## D-1040(NR)

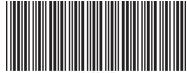
## City of Detroit Income Tax Individual Return — Non-Resident

2013

Socia	al Security Number	Spouse's Social Securi	ity	Check here i	f this	
				return is for a	a	*10112013*
First	Name	MI	Last Name	deceased tax	xpayer	
Spou	use's First Name	MI	Spouse's Las	t Name		
Hom	e Address (Number and Street or Rural Ro	oute)				_
						]
City	or Town		Sta	ate Zip Code	Э	
A. I	FILING STATUS E	XEMPTIONS:			□ □ Nivesha	u of Donousdont Children
	Single or Married Filing Separately		65 or OVER BLIND	DEAF DISABLE	D	r of Dependent Children
	Married Filing Jointly	C. YOURSELF •	• <u> </u>		(List nam	r of Other Dependents es and Social Security
B.	Check if you can be claimed as a dependent	D. SPOUSE		$\blacktriangleright$ $\square$ $\blacktriangleright$ $\square$	G. TOTAL	on separate page)  Number of Exemptions
	on another person's tax return.				Add lines	C, D, E and F.
	nended return I. Is this amended return as instructions	a result of a federal audit?	J. If Yes, ent	er the federal determin	nation date	
		ADJUSTMENTS —			— Dollars —	Cents —
	<ol> <li>Total Detroit Income from W-2 wages (p (work location:</li> </ol>	page 2, Schedule N line	5)	) 1		.00
Here 2	2. Other Income (or losses) (from page 2,	Cabadula I lina E)				
Z 2						.00
	3. Subtotal (add lines 1 and 2)					.00
Form	4. Deductions from Income (from page 2,	Schedule M, line 5) ······		• 4		.00
of Fo	5. Subtotal (line 3 less line 4)			5		.00
>	<ol><li>Exemption amount (multiply the total nu</li></ol>	umber of exemptions from	m line G by \$600.	.00) 6		.00
	7. Net Income (line 5 less line 6)					
ac	46					.00
A	Renaissance Zone Deduction (attach R			, 🖺		.00
g	9. Total Income Subject to Tax (line 7 less	line 8)		9		.00
	D. Tax (multiply line 9 by .0120 (1.20%)  PAYMENTS	S AND CREDITS —		<u> </u>		.00
Here	1. Tax Withheld			····· <u>11</u>		.00
<b>a</b> 12	2. 2013 estimated payments, credits and c	other payments (see inst	tructions)			00
Money Orde	3. Detroit tax paid for you by a partnership	) (attach separate sched	ule)	 		.00
0 14	Total payments and credits (add lines 1	1 through 13)				
	REFUND	OR TAX DUE ——		— <u>'</u> H		.00
	5. If line 14 is larger than line 10 enter am			, L		.00
Check	<ol> <li>Amount to be Refunded (if amended —</li> </ol>	see instructions)		······ 16		.00
	7. Amount to be Credited on 2014 Estimat	ted Tax (if amended - s	see instructions)	····· 17		.00
18	3. If line 10 is larger than line 14 enter am			18		.00

## SCHEDULE N — COMPUTATION OF WAGES EARNED IN DETROIT—DO NOT USE THIS SCHEDULE IF ALL YOUR WORK IS PERFORMED IN DETROIT

If your Detroit allocation is less than 100%, please attach letter from your employer to verify lines 1& 2 of this Schedule and your work log. (see instructions for definition of "days worked")



10122013\*

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1.	a. Number of days paid (5 day week x 52 weeks = 260 days)	100		1	Opous	
	(if other than 260 days attach explanation)			1a		
	b. Vacation, holidays, sick, and other days not worked 1b			1b		
	c. Actual number of days worked everywhere (1a minus 1b) 1c					
	Actual number of days worked in Detroit			2		
	Percentage of days worked in Detroit (line 2 divided by line 1c)					
4.	Total wages shown on W-2		00	4. —		00
Э.	Wages earned in Detroit (line 4 multiplied by percentage on line 3)		00	J 5		00
This	Enter total for both columns, page 1 line 1 (If multiple schedules are used the total for all line 5's) schedule applies to Non-Residents only. Where both Husband and Wife have income subject to allocation, figure them separately	y. Also a separate computa	ion must be	made for each	W2. (Photocopy this	schedule if needed).
SC	CHEDULE J — Other Income (or losses)					
	Rental income (or loss) from tangible property in the City of Detroit (attach federal sc	chedule)		1.		.00
	Net Profit (or loss) from business or profession (Schedule C line 6)	,				
		1-1				
	Income (losses) from DETROIT partnership and other income (attach federal schedul	•				
4.	Gain (or loss) from sale or exchange of tangible property in the City of Detroit (attach	n federal schedule)		4		00
5.	Total (Add lines 1, 2, 3 and 4, Enter on page 1 line 2)			5		00
		Federal A	moun	t	Deductible	e Amount
	CHEDULE M — DEDUCTIONS ALLOWED ON DETROIT RETURN	\$ You	Spou	ise	You	Spouse
	must attach copies of your federal forms to support lines 1 through 5. (See Instructions)	00		00	00	00
1.	Employee Business Expenses (attach federal form 2106 and see instructions)	00		00	00	00
2.	Moving Expenses (attach federal form 3903)	00		00	00	00
3.	Individual Retirement Account (IRA) (attach federal form 1040, page 1)	00		00	00	00
4.	Alimony (attach federal form 1040, page 1)	00		00	00	00
5.	Total Deductions (add lines 1 through 4), enter total for both columns on page 1, line 4			\$ _	00	00
	CHEDULE C — PROFIT (OR LOSS) FROM BUSINESS OR PROFESSION. YO	ou must attach a	copy of	the sched	dule C filed w	ith your
	eral income tax return. Attach a separate schedule for each business.					
1.	Net profit (or loss) from business or profession per federal Schedule C attached			1		00
2.	Apportionment percentage from Schedule D below, line 5 — if all business was concenter 100% and <b>DO NOT</b> fill in Schedule D	ducted in Detroit,		2		%
3.	Apportioned income (multiply line 1 by line 2)					
	Less: Applicable portion of net operating loss carryover					
	Less: Applicable portion of Self-Employment Retirement deduction (attach federal fo					
6.	Total: (enter amount on Schedule J above, line 2)		•••••	6		00
SC	CHEDULE D — INCOME APPORTIONMENT FORMULA:	Located	1.1	ocated	in Pei	centage
0	TILDULE D — INCOME AFFORTIONMENT FORMOLA.	Everywher		Detroit I		livided by I)
1	Average net book value of real and tangible personal property		00		.00	%
	a. Gross annual rent paid for real property multiplied by 8		00		.00	%
	b. TOTAL (add lines 1 and 1a)		00		.00	%
2.			00		.00	%
	Gross receipts from sales made or services rendered		00		.00	%
4.			00		.00	
	Average * (enter here and on Schedule C, line 2)		·   —			%
٥.	* To determine the average, divide line 4 by 3. However, if a factor does not exist, divide the sum			abay of foo		
	of a taxpayer authorized by the Finance Director to use a special formula, attach a copy of the a		by the nur	nder of fac	tors actually us	ed. In the case
П	Inder penalty of perjury, I declare that I have examined this return (including accompanying schedu	iles and statements)	and to the	hest of my	knowledge and	helief it is true
	orrect and complete. If prepared by a person other than taxpayer, the declaration is based on all in					a bollor it lo trao,
		( )		(	)	
_	Taxpayer's Signature Date Occupation	Home Phone		Woi	<i>)</i> rk Phone	
		( )		/	\	
_	Chausala Cignatura Data O	( )		(	)	
	Spouse's Signature Date Occupation	Home Phone		VVOI	rk Phone	
-	Signature of preparer other than taxpayer Date	Address		I.D.	number	