

2004 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 15, 2005.

Type or print in blue or black ink. Print numbers like this: 0123456789 - NOT like this: 0147

PLACE LABEL HERE	▶ 1. Filer's First Name		M.I.	Last Name		▶ 2. Filer's Social Security No. (Example: 123-45-6789)	
	If a Joint Return, Spouse's First Name		M.I.	Last Name		-	
	Home Address (No., Street, P.O. Box or Rural Route)					▶ 3. Spouse's Social Security No. (Example: 123-45-6789)	
	City or Town			State	ZIP Code	▶ 4. School District Code (5 digits - see page 45)	



MILITARY FAMILY RELIEF FUND. You may contribute to the Military Family Relief Fund on line 28 of this form.

▶ 5. STATE CAMPAIGN FUND Check this box if you (or your spouse, if filing a joint return) want \$3 of your taxes to go to this fund. This will not increase your tax or reduce your refund.		Yes <input type="checkbox"/> No <input type="checkbox"/> a. You b. Spouse	▶ 6. FARMERS, FISHERMEN OR SEAFARERS <input type="checkbox"/> Check this box if 2/3 of your income is from farming, fishing or seafaring.	
▶ 7. FILING STATUS. Check one. a. <input type="checkbox"/> Single b. <input type="checkbox"/> Married, filing jointly c. <input type="checkbox"/> Married, filing separately*		*If you check box "c," complete line 3 and enter spouse's name below: <input style="width: 200px; height: 20px;" type="text"/>		
		▶ 8. RESIDENCY. Check one. a. <input type="checkbox"/> Resident b. <input type="checkbox"/> Nonresident* c. <input type="checkbox"/> Part-Year Resident* * If you check box "b" or "c," you must complete and attach Schedule NR.		

▶ 9. **EXEMPTIONS.** If someone else can claim you and/or your spouse as a dependent, check box "a" and/or "b," complete the worksheet on page 11, and enter the amount from your worksheet in box "c."

▶ a. <input type="checkbox"/> You	▶ b. <input type="checkbox"/> Spouse	9c.		00
d. Number of exemptions you claimed on your 2004 federal return	▶ 9d.		x \$3,100	00
e. Number of individuals (claimed in 9d) 65 or older who qualify for a special exemption...	▶ 9e.		x \$2,000	00
f. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled ...	▶ 9f.		x \$2,000	00
g. Number of children ages 18 and under you claimed as Michigan exemptions	▶ 9g.		x \$600	00
h. If your unemployment compensation is 50% or more of your AGI (amount claimed on line 10) check the box and enter \$2,000	▶ 9h.	<input checked="" type="checkbox"/>	\$2,000	00
i. Add lines 9c, 9d, 9e, 9f, 9g, and 9h. Enter here and on line 15			9i.	00

10. Adjusted gross income from your U.S. 1040, 1040A, 1040EZ or 1040NR (see p. 11)	▶ 10.		00
11. Additions (from MI-1040 Schedule 1, line 7)	▶ 11.		00
12. Total. Add lines 10 and 11	12.		00
13. Subtractions (from MI-1040 Schedule 1, line 20)	▶ 13.		00
14. Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0"	14.		00
15. Exemption allowance. Enter the amount from line 9i or Schedule NR, line 20	▶ 15.		00
16. Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0"	16.		00
17. Tax. Multiply line 16 by 3.95% (.0395). Enter here and carry amount to line 18	17.		00



DIRECT DEPOSIT
Deposit your refund directly into your bank account! See pg. 14 and complete a, b and c

a. Routing Number ▶

b. Account Type: ▶ (1) Checking (2) Savings

c. Account Number ▶

Filer's Social Security Number
— —

18. Enter amount of tax from line 17	18.		00
NONREFUNDABLE CREDITS			
19. Income tax paid to Michigan cities (see p. 12)	▶ 19a.		00
20. Public contributions (see p. 12)	▶ 20a.		00
21. Community foundations. Enter code from p. 44 ▶ <input type="text"/>	▶ 21a.		00
22. Homeless Shelter/Food Bank cash contributions (see p. 12) ...	▶ 22a.		00
23. Income tax paid to another state. Attach a copy of the return	23a.		00
24. Michigan Historic Preservation Tax Credit. Attach Form 3581 ..	▶ 24a.		00
25. College Tuition and Fees Credit. Attach Schedule CT	▶ 25.		00
26. Total nonrefundable credits. Add lines 19b, 20b, 21b, 22b, 23b, 24b, and 25	26.		00
27. Income tax. Subtract line 26 from line 18. If line 26 is greater than line 18, enter "0"	▶ 27.		00
28. Military Family Relief Fund. Enter your contribution amount (\$1 minimum) here	▶ 28.		00
29. Use Tax. ▶ a. <input type="checkbox"/> No use tax due ▶ b. <input type="checkbox"/> Amount from Worksheet 1, line 3, on p.10	▶ 29.		00
30. Add lines 27, 28, and 29	30.		00
REFUNDABLE CREDITS AND PAYMENTS			
31. Property Tax Credit. Attach MI-1040CR or MI-1040CR-2	▶ 31.		00
32. Farmland Preservation Credit. Attach MI-1040CR-5	▶ 32.		00
33. Qualified Adoption Expenses. Attach MI-8839	▶ 33.		00
34. Michigan Tax Withheld. Attach Schedule W (do NOT attach W-2s)	▶ 34.		00
35. Estimated tax, extension payments and 2003 credit forward	▶ 35.		00
36. Total refundable credits and payments. Add lines 31 through 35	36.		00
REFUND OR TAX DUE			
37. If line 36 is less than line 30, enter TAX DUE	▶	Office Use Only	PAY ▶ 37.
Include interest _____ and penalty _____ if applicable (see p. 13)			
38. If line 36 is greater than line 30, subtract line 30 from line 36. You overpaid this amount	38.		00
39. Amount of line 38 to be credited to your 2005 estimated tax	▶ 39.		00
40. Subtract line 39 from line 38	REFUND ▶ 40.		00

Deceased Taxpayers. If Filer and/or Spouse died after December 31, 2003, check the appropriate box below. ▶ <input type="checkbox"/> Filer is Deceased ▶ <input type="checkbox"/> Spouse is Deceased		Preparer Certification. I declare under penalty of perjury that this return is based on all information of which I have any knowledge.	
Taxpayer Certification. I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.		▶ Preparer's SSN, PTIN or FEIN <input type="text"/>	
Filer's Signature	Date	▶ Preparer's Name (print or type)	
Spouse's Signature	Date	Preparer's Address (print or type)	
▶ I authorize Treasury to discuss my return with my preparer. <input type="checkbox"/> Yes <input type="checkbox"/> No			

Refund, Credit or zero returns. Mail your return to: **Michigan Department of Treasury, Lansing, MI 48956**
Pay amount on line 37. Mail your check and return to: **Michigan Department of Treasury, Lansing, MI 48929**

Make checks payable to "State of Michigan." Print your Social Security number and "2004 income tax" on the front of your check. Do not staple your check to the return. Keep a copy of your return and all supporting schedules for six years.