

CLIENT COPY

Form 1040

U.S. Individual Income Tax Return

2016

OMB No. 1545-0047

PS Use Only - Do not write or staple in this space

For the year Jan. 1-Dec. 31, 2016, or other tax year beginning

2016 ending

20

Your first name and initial

Last name

See separate instructions.

GRETCHEN E.

WHITMER

Your social security number

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

Last name

Spouse's social security number

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

Apt. no.

Make sure the SSNs 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. Creating 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) with dependent child

Check only one box.

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, enter age if applying for child tax credit

Dependents on 6a and 6b

No. of children on 6c who

are lived with you

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

Dependents on 6c not entered above

Add numbers on lines above

DAUGHTER

DAUGHTER

1

1

2

If more than four dependents, see instructions and check here

d Total number of exemptions claimed

Income

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

STMT 5

7

124,997.

8a Taxable interest. Attach Schedule B if required

8a

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

8b 3,305.

8b

9a Ordinary dividends. Attach Schedule B if required

9a

9,687.

b Qualified dividends

9b 7,614.

9b

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

STMT 2 STMT 3

10

156.

11 Alimony received

11

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

12

2,500.

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

13

13,193.

14 Other gains or (losses). Attach Form 4797

14

15a IRA distributions

15a

b Taxable amount

15a

16a Pensions and annuities

16a

b Taxable amount

16a

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

17

0.

18 Farm income or (loss). Attach Schedule F

18

19 Unemployment compensation

19

20a Social security benefits

20a

b Taxable amount

20a

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

150,533.

Adjusted Gross Income

23 Educator expenses

23

24 Certain business expenses of reservists, performing artists, and fee-based government officials. Attach Forms 7100 or 7100-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

34.

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 8803

35

36 Add lines 23 through 35

36

34.

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

37

150,499.

832001 11-20-16

LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2016)

Tax and Credits

Standard Deduction for:
a People who check any box on line 40 or 41 or 42 or 43 or 44 or 45 or 46 or 47 or 48 or 49 or 50 or 51 or 52 or 53 or 54 or 55 or 56 or 57 or 58 or 59 or 60 or 61 or 62 or 63 or 64 or 65 or 66 or 67 or 68 or 69 or 70 or 71 or 72 or 73 or 74 or 75 or 76 or 77 or 78 or 79 or 80 or 81 or 82 or 83 or 84 or 85 or 86 or 87 or 88 or 89 or 90 or 91 or 92 or 93 or 94 or 95 or 96 or 97 or 98 or 99 or 100

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

Table with 3 columns: Line number, Description, Amount. Includes lines 38-56. Total for line 56 is 289.

Other Taxes

Table with 3 columns: Line number, Description, Amount. Includes lines 57-63. Total for line 63 is 27,949.

Payments

If you have a qualifying child, attach Schedule E-IC

Table with 3 columns: Line number, Description, Amount. Includes lines 64-74. Total for line 74 is 21,768.

Refund

Direct deposit? See instructions.

Table with 3 columns: Line number, Description, Amount. Includes lines 75-77. Total for line 77 is 6,181.

Amount You Owe

Table with 3 columns: Line number, Description, Amount. Includes lines 78-79. Total for line 79 is 6,181.

Third Party Designee

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

Paid Preparer Use Only