

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:		
Paraplegic, quadriplegic or hemiplegic	_____ [6]	_____ [7]
Totally and permanently disabled	_____ [8]	_____ [9]
Deaf	_____ [10]	_____ [11]
Qualified disabled veteran	_____ [12]	_____ [13]

Use Tax

Purchases up \$1000 per purchase subject to use tax _____ [14]
 Purchases exceeding \$1000 per purchase subject to use tax _____ [15]

Contributions

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

ALS of Michigan Fund _____ [16]	Children's Trust Fund _____ [20]
Alzheimer's Association of Michigan _____ [17]	Military Family Relief Fund _____ [21]
Animal Welfare Fund _____ [18]	Special Olympics Michigan _____ [22]
Children of Veterans Tuition Grant Program _____ [19]	United Way Fund _____ [23]

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 _____ [24]	_____ [24]	_____ [26]
To _____ [25]	_____ [25]	_____ [27]
Residency status of spouse (If different from taxpayer) (1 = Resident, 2 = Nonresident, 3 = Part-year resident)		_____ [28]

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 _____ [19] 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: