D-1040 (R) City of Detroit Income Tax Individual Return — Resident 2009								
	0	r Fiscal Year Beginning MMDD 2009, Ending MMDDYYYYY		se Only				
		cial Security Number Spouse's Social Security Number Check here if this return is		Office Use				
		for a deceased taxpayer	T	ĺ₩				
	Firs	st Name MI Last Name						
	Spc	ouse's First Name MI Spouse's Last Name		_				
	Hor	me Address (Number and Street or Rural Route)	ш					
	City	City or Town State Zip Code						
				_				
		FILING STATUS Single or Married Filing Separately Married Filing Jointly Check if you can be claimed as a dependent Check if you and be claimed as a dependent on page 2, part 4. EXEMPTIONS: REGULAR 65 or OVER BLIND DEAF DISABLED List all dependents on page 2, part 4. C. YOURSELF D. SPOUSE D. SPOUSE REGULAR 65 or OVER BLIND DEAF DISABLED List all dependents on page 2, part 4. G. TOTAL Number of Exemptions	T T					
	В.	on another person's tax return. Add lines C, D, E and F.	<u> </u>					
	H. Amended return? See instructions I. Is this amended return as a result of a federal audit? J. If Yes, enter the federal determination date							
•	1.	Total Income from W-2 (work location:	ents —	_ 1				
			0 0	1				
	2.	Other Income (or losses) (from page 2, part 1)	0 0)				
	3.	Subtotal (add lines 1 and 2)	0 0)				
Here	4.	Deductions from Income (from page 2, part 2)	0 0)				
Form W-2	5.	Subtotal (line 3 less line 4)	0 0)				
of For	6.	Exemption amount (multiply the total number of exemptions from line G by \$600.00) ▶ 6	0 0)				
Copy	7.	Net Income (line 5 less line 6	0 0)				
Attach		Renaissance Zone Deduction (attach Renaissance Zone Deduction Schedule)	0 0)				
•	9.	Total Income Subject to Tax (line 7 less line 8)	0 0)				
J	10.	Tax (multiply line 9 by .025 (2.50%))	0 0)				
1	11.	Credit for tax paid to other cities (attach copy of other city returns)	0 0)				
9	12.	Total Tax (line 10 less line 11)	0 0					
er Her	13.	Township and	0 0	1				
y Ord	14.		0 0	ī				
Mone	13. 14. 15.	Detail toward forms by a reduced in (form and 0)	0 0	1				
ᅙ		Total necessaria and availity (add lines 40 threshold 45)	0 0	1				
in Ch	17.	————— REFLIND OR TAX DUE ———————————————————————————————————		1				
Attac	12		0 0	i				
	10.	Amount to be Helanded (if amended — see instructions)	0 0	ī				
_		If line 12 is larger than line 16 enter amount of Tay Due	0 0	ī				
		(make check payable to: Treasurer, City of Detroit)	0 0	1				

Otl	her Income (or losses)				
1.	Interest and dividend income from fe	1			
2.	Distributions from tax-option corpora	2			
3.	Net Income (or loss) from estates ar	3			
4.	Gain (or loss) on sale or exchange of	4			
5.	Net Income (or loss) from partnership	5			
6.	Net Income (or loss) from business	6			
7.	Net Income (loss) from Rent or Roya	7			
8.	Miscellaneous	8			
9.	Total Other income (or losses) here	9			
				PART 2	
Эе	eductions from Income:				
1.	Employee Business Expenses from form)	l 1			
2.	Moving expense from federal form 3				
3.	Individual Retirement Account (IRA) (attach federal form 1040, page 1)	3			
4.	Interest on obligations of the United				
5.	Alimony (furnish recipient's name, ac	5			
6.	Name Penalty for early withdrawal of saving	6			
7.	Net operating loss carryover				7
8.	Other				8
9.	Enter total deductions from income h	ere and on pag	e 1, line 4		9
Эе	troit tax paid for you by a	partnersh		PART 3	
		nership		Federal Identification Number	Amount
1. 2.					
				PART 4	
Er	nter the first names & Social Security Num	bers of the depe	ndent children	Enter the names & Social Security N	Numbers of other dependents
_					
S	ignature: (if Joint return,	вотн н	JSBAND A	ND WIFE MUST SIGN)	
				companying schedules and statements) and to the n is based on all information of which the prepare	
_	Town quada Cirre-tirre	Note 1	Dagung#!- :-	()	()
	Taxpayer's Signature	ate (Occupation	Home Phone	Work Phone
	Spouse's Signature	ate (Occupation	Home Phone	Work Phone
_	Signature of preparer other than taxpa	ver [Date	Address	I.D. number

PART 1

MAILING INSTRUCTIONS: Due Date: This return is due April 30, 2010 or at the end of the fourth month after the close of your tax year.