATE	is	-			200/24		
	te: If you paid taxes to only one foreign country or U.S.		column A in Pa	art I and line A i	n Part II. If you	naid ta	res to-	avo the a a v
fore	eign country or U.S. possession, use a separate column	and line for each	country or p	ossession.	in art in in you	puota	ACS TOM	ore than one
	art I Taxable Income or Loss From Sources Out				ed Above)			
		7		try or U.S. Pos				Total
		A		В	С		(Add	cols. A, B, and C.)
g	Enter the name of the foreign country or U.S.	OTHER						
	possession	COUNTRIE	S					
1a	Gross income from sources within country shown above	+ 0						
	and of the type checked above:	Control of	Lan .	8 6				
	And the second s			fis a un				
		269,7	10.				1a	269,710.
b	Check if line 1a is compensation for personal services as					2		
	an employee, your total compensation from all sources is	1 2 ,		a table	, F			
	\$250,000 or more, and you used an alternative basis to	Marie A.	*	v. "		ii e		
	determine its source (see instructions)							
De	ductions and losses (Caution: See instructions):	W 1	Last St.	323				
2	Expenses definitely related to the income on line 1a (attach statement) SEE STATEMENT 9	46,5	59.	20				
3	Pro rata share of other deductions not definitely related:			1				
a		58,8	04.	***************************************				
b								
C		58,8						
d		269,7						
е	**************************************	894,5						
Í	Divide line 3d by line 3e	.301						
9		17,7	30.					
4	Pro rata share of interest expense:		2 1	Since of				
а	5 page .	1.4 3	41					
l-	of the instructions)	14,3	410					
5	Other Interest expense Losses from foreign sources							
6	Add lines 2, 3q, 4a, 4b, and 5	78,6	30					70 620
7	Subtract line 6 from line 1a. Enter the result here and on line					▶	7	78,630. 191,080.
P	art II Foreign Taxes Paid or Accrued	10, page 2	***************************************		***************************************		[[]	T3T,000.
	Credit is claimed	Foreig	n taxes paid	or accrued				
	for taxes (you must In foreign currency				In U.S. dolla	rs		*****
2	check one)	1			in oto, dona)th av	
Country	(h) X Paid Taxes withheld at source on:	(n) Other foreign	Taxes	withheld at sour	rce on:		Other eign	(s) Total foreign taxes paid or
ဝိ	(I) Accrued	taxes paid or				taxes	paid or	accrued (add cols.
	(j) Date paid (K) Dividends (I) Rents and (m) Interest	accrued	(0) Dividends	(p) Rents and royalties	(q) Interest	acc	rued	(o) through (r))
A				5,841.				5,841.
В								
C								
8	Add lines A through C, column (s). Enter the total here and	d on line 9, page 2					≥ 8	5,841.

LHA For Paperwork Reduction Act Notice, see instructions.

29 Reduction of credit for international boycott operations

30 Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 47;
Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a

Form 1116 (2011)

5,841.

29

30

Form **6251**

Department of the Treasury Internal Revenue Service (99)

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

Alternative Minimum Tax - Individuals

OMB No. 1545-0074
2011

Attach to Form 1040 or Form 1040NR.

Attachment Sequence No. 32 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 511,176. amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.) 2 Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or loss, enter -0-2 3 Taxes from Schedule A (Form 1040), line 9 58,804. 3 4 Enter the home mortgage interest adjustment, if any, from line 5 of the worksheet in the instructions for this line 4 5 Miscellaneous deductions from Schedule A (Form 1040), line 27 5 6 Skip this line. It is reserved for future use 6 7 Tax refund from Form 1040, line 10 or line 21 7 8 Investment interest expense (difference between regular tax and AMT) 8 9 Depletion (difference between regular tax and AMT) 10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount 11 Alternative tax net operating loss deduction 11 12 Interest from specified private activity bonds exempt from the regular tax 12 13 Qualified small business stock (7% of gain excluded under section 1202) 13 14 Exercise of incentive stock options (excess of AMT income over regular tax income) 14 15 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 15 16 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 16 17 Disposition of property (difference between AMT and regular tax gain or loss) 17 18 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 18 19 Passive activities (difference between AMT and regular tax income or loss) 19 20 Loss limitations (difference between AMT and regular tax income or loss) 20 21 Circulation costs (difference between regular tax and AMT) 21 22 Long-term contracts (difference between AMT and regular tax income) 22 23 Mining costs (difference between regular tax and AMT) 23 24 Research and experimental costs (difference between regular tax and AMT) 24 25 Income from certain installment sales before January 1, 1987 25 26 Intangible drilling costs preference 26 27 Other adjustments, including income-based related adjustments 27 28 Alternative minimum taxable income. Combine lines 1 through 27, (If married filing separately and line 28 is more than \$223,900, see instructions.) 569,980. 28 Part II Alternative Minimum Tax (AMT) 29 Exemption. (If you were under age 24 at the end of 2011, see instructions.) IF your filing status is ... AND line 28 is not over THEN enter on line 29 Single or head of household \$112,500 \$48,450 Married filing jointly or qualifying widow(er)...... 150,000 74,450 0. 29 Married filing separately 75,000 37,225 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 30 569,980. 31 • If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends

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

on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured

34 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47).

If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J

for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 54 here.

All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing

32 Alternative minimum tax foreign tax credit (see instructions)

35 AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45

156,094.

5,841.

150,253.

137,762.

31

32

33

34

35

separately) from the result.

33 Tentative minimum tax. Subtract line 32 from line 31

Part III T	ax Compi	utation U	sing l	Maximum	Capital	Gains	Rates
------------	----------	-----------	--------	---------	---------	-------	-------

9 6	Tax computation computation computation of the comp	92 store 4		W196 27	27 10 102	
	Complete Part III only if you are required to do so by line 31 or by the Fore			et in th	e instructions.	
	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, e					
	line 3 of the worksheet in the instructions for this line		*******************************	36		
	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax			.5.		
	Worksheet in the instructions for Form 1040, line 44, or the amount from			= 2000		
	line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D			-J*41		
	(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	100000		*1		
	amount to enter	37				
	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		200		
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			95.18		
	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					
40	Enter the smaller of line 36 or line 39			40		
41	Subtract line 40 from line 36			41		
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line		Maria Caraca de			
	Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filir	•	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT			
73000	the result			42		
43	Enter:	1 1				
	\$69,000 if married filing jointly or qualifying widow(er),					
	\$34,500 if single or married filing separately, or	43		10.0		
	• \$46,250 if head of household.					
	Enter the amount from line 7 of the Qualified Dividends and Capital Gain					
	Tax Worksheet in the instructions for Form 1040, line 44, or the amount from					
	line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D					
	(Form 1040), whichever applies (as figured for the regular tax). If you did not					
	complete either worksheet for the regular tax, enter -0-	44	····			
45	Subtract line 44 from line 43. If zero or less, enter -0-	45		- 1		
46	Enter the smaller of line 36 or line 37	46				
47	Enter the smaller of line 45 or line 46	47	MACHINE TO THE CONTROL OF THE CONTRO	4		
48	Subtract line 47 from line 46	48		1		
	4.004					
49	Multiply line 48 by 15% (.15)			49		
	If line 38 is zero or blank, skip lines 50 and 51 and go to line 52. Otherwise, go	to line	÷ 50.	100		
		9 3	J 50.			
50	Subtract line 46 from line 40	50				
51	Multiply line 50 by 25% (.25)			51		
52	Add lines 42, 49, and 51	********		52		
	URSS INSTRUCTOR CONTINUES IN MACROSPORATE IN THE STATE OF					
53	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply li					
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married fili					
	the result	*******		53		
WEEDOWN	THE IS NOT THE WORLD STORE STORE WAS INVESTIGATION.					
54	Enter the smaller of line 52 or line 53 here and on line 31. If you are filing Form 25					
***********	this amount on line 31. Instead, enter it on line 4 of the worksheet in the instruction	ns for l	ine 31	54		
					E- COE4 (0044)	

Department of the Treasury Internal Revenue Service (99)

ALTERNATIVE MINIMUM TAX

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

OMB No. 1545-0121

Attachment Sequence No. 19

Name

Identifying number as shown on page 1 of your tax return

▶ 8

5,841.

Form 1116 (2011)

BA	ARACK H.	& MIC	HELLE L	. OBAMA	<u> </u>						
Use	a separate Form	1116 for each	category of inc	ome listed belo	w. See Categories	of Income in	he instructions.	Check only one b	ox on eac	h Form	1116. Report all
amo	ounts in U.S. dolla	irs except whe	ere specified in F	Part II below.							
a		tegory incom		Section 90			e Lum	p-sum distributio	ins .		
b	X General ca	tegory income	e d	Certain inco	ome re-sourced by t	reaty					
_											
	lesident of (name			D STATE							
No	te: If you paid ta	xes to only o	one foreign co	untry or U.S.	possession, use o	column A in I	Part I and line A	A in Part II. If yo	u paid ta	ixes to	more than one
·			The second secon	Appropriate to the control of the co	n and line for each	The state of the s	ALCOHOLOGY CONTRACTOR				
1	arti Taxab	ie income c	r Loss From	Sources Out	side the United S						
					A	oreign Cou	ntry or U.S. P			7.6	Total
n	Franciska a sa	6 Al 6 -			OTHER		В	C		(Ad	d cols. A, B, and C.)
g			reign country		COUNTRIE	e l					
is	Gross income f				COONTICLE		3 %-				
10	and of the type			nown above					24		
	3,11		-			4 5		0			
	-	-			269,7	10.			14	1a	269,710.
b	Check if line 1a	is compensa	tion for persona	services as				1		10	203,7200
			pensation from								
	\$250,000 or m	ore, and you i	used an alternati	ive basis to		2168 (1)	¥ 12.	े की			
	determine its s	ource (see ins	tructions)	>		4 m		= 0.1			
De	ductions and I	osses (_{Caut}	ion: See instru	uctions):							
2	Expenses defin	nitely related	to the income o	n line 1a							
-	(aftach stateme	ent)			46,5	59.					
3			ctions n ot defin			6.			4,14		
E	 Certain itemize 	d deductions	or standard ded	uction							
b			tement)								
C				****************							
C	d Gross foreign s	source income	······		269,7	10.]	
6			es		0.04					4	
f			***************			514					
4		of interest over	20000	•••••		1.40				- 1	
0.000	Home mortgag			14		e e ye e		20			
	The state of the s	Annual III annual A	e worksneer on	The state of the s	14,3	11					
t	Other interest	ynense				210				1	
5	Losses from fo	reion sources	·			_				-	
6	Add lines 2, 3n	4a 4h and	5	*	60,9	0.0	The second secon			6	60,900.
-	Subtract line 6 f	rom line 1a. E	nter the result h	ere and on line						7	208,810.
P	art II Fore	ign Taxes	Paid or A	ccrued							
-	Credit is claimed	1			Foreig	ın taxes pai	d or accrued	W-1907	Mart		We assume the second se
- 1	for taxes (you must		In fore	ign currency		T		In U.S. dol	lars		
Ź	check one)				(n)Other		**************************************		1	Other	(s) Total foreign
Country	(h) X Paid	Taxes v	vithheld at sourc	e on:	foreign	Tax	es withheld at so	ource on:		eign	taxes paid or
ပိ	(i) Accrued				taxes paid or					paid or	accrued (add cols.
	(j) Date pard or accrued	(k) Dividends	(I) Rents and royalties	(m) Interest	accrued	(0) Dividend	Toyames		acc	rued	(o) through (r))
A		<u> </u>					5,841				5,841.
ВС						ļ					
	A d d 11 c # -1		() [<u> </u>	<u> </u>					
8	Aud lines A thr	ough G, colur	nn (s). Enter the	total here an	d on line 9, page 2			A MICHAEL CONTRACT TO THE SECOND PROPERTY OF			8 5,841.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2011) BARACK H. & MICHELLE L. OBAMA Page 2 Part III Figuring the Credit 9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I 5,841. 9 10 Carryback or carryover (attach detailed computation) 10 11 Add lines 9 and 10 11 5,841. 12 Reduction in foreign taxes 12 13 Taxes reclassified under high tax kickout 13 14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit 5,841. 15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I 208,810. 15 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 filling more than one Form 1116, you must complete line 20.) 208,810. 17 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 569,980. Caution; If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions. 19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .366346 20 Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 156,094. 20 Caution: If you are completing line 20 for separate category e (lump-sum distributions), see instructions. 21 Multiply line 20 by line 19 (maximum amount of credit) 57,184. 21 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 5,841. 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 Gredit for taxes on certain income re-sourced by treaty 25 26 Credit for taxes on lump-sum distributions

27 Add lines 23 through 26

28 Enter the smaller of line 20 or line 27

29 Reduction of credit for international boycott operations

30 Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 47;

Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a

Form 1116 (2011)

5,841.

5,841.

27

28

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TOTAL		A STATE OF THE STA
70741	Million Control	
7074		
TOTAL	U.S.	FOREIGN GENERAL
394,821.	394,821.	GENERAL
376.	376.	
487,928.	487,928.	
698.	698.	
	12	
	$\frac{-269,710}{}$	269,710.
894,520.	624,810.	269,710.
3,376.	3,376.	
891,144.	621,434.	269,710.
	The read of the second	
46,559.	46,559.	
ia ia		
5,911.	5,911.	
	180	
49,000.	49,000.	
	-46,559.	46,559
101 470	E4 011	46 550
101,470.	34,911.	46,559.
789,674.	566,523.	223,151.
47,564.	33,223.	14,341.
E0 004	77 200	
58,804.	41,074.	17,730
	216 100	20 004
278,498.	246,427.	32,071.
	487,928. 698. 894,520. 3,376. 891,144. 46,559. 5,911. 49,000.	10,694. 376. 376. 487,928. 698. 698. -269,710. 894,520. 624,810. 3,376. 3,376. 891,144. 621,434. 46,559. 46,559. 5,911. 49,000. 49,000. 49,000. -46,559. -46,559. 101,470. 54,911. 789,674. 566,523. 172,130. 172,130. 47,564. 33,223.

Allocation of Itemized Deductions

NAME

BARACK H. & MICHELLE L. OBAMA

	Total Itemízed	Itemized Deductions After Sec. 68		Form 1116	
	Deductions	Reduction	Specifically U.S.	Specifically Foreign	Ratable
Taxes	58,804.				58,804.
Interest - Not Including Investment Interest	47,564.		33,223.	14,341.	
Contributions Miscellaneous Deductions Subject to 2%	172,130.		172,130.		_
Other Miscellaneous Deductions - Not Including Gambling Losses					
Foreign Adjustment					
Total Itemized Deductions Subject to Sec. 68	278,498.				
Add Itemized Deductions Not Subject to Sec. 68;					
Medical/Dental					
Investment Interest					⁵⁵ .
Casualty Losses		1			
Gambling Losses				***************************************	
Foreign Adjustment		2			-
Total Itemized Deductions	278,498.				
Total Allowed on Schedule A			205,353.	14,341.	58,804.

Form 1116

Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

limit remaining

BARACK H. & MICHELLE L. OBAMA GENERAL LIMITATION INCOME Foreign Income Category 2010 Regular 2006 2007 2008 2009 2011 1. Foreign tax paid/accrued 5,841. 2. FTC carryback to 2011 for amended returns 3. Reduction allocated to excluded income 4. Foreign tax available 5,841. 5. Maximum credit allowable 53,680. 6. Unused foreign tax (+) or excess of limit (-) ... -176100. -47,839. 7. Foreign tax carryback 8. Foreign tax carryforward 9. Less treaty adjustment 10. Foreign tax or excess -176100. limit remaining -47,839. Total foreign taxes from all available years to be carried to next year 2002 2001 2003 2004 2005 1. Foreign tax paid/accrued 2. FTC carryback to 2011 for amended returns 3. Reduction allocated to excluded income 4. Foreign tax available 5. Maximum credit allowable 6. Unused foreign tax (+) or excess of limit (-) 7. Foreign tax carryback 8. Foreign tax carryforward 9. Less treaty adjustment 10. Foreign tax or excess

Form 1116

Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

limit remaining

BAI	RACK H. & MICH	ELLE L. OF	BAMA				
	Foreign Income Category				GENERAL LI	MITATION I	NCOME
AMT		2006	2007	2008	2009	2010	2011
1.	Foreign tax paid/accrued				er ev e e		5,841.
2.	FTC carryback to 2011 for amended returns						
3,	Reduction allocated to excluded income						
4.	Foreign tax available						5,841.
5.	Maximum credit allowable		400	100			57,184.
6.	Unused foreign tax (+)						чения, ком
	or excess of limit (-)			CONTROL		-156529.	-51,343.
7.	Foreign tax carryback			71			•
8.	Foreign tax carryforward						
9.	Less treaty adjustment		* * * * * * * * * * * * * * * * * * * *				
10.	Foreign tax or excess limit remaining					-156529.	-51,343.
	Total foreign taxes from all a	vailable years to be car	ried to next year				
	3	,		*****************************			
			2001	2002	2003	2004	2005
1.	Foreign tax paid/accrued			4		-	
2.	FTC carryback to 2011	C00101010101010101010101010101010101010					
	for amended returns					Kar o	
3.	Reduction allocated to	2 2 200 2				E 8	
	excluded income	******************					-
4.							9 9 9
5,	Maximum credit allowable	20.4	8 J. F. S. S. F.		5		
6.	Unused foreign tax (+)					***	
	or excess of limit (-)						
7.	Foreign tax carryback	LANCE A LINEAGONNA E CANE E ANNO A MAGNESIA					
8.	Foreign tax carryforward			0			
9.	For example, and the second of						4
10.	Foreign tax or excess	ſ					

BARACK H. & MICHELLE L. OBAMA

FORM 1040	WAGES RECEI	VED AND TAX	ES WITHH	ELD	STATE	MENT	1
T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHEL	CITY SDI D TAX W/H	FICA I	MEDICA TAX	
T DFAS-CIVPAY DIRECTORATE	394,821.	100,255.	18,941	•	4,486.	5,72	25.
TOTALS	394,821.	100,255.	18,941	•	4,486.	5,72	25.
			C. C				
SCHEDULE A	STATE ANI	LOCAL INCO	ME TAXES		STATE	MENT	2
DESCRIPTION					AM	TUUC	
DFAS-CIVPAY DIRECTORA ILLINOIS 1ST QTR ESTI ILLINOIS 2ND QTR ESTI ILLINOIS 3RD QTR ESTI	MATE PAYMENTS	3				18,9 2,0 1,0 10,0	00.
TOTAL TO SCHEDULE A,	LINE 5					31,9	41.
SCHEDULE A	CASI	H CONTRIBUT	IONS		STATE	MENT	3
DESCRIPTION				AMOUNT % LIMIT		OUNT LIMIT	
AMERICAN RED CROSS AMERICAN RED CROSS NO AMERICAN RED CROSS VE BOOK WORM ANGELS BOYS & GIRLS CLUB BOYS & GIRLS CLUB OF BREAD FOR THE CITY CALVARY WOMEN'S SHELT CARE CATHOLIC RELIEF SERVI CENTRAL ILLINOIS FOOD CITIZENS UNITED FOR B CLINTON BUSH HAITI FO FISHER HOUSE FOUNDATI GEORGE WASHINGTON HOS	GREATER WASHING CES BANK ESEARCH IN EIDUNDATION	IPSHIRE VALI	ÆY	2,000 1,000 500 5,000 1,000 2,000 1,000 1,000 1,000 1,000			

BARACK H. & MICHELLE L. OB	AMA				
ILLINOIS HEAD START ASSOCIATION ILLINOIS READING COUNCIL JUVENILE DIABETES RESEARCH FOR LIFE PIECES TO MASTERPIECES MIDTOWN EDUCATIONAL FOUNDATION MIRIAM'S KITCHEN MOSAIC YOUTH THEATRE OF DETREMUJERES LATINAS EN ACCION NATIONAL AIDS FUND NATIONAL COALITION FOR HOMEL NATIONAL CONGRESS OF BLACK WENTIONAL OVARIAN CANCER COAL NORTH STREET WOMEN'S SHELTER ROCHELLE LEE FUND ST. JOHN'S CHURCH ST. LEO'S RESIDENCE FOR VETE SIDWELL FRIENDS SCHOOL THE CHRISTOPHER HOUSE THE HARMONY PROJECT TUSCALOOSA STORM RECOVERY FU UNITED NEGRO COLLEGE FUND UNIVERSITY OF HAWAII FOUNDAT	OUNDATION ON OIT ESS VETERANS OMEN ITION RANS		1,000. 1,000. 1,000. 1,000. 500. 500. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000. 1,000.		2
SUBTOTALS	à		172,130.		
TOTAL TO SCHEDULE A, LINE 16		1	<u> </u>	172,13	30.
SCHEDULE C	OTHER	INCOME		STATEMENT	4
DESCRIPTION				TRUOMA	
DYSTEL & GODERICH RANDOM HOUSE				269,73 218,23	
TOTAL TO SCHEDULE C, LINE 6			,	487,92	28.
FORM 8949 B SHORT	-TERM CAPITA	L GAINS AND I	JOSSES	STATEMENT	5
DESCRIPTION OF PROPERTY	SALES PRICE	COST OR OTHER BASIS	ADJUSTMENT TO GAIN OR LOSS		3
200000 US TREASURY BILL	199,870.	199,494.	**************************************	3'	76.
TOTAL TO SCH D, LINE 2	199,870.	199,494.		3'	76.
		Total Control of the		William Willia	

BARACK H. & MICHELLE L. OBAMA

FORM 8949 C SHO	RT-TERM CAPITA	L GAINS AND I	JOSSES	STATEMENT	6
DESCRIPTION OF PROPERTY	SALES PRICE	COST OR OTHER BASIS	ADJUSTMENTS TO GAIN OR LOSS	GAIN OR LOSS	
US TREASURY REDEEMED US TREASURY REDEEMED US TREASURY REDEEMED	800,000. 1,000,000. 968,000.	800,000. 1,000,000. 968,000.			0.
TOTAL TO SCH D, LINE 3	2,768,000.	2,768,000.		· · · · · · · · · · · · · · · · · · ·	0.

SCHEDULE D	CAPITAL LOS	SS CARRYOVER	STATEMENT	7
2. ENTER THE LOSS 3. COMBINE LINES	FROM SCHEDULE D, LINE 1 AND 2. IF ZERO OR LE	NE 41	NT. 3,00	0. 76.
6. ENTER THE GAIN LINE 15 7. ADD LINES 4 AN 8. SHORT-TERM CAN	I, IF ANY, FROM SCHEDUI ID 6		* •	
10. ENTER THE GAIN LINE 7	N, IF ANY, FROM SCHEDUT		76.	27.
12. ADD LINES 10 A 13. LONG-TERM CAP	AND 11		3,3	
SCHEDULE SE	NON-FAR	M INCOME	STATEMENT	8
DESCRIPTION			AMOUNT	
AUTHOR			441,3	69.
TOTAL TO SCHEDULE	SE, LINE 2		441,3	69.
FORM 1116 EX	KPENSES DIRECTLY ALLOC.	ABLE TO FOREIGN INCOME	STATEMENT	9
DESCRIPTION	1	COUNTRY	TRUOMA	
OTHER EXPENSES DI	RECTLY ALLOCATED	OTHER COUNTRIES	46,5	59.
TOTAL TO FORM 111	5, PART I, LINE 2		46,5	59.

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

OMB No. 1545-0020

(For gifts made during calendar year 2011)

Department of the Treasury

		ont of the levenue S					See Inst	ructions.					20		
			s first name ar	nd middle initial			2 Donor's last nam OBAMA	16		3	Dono	r's so	ocial security r	ıumbeı	
			353	reet, and apartme		E, N	W		3,00		Legal		dence (domicile DIS	1)	
	6	City, st	ate, and ZIP co			•			***************************************				(see instruction)		
¢	8	If the d	lonor died duri	ing the year, che	ck here	ап	d enter date of deat	h					ı	Yes	No
at 10	9	If you	extended the ti	ime to file this Fo	rm 709, chec	k here			William Willia						
E							nt each person only			2		200			
oju	11a	Have y	ou (the donor)) previously filed	a Form 709 (or 709-A	i) for any other year	? It "No," skip	line 11b	***********				X	
ā	b	If the a	nswer to line	11a is "Yes," has	your address	changed	since you last filed	Form 709 (o	r 709-A)?	**********			**********		X
ne	12	Gifts b	y husband or	wife to third part	ties. Do you d	consent t	o have the gifts (inc	luding genera	ation-skipping t	ansfers) made	by yō	u and	l by your		
8		spouse	a to third partie	es during the cal	endar year co	nsidered	as made one-half b	y each of you	ı? (See înstr.) (I	f the answer is	"Yes,"	the fo	ollowing		
4-		inform	ation must be	furnished and yo	our spouse m	ust sign	the consent shown I	below. If the	answer is "No.	skip lines 13	-18 an	d go	to Sch. A.)	X	
Part 1 - General Information	13			spouse MICI						14 SSN					
LL.	15	Were y	ou married to	one another dur	ing the entire	calendar	year? (see instruct	ons)						X	
	16		"No," check w		marr		divorced or		d/deceased, an						
	17	Will a	gift tax return f	lor this year be fi	led by your s	pouse? (lf "Yes," mail both re	turns in the s	ame envelope.)	1007130171111				X	
	18	coneid	ahem se haral	ong-half by each	of us Mo ar	a hoth au	ition-skipping transf vare of the joint and Descrip	coveral liabil	ity for tax create	d by the execu	ition of	this			
	Co	nsenting	g spouse's sig	nature 📂 🚶 🧸	over .		- Butter		·		With the same of t	-	D1-01	12	
		1 8	nter the amou	int from Schedul	e A, Part 4, Ili	ne 11	***************************************					1			0.
		2 6	nter the amou	int from Schedul	e B, line 3							2			0.
		3 1	otal taxable gi	itts. Add lines 1 a	ind 2		***************************************			**************		3	**************************************		0.
		4]	ax computed	on amount on iir	ie 3 (see Tab	le for C	omputing Gift Tax	in instruction	ns)			4			0 *
							omputing Gift Tax					5			0.
				act line 5 from lir			***************					6	9 57 2	0 0	0.
		7 1	viaximum uniti	led credit (see in:	structions)		***************************************					7	1,73	U,0	00.
	5	8 8	inter the unitie	o creon against	tax allowable	for all pri	ior periods (from Sc	h. B, line 1, c	ol. G)		***	8	1,73	0 0	0.0
	Tax Computation	9 E	Salance, Suotr	actime 8 from in	ne /. Do not e	inter less	than zero				-	9	1,/3	0,0	UU.
	D C						exemption for gifts n					40			
	8	11 [Jeiore January Jaiozop Public	1, 1977 (See III)	SUUCUONS)		s than zero		******	**********		10	1,73	0 0	00
	X	12 1	Initial codit	Enter the emailer	of line 6 or li	enter les	is trian zero	**********	*************			11	1,/3	0,0	0.
	2-1	40 (Juliacu Gregori, i Pradit for forci	enter the smaner	Ol ning O Ol ii				************			-			V +
	12	13 (Court crodity. A	gir giri taxes (see	: 1115 D (ICHORIS)						***	13			
	Part	15	Ralanco Subte	act line 14 from	ling 6 Da not	antar las	s than zero	**************		****************		15		100	0.
Г		16 0	Seneration-ski	nning transfer to	ves (from Sci	hodule C	Part 3, col. H, Total		******************		-	16			U
1		17	Cotal tay Add I	lines 15 and 16	ACO (HOIH GC)	neume o,		1	************			17			0.
ρJ		18 (3ift and genera	ation-skinning tra	inster tayes n	renaid w	ith extension of time	to file		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	18			
order here.		19	I line 18 is less	s than line 17 er	ster halance (due (eas	instructions)	10 1110	**************	************		19		-	0.
der		20	1 line 18 is are	ater than line 17	enter amou	nt to he r	efunded	31/143/111/11/11		*******	··· -	20			
Ö			Under pen	allies of perjury, I de	gare that I have	e examine	d this return, including a	iny accompany	ing schedules and	statements, and	to the b		my knowledge a	nd belief	, It is
Je.	Si	gn	true, correc	girand complete. D	dciaration of pre	parer (othe	er than donor) is based	on all information	on of which prepar	er has any knowl	edga.		he IRS discuss th		with
E		ere		Jul	hul		mag.		1	4-11-12		Instru	eparer shown bal ctions)7 X Y		No
ò			Sign	nature of donor	1			·		Date					1.0
Ö			Print/Type pres	wanner		Preparer	's signature		Date	Check	н	PTIN			
Attach check or mone	Pa	ld					110		1.	salf-employ	ed				
SCh	Pr	aparer	MICHAE	L S. SO	LHEIM,	CPA	111.15.4	<u></u>	4/9/12						
A	US	e Only	Firm's name				M HOWELL		IN, PC		Firm's	EIN D	>		
1			Firm's address	> 180 N	LASAL	LE S	T, STE 2	200			Phone				
L				CHICA	GO, IL	606	01								

Form 709 (2011) BARACK H. OBAMA

B Check here if you elect under section 528(c)(2)(B) to treat any transfers made this year to a qualified fultion program as made rates by over a 5-year period beginning this year. See instructions. Attach explanation.						
	o a qualifie	d fuition propram as m	aderatably over a 5-	/ear period beginning t	this year. See instruction	1s. Attach explanatio
art 1 - Gifts Subject Only to Gift Tax, Gifts less political organization, me	ns. (see ins	structions)				
A	· ·	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
1 MALIA A. OBAMA						
CHICAGO, IL						
de	o made gif	fs.			-	
1 MALIA A. OBAMA	-					
CHICAGO, IL						
unts					A	24,000.
Part 2 - Direct Skips, Giffs that are direct skips and are subject to both gift tax and generation-skipping transfer tax. You must list the gifts in chronological order	ransfer tax.	You must list the gifts	in chronological ord	er.		
## Dense's name and address ### Dense's name and address ###################################	C 2632(b) election out	Donor's adjusted basis of gift	E Date of giff	F Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
Gifts made by spouse - complete only if you are splitting gifts with your spouse and helshe also made gifts.	o made gif	is.				
			æ			
Total of Part 2. Add amounts from Part 2, column H				20		
Part 3 - Indirect Skips. Gifts to trusts that are currently subject to gift tax and may later be subject to generation-skipping transfer tax You must list these gifts in chronological order.	eration-skij	pping transfer tax You	must list these gifts	in chronological order.		
# Dones's name and address Item Pleatingship to donor (it arty) Number Description of girl It the girl was of securities, give CUSIP no.	C 2632 (c) election	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For spit gitts, enter 1/2 of column F	Net transfer (subtract col. G from col. F)
Gits made by spouse -complete _{only} if you are spitting gitts with your spouse and he/she also made gitts.	made giff	[5,				
of and an analysis of the state		Historia (1944)				
Total of Part 3. Add amounts from Part 3, column H					A	

60	FAM (Full to bud) cut of the family to the fees provided of gall gaudit, illegible, and could are fall of the functional)		× .		
 Description of git If the gift was of securities, give CUSIP no. If closely held entity, give EIN 	C Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G For spit, gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.					2.
SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.	12,000.	01/01/11	12,000.	*000'9	.000,3
2 NATASHA M. OBAMA	35				
- 1 - Maria de Manionino					
SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN,	12,000.	01/01/11	12,000.	6,000.	6,000.
			and the second s		2000

Part 1 - Gifts Subject Only to Gift Tax, Gifts less political organization, medical, and educational exclusions. (see instructions)	s. (see in	structions)				
Item • Donee's name and address • Retitionship to donor (if any) • Description of gift • If the gift was of securities, give CUSIP no.	ပ	D Donor's adjusted basis of gift	E Date of gift	F Value at date of gift	G Forspik gifts, enter 1/2 of column F	H Nettransfer (Subtract col. G from col. F)
Gits made by spouse -complete only If you are splitting gifts with your spouse and helshe also made gifts.	made gii	185.		***************************************		
DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.	0					
SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	6,000.
2 NATASHA M. OBAMA						
CHICAGO, IL DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.			AV.			
SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.	Vintaria.	12,000.	01/01/11	12,000.	6,000.	6,000.
		7.				
			2	POTOTO STATE PERSONNELLA ALLANA A		
		Medical and a second			5	

0.

0.

9

10

11

Part 4 - Taxable Gift Reconciliation 1 Total value of gifts of donor. Add totals from column H of Parts 1, 2, and 3 24,000. 2 Total annual exclusions for gifts listed on line 1 (see instructions) 24,000. 2 3 Total included amount of gifts. Subtract line 2 from line 1 3 Deductions (see instructions) 4 Gifts of interests to spouse for which a marital deduction will be claimed, based on item numbers of Schedule A 5 Exclusions attributable to gifts on line 4 6 Marital deduction, Subtract line 5 from line 4 7 Charitable deduction, based on Item nos. ______less exclusions ... _____7

11 Taxable gifts. Add lines 9 and 10. Enter here and on page 1, Part 2 - Tax Computation, line 1 Terminable Interest (QTIP) Marital Deduction. (See instructions for Schedule A, Part 4, line 4.)

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

8 Total deductions, Add lines 6 and 7 9 Subtract line 8 from line 3

10 Generation-skipping transfer taxes payable with this Form 709 (from Schedule C, Part 3, col. H, Total)

- a. The trust (or other property) is listed on Schedule A, and
- b. The value of the trust (or other property) is entered in whole or in part as a deduction on Schedule A, Part 4, line 4, then the donor shall be deemed to have made an election to have such trust (or other property) treated as qualified terminable interest property under section 2523(f).

If less than the entire value of the trust (or other property) that the donor has included in Parts 1 and 3 of Schedule A is entered as a deduction on line 4, the donor shall be considered to have made an election only as to a fraction of the trust (or other property). The numerator of this fraction is equal to the amount of the trust (or other property) deducted on Schedule A, Part 4, line 6. The denominator is equal to the total value of the trust (or other property) listed in Parts 1 and 3 of Schedule A,

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

12 Election Out of QTIP Treatment of Annuities

Check here if you elect under section 2523(f)(6) notto treat as qualified terminable interest property any joint and survivor annuities that are reported on Schedule A and would otherwise be treated as qualified terminable interest property under section 2523(f). See instructions, Enter the item numbers from Schedule A for the annuities for which you are making this election

SCHEDULE B | Gifts From Prior Periods

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

A Calendar year or calendar quarter (see instructions)		e iled	G Amount of unified credit against gift tax for periods after December 31, 1976	D Amount of specific exemption for prior periods ending before January 1, 1977	E Amount of taxable gifts
2008 2009	CINCINNATI, OH 45 CINCINNATI, OH 45	999 999 999 999			0. 0. 0.
1 Totals for prior	periods	1			0.
2 Amount, If any,	by which total specific exemption, line 1	, column D is more than \$3	0,000	2	
	f taxable gifts for prior periods. Add amo on page 1, Part 2 - Tax Computation, line		amount, if any, on line 2	3	0.

Form 709 (2011) BAR								Page 4
SCHEDULE C C								
Note. Inter vivos direct skips		y excluded by the GST ex	emption must still b	e fully reported (in	cluding value	and exempt	ions cla	nimed) on Schedule C.
Part 1 - Generation-Skippin A	gitalisters	R	1	C				D
Item No. (from Schedule A, Part 2, col. A)		rom Schedule A, art 2, col. H)	р	Nontaxable ortion of transfer				ansfer (subtract C from col. B)
Gifts made by spouse (for	aift splitting only)	The state of the s						
	3-77							The second secon

Part 2 - GST Exemption Re								
		tion 2652(a)(3) (special C						
Enter the item numbers from 1 Maximum allowable exe							i	5,000,000
i waxiii alibwable exe	imption (acc manac		, , , , , , , , , , , , , , , , , , ,					2,000,000
2 Total exemption used for	r periods before fili	ing this return					2	
3 Exemption available for	this return, Subtrac	ct line 2 from line 1		******************	**********		3	5,000,000.
4 Exemption claimed on t	his return from Par	t 3, column C total, below	<i>I</i>	enae regina erri en la regent.			.4	\$
5 Automatic allocation of	exemption to trans	fers reported on Schedul	e A, Part 3 (see insti	ructions)			5	
6 Exemption allocated to	ransfers not show	n on line 4 or 5, above. Y	ou must attach a "N	lotice of Allocation	."(see Instruc	tions)	6	
7 Add lines 4, 5, and 6	************************	1.00011331335133445537133444597 <u>9</u> 499					7	
8 Exemption available for	future transfers. Si	ubtract line 7 from line 3	r - 4.0 - 4 5 6 6 6 6 6 6 6				8	5,000,000
Part 3 - Tax Computation								
Schedule C, (from S	B transfer chedule C, 1, col. D)	GST Exemption Allocated	Divide col. C by col. B	E Inclusion Ratio (Subtract col. D from 1.000)	F Maximum Estate Tax Rate	Applicable (multiply by col.	col. E	H Generation-Skipping Transfer Tax (multiply col. B by col. G)
				-	35% (.35)			
			_	-	35% (.35) 35% (.35)			
					35% (.35)		-	
					35% (.35)			
					35% (.35)			
Gifts made by spouse (fo	gift splitting only)			i e	DEN (05)	1		
No.				 	35% (.35) 35% (.35)	<u> </u>		
					35% (.35)			
					35% (.35)	- K		
					35% (.35)	-mari		
WATER THE COURSE COURSE		XX MININA MINI	Total generation	n-skipping transte	35% (.35)	Le, un page	3	
Total exemption claimed. E on Part 2, line 4, above. M	nter here and ay not exceed		The reference in the State of the second	t 4, line 10; and on			٥,	
Part 2, line 3, above			Computation, Ilr	ne 16				

Computation, line 16

orm 709

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

OMB No. 1545-0020

(For gifts made during calendar year 2011)

2011

Department of the Treasury Internal Revenue Service See Instructions. 2 Donor's last name 3 Donor's social security number Donor's first name and middle initial MICHELLE L. **OBAMA** 4 Address (number, street, and apartment number) 5 Legal residence (domicile) ILLINOIS 1600 PENNSYLVANIA AVENUE, 6 City, state, and ZIP code 7 Citizenship (see instructions) UNITED STATES WASHINGTON, DC 20500 8 If the donor died during the year, check here and enter date of death Yes No 9 If you extended the time to file this Form 709, check here 10 Enter the total number of donees listed on Schedule A. Count each person only once, 11a Have you (the donor) previously filed a Form 709 (or 709-A) for any other year? If "No," skip line 11b X b If the answer to line 11a is "Yes," has your address changed since you last filed Form 709 (or 709-A)? 12 Gifts by husband or wife to third parties. Do you consent to have the gifts (including generation-skipping transfers) made by you and by your spouse to third parties during the calendar year considered as made one-half by each of you? (See instr.) (If the answer is "Yes," the following information must be furnished and your spouse must sign the consent shown below. If the answer is "No," skip lines 13-18 and go to Sch. A.) X 13 Name of consenting spouse BARACK H. OBAMA 15 Were you married to one another during the entire calendar year? (see instructions) X 16 If 15 is "No," check whether married divorced or widowed/deceased, and give date 17 Will a gift tax return for this year be filed by your spouse? (If "Yes," mail both returns in the same envelope.) 18 Consent of Spouse, I consent to have the gifts (and generation-skipping transfers) made by me and by my spouse to third parties during the calendar year considered as made one-half by each of us. We are truth aware of the joint and several liability for tax created by the execution of this consent. out Consenting spouse's algnature 📐 Date > 04-11-12 Enter the amount from Schedule A, Part 4, line 1T 1 Enter the amount from Schedule B, line 3 0. 2 0. Total taxable gifts. Add lines 1 and 2 3 Tax computed on amount on line 3 (see Table for Computing Gift Tax in instructions) 0. Tax computed on amount on line 2 (see Table for Computing Gift Tax in instructions) 0. Balance. Subtract line 5 from line 4 6 Maximum unified credit (see instructions) 730,800. 7 Enter the unified credit against tax allowable for all prior periods (from Sch. B, line 1, col. C) 8 Tax Computation Balance, Subtract line 8 from line 7, Do not enter less than zero 1,730,800. 9 Enter 20% (.20) of the amount allowed as a specific exemption for gifts made after September 8, 1976, and before January 1, 1977 (see instructions) Balance. Subtract line 10 from line 9, Do not enter less than zero 1,730,800. 11 11 Unified credit. Enter the smaller of line 6 or line 11 12 Credit for foreign gift taxes (see instructions) Part2-13 13 Total credits. Add lines 12 and 13 14 Balance. Subtract line 14 from line 6. Do not enter less than zero 15 15 0. Generation-skipping transfer taxes (from Schedule C, Part 3, col. H, Total) 0. Total tax, Add lines 15 and 16 17 money order here Gift and generation-skipping transfer taxes prepaid with extension of time to file 18 If line 18 is less than line 17, enter balance due (see instructions) 0. 19 If line 18 is greater than line 17, enter amount to be refunded 20

Under penalties of perjury, I declare that I have examined this return, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than donor) is based on all information of which preparer has any knowledge. May the IRS discuss this return with Sign Obona 04-09-12 Here OF Signature of donor Date Attach check Print/Type preparer's name îŧ Preparer's signature Pald self-employed Preparer MICHAEL S. SOLHEIM, CPA U 4/9/12 Use Only Firm's name WINEBERG SOLHEIM HOWELL & SHAIN, PC Firm's EIN

Firm's address > 180 N LASALLE ST, STE 2200

Phone no

OBAMA
) I
MICHELLE
Form 709 (2011)

CONTINUE OF THE PROPERTY OF TH						
	to a qualifie	d tuition program as ma	deratably over a 5-	year period beginning t	his year. See instruction	s. Attach explanatio
art 1 - Gifts Su	ons. (see in	structions)				
Hen Pearlement and address Relationship to donce (framy) numbler Pearlement and securities, give CUSIP no.	9	Donor's adjusted basis of gill	E Date of gift	F Value at date of gift	G For spili gifts, enter 1/2 of co lumn F	H Net transfer (subtract col. G from col. F)
1 MALIA A. OBAWA						
CHICAGO, IL						
Gifts made by spouse - complete only if you are splitting gifts with your spouse and he/she also made gifts. MAT.TA A ORAMA	to made gi	fts.				
CHICAGO						
55						24,000.
Part 2 - Direct Skips, Gifts that are direct skips and are subject to both gift tax and generation-skipping transfer tax. You must list the gifts in chronological order	transfer tax	. You must list the gifts i	n chronological ord	e e		
Item Relationship to donor (if any) Description of gift B the gift was of securities, give CUSIP no.	C 2632(b) election out	Donor's adjusted basis of gift	E Date of gift	F at Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
Gifts made by spouse - complete only if you are splitting gifts with your spouse and helshe also made gifts.	o made gi	fs,				
otal of Part 2. Add amounts from Part 2, column H		A COMMUNICATION OF THE PROPERTY OF THE PROPERT		***************************************	A	
Part 3 - Indirect Skips. Gifts to trusts that are currently subject to gift tax and may tater be subject to generation-skipping transfer tax You must list these gifts in chronological order.	neration-ski	pping transfer tax. You r	must list these gifts	in chron ological order.		
A B Dones's name and address Relationship to donor if any) Description of gift If the gift was of securities, give CUSIP no.	C 2632 (c.) election	D Donor's adjusted basis of giff	E Date of gift	F Value at date of gīft	6 For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
9						
Gifts made by spouse - complete only if you are spitting gifts with your spouse and helshe also made gifts.	o made gi	75.				
Ti.				54		
Total of Part 3. Add amounts from Part 3, column H			***************************************		A	

Form 709 (2011) MICHELLE L. OBAMA SCHEDULE A, PART I CONTINUATION SHEET

Part 1	Part 1 - Gifts Subject Only to Gift Tax. Gifts less political organization, medical, and educational exclusions, (see instructions)	ns. (see ir	nstructions)		1.		
A item number	Donee's name and address Relationship to donor (if any) Description of gift If the gift was of securities, give CUSIP no. It closely held entity, give EIN	೮	Donor's adjusted basis of gift	E Date of giff	F Value at date of gift	G For spile gifts, enter 1/2 of column F	H Naturanster (subtract col. G from col. F)
	DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.			e.			
	SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	.000,8	.000,9
7	NATASHA M. OBAWA						
	CHICAGO, IL DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.	7			g.	-	
	SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000.	01/01/11	12,000.	6,000.	.000,9
				2	and the second s		
			a				
					one manufacture of the second		
Total of	Total of column H			7		A	12,000.
1055/1 01-18-12				***************************************			Form 709 (2011)

FORM 709 (2011) MICHELLE L. OBAMA SCHEDULE A, PART I, GIFTS MADE BY SPOUSE CONTINUATION SHEET

Part I	SCHEDULE A, PARI I, GIRIS IMADE BY SPOUSE CONTINUATION SHEET Part 1- Gifts Subject Only to 6/ff Tax Gifts less political organization, medical, and educational exclusions. (see instructions)	JS. (See in	(structions)	WANTED PARTITION OF THE			
A Item number	Dones's name and address Relationship to donor (if any) Dones's name and address Doscription of gift was of securities, give CUSIP no.	S S	D Donor's adjusted basis of gift	E Date of gift	Value at date of gift	G For split gifts, enter 1/2 of column F	H Net transfer (subtract col. G from col. F)
á	If closely held en thy, give EIN	1					
Gatsm	Gitts made by spouse - complete only if you are splitting gifts with your spouse and helshe also made gifts.	табе д	iffs.				
	DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.		a		11	-	
	SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.		12,000,	01/01/11	12,000.	.000,9	6,000.
2	NATASHA M. OBAWA						
	CHICAGO, IL DAUGHTER DONOR ELECTED UNDER SECTION 529(C)(2)(B) OF THE CODE TO TREAT A 2007 GIFT AS HAVING BEEN MADE RATABLY OVER A 5-YEAR PERIOD BEGINNING IN 2007.	01400					
	SEE ELECTION MADE WITH TAXPAYER'S 2007 GIFT TAX RETURN.	· · · · · · · · · · · · · · · · · · ·	12,000.	01/01/11	12,000.	.000,9	.000,9
							8
					and the second second	411.00	
					707.00		

Total of	Total of column H					A 331133	12,000.
105572 01-18-12							Form 709 (2011)

Par	t 4 - Taxable Gift Reconciliation		*		
1	Total value of gifts of donor. Add totals from column H of Parts 1, 2, and 3			1	24,000.
2	Total annual exclusions for gifts listed on line 1 (see instructions)	diameter in the con-		2	24,000.
3	Total included amount of gifts. Subtract line 2 from line 1			3	0.
Dec	luctions (see instructions)				
4	Gifts of interests to spouse for which a marital deduction will be claimed,				
	based on item numbers of Schedule A	4	20 PW		
5	Exclusions attributable to gifts on line 4	5		=	
6	Marital deduction, Subtract line 5 from line 4	6			
7	Charitable deduction, based on item nos less exclusions	7			
8	Total deductions. Add lines 6 and 7		71177714471474474747444	8	
9	Subtract line 8 from line 3			9	0.
10	Generation-skipping transfer taxes payable with this Form 709 (from Schedule C, Part 3, col.	H, Total)		10	
11	Taxable gifts. Add lines 9 and 10. Enter here and on page 1, Part 2 - Tax Computation, line	1		11	0.

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

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

- a. The trust (or other property) is listed on Schedule A, and
- b. The value of the trust (or other property) is entered in whole or in part as a deduction on Schedule A, Part 4, line 4, then the donor shall be deemed to have made an election to have such trust (or other property) treated as qualified terminable interest property under section 2523(f).

If less than the entire value of the trust (or other property) that the donor has included in Parts 1 and 3 of Schedule A is entered as a deduction on line 4, the donor shall be considered to have made an election only as to a fraction of the trust (or other property). The numerator of this fraction is equal to the amount of the trust (or other property) deducted on Schedule A, Part 4, line 6. The denominator is equal to the total value of the trust (or other property) listed in Parts 1 and 3 of Schedule A.

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

12 Election Out of QTIP Treatment of Annuities

Check here if you elect under section 2523(f)(6) notto treat as qualified terminable interest property any joint and survivor annuities that are reported on Schedule A and would otherwise be treated as qualified terminable interest property under section 2523(f). See instructions, Enter the item numbers from Schedule A for the annuities for which you are making this election

SCHEDULE B | Gifts From Prior Periods

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

Calendar year or calendar quarter (see instructions)	B Internal Reven where prior retur	ue office n was filed		C Amount of unified credit against gift tax for periods after December 31, 1976	Amount of specific exemption for prio periods ending befo January 1, 1977		E Amount of taxable gifts
2008 2009	CINCINNATI, OH CINCINNATI, OH CINCINNATI, OH CINCINNATI, OH	45999 45999 45999 45999			u .	20	0. 0. 0.
					н		
Service distribution of the service							
	r periods		1				0.
2 Amount, if any	r periods , by which total specific exemption of taxable gifts for prior periods. Ac	ı, line 1, column D is m				2	0,

SCHEDULE C	Computation	of Generation-Ski	ipping Transf	er Tax				
		ely excluded by the GST ex			cluding value	and exemp	tions cla	imed) on Schedule C.
Part 1 - Generation-Skip								\rightarrow
A Item No. (from Schedule A, Part 2, col. A)	Value F	B (from Schedule A, Part 2, col. H)	р	C Nontaxable ortion of transfer				D ansfer (subtract C from col. B)
Gifts made by spouse	(for gift splitting only	Λ						
Part 2 - GST Exemption	Reconciliation (Sec	tion 2631) and Section 26	52(a)(3) Flection					
1		ction 2652(a)(3) (special C	1 / / /	nstructions)			I	
		the gifts for which you are i	. 220	10				
1 Maximum allowable	exemption (see instr	uctions)					1	5,000,000.
2 Total exemplion use	d for periods before t	filing this return	(14(17(0))11(1)14(1)4(1)4(1)14(1)	**************************************	*************		2	The two types of the control of the
3 Exemption available	for this return. Subtr	act line 2 from line 1	************	*****************			3	5,000,000.
4 Exemption claimed	on this return from Pa	art 3, column C total, below	<i>r</i>	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			4	
5 Automatic allocation	of exemption to tran	sfers reported on Schedul	e A, Part 3 (see insti	ructions)			5	****
6 Exemption allocated	to transfers not show	wn on line 4 or 5, above. Y	ou must attach a "N	lotice of Allocation	."(see instruc	tions)	6	And the state of t
7 Add lines 4, 5, and 6) _{v====}	eranderinde (szeketteressésésésésésésés			*************		7_	
		Subtract line 7 from line 3				*******	8	5,000,000.
Part 3 - Tax Computati				·				William Tollier Tollier
Schedule C, (fro	B Vet transfer m Schedule C, art 1, col. D)	C GST Exemption Allocated	Divide col. C by col. B	Inclusion Ratio (Subtract col. D from 1,000)	F Maximum Estate Tax Rate	G Applicabl (multiply by col	col. E	H Generation-Skipping Transfer Tax (multiply col. B by col. G)
					35% (.35)			
					35% (.35)			
	0	100		-	35% (.35)			
-					35% (.35)			
-		- Attention			35% (.35) 35% (.35)			
Gifts made by spouse	(for gift splitting only	Λ			2376 (.33).	<u> </u>		Minimum and a second
Parameter San Wallington					35% (.35)			
					35% (.35)			
					35% (.35)			
					35% (.35)			-
	1/	- I - Company of the		ļ	35% (.35)			
			Total assays	l n-skipping transfe	35% (.35)	rot on an-	n 2	
Total exemption claims on Part 2, line 4, above			The adjusted by the control of the con-	t 4, line 10; and on			u 0,	
Part 2, line 3, above	. Ividy Hot exceed		- 1 ² ×	18 16				

Illinois Department of Revenue

WebFile tax.illinois.gov lindividual Income Tax Return or for fiscal year ending

Step 1: Personal Information

Do not write above this line.

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

		C	Filing status (see instructions) Single or head of household X Married filing jointly Married filing s	494	100° x
		D	Single or head of household X Married filing jointly Married filing s Check if same-sex civil union return (see instructions)	separately	Widowed
	Step 2:	4	Feb. 1. 10. 40.40 LV - 07. LV - 04.00 LV - 04.		(Whole dollars only)
	Income	1	Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4.	4	789,674.00
	meome	2	Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b;		7 7 7 7 7 .00
			or U.S. 1040EZ.	2	.00
		3	Other additions, Attach Schedule M.	3	.00
		4	Total income. Add Lines 1 through 3.	4	789,674.00
9	Step 3:	5	Social Security benefits and certain retirement plan income		and the second s
V	Base		received if included in Line 1. Attach Page 1 of federal return, 5	.00	
	Income	6	Illinois Income Tax overpayment included in U.S. 1040, Line 10. 6	.00	
ere		7	Other subtractions, Attach Schedule M. 7 10, 6	523 .00	
S			Check if Line 7 includes any amount from Schedule 1299-C.		
DITT		8	Add Lines 5, 6, and 7. This is the total of your subtractions.	8	10,623.00
99 %		9	Illinois base income. Subtract Line 8 from Line 4.	9	779,051.00
Staple W-2 and 1099 forms here					
pue	Step 4:	10	a Number of exemptions from your federal return, 4 x \$2,000 a 8,0	00.000	
12	Exemptions		b If someone can claim you as a dependent, see instructions. X \$2,000 b	.00	
N e			C Check if 65 or older; You + Spouse = x \$1,000 C		
aple			d Check if legally blind: You + Spouse = x \$1,000 d	.00	
क			Exemption allowance. Add Lines a through d.	10	8,000.00
4	Step 5:	11	Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12.	11	771,051.00
ı	Net	12	Nonresidents and part-year residents;		
	Income		Check the box that applies to you during 2011 Nonresident Part-year resider	nt, and	
			write the Illinois base Income from Sch. NR. Attach Sch. NR. 12	.00	
	CA C.				
	Step 6:	13	Residents: Multiply Line 11 by 5% (.05),	40	30 EE3
	Ida	4 1	Nonresidents and part-year residents: Write the tax from Schedule NR.	13	38,553.00
			Recapture of investment tax credits. Attach Schedule 4255. Income tax, Add Lines 13 and 14, Cannot be less than zero.	14 15	.00. 38,553 _{.00}
A	**************************************		income tax. Add Lines 13 and 14, Cannot be less than zero.	15	
Staple your check	Step 7:	16	Income tax paid to another state while an Illinois resident.		
Ç	Tax After		Attach Schedule CR. 16	.00	
no,	Non-	17	Property tax and K-12 education expense credit amount from	3-11	
le 3	refundable		Schedule ICR. Attach Schedule ICR. 17	.00	
tap	Credits	18	Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 18	.00	
(1)		19	Add Lines 16, 17, and 18. This is the total of your credits.		
V			Cannot exceed the tax amount on Line 15,	19	.00.
		20	Tax after nonrefundable credits, Subtract Line 19 from Line 15.	20	38,553 00

	21	Tax after nonrefundable credits from Page 1, Line 20.	21	38,553.	00
Step 8: Other Taxes	22 23 24	Household employment tax. See instructions. 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. Total Tax. Add Lines 21, 22, and 23.	22	0 . 24 _	00 00 38,553.00
Step 9: Payments and Refundable Credit	25 26 27 28 29	Estimated payments from Forms IL-1040-ES and IL-505-I, including overpayment applied from 2010 return. Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T. Earned Income Credit from Schedule ICR. Attach Schedule ICR.	25 26 27 28	NOV ATION OF THE PROPERTY OF T	optworth:
Step 10: Result	30 31			. 30 <u> </u>	612,00
Step 11: Underpaymer of Estimated Tax Penalty and Donation	s 33	Late-payment penalty for underpayment of estimated tax. a Check if at least two-thirds of your federal gross income is from fit is to Check if you or your spouse are 65 or older and permanently living in a nursing home. c Check if your income was not received evenly during the year an annualized your income on Form IL-2210. Attach Form IL-2210. Voluntary charitable donations. Attach Schedule G. Total penalty and donations. Add Lines 32 and 33.	d you		.00
Step 12: Refund or Amount You Owe	36 37	Routing number Checkin Account number Subtract Line 36 from Line 35. This amount will be applied to your If you have an underpayment on Line 31, add Lines 31 and 34. Or	g or Sa		.00.
The particular and continues and the continues a		If you have an overpayment on Line 30 and this amount is less than subtract Line 30 from Line 34. This is the amount you owe.	Line 34,	39_	612 .00
Sign and Date	Your si	grature Daytime phone number Selland Proparer's phone number Pr	You	(Data
	Design Namo (Check, and complete below, if you want to allow another person to	discuss this	s return with the Illino Designer's Phone number	is Department of Revenue.
Form 1099-G Information		Next year (in January 2013), we will no longer automatically mail 10 from our website. Check the box if you still want us to mail you a p			you get this information
				nclosed, mall to: PARTMENT OF REVENUE OIL 62726-0001	
149002 12-22-11					
ID: 2BX IL-1040 page 2 (R-	12/11)	DR AP RR DC			

Illinois Department of Revenue

2011 Schedule M

Other Additions and Subtractions for Individuals

Attach to your Form IL-1040

IL. Attachment No. 15

Read this information first

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

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

Step 1: Provide the following information

BA	RACK H. & MICHELLE L. OBAMA			
You	r name as shown on Form IL-1040.	Your So	cial Security number.	
Ste	p 2: Figure your additions for Form IL-1040, Line 3			
Writ	e the amount of		(Whole dollars only)	
7	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.			.00
3	Lloyds plan of operations loss, if reported on your behalf on Form IL-1023-C and included in your adjusted gross income			.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
	Other income - Identify each item	_ 10 _		.00
11	Add Lines 1 through 10. Write the amount here and on Form IL-1040, Line 3.	11 _		.00
12	e the amount of Contributions made to the following college savings plans:			
а	"Bright Start" College Savings Pool	12a _		.00
	"College Illinois" Prepaid Tuition Program	12b _	- dan	.00
	"Bright Directions" College Savings Pool	12c _		.00
13	Distributive share of subtractions from a partnership, S corporation, trust, or estate. (Do not include any amounts contained in Lines 20 or 22 of this schedule.) Attach Illinois Schedule K-1-P or K-1-T identifying you as the partner, shareholder, or beneficiary and listing your			
41	Social Security number.	13 _		.00
15	Restoration of amounts held under claim of right under Internal Revenue Code, Section 1341	14_		.00
16	Contributions to a job training project	10 _		.00.
	Expenses related to federal credits or federally tax-exempt income Interest earned on investments through the Home Ownership Made Easy Program	17	oprince 1	.00
18				.00
	Attach Form IL-4562.	18		.00
Wri	te the following only if included in Form IL-1040, Lines 1, 2, or 3:			.00
	Military pay earned. Attach military W-2.	19		.00
	U.S. Treasury bonds, bills, notes, savings bonds, and U.S. agency interest from U.S. 1040A or 1040. Attach a copy of U.S. 1040A or 1040, Schedule B, if required federally. SEE STATEMENT 3		10,62	
21	August 1, 1969, valuation limitation amount from your Schedule F, Line 17. Attach Schedule F and			
	required federal forms.	21_		.00
22	Enterprise or river edge redevelopment zone and high impact business dividend subtraction amount			
00	from your Schedule 1299-C, Step 2, Line 10. Attach Schedule 1299-C.	22 _	10,62	00,
23	Add Lines 12a through 22 and write the amount here and on Page 2, Line 24.	23 _	10,62.	00. د

Ste	p 3: Continued		
24	Write the amount from Page 1, Line 23.	24	10,623.00
25	Recovery of items previously deducted on U.S. 1040, Schedule A (including refunds of any state and	4	10,023.00
~~	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	<u>00.</u> 00.
27	Payment of life insurance, endowment, or annuity benefits received	27 —	
28	Lloyds plan of operations income if reported on your behalf on Form IL-1023-C	28	00.
29	Income earned by certain trust accounts established under the Illinois Pre-Need Cemetery Sales Act	29	.00.
30	Education loan repayments made for primary care physicians who agree to		.00,
00		30	00
31	practice in designated shortage areas under the Family Practice Residency Act	31	.00.
	Reparations or other amounts received as a victim of persecution by Nazi Germany Interest on the following tax-exempt obligations of Illinois state and local government. Do not	31	.00.
UL			
	include interest you received indirectly through owning shares in a mutual fund.		
d	Illinois Housing Development Authority bonds and notes (except housing-related commercial	20-	
	facilities bonds and notes)	32a _	.00
b	Export Development Act of 1983 bonds	32b	.00.
С	Illinois Development Finance Authority bonds, notes, and other obligations (venture fund and		
0	infrastructure bonds only)	32c _	.00.
d	Quad Cities Regional Economic Development Authority bonds and notes (if declared to be	V200302100020	
	exempt from taxation by the Authority)	32d	.00
е	College Savings bonds	32e	.00
1	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.
ĵ	Illinois Development Finance Authority bonds issued under the Asbestos Abatement Finance Act	32j	.00.
k	Quad Cities Interstate Metropolitan Authority bonds	32k	.00.
1	Southwestern Illinois Development Authority bonds	321	.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.
0	Central Illinois Economic Development Authority bonds	320	.00.
р	Eastern Illinois Economic Development Authority bonds	300	.00.
q	Southeastern Illinois Economic Development Authority bonds	00-	.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.
	Upper Illinois River Valley Development Authority Act bonds	32v	.00.
	Interest on the following non-U.S. government bonds,		,ou
	Bonds issued by the government of Guam	33a	00
	Bonds issued by the government of duality	33b	.00.
			.00.
c d	Bonds issued by the government of the virgin Islands	33c _	.00.
	ENGY TO THE TOTAL WHITE TO THE TOTAL TO THE TOTAL TO THE THE THE THE TOTAL CONTROL OF THE TOTAL	33d _	.00.
e	Bonds issued by the government of the Northern Mariana Islands	33e _	.00.
	Mutual mortgage insurance fund bonds	33f _	.00,
C3-4	Amount of your child's interest from U.S. Treasury and U.S. agency obligations or	.0.4	.5
35	from sources in Line 20, 32 or 33 as reported on U.S. Form 8814	34 _	.00.
100000000000000000000000000000000000000	The state of the s	35 _	.00.
36		36	.00.
37	Distributions from "Bright Start," "College Illinois," and "Bright Directions" college savings plan if included		
00	in Line 1 because you claimed a federal American Opportunity or Lifetime Learning Credit	37 _	.00
38	Add Lines 24 through 37. Write the amount here and on Form IL-1040, Line 7.	38 _	10,623.00

IL-2210 Computation of Penalties for Individuals

IL Attachment No. 19

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

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

Your name as shown on Form IL-1040

Your Social Security number

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

Ste	p 2: Figure your require	ed installments	3		A This year	B Last year
1	Write the amount of your total income tax f	rom each tax return. See i	nstructions.	1	38,553.	51,568.
2	Write the amount of credits from each tax i	eturn. See instructions.		2		
3	Subtract Line 2 from Line 1.			3	38,553.	51,568.
4a	Write the total amount of this year's Illinois	withholding from your W-2	2 forms.	4a	18,941.	
4b	Write the total amount of any pass-through	entity payments made or	your behalf.	4b		
4c	Add Lines 4a and 4b and write the result h	ere,		4c	18,941.	
5	Subtract Line 4c from Line 3.			5	19,612.	
6	Multiply Column A, Line 3, by 90% (.9).			6	34,698.	
7	If Line 5 is \$500 or less or if you are not re	quired to make estimated	tax payments,			
	write "0," and go to Step 3. Otherwise, write	e the lesser of Column A,	Line 6,			
	or Column B, Line 3.			7	34,698.	
8	Divide the amount written on Line 7 by fou	r. This is the amount of ea	ch required			
	installment. (If you use the annualized inco	me installment method, se	ee instructions.)	8	8,675.	
		Quarter 1	Quarter 2		Quarter 3	Quarter 4
	*	15th day of 4th	15th day of 6th		15th day of 9th	15th day of 1st mo.
9a	Write the installment due date for each	month of tax year	month of tax year		month of tax year	after end of tax year
۵١	quarter. See instructions	04/15/11	06/15/1	1	09/15/11	01/17/12
9b	Write the required installment.		- 110		40 616	
	See instructions.	6,260.	6,119	*	13,646.	8,673.
10a	Write any credit carried forward from					
401	the prior year	1775	Skip this line for Quarter 2		Skip this line for Quarter 3.	Skip this line for Quarter 4.
10b	Write the amount of tax withheld	4,735.	4,735	0	4,735.	4,736.
10c	Write the amount of pass-through payments	4 725	4 855	_	4 505	
10d	Add Lines 10a through 10c in each column	4,735.	4,735	0	4,735.	4,736.
11	Subtract Line 10d from Line 9b. If the	1 505	1 204		0 011	2 025
12	amount is negative, use brackets.	1,525.	1,384	0	8,911.	3,937.
12	If the amount on Line 13 of the					
	previous quarter is negative, write					
	that amount as a positive here.		0		0	^
13	Otherwise, write "0."	Skip this line for Quarter 1.	0	0	0 .	0.
13	Subtract Line 12 from Line 11. If the	1,525.	1,384		8,911.	2 027
	amount is negative, use brackets.	1,343.	T, 304	*	0,311.	3,937.

Continue with Step 3 on Page 2 ->

Step 3	3: Figure yo	ur unpaid t	ax					
14 Write	the amount from Colu	umn A, Line 3.			×		14	38,553.
	the amount of housel		c from IL-1040, Line	22.			15	
	the amount of use ta:	and the second second					16	
7 Add L	ines 14 through 16. V	Write the total amour	nt here.				17	38,553.
carrie pass- that t	the total amount of a d forward from the pr through entity payme otal to the total of Lin- ract Line 18 from Line	ior year, your total es nts made on your be e 9b, Quarters 1 thro	stimated payments shalf, and your with	made this year, Fo sholding as shown o	orm 505-l paymen on your W-2 form:	ts, the		38,553.
o po	esitive, write that amour ero or negative, write	nt here. Write this amou			n C and continue to	Step 4.	19	0.
Step 4	4: Figure yo	ur late-pay	ment pen	alty	and the second s			
Use Penal Use Penal	Ity Worksheet 1 to figu Ity Worksheet 2 to figu ou must follow the ins	ure your late-paymen	at penalty for under at penalty for unpai	payment of estimat d tax.				
	e the amount and the Amount 2,000.	date of each payme Date paid 04/18/11	Amo	unt Date	e paid	,	Amount	Date paid
a b	1,000.	06/15/11	- 4	, , , , , , , , , , , , , , , , , , ,		i		
c	10,000.	09/15/11				L		
d _	6,000.	01/17/12	9 h			Î		
Pen	alty rates	1	of days late - 30					
	11 107 1 1	W-W-		WWW				M
Share and an arrangement	ltv Workshe							
And the second second	f you paid the require te the unpaid amount		Control of the Contro					
A	В	C C	D	E	F	G	Н	1
A	Due	Unpaid	Payment	Balance due	Payment	Number	Penalty rate	3
Period	date	amount	applied	(Col. C - Col. D)	date		(See above)	Penalty
Qtr 1	04/15/11	1,525.		1,525.	04/18/11			
	-	1,525.	2,000.	-475.	04/18/11			
	• 2							
Otr 2	06/15/11	1,384.		1,384.	06/15/11			
	***************************************	1,384.	475.	909.	06/15/11			
	s - 3	909.	1,000.	-91.	06/15/11			
	•				•		-	
Qtr 3	09/15/11	8,911.		8,911.	09/15/11		702 10000	
		8,911.	91.	8,820.	09/15/13			
	-	8,820.	10,000.	-1,180.	09/15/11			
Qtr 4	01/17/12	3,937.		3,937.	01/17/12	-		
	š=	3,937. 2,757.	1,180.	2,757. -3,243.	$\frac{01/17/12}{01/17/12}$		- ·	
	*	<u> </u>	0,000*	-3,243.	. <u>0 T \ T I \ T T</u>			
	d Column I, Quarters			penalty for underg		nated tax.	22	0
Wri								
	You may apply any re Penalty Worksheet 2,			The second secon		nt when fia	=	<u> </u>

					***************************************	Town of the said designed to the		
Penalty	/ Worksh	eet 2 - Late-p	ayment pena	lty for unpaid tax				
23 Write a	ny positive amo	unt from Line 19 on tl	ne first line of Colu	umn C below.	The state of the s	THE PARTY OF THE P	A A A A A A A A A A A A A A A A A A A	
A Return	B Due date	C Unpaid amount	D Payment applied	Balance due (Col. C - Col. D)	F Payment date	G Number of days late	H Penalty rate (See above)	l Penalty
		our late-payment pe here and on Line 33.	nalty for unpaid	tax.			24 _	
Figure yo 25 Write the 26 Write the 27 Write the 28 Add Line 29 Write the 30 Subtract	you are filing your tax was nur late-filing an amount from Fore amount of house as 25 through 27 at total amount of t Line 29 from Line	orm IL-1040, Line 15. sehold employment to tax from Form IL-104. Write the total amount foredits and payment.	our original due o ax from Form IL-10 J, Line 23. ant here.	late.	ate,		25	
		ine 30 by 2% (.02). 11 or \$250. This is you	ır late-filing pena	alty.			32	* ***
	e amount yo	u owe. penalty for unpaid t	ax from Line 24,				33	
		alty from Line 32.					34	
If you ha	ave an amount d	ue on Form IL-1040, I	ine 39, write that	it amount as a <negative r<="" td=""><td>number.</td><td></td><th>35</th><td>Million against the second second</td></negative>	number.		35	Million against the second
applied	to next year's es		sult is a positive n	s is the amount you are number, this is the amo				2

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

Step 6: Complete the annualization worksheet for Step 2, Line 9b Complete this worksheet only if your income was not received evenly throughout the year and you choose to annualize your income. Complete Lines 37 through 53 of one column before going to the next, beginning with Column A.

			A First 3 months	B First 5 months	C First 8 months	D All 12 months
37	Write your Illinois base income					
	for each period. See instructions.	37	141,100.	232,570.	520,896.	779,051.
38	Annualization factors.	38	4	2.4	1.5	1
39	Multiply Line 37 by Line 38. This is					
	your annualized income.	39	564,400.	558,168.	781,344.	779,051.
40	Exemptions. See instructions.	40	8,000.	8,000.	8,000.	8,000.
41	Subtract Line 40 from Line 39. This					***
	is your Illinois net income.	41	556,400.	550,168.	773,344.	771,051.
42	Multiply Line 41 by 5% (.05).	42	27,820.	27,508.	38,667.	38,553.
43	For each period, write the			•		
	amount you wrote on					
	Step 2, Line 2, Column A.	43			12	
44	Subtract Line 43 from Line 42.	44	27,820.	27,508.	38,667.	38,553.
45	Applicable percentage.	45	22.5% (.225)	45% (.450)	67.5% (.675)	90% (.900)
46	Multiply Line 44 by Line 45.					
	This is your annualized					
	installment.	46	6,260.	12,379.	26,100.	34,698.
47	Add the amounts on Line 53 of each					8
	of the preceding columns and write					
	the total here.	47	Skip this line for Column A.	6,260.	12,379.	26,025.
48	Subtract Line 47 from Line 46. If less					
	than zero, write "0."	48	6,260.	6,119.	13,721.	8,673.
49	Write the amount you would have					
	entered in Step 2, Line 9b, if you were					
22	not annualizing.	49	8,675.	8,675.	8,675.	8,673.
50	Write the amount from Line 52 of the					
	preceding column.	50	Skip this line for Column A.	2,415. 11,090.	4,971.	
51	Add Lines 49 and 50.	51	8,675.	11,090.	13,646.	8,673.
52	If Line 51 is greater than Line 48,					
	subtract Line 48 from Line 51.		0 1911/02	2 2 2 2		
	Otherwise, write "0."	52	2,415.	4,971.	0.	Skip this line for Column D.
53	Write the lesser of Line 48 or Line 51					
	here and on Step 2, Line 9b. This is		- 0		40.545	
	your required installment.	53	6,260.	6,119.	13,646.	8,673.