2018 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink. Print numbers like this: 0/23456789 - NOT like this: \emptyset 1 4 7

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2018, you must complete a Withholding Tax Schedule (Schedule W) to claim the withholding on your Individual Income Tax Return (MI-1040, line 29). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040 where applicable. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
	1		
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

Α	В	В С		E
Enter "X" for: Filer or Spouse	Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation	Box 17 — Michigan income tax withheld
			00	00
			00	00
			00	00
			00	00
			00	00
Enter Table	e 1 Subtotal from additional Sched	dule W forms (if applicable)		00
4. SUB	TOTAL. Enter total of Table 1, co	. 00		

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS REPORTED ON 1099 FORMS

Α	В	С	D	E		
Enter "X" for:		Taxable pension distribution, misc. income, etc. (see inst.)				
				00		00
				00		00
				00		00
				00		00
				00		00
Enter Tabl	e 2 Subtotal from additional Schedu	ıle W forms (if applicable)				00
5. SU	STOTAL. Enter total of Table 2, col	umn E		5.		00
6. TO	TAL. Add lines 4 and 5. Enter here	9	6.		00	

Schedule NR

2018 MICHIGAN Nonresident and Part-Year Resident Schedule

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Type or print in blue or black ink. Print numbers like this: 0/23456789 - NOT like this: 0/23456789 - NOT like this: 0/23456789

Include with Form MI-1040. Read all instructions before completing this form.

Attachment 02

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789

4.	2018 RESIDENCY STATUS: Check all that apply.	*Dates o	of Michigan res	idency	in 2018 (Enter dates as M	M-D	D-YYYY, Example: 04-15-2 SPOUSE	.018)
	a. Nonresident		FROM:		- 2018		<u> </u>	218
	b. Part-Year Resident of Michigan. Enter dates of Michigan residency in 2	2018*	то:		— <u>2018</u>		— — <u>—</u> 20	218
Incor	ne Allocation	Α. ٦	Total Income		B. Michigan Incom	e .	C. Other State(s) Inc	ome
5.	Wages, salaries, other payments (tips, etc.)			00		00		00
6.	Interest and dividends			00		00		00
7.	Business and farm income (include U.S. Schedules C and F)			00		00		00
8.	Gains/losses from MI-1040D or U.S. Schedule D, and/or MI-4797 or U.S Form 4797			00		00		00
9.	Income reported on U.S. Schedule E (include							

	U.S. Schedule D, and/or MI-4797 or U.S Form 4797	00	00	00
9.	Income reported on U.S. Schedule E (include U.S. Schedule E and supporting statements)	00	00	00
10.	Pensions, IRA distributions, annuities and Social Security (see Form 4884)	00	00	00
11.	Other (see instructions)	00	00	00
12.	Total income. Add lines 5 through 11	00	00	00
13.	Enter the total adjustments from U.S. Form 1040. Describe:	00	00	00
14.	Subtract line 13 from line 12. The amount in column A should equal MI-1040, line 10. Enter amount in column C on Schedule 1, line 13 or, if a negative amount, enter as a positive amount on Schedule 1, line 4.	00	00	00

2018 MICHIGAN Schedule 1 Additions and Subtractions

M.I. Last Name

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.	Print numbers like this: $0/23456789$ - NOT like this: \emptyset	14	7
Include with Form MI-1040			

Attachment 01

Filer's First Name	M.I.	Last Name F	iler's Full Social Security No. (Exampl	e: 123-45-6789)
Additions to Income (all entrie	s mus	t be positive numbers)		
Gross interest and dividends (other than Michigan) or their		bligations issued by states al subdivisions	1.	00
Deduction for taxes on, or me your federal return (see instru	easure uctions	d by, income including self-employment tax taker	n on 2.	00
3. Gains from Michigan column	of MI-1	040D and MI-4797	3.	00
4. Losses attributable to other s	tates (see instructions)	4.	00
5. Net loss from federal column	of you	r Michigan MI-1040D or MI-4797	5.	00
6. Oil, gas, and nonferrous meta	allic mi	neral expenses (Michigan sourced) deducted to	arrive at	00
7. Federal Net Operating Loss	deducti	on included in AGI	7.	00
8. Other (see instructions). Des	cribe: _		8.	00
9. Total additions. Add lines 1	throu	gh 8. Enter here and on MI-1040, line 11	9.	00

likely - the rest of this form is blank

Continue on page 2. If subtractions do not apply, only submit page 1 of the Schedule 1 with your return.

2018 MICHIGAN Schedule 1 Additions and Subtractions

Filer's	First Name	M.I.	Last Na	ame		Filer's Ful	l Social Secu	ity No. (Exa	ample: 123-45-6789)	
Subt	ractions from Income (all	entrie	s mus	st be positive numbers)			-			
	ncome from U.S. government Include U.S. Schedule B if over	er \$5,0	00				10. 10.			00
11.	11. Amount included in MI-1040, line 10, from military retirement benefits due to service in the U.S. Armed Forces or Michigan National Guard, or taxable railroad retirement benefits									
12.	Gains from federal column of l	Michig	an MI-	-1040D and MI-4797			12.			00
	Income attributable to another									00
	Taxable Social Security benefi									00
	Income earned while a resider						15.			00
400	Michigan state and local incor on MI-1040, line 10	+ 4	امد	Releved a refu	rel fillim J	not	16.			00
17.	Michigan Education Savings F Life Experience Program	rogra	m, Wit	529 Advisor Plan, and Mi	chigan Achiev	ing a Be	tter 17.			00
18.	Michigan Education Trust						18.			00
19.	Oil, gas, and nonferrous meta	llic mi	nerals	income (Michigan source	ed) included in	AGI	19.			00
20.	Resident Tribal Member incon	ne exe	empted	d under a State/Tribal tax	agreement or		20.			00
	pursuant to Revenue Adminis	trative	Bullet	III 1900-47			20.			100
21.	Michigan Net Operating Loss						21.			00
22.	Miscellaneous subtractions (s	ee ins	tructio	ns). Describe:			22.			00
D	luction Based on Yea	5	Dinth							
-	plete this section if you are eligil				luction the dec	duction fo	or retiremen	nt henefits	or the deduction	1
for se	olete this section if you are eligi enior investment income on line rour spouse, if married.	es 24,	25 or 2	26. If you complete line 24	, 25 or 26, lines	s 23A thr	ough 23F i	nust be o	completed for you	i
	E: See instructions before co	ntinu	ing wi	th this section.						
23.		ILER					SPO		<u> </u>	33.43
	The state of the s	3. Age		C.	D.	(40)	E. A	•	F. Check if SSA Exe	omnt
	Year of Birth (19xx) (as of	12-31-	2018)	Check if SSA Exempt	Year of Birth	(19XX)	(as of 12-3	1-2010)	CHECK II 33A EX	silipt
24.	Michigan Standard Deducti (if married) was born during the age 67 on or before December	ne per	iod Jai	nuary 1, 1946 through Ja	nuary 1, 1952,	, and rea	ched			00
25.	Retirement benefits. Enter a Pension Schedule. Include I	moun	t from	line 16, 27, 28 or 29 of Fe	orm 4884, <i>Mic</i>	higan				00
26.	26. Dividend/interest/capital gains deduction for taxpayers 73 years and older . Deduction is limited to \$11,495 for single or married filing separately filers and \$22,991 for joint filers, less any deduction for retirement benefits (see instructions)								00	
	Check this box if you are the gains deduction for someon	e unrei e born	married before	surviving spouse claiming a 1946 who was at least age	dividend, intere 65 at the time of	est or capi f death.	tal			
27.	Total subtractions. Add line	s 10 t	hroug	h 26. Enter here and on	MI-1040, line	13	27.	A 10.2 W	W. Ness Fills	00

2017 MICHIGAN Individual Income Tax Return MI-1040

Amended Return (Include Schedule AMD) Return is due April 17, 2018. Type or print in blue or black ink. Print numbers like this: 0/23456789 - NOT like this: \emptyset 1 4 \mathcal{F} 1. Filer's First Name M.I. Last Name 2. Filer's Full Social Security No. (Example: 123-45-6789) If a Joint Return, Spouse's First Name Last Name 3. Spouse's Full Social Security No. (Example: 123-45-6789) Home Address (Number, Street, or P.O. Box) ZIP Code 4. School District Code (5 digits - see page 60) City or Town State 6. FARMERS, FISHERMEN, OR SEAFARERS 5. STATE CAMPAIGN FUND Check if you (and/or your spouse, if filing a joint return) want \$3 of your taxes Check this box if 2/3 of your income is from farming, to go to this fund. This will not increase fishing, or seafaring. Spouse your tax or reduce your refund. 2017 FILING STATUS. Check one. 2017 RESIDENCY STATUS. Check all that apply. Single Resident * If you check box "c," complete * If you check box "b" or line 3 and enter spouse's full name "c," you must complete below: Nonresident * b. Married filing jointly and include Schedule Part-Year Resident * Married filing separately* EXEMPTIONS. NOTE: If someone else can claim you as a dependent, check box 9d, enter 0 on line 9a and enter \$1,500 on line 9d (see instr.). 9. a. Number of exemptions claimed on 2017 federal return..... 00 \$4,000 9a Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled 00 \$2,600 9h 00 c. Number of qualified disabled veterans..... \$400 9c 00 d. Claimed as dependent, see line 9 NOTE above 9d e. Add lines 9a, 9b, 9c and 9d. Enter here and on line 15 00 9e Adjusted Gross Income from your U.S. Forms 1040, 1040A, 1040EZ or 1040NR (see instructions)..... 00 10. 00 Additions from Schedule 1, line 9, Include Schedule 1 00 Total, Add lines 10 and 11.... 12. 00 Subtractions from Schedule 1, line 27. Include Schedule 1..... 00 Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0" 00 Exemption allowance. Enter amount from line 9e or Schedule NR, line 19..... 15. 00 Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0" 16. 00 17 17. Tax. Multiply line 16 by 4.25% (0.0425) CREDIT NON-REFUNDABLE CREDITS 18. Income Tax Imposed by government units outside Michigan. 00 00 18b Include a copy of the return (see instructions)..... Michigan Historic Preservation Tax Credit carryforward and/or 00 00 Small Business Investment Tax Credit (see instructions)...... 19a. 19b

20. Income Tax. Subtract the sum of lines 18b and 19b from line 17.

If the sum of lines 18b and 19b is greater than line 17, enter "0"

00

2017 M	II-1040, Page 2 of 2 Filer's Full Social Security Numb	per	
04	Future annual of Innorma Tay from line 20		21.
21. 22.	Enter amount of Income Tax from line 20 Voluntary Contributions from Form 4642, line 7. Include Form 4642		21. 00 22. 00
23.	USE TAX. Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1 (see instructions)		23. 00
24.	Total Tax Liability. Add lines 21, 22 and 23	24.	00
REFL	INDABLE CREDITS AND PAYMENTS		
25.	Property Tax Credit. Include MI-1040CR or MI-1040CR-2		25. 00
26.	Farmland Preservation Tax Credit. Include MI-1040CR-5	EDERAL	26. MICHIGAN
27.	Earned Income Tax Credit. Multiply line 27a by 6% (0.06) and enter result on line 27b	00 2	7b. 00
28.	Michigan Historic Preservation Tax Credit (refundable). Include Form 3581		28. 00
29.	Michigan tax withheld from Schedule W, line 7. Include Schedule W (do not sul	omit W-2s)	29. 00
30.	Estimated tax, extension payments and 2016 credit forward		30. 00
31.	2017 AMENDED RETURNS ONLY. Taxpayers completing an original 2017 return Amended returns must include Schedule AMD (see instructions).	n should skip to line 32.	
	31a. If you had a refund and/or credit forward on the original return, check box 31a an engative number on line 31c.		
	31b. If you paid with the original return, check box 31b and enter the amount paid w any additional tax paid after filing, as a positive number on line 31c. Do not incl	ith the original return, plus lude interest or penalty. 3	1c. 00
	Total refundable credits and payments Add lines 25, 26, 27b, 28, 29, 30 and 31c	32.	00
	JND OR TAX DUE		
33.	If line 32 is less than line 24, subtract line 32 from line 24. If applicable, see instru	ictions.	
	Include interest 00 and penalty 00	YOU OWE 33.	00
34.	Overpayment. If line 32 is greater than line 24, subtract line 24 from line 32		00
35.	Credit Forward. Amount of line 34 to be credited to your 2018 estimated tax for y	your 2018 tax return	35.
		DECUND 00	00
	Subtract line 35 from line 34 ECT DEPOSIT a. Routing Transit Number b.	REFUND 36.	c. Type of Account
Depos	sit your refund directly to your financial tion! See instructions and complete a, b		1. Checking 2. Savings
	eased Taxpayer. If Filer and/or Spouse died after December 31, 2016, enter dates below. ER DATE OF DEATH ONLY. Example: 04-15-2017 (MM-DD-YYYYY)	Preparer Certification this return is based on all in	n. I declare under penalty of perjury that formation of which I have any knowledge.
Filer	Spouse	Preparer's PTIN, FEIN or S	SN
Taxp and at	payer Certification. I declare under penalty of perjury that the information in this return ttachments is true and complete to the best of my knowledge.	Preparer's Name (print or t	ype)
Filer's	s Signature Date	Preparer's Business Name	, Address and Telephone Number
Spous	se's Signature Date		
	By checking this box, I authorize Treasury to discuss my return with my preparer.		

Refund, credit, or zero returns. Mail your return to:

Michigan Department of Treasury, Lansing, MI 48956
Pay amount on line 33 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929