

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

, 2015, ending

, 20

See separate instructions.

Your first name and initial

GRETCHEN E.

Last name

WHITMER

Your social security number

[Redacted]

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

Last name

Spouse's social security number

[Redacted]

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

Apt. no.

Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below.

EAST LANSING, MI 48823

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Foreign country name

Foreign province/state/county

Foreign postal code

[X] You [] Spouse

Filing Status

1 [] Single

2 [] Married filing jointly (even if only one had income)

3 [X] Married filing separately. Enter spouse's SSN above and full name here. MARC MALLORY

4 [] Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.

5 [] Qualifying widow(er) with dependent child

Check only one box.

Exemptions

6a [X] Yourself. If someone can claim you as a dependent, do not check box 6a

b [] Spouse

Boxes checked on 6a and 6b 1

Dependents:

(1) First name

Last name

(2) Dependent's social security number

(3) Dependent's relationship to you

(4) [X] If child under age 17 qualifying for child tax credit

[Redacted]

DAUGHTER

No. of children on 6c who:

1 lived with you 1

did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

Add numbers on lines above 2

d Total number of exemptions claimed

Income

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

STMT 3

7

56,719.

8a Taxable interest. Attach Schedule B if required

8a

50.

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

8b

1,683.

9a Ordinary dividends. Attach Schedule B if required

9a

7,391.

b Qualified dividends

9b

5,513.

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

10

11 Alimony received

11

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

12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here []

13

27,957.

14 Other gains or (losses). Attach Form 4797

14

15a IRA distributions

15a

434,370.

b Taxable amount

15b

16a Pensions and annuities

16a

b Taxable amount

16b

0.

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

17

12,000.

18 Farm income or (loss). Attach Schedule F

18

19 Unemployment compensation

19

20a Social security benefits

20a

b Taxable amount

20b

21 Other income. List type and amount

21

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income

22

104,117.

Adjusted Gross Income

23 Educator expenses

23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ

24

25 Health savings account deduction. Attach Form 8889

25

26 Moving expenses. Attach Form 3903

26

27 Deductible part of self-employment tax. Attach Schedule SE

27

848.

28 Self-employed SEP, SIMPLE, and qualified plans

28

29 Self-employed health insurance deduction

29

30 Penalty on early withdrawal of savings

30

31a Alimony paid b Recipient's SSN

31a

32 IRA deduction

32

33 Student loan interest deduction

33

34 Tuition and fees. Attach Form 8917

34

35 Domestic production activities deduction. Attach Form 8903

35

36 Add lines 23 through 35

36

848.

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

37

103,269.

Tax and Credits

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

All others: Single or Married filing separately, \$6,300 Married filing jointly or Qualifying widow(er), \$12,600 Head of household, \$9,250

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-56 for Tax and Credits.

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 57-63 for Other Taxes.

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Includes lines 64-74 for Payments.

Refund

Direct deposit? See instructions.

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-77 for Refund.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 78-79 for Amount You Owe.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? [X] Yes. Complete below. [] No

Sign Here

Joint return? See instructions. Keep a copy for your records.

Signature and occupation fields for preparer and spouse.

Paid Preparer Use Only

Fields for paid preparer information including name, signature, date, firm name, EIN, and phone number.