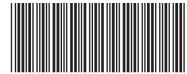
D-1040(R)

City of Detroit Income Tax Individual Return — Resident

2011

Social S	ecurity Number	Spouse's Social Securit	ty			ere if this						
			ш		return is decease	for a d taxpaye	r		*100)12011*		
First Nar	ne	MI	Last Na	me			-	-				_
0	a Circat Nama a		Onevee'	's Last Nave								
Spouses	s First Name	MI	Spouse	's Last Nam	ie							
Home Ad	ddress (Number and Street or Rural I	Route)										
City or To	own			State	Zip (Code						
Щ					Ш		Ш	Ш				
A. FIL	ING STATUS	EXEMPTIONS:					. Numbe	r of Dep	endent	Childrer		
	Single or Married Filing Separately	REGULAR 6	65 or OVER	BLIND DI	EAF DIS	SABLED	List all de Numbe	pendents				빔
	Married Filing Jointly					_	List all de	pendents	on page 2	2, part 4.		Щ
В.	Check if you can be claimed as a dependent on another person's tax return.	D. SPOUSE		>	• [i. TOTAL Add lines	Numbe C, D, E a		mptions	. •	
		s a result of a federal audit?	J. If Y	es, enter the f	federal dete	ermination d	ate 🕨					
See instruc	———— INCOME AND	ADJUSTMENTS —				—— Dolla	ırs ———				——Се	ents —
1. To	otal Income from W-2 (work location:)	▶ [1					C	0
2. C	Other Income (or losses) (from page 2	?, part 1)			····)	2					C	0
3. S	subtotal (add lines 1 and 2)				▶ [3				$\overline{\Pi}$	С	0 0
한 4. D	eductions from Income (from page 2	, part 2) ······			▶ [4				亓		0 0
	subtotal (line 3 less line 4)					5				亓		0 0
шc	xemption amount (multiply the total n					6				Ħ		0 0
_	let Income (line 5 less line 6	•	,	,	′ ⊑	7				卅		_
8	denaissance Zone Deduction (attach				, r	8				卅	0	_
¥#	otal Income Subject to Tax (line 7 les			,	, r	= =				ዙ		0 0
	,	,			' L	9				ዙ		0 0
	ax (multiply line 9 by .025 (2.50%))				, r	10				Щ.	. C	0
	credit for tax paid to other cities (attac		,			11 📗				Щ	. C	0 0
<u> </u>	otal Tax (line 10 less line 11)	S AND CREDITS ——			_	12				Ш	. C	0
표 13. Ta	ax withheld				▶ [1	13					l C	0
o 14. 2	ax withheld	other payments (see instr	uctions) ····		···· •	14					. c	0
≥ 15. D	etroit tax paid for you by a partnersh	ip (from page 2, part 3)			···· • 1	15				П	. c	0 0
ే స్ట్రా 16. To	otal payments and credits (add lines	13 through 15)			-	16				П		0 0
ਤੱ <u>5</u> 17. lf	line 16 is larger than line 12 enter ar	OOR TAX DUE ———————————————————————————————————			_	 17				亓		0 0
Atta 18. A	line 16 is larger than line 12 enter armount to be Refunded (if amended -	see instructions)			▶ Ti	18				亓		0 0
	mount to be Credited on 2012 Estima					19				卄		
	line 12 is larger than line 16 enter ar	·		,	´ L	20				ዙ		0 0
(r	nake check payable to: Treasurer, Cit	y of Detroit)									. 0	0 (



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l	Ш	I	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	II
l	Ш	I	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	Ш	II
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ΡΑ	.RT 1 – Other Income (or losses)			*10022011*	
1.	Interest and dividend income from federal 1040 or	1040A		1	.00
2.	Distributions from tax-option corporations (Losses	not deductible)		2	00
3.	Net Income (or loss) from estates and trusts (attac	h federal Schedule K-	1, etc.)	3	00
4.	Gain (or loss) on sale or exchange of property (atta	ach federal Schedule)		4	00
5.	Net Income (or loss) from partnership (attach feder	ral Schedule K-1, etc.)		5	.00
6.	Net Income (or loss) from business or profession (a	attach federal Schedu	e C)	6	00
7.	Net Income (loss) from Rent or Royalties (attach fe	ederal Schedule E)		7	.00
8.	Miscellaneous (Identify)			8	.00
9.	Total Other income (or losses) here and on page 1	, line 2		9	00
PΔ	ART 2 - Deductions from Income				
1.	Employee Business Expenses from federal form 210 form)	06 (see instructions for	allowable deductions and attach federal	1	00
2.	Moving expense from federal form 3903 (attach fed	deral form)		2	00
3.	Individual Retirement Account (IRA) and/or Keogh (attach federal form 1040, page 1)	retirement plan and se	lf-employed SEP deductions	3	00
4.	Interest on obligations of the United States or subd	ordinate units included	on part 1, line 1	4	00
5.	Alimony (furnish recipient's name, address and Soc	cial Security Number)	(attach federal form page 1)	5	00
6.	Name A Penalty for early withdrawal of savings	address	Social Security Number	6	00
7.	Net operating loss carryover			7	00
8.	Other (Identify)			8	00
9.	Enter total deductions from income here and on pa	age 1, line 4		9	00
ΡΑ	RT 3 – Detroit tax paid for you by Name of Partnership	Feder	al Identification Number	Amount	.00
2.					.00
To	tal (enter on page 1, line 15)				00
	ART 4 Iter the first names & Social Security Numbers of the	dependent children	Enter the names & Social Security N	umbers of other depende	nts
Ur	gnature: (if Joint return, BOTH H nder penalty of perjury, I declare that I have examined this r rrect and complete. If prepared by a person other than tax	eturn (including accompa	nying schedules and statements) and to the bo		elief it is true,
-	Taxpayer's Signature Date	Occupation	Home Phone	Work Phone	
	Special's Signature	Occupation	()	()	
	Spouse's Signature Date	Occupation	Home Phone	Work Phone	
_	Signature of preparer other than taxpayer	Date	Address	I.D. number	