2013 MICHIGAN Homestead Property Tax Credit Claim for Veterans and Blind People MI-1040CR-2

Print n	umbers like this: 0/2345	56789	- NOT like this: $\ensuremath{\mathcal{Q}}$	1147	-				Attachm	nent 06
1. Filer'	s First Name	M.I.	Last Name				2. Filer's Social Security	No. (Ex	ample: 123-45-6789))
If a Joir	nt Return, Spouse's First Name	M.I.	Last Name					V	_	
3. Spouse's Social Secu			rity No.	(Example: 123-45-6	789)					
Home A	Address (Number, Street, P.O. Bo	x) If using a	a P.O. Box, you must co	omplete line 3	34, p. 2.				_	
City or	Town			State	ZIP Co	ode	4. School District Code (5 digits	- see p. 19)	
5. 20 1	13 FILING STATUS:	6. 2013	RESIDENCY ST	ATUS:	l	*If you ch	lecked box "c," enter dates	of Michi	gan residency in 20°	13.
Cr	neck one.	Che	ck all that apply.				es as MM-DD-YYYY (Exar			
а. 🗀	Single	а. 🗌	Resident				FILER		SPOUSE	
b	Married, Filing jointly	b	Nonresident		FRC	ом: -	— 2013	-	- - 2	2013
с	Married, Filing separately	с	Part-Year Resident	*		-O:		-	<u> </u>	2013
7. Che	ck one of the following that a	polies to v	von.							
a. [Blind and own your homest		. Gu.	c.	Survi	ving spouse	of veteran deceased in	service		
b. [Veteran with service-conne	cted disat	oility	*4					iving spouso	
5	or veteran's surviving spous		•	u.	ACTIVE	riilitary, per	nsioned veteran or his/h	ei suiv	iving spouse	
	Enter percent of disability:		 %	*e.			of a nondisabled or non d War II, or World War I	pensior	ned veteran of the	;
* If y	ou check "d" or "e" above and	d your Tot	al Household Resou	irces (line 3	2) are	more than \$7	7,500, you cannot claim	a credi	t on this form.	
			. 4.//							
8.	Taxable value allowance for	rom labl	e 2, page 10					8.		00
9.	Taxable Value of homeste	ad. Hom	eowners: If great	ter than \$1	135,00	0, STOP; y	ou are not eligible	9.		00
10. I	Property Taxes levied on y	our hom	e for 2013 (see p	. 4)				10.		00
11. I	Percent of tax relief. Divide	e line 8 b	y line 9 (not to ex	ceed 100%	%)			11.		%
					-					
	Multiply line 10 by line 11.		,					12.		00
	HOUSEHOLD RESOURCES		income from both	spouses.	_		•	049 at n Γ	nichigan.gov/trea	asury
	Wages, salaries, tips, sick and SUB pay, etc		13.	0	0 20		ecurity, SSI, and/or etirement benefits	20.		00
	All interest and dividend in				-		port and foster			
	(including nontaxable inter		14	0	0		yments received	21.		00
	Net business income (incl					2. Unemplo	-			
	farm income). If negative of		15	<u> 0</u>	0 0	=	ation	22.		00
	Net royalty or rent income If negative enter "0"		16.	0	0 2		expenses paid on alf	23.		00
	Retirement pension, annu				_	•	ntaxable income			
	IRA benefits		17	0	0	Describe		24.		00
	Capital gains less capital I (see p. 7)		18	0	25		veterans' disability ation/pension benefits	25.		00
	Alimony and other taxable	income					other DHS benefits			
l	Describe:		19.	[0	0	(Do not in	clude food assistance)	26.		00
27	SUBTOTAL. Add lines 13	through	26				SUBTOTAL	27.		00

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	Filer's Social Security No.		
28	Enter subtotal from line 27, page 1	28.	00
20.	Ziner subtotal from line 27, page 1	20.	00
29.	Other adjustments (see p. 8). Describe: 29		
30.	Medical insurance/HMO premiums you paid for you and your family (see p. 8)		
31.	Add lines 29 and 30.	31.	00
32.	TOTAL HOUSEHOLD RESOURCES. Subtract line 31 from line 28. If more than \$50,000, STOP; you are not eligible for this credit	32.	00
33.	PROPERTY TAX CREDIT. (Maximum \$1,200). Enter one of the following: a. FIP/DHS RECIPIENTS, enter amount from Worksheet 3 on p. 8. b. If line 32 is more than \$41,000, see instructions on p. 8 and enter the reduced amount. c. ALL OTHERS, enter the amount from line 12.		
	If you file an MI-1040, carry this amount to MI-1040, line 25	33.	00

PART 1: HOMEOWNERS WHO MOVED IN 2013. Report on lines 34 and 35 the addresses and taxable values of the homesteads for which you are claiming a credit. Homesteads with a taxable value greater than \$135,000 are not eligible for this credit

34. <i>A</i>	ddress where you lived on December 31, 2013, if different than reported on line 1.		Taxable Value		
35. <i>A</i>	address of homestead sold (moved from) during 2013 (Number, Street, City, ZIP Code).		Taxable Value		
Hom	eowners who moved during 2013, complete lines 36 through 44. If you also		HOMES	STEAD	
	ed a homestead during 2013, complete lines 45 through 56.	A. Moved Into	B. Moved From		
36.	Number of days occupied (total cannot be more than 365)	36.			
37.	Divide line 36 by 365 and enter percentage here	37.	%	c	%
38.	Property taxes levied for calendar year 2013	38.			_
39.	Prorated taxes. Multiply line 38 by percentage on line 37	39.			_
40.	Taxable value allowance (see Table 2, p. 10)	40.			_
41.	Taxable value	41.			
42.	Divide line 40 by line 41 and enter percentage here	42.	%		%
43.	Prorated credit. Multiply line 39 by line 42	43.			_
44.	Property tax credit. Add line 43 columns A and B. Enter here and on line 12. Part-year renters: do not carry to line 12; complete lines 45 through 56 instead.		44.		

 $\label{eq:continue} \text{Continue on page 3. This form cannot be processed if pages 2 and 3 are not complete and attached.}$

Filer's Social Security No.	_	

PART 2: RENTERS (Veterans Only)

45.	Α	В		C	D	E
	Address of Homestead You Rented	Landowner's Name		# Months	Monthly	Total Rent Paid
	(Number, Street, Apt. #, City, ZIP Code)	(City, State and	ZIP Code)	Rented	Rent	Less Mobile Home Taxes
46.	Total rent you paid (not more than 12 mo	nths) Add total rent for eac	ch period		46.	00
	Multiply line 46 by 20% (0.20). Service fe				10.	
47.	Full-year renters, enter here and on line				47.	00
	, , ,					133
48.	Multiply non-homestead property tax mi	llage by 0.001 (see p. 10, 0	Credit Computation Ex	(amples)	48.	
49.	Full-year renters only, divide line 47 by	line 48 to get your taxable	value. Enter here and	on line 9	49.	00
Part-	year renters, complete lines 50 through	56				
50.	Divide line 46 by the number of months y	ou rented			50.	00
51.	Multiply line 50 by 12 months				51.	00
52.	Multiply line 51 by 20% (0.20). Service fe	e housing residents use 10	0% (0.10) (see p. 5)		52.	00
53.	Divide line 52 by line 48 to get your taxal	ole value. Enter here and o	n line 9		53.	00
54.	Percent of tax relief. Divide line 8 by line	53			54.	%
	NA 16 1 15 471 15 54					
55.	Multiply line 47 by line 54				55.	00
F C	Add lines 44 and 55. Enter have and an I	in a 10			50	
56.	Add lines 44 and 55. Enter here and on I	ine 12			56.	[00]
		<u></u>				
	DIRECT DEPOSIT	Routing Transit Number	b. Account Number			Type of Account
	Deposit your refund directly to your	touring Transit Number	b. Account Number	1.	Check	·· —
	financial institution! See page 9 and			'		g Z Guvings
Dece	complete a, b and c. eased Taxpayer. If Filer and/or Spouse died afte	r Docombor 31, 2012, onter dates	Proparor Corti	fication	l dooloro un	nder penalty of perjury that
	ER DATE OF DEATH ONLY. Example: 04-15-2013					ich I have any knowledge.
		,	Preparer's PTIN, F	EIN or SSN		
Filer	Spouse					
Tavn	ayer Certification. I declare under penalty of p	orium that the information in this	Preparer's Busines	s Name (pri	nt or type)	
and at	tachments is true and complete to the best of my known	erjury urat ure iriiOrmaliOn in this re vledge.	rum			
	Signature	Date	Preparer's Busines	s Address (ı	orint or type)

If you are also filing Form MI-1040, attach this form behind it. If not, mail this form to: Michigan Department of Treasury, Lansing, MI 48956

Date

By checking this box, I authorize Treasury to discuss my return with my preparer.

Spouse's Signature