

MI-1040 Michigan Income Tax Return

Issued under P.A. 281 of 1967. Filing is mandatory.

1998

This return is due April 15, 1999. Please print or type clearly in blue or black ink.

PLACE LABEL HERE	▶ 1 Primary Filer's First Name and Middle Initial	Last Name	▶ 2 Primary Filer's Social Security Number
	If a Joint Return, Spouse's First Name and Middle Initial	Last Name	▶ 3 Spouse's Social Security Number
	Home Address (No., Street, P.O. Box or Rural Route)		▶ 4 School District Code (see p. 46)
	City or Town	State	ZIP Code
<i>Office Use</i>			

Check this box if someone else prepares your return and you DO NOT need a book mailed to you next year (see p. 3).

Voluntary Contributions: You may contribute to the Children's Trust Fund and Nongame Wildlife Fund on the back of this return.

▶ 5 STATE CAMPAIGN FUND If you or your spouse if filing a joint return, want \$3 of your taxes to go to this fund, check this box. This will not increase your tax or reduce your refund.

▶ 5 a. You <input type="checkbox"/>	YES	NO	
▶ 5 b. Spouse <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

▶ 6 FILING STATUS

a. Single **b.** Married, filing jointly **c.** Married, filing separately. Complete item 3 and enter your spouse's name here: _____

▶ 7 RESIDENCY **a.** Resident **b.** Nonresident **c.** Part-Year Resident

If you check box "b" or "c," you must complete and attach Schedule NR.

8 EXEMPTIONS Number of exemptions you claimed on your 1998 federal return. **▶ 8a.** _____ x \$2,800 = **b.** .00

Check a box for all Michigan special exemptions that apply

	You	Spouse	
Age 65 or older	▶ c. <input type="checkbox"/>	▶ d. <input type="checkbox"/>	
Deaf	▶ e. <input type="checkbox"/>	▶ f. <input type="checkbox"/>	
Totally and permanently disabled (and under age 65), hemiplegic, paraplegic, quadriplegic or blind	▶ g. <input type="checkbox"/>	▶ h. <input type="checkbox"/>	
Unemployment compensation (must be 50% of AGI)	▶ i. <input type="checkbox"/>		
How many boxes did you check?	J. _____	x \$900 =	<input type="text"/> .00
Number of children claimed as Michigan exemptions:	Ages 6 and under	▶ k. _____	x \$600 = <input type="text"/> .00
Ages 7 - 12	▶ L. _____	x \$300 =	<input type="text"/> .00

STAPLE STATE COPY OF W-2 HERE

If someone else can claim you and/or your spouse as a dependent, check the box, enter "0" on line 8a and complete the worksheet on page 30.

	You	Spouse	
▶ m. <input type="checkbox"/>	<input type="checkbox"/>	▶ n. <input type="checkbox"/>	p. <input type="text"/> .00

Add lines 8b, 8J, 8k, 8L and 8p. Enter here and on line 14..... **8.** .00

9. Adjusted gross income from your U.S. 1040, 1040A or 1040EZ (see p. 30)..... **▶ 9.** .00

10. Additions (from MI-1040 Schedule 1, line 7)..... **▶ 10.** .00

11. Total. Add lines 9 and 10..... **11.** .00

12. Subtractions (from MI-1040 Schedule 1, line 18)..... **▶ 12.** .00

13. Income subject to tax. Subtract line 12 from line 11..... **13.** .00

14. Exemption Allowance. Enter the amount from line 8 or Schedule NR, line 19..... **▶ 14.** .00

15. Taxable income. Subtract line 14 from line 13..... **15.** .00

16. Tax. Multiply line 15 by 4.4% (.044)..... **16.** .00

17. Enter amount of tax from line 16 17. .00

NONREFUNDABLE CREDITS

	Amount	Credit
18. Income tax paid to Michigan cities (see p. 31)..... ▶ 18a.	<input type="text" value=""/> .00	18b. <input type="text" value=""/> .00
19. Public contributions (see p. 31) ▶ 19a.	<input type="text" value=""/> .00	19b. <input type="text" value=""/> .00
20. Community foundations. (Enter code from p. 33) ▶ <input type="text" value=""/>	▶ 20a. <input type="text" value=""/> .00	20b. <input type="text" value=""/> .00
21. Homeless/Food Bank cash contributions (see p. 31) ▶ 21a.	<input type="text" value=""/> .00	21b. <input type="text" value=""/> .00
22. Income tax paid to another state. (Attach a copy of the return.) 22a.	<input type="text" value=""/> .00	▶ 22b. <input type="text" value=""/> .00
23. College Tuition and Fees Credit. Attach Schedule CT..... ▶ 23.		<input type="text" value=""/> .00
24. Total nonrefundable credits. Add lines 18b, 19b, 20b, 21b, 22b, and 23		24. <input type="text" value=""/> .00
25. Income tax. Subtract line 24 from line 17. If line 24 is greater than line 17, enter "0"..... ▶ 25.		<input type="text" value=""/> .00
26. Fight Child Abuse  Enter \$10 or your contribution amount here ▶ 26.		<input type="text" value=""/> .00
27. Help Endangered and Nongame Wildlife  Enter \$10 or your contribution amount here ▶ 27.		<input type="text" value=""/> .00
28. Add lines 25, 26 and 27		28. <input type="text" value=""/> .00

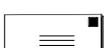
REFUNDABLE CREDITS and PAYMENTS

29. Property Tax Credit. Attach MI-1040CR or MI-1040CR-2..... ▶ 29.	<input type="text" value=""/> .00
30. Farmland Preservation Credit. Attach MI-1040CR-5	▶ 30. <input type="text" value=""/> .00
31. Michigan Tax Withheld. Attach state copy of W-2	▶ 31. <input type="text" value=""/> .00 ◀
32. Estimated tax, extension payments and 1997 credit forward	▶ 32. <input type="text" value=""/> .00
33. Total refundable credits and payments. Add lines 29 through 32..... 33.	<input type="text" value=""/> .00
▶ <input type="text" value=""/> Office Use	
34. If line 33 is less than line 28, enter TAX DUE . Check if MI-2210 is attached ▶ a. <input type="checkbox"/>	
Include interest _____ and penalty _____ if applicable (see p. 32)..... Pay ▶ 34.	<input type="text" value=""/> .00
35. If line 33 is greater than line 28, subtract line 28 from line 33. You overpaid this amount..... 35.	<input type="text" value=""/> .00
36. Amount of line 35 to be credited to your 1999 estimated tax . ▶ 36.	<input type="text" value=""/> .00
37. Subtract line 36 from line 35. For a Fast Refund File Electronically Refund ▶ 37.	<input type="text" value=""/> .00

To deposit your refund directly into your bank account, complete the Direct Deposit of Refund form on page 27.

I declare, under penalty of perjury, that the information in this return and attachments is true and complete to the best of my knowledge.		I declare under penalty of perjury that this return is based on all information of which I have any knowledge.	
<input type="checkbox"/> I authorize Treasury to discuss my return with my preparer.		<input type="checkbox"/> Do not discuss with my preparer.	
Filer's Signature	Date	Preparer's Signature, Address, Phone and ID No.	
Spouse's Signature	Date		

 **Refund or Credit.** Mail your return to:
Michigan Department of Treasury
Lansing, MI 48956

 **Pay.** Mail your check and return to:
Michigan Department of Treasury
Lansing, MI 48929

Make checks payable to "State of Michigan." Write your Social Security number and the words "1998 income tax" on the front of your check. Do not staple your check to the return.