City of Grayling Income Tax Division PO BOX 515 Eaton Rapids, MI 48827

Form GR-1040

2019 CITY OF GRAYLING INDIVIDUAL INCOME TAX INSTRUCTIONS

For use by individual residents, part-year residents and nonresidents

ALL PERSONS HAVING GRAYLING TAXABLE INCOME IN 2019 MUST FILE A RETURN

TAX RETURNS ARE DUE APRIL 30, 2020

MAILING ADDRESSES

> Resident: 1% Nonresident: 0.5% Exemption value: \$3000

City of Grayling Income Tax Division, PO BOX 515, Eaton Rapids, MI 48827

TAX RATES
AND
EXEMPTIONS

Tax due, if one dollar (\$1.00) or more, must be paid with your return. **NOTE: If you are paying \$100.00 or more with your 2019 return, you may need to make estimated income tax payments for 2020. See page 2 of instructions**

PAYMENT OF TAX DUE Make check or money order payable to: **CITY OF GRAYLING**; or pay on our website <u>WWW.CITYOFGRAYLING.ORG</u> Mail tax return and payment to: City of Grayling Income Tax Division, PO BOX 515, Eaton Rapids, MI 48827.

We accept paper returns only. You can go to the City of Grayling website, WWW.CITYOFGRAYLING.ORG for forms and instructions. Tax returns are due April 30, 2020.

FILING YOUR RETURN

For assistance find us online at <u>WWW.CITYOFGRAYLING.ORG</u> or call (989) 348-7750. Mail all tax correspondence to: City of Grayling Income Tax Division, PO BOX 515, Eaton Rapids, MI 48827.

CONTACT US

EMAIL: GRAYLINGTAX@ISSI-CENTRAL.COM

Failure to attach documentation or attaching incorrect or incomplete documentation will delay processing of the return or result in corrections being made to the return.

2019 CITY OF GRAYLING FORM GR-1040 INSTRUCTIONS FOR RESIDENTS, NONRESIDENTS AND PART-YEAR RESIDENTS

WHO MUST FILE A RETURN

If you had Grayling taxable income greater than the total of your personal and dependency exemptions, you must file a tax return even if you did not file a federal tax return. See Exemptions schedule for more information on your allowable exemption total. You are required to file a tax return and pay tax even if your employer did not withhold Grayling tax from your paycheck. You will be required to make estimated income tax payments if you work for an employer not withholding Grayling tax from your 2020 wages.

ESTIMATED TAX PAYMENTS

When your total income tax is greater than the amount of tax withheld plus other credits by \$100 or more, you may be required to make quarterly estimated tax payments. File Form GR-1040ES (available on the Grayling website) by April 30 of the tax year and pay at least onefourth (1/4) of the estimated tax. The remaining estimated tax is due in three equal payments on June 30 and September 30 of the tax year and January 31 of the following year. Adjust the remaining quarterly payments if your income increases or decreases during the year.

Failure to make required estimated tax payments or underpayment of estimated tax will result in assessment of penalty and interest.

If you have made estimated tax payments and do not owe more tax for the year, you still must file a tax return.

DUE DATE AND EXTENSIONS

Returns are due on or before April 30, 2020. The due date of the annual income tax return may be extended for a period not to exceed six months. To apply for an extension, use the Application for Extension of Time to File an Grayling Income Tax Return. Applying for a federal extension does not satisfy the requirement for filing an Grayling extension. Application for an extension must be made and the tentative tax due must be paid (MCL 141.664). Filing an extension with payment is not a substitute for making estimated tax payments. An extension does not extend the time for paying the tax due.

File amended returns using the GR-1040. Clearly mark **AMENDED** at the top of the return. If a change on your federal return affects Grayling taxable income, you must file an amended return within 90 days of the change and pay the tax due. All schedules supporting the changes should accompany the filing. Every change must be explained. Mail amended returns to: City of Grayling, Income Tax Dept, PO BOX 549, Grayling, MI 49738.

CHARGES FOR LATE PAYMENTS

All tax payments remaining unpaid after they are due are liable to a penalty of 1% per month, not to exceed a total penalty of 25%, and bear interest at the rate of 1% above the prime rate on an annual basis. The minimum combined charge for interest and penalty is \$2.00.

DISCLAIMER

These instructions are interpretations of the Uniform City Income Tax Ordinance, MCLA 141.601 et seq. The Grayling Income Tax Ordinance will prevail in any disagreement between these instructions and the Ordinance.

COMPLETING YOUR RETURN

NAME, ADDRESS, SOCIAL SECURITY NUMBER

- · Always write your social security number(s) on the return. Your social security number must agree with the SSN on the Form(s) W-2 attached to your return.
- Enter your name and, if a joint return, your spouse's name.
- If the taxpayer or spouse is deceased: attach a copy of federal Form 1310 or a copy of the death certificate; write deceased in the signature area; and enter the date of death in the box on the signature line of return.
- Enter your current address under Present home address. If using a PO Box, or an address that is not your legal residence, you must add an attachment that states your actual residence.
- Mark the box to indicate your filing status.

RESIDENCY STATUS

Indicate your residency status by marking (X) the proper box.

Resident - a person whose domicile (principle residence) was in the City of Grayling all year. File as a resident if you were a resident the entire year.

Nonresident - a person whose domicile (principle residence) was outside the City of Grayling all year. File as a nonresident if you were a nonresident the entire year.

Part-Year Resident - a person who changed their domicile (primary residence) during the year from one inside Grayling to one outside Grayling or vice versa. If you were a resident for only part of 2019, use form GR-1040TC to calculate the tax and attach it to the GR-1040.

Married with Different Residency Status. If you were married in 2019 and had a different residency status from that of your spouse, file separate returns or file a resident return using Form GR-1040TC to compute the tax.

FILING STATUS

Indicate filing status by marking (X) the proper box. If married filing separately, enter spouse's Social Security number in the spouse's SSN box and enter the spouse's full name in the filing status box.

INCOME EXEMPT FROM GRAYLING INCOME TAX

- Grayling does not tax the following types of income:
 1 Social security, pensions and annuities (including disability pensions), Individual Retirement Account (IRA) distributions received after reaching age 591/2.
- 2. Proceeds of insurance where the taxpayer paid policy premiums. (Payments from a health and accident policy paid by an employer are taxed the same as under the Internal Revenue Code).
- 3. Welfare relief, unemployment compensation and supplemental unemployment benefits
- 4. Interest from obligations of the United States, the states or subordinate units of government of the states and gains or losses on the sales of obligations of the United States.
- 5. Military pay of members of the armed forces of the United States, including Reserve and National Guard pay.
- 6. Michigan Lottery prizes won on or before December 30, 1988. (Michigan lottery prizes won after December 30, 1988 are taxable.)
- 7. Sub-chapter S corporation ordinary business income.
- 8. City, state and federal refunds.

ITEMS NOT DEDUCTIBLE ON THE GRAYLING TAX RETURN

Grayling does not allow deductions for items such as taxes, interest, medical expenses, charitable contributions, casualty and theft losses, etc. In addition, the following federal adjustments are not deductible on the Grayling return: student loan interest, Archer MSA deduction, self-employed health insurance deduction, one-half or self employment tax, and penalty for early withdrawal of savings.

FORM GR-1040, PAGE 1, INSTRUCTIONS

TOTAL INCOME AND TAX COMPUTATION

Round all figures to the nearest dollar.

Lines 1 - 16, Columns A & B - Federal Data and Exclusions

NOTE: Schedules, attachments and other documentation that support tax withheld, exclusions, adjustments or deductions must be provided. Failure to attach or attaching incomplete supporting information will delay processing of your return or result in tax withheld, exclusions, adjustments or deductions being disallowed.

Lines 1 - 16, Column C - Figure Taxable Income

Subtract column B from column A and enter difference in column C. Support figures with schedules.

Line 17 - Total Additions

Add lines 2 through 16.

Line 18 - Total Income

Add lines 1 through 16.

Line 19 - Total Deductions

Enter the total deductions from line 7 of Deductions schedule, page 2.

Line 20 - Total Income after Deductions

Subtract line 19 from line 18.

Line 21 - Exemptions

Enter the total number of exemptions (page 2, Exemptions schedule, line 1h) on line 21a and multiply line 21a by \$3000.00 and enter the product on line 21b. You can not claim an exemption if someone else claims you as a dependent on their tax return.

Line 22 - Total Income Subject to Tax

Subtract line 21b from line 20. If line 21b is greater, enter zero.

Multiply line 22 by the appropriate tax rate to compute tax liability, and enter it on line 23b. (The resident tax rate is 1%. The nonresident rate is 0.5%.) If you were a resident for only part of the year and used Schedule TC to compute your tax, mark (X) line 23a and attach Schedule TC to the return.

Line 24a - Total Tax Withheld by Employers

The Grayling tax withheld by each of your employers is to be reported on page 2 on the Excluded Wages and Tax Withheld Schedule. Total Grayling tax withheld, line 11 of this schedule, is reported on line 24a. The Form W-2 (Wage and Tax Statement) you received from each employer shows the tax withheld in box 19 and locality name in box 20.

2019 GRAYLING GR-1040 INSTRUCTIONS FOR RESIDENTS, NONRESIDENTS AND PART-YEAR RESIDENTS

You must attach a copy of each Form W-2 showing the amount of Grayling tax withheld and the locality name as Grayling (or an equivalent indicating the tax was withheld for Grayling. Credit for Grayling tax withheld will not be allowed without a supporting Form W-2. Line 24b - Other Tax Payments

Enter the total of the following: estimated tax paid, credit forward from past year, tax paid with an extension, tax paid on your behalf by a partnership.

Line 24c - Tax Credit for Tax Paid to Another City (Residents only) Enter on line 24c the credit for income taxes paid to another city. If you had income subject to tax in another city while you were a **resident of Grayling**, you may claim this credit. The credit IS NOT NECESSARILY the tax paid to the other city. This credit must be based on income taxable by both cities, and the credit may not exceed the tax that a nonresident of Grayling would pay on the same income. Base the credit on the amount actually paid to another city, not the amount withheld.

You must attach a copy of the income tax return filed with the other city to receive this credit.

Line 24d - Total Payments and Credits

Add lines 24a through 24c. Enter the total on line 24d.

Line 25 - Interest and Penalty for Failure to Make Estimated Tax Payments; Underpayment of Estimated Tax; or Late Payment of Tax

Nonpayment or underpayment of estimated income tax and late payment of tax is subject to penalty and interest. You may calculate the amounts and enter penalty on line 25a, interest on 25b, and the total interest and penalty on line 25c or the city may calculate and assess it. Calculate estimated tax interest and penalty using Form I-2210.

TAX DUE OR REFUND

Line 26 - Tax Due and Payment of Tax

If the tax on line 23b plus the interest and penalty on line 25c exceeds the total Payments and Credits on line 24, enter the difference, the tax due, on line 26. The tax due must be paid with the return when filed. The due date for the return is April 30, 2020.

Pay by Check or Money Order. Make the check or money order payable to the CITY OF GRAYLING, place the check or money order in front of page 1 of the tax form and mail the return with the payment to: City of Grayling Income Tax Division, PO BOX 515, Eaton Rapids, MI 48827. Do not send cash for your tax payment. The tax is due at the time of filing the return.

Line 27 - Overpayment

If the total payments and credits on line 24 exceed the tax on line 23 plus the interest and penalty on line 25c, enter the difference, the overpayment, on line 27. Use lines 28 through 31 to indicate what you want done with the refund. You must file the return even if there is no tax due, no overpayment or only a slight overpayment.

Line 28 – Donation (Capital Improvement Fund, The Northern Market, Grayling Main Street)

Line 29 - Credit Forward

Enter on line 29 the amount of overpayment to credit to the next year.

Line 30 – Refund-enter on Line 30 the amount of the overpayment to be refunded by check.

Please allow 45 DAYS before calling about a refund.

FORM GR-1040, PAGE 2 INSTRUCTIONS EXEMPTIONS SCHEDULE

Complete the Exemptions schedule to report and claim the total exemptions amount allowed. Everyone who files a Grayling return gets a personal exemption of \$3000 for 2019. If someone else claims you as a dependent on their tax return, you CAN NOT claim a personal exemption. Lines 1a - 1c - You and Spouse. Enter your date of birth and mark (X) the exemption boxes that apply to you. If filing jointly, complete line 1b for spouse. If you are age sixty-five or older or you are blind, you get an additional exemption. Mark (X) the boxes that apply, and enter on line 1e the total number of exemption boxes marked.

Lines 1d – Dependents. Determine dependents using the same rules as on the federal return. If you cannot claim a dependent on the federal return, you cannot claim them on an Grayling return. Enter the names of your dependent children that live with you, then the names of other dependents and their relationship to you. Provide dependents' Social Security numbers and dates of birth. Enter totals on 1f and 1g.

Lines 1e - 1h – Total Exemptions. Add the amounts on 1e, 1f and 1g, and enter the total exemptions on line 1h and on page 1, line 21a.

EXCLUDED WAGES SCHEDULE

If any wages reported on page 1, line 1, column A, are not taxable, the Excluded Wages schedule must be completed. The data to complete this schedule comes from the Wages and Excludible Wages schedule.

DEDUCTIONS SCHEDULE

You may deduct amounts that directly relate to income that is taxable by Grayling, prorating where necessary. Allowable deductions include the following line number items:

Line 1 – Individual Retirement Account (IRA) Contributions
Contributions to an IRA are deductible to the same extent deductible
under the Internal Revenue Code. Attach page 1 & 2 of federal return
and evidence of contribution, which includes, but is not limited to,
one of the following: a copy of receipt for IRA contribution, a copy of
federal Form 5498, a copy of a cancelled check that clearly indicates it
is for an IRA contribution. ROTH IRA contributions are not deductible.

Line 2 – Self-Employed SEP, SIMPLE and Qualified PlansSelf-employed SEP, SIMPLE and qualified retirement plan deductions may be entered on page 2, Deductions schedule, line 2.

Line 3 - Employee Business Expenses

Employee business expenses are deductible only when incurred in the performance of service for an employer and only to the extent not reimbursed by the employer. Meal expenses are not subject to the reductions and limitations of the Internal Revenue Code. Under the Grayling Income Tax Ordinance meals must be incurred while away from home overnight on business.

BUSINESS EXPENSES ARE LIMITED TO THE FOLLOWING:

- A. Expenses of transportation, but not to and from work.
- B. Expenses of travel, meals and lodging while away from home overnight on business for an employer.
- C. Expenses incurred as an "outside salesperson" away from the employer's place of business. This does not include driversalesperson whose primary duty is service and delivery.
- D. Expenses reimbursed by employer from an expense account or other arrangement if included in gross earnings.

NOTE: Business expenses claimed on line 4 of fed. Form 2106 are not allowed unless taxpayer qualifies as an outside salesperson.

Attach a copy of federal Form 2106 or a list of your employee business expenses.

Line 4 – Moving Expenses

Moving expenses for moving <u>into</u> the Grayling area are deductible to the same extent deductible under the Internal Revenue Code. Moving must be related to starting work in a new location. Attach a copy of federal Form 3903 or a list of moving expenses, with the distance in miles from where you moved.

Line 5 - Alimony Paid

Separate maintenance payments, alimony, and principal sums payable in installments (to the extent includable in the spouse's or former spouse's adjusted gross income under the federal Internal Revenue Code) and deducted on the federal return are deductible. Child support is not deductible. Attach a copy of federal return, page 1 & 2.

NOTE: The above deductions are limited to the amount claimed on your federal return, except meals. The deductions are limited by the extent they apply to income taxable under the Grayling Income Tax Ordinance. Part-year residents must allocate deductions the same way they allocate income.

Line 6 - Renaissance Zone - NOT APPLICABLE

Line 7 - Total Deductions

Add lines 1 through 6. Enter the total on line 7 and on page 1, line 19. ADDRESS SCHEDULE

Every taxpayer must complete the Address schedule. Start by listing the address used on last year's return. If this address is the same as listed on page 1, write "Same." If no 2018 return was filed provide reason none was filed. Complete the schedule by listing the addresses of the other principal residences (domiciles) occupied during 2019. Mark whether the address was for the taxpayer (T), spouse (S) or both (B) and enter the beginning and ending dates of residence at each.

2019 GRAYLING GR-1040 INSTRUCTIONS FOR RESIDENTS, NONRESIDENTS AND PART-YEAR RESIDENTS

THIRD-PARTY DESIGNEE

To allow another person to discuss the tax return information with the Income Tax Department, mark (X) the "Yes" box and enter the person's name, phone number and any five digits as their personal identification number (PIN). To designate the tax preparer, enter "Preparer."

SIGN THE RETURN

You must sign and date the return. If filing a joint return, both spouses must sign and date the return. If someone else prepared the return, they must sign it and provide their address and telephone number.

PART-YEAR RESIDENT INSTRUCTIONS

If you had income taxable as a resident <u>and</u> as a nonresident during the year, you must file as a part-year resident. Part-year residents compute the amount of their tax on Schedule TC, which has multiple tax rates. Complete the form using the instructions on the Schedule TC.

Income is allocated according to the residency status for each item of income. Adjustments and deductions must be allocated in the same

way income is allocated. Use the instructions for residents and non-residents as a guide to allocate income.

Schedule TC and other Grayling tax forms are available on the Grayling website: WWW.CITYOFGRAYLING.ORG To have a form mailed to you call (989) 348-7750.

RESIDENT INSTRUCTIONS

Line 1 - Wages, Salaries, Tips, Etc.

Report on line 1, column A, the amount of wages, salaries, tips, etc. from your federal tax return.

Pages 1 & 2 of the federal tax return must be attached to all resident tax returns. All W-2 forms showing wages and Grayling tax withheld must be attached to page 1 of the return.

A resident is taxed on **ALL** earnings, including salary, bonus, separation, and incentive payments, tips, commissions and other compensation for services rendered—no **matter where earned.** Example: Taxpayer lives in the City of Grayling but works in Grayling and receives a paycheck from the home office in New York City: 100% of this compensation is taxable.

If your employer did not withhold Grayling tax from your paycheck, you are still required to file and pay tax on those wages at the resident tax rate. You will also be required to make estimated tax payments if your employer does not withhold Grayling tax for you in 2020.

Report on line 1, column B, the total excluded wages. All nontaxable wages must be documented on the Wages, Excludible Wages, and City Tax Withheld schedule and listed by employer on the Excluded Wages schedule on Form 1040, page 2. A resident's wages are generally not excludible. An example of excludible (nontaxable) resident wages is military pay.

Line 2 - Interest

Interest is taxable to the same extent on the federal return except for interest from U.S. Bonds, Treasury Bills, Treasury notes and flow through interest income from a tax option corporation (S corporation, Etc.).

Report the amount of taxable interest income from federal 1040, on line 2, column A. Report on line 2, column B, interest from U.S. Bonds and Treasury Bills and notes; document this excluded interest on the Excludible Interest Income schedule. Document the excluded interest on the Excludible Interest Income schedule.

Line 3 - Dividends

Dividends are taxable. Report on line 3, column A, the total amount of dividend income from the federal return. Report on line 3, column B, excludible dividends from U.S. Bonds, Treasury Bills, Treasury notes and tax option corporations (S corporations, etc.). Document the excluded dividends on the Excludible Dividend Income schedule.

Line 4 - Taxable Refunds, Credits or Offsets

NOT TAXABLE. Exclude all. No explanation needed.

Line 5 - Alimony Received

Alimony received is taxable. Report on line 5, columns A and C, the amount of alimony received as reported on the federal return.

Line 6 - Business Income

All self-employment income is taxable regardless of where the business is located. Report on line 6, columns A and C, the total business income from the federal return. **Attach a complete copy of federal Schedule** C. Federal rules concerning passive losses are applicable to losses deducted on a Grayling return.

Line 7 - Capital Gain or (Loss

The Uniform City Income Tax Ordinance follows the Internal Revenue Code regarding capital gains. All capital gains realized while a resident are taxable regardless of where the property is located, with the following exceptions:

- Capital gains on sales of obligations of the United States and subordinate units of government.
- The portion of the capital gain or loss on property purchased prior to the inception of the Grayling income tax ordinance that is attributed to the time before inception ordinance.
- Capital loss carryovers that originated prior to the taxpayer becoming a resident of Grayling are not deductible.

Capital losses are allowed to the same extent they are allowed under the Internal Revenue Code and limited to \$3,000 per year. Unused net capital losses may be carried over to future tax years. The capital loss carryover for Grayling may be different than the carryover for federal income tax purposes.

Deferred capital gain income from installment sales and like-kind exchanges are taxable in the same year reported on the taxpayer's federal income tax return.

Flow through income or loss from a tax option corporation (S corporation, etc.) reported on federal Sch. D is excludible income. Attach copies of federal Sch. K-1 (Form 1120S.

Residents reporting capital gains or losses must attach a copy of federal Schedule D.

Excluded capital gains must be explained by completing and attaching the Exclusions and Adjustments to Capital Gains or (Losses) schedule.

Line 8 - Other Gains or (Losses

Other gains or losses are taxable to the extent that they are taxable on the federal 1040. Other gains and losses realized while a resident are taxable regardless of where the property is located, except the portion of the gain or loss on property purchased prior to the inception of the Grayling Income Tax Ordinance.

Deferred other gains from installment sales and like-kind exchanges are taxable in the year recognized on the federal income tax return. Deferred gains must be supported by attaching a copy of federal Form 6252 and/or Form 8824.

Residents reporting other gains and losses must attach a copy of federal Form 4797.

Flow through income or loss from an S corporation reported on federal Form 4797 of a resident is excludible. **Attach copies of federal Schedule K-1 (Form 1120S).**

Use the Exclusions and Adjustments to Other Gains or (Losses) schedule to compute exclusions and adjustments to other gains and losses reported on your federal income tax return.

Line 9 - IRA Distributions

In column A enter the IRA distributions reported on federal Form 1040 or Form 1040A. Premature IRA distributions (Form 1099-R, box 7, distribution code 1) and IRA distributions made to a decedent's beneficiary other than the decedent's spouse (Form 1099-R, box 7, distribution code 4) are **taxable**.

Exclude in column B, IRA distributions qualifying as retirement benefits: IRA distributions received after age $59\frac{1}{2}$ or described by Section 72(t) (2) (A)(iv) of the IRC and all other excludible IRA distributions. The

Exclusions and Adjustments to IRA Distributions schedule is used to document excluded IRA distributions.

The conversion of a traditional IRA to a ROTH IRA is taxable to a resident (Form 1099-R, box 7, Distribution Code, G) unless the individual making the conversion is 59 $\frac{1}{2}$ years old or older at the time of the conversion distribution.

2019 GRAYLING FORM GR-1040 INSTRUCTIONS FOR RESIDENTS, NONRESIDENTS AND PART-YEAR RESIDENTS

Line 10 - Taxable Pension Distributions

Enter on line 10, column A, pension and annuities reported on federal Form 1040 or Form 1040A. Excluded pension and retirement benefits are reported on line 10, column B and explained on the **Exclusions and Adjustments to Pension Distributions** schedule. Pension and retirement benefits from the following are **not** taxable:

- Pension plans that define eligibility for retirement and set contribution and benefit amounts in advance;
- 2. Qualified retirement plans for the self-employed;
- Benefits from any of the previous plans received on account of disability or as a surviving spouse if the decedent qualified for the exclusion at the time of death:
- 4. Distributions from a 401(k) or 403(b) plan attributable to employer contributions or attributable to employee contributions to the extent they result in matching contributions by the employer;
- 5. Benefits paid to an individual from a retirement annuity policy that has been annuitized and paid over the life of the individual.

Pension and retirement benefits from the following are taxable:

- Premature pension plan distributions (those received prior to qualifying for retirement);
- Amounts received from deferred compensation plans that let the employee set the amount to be put aside and do not set retirement age or requirements for years of service. These plans include, but are not limited to, plans under IRC Sections 401(k), 457 and 403(b):
- Amounts received before the recipient could retire under the plan provisions, including amounts paid on separation, withdrawal or discontinuance of the plan;
- Amounts received as early retirement incentives, unless the incentives were paid from a pension trust;
- Benefits paid from a retirement annuity policy other than annuitized benefits paid over the life of the individual are taxable to the same extent taxable under the Internal Revenue Code.

Report taxable pension and retirement income on line 10, column C.

Line 11 - Rental Real Estate, Royalties, S Corporations, Partnerships, Royalties, Estates, Trust, Etc.

All income reported on federal Schedule É is taxable. A resident's share of an S corporation's flow through income is taxable to the same extent and on the same basis the income is taxable under the Internal Revenue Code. Report this income on line 11, columns A and C.

Line 12 - Tax Option Corporation Distributions (S corporation

Distributions received by a resident from a tax option corporation's Accumulated Adjustments Account, Other Adjustments Account and/or the Shareholder's Undistributed Taxable Income Previously Taxed Account (federal Form 1120S, Schedule M-2, line 7) are income on a Grayling return and are to be reported on this line. These distributions are found on federal Schedule K-1 (1120), line 16. Report these distributions on the Adjustments for Subchapter S Corporation Distributions schedule. Also attach copies of federal Schedule K-1 (Form 1120S.

Line 13 - Farm Income or (Loss

Profit or loss from the operation of a farm is taxable as reported on the federal return regardless of where the farm is located. There are no exclusions. Attach a complete copy of federal Schedule F.

Line 14 - Unemployment Compensation

NOT TAXABLE. Exclude all. No explanation needed.

Line 15 - Social Security Benefits

NOT TAXABLE. Exclude all. No explanation needed.

Line 16 - Other Income

Other income reported on the resident's federal return is taxable except for income from recoveries related to federal itemized deductions from prior tax years. Report on this line a net operating loss carryover from the previous tax year. Report exclusions and adjustments on p. 2, using the Exclusions and Adjustments to Other Income schedule.

Line 17 — Total Additions

Add lines 2 through 16. of each column and enter amounts on line 17.

Line 18 - Total Income

Add lines 1 through 16 of each column and enter amounts on line 18.

Line 19 - Deductions

Enter amount from Deductions schedule, page 2, line 7.

NONRESIDENT INSTRUCTIONS

NONRESIDENT INCOME SUBJECT TO TAX:

- Compensation for work done or services performed in Grayling, which includes, but is not limited to, the following: salaries, wages, bonuses, commissions, fees, tips, incentive payments, severance pay, vacation pay and sick pay.
- Net profits from the operation of an unincorporated business, profession or other activity attributable to business activity conducted in Grayling, whether or not such business is located in Grayling. This includes business interest income from business activity in Grayling.
- Gains or losses from the sale or exchange of real or tangible personal property located in Grayling.
- 4 Net profits from the rental of real or tangible personal property located in Grayling.
- Premature distributions from an Individual Retirement Account (IRA) where a deduction was claimed on a current or previous year's Grayling income tax return.
- Premature distributions from a pension plan attributable to work performed in Grayling.
- 7. Deferred compensation earned in Grayling.

Line 1 - Wages, Salaries, Tips, Etc.

All wages of a nonresident are to be reported on the Wages, Excludible Wages and City Tax Withheld schedule. The total wages from line 15 of this schedule is the amount reported on Form GR-1040, page 1, line 1, column A. The total wages should be the same as the wages reported on your federal tax return (Form 1040, Form 1040A or Form 1040EZ).

All W-2 forms showing income earned in Grayling and/or tax withheld for Grayling must be attached to the return.

Report on page 1, line 1, column B, the total excluded wages from Line 16 of the Wages, Excludible Wages and City Tax Withheld schedule. All excluded wages must be documented on the Wages, Excludible Wages and City Tax Withheld schedule and listed, by employer, on the Excluded Wages schedule on Form GR-1040, page 2. On the Wages, Excludible Wages and City Tax Withheld schedule, lines 13 and 14, enter the reason the wages are excludible and the address of the work station where you performed the work for the employer.

Do not use box 18 of W-2 form to report taxable wages or to allocate wages, use all wages reported on your federal return as the allocation basis. A separate wage allocation must be completed for each employer. Wages are normally allocated using the actual number of days or hours worked in and outside of Grayling during the tax year for an employer. Vacation time, sick time and holidays are not included in total days worked in arriving at the wage allocation percentage. Vacation pay, holiday pay, sick pay, bonuses, severance pay, etc. are taxable to same extent as normal earnings.

100% Earned in Grayling. All wages, salaries, tips, sick pay, bonuses, deferred compensation, severance pay, and other compensation (Form W-2, boxes 1 and 8) is taxable to nonresidents who worked 100% of the time in Grayling.

Wage Allocation. Nonresidents who performed only part of their services for an employer in the City of Grayling must allocate their wages. Use the Nonresident and Part-Year Resident Wage Allocation section of the Wages, Excludible Wages and City Tax Withheld schedule.

Wage Allocations on Commissions, Etc. A nonresident salesperson paid on a commission basis or other results achieved should allocate wages based on commissions received or other results achieved attributable to efforts expended in Grayling. A nonresident insurance salesperson paid sales commissions and renewal commissions should allocate compensation on the following basis: Allocate commissions from life, health, accident and vehicle (auto) insurance based on the location (residence) of the purchaser. Allocate commissions from group insurance based on the location of the group. Allocate commissions from fire and casualty insurance based on the location of the risk insured.

2019 GRAYLING FORM GR-1040 INSTRUCTIONS FOR RESIDENTS, NONRESIDENTS AND PART-YEAR RESIDENTS

Line 2 - Interest

Non-business interest income of a nonresident is not taxable. Exclude all non-business interest income. No explanation needed.

Interest income that is business income from business activity in Grayling is taxable and must be reported. Attach a schedule showing source and computation of taxable and nontaxable interest income.

Line 3 - Dividends

NOT TAXABLE. Exclude all dividend income. No explanation needed.

Line 4 - Taxable Refunds, Credits or Offsets

NOT TAXABLE. Exclude all. No explanation needed.

Line 5 - Alimony Received

NOT TAXABLE. Exclude all. No explanation needed.

Line 6 - Profit or (Loss from a Business, Etc.

Profit or loss from the operation of a business or profession is taxable to the extent it results from work done, services rendered or other business activities conducted in Grayling. Report on page 1, line 6, column A, business income reported taxable on your federal return.

The Exclusions and Adjustments to Business Income schedule is used to exclude business income. The total excluded business income from line 5 of this schedule is also entered on page 1, line 6, column B. If a business operates both in and outside of Grayling, the taxable profit or loss is determined using the three factor Business Allocation formula.

Where no work is done, services rendered or other business activity is conducted in Grayling, the profit or loss is entirely excluded. Complete the Exclusions and Adjustments to Business Income schedule to exclude profit or loss from the operation of a business.

A Grayling net operating loss carryover from the previous tax year is reported on page 1, line 16, column C. See instructions for line 16.

Line 7 - Capital Gains or (Losses

Capital gains or losses of a nonresident are included in taxable income to the extent the gains or losses are from property located in Grayling. Capital losses from property located in Grayling are allowed to the same extent they are allowed under the Internal Revenue Code. Unused capital losses may be carried over to future tax years. The capital loss carryover for Grayling may be different than the carryover for federal income tax purposes.

Deferred capital gain income from installment sales and like-kind exchange of property located in Grayling are taxable in the year recognized on the taxpayer's federal income tax return.

Flow through income or loss from a tax option corporation (S corporation, etc.) reported on a nonresident's federal Schedule D is excluded on the Exclusions and Adjustments to Capital Gains or (Losses) schedule Attach copies of federal Schedule K-1 (Form 1120S.

Use the Exclusions and Adjustments to Capital Gains or (Losses) schedule to compute exclusions and adjustments to capital gains. **NOTE:** A common error on a nonresident return is failure to complete the Exclusions and Adjustments schedule to exclude the capital loss carryover reported on the taxpayer's federal income tax return.

Line 8 - Other Gains or (Losses

A nonresident's other gains and losses are included in taxable income to the extent the gains or losses are from property located in Grayling. Deferred other gains and losses from installment sales and like-kind exchanges of property located in Grayling are taxable in the year recognized on the taxpayer's federal income tax return. Deferred other gains must be supported by attaching a copy of federal Form 6252 and/or Form 8824.

Flow through income or loss from a tax option corporation (S corporation, etc.) reported on federal Form 4797 is excluded on the Exclusions and Adjustments to Other Gains and (Losses) schedule. Attach copies of federal Schedule K-1 (Form 1120S.

Nonresidents reporting other gains and losses must attach a copy of federal Form 4797. Use the Exclusions and Adjustments to Other Gains and Losses schedule to compute exclusions and adjustments to other gains and losses reported on the federal income tax return. On line 4 of the schedule enter the total excluded other gains or losses and also enter this total on page 1, line 8, column B.

Line 9 – IRA Distributions

That portion of a premature IRA distribution that was deducted from Grayling's taxable income in the current or a prior tax year (reported on Form 1099-R, box 7, distribution code 1) are taxable to a nonresident. IRA distributions received after age 59 $\frac{1}{2}$ or described by Section 72(t)(2)(A)(iv) of the IRC are not taxable.

Line 10 - Taxable Pension Distributions

Premature pension plan distributions (those received by a nonresident prior to qualifying for retirement) are taxable to the same extent the normal wages from the employer are taxable.

A nonresident remaining employed by the particular employer in Grayling may not exclude amounts received from deferred compensation plans that let the employee set the amount to be put aside and do not set retirement age or requirements for years of service. These plans include, but are not limited to, plans under Sections 401(k), 457 and 403(b) of the Internal Revenue Code (IRC): Amounts received before the recipient could retire under the plan provisions, including amounts paid on separation, withdrawal or discontinuance of the plan. Amounts received as early retirement incentives, unless the incentives were paid from a pension trust. See Line 10 under "Residents" for additional information on nontaxable pension and retirement benefits. Excludible pension distributions are listed on the Exclusions and Adjustments to Pension Income schedule. Enter the total excluded pension distributions on the last line of the schedule and also enter the amount on page 1, line 10, column B.

Line 11 – Rental Real Estate, Royalties, Partnerships, S Corporations, Estates, Trusts, Etc.

All income reported on the federal Schedule E that comes from business activity in Grayling or property located in Grayling is taxable to nonresidents. When an estate or trust has taxable income in Grayling, the estate or trust must file a return and pay tax on distributions to nonresidents and on undistributed taxable income.

The following income reported on federal Schedule E is excludable: income from business activity or property outside Grayling; tax option corporation (S corporation, etc.) flow through income or loss reported on Schedule E; and income from estates and trusts.

Explain all exclusions on the Exclusions and Adjustments to Income from Rental Real Estate, Royalties, Partnerships, S Corporations, Trusts, Etc. schedule. On line 6 of this schedule enter the total exclusions and adjustments; enter also on page 1, line 11, column B.

Line 12 – Subchapter **S** Corporation Distributions None of these distributions are taxable to a nonresident.

Line 13 - Farm Income or (Loss)

A nonresident's profit or loss from a farm are included in Grayling income to the extent the profit or loss results from work done, services rendered or other activities conducted in Grayling. The portion of the profit or loss reported on Grayling return is determined by use of the three factor Farm Allocation Percentage formula. Where no work is done, services rendered or other business activity is conducted in Grayling, the entire farm profit or loss is excluded, using the Exclusions and Adjustments to Farm Income schedule.

Sales of crops at the produce market, any of the farmer's markets or a produce stand located in the city is Grayling business activity and subjects the farm to Grayling income tax.

Line 14 – Unemployment Compensation

NOT TAXABLE. Exclude all. No explanation needed.

Line 15 - Social Security Benefits

NOT TAXABLE. Exclude all. No explanation needed.

Line 16 - Other Income

Other income is taxable if it is from work performed or other activities conducted in Grayling. Use the Exclusions and Adjustments to Other Income schedule to document exclusions and adjustments. Report on this line a Grayling-related net operating loss carryover from the previous tax year.

Line 17 - Total Additions Add lines 2 through 16

Line 18 - Total Income

Add lines 1 through 16 of each column and enter amounts on line 18.

Line 19 - Total Deductions

Enter amount from Deductions schedule, page 2, line 7. A nonresident's deductions are limited by the extent they relate to income taxable under the Grayling Income Tax Ordinance. Nonresidents must allocate deductions the same way related income is allocated. See Deductions schedule (page 2 instructions) for a list of allowable deductions

INDIVIDUAL RETURN DUE APRIL 30, 2020

Taxpayer's S	SN		Taxpayer's fir	rst name	;	Initia	l Last name	•			R	ESIDE	NCE	STATUS		
												Reside	nt	Nonresident		Part-year resident
Spouse's SS	N		If joint return	spouse'	s first name	Initia	l Last name	•			Pai	 rt- <u>yea</u> r resi	dent - d	dates of residency		
											From	1				
Mark (X) box	if d	deceased	Present home	e addres	ss (Number and	street)				Apt. no.	То					
Тахр	ayeı	r Spouse									F	ILING :	STAT	rus		
		ath on page 2, right	Address line	2 (P.O.	Box address for	mailing us	e only)					Single		Married filing	jointly	
side of the si	gnai	ture area										— Married	filings	separately. Enter s	nouse's	
Mark box (X)	bel	ow if form attached	City, town or	post offi	ce			State	Zip code			SSN in	Spous	e's SSN box and S		full
Fede	ral F	Form 1310										name h	ere.			
Cunr	ortin	ng Notos and	Foreign coun	try name	e	Foreign pr	rovince/county	٧	Foreign po	stal code						
		ng Notes and nts (Attachment 22)										Spouse's f	ull nam	ne if married filing	separatel	ıy
	IN				O NEAREST D 0.50 and increase			Column A			Columi			Colur		
		- '			0.99 to next dolla		Fede	ral Returr	Data	Exclu	sions/Ad	justments		Taxable	Income	
SEND	1.	Wages, salaries, tips	, etc. (W-2 for	ms mus	t be attached)	1			.0	0			.00			.00
COPY OF	2.	Taxable interest				2			.0	0			.00			.00
PAGE 1 & 2 OF	3.	Ordinary dividends				3			.0	0			.00			.00
FEDERAL RETURN	4.	Taxable refunds, cred	dits or offsets o	of state a	and local income	taxes 4			.0	0			.00	NOT TA	XABLE	
KETUKN	5.	Alimony received				5			.0	0			.00			.00
	6.	Business income or (loss) (Attach c	opy of fe	ederal Schedule	e C) 6			.0	0			.00			.00
	7.	Capital gain or (loss)			Mark if federal											
		(Attach copy of fed. S	Sch. D) 7a.		Sch. D not requ	ired 7			.0	0			.00			.00
	8.	Other gains or (losses	s) (Attach copy	y of fede	eral Form 4797)	8			.0	0			.00			.00
	9.	Taxable IRA distributi	ions (Attach co	opy of Fo	orm(s) 1099-R)	9			.0	0			.00			.00
	10.	Taxable pensions and	d annuities (At	tach cor	by of Form(s) 10	99-R) 10			.0	0			.00			.00
	11.	Rental real estate, ro														
		trusts, etc. (Attach co	py of federal S	3chedule	; E)	11			.0	0			.00			.00
	12.	Subchapter S corpora	ation distributio	ons (Att.	copy of fed. Scl	n. K-1) 12	NOT	T APPLICA	BLE				.00			.00
	13.	Farm income or (loss) (Attach copy	of feder	al Schedule F)	13			.0	0			.00			.00
SEND W-2	14.	Unemployment compo	ensation			14			.0	0			.00	NOT TA	XABLE	
FORMS	15.	Social security benefi	its			15			.0	0			.00	NOT TA	XABLE	
	16.	Other income (Attach	statement listi	ing type	and amount)	16			.0	0			.00			.00
	17.	Total addition	ns (Add lines 2	through	າ 16)	17			.0	0			.00			.00
	18.	Total income	(Add lines 1 th	rough 1	16)	18			.0	0			.00			.00
	19.	Total deduction	ons (Subtraction	ons) (To	otal from page 2,	Deduction	s schedule, li	ne 7)					19			.00
	20.	Total income	after deduction	ns (Subt	tract line 19 fron	n line 18)							20			.00
	21.				ons, from Form			h, on line 2	1a and				L			
		· m	ultiply this nun	nber by	\$3000 and ente	r on line 21	D)				21a		21b			.00
	22.	Total income	subject to tax	(Subtrac	ct line 21b from	ine 20)							22			.00
	23.	IAX ' '			nt tax rate of 1% to compute tax.	. ,							L			
		Payments			•					for tax paid	23a		23b			.00
	24.	and	GR tax withh			, partnershi	ents (est, exter ip & tax option	_	to a	nother city	00	Total payments	-			
		credits 24a Interest and penalty for	for: failure to m		.00 24b		.0	0 24c			00	& credits Total	24d			.00
	25.	estimated tax paymer	nts; underpaym	ment of	05-	in	terest	0.54		Penalty	00	interest &	ا -			
ENO. 00E		estimated tax; or late			25a ines 23b and 2	25c and s	.0. Subtract line	-	F CHECK		00	ponany	25c			.00
ENCLOSE CHECK OR	T/	AX DUE 26. MON	NEY ORDER	PAYAB	LE TO: CITY (OF GRAYL	JNG (X) pay	tax due,	line 31b,	and		WITH	26			
MONEY ORDER		VERPAYMENT	plete lines 31c			00h		04-1)			KE	TURN	26			.00
OKDEK	0	Amount of		. ,	ment (Subtract I			ne 240)	Gravling	g Main Street			27			.00
	28.	overpayment	Capital Improve	ment Ft		The North	ern Market	0 200	Craying	-		otal onations	28d			00
	20	donated 28a	ant avaditad fo	muond to	.00 28b		.0	0 28c			00					.00.
	29.	Amount of overpayme	ziii credited 101	waiu (0	2020					Amount	or creat	to 2020 >>	- 29			.00
	30	Amount of overpayme	ent refunded (I	ine 27 I	ess lines 28d ar	nd 29)					Refund a	mount >>	30			.00
	50.	ount or overpaying	romineu (L	21 1	SSS IIIICS ZOU di	20)					r veruilu d	mount //	50			.00
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GR-	GR-1040, PAGE 2						Taxpayer's SSN					1	9MI-0	GR-	1040	-2		
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	MPTIONS				Date of birth (mm	/dd/yyyy)		Regular	65 or over		Blind	Deaf	Disabl	led	1e. Enter	tho nu	mhor of	
SCH	IEDULE	1a. \ 1b. S	ou Spouse												boxe	s check 1a and	ed on	
1d. Li	st Dependents	1c.	C	heck box	x if you can be clai	med as a de	pendent on an	other perso	on's tax return	n								
#	First Name			L	ast Name		Social Security	y Number	Re	elati	onship	D	ate of Bir	th		numbe		
1.																ndent c on line		
2.																		
3.															_		er of other	
4.															line 1		listed on	
5.																		
6.																	tions (Add	
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8.																1, line		
EXC	LUDED W	4GE	ES ANI) TAX	WITHHELD	SCHE	DULE (Se	e instru	uctions. R	Res	sident wag	ges ge	nerally	not e	xcluded)		•
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# 1	or S I		V-2, box a		(Form W-2,		_		AGES /ages Sch)		FAILUR	E TO			, box 19)		CALITY NA rm W-2, bo	
1.					,	,	,		.00)	ATTACH		,		.00			
2.									.00	-	FORMS TO 1 WILL D				.00			
3.									.00	-	PROCESS				.00			
4.									.00	-	RETURN.				.00			
5.									.00	-	INFORMA STATEM				.00			
6.									.00	-	PRINTED				.00			
7.									.00	-	TAX				.00			
8.									.00	-	PREPARA SOFTWAR				.00			
9.									.00	-	NOT ACCE				.00			
10.									.00	-					.00			
11. T	otals (Enter here	and o	on page 1;	part-yr re	esidents on Sch To	C)				_	< Enter on pg	1,ln 1, col	В		.00	<< E	nter on pg 1	, In 24a
DED	UCTIONS	SCI	HEDUL	E (Se	e instruction	s: dedu	ctions allo	cated o	n the sar	me	basis as	related	d incor	ne)	D	EDUC	TIONS	
					of federal return &									1				.00
2. S	elf-employed SE	P, SII	MPLE and	qualified	plans (Attach cop	y of Schedu	ıle 1 of federal ı	return)						2				.00
3. E	mployee busines	s exp	enses (S	ee instrud	ctions and attach o	opy of feder	al Form 2106)							3				.00
4. N	loving expenses	(Into	city area	only) (Att	ach copy of federa	al Form 3903	3)							4				.00
5. A	limony paid (DO	NOT	INCLUDE	CHILD	SUPPORT. Attac	n copy of Sc	hedule 1 of fed	eral return	1)					5				.00
6. R	enaissance Zone	- NC	OT APPLIC	ABLE										6		X	XXXXXXX	00. xx
7.	Total deducti	ons (Add line 1	through l	ine 6, enter total h	ere and on p	age 1, line 19)							7				.00
ADD	RESS SCH	IED	ULE (\	Nhere	taxpayer (T), spous	e (S) or bo	oth (B)	resided o	dur	ring year a	and da	tes of	reside	ncy)			
MAR					ses (Include city, syear's return, prin										FRC	M	TC)
T, S,					ge 1 of this return i										MONTH	DAY	MONTH	DAY
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	RD PARTY				45		. 0#:0	<u> </u>	/ ! :		. f=0?	_	NI-					
Do you	want to allow an	otner	person to	aiscuss	this return with the	income (a)	COffice?	Y	Yes, complete	_			No					
Design name	ee's									Pł	hone				nal identifica er (PIN)	ition		
anic	Under the ner	naltv	of periur	/. I decla	are that I have ex	camined th	is return and	accomna	anving scher			nents ar	nd to the		, ,	edge a	nd belief it	is
	true, correct a	nd c	omplete.	If I am	a resident claim	ing a credi	t for taxes pai	id to anot	her city, I ac	ckn	owledge and	consent	to the C	City's ve	rification of	unref	ınded	0
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ω ···	SIGNATURE OF I	PREP	ARER OTHE	R THAN	TAXPAYER						Date (MM/DD/Y	Y)	PTIN.	EIN or SS	N			
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PREPARER'S SIGNATURE	FIRM'S NAME (or	yours	if self-empl	oyed), ADI	DRESS AND ZIP CO	DE					I			NACT		<u> </u>		
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														numbe	51	1		

Taxpayer's name	Taxpayer's SSN	2019 GRAYLING	
SCHEDULE TC, PART-YEAR RESIDENT TAX CA	LCULATION - GR-10	40, PAGE 1, LINES 23a AND 23b	Attachment 1

A part-year resident is required to complete and attach this schedule to the city return:

- 1. Box A to report dates of residency of the taxpayer and spouse during the tax year
- Box B to report the former address of the taxpayer and spouse
 Column A to report all income from their federal income tax return
- 4. Column B to report all income taxable on their federal return that is not taxable to the city
- 5. Column C to report income taxable as a resident and compute tax due on this income at the resident tax rate

6. Column D to report inc A. PART-YEAR RESIDEN		From	To To			ome at the nonresident	
Taxpayer				Taxpayer			
Spouse				Spouse			
Сроисс		Colu	mn A	Column B		Column C	Column D
INCOME		Federal R	eturn Data	Exclusions and Adjustmen	nts	Taxable Resident Income	Taxable Nonresident Income
1. Wages, salaries, tips, etc. (Attach	Form(s) W-2) 1		.00		.00	.00	.00
2. Taxable interest	2		.00		.00	.00	NOT TAXABLE
Ordinary dividends	3		.00		.00	.00	NOT TAXABLE
Taxable refunds, credits or offsets	4		.00		.00	NOT APPLICABLE	NOT TAXABLE
5. Alimony received	5				.00	.00	.00.
6. Business income or (loss) (Att. co	py of fed. Sch. C) 6		.00		.00	.00	.00
7. Capital gain or (loss) 7a (Att. copy of Sch. D)	Mark if Sch. D not 7l		.00		.00	.00	.00
Other gains or (losses) (Att. copy			.00		.00	.00	.00
Taxable IRA distributions		_	.00		.00	.00	.00
Taxable pensions and annuities (A			.00		.00	.00	.00
			.00		.00	.00	.00
Rental real estate, royalties, partner trusts, etc. (Attach copy of fed. Sc.)			.00		.00	.00	.00
12. Subchapter S corporation distribut of federal. Schedule K-1)		NOT APF	PLICABLE		.00	.00	.00
13. Farm income or (loss) (Att. copy of			.00		.00	.00	.00
14. Unemployment compensation	14	_	.00		.00	NOT APPLICABLE	NOT TAXABLE
15. Social security benefits	15		.00		.00	NOT APPLICABLE	NOT TAXABLE
16. Other income (Att. statement listin	g type and amt) 16		.00		.00	.00	.00
17. Total additions (Add lines 2	2 through 16) 17		.00		.00	.00	.00
18. Total income (Add lines 1 to	hrough 16) 18	i	.00		.00	.00	.00
DEDUCTIONS SCHEDU	LE See instruction	ns. Deductions mu	st be allocated on t	ne same basis as related inc	ome.		
IRA deduction (Attach copy federal return & evidence or content or conte	of page 1 of f payment) 1		.00		.00	.00	.00
Self-employed SEP, SIMPL plans (Attach copy of page	E and qualified 1 of fed. return)		.00		.00	.00	.00
3. Employee business expens instructions & att. copy of fe	ses (See ed. Form 2106)					.00	.00
4. Moving expenses (Into city (Attach copy of federal For	/ area only) m 3903) 4		.00		.00	.00	.00
5. Alimony paid (DO NOT INC SUPPORT. (Att. copy of pa	CLUDE CHILD age 1 of fed. return) 5		.00		.00	.00	.00
Renaissance Zone deduction	on-not applicable 6					.00	.00
19. Total deductions (Add lines					19	.00	.00
20a. Total income after deduction		om line 18)			20a	.00.	.00
20b. Losses transferred between col		· ·	er column C or D. s	ee instructions)	20b	.00	.00
20c. Total income after adjustment (I	-		, -,	/	20c	.00	.00
. ,	r of exemptions from F		e 2, box 1h, on line	21a	21b	.00	.00
21a and multiply the	his number by \$3000,	and enter on line 2	1b)			.00	
·	line 21b exceeds the a ne 20b less line 20c) o		income on line 20c,	enter	21c		.00
22a. Total income subject to tax			20c: if zero or less	enter zero)	22a	.00	.00
•	-				22a 22b	.00	00
	•	otract line 21c from line 20c; if zero or less, enter zero)				00	.00
23a. Tax at resident rate	•	222a BY 1% (0.01))			23a	.00	00
23b. Tax at nonresident rate		E 22b BY 0.5% (0.0			23b		.00
23c. Total tax (Add lines 23a and 23b	o) .		R-1040, PAGE 1, LI 23a OF FORM GR		23c	.00	

Taxpayer's name	Taxpayer's SSN		2019 GRA	YLING		
WAGES AND EXCLUDIBLE				IE 1,		Attachment 2-1
COLUMN B AII W-2 forms m Use this form to provide details for all Forms employee for which you did not receive a W-2 reported on Form W-2; disability pensions sh shown on Form 1099-R from excess salary do Use this form to calculate excludible (nontaxa employer are also reported on Form GR-1040).	N-2 and all other wage income reply tips reported on federal Form 41 cown on Form 1099-R if the taxpayeferrals and/or excess contribution	ported on federal Fo 137; taxable depende er has not reached to s (plus earnings); wa	rms 1040 (line ent care benefi he minimum re ages from Forr	ts; employer-provided adop tirement age set by the emp n 8919, line 6; and other wa	tion benefits; scholarship ployer; corrective distribu age items not included in	and fellowship grants not tions from a retirement plan a Form W-2.
WAGES, ETC.	Employer (or so			ployer (or source) 2		ployer (or source) 3
Employer's ID number (W-2, box b) or source's ID Number if available				.,p.:0) 0: (0: 000:00) 1		projet (et ecutee) e
Employer's name (Form W-2, box c) or source's name						
3. SSN from Form W-2, box a						
4. Enter T for taxpayer or S for spouse						
5. Dates of employment during tax year	From To		From	То	From	То
Mark (X) box If you work at multiple locations in and out of GRAYLING						
 Address of work station (Where you actually work, not address on Form W-2 unless you work there: include street number and street name, city, state and ZIP code; if line 6 is checked enter primary work location) 						
Wages, tips, other compensation (Form W-2, Box 1); report statutory employee wages as zero Wages not included in Form W-2, box 1 (See instructions)						
10. Code for wage type reported on line 9						
NONRESIDENT WAGE ALLOCATION	Employer (or ac	uroo\ 1	En	nployer (or source) 2	Fm	nlover (or course) 2
For use by nonresidents or part-year resi	Employer (or so	,		. , . ,		ployer (or source) 3
while a nonresident must use the wage a Nonresidents working all of their work tim 11. Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work) 12. Vacation, holiday and sick days or hours included in line 11, only if work performe	ne for an employer in the city si					
in and outside the city 13. Actual number of days or hours worked (Line 11 less line 12)						
Enter actual number of days or hours worked in city						
 Percentage of days or hours worked in city (Line 14 divided by line 13; default is 100%) 		%			%	%
 Wages earned in city (Total of lines 8 an 9 multiplied by line 15; part-year resident use only the portion of wages earned while a nonresident) 						
EXCLUDIBLE WAGES	Employer (or so	urce) 1	En	ployer (or source) 2	Em	ployer (or source) 3
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)	ie ie					
18. Enter resident excludible wages						
 Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by GRAYLING 						
 Total excludible wages (Line 17 plus line 18; Enter here and on GR-1040, page 2, Excluded Wages schedule) 						
21. Total taxable wages (Line 8 plus line 9 less line 20)						
 Total wages (Add lines 8 and 9 for al equal amount reported on Form GR-104 residents must equal amount reported or 	0, page 1, line 1, column A; Parta Schedule TC, line 1, column A)	-year				
 Total excludible wages from all employer Form GR-1040, page 1, line 1, column B 	part-year residents enter here an	nd on Schedule TC, I	ine 1, column	3)		
 Total taxable wages from all employers a residents enter here and allocate on Sch 			d also on Form	GR-1040, page 1, line 1, c	olumn C; part-year	

Taxpayer's name		Taxpayer's SSN		2019 GRAYLIN	G	
WAGES AND EXCLUDIBLE W. All W-2 forms must be attached			E 1, LINE	1, COLUMN B		Attachment 2-2
Use this form to provide details for all Forms W-employee for which you did not receive a W-2; reported on Form W-2; disability pensions show shown on Form 1099-R from excess salary defe Use this form to calculate excludible (nontaxable employer are also reported on Form GR-1040, p	2 and all other wage income rep ips reported on federal Form 413 n on Form 1099-R if the taxpaye errals and/or excess contributions	oorted on federal Forms 37; taxable dependent of er has not reached the not s (plus earnings); wage:	care benefits; e minimum retirer es from Form 89	employer-provided adoption bene ment age set by the employer; co 219, line 6; and other wage items	efits; scholarship prrective distribut not included in	and fellowship grants not tions from a retirement plan a Form W-2.
WAGES, ETC.	Employer (or sou	urce) 4	Emplo	oyer (or source) 5	Emp	oloyer (or source) 6
Employer's ID number (W-2, box b) or source's ID Number if available						
Employer's name (Form W-2, box c) or source's name						
3. SSN from Form W-2, box a						
4. Enter T for taxpayer or S for spouse						
5. Dates of employment during tax year	From To	Fro	om	То	From	То
Mark (X) box If you work at multiple locations in and out of GRAYLING						
7. Address of work station (Where you actually work, not address on Form W-2 unless you work there: include street number and street name, city, state and ZIP code; if line 6 is checked enter primary work location)						
Wages, tips, other compensation (Form W-2, Box 1); report statutory employee wages as zero						
Wages not included in Form W-2, box 1 (See instructions)						
10. Code for wage type reported on line 9						
NONRESIDENT WAGE ALLOCATION	Employer (or sou			oyer (or source) 5		oloyer (or source) 6
For use by nonresidents or part-year reside while a nonresident must use the wage allo Nonresidents working all of their work time	cation to determine wages ea	arned in city while a r	nonresident (ι	use only wages and days worl	ked while a noi	nresident for computations.)
Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work)						
Vacation, holiday and sick days or hours included in line 11, only if work performed in and outside the city						
13. Actual number of days or hours worked (Line 11 less line 12)						
Enter actual number of days or hours worked in city						
15. Percentage of days or hours worked in city (Line 14 divided by line 13; default is 100%)		%		%		%
Wages earned in city (Total of lines 8 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident)						
EXCLUDIBLE WAGES	Employer (or sou	urce) 4	Emplo	oyer (or source) 5	Emp	oloyer (or source) 6
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)						
18. Enter resident excludible wages						
Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by GRAYLING						
Total excludible wages (Line 17 plus line 18; Enter here and on GR-1040, page 2, Excluded Wages schedule)						
21. Total taxable wages (Line 8 plus line 9 less line 20)						

FAILURE TO ATTACH ALL FORMS W-2 OR PROPERLY COMPLETE AND ATTACH THIS SCHEDULE WILL DELAY PROCESSING OF RETURN.

Taxpayer's name	′LING			
EXCLUDIBLE INTEREST INCOME - GR-1	1040, PAGE 1, LINE 2, CO	LUMN B	1	Attachment 3
Nonbusiness interest income of a nonresid	lent individual is totally exc	luded		
Interest from federal obligations	•			.00
2. Interest from Subchapter S corporations (Attach Schedule I	K-1)			.00
3. Other excludible interest income (Attach detailed explanation	on)			.00
4. Excludible interest income (Add lines 1, 2 and 3; enter total	l here and on page 1, line 2, column Β; μ	part-year residents see line 5)		.00
5. Part-year residents enter total from line 4 plus total interest	received while a nonresident on Sched	ule TC, line 2, column B (Lines 1, 2 a	nd 3 should report only interes	st received while a resident)
EXCLUDIBLE DIVIDEND INCOME - GR-1		LUMN B		Attachment 4
Dividend income of a nonresident individua	al is totally excluded			
Dividends from federal obligations				.00
2. Dividends from Subchapter S corporations (Attach Schedul	le K-1)			.00
Other excludible dividend income (Attach detailed explanat				.00
4. Excludible dividend income (Add lines 1, 2 and 3; enter total	al here and on page 1, line 3, column B;	part-year residents see line 5)		.00
5. Part-year residents enter total from line 4 plus total dividen	ds received while a nonresident on Scho	edule TC, line 2, col. B (Lines 1, 2 and	d 3 should report only dividen	ds received while a resident)
EXCLUSIONS AND ADJUSTMENTS TO I				
Nonresidents and part-year residents use t	•		ne reported on feder	al
Schedule C that is from business activity o	utside the city while a nonr	resident		
Attach a copy of each Federal Schedule C.				
Attach a separate Business Allocation Formula cal	•	•		
Note: In determining the average percentage, if a	, ,	•	0 ,	
Note: If you are authorized to use a special formula Note: Net operating loss from prior year is reported	• •	rator's approval letter and atta	ch a schedule detailing	calculation.
BUSINESS INCOME	d on time 10, other mediae.		BUSINESS # 1	BUSINESS # 2
Net profit (or loss) from business or profession			.00	.00
, , , ,	an annute the business ellegation nove	contage veing the Diverge		
Business allocation percentage (For each separate business Allocation Formula below and enter it here)	ss compute the business allocation perc	entage using the Business	%	%
Allocated net profit (loss) (For each column, multiply line 1	by line 2)		.00	.00
4. Excludible net profit (loss) (For each column, subtract line 3	3 from line 1)		.00	.00
Total excludible net profit (loss) (Add amounts on line 4 of 6 on Schedule TC, line 6, column B)	each column; enter here and on Form G	R-1040, page 1, line 6, column B, or	for part-year residents,	00
BUSINESS # 1 DBA		0011111111	001111111111111111111111111111111111111	001111111
BUSINESS ALLOCATION FORMULA WORKSHEE	ĒΤ	COLUMN 1	COLUMN 2	COLUMN 3
		EVERYWHERE	IN CITY	PERCENTAGE
Average net book value of real and tangible personal proper	erty	.00	.00	(Column 2 divided by column 1)
Gross rents paid on real property multiplied by 8		.00	.00	
3. Total property		.00	.00	%
Total wages, salaries and other compensation of all employ	yees	.00	.00	%
Gross receipts from sales made or services rendered		.00	.00	%
Total percentages (Add the percentages computed in colu				%
Business allocation percentage (Divide line 6 by the number	er of apportionment factors used)			%
DIJOINICOO # 0 DDA				
BUSINESS # 2 DBA		00111111111	00111881 0	OOLUMAN O
BUSINESS ALLOCATION FORMULA WORKSHEE	ĒΤ	COLUMN 1	COLUMN 2	COLUMN 3
4 Average mathematical and the state of the	-4.	EVERYWHERE	IN CITY	PERCENTAGE
Average net book value of real and tangible personal proper	епу	.00	.00	(Column 2 divided by column 1)
Gross rents paid on real property multiplied by 8		.00	.00	
3. Total property		.00	.00	%
Total wages, salaries and other compensation of all employ	yees	.00	.00	%
5 Gross receipts from sales made or services rendered		11(1)	(111)	U/ ₂

6. Total percentages (Add the percentages computed in column 3)

7. Business allocation percentage (Divide line 6 by the number of apportionment factors used)

Тах	xpayer's name	Taxpayer's SSN	2019 GR/	AYLING							
E)	EXCLUSIONS AND ADJUSTMENTS TO CAPITAL GAIN OR (LOSS) - GR-1040, PAGE 1, LINE 7, COLUMN B Attachment 6										
Re	esidents, nonresidents and part-year residents us	se this schedule to rep	ort exclusions	RESIDENT	NONRESIDENT						
and adjustments to capital gains or (losses) COLUMN COLUMN											
1.	Capital gain or (loss) on property located outside of city			NOT EXCLUDIBLE	.00						
2.	Capital gain or (loss) on securities issued by U.S. Government			.0	00 EXCLUDIBLE ON LINE 1						
3.	Portion of capital gain or (loss) from property owned prior to Ordinance nonresidents only on property located in city.) (Attach a schedule that is	e inception (For residents on all sudentifies and shows the calculation	ch property; for n for each.)	.0	.00						
4.	Capital gain or (loss) from Sub. S corporations (See instructions) (Attac	ch schedule.)		.0	.00						
5.	Adjustment for capital loss carryover from period prior to residency (A r carryover from property sold prior to their date of residency.)	resident is not allowed to claim a	capital loss	.0	00 NO ADJUSTMENT ALLOWED						
6.	Adjustment for difference between federal and city's capital loss carryo usually different from the amount reported on federal return; an adjustn	over from prior year (The city's ca ment must be made for this differe	nital loss carryover is	.0	.00						
7.	Adjustment to limit capital loss to \$3,000 for tax year			.0	.00						
8.	Total exclusions and adjustments to capital gains or (losses) (Enter total for part-year residents, enter on Schedule TC, line 7, column B)	al here and on Form GR-1040, pa	ge 1, line 7, column B, or	.0	00						
Atta	ach copy of federal Schedule D and all supporting schedules to return.				•						
Def	ferred gains from sales of property located in city or property sold while a	resident of city are taxable when	reported on federal return.								

EXCLUSIONS AND ADJUSTMENTS TO OTHER GAINS OR (LOSSES) - GR-1040, PAGE 1, LINE 8, COLUMN B Attachment 7								
Residents, nonresidents and part-year residents use this schedule to report exclusions and adjustments to other gains or (losses)	RESIDENT COLUMN	NONRESIDENT COLUMN						
Other gains or (losses) on property located outside of city	NOT EXCLUDIBLE	.00						
2. Portion of other gains or (losses) from property owned prior to effective date of tax for city (For residents on all such property; for nonresidents only on property located in city.) (Attach a schedule that identifies and shows the calculation for each.)	.00	.00						
3. Other gains or (losses) from Sub. S corporations (See instructions)	.00	.00						
Total excludible other gains and losses (Enter total here and on Form GR-1040, page 1, line 8, column B, or for part-year 4. residents, enter on Schedule TC, line 8, column B)	.00	00						
Deferred gains from sales of property located in city or property sold while a resident of city are taxable when reported on federal return.								
Attach a copy of federal Form 4797 and all supporting schedules to return to explain.								

EXCLU	JSIONS AND A	DJUSTMENTS TO IRA DISTRIBUTIONS - GR-104	0, PAGE 1, LINE 9,	COLUMN B	Attachment 8					
List all	ist all IRA distributions reported as taxable on federal return									
Enter T for taxpayer or S for spouse	Payer's federal ID Number	Payer's name	Federally taxable IRA distributions	Distribution Code (Form 1099-R, box 7)	Excludible IRA distributions					
1.			.00		.00					
2.			.00		.00					
3.			.00		.00					
4.			.00		.00					
	5. Total federally taxable IRA distributions (Add lines1 through 4 above for this column; amount should equal the amount reported on Form GR-1040, page 1, line 9, column A)									
6. Total	excludible IRA distributio	ns (Add lines above for this column; enter here and also on Form GR-1040 (for part-year residents, Sch. TC	;), page 1, line 9, col. B)	.00					

EXCLU	JSIONS AND AD	JUSTMENTS TO PENSIONS AND ANNU	JITIES - GR-1	040, PAGE 1, LINE [,]	10, COLUM	N B Attachment 9					
List per	nsion distribution	s reported as taxable on federal return									
Enter T for taxpayer or S for spouse	Payer's federal ID Number	Payer's name	Kind of pension distribution (employer's pension plan, 401k plan, 457 plan, etc.)	Federally taxable pension distributions	Distribution Code (Form 1099-R, box 7)	Excludible pension distributions					
1.				.00		.00					
2.				.00		.00					
3.				.00		.00					
4.				.00		.00					
	5. Total federally taxable pension distributions (Add lines 1 through 4 above for this column; amount should equal the amount reported on Form GR-1040, page 1, line 10, column A)										
6. Total	excludible pension distrib	utions (Add lines above for this column; enter here and also on I	Form GR-1040 (for pa	art-year residents, Sch. TC), p.	1, l. 10, col. B)	.00					

Taxpayer's name	Taxpayer's SSN	2019 GRA	AYLING				
EXCLUSIONS AND ADJUSTMENTS TO INCOM PARTNERSHIPS, S CORPORATIONS, TRUSTS		·	•		Attachment 10		
Residents, nonresidents and part-year residents use adjustments to income from rental real estate, royalt estates, trusts, REMIC's and farm rentals.	-		RESIDENT COLUMN		NONRESIDENT COLUMN		
Rental income (loss) from real estate located outside the City			NOT EXCLUDIBLE ON RESIDENT RETURN		.00		
Royalties (A resident may exclude only royalty income upon which Micle exclude royalty income upon which Michigan severance tax was paid and the second of the second				.00	.00		
Partnership income (loss) from partnership business activity outside the 0	City		NOT EXCLUDIBLE ON RESIDENT RETURN		.00		
Subchapter S corporation income (loss) (See instructions)	.00	.00					
Estate or trust income or loss (Enter the total amount from federal Sched	5. Estate or trust income or loss (Enter the total amount from federal Schedule E, line 37) NOT EXCLUDIBLE ON RESIDENT RETURN						
Real estate mortgage investment conduits (REMIC's) income or loss and located outside the city	N I						
7. Total adjustments to income from rental real estate, royalties, partnership: line 11, column B, or for part-year residents enter total of resident and nor	.00	.00					
Attach a schedule detailing the complete address of each piece of rental real estate. Attach a schedule detailing name and ID number of each partnership and amount of adjustment. Attach a schedule detailing name and ID number of each Subchapter S Corporation and amount of adjustment.							
Attach copy of federal Schedule E. ADJUSTMENTS FOR TAX OPTION CORPORATION GR-1040, PAGE 1, LINE 12, COLUMN B	ON (LIKE SUBCHAPT	ER S CORPORAT	ION) DISTRIBUT	IONS	Attachment 11		
Residents use this schedule to report distributions fr	om tax option corporat	tions (like Subchan	er S Corporations) taxa	able under the City		
Income Tax Ordinance; part-year residents report or		•	.o. o oo.po.aoo	,	20.0 0.100. 0.10		
CORPORATION NAME AND DBA			FEDERAL I.D. #		DISTRIBUTION RECEIVED		
1.					.00		
2.					.00		
3.					.00		
4.					.00		
Total tax option (Subchapter S) corporation distributions (Add lines 1 through enter on Schedule TC, line 12, column B)	ugh 4; enter here and on Form I-1	1040, page 1, line 12, column	B, or for part-year resident	ts	.00		
Complete above schedule or attach a separate schedule listing the name fede	eral ID number and amount of dist	ribution from each tax option	(Sub. S) corporation listed	on fede	eral Sch. E, page 2.		
Attach a copy of each Schedule K-1 (1120-S) pages 1 and 2 to return.							
EXCLUSIONS AND ADJUSTMENTS TO FARM IN			LINE 13, COLUM	N B	Attachment 12		
Nonresidents use this schedule to exclude farm inco	me from outside the c	ity					
Farm address							
FARM INCOME					FARM		
Net profit (or loss) from farm					.00		
Farm allocation percentage					%		
3. Allocated net profit (or loss), multiply line 1 by line 2					.00		
4. Excludible net profit (or loss) (subtract line 3 from line 1; enter here and c	on Form GR-1040, page 1, line 13	s, column B)			.00		
		COLUMN 1	COLUMN 2		COLUMN 3		
FARM ALLOCATION FORMULA		EVERYWHERE	IN CITY		PERCENTAGE		
Average net book value of real and tangible personal property		.00		.00	(Column 2 divided		
Gross rents paid on real property multiplied by 8		.00		.00	by column 1)		
3. Total property		.00		.00	%		
Total wages, salaries and other compensation of all employees		.00		.00	%		
Gross receipts from sales made or services rendered		.00		.00	%		
6. Total percentages (Add the percentages computed in column 3)	<u> </u>				%		
7. Business allocation percentage (Divide line 6 by the number of apportion	ment factors used)				%		
Note: If you are authorized to use a special formula, attach a copy of the administrator's approval letter and attach a schedule detailing calculation.							
Note: If you are authorized to use a special formula, attach a copy of the adm Note: Net operating loss from prior year is reported on Form GR-1040, line 16		lach a schedule detailing cal	JulatiOH.				

xpayer's name Taxı		axpayer's SSN	2019 GRAYLING		
EXCLUSIONS AND ADJUSTMEN	COLUMN B	Attachment 13			
Residents and nonresidents use t	his schedule to rep	ort exclusions and a	djustments to othe	r income	
SOURCE OF INCOME	FEDERAL I.D. #	NATURE OF	NCOME	RESIDENT COLUMN	NONRESIDENT COLUMN
1.				.0	.00
2.				.0	.00
3.				.0	.00
4. Total adjustments and exclusions to other inco line 16, column B. Part-year residents enter to	ome (Add lines 1 through 3 a tals on Form GR-1040TC, lin	nd enter totals here and on Fo ie 16, column B)	orm GR-1040, page 1,	.0	.00
Attach an explanation of and calculation for any rep Attach an explanation for each item reported and e					•

IRA DEDUCTION WORKSHEET - GR-1040, PAGE 2, DEDUCTIONS SCHEDULE - LINE 1

Attachment 14

RESIDENT: Claim 100% of the federal IRA deduction unless taxpayer or spouse has nontaxable earned income (military pay, etc.). If the taxpayer or spouse has nontaxable earned income, compute IRA deduction in the same manner as a nonresident using worksheet below.

NONRESIDENT: Use worksheet below to compute the city IRA deduction.

PART-YEAR RESIDENT: Compute the resident portion of the IRA deduction following the resident instructions and using the amount of earned income received while a resident and the portion of the federal IRA deductible contributions made while a resident; compute nonresident portion of the IRA deduction using the amount of earned income received while a nonresident and the portion of the federal IRA deductible contributions made while a nonresident; list amounts separately on worksheet and enter the resident and nonresident IRA deduction on Schedule TC, Deductions schedule, line 1.

Nonresidents and part-year residents claiming a city IRA deduction must attach this completed worksheet to their city return.

. ,	0 ,			•	
	TAXP	AYER	SPC	USE	
	COLUMN A EARNED INCOME TAXABLE BY GR	COLUMN B EARNED INCOME NOT TAXABLE BY GR	COLUMN C EARNED INCOME TAXABLE BY GR	COLUMN D EARNED INCOME NOT TAXABLE BY GR	COLUMN E TOTALS
Earned income	.00	.00	.00	.00	.00
2a. Federal IRA deduction	.00		.00		.00
If part-year resident, enter portion 2b.of federal IRA deduction contributed while a resident	.00		.00		.00
	TAXPAYER		SPOUSE	INSTRU	CTIONS
Percentage that the individual's 3. earned income taxable in city is to the individual's total earned income	%		%	Divide individual's earned incon column A) by individual's total e 1, column A plus column B).	
City IRA deduction based upon individual's earned income	.00		.00	Taxpayer's or spouse's federal I multiplied by city earned income	
Amount individual's federal IRA 5. deduction exceeds individual's earned income taxable by city	.00		.00	Taxpayer's or spouse's federal I the individual's earned income t	
Amount spouse's earned income 6. exceeds spouse's federal IRA deduction (excess earned income)	.00.			Column A equals spouse's earn 1 of spouse's column C) less sp (line 2a of spouse's column C). earned income taxable by city (I less taxpayer's federal IRA deducolumn A).	ouse's federal IRA deduction Column C equals taxpayer's ine 1 of taxpayer's column A)
7. City IRA deduction based upon spouse's earned income	.00			If individual's (taxpayer or spous exceeds individual's earned income exceeds spouse's federal	ome and spouse's earned
				the lesser of the individual's exc excess earned income multiplied income percentage (line 6), else	d by spouse's city earned
8. City's IRA deduction	.00		.00	Add individual's (taxpayer or spu upon their own city earned inco deduction based upon their spo	me (line 4) and their city IRA
RESIDENT OR PART-YEAR RESIDI the total of the taxpayer's and spouse 9. year resident, normally this is the tota columns A and C. If either the taxpay separately compute the resident IRA	e's city IRA deduction, line 2a of al of the taxpayer's and spouse's rer or spouse has nontaxable ea	columns A and C. If a part- s city IRA deduction, line 2b of rned income while a resident,	.00	PART-YEAR RESIDENT: Enter Schedule TC, Deductions sched resident city IRA deduction in co city IRA deduction in column D;	lule, line 1, column A; enter the blumn C; enter the nonresident and enter in column B the
NONRESIDENT: Total city nonreside 10. A) and spouse's (line 8, column C) ci Deductions schedule, line 1) PART-	ty IRA deduction here and on Fe	orm GR-1040, page 2,	.00	difference of the amount in colu column C and column D.	mn A less the amounts in

Taxpayer's name	Taxpayer's SSN	2019 GRAYLING	
		2019 GNATLING	İ

SELF-EMPLOYED, SEP, SIMPLE AND QUALIFIED PLANS DEDUCTION WORKSHEET - GR-1040, PAGE 2, DEDUCTIONS SCHEDULE, LINE 2

Attachment 15

RESIDENT: No schedule required; a full year resident deducts amount reported on federal Form 1040, line 28.

NONRESIDENT: Nonresidents use the nonresident deduction column of this worksheet to calculate their deduction. A nonresident is required to attach a copy of this deduction schedule to their city return.

PART-YEAR RESIDENT: Part-year residents use a separate line to report the amount of deduction by related source of income as a resident or while a nonresident and indicate resident (R) or nonresident (N) relationship in front of the deduction by related source of income. The resident portion of the deduction is 100% of the related deduction. The nonresident deduction is related to the income earned in the city while a nonresident and is computed by entering the percentage the related income is taxable in the Percentage Related Income Is Taxable column and entering the product of multiplying the related deduction times the percentage and entering it in the Nonresident Deduction column.

RELATED SOURCE OF INCOME	FEIN (OR SSN) OF RELATED SOURCE OF INCOME	R OR N	FEDERAL DEDUCTION BY RELATED SOURCE OF INCOME	PERCENTAGE RELATED INCOME IS TAXABLE	RESIDENT DEDUCTION FOR A PART-YEAR RESIDENT	NONRESIDENT DEDUCTION
1.			.00	%	.00	.00
2.			.00	%	.00	.00
3.			.00	%	.00	.00
4.			.00	%	.00	.00
Add lines 1 through 4 of each dollar column (Federal Deduction column should total amount reported on federal Form 1040, line 28)			.00.		.00	.00

^{6.} Nonresidents enter total from nonresident deduction column on Form GR-1040, page 2, Deductions schedule, line 2. Part-year residents enter total from the part-year resident column on Schedule TC, Deductions schedule, line 2, column D and enter total from the nonresident deduction column on Schedule TC, Deductions schedule, line 2, column D

EMPLOYEE BUSINESS EXPENSE DEDUCTION WORKSHEET - GR-1040, PAGE 2, DEDUCTIONS SCHEDULE, LINE 3, Form 2106							
DEDUCTIONS SCHEDULE, LINE 3, FOIT	Column 1 As reported on federal Form 2106	Column 2 Employer 1	Column 3 Employer 2	Column 4 Employer 3	Column 5 Employer 4		
Employer's identification number (FEIN)							
2. Occupation (List for each employer)							
3. Vehicle expenses	.00	.00	.00	.00	.00		
Parking, fees, tolls and local transportation, including train, bus, etc.	.00	.00	.00	.00	.00		
Travel expenses while away from home overnight, 5. including, lodging, airfare, car rental, etc. Do not include meals and entertainment	.00	.00	.00	.00	.00		
Were you an outside salesperson? (Answer yes or no in 6. the column for each employer; see definition of outside salesperson below)							
Business expenses not included on lines 3, 4 or 5. Do not 7. include meals and entertainment (Enter these expenses only if an outside salesperson; see instruction below)	.00	.00	.00	.00	.00		
8. Meals (See meal expenses instruction below)	.00	.00	.00	.00	.00		
9. Total business expenses (Add lines 3, 4, 5, 7 and 8)	.00	.00	.00	.00	.00		
Enter reimbursements received from your employer for 10. expenses included in line 9 that were not reported to you in box 1 of Form W-2	.00	.00	.00	.00	.00		
11. Business expense deduction (Line 9 less line 10)		.00	.00	.00	.00		
Percentage deductible (Same percentage related wages are taxable)		%	%	%	%		
13. Allowable business expense deduction (Line 11 times line 12)		.00	.00	.00	.00		
Total business expense deduction (Enter the total of line 14. 13, columns 2 through 5 here and also on Form GR-1040, page 2, Deductions schedule, line 3)					.00		

Form I-2106, Column 1, lines to related lines on federal Form 2106: Line 3 = Fed. Form 2106, line 1, Col. A; line 4 = Fed. Form 2106, line 2, Col. A; line 5 = Fed. Form 2106, line 3, Col. A; line 7 = Fed. Form 2106, line 7, Col. A; line 7 = Fed. Form 2106, line 8, Col. A; line 8 = Fed. Form 2106, line 5, Col. B; line 9 = Fed. Form 2106, line 6, Col. A & B; line 10 = Fed. Form 2106, line 7, Col. A & B; line 11 = Fed. Form 2106, line 8, Col. A & B.

Outside salesperson:

An "outside salesperson" is one who solicits business while working away from the employer's place of business as a full-time salesperson. If the individual is required to spend a stated period of time selling at the employer's place of business as part of their job, the individual is not an outside salesperson. If the individual only performs incidental activities there, such as writing up and handing in orders, the individual qualifies for the expense deduction. A salesperson whose principal activity is service and delivery is not an "outside salesperson." An inside salesperson who makes incidental outside calls and sales is not an "outside salesperson."

Line 7 instructions:

Business expenses reported on line 4 of federal Form 2106 are allowed as an expense on the city's return only when the individual employee qualifies as an outside

salesperson when the expenses were incurred

Meal expenses:

Under the Uniform City Income Tax Ordinance meal expenses are allowed only when incurred while away from home. No deduction is allowed for entertainment unless incurred by an outside salesperson.

MOVING EXI	PENS	E DEDUCTION WORKSHEET -	GR-104	0, PAGE 2,	DEDUCTIONS SC	HEDULE,		Attachment 17
LINE 4 CF-3903 No deduction is allowed when moving away from the city								
RESIDENT: A re	RESIDENT: A resident individual who moved into the city may claim the deduction as claimed on federal Form 3903.							
based upon the PART-YEAR RE	perce SIDE	nresident individual who moved into the ntage the income after moving to the are NT: An individual who moved to the area y be entitled to a portion of the deductio	ea is taxab a of the city	le by the city. y and was tem	porarily a nonresident v	working in the city and		
DISTANCE TES	T WC	RKSHEET						
Number of miles	s from y	our old home to your new workplace	1		miles			
2. Number of miles	s from y	our old home to your old workplace	2		miles			
3. Subtract line 2 f	rom line	1. If zero or less, enter -0-	3		miles			
If line 3 is greate	er than	50 miles continue, otherwise you are not qualified	to claim this	deduction.				
Cost of transport	rtation a	nd storage of household goods and personal effect	cts (See instr	uctions for federal	Form 3903)		4	.00
5. Cost of travel (ii	ncludin	lodging) from your old home to your new home. (See instruction	ons for federal For	m 3903) (Do not include the	cost of meals.)	5	.00
6. Add lines 4 and	5						6	.00
		employer paid you for the expenses listed on lines your Form W-2 with a code P)	4 and 5 that	is not included in	box 1 of your Form W-2 (wa	ges) (This amount should	7	.00
No You cannot deduct your moving expenses. (If line 6 is less than line 7, subtract line 6 from line 7 and include the result on Form GR-1040, page 1 line 1, column A and report exclusion of this income on the excluded wages schedule)					8a	.00		
8. than line 7? Yes Subtract line 7 from line 6 8b							.00	
9. Enter percentage of income earned as a resident after moving into area 9 %						%		
10. Enter percentage of income earned as a nonresident in the city after moving into area					0	%		
Multiply line 8b by the percentage on line 9 (Moving expense deduction allowed while a resident; enter here and on Form GR-1040, page 2, Deductions schedule, line 4)					00			
	ons sch	ercentage on line 10 (Moving expense deduction a edule, line 4) (If a part-year resident add amounts				•	2	.00

2019 GRAYLING

Taxpayer's SSN

ALIMONY PAID DEDUCTION WORKSHEET - GR-1040, PAGE 2, DEDUCTIONS SCHEDULE, LINE 5

Attachment 18

RESIDENT: Full-year residents claim the entire amount of alimony reported on federal Form 1040, line 31a. A full-year resident is not required to attach this deduction schedule to their city income tax return.

NONRESIDENT: Nonresidents use the nonresident column of this worksheet to calculate their city alimony deduction.

Taxpayer's name

PART-YEAR RESIDENT: A part-year resident may need to use both the resident and nonresident columns of this worksheet to calculate their alimony deduction. For each line of the worksheet, compute the amount to enter into the resident and/or nonresident columns and follow the line by line instructions. A part-year resident with no city income while a nonresident ignores the nonresident column of this form.

Nonresidents and part-year residents use this worksheet to compute the alimony paid deduction	RESIDENT COLUMN	NONRESIDENT COLUMN
1. Enter resident portion of federal adjusted gross income (Form 1040, page 1, line 37) in resident column and/or nonresident portion in nonresident column	.00	.00
Enter resident portion of federal alimony paid (federal Form 1040, page 1, line 31a) while a resident in the resident column and/or 2. nonresident portion of the alimony paid while a nonresident in the nonresident column (Actual amount paid while a resident of the city and while nonresident)	.00	.00
3. Federal income for alimony deduction computation (Line 1 plus line 2 of column)	.00	.00
Enter resident portion of total income for city (Form GR-1040, page 1, line 18) in resident column and/or nonresident portion in 4. nonresident column. Part-year residents enter total income for city as a resident and/or nonresident as reported on Schedule TC, line 18, columns C (resident) and D (nonresident)	.00	.00
5. Enter resident portion of total deductions for city other than alimony deduction (Add lines 1, 2, 3, 4 & 6 on Form GR-1040, page 2, Deductions schedule) in resident column and/or nonresident portion in nonresident column	.00	.00
6. Taxable income for city prior to alimony deduction (Line 4 less line 5)	.00	.00
7. Resident column: Enter 100%. Nonresident column: Enter alimony deduction percentage (Line 6 divided by line 3)	100 %	%
Alimony deduction (Line 2 multiplied by line 7) (Residents and nonresidents enter amount from respective column on 8. Form GR-1040, page 2, Deductions schedule, Line 5. Part-year residents enter amount from each column on Schedule TC, Deductions schedule, line 5, column C and D)	.00	.00

Taxpayer's name	Taxpayer's SSN	20	19 GRAYLIN	IG				
OTHER TAX PAYMENTS - GR-1040, PAGE 1, L PAYMENTS, EXTENSION PAYMENTS, CREDIT FOR TAX PAID BY A TAX OPTION CORPORATI	FORWARD, TAX F		-		Attachment 20			
OTHER TAX PAYMENTS								
Estimated tax payments								
2. Tax paid with an extension								
Credit forward from last tax year					.00			
4. Tax paid by a partnership Partnership FEIN		Partnership name			.00			
5. Tax paid by a partnership Partnership FEIN		Partnership name			.00			
Credit for tax paid by a tax option corporation Corporation FEIN		Corporation name			.00			
7. Credit for tax paid by a tax option corporation Corporation FEIN		Corporation name			.00			
8. Total credit for estimated tax, extension and partnership tax payments and Credits schedule, line 24b)	and credit forward (Add line	es 1 through 7; enter h	ere and on GR-1040, I	Page1, Payments	.00			
CREDIT FOR TAX PAID TO ANOTHER CITY - GI LINE 24c (Credit will be disallowed if a copy of				·	Attachment 21			
Credit for tax paid to another city may be claimed by a residence. Part-year residents may claim the credit for tax paid to another.	ent who paid tax on the	e same income to	another city.	-				
OTHER CITY'S NAME OR CORPORATION F	•				TAX CREDIT			
Tax paid to another city City name	EDETATE ENTITION TO TELL	CIBEITII IOMI	TTTTO MELITY ATE	10 101	.00			
Tax paid to another city City name					.00			
Total credit for tax paid to another city (Add lines 1 and 2; enter here a	nd on GR-1040. Page 1. Pa	vments and Credits s	chedule, line 24c)		.00			
		,	,,		.00			
CALCULATION OF CREDIT FOR TAX PAID TO A Use a separate calculation worksheet for each	-	Residents onl	y)	RESIDENT CITY GR	OTHER CITY			
Income taxable in the nonresident city that is also taxable in the reside		th cities)		.00	.00			
Exemptions amount per city's return	, (.00	.00			
Taxable income for credit				.00	.00			
Tax for credit purposes at each city's nonresident tax rate				.00	.00			
5. Credit allowed for tax paid to another city (Enter the smaller of resident	city's or other city's tax from	n line 4)		.00				

CITY OF GRAYLING INCOME TAX DEPARTMENT

Power of Attorney Authorization

Issued under Authority of the Uniform City Income Tax Ordinance (MCL 141.601 et seq.) Filing is voluntary.

Complete this form if you wish to appoint someone to represent you to the Income Tax Department on income tax matters, or if you wish to revoke or change

your current power of attorney authorization. Read the instructions on page 2 before completing this form.

DADE A TAMBANED BIRGHARION	Hele	Was all the state of the state		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	unesternosterio naces		
PART 1: TAXPAYER INFORMATION Taxpayer's (first name, initial, last name or busines)	c come	Supplies in the Second Second Second	Tourney SCAUFFIN	THE REAL PROPERTY.	KEETO TO AND DESIGNATION OF		
Taxpayers (ilist hame, ilistial, last hame or busines	S Hallic	0	Taxpayer SSN/FEIN				
If joint return spouse's first name, initial, last name			Spouse SSN				
Current address (number and street)		Apt./Ste. no.	If a business, enter DBA, trade or assumed no	ame			
Address line 2	- N/Y-1		Telephone number	Fax number			
City, town or post office	State	Zip code	E-mail address				
Foreign country name, province/county, postal coo	le le						
DART C. DERDECENTATIVE INFORM	4 TION	LAND AUTHORIZATION DATES		EIT / SPENNEY IN: III	1		
PART 2: REPRESENTATIVE INFORM Representative's name	ATIO	N AND AUTHORIZATION DATES	Contact's name (if applicable)	Contact's name (if	applicable)		
Firm name			E-mail address	E-mail address			
Address (number and street)		Apt./Ste. no.	Telephone number	Telephone number			
Address line 2		4	Fax number	Fax number			
City, town or post office	State	Zip code	Beginning authorization date (MM/DD/YY)	Ending authorization	n date (MM/DD/YY)*		
Foreign country name, province/county, postal coo	le						
PART 3: TYPE OF AUTHORIZATION	34111	Little Company of the Company					
argument; (3) sign returns; (4 tax matters for all tax years of LIMITED AUTHORIZATION	to: (1) enter perio	r into agreements; (5) receive mail ds.	formation; (2) represent me and make I including forms, billings and paymen	All Tax S	chorization applies to all Only as pecified		
		thecking the appropriate boxes.			Below		
Inspect or receive confident				_			
	ral or	written presentations of fact and a	irgument	-	-		
3. Sign returns				- 			
4. Enter into agreements	b:	lines and sourced nations)					
5. Receive mail (includes for		Tax Form or	Assessment Number	Tay Vo	ar(s) or Period(s)		
Type of income Tax		Tax Form of	Assessment Number	Tax re	ar(s) or r eriod(s)		
	-						
				_			
PART 4: CHANGE IN POWER OF AT	ORN	EY REPRESENTATION OR REV	OCATION	E PROPERTY OF STREET			
	NEY F	REPRESENTATION: This form replace	es all earlier powers of attorney, except tho	se attached, on file	for the same tax matters		
REVOKE PREVIOUS AUTHORIZ that remain in effect concurrent w			nitted and will represent myself in all tax m	atters. Attach copie	s of all Powers of Attorney		
PART 5: TAXPAYER SIGNATURE(S)	STAGO		50万级是W. NEW ENGINEER				
If signed by a corporate officer, partner	or fidu	ciary on behalf of the taxpayer, I c	certify that I have the authority to exec	ute this Power of	Attorney.		
Signature		Name or title typed or printe			Date		
Spouse's signature		Name or title typed or printe	ed		Dale		

^{*} If no Ending Authorization date is provided, the above-named representative will be authorized to represent you until you notify the Income Tax Department in writing that this Power of Attorney is revoked.