City of Grayling Income Tax Division PO BOX 515 Eaton Rapids, MI 48827-0515

Form GR-1040

2020 CITY OF GRAYLING INDIVIDUAL INCOME TAX INSTRUCTIONS

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

ALL PERSONS HAVING GRAYLING TAXABLE INCOME IN 2020 MUST FILE A RETURN

TAX RETURNS ARE DUE APRIL 30, 2021

MAILING ADDRESSES	City of Grayling Income Tax Division, PO BOX 515, Eaton Rapids, MI 48827-0515
TAX RATES AND	Resident: 1% Nonresident: 0.5% Exemption value: \$3000
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 2020 return, you may need to make estimated income tax payments for 2021. 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 48827-0515.
	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 by April 30, 2021.
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 48827-0515.
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.

2020 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 2021 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, 2021. 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.

AMENDED RETURNS

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 Division, PO BOX 515, Eaton Rapids, MI 48827-0515.

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 2020, 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 2020 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.

Line 23 – Tax

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.

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, <u>not the amount withheld</u>.

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, 2021.

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 48827-0515. 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 2020. If someone else claims you as a dependent on their tax return, you CAN NOT claim a personal exemption for a first and Section 2020.

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 Plans

Self-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 driver-salesperson 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 2020. 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.

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 and 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 nonresidents 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 2021.

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 is located, property with

regardless of where the the following exceptions:

- 1. 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 3. 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 gualifying as retirement benefits: IRA distributions received after age 591/2 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 ½ years old or older at the time of the conversion distribution.

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:

- 1. 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;
- 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:

- 1. 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;
- 3. 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 E 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:

- 1. 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.
- 3. 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.
- 6. 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. <u>Vacation time</u>, 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.

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.

GR-1040

GRAYLING INDIVIDUAL RETURN DUE APRIL 30, 2021

2020

Taxpayer's S	SSN		Taxpayer's fir	st name		Initial	Last name	9				RE	SIDE	NCE	STATUS	
													Residen	nt 🗌	Nonresident	Part-year resident
Spouse's SS	SN .		If joint return	spouse's first n	name	Initial	Last name	9				Dent	 		L	
												1	ear resid	ient - c	dates of residency	(mm/dd/yyyy)
			Present home	e address (Nun	mber and	street)				Apt. no.		rom				
Mark (X) box			1 resent nome			54001				, ipt. 110.						
Тахр	baye	r Spouse										FIL	ING S	STA	rus	
		ath on page 2, right	Address line :	2 (P.O. Box ad	dress for	mailing use	e only)						Single		Married filing	jointly
side of the si	igna	ure area											Morried	filing	separately. Enter s	
Mark box (X) bel	ow if form attached	City, town or	post office				State	Zip code						e's SSN box and S	
Fede	eral I	Form 1310											name he	ere.		
			Foreign coun	try name		Foreign pr	ovince/count	v	Foreign po	ostal code						
		ng Notes and										Sn	nouse's fi	ıll nam	ne if married filing	senarately
State	emei	nts (Attachment 22)		RES TO NEA	DECTO							op				separately
	11			under \$0.50 ar			E . d.	Column		_		umn E			Colur	
		ar	mounts from \$.	.50 to \$0.99 to	next dolla	ar)	Fede	ral Retur	i Data	E	xclusions/	Aajus	stments		Taxable	
SEND	1.	Wages, salaries, tips,	, etc. (W-2 for	ms must be att	tached)	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	4.	Taxable refunds, cred	dits or offsets c	of state and loc	al income	taxes 4			.0	0				.00	NOT TA	XABLE
RETURN	5.	Alimony received				5			.0	0				.00		.00
	6.	Business income or (I	loss) (Attach c	onv of federal :	Schedule				.0	_				.00		.00
	<u> </u>		. , .						.0					.00		.00
	7.	Capital gain or (loss) (Attach copy of fed. S	Sch. D) 70		f federal	-			.0	0				.00		.00
	_) not requi	1				-						
	8.	Other gains or (losses				8			.0	-				.00		.00
	9.	Taxable IRA distributi	ions (Attach co	py of Form(s)	1099-R)	9			.0	_				.00		.00
	10.	Taxable pensions and	d annuities (At	tach copy of Fo	orm(s) 109	99-R) 10			.0	0				.00		.00
	11.	Rental real estate, rog trusts, etc. (Attach co	yalties, partner	rships, S corpo	orations,											
		trusts, etc. (Attach co	py of federal S	chedule E)		11			.0	0				.00		.00
	12.	Subchapter S corpora	ation distributic	ons (Att. copy c	of fed. Sch	1. K-1) 12	NO.	T APPLIC	ABLE					.00		.00
	13.	Farm income or (loss)) (Attach copy	of federal Sche	edule F)	13			.0	0				.00		.00
SEND W-2	14.	Unemployment comp	ensation			14			.0	0				.00	NOT TA	XABLE
FORMS	15.	Social security benefi	its			15			.0	0				.00	NOT TA	XABLE
		Other income (Attach		ing type and ar	mount)	16			.0	-				.00		.00
	17.		ns (Add lines 2		nounty	10			.0					.00		.00
	18.		(Add lines 1 th	• /		18			.0					.00		.00
				,					.0	0						
	19.			ons) (Total from			s schedule, li	ne /)						19		.00
	20.	Total income	after deduction	ns (Subtract lin	ie 19 from	ı line 18)								20		.00
	21.			exemptions, fro				h, on line	21a and				_			
		· m	ultiply this hun	nber by \$3000	and enter	f on line 21	D)				21a			21b		.00
	22.	Total income	subject to tax	(Subtract line 2	21b from l	ine 20)							:	22		.00
	23	TAX (Multiply line 2	22 by Grayling	resident tax ra	ate of 1% ((0.01) or no	onresident tax	k rate of 0	5% (0.005)	and enter	tax					
	23.	on line 23b, o	r if using Sche	dule TC to com	npute tax,	check box	23a and ente	er tax from	Schedule 1	C, line 23	d) 23a		:	23b		.00
	~ (Payments	GR tax withh	ield	Other cr fwd.	tax payme	nts (est, exte p & tax option	nsion, n corp)	Credi to a	t for tax pa another cit	aid Iv		otal			
	24.	and credits 24a		.00	24b		.0	-			.00		yments credits	24d		.00
	25.					Int	terest		1	Penalty	I	То	otal			
		estimated tax paymen estimated tax; or late			25a		.0	0 25b			.00		terest & analty	25c		.00
ENCLOSE		Amo	ount you owe	(Add lines 23			ubtract line	24d) MAł				<u> </u>	NITH			
CHECK OR	T/	AX DUE 26. MON): CITY C)F GRAYL	ING (X) pay	tax due	line 31b,	and		RETU		26		.00
MONEY ORDER	0		plete lines 31c		0		d 05 - 6 1									.00
ORDER	U	A		overpayment (S				ne 240)	Crowlin	g Main Str	root			27		.00
	28.	overpayment	Capital Improve			The Northe			Grayiin	y Main Su		Tota				
		donated 28a		.00	28b		.0	280			.00			28d		.00
	29.	Amount of overpayme	ent credited for	ward to 2021						Amo	ount of cre	dit to	2021 >>	29		.00
	30.	Amount of overpayme	ent refunded (L	ine 27 less line	es 28d an	d 29)					Refun	d amo	ount >> 3	30		.00
	1															
	1						-									
	1															

GR	GR-1040, PAGE 2 Taxpayer's name			Taxpayer's SSN				7	201	MI-C	GR-1	1040	-2						
ΕX	EMP.	TIONS				Date of birth (mm/de	d/yyyy)		Regular	65 or over	Blind	Deaf	D	isabled					1
SC	HED	ULE	1a.`												16	 Enter boxes 	the nur checke		
			1b. S	Spouse												lines '	1a and	1b	
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#	Fir	st Name				ast Name		Social Securit	y Number	Re	lationship		Date o	of Birth	1f		numbe ident ch		
1.												_				listed	on line	1d	
2. 3.															10	n Entor	numbo	r of other	
															10			sted on	
4. 5.										_		_				line 10	d		
5. 6.												_			11	- Total	evemnt	ions (Add	1
б. 7.																lines ?	1e, 1f a	nd 1g;	
7. 8.																	here an 1, line 2	d also on (1a)	
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	Col. A			UMN B		COLUMN						ayes (COLUMN	F
W-2 #	T or S					EMPLOYER'S ID I					FAILI	JRE TO		GR TAX				CALITY NA	
1.		(1	-01111	V-2, box a)	(Form W-2, bo	DX D)	(Allach E	xcluded W	.00		CH W-2	-	(Form V	/v-z, bo	.00	(F0	m W-2, bo	0X 20)
2.										.00	FORMS					.00			
3.										.00	1	_ DELAY SSING (.00			
4.										.00		N. WAG				.00			
5.										.00						.00			
6.										.00	1	ED FROM				.00			
7.										.00		AX				.00			
8.										.00		ARATION				.00			
9.										.00	NOT ACC					.00			
10.										.00						.00			
11.	Totals (Enter here	e and	on page 1;	part-yr r	esidents on Sch TC)				.00	<< Enter on	pg 1,ln 1,	col B			.00	<< Er	ter on pg 1	l, In 24a
DE	DUC.	TIONS	SC	HEDUL	. E (Se	e instructions	; deduc	tions allo	cated o	n the sar	ne basis a	as rela	ed in	come)		D	EDUCT	IONS	
1.	IRA dec	duction (A	ttach	copy of sc	hedule 1	of federal return & ev	vidence of p	payment)							1				.00
2.	Self-em	ployed SE	EP, SI	MPLE and	qualified	plans (Attach copy	of Schedule	e 1 of federal i	return)						2				.00
						ctions and attach cop		,							3				.00
		•			•••	tach copy of federal F	,								4				.00
						SUPPORT. Attach c	opy of Sch	edule 1 of fed	eral return)						5				.00
6. 7.															6 7		X	XXXXXXXX	
			,		0	line 6, enter total here		,					lataa		-				.00
MA	1					e taxpayer (T), sses (Include city, sta										y) FRO	м	TC	<u> </u>
Т, 5		return is t	the sa	me as liste	d on last	year's return, print "S ge 1 of this return is in	Same." If no	o return filed la	ast year, lis	t reason. Cor	tinue listing th	is tax yea					DAY	MONTH	
., .	, 2	addresse	s. II a		eu on pag	ge i oi this return is i	I care of ar	iother person.	, enter curre	ent residence	(domicile) add	uless.					5711		
ΤH	IRD F	PARTY	' DE	SIGNE	E														· ·
Do y	ou want	to allow a	nothe	person to	discuss	this return with the In	come Tax	Office?	Y	es, complete	the following		No						
	gnee's										Phone			-		dentificat	tion		
name											No.				mber (F				
						are that I have exa a resident claiming									-		•		tis
	payr	ment to th	hat ci	y. If pr	epared	by a person other	han taxpa	ayer, the pre	parer's de	claration is		informa	tion of	which pre	eparer		/ know	edge.	
SIG		AYER'S SI	GNATL	IRE - If joint	return, bo	th spouses must sign	Date (MM/D	OD/YY)	Taxpaye	r's occupation		D	aytime pl	hone numbe	er		If dec	eased, date	of death
===	>	10510 0101		_			5 / 444												
	5201	JSE'S SIGN	AIUR	-			Date (MM/E	דיוטכ)	spouse's	s occupation							IT dec	eased, date	or death
	SICH		PPEN		р тилм	ΤΔΧΡΔΥΕΡ					Date (MM/D		1	TIN, EIN or	SSN				
PREPARER'S	SIGNATURE OF PREPARER OTHER THAN TAXPAYER						5,11)		Preparer's p										
AR	-			if colf omn	avad) AD	DRESS AND ZIP CODE	:						['		ACTP				
፲ በ 2	FIRM	S NAME (C	n yours	II sell-empl	uyeu), AD	DRESS AND ZIP CODE													

Taxpayer's name	Taxpayer's SSN	2020 GRAYLING	
SCHEDULE TC, PART-YEAR RESIDENT TAX CA	LCULATION - GR-10	40, PAGE 1, LINES 23a AND 23b	Attachment 1

SCHEDULE TC, PART-YEAR RESIDENT TAX CALCULATION - GR-1040, PAGE 1, LINES 23a AND 23b

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

2. Box B to report the former address of the taxpayer and spouse

3. 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 income taxable as a nonresident and compute tax due on this income at the nonresident tax rate

A. PART-YEAR RESIDENCY PERIOI	DD From To B. PART-YEAR RESIDENT'S FORMER ADDRESS					
Taxpayer			Taxpayer			
Spouse			Spouse			
INCOME		Column A	Column B	Column C	Column D	
INCOME		Federal Return Data	Exclusions and Adjustments	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	
3. Ordinary dividends	3	.00	.00	.00	NOT TAXABLE	
4. 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. copy of fed. Sch. C)	6	.00	.00	.00	.00	
7. (Att. copy of Sch. D) 7a Mark if Sch. (Att. copy of Sch. D) 7a	7b	.00	.00	.00	.00	
8. Other gains or (losses) (Att. copy of Form 4797)	8	.00	.00	.00	.00	
9. Taxable IRA distributions	9	.00	.00	.00	.00	
10. Taxable pensions and annuities (Att. Form 1099-R)	10	.00	.00	.00	.00	
11. Rental real estate, royalties, partnerships, S corps., trusts, etc. (Attach copy of fed. Sch. E)	11	.00	.00	.00	.00	
12. Subchapter S corporation distributions (Attach copy of federal. Schedule K-1)	12	NOT APPLICABLE	.00	.00	.00	
13. Farm income or (loss) (Att. copy of fed. Sch. F)	13	.00	.00	.00	.00	
14. Unemployment compensation	14	.00	.00		NOT TAXABLE	
15. Social security benefits	15	.00	.00		NOT TAXABLE	
16. Other income (Att. statement listing type and amt)	16	.00	.00		.00	
17. Total additions (Add lines 2 through 16)	17	.00	.00		.00	
18. Total income (Add lines 1 through 16)	18	.00	.00	.00	.00	
DEDUCTIONS SCHEDULE See instruct	ctions	 Deductions must be allocated on 	the same basis as related income.			
IRA deduction (Attach copy of page 1 of 1. federal return & evidence of payment)	1	.00	.00	.00	.00	
2. Self-employed SEP, SIMPLE and qualified plans (Attach copy of page 1 of fed. return)	2	.00	.00	.00	.00	
Employee business expenses (See instructions & att. copy of fed. Form 2106)	3			.00	.00	
4. Moving expenses (Into city area only) (Attach copy of federal Form 3903)	4	.00	.00	.00	.00	
5. Alimony paid (DO NOT INCLUDE CHILD 5. SUPPORT. (Att. copy of page 1 of fed. return) 5	.00	.00	.00	.00	
6. Renaissance Zone deduction-not applicable	6			.00	.00	
19. Total deductions (Add lines 1 through 6)			19	.00	.00	
20a. Total income after deductions (Subtract line 1	9 fro	m line 18)	20a		.00	
20b. Losses transferred between columns C and D (If li					.00	
20c. Total income after adjustment (Line 20a less line 2	0b)		200		.00	
21. Exemptions (Enter the number of exemptions fro	m Fo		e 21a 21b			
21a and multiply this number by \$300 (If the amount on line 21b exceeds the second s		,				
unused portion (line 20b less line 20b			z, enter 21c		.00	
22a. Total income subject to tax as a resident (Sub	tract	line 21b from line 20c; if zero or les	s, enter zero) 22a	.00		
22b. Total income subject to tax as a nonresident (Subt	ract line 21c from line 20c; if zero or	less, enter zero) 22t		.00	
23a. Tax at resident rate (MULTIPLY I	INE	22a BY 1% (0.01))	23a	.00		
23b. Tax at nonresident rate (MULTIPLY I	INE	22b BY 0.5% (0.005))	235		.00	
		ND ON FORM GR-1040, PAGE 1, L ARK (X) IN BOX 23a OF FORM GI		.00		

Taxpayer's name		Taxpayer's SSN		2020 GRAY		
WAGES AND EXCLUDIBLE W COLUMN B All W-2 forms mu				IE 1,		Attachment 2-1
Use this form to provide details for all Forms W- employee for which you did not receive a W-2; I reported on Form W-2; disability pensions show shown on Form 1099-R from excess salary defe	-2 and all other wage incor tips reported on federal For vn on Form 1099-R if the ta errals and/or excess contrib	me reported on federal F rm 4137; taxable depend axpayer has not reached putions (plus earnings); v	orms 1040 (line dent care benefi the minimum re wages from Forr	ts; employer-provided adopti tirement age set by the empl n 8919, line 6; and other wag	on benefits; scholarshi oyer; corrective distribu e items not included in	o and fellowship grants not utions from a retirement plan a Form W-2.
Use this form to calculate excludible (nontaxable employer are also reported on Form GR-1040,	 e) wages included in total v page 2, Excluded Wages a 	wages reported on your and Tax Withheld Schedu	federal tax retur ule and the total	n (Forms 1040, line 7; 1040A amount of excludible wages	is reported on Form Gl	e 1). Excludible wages for each R-1040, page 1, line 1, col. B.
WAGES, ETC.	Employer (o			ployer (or source) 2		ployer (or source) 3
1. Employer's ID number (W-2, box b) or source's ID Number if available						
2. 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	То	From	То	From	То
6. 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 						
9. Wages not included in Form W-2, box 1 (See instructions)						
10. Code for wage type reported on line 9						
NONRESIDENT WAGE ALLOCATION	Employer (o	,		ployer (or source) 2		ployer (or source) 3
For use by nonresidents or part-year reside while a nonresident must use the wage allo Nonresidents working all of their work time	ocation to determine wag	ges earned in city whil	le a nonresider	nt (use only wages and da	ys worked while a no	onresident 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)						
14. 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 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident) 						
EXCLUDIBLE WAGES	Employer (c	or source) 1	Err	ployer (or source) 2	Em	ployer (or source) 3
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 						
20. 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)						
22. Total wages (Add lines 8 and 9 for all e equal amount reported on Form GR-1040,			1		I	
residents must equal amount reported on S 23. Total excludible wages from all employers	Schedule TC, line 1, column and other sources (Add line	n A) e 20 for all columns; ent				
Form GR-1040, page 1, line 1, column B; p	•			,		
24. Total taxable wages from all employers and residents enter here and allocate on Sched			nd also on Form	GR-1040, page 1, line 1, col	umn C; part-year	

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

Taxpayer's name		Taxpayer's SSN		2020 GRAYL	ING	
WAGES AND EXCLUDIBLE W All W-2 forms must be attached			GE 1, LIN	E 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 def Use this form to calculate excludible (nontaxable employer are also reported on Form GR-1040, j	2 and all other wage income rep ips reported on federal Form 41 in on Form 1099-R if the taxpay irrals and/or excess contribution e) wages included in total wage:	ported on federal Fo 37; taxable depende er has not reached t is (plus earnings); w s reported on your fe	ent care benefit he minimum rel ages from Forn ederal tax returr	s; employer-provided adoption I irement age set by the employe a 8919, line 6; and other wage it a (Forms 1040, line 7; 1040A; lir	penefits; scholarshi r; corrective distribu ems not included in ne 7; or 1040EZ, lin	p and fellowship grants not utions from a retirement plan a Form W-2. e 1). Excludible wages for each
WAGES, ETC.	Employer (or so	urce) 4	Em	ployer (or source) 5	Em	ployer (or source) 6
1. Employer's ID number (W-2, box b) or source's ID Number if available						
2. 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) 8. Wages, tips, other compensation (Form W-2, Box 1); report statutory						
employee wages as zero						
9. 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 so	urce) 4	Em	ployer (or source) 5	Em	ployer (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 e	arned in city while	a nonresiden	t (use only wages and days	worked while a no	onresident for computations.)
 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 performed						
in and outside the city						
 Actual number of days or hours worked (Line 11 less line 12) 						
14. 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 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident) 						
EXCLUDIBLE WAGES	Employer (or so	urce) 4	Em	ployer (or source) 5	Em	ployer (or source) 6
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)						
18. Enter resident excludible wages						
19. 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	Taxpayer's SSN	2020 GRA	YLING	
EXCLUDIBLE INTEREST INCOME - GR-1040, PA	GE 1, LINE 2, COLU	MN B		Attachment 3
Nonbusiness interest income of a nonresident indiv	vidual is totally exclude	ed		
1. Interest from federal obligations				.00
2. Interest from Subchapter S corporations (Attach Schedule K-1)				.00
3. Other excludible interest income (Attach detailed explanation)				.00
4. Excludible interest income (Add lines 1, 2 and 3; enter total here and or	n page 1, line 2, column B; part-ye	ear residents see line 5)		.00
5. Part-year residents enter total from line 4 plus total interest received wh	ile a nonresident on Schedule TO	C, line 2, column B (Lines 1, 2	and 3 should report only i	nterest received while a resident)
EXCLUDIBLE DIVIDEND INCOME - GR-1040, PA	GE 1, LINE 3, COLUN	IN B		Attachment 4
Dividend income of a nonresident individual is total	ly excluded			
1. Dividends from federal obligations				.00
2. Dividends from Subchapter S corporations (Attach Schedule K-1)				.00
3. Other excludible dividend income (Attach detailed explanation)				.00
4. Excludible dividend income (Add lines 1, 2 and 3; enter total here and c	n page 1, line 3, column B; part-y	ear residents see line 5)		.00
5. Part-year residents enter total from line 4 plus total dividends received	while a nonresident on Schedule	TC, line 2, col. B (Lines 1, 2 a	and 3 should report only div	vidends received while a resident)
EXCLUSIONS AND ADJUSTMENTS TO BUSINE	SS INCOME OR (LOS	S) - GR-1040, PAG	E 1, LINE 6, COL	UMN B Attachment 5
Attach a copy of each Federal Schedule C. Attach a separate Business Allocation Formula calculation for Note: In determining the average percentage, if a factor doe Note: If you are authorized to use a special formula, attach a	s not exist, you must divid a copy of the administrator	e the total of the percer	ntages by the number	
Note: Net operating loss from prior year is reported on Line	16, Other income.			DUCINESS # 2
BUSINESS INCOME			BUSINESS # 1	BUSINESS # 2
1. Net profit (or loss) from business or profession				.00
2. Business allocation percentage (For each separate business compute t Allocation Formula below and enter it here)	he business allocation percentag	e using the Business		%
3. Allocated net profit (loss) (For each column, multiply line 1 by line 2)				.00
4. Excludible net profit (loss) (For each column, subtract line 3 from line 1)				00. 00
 Total excludible net profit (loss) (Add amounts on line 4 of each column on Schedule TC, line 6, column B) 	; enter here and on Form GR-104	40, page 1, line 6, column B, o	or for part-year residents,	00
BUSINESS # 1 DBA				
BUSINESS ALLOCATION FORMULA WORKSHEET		COLUMN 1	COLUMN 2	COLUMN 3
BUSINESS ALLOCATION FORMULA WORKSHEET		EVERYWHERE	IN CITY	PERCENTAGE
1. Average net book value of real and tangible personal property		.00		00 (Column 2 divided
2. Gross rents paid on real property multiplied by 8		.00		00 by column 1)
3. Total property		.00		00 %
4. Total wages, salaries and other compensation of all employees		.00		00 %
5. Gross receipts from sales made or services rendered		.00		00 %
6. Total percentages (Add the percentages computed in column 3)				%
7. Business allocation percentage (Divide line 6 by the number of apportion	nment factors used)			%
BUSINESS # 2 DBA				
		COLUMN 1	COLUMN 2	COLUMN 3
BUSINESS ALLOCATION FORMULA WORKSHEET		EVERYWHERE	IN CITY	PERCENTAGE
1. Average net book value of real and tangible personal property		.00		00 (Column 2 divided
2. Gross rents paid on real property multiplied by 8		.00		00 by column 1)
3. Total property		.00		00 %
4. Total wages, salaries and other compensation of all employees		.00		00 %
5. Gross receipts from sales made or services rendered		.00		00 %
6. Total percentages (Add the percentages computed in column 3)		L		%
7. Business allocation percentage (Divide line 6 by the number of apportion	nment factors used)			%

Taxpayer's name	Taxpayer's SSN	2020 GR/	AYLING	
EXCLUSIONS AND ADJUSTMENTS TO	CAPITAL GAIN OR (LOSS) - GR-1040, PAGE	1, LINE 7, COLUMN	B Attachment 6
Residents, nonresidents and part-year res and adjustments to capital gains or (losse		eport exclusions	RESIDENT COLUMN	NONRESIDENT 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. Govern	.00	EXCLUDIBLE ON LINE 1		
3. Portion of capital gain or (loss) from property owned prior nonresidents only on property located in city.) (Attach a s	.00	.00		
4. Capital gain or (loss) from Sub. S corporations (See instru		.00	.00	
5. Adjustment for capital loss carryover from period prior to carryover from property sold prior to their date of residence	residency (A resident is not allowed to clain cy.)	a capital loss	.00	NO ADJUSTMENT ALLOWED
6. Adjustment for difference between federal and city's capit usually different from the amount reported on federal retu	al loss carryover from prior year (The city's rn; an adjustment must be made for this diff	capital loss carryover is erence.)	.00	.00
7. Adjustment to limit capital loss to \$3,000 for tax year			.00	.00
8. Total exclusions and adjustments to capital gains or (loss for part-year residents, enter on Schedule TC, line 7, colu		page 1, line 7, column B, or	.00	00
Attach copy of federal Schedule D and all supporting schedule				•

Deferred 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, PAG	E 1, LINE 8, COLUM	N 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						
1. 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.								

EXCLUSIONS AND ADJUSTMENTS TO IRA DISTRIBUTIONS - GR-1040, PAGE 1, LINE 9, COLUMN B

List all IRA distributions reported as taxable on federal return Enter **Distribution Code** for Payer's federal ID Federally taxable IRA Excludible IRA Payer's name (Form 1099-R, taxpaye Number distributions distributions or S for box 7) spouse 1. .00 .00 2 .00 .00 3. .00 .00 4. .00 .00 Total federally taxable IRA distributions (Add lines1 through 4 above for this column; amount 5. .00 should equal the amount reported on Form GR-1040, page 1, line 9, column A) 6. Total excludible IRA distributions (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

Attachment 8

EXCLUSIONS AND ADJUSTMENTS TO PENSIONS AND ANNUITIES - GR-1040, PAGE 1, LINE 10, COLUMN B Attachment 9 List pension distributions 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 equal						
6. Total	excludible pension distrit	putions (Add lines above for this column; enter here and also on l	Form GR-1040 (for pa	art-vear residents, Sch. TC), p. 1	1. l. 10. col. B)	00

Taxpayer's name	Taxpayer's SSN	2020 GRA	YLING				
EXCLUSIONS AND ADJUSTMENTS TO INCOM PARTNERSHIPS, S CORPORATIONS, TRUSTS,				Attachment 10			
Residents, nonresidents and part-year residents use	this schedule to report	rt exclusions and	DECIDENT				
adjustments to income from rental real estate, royalt estates, trusts, REMIC's and farm rentals.	ies, partnerships, S co	rporations,	RESIDENT COLUMN	NONRESIDENT COLUMN			
1. Rental income (loss) from real estate located outside the City			NOT EXCLUDIBLE ON RESIDENT RETURN	(1()			
2. Royalties (A resident may exclude only royalty income upon which Mich exclude royalty income upon which Michigan severance tax was paid a				.00. 00.			
3. Partnership income (loss) from partnership business activity outside the C	Dity		NOT EXCLUDIBLE ON RESIDENT RETURN	()()			
4. Subchapter S corporation income (loss) (See instructions)				.0000			
5. Estate or trust income or loss (Enter the total amount from federal Schedu	٥٥.						
6. Real estate mortgage investment conduits (REMIC's) income or loss and located outside the city	N						
7. Total adjustments to income from rental real estate, royalties, partnerships line 11, column B, or for part-year residents enter total of resident and non	.0000						
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	ON (LIKE SUBCHAPT	ER S CORPORAT	ION) DISTRIBUTI	IONS - Attachment 11			
GR-1040, PAGE 1, LINE 12, COLUMN B	,		,				
Residents use this schedule to report distributions from		· ·	er S Corporations) taxable under the City			
Income Tax Ordinance; part-year residents report on	ly distributions receive	ed while a resident					
CORPORATION NAME AND DBA			FEDERAL I.D. #	DISTRIBUTION RECEIVED			
1.				.00			
2.				.00			
3.				.00			
4.				.00			
5. Total tax option (Subchapter S) corporation distributions (Add lines 1 through the senter on Schedule TC, line 12, column B)	ugh 4; enter here and on Form I-1	040, page 1, line 12, column	B, or for part-year residents	.00			
Complete above schedule or attach a separate schedule listing the name feder	ral ID number and amount of dist	ribution from each tax option	(Sub. S) corporation listed	on federal 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	NB Attachment 12			
Nonresidents use this schedule to exclude farm inco	me from outside the c	ity					
FARM INCOME				FARM			
1. Net profit (or loss) from farm				.00			
2. 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 o	n Form GR-1040, page 1, line 13	, column B)		.00			
FARM ALLOCATION FORMULA		COLUMN 1 EVERYWHERE	COLUMN 2 IN CITY	COLUMN 3 PERCENTAGE			
1. Average net book value of real and tangible personal property		.00		.00 (Column 2 divided			
2. Gross rents paid on real property multiplied by 8		.00		.00 by column 1)			
3. Total property	.00 %						
4. Total wages, salaries and other compensation of all employees	.00 %						
5. Gross receipts from sales made or services rendered	.00 %						
6. Total percentages (Add the percentages computed in column 3)				%			
7. Business allocation percentage (Divide line 6 by the number of apportion	,			%			
Note: In determining the average percentage, if a factor does not exist, you minote: If you are authorized to use a special formula, attach a copy of the adminimed to use a special formula.							
Note: Net operating loss from prior year is reported on Form GR-1040, line 16,		a constant actaining tall					

Taxpayer's name		Taxpayer's SSN	2020 GRAYLING			
EXCLUSIONS AND ADJUSTME	COLUMN B		Attachment 13			
Residents and nonresidents use t	his schedule to rep	port exclusions and a	idjustments to othe	er income		
SOURCE OF INCOME	FEDERAL I.D. #	NATURE OF	INCOME	RESIDENT COLUMN		NONRESIDENT COLUMN
1.				.(00	.00
2.					00	.00
3.					00	.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 otals on Form GR-1040TC, li	and enter totals here and on Fo ine 16, column B)	orm GR-1040, page 1,		00	.00
Attach an explanation of and calculation for any rep Attach an explanation for each item reported and e				•	÷	

Add lines as needed.

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 deduction of the federal IRA deduction state amount of earned income received while a nonresident and the portion of the federal IRA deduction 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.

	TAXP	AYER	SPOUSE			
	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	
1. 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 income taxable by city (line 1 column A) by individual's total earned income (the sum 1, column A plus column B).		
4. City IRA deduction based upon individual's earned income	.00		.00	Taxpayer's or spouse's federal IRA deduction (line 2a) multiplied by city earned income percentage (line 3).		
Amount individual's federal IRA 5. deduction exceeds individual's earned income taxable by city	.00		.00	Taxpayer's or spouse's federal the individual's earned income		
Amount spouse's earned income 6. exceeds spouse's federal IRA deduction (excess earned income)	.00		.00	Column A equals spouse's earned income taxable by city (line 1 of spouse's column C) less spouse's federal IRA deduction (line 2a of spouse's column C). Column C equals taxpayer's earned income taxable by city (line 1 of taxpayer's column A) less taxpayer's federal IRA deduction (line 2a of taxpayer's column A).		
7. City IRA deduction based upon spouse's earned income	.00		.00	If individual's (taxpayer or spouse) federal IRA deduction exceeds individual's earned income and spouse's earned income exceeds spouse's federal IRA deduction (line 5), enter the lesser of the individual's excess IRA (line 5) or spouse's excess earned income multiplied by spouse's city earned income percentage (line 6), else enter zero.		
8. City's IRA deduction	.00		.00	Add individual's (taxpayer or sp upon their own city earned inco deduction based upon their spo		
RESIDENT OR PART-YEAR RESIDENT: Enter total resident IRA deduction here. Normally this is the total of the taxpayer's and spouse's city IRA deduction, line 2a of columns A and C. If a part- 9. year resident, normally this is the total of the taxpayer's and spouse's city IRA deduction, line 2b of columns A and C. If either the taxpayer or spouse has nontaxable earned income while a resident, separately compute the resident IRA deduction in the same manner as a nonresident.			.00	PART-YEAR RESIDENT: Enter total federal IRA deduction Schedule TC, Deductions schedule, line 1, column A; enter resident city IRA deduction in column C; enter the nonreside city IRA deduction in column D; 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-	ity IRA deduction here and on Fo	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	2020 GRAYLING					
SELF-EMPLOYED, SEP, SIMPLE AND QUALIFIED PLANS DEDUCTION WORKSHEET - GR-1040, Attachment 15							
PAGE 2, DEDUCTIONS SCHEDULE, LINE 2							

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
5. Add col	5. 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

Attachment 16

6. on Schedule TC, Deductions schedule, line 2, column C 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

Column 1 Column 3 Column 5 Column 2 Column 4 As reported on Employer 1 Employer 2 Employer 3 Employer 4 federal Form 2106 1. Employer's identification number (FEIN) 2. Occupation (List for each employer) 3. Vehicle expenses Parking, fees, tolls and local transportation, including 4 .00 .00 .00 .00 .00 train, bus, etc. Travel expenses while away from home overnight, 5. including, lodging, airfare, car rental, etc. Do not include .00 .00 meals and entertainment 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 .00 .00 .00 .00 .00 only if an outside salesperson; see instruction below) 8. Meals (See meal expenses instruction below) .00 .00 00 00 9. Total business expenses (Add lines 3, 4, 5, 7 and 8) 00 Enter reimbursements received from your employer for 10. expenses included in line 9 that were not reported to you .00 .00 .00 .00 .00 in box 1 of Form W-2 11. Business expense deduction (Line 9 less line 10) .00 .00 .00 .00 Percentage deductible (Same percentage related wages % % 12. % % 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 .00 GR-1040, page 2, Deductions schedule, line 3) Form I-2106. Column 1. 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 4, Col. A: line 8 lines to related lines on = 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; line11 = Fed. Form 2106, line 8, Col. A & B. federal Form 2106: 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." 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 Line 7 instructions: 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.

Taxpayer's name		Taxpayer's SSN	2020 GR/	AYLING		
MOVING EXPE	NSE DEDUCTION WORKSHEET	- GR-1040. PAGE 2.	DEDUCTIONS SC	HEDULE.	Attachment 17	
	No deduction is allowed when moving a			,		
RESIDENT: A resid	ent individual who moved into the city ma	ay claim the deduction as o	claimed on federal Form	n 3903.		
	nonresident individual who moved into t centage the income after moving to the a		im a portion or all of the	e deduction as claimed o	n federal Form 3903	
	DENT: An individual who moved to the armay be entitled to a portion of the deduct			5	en became a resident	
DISTANCE TEST W	ORKSHEET					
1. Number of miles from	n your old home to your new workplace	1	miles			
2. Number of miles from	n your old home to your old workplace	2	miles			
3. Subtract line 2 from	line 1. If zero or less, enter -0-	3	miles			
	an 50 miles continue, otherwise you are not qualifie					
	n and storage of household goods and personal ef			4	.00	
 Cost of travel (include Add lines 4 and 5 	ling lodging) from your old home to your new home	e. (See instructions for federal For	m 3903) (Do not include the	cost of meals.) 5	.00	
- Enter the amount yo	ur employer paid you for the expenses listed on lin of your Form W-2 with a code P)	es 4 and 5 that is not included in	box 1 of your Form W-2 (wa	-	.00	
	No You cannot deduct your moving exper on Form GR-1040, page 1 line 1, colur				.00	
8. Is line 6 more 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	%				
	11. 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) 11 .00 Multiply line 8b by the percentage on line 10 (Moving expense deduction allowed while a nonresident; enter here and on Form GR-1040, 11 .00					
	schedule, line 4) (If a part-year resident add amour			12	.00	
	DEDUCTION WORKSHEET - G	R-1040, PAGE 2, DEI	DUCTIONS SCHEE	ULE LINE 5	Attachment 18	
RESIDENT: Full-yea	ar residents claim the entire amount of al	imony reported on federal		· · · · · · · · · · · · · · · · · · ·		
•	presidents use the nonresident column		ate their city alimony de	duction		
	ENT: A part-year resident may need to u		2 2		te their	
alimony deduction.	For each line of the worksheet, compute A part-year resident with no city income	the amount to enter into th	e resident and/or nonre	esident columns and follo		
	art-year residents use this worksheet to o			RESIDENT COLUMN	NONRESIDENT COLUMN	
Enter resident portion of federal adjusted gross income (Form 1040, page 1, line 37) in resident column and/or nonresident .00						
Enter resident portion 2. nonresident portion city and while nonre	.00					
	.00	.00				
4. nonresident column.	Federal income for alimony deduction computation (Line 1 plus line 2 of column) Inter resident portion of total income for city (Form GR-1040, page 1, line 18) in resident column and/or nonresident portion in 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)					
	n of total deductions for city other than alimony dec schedule) in resident column and/or nonresident p		n Form GR-1040,	.00	.00	
6. Taxable income for	city prior to alimony deduction (Line 4 less line 5)			.00	.00	
7. Resident column: Er Nonresident column	nter 100%. : Enter alimony deduction percentage (Line 6 divid	ed 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

Taxpayer's name	Taxpayer's SSN	20	020 GRAYLIN	١G	
OTHER TAX PAYMENTS - GR-1040, PAGE 1 PAYMENTS, EXTENSION PAYMENTS, CRED FOR TAX PAID BY A TAX OPTION CORPOR	IT FORWARD, TAX				Attachment 20
	OTHER TAX PAYMENT	S			OTHER TAX PAYMENTS
1. Estimated tax payments					.00
2. Tax paid with an extension					.00
3. 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
 Credit for tax paid by a tax option corporation Corporation FEIN 		Corporation name			.00
8. Total credit for estimated tax, extension and partnership tax paym and Credits schedule, line 24b)	ents and credit forward (Add lir		here and on GR-1040,	Page1, Payments	.00
CREDIT FOR TAX PAID TO ANOTHER CITY					Attachment 21
Credit for tax paid to another city may be claimed by a re		•		iouj	
Part-year residents may claim the credit for tax paid to a	•			e by another city	
OTHER CITY'S NAME OR CORPORATIO	-				TAX CREDIT
1. Tax paid to another city City name					.00
2. Tax paid to another city City name					.00
3. Total credit for tax paid to another city (Add lines 1 and 2; enter he	are and on GR-1040 Page 1 F	Payments and Credits	schedule line 24c)		.00
	ere and on Giv-1040, Fage 1, F	ayments and credits :			.00
CALCULATION OF CREDIT FOR TAX PAID T	O ANOTHER CITY	(Residents on	[v]	RESIDENT CITY	OTHER CITY
Use a separate calculation worksheet for ea		(Residents on	(v	GR	OTHER OFT
1. Income taxable in the nonresident city that is also taxable in the re-		ooth cities)		-	.00
 Exemptions amount per city's return 	Siden city (Dane anount for L	Join chies)			00. 00
3. Taxable income for credit					00. 00
 Tax for credit purposes at each city's nonresident tax rate 					00. 00
 Credit allowed for tax paid to another city (Enter the smaller of res 	ident city's or other city's tax fr	om line 4)			00

Taxpayer's name Taxpayer's SSN			2020 GRAYLING GR-CO				
Employer Name Employer Federal ID r			number	Pay Type Hou		Commission	Job Title
NON-RESIDENT Wage Allocation - 2020 Tax Year							
Stay at Home Order Implications- must be completed for each employer for which you are allocating wages.							
ALLOCATION TEST	WORKSHEET						
Check the box(es) be	low that apply.						
1. Were you laid off durin	g the stay at home order and did you colle	ct unemployment? 1	Yes	No	If Yes, enter da	tes From/_	/ To//
	employer but did not perform any work?	2	Yes	No	If Yes, enter da	tes From/_	
 Were you paid by your occasional work-relate 	employer and only answered occasional e d phone conversations and/or were on call	emails, had I? 3	Yes	No	If Yes, enter da	tes From/_	/ To//
Did you work by remote from your home outcide of the taxing City for hours			Yes	No	If Yes, enter da	tes From/_	/ To//
Did you answer							
5 Yes to question 4? Yes Wage allocation is allowed to the extent that you worked remotely not including any sick/vacation you may have taken. Use the wages Yes and excludible wage schedule to calculate the exclusion based only on the dates shown on line 4. A signed copy of this worksheet must be attached to your return or your wage allocation will be disallowed. See below for additional support that may be required.							
Under the penalty of perjury, I declare that I have examined this form, and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, the preparer's declaration is based on all information of which preparer has any knowledge. I understand that this information will be verified with my employer.							
SIGN HERE Employee Signature Date (MM/DD/YY) Taxpayer's occupation Daytime phone number							
X If this box is checked your City requires an employer letter confirming you worked remotely.							

Explanation of why questions 1 to 3 are not part of the allocation.

1) Days out of work are not considered to be days worked. Unemployment compensation is not taxable and is not reported on your W-2.

2) No wage allocation is allowed, because days at home are not considered to be days work. These days fall under the same category as vacation/sick time.

3) No wage allocation allowed unless taxpayer was called in (i.e. worked by remote for hours approximating their regular shift). This appears to fall under many City Regulations as follows: The mere fact that a non-resident employee is subject to call at any time does not permit the allocation of compensation on a seven day per week basis. The mere fact that a non-resident employee is compensated on a seven day per week salary basis, when he/she does not in fact perform work or render services seven days per week, does not permit the allocation of compensation on a seven that a non-resident employee takes work home does not permit the allocation of compensation.

Taxpayer's name	Taxpayer's SSN	2020 GRAYLING	
SUPPORTING NOTES AND STATEMENTS	<u> </u>		Attachment 22