

### 2016 MICHIGAN Individual Income Tax Return MI-1040

Type or print in blue or black; 1. Filer's First Name	M.J.	Last Name	V 14 J 4.	20103	- 1101 110				No. (Example: 123-45-678	<u></u>
John	E	Bren	N A W			2.740/37	AN SOCIAL SE	curry (	No. (Example: 123-45-678	ŋ
If a Joint Return, Spouse's First Nan		Last Name	7147	<del></del>						
						3. Spouse	's Full Social	Secur	ily No. (Example: 123-45-	786
Home Address (Number, Street, or F	~ ·									
9249 State	<u>Ka</u>		State   ZV	P Code		4 School	District Corto	15 60	Ns see page 60)	
Jackson				4920	<i>i</i> j	7.02.00	381		- see halle on)	
5. STATE CAMPAIGN FUND				<del>``</del>		ERS, FISH			VFARERS	
Check if you (and/or your s	pouse, if	* <u></u>	er							
Jing a joint return) want \$5 to go to this fund. This will		- F				Check this bushing, or se		your in	ncome is from farming,	
your tax or reduce your ref		°. [] sp	cuse		•	, u 20	and any.			
7. 2016 FILING STATUS, Ch	eck one.				8. 2016	RESIDENCY	STATUS.	Chec	k all that apply.	
a. Single		ou check box "c,"	complete			Resident				
	line	3 and enter spoue		ne l	,,				" If you check box "b" o "c," you must complete	
b. Married Jing jointly	belo	W:			b. []	Nonresideni	t *		and attach Schedule	
c. X Merried Jing separa	iely*				٦٦	Part-Year R	enident *			
1/21										
9. EXEMPTIONS. NOTE: 1	someone el	ie can claim you a	s a depend	dent, che	ck box 9d, e	nter 0 on lin	e 92 and e	nter \$	1,500 on <b>line</b> 9d (see in	<u>.</u>
	alainead an f	2046 fortant misse			٥	0	× \$4,000	_	,	$\frac{1}{2}$
a. Number of exemptions     b. Number of individuals		_				<b>-</b>	× \$4,000	340		ቶ
blind, hemiplegic, para						Ü	x \$2,600	9Ь.	C	c
c. Number of qualitied di	abled vetera	ns		••••	9c.		× \$400	9c	Ü	C
d. Claimed as dependent	K O A	MATE above			64		•		C	
d. Ciamed as dependent	, see mie 3 n	OTE 20046			9d.	i		9d.		弋
e. Add lines 9a, 9b, 9c a	nd 9d. Enter	here and on line 1	5		*******	,,,,		9e.	(	10
									, r	
10. Adjusted Gross Income	from your U.	S. Forms 1040, 10	MOA, 1040	IEZ or 10	40NR (see i	nstructions)	10.		<u> </u>	49
11. Additions from Schedule	1 line 9 Atts	ch Schedule 1					11.		0	6
11. Pagaggis non concous	, m									T
12. Total. Add lines 10 and 1	l	***********		,			12.		<u> </u>	19
							40		c <sup>-</sup>	
13. Subtractions from Sched	<i>i</i> le 1, line 27.	Attach Schedule	<b>៛ 1</b>				13.			ť
14. Income subject to tax.	Subtract line '	3 from line 12. If	line 13 is q	reater th	en line 12, e	nter "0"	14.		$\mathcal{C}$	10
			_							T
15. Exemption allowance.	inter amount	from line 9e or Sci	hedule NR	, line 19		**************	15.		<u> </u>	4
		- Nos 14. Miles 16	in constar	than line	. 14 anter *0	p	16.		0	
•	4 Ena 4E fram	( m) ( ) ( ) ( ) ( ) ( ) ( )	in Alcondi	una: ma	17, OHIOL V	***************	10.			ť
16. Taxable income. Subtra	d line 15 from								$\boldsymbol{c}$	
•		)	***************************************				17.			
16. Taxable income. Subtra	.25% (0.0425	)	**************		AMOUN		17.		CREDIT	<u> </u>
16. Taxable income. Subtra 17. Tax, Multiply line 16 by 4 NON-REFUNDABLE CRED 18. Income Tax Imposed by	.25% (0.0425 ITS government u	nits outside Michig	jan.			r I	<b>7</b> i		CREDIT	T
16. Taxable income. Subtra  17. Tax. Multiply line 16 by 4  NON-REFUNDABLE CRED  18. Income Tax Imposed by 6  Attach a copy of the retu	.25% (0.0425 ITS government u m (see instru	nits outside Michig ctions)	<b>jan.</b> 18a.			r I	00 18b.		CREDIT	
16. Taxable income. Subtra  17. Tax. Multiply line 16 by 4  NON-REFUNDABLE CRED  18. Income Tax Imposed by	.25% (0.0425 ITS government u m (see instru- vation Tax Cn	inits outside Michig ctions)edit carryforward a	jan. 18a. ind/or			r 	<b>7</b> i		CREDIT (	T

# Copy

#### 2016 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1987, as amended.

Type or print in blue or black ink. Print numbers like this: 0/23456789 - NOT like this:  $\emptyset$  1. 4.7

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2016, you must complete a Withholding Tax Schedule (Schedule W) to claim the withholding on your Individual Income Tax Return (MI-1040, line 29). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits in Table 2 even if no Michigan tax was withheld. Attach your completed Schedule W 157 pain MI-1040X-12 where applicable. See complete instructions on page 2 of this form. If you need additional space, attach another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
John	E	Brennan	
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

#### TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

Α	В	C	D		E		
Enter "X" for: Filer or Spouse	Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation		Box 17 Michigan income tax withheld		
Χ	38-2416922	Performance automotive	0	00	1044	/ 00	
		·		00		0	
				00		0	
				00		0	
				00		0	
				00		0	
Enter Table	1 Subtotal from additional Sche	edule W forms (if applicable)				0	
4. SUB	TOTAL. Enter total of Table 1. o	xolumn E		4	1044	, o	

## TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS REPORTED ON 1099 FORMS

Α	В	C	D	E Michigan income tax withheld	
inter "X" for: for or Spouce	Payer's federal identification number (Example: 38-1234567)	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)		
					0
			00		0
			00		0
			<u> </u>		0
					0
					0
nter Table	2 Subtotal from additional Sched	lule W forms (if applicable).			6
5 SUB	STOTAL. Enter total of Table 2, or	Aumn E	5.	4044	0

Copy:

2016 N	N-1040, Page 2 of 2									$\Box$
		Filers	Full Social Se	ecurity Numbe						
21	Enter amount of Income Tax from is	na 20				2.			O	
22.	Voluntary Contributions from Form 4	_	22.			800				
23.	USE TAX. Use tax due on Internet, Worksheet 1 (see instructions)	<u>-</u>	23.		Ü	00				
24.	Total Tax Liability. Add lines 21, 22	and 23				24.			1)	00
	JNDABLE CREDITS AND PAYM									
25.	Property Tax Credit. Attach MI-10			25.		O	00			
26.	Farmland Preservation Tax Credit	. Attach MI-1040CR-5	·		~ <u></u>	<del></del>	26		0	00
27.	a. Federal Earned Income Tax Cred	<b>i.</b>	27a.		Ü	00				
	b. Michigan Earned Income Tax Cre	dit. Multiply line 27a by	<b>6% (0.06)</b> .	***************			276.		0	00
28.	Michigan Historic Preservation Tax	Credit (refundable). Att	ach Form 3	ı <b>5</b> 81,	••••		28.		0	00
29.	Michigan tax withheld from Schedul	e W, line 7. Attach Sci	hedule W (d	lo not subn	nit <b>W-2s</b> )		29.		1044	00
30.	Estimated tax, extension payments	·····	30.		U	00				
31.	Total refundable credits and payme	nts. Add lines 25, 26, 2	7b, 28, 29 a	nd 30		31.			1144	00
REFL	JND OR TAX DUE		•			-				
<b>32</b> .	If line 31 is less than line 24, subtra	ct line 31 from line 24.	annfirable (s	one inetr\	YOU OWE	32.			0	00
33.	Overpayment. If line 31 is greater to	•	•	•		33.			1044	
34.	Credit Forward. Amount of line 33	to be credited to your 2	1017 estimal	ed tax for y	our 2017 tax re	itum	34.		C	00
35.	Subtract line 34 from line 33		*******		REFUND	35.			1044	00
DIR	ECT DEPOSIT	a. Routing Transit i	Number	b.	Account Numbe	M		c. Type of A	Account	
Depo institu a, b a	elt your refund directly to your ¿nancial ifion! See instructions and complete ind c.					***************************************	7.00	Checking	2. Savis	•
	eased Taxpayer. If Filer and/or Spoul			dates below.	Preparer Co	ertizca	tion. I declar	re under pen	uity of parjury t	thet
File		-	. 1	Preparer's PTIN, FEIN or SSN						
Taxo	payer Certi¿cation. I declare under	this return	Preparer's Name (print or type)							
and attachments is true and complete to the best of my knowledge.					Preparer's Business Name, Address and Telephone Number					
	John E. Brenn	m	4-17 Date	-17	- repair a monera mane, municipa and respitore in					
Spou	se's Signature									
	By checking this box, I authorize Tro									

Refund, credit, or zero returns. Mail your return to: Michigan Department of Treasury, Lansing, MI 48956 Pay amount on line 32. Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

Make your check payable to "State of Michigan." Print the last four digits of your Social Security number and "2016 Income Tax" on the front of your check. If paying on behalf of another taxpayer, write the ¿ler's name and the last four digits of the ¿ler's Social Security number on the check. Do not staple your check to the return. You can pay electronically using Michigan's e-Payments service. Keep a copy of your return and supporting schedules for six years. For more information and to check your refund status, have a copy of your MI-1040 available when you visit www.michigan.gov/lit.