

For the year Jan. 1-Dec. 31, 2017, or other tax year beginning _____, 2017, ending _____, 20

Your first name and initial **GRETCHEN E.** Last name **WHITMER** See separate instructions. 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. _____
 Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

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

Filing Status
 1 Single
 2 Married filing jointly (even if only one had income)
 3 Married filing separately. Enter spouse's SSN above and full name here. **MARC P 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) (see instructions)

Exemptions
 6a Yourself. If someone can claim you as a dependent, do not check box 6a
 b Spouse
 c **Dependents:**
 (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) if child under age 17 qualifying for child tax credit
 If more than four dependents, see instructions and check here
 d Total number of exemptions claimed **1**
 Boxes checked on 6a and 6b **1**
 No. of children on 6c who:
 • lived with you _____
 • did not live with you due to divorce or separation (see instructions) _____
 Dependents on 6c not entered above _____
 Add numbers on lines above **1**

Income
 7 Wages, salaries, tips, etc. Attach Form(s) W-2 **7**
 8a Taxable interest. Attach Schedule B if required **8a**
 b Tax-exempt interest. Do not include on line 8a **8b** **7,720.**
 9a Ordinary dividends. Attach Schedule B if required **9a** **14,039.**
 b Qualified dividends **9b** **11,865.**
 10 Taxable refunds, credits, or offsets of state and local income taxes **STMT 1 STMT 2** **10** **2,667.**
 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** **303.**
 14 Other gains or (losses). Attach Form 4797 **14**
 15a IRA distributions **15a** **15b** Taxable amount
 16a Pensions and annuities **16a** **16b** Taxable amount
 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E **17**
 18 Farm income or (loss). Attach Schedule F **18**
 19 Unemployment compensation **19**
 20a Social security benefits **20a** **20b** Taxable amount
 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** **17,009.**

Adjusted Gross Income
 23 Educator expenses **23**
 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ **24**
 25 Health savings account deduction. Attach Form 8889 **25**
 26 Moving expenses. Attach Form 3903 **26**
 27 Deductible part of self-employment tax. Attach Schedule SE **27**
 28 Self-employed SEP, SIMPLE, and qualified plans **28**
 29 Self-employed health insurance deduction **29**
 30 Penalty on early withdrawal of savings **30**
 31a Alimony paid **31a** b Recipient's SSN **_____**
 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**
 37 Subtract line 36 from line 22. This is your **adjusted gross income** **37** **17,009.**

Tax and Credits

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-56 covering Adjusted Gross Income, Deductions, Exemptions, Taxable Income, and Credits.

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 57-63 covering Self-employment tax, Unreported social security, and Household employment taxes.

Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 64-74 covering Federal income tax withheld, estimated tax payments, and Earned Income Credit.

Refund

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-77 covering overpaid amount and estimated tax applied.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 78-79 covering amount owed and estimated tax penalty.

Third Party Designee

Sign Here

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

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