

Michigan General Information

School district name		_____	[1]
School district code		_____	[2]
Mark if 2/3 income from seafaring		_____	[3]
	Taxpayer		Spouse
Do you want \$3.00 to go to the state campaign fund? (Y, N)		_____	[4] _____ [5]
Mark the applicable boxes if the following conditions apply to you and/or your spouse:			
Paralegic, quadriplegic or hemiplegic		_____	[6] _____ [7]
Totally and permanently disabled		_____	[8] _____ [9]
Deaf		_____	[10] _____ [11]
Qualified disabled veteran		_____	[12] _____ [13]
Willing to participate in the anatomical gift donor registry		_____	[14] _____ [15]

Use Tax

Purchases up to \$1000 per purchase subject to use tax		_____	[16]
Purchases exceeding \$1000 per purchase subject to use tax		_____	[17]

Contributions

Amount of charitable contribution you wish to make to:
Contributions must be a minimum of \$5, \$10 or any amount greater than \$10

American Red Cross of Michigan		_____	[18]
Animal Welfare Fund		_____	[19]
Children's Trust Fund - Preventing Child Abuse in Michigan		_____	[20]
Military Family Relief Fund		_____	[21]
United Way Fund		_____	[22]

Part-year Resident Information

If you were a part-year resident during the tax year, enter the dates you lived in Michigan

	Taxpayer		Spouse
From	_____	[23]	_____ [24]
To	_____	[25]	_____ [26]
Residency status of spouse (If different from taxpayer)(1 = Resident, 2 = Nonresident, 3 = Part-year resident)			_____ [27]

NOTES/QUESTIONS:

Michigan Credits - Homestead Property Tax Credit Information

Homeowner

Homestead occupied entire tax year: Taxable value _____ [1] Special Assessments _____ [3]

Homestead property taxes levied, if different from that entered on Organizer Form ID: A1 (or Lite-5)

TSJ	Description	Amount
_____	_____	_____ [4]
_____	_____	_____

Address at end of tax year, if different from that entered on Organizer Form ID: 1040 (or Lite-1):

Street address _____ [5]	Taxable value _____ [9]
City _____ [6]	Number of days occupied _____ [10]
State _____ [7] Zip code _____ [8]	Property taxes levied for the year _____ [11]

Address of homestead sold during tax year:

Street address _____ [12]	Taxable value _____ [16]
City _____ [13]	Number of days occupied _____ [17]
State _____ [14] Zip code _____ [15]	Property taxes levied for the year _____ [18]

Rental Information

[19]

Rental #1 Address _____ City _____ Zip code _____	No. months	Monthly rent	Mobile home
Landlord #1 Name _____ Address _____ City _____ State _____ Zip Code _____			
Rental #2 Address _____ City _____ Zip code _____	No. months	Monthly rent	Mobile home
Landlord #2 Name _____ Address _____ City _____ State _____ Zip Code _____			

Household Income

Enter amounts of nontaxable income received during the tax year by any member of your household

Child support and foster parent payments	_____ [20]
Worker's compensation and Veteran's benefits	_____ [21]
Family Independence Agency and other public assistance payments	_____ [22]
Gifts or expenses paid on your behalf	_____ [23]
Other nontaxable income (inheritances, etc):	_____ [24]
_____	_____
_____	_____
_____	_____

NOTES/QUESTIONS:

Michigan Cities General Information

Taxpayer Spouse

Mark the applicable boxes if the following conditions apply to you and/or your spouse:

Disabled

___[1]

___[2]

Deaf

___[3]

___[4]

NOTES/QUESTIONS: