

CITY OF GRAYLING INDIVIDUAL INCOME TAX RETURN

Due April 30, 2018

2017 GR-1040

For calendar year 2017 or tax year ending _____ Issued under authority of P.A. 284 of 1964. **Filing is mandatory.**

Place Label Here or Print/Type Information	1. Filer's First Name, Middle Initial and Last Name		2. Filer's Social Security Number	
	If a Joint Return, Spouse's First Name, Middle Initial and Last Name		3. Spouse's Social Security Number	
	Mailing Address (No., Street, P.O. Box or Rural Route)		Physical Address (This One Required)	
	City or Town	State	Zip Code	

4. Residency
 a. Resident
 address _____
 b. Nonresident
 address _____
 c. Part-Year Resident
 From _____ To _____
 (see schedule 3 on back)

Did you file a 2016 Grayling city return? Yes No

5. Exemptions (check a box for all that apply).

Personal _____	A	<input type="checkbox"/>	You	B	<input type="checkbox"/>	Spouse
Age 65 or older _____	C	<input type="checkbox"/>		D	<input type="checkbox"/>	
Blind or Disabled _____	E	<input type="checkbox"/>		F	<input type="checkbox"/>	

(Please Provide Verification)

How many boxes did you check? G. _____

Number of allowable federal dependents H. _____

Add lines G through H I. _____

Complete the information below for the dependents you are claiming.

Dependents Name	Relationship to you	Social Security Number	Date of Birth	# Months Lived in Your Home

Visit us on the web:
www.cityofgrayling.org

6. Filing Status a. single c. Married, filing separately. Complete item 3
 b. Married, filing jointly

7. **Total Income.** (See Instructions)
 a. Resident enter total income from 2017 U.S. 1040, line 22: or 1040A, line 15 or 1040 EZ, line 4. (enclose copy of page 1 of your federal return and W-2s).
 b. **Nonresident** enter gross wages from W-2s, wages from Schedule 1, line 5. (enclose W-2s and copy of page 1 of federal return). (If you have no additions or subtractions, carry this amount to line 11).

8. Additions. (See Instructions). Explain: _____	7. _____ .00
9. Total. Add lines 7 and 8	8. _____ .00
10. Subtractions. (See Instructions). (Provide Verification): _____	9. _____ .00
11. Adjusted income. Subtract line 10 from line 9	10. _____ .00
12. Multiply the number of exemptions claimed on line 5 I by \$3,000.	11. _____ .00
13. Taxable income. Subtract line 12 from line 11	12. _____ .00
14. Tax. Multiply the amount on line 13 by one of the following Resident only - 1% (.01), Nonresident only - 1/2% (.005) or if a Part-year resident - enter the amount from Schedule 3, line 9	13. _____ .00
NONREFUNDABLE CREDIT (City of Grayling Residents only).	14. _____ .00
15. Income taxed by other Michigan cities. (Attach copy of returns). 15a. _____ .00	15b. _____ .00
16. Subtotal. Subtract line 15b. from line 14	16. _____ .00
PAYMENTS AND CREDITS	
17. City of Grayling tax withheld. (ATTACH W-2)	17. _____ .00
18. City estimated tax, extension payments and 2016 credit forward	18. _____ .00
19. Credit for partnership income tax paid FE number of partnership: _____	19. _____ .00
20. Total payments and credits. Add lines 17 thru 19	20. _____ .00
21. If line 16 is larger than line 20, subtract line 20 from line 16. Include interest _____ and penalty _____ if applicable Enter TAX DUE here _____	21. _____ .00
22. If line 20 is larger than line 16, subtract line 16 from line 20. You overpaid this amount	22. _____ .00
23. Amount of line 22 to be credited to 2018 City of Grayling estimated tax	23. _____ .00
24. Subtract line 23 from line 22. Enter refund amount _____	24. _____ .00

FOR OFFICE USE ONLY

PAY 21.

Make your check payable to: City of Grayling

Please Attach 1st Page of Federal Return & All Supporting Documents

If applicable, complete the schedules and statements and sign the back on this return.

SCHEDULE 1 - COMPUTATION OF WAGES EARNED IN GRAYLING (NONRESIDENTS ONLY)

When both spouses have income subject to allocation, figure them separately. Also, a separate computation must be made for each W-2.

1. Number of days worked/paid for the year. (5 days/week x 52 weeks = 260 days)
(if other than 260 days attach an explanation).
Vacation, holidays, sick, and bonus days **ARE taxable income**
2. Actual number of days worked in Grayling
(Attach Statement from employer(s).)
3. Percentage of days worked in Grayling (line 2 divided by line 1)
4. Total wages shown on W-2
5. Wages earned in Grayling (line 4 x percentage on line 3).
Enter here and on GR-1040, line 7
6. Wages excluded from City of Grayling Income Tax (line 4 minus line 5).

1. _____ da
2. _____ da
3. _____
4. _____
5. _____
6. _____

SCHEDULE 2 - BUSINESS ALLOCATION (NONRESIDENTS ONLY)

If you are self employed and have income earned from your business both inside and outside the city, you must complete this schedule. This schedule must be accompanied by a copy of your U.S. 1040, Schedule C and your worksheet (see page 6) used to show allocation.

1. Net income from business of profession
2. Percent earned in Grayling (Attach Schedule C and worksheet).
3. Business income subject to Grayling income tax (line 1 x percentage on line 2).
(enter here and on GR-1040, line 8).

1. _____
2. _____
3. _____

SCHEDULE 3 - COMPUTATION OF WAGES FOR PART-YEAR RESIDENTS

This schedule applies only if you had income during the year 2017 as a resident and nonresident. (See instructions on page 5).

1. Gross wages. (Attach W-2).
2. Additions. (See instructions).
3. Subtractions. (See instructions).
4. Total income.
5. Less exemptions. (\$3,000 for each exemption claimed)
(The sum of lines 5a and 5b may not exceed amount of GR-1040, line 12).
6. Taxable income. Subtract line 5 from line 4.
7. Tax. Resident income: multiply line 6, column a by 1% (.01)
8. Tax. Nonresident income: multiply line 6 column b by 1/2% (.005)
9. Total tax. Add lines 7 and 8. Enter here and on GR-1040, line 14.
10. Resident in City of Grayling. Enter dates: From: _____ To: _____
Previous address in 2017. _____

	Column A	Column B
	All income while a City of Grayling Resident	Portion of income earned in City of Grayling while a nonresident
1.	_____ .00	1. _____ .C
2.	_____ .00	2. _____ .C
3.	(_____ .00	3. (_____ .C
4.	_____ .00	4. _____ .C
5.	(_____ .00	5. (_____ .0
6.	_____ .00	6. _____ .0
		7. _____ .0
		8. _____ .0
		9. _____ .0

I declare, under penalty of perjury, the information in this return and attachments is true and complete to the best of my knowledge.

- I authorize Treasury to discuss my return and attachments with my preparer. Do not discuss my return with my preparer.

I declare, under penalty of perjury, that this return is based on all information of which I have knowledge. Preparer's Signature, Address, Phone and ID No.

SIGN HERE	FILER'S SIGNATURE	DATE
	SPOUSE'S SIGNATURE	DATE

Daytime phone for questions regarding your return:

Remember to attach all supporting documents

Mail To:
City of Grayling
Income Tax Division
P.O. Box 549 • 1020 City Blvd.
Grayling, MI 49738

This return is due April 30, 2018 OR
on the 15th day of the fourth month after your tax year ends

Make your check or money order payable to:
City of Grayling