2015 MICHIGAN Homestead Property Tax Credit Claim for Veterans and Blind People MI-1040CR-2

Type	or print in blue or black ink.	Print nui	mbers like this: O/	23456	789 -	NOT like this: $\emptyset 147$		Attachme	nt 06
1. File	er's First Name	M.I.	Last Name			2. Filer's Full Social Se	curity N	o. (Example: 123-45-67	89)
If a J	oint Return, Spouse's First Name	M.I.	Last Name						
<u> </u>	41. 41. 1. 01. 1.00.					3. Spouse's Full Social	Securit	y No. (Example: 123-45	-6789)
Home	e Address (Number, Street, P.O. Box	() If using a	P.O. Box, you must co	mplete line 3	34.				
City	or Town			State	ZIP Cod	e 4. School District Code	(5 digits	s - see p. 19)	
1	015 FILING STATUS:		RESIDENCY STA	TUS:		*If you checked box "c," enter date: Enter dates as MM-DD-YYYY (Exa	s of Mic	higan residency in 2015	j.
] _{а.} Г	Single		ck all that apply. Resident			FILER		SPOUSE	
		, m	Nonresident		FRON	n: — 20/5		<u> </u>)15
^{D.} L	Married filing jointly	b r	Nonresident						-
c. [Married filing separately (Attach Form 5049)	c F	Part-Year Resident *		TO	D:)/5
7. CI	neck one of the following that a	oplies to y	ou:						
a	Blind and own your homeste	ead		C	Survivi	ng spouse of veteran deceased in	servic	е	
b. [Veteran with service-connector veteran's surviving spous		ility	*d.	Active	military, pensioned veteran or his/	her sur	viving spouse	
	Enter percent of disability:		 %	*e.	Survivi Korear	ng spouse of a nondisabled or no War, World War II, or World War	npensio I	oned veteran of the	
* 11	f you check "d" or "e" above and	d your Tota	al Household Resour	rces (line 3	2) are m	ore than \$7,500, you cannot clain	n a cre	dit on this form.	
8.	Taxable value allowance fr	om Table	e 2				. 8.		00
9.	Taxable Value of homestea	ad. Hom	eowners: If greate	er than \$1	35,000	, STOP; you are not eligible.	. 9.		00
10.	Property Taxes levied on y	our hom	e for 2015 (see ins	structions)		. 10.		00
11.	Percent of tax relief. Divid	de line 8	by line 9 (not to ex	xceed 100	0%)		. 11.		%
12	Multiply line 10 by line 11	Enter the	result (maximum	\$1 200)			. 12.		00
TOTA	AL HOUSEHOLD RESOUR	CES. If f	iling a joint retur	n, include	e incon	ne from both spouses.	. 12.		100
	rried filing separately, you								
13.	Wages, salaries, tips, sick, and SUB pay, etc	strike	13	0	20. 0	Social Security, SSI, and/or railroad retirement benefits	20.		00
14.	All interest and dividend in		1.1			Child support and foster	04		
15.	(including nontaxable inter Net business income (inclu	•	14.		0 22	parent payments received Unemployment	21.		00
13.	farm income). If negative e	•	15	0	0 22.	compensation	22.		00
16.	Net royalty or rent income.		40			Gifts or expenses paid on	22		
17	If negative enter "0"		16		0 24	your behalf Other nontaxable income	23.		00
17.	IRA benefits		17	0	0 24.	Describe:	24.		00
18.	Capital gains less capital lo (see instructions)		18	0		Workers'/veterans' disability compensation/pension benefits	25.		00
19.	Alimony and other taxable Describe:		19	0	26. 0	FIP and other MDHHS benefits (Do not include food assistance)			00
<u> </u>					_ -				
27.	SUBTUTAL. Add lines 13	tnrough 2	∠b			SUBTOTAL	27.		00

c. ALL OTHERS, enter the amount from line 12.

	Filer's Full Social Secur	rity Numb	oer			
	Enter subtotal from line 27 Other adjustments (see instructions). Describe:	29.			28.	00
30.	Medical insurance/HMO premiums you paid for you and your family (see instructions).	30.		00		
	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/MDHHS RECIPIENTS, enter amount from Worksheet on page 8 b. If line 32 is more than \$41,000, see instructions and enter the reduced	3.	ount.			

PART 1: HOMEOWNERS WHO MOVED IN 2015. 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

If you file an MI-1040, carry this amount to MI-1040, line 25.....

34.	34. Address where you lived on December 31, 2015, if different than reported on line 1.					
35.	35. Address of homestead sold (moved from) during 2015 (Number, Street, City, State, ZIP Code).					
Hon	neowners who moved during 2015, complete lines 36 through 44. If you also	HOME	STEAD	D		
	ed a homestead during 2015, complete lines 45 through 56.		A. Moved Into	B. Moved From	1	
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 2015	38.				
39.	Prorated taxes. Multiply line 38 by percentage on line 37	39.				
40.	Taxable value allowance (see Table 2)	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.			

Veterans who rent or all other individuals who are not required to file an MI-1040 should continue to and complete page 3.

	l		
Filer's Full Social Security Number		 	

PART 2: RENTERS (Veterans Only)

45.	A Address of Homestead You Rented	Lan	B idowner's Name	e and Address	; # N	C fonths	D Monthly Rent	E Total Rent Paid	
	Number, Street, Apt. #, City, State, ZIP Coo	(e)	(City, State and	ZIP Code)	R	ented	(see instructions)		
46.	Total rent you paid (not more than	n 12 months). Add	I total rent fo	or each per	iod		46.	00	
47.									
48.									
49.	Full-year renters only, divide line	e 47 by line 48 to	get your tax	able value	. Enter her	e and o	on line 9 49.	00	
Part-y	rear renters, complete lines 50 t	hrough 56							
50.	Divide line 46 by the number of m	nonths you rented					50.	00	
51.	Multiply line 50 by 12 months						51.	00	
52.	2. Multiply line 51 by 20% (0.20). Service fee housing residents use 10% (0.10) (see instructions) 52.								
53.	3. Divide line 52 by line 48 to get your taxable value. Enter here and on line 9								
54.	Percent of tax relief. Divide line 8 by line 53							%	
55.	5. Multiply line 47 by line 54							00	
56.	56. Add lines 44 and 55. Enter here and on line 12							00	
DIRECT DEPOSIT Deposit your refund directly to your financial a. Routing Transi			sit Number	b.	Account Num	ber		Type of Account	
	ion! See instructions and complete a, b						1Chec	sking 2. Savings	
	ased Taxpayer. If Filer and/or Spouse R DATE OF DEATH ONLY. Example: 0			dates below.				nder penalty of perjury that hich I have any knowledge.	
Filer		Spouse -			Preparer's F	TIN, FE	IN or SSN		
	ayer Certification. I declare under peachments is true and complete to the best of		e information in	this return	Preparer's N	lame (pr	int or type)		
	Signature	m my knowledge.	Date		Preparer's E	Business	Name, Address and	Telephone Number	
Spous	e's Signature		Date						
	By checking this box, I authorize Trea	sury to discuss my i	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