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

Print numbers like this: 0/23456789 - NOT like this: 0147

	numbers like this: 0/2345	56789		147	L				Attachme	nt 06
1. Fil	er's First Name	M.I.	Last Name				2. Filer's Social Security	/ No. (E	xample: 123-45-6789)	
lf a J	pint Return, Spouse's First Name	M.I.	Last Name							
							3. Spouse's Social Secu	urity No.	(Example: 123-45-6789	Э)
Home	Address (Number, Street, P.O. Bo	x) If using a	P.O. Box, you must co	mplete line	34, p. 2.					
City o	r Town			State	ZIP Code	e	4. School District Code	(5 digits	s - see p. 19)	
	D13 FILING STATUS: Check one.		RESIDENCY STA	TUS:			ked box "c," enter dates as MM-DD-YYYY (Exa		nigan residency in 2013. 4-15-2013).	
a. [	Single		Resident		FILER				SPOUSE	
							2013		20.	12
b.	Married, Filing jointly	b. 🔤 I	Nonresident		FROM		2073		20.	/3
с.	Married, Filing separately	c. 🔲 I	Part-Year Resident *		то	:	2013		20.	13
7. C	neck one of the following that a	pplies to y	ou:							
а. 🗌	Blind and own your homest	ead		с.	Survivin	ig spouse of	veteran deceased in	service	e	
b.	Veteran with service-conner or veteran's surviving spous		pility	*d	Active n	nilitary, pens	oned veteran or his/h	ner sur	viving spouse	
	Enter percent of disability:		%	*e.	] Survivin Korean	g spouse of War, World \	a nondisabled or nor Nar II, or World War I	npensio I	oned veteran of the	
* I1	you check "d" or "e" above and	d your Tota	al Household Resou	rces (line	32) are m	ore than \$7,5	500, you cannot claim	n a creo	dit on this form.	
		<b>-</b>	<b>a</b> (a)							
8.	Taxable value allowance fi	rom Table	e 2, page 10					8.		00
9.	Taxable Value of homeste	ad. <b>Hom</b>	eowners: If greate	er than \$	135,000,	STOP; you	u are not eligible	9.		00
10.	Property Taxes levied on y	our hom	e for 2013 (see p.	4)				10.		00
11.	Percent of tax relief. Divide	e line 8 b	y line 9 (not to exc	ceed 100	%)			11.		%
12.	Multiply line 10 by line 11.	Enter the	e result (maximum	\$1,200)				12.		00
	L HOUSEHOLD RESOURCES		•						michigan.gov/treas	
13.	Wages, salaries, tips, sick, and SUB pay, etc		13.	(	20.		urity, SSI, and/or irement benefits	20.		00
14.	All interest and dividend in						ort and foster	04		
15	(including nontaxable inter Net business income (inclu		14		20	Displaying the parent pay	ments received	21.		00
15.	farm income). If negative e		15	(	22.		tion	22.		00
16.	Net royalty or rent income.						penses paid on			
47	If negative enter "0"		16	(	20	•	f	23.		00
17.	Retirement pension, annui IRA benefits.		17		24.	Describe:	axable income	24.		00
18.	Capital gains less capital le (see p. 7).		18.		25.		terans' disability on/pension benefits	25.		00
19.	Alimony and other taxable	income			26.		her DHS benefits			
	Describe:		19		00	(Do not inclu	ude food assistance)	26.		00
27.	SUBTOTAL. Add lines 13	through	26				SUBTOTAL	27.		00

+ 0000 2013 29 01 27 3

Continue on page 2. This form cannot be processed if pages 2 and 3 are not complete and attached. Filer's Social Security No.

28.	Enter subtotal from line 27, page 1	28.	00
29.		-	
	Add lines 29 and 30 TOTAL HOUSEHOLD RESOURCES. Subtract line 31 from line 28. If more than \$50,000, STOP; you are not eligible for this credit	31. 32.	00 00
33.	<ul> <li>PROPERTY TAX CREDIT. (Maximum \$1,200). Enter one of the following:</li> <li>a. FIP/DHS RECIPIENTS, enter amount from Worksheet 3 on p. 8.</li> <li>b. If line 32 is more than \$41,000, see instructions on p. 8 and enter the reduced amount.</li> <li>c. ALL OTHERS, enter the amount from line 12.</li> <li>If you file an MI-1040, carry this amount to MI-1040, line 25</li> </ul>	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. A	ddress where you lived on December 31, 2013, if different than reported on line 1.	Taxable Value					
35. A	ddress 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		HOMESTEAD				
rente	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.		%		%	
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. <b>Part-year renters:</b> do not carry to line 12; complete lines 45 through 56 instead.			14.			

Continue on page 3. This form cannot be processed if pages 2 and 3 are not complete and attached.

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## PART 2: RENTERS (Veterans Only)

45.	А	В	с	D	E			
	Address of Homestead You Rented (Number, Street, Apt. #, City, ZIP Code)	Landowner's Name and Address (City, State and ZIP Code)	# Months Rented	Monthly Rent	Total Rent Paid Less Mobile Home Taxes			
L			L	L				
46.	Total rent you paid (not more than 12 mo	onths). Add total rent for each period		46.	00			
47.	Multiply line 46 by 20% (0.20). Service fe Full-year renters, enter here and on line	47.	00					
48.	Multiply non-homestead property tax mi							
49.	Full-year renters only, divide line 47 by	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	ee housing residents use 10% (0.10) (see p. 5)		52.	00			

53.

54.

55.

56.

00

%

00

00

Divide line 52 by line 48 to get your taxable value. Enter here and on line 9.....

Percent of tax relief. Divide line 8 by line 53.....

Multiply line 47 by line 54 .....

56. Add lines 44 and 55. Enter here and on line 12.

		a. Routing Transit Number b		b.	Account Number	c. Type of Account				
5.	Deposit your refund directly to your financial institution! See page 9 and						1. Checking	2. Savings		
	complete a, b and c.									
	ed Taxpayer. If Filer and/or Spouse				er dates below.	Preparer Certification				
ENTER	DATE OF DEATH ONLY. Example: 0	04-15-2013 (MM-DD-YYYY)				this return is based on all information of which I have any knowledge.				
Filer		Spouse	_	· –		Preparer's PTIN, FEIN or	SSN			
<b>Taxpayer Certification.</b> I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.					in this return	Preparer's Business Name (print or type)				
Filer's Signature				Date		Preparer's Business Addre	ess (print or type)			
Spouse's Signature				Date						
By checking this box, I authorize Treasury to discuss my return with my preparer.										

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