

2009 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 15, 2010.

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 Michael		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	▶ 3. Spouse's Social Security No. (Example: 123-45-6789)	
	Home Address (No., Street, P.O. Box or Rural Route)				▶ 4. School District Code (5 digits - see p. 40)	
	City or Town Royal Oak		State MI	ZIP Code		

You may contribute to the CHILDREN'S TRUST FUND on line 22 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	No	▶ 6. FARMERS, FISHERMEN OR SEAFARERS <input type="checkbox"/> Check this box if 2/3 of your income is from farming, fishing or seafaring.	
a. You	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
b. Spouse	<input type="checkbox"/>	<input type="checkbox"/>			
▶ 7. FILING STATUS. Check one.		* If you check box "c," complete line 3 and enter spouse's name below:			
a. <input checked="" type="checkbox"/> Single					
b. <input type="checkbox"/> Married, filing jointly					
c. <input type="checkbox"/> Married, filing separately*					
▶ 8. RESIDENCY. Check all that apply.					
a. <input checked="" type="checkbox"/> Resident					
b. <input type="checkbox"/> Nonresident*	* If you check box "b" or "c," you must complete and attach Schedule NR.				
c. <input type="checkbox"/> Part-Year Resident*					

▶ 9. EXEMPTIONS					
a. Number of exemptions you claimed on your 2009 federal return.....	▶ 9a.	1	x \$3,600	3,600	00
b. Number of individuals 65 or older who qualify for a special exemption.....	▶ 9b.	0	x \$2,300		00
c. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled.....	▶ 9c.	0	x \$2,300		00
d. Number of children ages 18 and under you claimed as Michigan exemptions.....	▶ 9d.	0	x \$600		00
e. Number of qualified disabled veterans.....	▶ 9e.	0	x \$300		00
f. If your unemployment compensation is 50% or more of your Adjusted Gross Income (amount claimed on line 10) check (X) the box and enter \$2,300.....	▶ 9f.	<input type="checkbox"/>	\$2,300		00
g. If someone else can claim you as a dependent, check (X) the box, complete Worksheet 2 on p.10, and enter the amount from the worksheet.....	▶ 9g.	<input type="checkbox"/>		9g.	00
h. Add lines 9a, 9b, 9c, 9d, 9e, 9f and 9g. Enter here and on line 15.....	▶ 9h.			3,600	00
10. Adjusted Gross Income from your U.S. Forms 1040, 1040A, 1040EZ or 1040NR (see p. 10)....	▶ 10.			0	00
11. Additions from Michigan Schedule 1, line 7. Attach Schedule 1.....	▶ 11.			0	00
12. Total. Add lines 10 and 11.....	▶ 12.			0	00
13. Subtractions from Michigan Schedule 1, line 21. Attach Schedule 1.....	▶ 13.			0	00
14. Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0".	▶ 14.			0	00
15. Exemption allowance. Amount from line 9h or Schedule NR, line 20.....	▶ 15.			3,600	00
16. Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0".....	▶ 16.			0	00
17. Tax. Multiply line 16 by 4.35% (0.0435).....	▶ 17.			0	00
18. Total Nonrefundable Credits. Amount from Schedule 2, line 11. Attach Schedule 2.....	▶ 18.			0	00
19. Income Tax. Subtract line 18 from line 17. If line 18 is greater than line 17, enter "0".....	▶ 19.			0	00



DIRECT DEPOSIT
Deposit your refund directly into your bank account! See p. 11 and complete a, b and c.

a. Routing Transit Number
c. Account Number

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

20. Enter amount of Income Tax from line 19.....	20.	0	00
21. Military Family Relief Fund. Enter your contribution amount (\$1 minimum)	▶ 21.		00
22. Children's Trust Fund. Enter your contribution amount (\$5 minimum)	▶ 22.		00
23. Children of Veterans Tuition Grant Program. Enter your contribution amount (\$2 minimum)	▶ 23.		00
24. Additional Voluntary Contributions from Form 4642, line 12. Attach Form 4642.....	24.		00
25. USE Use tax due on Internet, mail order or other TAX out-of-state purchases from Worksheet 1, line 3, p. 9.	▶ 25.		00
26. Add lines 20, 21, 22, 23, 24 and 25.....	26.	0	00

REFUNDABLE CREDITS AND PAYMENTS

27. Property Tax Credit. Attach MI-1040CR or MI-1040CR-2.....	▶ 27.	0	00
28. Farmland Preservation Credit. Attach MI-1040CR-5.....	▶ 28.	0	00
29. Qualified Adoption Expenses. Attach U.S. Form 8839 and MI-8839.....	▶ 29.	0	00
30. Stillbirth Credit. Amount from Worksheet 3, line B, p. 11.....	▶ 30.	0	00
31. a. Federal Earned Income Tax Credit..... ▶ 31a			00
b. Michigan Earned Income Tax Credit. Multiply line 31a by 20% (0.20)	▶ 31b	0	00
32. Energy Efficient Qualified Home Improvement Credit. Amount from Form 4764, line 7.....	▶ 32.	0	00
33. Michigan Historic Preservation Tax Credit (refundable). Amount from Form 3581, line 16a or 16b.....	▶ 33.	0	00
34. Michigan tax withheld from Schedule W, line 3. Attach Schedule W (do not submit W-2's).....	▶ 34.	3,577	00
35. Estimated tax, extension payments and 2008 credit forward	▶ 35.	0	00
36. Total refundable credits and payments. Add lines 27 through 30, 31b, and 32 through 35	36.	3,577	00

REFUND OR TAX DUE

37. If line 36 is less than line 26, subtract line 36 from line 26. Include interest <input type="text"/> and penalty <input type="text"/> if applicable (see p. 11)..... PAY	▶ 37.		00
38. Overpayment. If line 36 is greater than line 26, subtract line 26 from line 36	38.	3,577	00
39. Credit Forward. Amount of line 38 to be credited to your 2010 estimated tax for your 2010 tax return	▶ 39.	0	00
40. Subtract line 39 from line 38..... REFUND ▶ 40.		3,577	00

Deceased Taxpayer. If Filer and/or Spouse died after December 31, 2008, check the appropriate box below.

▶ Filer is Deceased ▶ Spouse is Deceased

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.

Filer's Signature	Date
Spouse's Signature	Date

▶ I authorize Treasury to discuss my return with my preparer. Yes No

Preparer Certification. I declare under penalty of perjury that this return is based on all information of which I have any knowledge.

▶ Preparer's PTIN, FEIN or SSN

▶ Preparer's Business Name (print or type)

Preparer's Business Address (print or type)