D-1		City of Detroit Income Tax Individual Return — Resident			20	13				
Social	Security Number		Spouse's Socia	al Security		Check	here if this			
						return is		*10012013*		
First N	Jame			MI	Last Name					
Spous	e's First Name			MI	Spouse's Last	Name				
Spous		TTT			Spouse's Last	Name				Т
Home	Address (Number and Stree	et or Rural Ro	ute)							_
City o	r Town				Sta	te Zip	Code			
A. <b>F</b>	ILING STATUS	E	XEMPTIONS					. Number of Dependent Children		
	Single or Married Filing Se		R . YOURSELF	EGULAR 65 0	or OVER BLIND	DEAF C	DISABLED F.	List all dependents on page 2, part 4. Number of Other Dependents		41
	Married Filing Jointly		, ,					List all dependents on page 2, part 4.	▶∟	
В.	Check if you can be claimed as a on another person's tax return.	dependent D	. SPOUSE				G	. <b>TOTAL</b> Number of Exemptions Add lines C, D, E and F.		
		ended return as a	a result of a federal a	audit? 🕨	J. If Yes, ente	er the federal de	etermination da	ate 🕨		
			DJUSTMENT				Dolla	rs	Cents	s —
1.	Total Income from W-2 (wo	rk location: _			)		1		. 0	0
2.	Other Income (or losses) (f	rom page 2, p	oart 1)				2		.0	0
2. Herefore 2.	Subtotal (add lines 1 and 2						3		.0	
>										
	Deductions from Income (fr						4		. 0	0
	Subtotal (line 3 less line 4)					•••••••	5		. 0	0
6.	Exemption amount (multiply	the total nur	mber of exemption	ons from li	ne G by \$600.0	00) 🕨	6		. 0	0
<b>7</b> .	Net Income (line 5 less line	6				····· ►	7		. 0	0
<del>5</del> 8.	Renaissance Zone Deducti	on (attach Re	enaissance Zone	e Deduction	n Schedule) ····	····· •	8		. 0	0
<b>Attach</b> 8.	Total Income Subject to Tax	(line 7 less l	ine 8)			)	9		. 0	
	Tax (multiply line 9 by .024						10			-
						, I			. 0	
9	Credit for tax paid to other			- ,					. 0	0
<sup>12.</sup>	Total Tax (line 10 less line 1		AND CREDIT			······ •	12		. 0	0
<b>b</b> 13.	Tax withheld					•••••• •	13		. 0	0
<b>0</b> 14.	2013 estimated payments,	credits and o	ther payments (s	see instruc	tions)	····· ►	14		. 0	0
<b>1</b> 5.	Detroit tax paid for you by a	a partnership	(from page 2, page	art 3)			15		. 0	
ž	Total payments and credits					,	16			
0		<b>REFUND</b>	OR TAX DUE						. 0	-
<b>0</b> 17.	If line 16 is larger than line	12 enter amo	ount of Overpayr	ment		••••••	17		. 0	0
0 18.	Amount to be Refunded (if	amended -	see instructions)	)		····· ►	18		. 0	0
19.	Amount to be Credited on 2	2014 Estimate	ed Tax (if amend	led – see	instructions)	····· ►	19		. 0	0
₽ <sub>20.</sub>	If line 12 is larger than line (make check payable to: Tre					····· ►	20		. 0	0



## PART 1 – Other Income (or losses)

	Spouse's Signature Date	e Occu	upation	Home Phone	Work Phone	
				( )	( )	
	Taxpayer's Signature Date	e Occi	upation	Home Phone	Work Phone	
CO	rect and complete. It prepared by a person c	nner man taxpayer	, the declaration is dased	()	eparer nas any knowledge.	
	der penalty of perjury, I declare that I have ex rect and complete. If prepared by a person c					and belief it is true,
Sig	nature: (if Joint return, E	BOTH HUS	BAND AND W	/IFE MUST SIGN)		
			I			
_						
En		ivers of the depe				penuenta
	RT 4 ter the first names & Social Security Num	here of the deno	ndent children	Enter the names & Social Sec	urity Numbers of other de	anandante
	al (enter on page 1, line 15)				······	00
2.						
1.						00
	Name of Partne	ership	Federal Ic	lentification Number	Amount	
PA	RT 3 – Detroit tax paid fo	r you by a	partnership			
9.	Enter total deductions from income her	9	00			
8.	Other (Identify)	8	.00			
7.	Net operating loss carryover	7	00			
	Penalty for early withdrawal of savings		.00			
	Name	Addres		Social Security Number		
5.	Alimony (furnish recipient's name, addr	5	00			
4.	Interest on obligations of the United Sta	4	00			
3.	Individual Retirement Account (IRA) and (attach federal form 1040, page 1)	3	00			
	Moving expense from federal form 390	2	00			
	form)					
	Employee Business Expenses from fede	eral form 2106 (se				
P۵	RT 2 – Deductions from I	ncome				
9.	Total Other income (or losses) here and		.00			
8.	Miscellaneous (Identify)	8	.00			
7.	Net Income (loss) from Rent or Royaltie	7	.00			
6.	Net Income (or loss) from business or	6	.00			
5.	Net Income (or loss) from partnership (	5	.00			
4.	Gain (or loss) on sale or exchange of p	4	.00			
3.	Net Income (or loss) from estates and	3	.00			
2.	Distributions from tax-option corporation	2	.00			
1.	Interest and dividend income from fede	1	.00			

Signature of preparer other than taxpayer

Address

I.D. number

MAILING INSTRUCTIONS: Due Date: This return is due April 30, 2014 or at the end of the fourth month after the close of your tax year. Returns with Payments: TREASURER, CITY OF DETROIT Refund and all others: DETROIT CITY INCOME TAX P.O. BOX 33401, Detroit, Michigan 48232 P.O. BOX 33402, Detroit, Michigan 48232

Date