Steps to Complete your Michigan Tax Returns:

1. Start with your completed U.S. 1040NR or 1040NR-EZ. You will also need any W-2, 1042, or 1099 forms that you have received for 2019.

2. Fill out the MI-1040, lines 1-10. STOP.

3. Fill out Schedule NR.
   Note: Line 11 should include only the amount of scholarship and fellowship that is included in AGI; that is, only the portion of your gross income that was not exempted when filing out the U.S. 1040NR or 1040NR-EZ.

4. Fill out Schedule 1.

5. Fill out Schedule W (if applicable). This is where W-2 and 1099 form information is reported.

6. Return to the MI-1040 and complete the rest of the form.

7. Print, sign, date, and mail your returns.
Example 1:
Abigail Smith
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Employer's social security number</td>
<td>123-45-6789</td>
</tr>
<tr>
<td>b</td>
<td>Employer Identification number (EIN)</td>
<td>38-9876543</td>
</tr>
</tbody>
</table>
| c | Employer's name, address, and ZIP code | ABC Enterprise  
123 Ann Arbor Rd.  
Ann Arbor, MI 48123 |
| d | Control number |   |
| e | Employee's first name and initial | Abigail |
| f | Last name | Smith |
|    | Suffix |   |
| g | State | MI |
| h | Employer's state ID number | 38-9876543 |
| i |   |   |
| j | Wages, tips, other compensation | 13,250 |
| k | Federal income tax withheld | 1,855 |
| l | Social security wages |   |
| m | Social security tax withheld |   |
| n | Medicare wages and tips |   |
| o | Medicare tax withheld |   |
| p | Social security tips |   |
| q | Allocated tips |   |
| r | Nonqualified plans |   |
| s | Statutory employee |   |
| t | Retirement plan |   |
| u | Third-party sick pay |   |
| v | Other |   |
| w | Local income tax |   |
| x | Locality name |   |

**W-2 Wage and Tax Statement**

**2019**

*Copy 1—For State, City, or Local Tax Department*
Foreign Person's U.S. Source Income Subject to Withholding

| Income code | 1 Gross income | 2 Exemption code | 3a Exemption code | 4a Exemption code | 3b Tax rate | 4b Tax rate | 3c U.S. TIN, if any | 4c U.S. TIN, if any | 5 Recipient's GIIN | 6 Recipient's foreign tax identification number, if any | 7 Recipient's date of birth (YYYYMMDD) | 8 Recipient's account number | 9 Recipient's state or province, country, ZIP or foreign postal code |
|-------------|----------------|------------------|-------------------|-------------------|-------------|-------------|-------------------|-------------------|------------------|---------------------------|---------------------|---------------------------|
| 16          | 20,000         | 3 Chapter indicator. Enter "3" or "4" | 6 Withholding allowance | 7 Net income | 8 Federal tax withheld | 2,800 | 9 Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) | 10 Check if withholding occurred in subsequent year with respect to a partnership interest | 11 Tax paid by withholding agent (amounts not withheld) (see instructions) | 12 Withholding agent's EIN | 13 Withholding agent's name | 14 Primary Withholding Agent's Name (if applicable) | 15 Check if pro-rata basis reporting | 16 Payer's name | 17 State income tax withheld | 18 Payer's state tax no. | 19 Name of state |
| 12a         | 98-7654342     | 12b Ch. 3 status code | 12c Ch. 4 status code | University of Michigan | 12e Withholding agent's Global Intermediary Identification Number (GIIN) | 12f Country code | 12g Foreign tax identification number, if any | 12h Address (number and street) | 12i City or town, state or province, country, ZIP or foreign postal code | 13a Recipient's name | 13b Recipient's country code | 17b Payer's state tax no. | 17c Name of state | 567 Sparty Lane | Ann Arbor, MI 48123 | for Privacy Act and Paperwork Reduction Act Notice, see instructions. | Cat. No. 11386R | Form 1042-S (2019) |
**U.S. Income Tax Return for Certain Nonresident Aliens With No Dependents**

**2019**

### Your first name and middle initial  
Abigail  
Identifying number (see instructions)  
Smith  
123-45-6789

**Present home address (number, street, and apt. no., or rural route). If you have a P.O. box, see instructions.**  
567 Sparty Lane  
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions.  
Ann Arbor, MI 48123

### Filing Status  
Check only one box.  

<table>
<thead>
<tr>
<th></th>
<th>Single nonresident alien</th>
<th>Married nonresident alien</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Attach Form(s)**  
Form(s) W-2 or 1042-S here. Also attach Form(s) 1099-R if tax was withheld.  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Wages, salaries, tips, etc. Attach Form(s) W-2</td>
<td>13,250</td>
</tr>
<tr>
<td>4 Taxable refunds, credits, or offsets of state and local income taxes</td>
<td>4</td>
</tr>
<tr>
<td>5 Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement.</td>
<td>20,000</td>
</tr>
<tr>
<td>6 Total income exempt by a treaty from page 2, Item J(1)(e)</td>
<td>8</td>
</tr>
<tr>
<td>7 Add lines 3, 4, and 5</td>
<td>7</td>
</tr>
<tr>
<td>8 Scholarship and fellowship grants excluded</td>
<td>8</td>
</tr>
<tr>
<td>9 Student loan interest deduction</td>
<td>9</td>
</tr>
<tr>
<td>10 Subtract the sum of line 8 and line 9 from line 7. This is your adjusted gross income</td>
<td>10</td>
</tr>
<tr>
<td>11 Itemized deductions. See the instructions for limitation</td>
<td>11</td>
</tr>
<tr>
<td>12 Reserved</td>
<td>12</td>
</tr>
<tr>
<td>13 Reserved</td>
<td>13</td>
</tr>
<tr>
<td>14 Taxable income. Subtract line 11 from line 10. If line 11 is more than line 10, enter -0-</td>
<td>14</td>
</tr>
<tr>
<td>15 Tax. Find your tax in the tax table in the instructions</td>
<td>15</td>
</tr>
<tr>
<td>16 Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919</td>
<td>16</td>
</tr>
<tr>
<td>17 Add lines 15 and 16. This is your total tax</td>
<td>17</td>
</tr>
<tr>
<td>18a Federal income tax withheld from Form(s) W-2 and 1099-R</td>
<td>18a 1,855</td>
</tr>
<tr>
<td>b Federal income tax withheld from Form(s) 1042-S</td>
<td>18b 2,800</td>
</tr>
<tr>
<td>19 2019 estimated tax payments and amount applied from 2018 return</td>
<td>19</td>
</tr>
<tr>
<td>20 Credit for amount paid with Form 1040-C</td>
<td>20</td>
</tr>
<tr>
<td>21 Add lines 18 through 20. These are your total payments</td>
<td>21</td>
</tr>
</tbody>
</table>

### Refund  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>22 If line 21 is more than line 17, subtract line 17 from line 21. This is the amount you overpaid</td>
<td>22</td>
</tr>
<tr>
<td>Amount of line 22 you want refunded to you. If Form 8885 is attached, check here</td>
<td>☐ 22</td>
</tr>
<tr>
<td>b Routing number</td>
<td>c Type: ☐ Checking ☐ Savings</td>
</tr>
<tr>
<td>d Account number</td>
<td></td>
</tr>
<tr>
<td>e If you want your refund check mailed to an address outside the United States not shown above, enter that address here:</td>
<td></td>
</tr>
</tbody>
</table>

### Amount You Owe  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>24 Amount of line 22 you want applied to your 2020 estimated tax</td>
<td>24</td>
</tr>
<tr>
<td>25 Amount you owe. Subtract line 21 from line 17. For details on how to pay, see instructions</td>
<td>25</td>
</tr>
<tr>
<td>26 Estimated tax penalty (see instructions)</td>
<td>26</td>
</tr>
</tbody>
</table>

### Third Party Designee  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Designee's name</td>
<td>Phone no.</td>
</tr>
</tbody>
</table>

### Sign Here  

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of U.S. source income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Your signature</td>
<td>Date</td>
</tr>
</tbody>
</table>

### Paid Preparer  

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.  
Cat. No. 21534N  
Form 1040-NR-EZ (2019)
**2019 MICHIGAN Individual Income Tax Return MI-1040**

**Return is due April 15, 2020.** Type or print in blue or black ink.

1. **Filer's First Name**
   - ABIGAIL

2. **Filer's Full Social Security No. (Example: 123-45-6789)**
   - 123 45 6789

   - 

4. **State**
   - MI

5. **ZIP Code**
   - 48123

6. **567 SPARTY LANE**

7. **City or Town**
   - ANN ARBOR

8. **STATE CAMPAIGN FUND**
   - Check if you (and/or your spouse, if filing a joint return) want $3 of your taxes to go to this fund. This will not increase your tax or reduce your refund.
   - a. [ ] Filer
   - b. [ ] Spouse

9. **EXEMPTIONS. NOTE: If someone else can claim you as a dependent, check box 9e, enter 0 on line 9a and enter $1,500 on line 9e (see instr.).**
   - a. Number of exemptions (see instructions) ........................................... 9a. 1 \( \times \) $4,400 9a. $4,400 00
   - b. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled
   - c. Number of qualified disabled veterans ........................................... 9c. 1 \( \times \) $400 9c. $400 00
   - d. Number of Certificates of Stillbirth from MDHHS (see instructions) ........................................... 9d. 1 \( \times \) $4,400 9d. $4,400 00
   - e. Claimed as dependent, see line 9 NOTE above ................................... 9e. [ ] 9e. $0 00
   - f. Add lines 9a, 9b, 9c, 9d and 9e. Enter here and on line 15 ........ 9f. $4,400 00
   - g. Add lines 9f and 9g. Enter here on line 16 ......................................... 16. $19,250 00

10. **Adjusted Gross Income from your U.S. Forms 1040 or 1040NR (see instructions) ........................................... 10. $19,250 00

11. **Additions from Schedule 1, line 9. Include Schedule 1** ........................................... 11. $0 00

12. **Total. Add lines 10 and 11** ........................................... 12. $19,250 00

13. **Subtractions from Schedule 1, line 28. Include Schedule 1** ........................................... 13. $6,000 00

14. **Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0"** ........................................... 14. $13,250 00

15. **Exemption allowance. Enter amount from line 9f or Schedule NR, line 19** ........................................... 15. $3,036 00

16. **Taxable Income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0"** ........................................... 16. $10,214 00

17. **Tax. Multiply line 16 by 4.25% (0.0425)** ........................................... 17. $434 00

**NON-REFUNDABLE CREDITS**

18. **Income Tax imposed by government units outside Michigan. Include a copy of the return (see instructions).** ........................................... 18a. $0 00

19. **Michigan Historic Preservation Tax Credit carryforward (see instructions)** ........................................... 19a. $0 00

20. **Income Tax. Subtract the sum of lines 18b and 19b from line 17. If the sum of lines 18b and 19b is greater than line 17, enter "0"** ........................................... 20. $434 00

**Continue on page 2. This form cannot be processed if page 2 is not completed and included.**
21. Enter amount of Income Tax from line 20.

22. Voluntary Contributions from Form 4642, line 10. Include Form 4642.

23. USE TAX. Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1 (see instructions).

24. Total Tax Liability. Add lines 21, 22 and 23.

REFUNDABLE CREDITS AND PAYMENTS


27. Earned Income Tax Credit. Multiply line 27a by 6% (0.06) and enter result on line 27b.


30. Estimated tax, extension payments and 2018 credit forward.

31. 2019 AMENDED RETURNS ONLY. Taxpayers completing an original 2019 return should skip to line 32. Amended returns must include Schedule AMD (see instructions).

32. Total refundable credits and payments. Add lines 25, 26, 27b, 28, 29, 30 and 31c.

REFUND OR TAX DUE

33. If line 32 is less than line 24, subtract line 32 from line 24. If applicable, see instructions.

34. Overpayment. If line 32 is greater than line 24, subtract line 24 from line 32.

35. Credit Forward. Amount of line 34 to be credited to your 2020 estimated tax for your 2020 tax return.

36. Subtract line 35 from line 34.

DIRECT DEPOSIT
Deposit your refund directly to your financial institution! See instructions and complete a, b and c.

Deceased Taxpayer. If Filer and/or Spouse died after December 31, 2018, enter dates below. ENTER DATE OF DEATH ONLY. Example: 04-15-2019 (MM-DD-YYYY)

Preparer Certification. I declare under penalty of perjury that this return is based on all information of which I have any knowledge.

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

By checking this box, I authorize Treasury to discuss my return with my preparer.

Refund, credit, or zero returns. Mail your return to:

Michigan Department of Treasury, Lansing, MI 48956

Pay amount on line 33 (see instructions). Mail your check and return to:

+ 0000 2019 05 02 27 9
# 2019 MICHIGAN Schedule 1 Additions and Subtractions

Issued under authority of Public Act 261 of 1967, as amended.

Include with Form MI-1040. Type or print in blue or black ink.

<table>
<thead>
<tr>
<th>Filer's First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>Filer's Full Social Security No. (Example: 123-45-6789)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABIGAIL</td>
<td></td>
<td>SMITH</td>
<td>123       45       6789</td>
</tr>
</tbody>
</table>

## Additions to Income (all entries must be positive numbers)

1. Gross interest and dividends from obligations issued by states (other than Michigan) or their political subdivisions ........................................... 1. 00
2. Deduction for taxes on, or measured by, income including self-employment tax taken on your federal return (see instructions) ........................................... 2. 00
3. Gains from Michigan column of MI-1040D and MI-4797 ........................................... 3. 00
4. Losses attributable to other states (see instructions) ........................................... 4. 00
5. Net loss from federal column of your Michigan MI-1040D or MI-4797 .......................... 5. 00
6. Oil, gas, and nonferrous metallic mineral expenses (Michigan sourced) deducted to arrive at Adjusted Gross Income (AGI) ........................................... 6. 00
7. Federal Net Operating Loss deduction included in AGI ........................................... 7. 00
8. Other (see instructions). Describe: ............................................................................. 8. 00
9. Total additions. Add lines 1 through 8. Enter here and on MI-1040, line 11 ............ 9. 00

Continue on page 2.
If subtractions do not apply, only submit page 1 of the Schedule 1 with your return.
2019 MICHIGAN Schedule 1 Additions and Subtractions

Filer's First Name | M.I. | Last Name | Filer's Full Social Security No. (Example: 123-45-6789)
--- | --- | --- | ---
ABIGAIL | | SMITH | 123 ——— 45 ——— 6789

Subtractions from Income (all entries must be positive numbers)

10. Income from U.S. government bonds and other U.S. obligations included in MI-1040, line 10.
   Include U.S. Schedule B if over $5,000...
   10. 00

11. Amount included in MI-1040, line 10, from military retirement benefits due to service in the
    U.S. Armed Forces or Michigan National Guard, or taxable railroad retirement benefits...
   11. 00

12. Gains from federal column of Michigan MI-1040D and MI-4797...
   12. 00

13. Income attributable to another state. Explain type and source: SCHOLARSHIP
   13. 6,000

14. Taxable Social Security benefits or military pay (not retirement) included on MI-1040, line 10...
   14. 00

15. Income earned while a resident of a Renaissance Zone (see instructions)...
   15. 00

16. Michigan state and local income tax refunds received in 2019 and included
    on M-1040, line 10...
   16. 00

17. Michigan Education Savings Program, MI 529 Advisor Plan, and Michigan Achieving a Better
    Life Experience Program...
   17. 00

18. Michigan Education Trust...
   18. 00

19. Oil, gas, and nonferrous metallic minerals income (Michigan sourced) included in AGI...
   19. 00

20. Resident Tribal Member income exempted under a State/Tribal tax agreement or
    pursuant to Revenue Administrative Bulletin 1988-47...
   20. 00

21. Miscellaneous subtractions (see instructions). Describe:
   21. 00

Deduction Based on Year of Birth

Complete 22A through 22F if claiming the Michigan Standard Deduction, the retirement benefits deduction or the senior investment income deduction on lines 23, 24 or 25. Check box(es) 22C and/or 22F only if you or your spouse received retirement benefits from employment with a governmental agency not covered by the federal Social Security Act (SSA exempt employment). See Instructions before continuing.

<table>
<thead>
<tr>
<th>FILER</th>
<th>SPouse</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>B.</td>
</tr>
<tr>
<td>Year of Birth (19xx)</td>
<td>Age (as of 12-31-2019)</td>
</tr>
</tbody>
</table>
| 23. Michigan Standard Deduction. Complete this line ONLY if the older of you or your spouse
   (if married) was born during the period January 1, 1946 through December 31, 1952, and
   reached age 67 on or before December 31, 2019. Do not complete lines 24 and 25. 23. 00

24. Retirement benefits. Enter amount from line 16, 27, 28 or 29 of Form 4884, Michigan
    Pension Schedule. Include Form 4884.
   24. 00

25. Dividend/interest/capital gains deduction for taxpayers 74 years and older. Deduction is
    limited to $11,771 for single or married filing separately filers and $23,542 for joint filers, less
    any ceduction for retirement benefits (see instructions).
   25. 00

Check this box if you are the unmarried surviving spouse claiming a dividend, interest or capital
   gains deduction for someone born before 1946 who was at least age 65 at the time of death.

26. Subtotal. Add lines 10 through 25...
   26. 6,000

27. 2019 Michigan NOL Deduction. Enter amount from line 11 or 12 of Form 5674, Michigan Net
    Operating Loss Deduction. Include Form 5674.
   27. 00

28. Total Subtractions. Add lines 26 and 27. Enter here and on MI-1040, line 13...
   28. 6,000

If additions do not apply, only submit page 2 of the Schedule 1 with your return.
2019 MICHIGAN Nonresident and Part-Year Resident Schedule

Filer's First Name: ABIGAIL  
M.I. Last Name: SMITH

Filer's Social Security No.: 123-45-6789

If a Joint Return, Spouse's First Name:  
M.I. Last Name:  
Spouse's Social Security No.:  

4. 2019 RESIDENCY STATUS:
   a. ☑ Nonresident
   b. ☐ Part-Year Resident of Michigan.


   FILER  SPouse
   FROM: — — 2019 — — 2019
   TO: — — 2019 — — 2019

Income Allocation

5. Wages, salaries, other payments (tips, etc.) .... 13,250 00 13,250 00 00

6. Interest and dividends ........................................ 00 00 00 00

7. Business and farm income (include U.S. Schedules C and F) ........................................ 00 00 00 00

8. Gains/losses from MI-1040D or U.S. Schedule D, and/or MI-4797 or U.S Form 4797 ........................................ 00 00 00 00

9. Income reported on U.S. Schedule E (include U.S. Schedule E and supporting statements) ........................................ 00 00 00 00

10. Pensions, IRA distributions, annuities and Social Security (see Form 4884) ........................................ 00 00 00 00

11. Other (see instructions) ........................................ 6,000 00 00 6,000 00

12. Total income. Add lines 5 through 11 ...... 19,250 00 13,250 00 6,000 00

13. Enter the total adjustments from U.S. 1040, Schedule 1 Describe: ........................................ 00 00 00 00

14. Subtract line 13 from line 12. The amount in column A should equal MI-1040, line 10. Enter amount in column C on Schedule 1, line 13 or, if a negative amount, enter as a positive amount on Schedule 1, line 4. 19,250 00 13,250 00 6,000 00

Exemption Allowance (If one spouse is a full-year resident, and the other is not, see instructions.)

15. Enter amount from MI-1040, line 9f ........................................ 4,400 00

16. Enter Michigan source income from line 14, column B ............... 13,250 00

17. Enter total income from line 14, column A ........................................ 19,250 00

18. Divide line 16 by line 17 (if line 16 is greater than line 17, enter 100%) ........................................ 69 %

19. If both spouses are part-year or nonresidents, multiply line 15 by the percentage on line 18 and enter here and on MI-1040, line 15. If one spouse is a full-year resident, complete Worksheet 5 and enter here and on MI-1040, line 15 ........................................ 3,036 00
**2019 MICHIGAN Withholding Tax Schedule**

Issued under authority of Public Act 281 of 1987, as amended.

**Type or print in blue or black ink.**

**INSTRUCTIONS:** If you had Michigan income tax withheld in 2019, you must complete a Withholding Tax Schedule (Schedule W) to claim the withholding on your Individual Income Tax Return (MI-1040, line 29). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

<table>
<thead>
<tr>
<th>1. Filer's First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>2. Filer's Full Social Security No. (Example: 123-45-6789)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABIGAIL</td>
<td></td>
<td>SMITH</td>
<td>123 — 45 — 6789</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If a Joint Return, Spouse’s First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>3. Spouse's Full Social Security No. (Example: 123-45-6789)</th>
</tr>
</thead>
</table>

**TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS**

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>38-9876543</td>
<td>ABC ENTERPRISE</td>
<td>13,250</td>
<td>$563.00</td>
</tr>
</tbody>
</table>

Enter Table 1 Subtotal from additional Schedule W forms (if applicable) .................................................. 0

4. **SUBTOTAL.** Enter total of Table 1, column E. ......................................................................................... 4. $563.00

**TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS**

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
</table>

Enter Table 2 Subtotal from additional Schedule W forms (if applicable) .......................................................... 0

5. **SUBTOTAL.** Enter total of Table 2, column E. ............................................................................................... 5. 0

6. **TOTAL.** Add lines 4 and 5. Enter here and carry to MI-1040, line 29. ............................................................ 6. $563.00

+ 0000 2019 57 01 27 2
Example 2:
John Wolverine
<table>
<thead>
<tr>
<th>Form</th>
<th>Wage and Tax Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>OMB No. 1545-0008</td>
<td>Department of the Treasury—Internal Revenue Service</td>
</tr>
<tr>
<td>22222</td>
<td>2019</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>a Employee’s social security number</th>
<th>987-65-4321</th>
</tr>
</thead>
<tbody>
<tr>
<td>b Employer identification number (EIN)</td>
<td>38-1234567</td>
</tr>
<tr>
<td>c Employer’s name, address, and ZIP code</td>
<td>Sunny Side Diner, 123 Blue Lane, Everytown, MI 48123</td>
</tr>
<tr>
<td>d Control number</td>
<td>9</td>
</tr>
<tr>
<td>e Employee’s first name and initial</td>
<td>John</td>
</tr>
<tr>
<td>f Employee’s address and ZIP code</td>
<td>111 Campus Lane, Everytown, MI 48123</td>
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</tr>
</tbody>
</table>

| 1 Wages, tips, other compensation | 12,750 |
| 2 Federal income tax withheld | 1,785 |
| 3 Social security wages |  |
| 4 Social security tax withheld |  |
| 5 Medicare wages and tips |  |
| 6 Medicare tax withheld |  |
| 7 Social security tips |  |
| 8 Allocated tips |  |
| 9 |  |
| 10 Dependent care benefits |  |
| 11 Nonqualified plans |  |
| 12a |  |
| 12b |  |
| 12c |  |
| 12d |  |
| 13 Statutory employee retirement plan Third-party sick pay |  |
| 14 Other |  |
| 15 State | MI |
| 16 State wages, tips, etc. | 12,750 |
| 17 State income tax | 472 |
| 18 Local wages, tips, etc. | 12,750 |
| 19 Local income tax | 175 |
| 20 Locally name | DET |

Copy 1—For State, City, or Local Tax Department
<table>
<thead>
<tr>
<th>Field</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee's social security number</td>
<td>987-65-4321</td>
</tr>
<tr>
<td>Employer identification number (EIN)</td>
<td>65-9876543</td>
</tr>
<tr>
<td>Employer's name, address, and ZIP code</td>
<td>West Coast Movies, 456 Yellow Lane, Anytown, CA 49645</td>
</tr>
<tr>
<td>Control number</td>
<td></td>
</tr>
<tr>
<td>Employee's first name and initial Last name</td>
<td>John Wolverine, 111 Campus Lane, Everytown, MI 48123</td>
</tr>
<tr>
<td>Employee's address and ZIP code</td>
<td></td>
</tr>
<tr>
<td>State Employer's state ID number</td>
<td>CA 65-9876543</td>
</tr>
<tr>
<td>State wages, tips, etc.</td>
<td>17,200</td>
</tr>
<tr>
<td>State income tax</td>
<td>515</td>
</tr>
<tr>
<td>Federal income tax withheld</td>
<td>2,408</td>
</tr>
<tr>
<td>Social security wages</td>
<td></td>
</tr>
<tr>
<td>Social security tax withheld</td>
<td></td>
</tr>
<tr>
<td>Medicare wages and tips</td>
<td></td>
</tr>
<tr>
<td>Medicare tax withheld</td>
<td></td>
</tr>
<tr>
<td>Social security tips</td>
<td></td>
</tr>
<tr>
<td>Allocated tips</td>
<td></td>
</tr>
</tbody>
</table>

Form W-2 Wage and Tax Statement 2019

Department of the Treasury—Internal Revenue Service
Copy 1—For State, City, or Local Tax Department
Form 1040-NR-EZ

U.S. Income Tax Return for Certain Nonresident Aliens With No Dependents

2019

Your first name and middle initial  Last name  Identifying number (see instructions)
John  Wolverine

Present home address (number, street, and apt. no., or rural route). If you have a P.O. box, see instructions.
111 Campus Ave

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions.
Evertown, MI 48123

Foreign country name  Foreign province/state/county  Foreign postal code

Filing Status
Check only one box.
1  Single nonresident alien
2  Married nonresident alien

Attach Form(s)
W-2 or 1042-S here. Also attach Form(s) 1099-R if tax was withheld.

Wages, salaries, tips, etc. Attach Form(s) W-2
Taxable refunds, credits, or offsets of state and local income taxes
Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement.
Total income exempt by a treaty from page 2, Item J(1) (e)
Add lines 3, 4, and 5
Scholarship and fellowship grants excluded
Student loan interest deduction
Subtract the sum of line 8 and line 9 from line 7. This is your adjusted gross income
Itemized deductions. See the instructions for limitation
Reserved
Reserved
Taxable income. Subtract line 11 from line 10. If line 11 is more than line 10, enter -0-
Tax. Find your tax in the tax table in the instructions.
Unreported social security and Medicare tax from Form: a 4137  b 8919
Add lines 15 and 16. This is your total tax
Federal income tax withheld from Form(s) W-2 and 1099-R
Federal income tax withheld from Form(s) 1042-S
2019 estimated tax payments and amount applied from 2018 return
Credit for amount paid with Form 1040-C
Add lines 18a through 20. These are your total payments
If line 21 is more than line 17, subtract line 17 from line 21. This is the amount you overpaid
Amount of line 22 you want refunded to you. If Form 8888 is attached, check here
Routing number
c Type:  Checking  Savings
Account number
If you want your refund check mailed to an address outside the United States not shown above, enter that address here:
Amount of line 22 you want applied to your 2020 estimated tax
Amount you owe. Subtract line 21 from line 17. For details on how to pay, see instructions
Estimated tax penalty (see instructions)

Amount You Owe

Do you want to allow another person to discuss this return with the IRS? See instructions.
Yes. Complete the following.  No

Designee’s name
Phone no.
Personal identification number (PIN)

Sign Here
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of U.S. source income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature
Date
Your occupation in the United States

Paid Preparer Use Only
Print/Type preparer’s name
Preparer’s signature
Date
Check if self-employed
PTIN

Firm’s name
Firm’s EIN
Firm’s address
Phone no.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.
Cat. No. 21534N  Form 1040-NR-EZ (2019)
2019 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 15, 2020. Type or print in blue or black ink.

1. Filer's First Name   M.I.   Last Name   WOLVERINE
   JOHN

If a Joint Return, Spouse's First Name   M.I.   Last Name

Home Address (Number, Street, or P.O. Box)   111 CAMPUS LANE

City or Town   EVERYTOWN
   State   MI
   ZIP Code   48123

2. Filer's Full Social Security No. (Example: 123-45-6789)
   987   65   4321


5. STATE CAMPAIGN FUND
   Check if you (and/or your spouse, if filing a joint return) want $3 of your taxes to go to this fund. This will not increase your tax or reduce your refund.
   a. □ Filer
   b. □ Spouse

6. FARMERS, FISHERMEN, OR SEAFARERS
   □ Check this box if 2/3 of your income is from farming, fishing, or seafaring.

7. 2019 FILING STATUS. Check one.
   a. × Single
      " If you check box "c," complete line 3 and enter spouse's full name below:
   b. □ Married filing jointly
   c. □ Married filing separately*

8. 2019 RESIDENCY STATUS. Check all that apply
   a. □ Resident
   b. × Nonresident *
      " If you check box "b" or "c," you must complete and include Schedule NR.
   c. □ Part-Year Resident *

9. EXEMPTIONS. NOTE: If someone else can claim you as a dependent, check box 9e, enter 0 on line 9a and enter $1,500 on line 9e (see instr.).
   a. Number of exemptions (see instructions) .......................................................... 9a. 1  x $4,400 9a. 4,400
   b. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled
      9b.  x $2,700 9b. 00
   c. Number of qualified disabled veterans .......................................................... 9c.  x $400 9c. 00
   d. Number of Certificates of Stillbirth from MDHHS (see instructions) .................... 9d.  x $4,400 9d. 00
   e. Claimed as dependent, see line 9 NOTE above ................................................. 9e.  00

9f. Add lines 9a, 9b, 9c, 9d and 9e. Enter here and on line 15 ..................................... 9f. 4,400

10. Adjusted Gross Income from your U.S. Forms 1040 or 1040NR (see instructions) .......... 10. 29,950

11. Additions from Schedule 1, line 9. Include Schedule 1 ........................................... 11. 00

12. Total. Add lines 10 and 11 ...................................................................................... 12. 29,950

13. Subtractions from Schedule 1, line 28. Include Schedule 1 ........................................... 13. 17,200

14. Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0" .................................................................................. 14. 12,750

15. Exemption allowance. Enter amount from line 9f or Schedule NR, line 19 ...................... 15. 1,892

16. Taxable Income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0" .......................................................... 16. 10,858

17. Tax. Multiply line 16 by 4.25% (0.0425) ..................................................................... 17. 461

NON-REFUNDABLE CREDITS

18. Income Tax Imposed by government units outside Michigan. Include a copy of the return (see instructions) ........................................... 18a. 00

19. Michigan Historic Preservation Tax Credit carryforward (see instructions) .................. 19a. 00

20. Income Tax. Subtract the sum of lines 18b and 19b from line 17. If the sum of lines 18b and 19b is greater than line 17, enter "0" .................................................. 20. 461

0000 2019 05 01 27 1

Continue on page 2. This form cannot be processed if page 2 is not completed and included.
21. Enter amount of Income Tax from line 20.

22. Voluntary Contributions from Form 4642, line 10. Include Form 4642.

23. USE TAX. Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1 (see instructions).

24. Total Tax Liability. Add lines 21, 22 and 23.

**REFUNDABLE CREDITS AND PAYMENTS**


27. Earned Income Tax Credit. Multiply line 27a by 6% (0.06) and enter result on line 27b.


30. Estimated tax, extensions payments and 2018 credit forward.

31. **2019 AMENDED RETURNS ONLY.** Taxpayers completing an original 2019 return should skip to line 32. Amended returns must include Schedule AMD (see instructions).

   31a. If you had a refund and/or credit forward on the original return, check box 31a and enter this amount as a negative number on line 31c.

   31b. If you paid the original return, check box 31b and enter the amount paid with the original return, plus any additional tax paid after filing, as a positive number on line 31c. Do not include interest or penalties.

32. Total refundable credits and payments. Add lines 25, 26, 27b, 28, 29, 30 and 31c.

**REFUND OR TAX DUE**

33. If line 32 is less than line 24, subtract line 32 from line 24. If applicable, see instructions.

   Include interest and penalty.

   YOU OWE

34. Overpayment. If line 32 is greater than line 24, subtract line 24 from line 32.

35. Credit Forward. Amount of line 34 to be credited to your 2020 estimated tax for your 2020 tax return.

36. Subtract line 35 from line 34.

**DIRECT DEPOSIT**

Deposit your refund directly to your financial institution! See instructions and complete a, b and c.

**Deceased Taxpayer.** If Filer and/or Spouse died after December 31, 2018, enter dates below.

**ENTER DATE OF DEATH ONLY.** Example: 04-15-2018 (MM-DD-YYYY)

Filer

Spouse

**Preparer Certification.** I declare under penalty of perjury that this return is based on all information of which I have any knowledge.

Preparer's PTIN, FEIN or SSN

Preparer's Name (print or type)

Preparer's Business Name, Address and Telephone Number

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

Filer's Signature

Date

Spouse's Signature

Date

Refund, credit, or zero returns. Mail your return to: Michigan Department of Treasury, Lansing, MI 48956

Pay amount on line 33 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

+ 0000 2019 05 02 27 9
2019 MICHIGAN Schedule 1 Additions and Subtractions

Issued under authority of Public Act 281 of 1967, as amended.

Include with Form MI-1040. Type or print in blue or black ink.

<table>
<thead>
<tr>
<th>Filer's First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>Filer's Full Social Security No. (Example: 123-45-6789)</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN</td>
<td></td>
<td>WOLVERINE</td>
<td>987 65 4321</td>
</tr>
</tbody>
</table>

Additions to Income (all entries must be positive numbers)

1. Gross interest and dividends from obligations issued by states (other than Michigan) or their political subdivisions.

2. Deduction for taxes on, or measured by, income including self-employment tax taken on your federal return (see instructions)

3. Gains from Michigan column of MI-1040D and MI-4797

4. Losses attributable to other states (see instructions)

5. Net loss from federal column of your Michigan MI-1040D or MI-4797

6. Oil, gas, and nonferrous metallic mineral expenses (Michigan sourced) deducted to arrive at Adjusted Gross Income (AGI)

7. Federal Net Operating Loss deduction included in AGI

8. Other (see instructions). Describe: _______________________________________________________________________

9. Total additions. Add lines 1 through 8. Enter here and on MI-1040, line 11

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<td>00</td>
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<tr>
<td>9</td>
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</tbody>
</table>

Continue on page 2.
If subtractions do not apply, only submit page 1 of the Schedule 1 with your return.
# 2019 MICHIGAN Schedule 1 Additions and Subtractions

**Filer's First Name**: JOHN  
**M.I.**:  
**Last Name**: WOLVERINE  
**Filer's Full Social Security No. (Example: 123-45-6789)**: 987 — 65 — 4321

### Subtractions from Income (all entries must be positive numbers)

10. Income from U.S. government bonds and other U.S. obligations included in MI-1040, line 10. Include U.S. Schedule B if over $5,000.  

11. Amount included in MI-1040, line 10, from military retirement benefits due to service in the U.S. Armed Forces or Michigan National Guard, or taxable railroad retirement benefits.

12. Gains from federal column of Michigan MI-1040D and MI-4797.

13. Income attributable to another state. **Describe**: CA WAGE, SCH NR  

14. Taxable Social Security benefits or military pay (not retirement) included on MI-1040, line 10.

15. Income earned while a resident of a Renaissance Zone (see instructions).

16. Michigan state and local income tax refunds received in 2019 and included on MI-1040, line 10.


19. Oil, gas, and nonferrous metallic minerals income (Michigan sourced) included in AGI.

20. Resident Tribal Member income exempted under a State/Tribal tax agreement or pursuant to Revenue Administrative Bulletin 1988-47.

21. Miscellaneous subtractions (see instructions). **Describe**:  

### Deduction Based on Year of Birth

Complete 22A through 22F if claiming the Michigan Standard Deduction, the retirement benefits deduction or the senior investment income deduction on lines 23, 24 or 25. Check box(es) 22C and/or 22F only if you or your spouse received retirement benefits from employment with a governmental agency not covered by the federal Social Security Act (SSA exempt employment). **See instructions before continuing**.

<table>
<thead>
<tr>
<th>FILER</th>
<th>A. Year of Birth (19xx)</th>
<th>B. Age (as of 12-31-2019)</th>
<th>C. Check if filer received benefits from SSA exempt employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>FILER</td>
<td>Date 19xx</td>
<td>Age 2019</td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SPouse</th>
<th>D. Year of Birth (19xx)</th>
<th>E. Age (as of 12-31-2019)</th>
<th>F. Check if spouse received benefits from SSA exempt employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPouse</td>
<td>Date 19xx</td>
<td>Age 2019</td>
<td>No</td>
</tr>
</tbody>
</table>

23. **Michigan Standard Deduction.** Complete this line ONLY if the older of you or your spouse (if married) was born during the period January 1, 1946 through December 31, 1952, and reached age 67 on or before December 31, 2019. **Do not complete lines 24 and 25.**

24. **Retirement benefits.** Enter amount from line 16, 27, 28 or 29 of Form 4884, *Michigan Pension Schedule. Include Form 4884.*

25. **Dividend/interest/capital gains deduction for taxpayers 74 years and older.** Deduction is limited to $11,771 for single or married filing separately filers and $23,542 for joint filers, less any deduction for retirement benefits (see instructions).

26. **Subtotal.** Add lines 10 through 25.

27. **2019 Michigan NOL Deduction.** Enter amount from line 11 or 12 of Form 5674, *Michigan Net Operating Loss Deduction. Include Form 5674.*

28. **Total Subtractions.** Add lines 26 and 27. **If additions do not apply, only submit page 2 of the Schedule 1 with your return.**
2019 MICHIGAN Nonresident and Part-Year Resident Schedule

Type or print in blue or black ink.

Include with Form MI-1040. Read all instructions before completing this form.

<table>
<thead>
<tr>
<th>1. Filer's First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>2. Filer's Full Social Security No. (Example: 123-45-6789)</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN</td>
<td></td>
<td>WOLVERINE</td>
<td>987 — 65 — 4321</td>
</tr>
</tbody>
</table>

If a Joint Return, Spouse's First Name | M.I. | Last Name | Spouse's Full Social Security No. (Example: 123-45-6789) |
---------------------------------------|------|-----------|----------------------------------------------------------|

4. 2019 RESIDENCY STATUS:

Check all that apply.

a. [ ] Nonresident

b. [ ] Part-Year Resident of Michigan.

Enter dates of Michigan residency in 2019*

<table>
<thead>
<tr>
<th>FILER</th>
<th>SPouse</th>
</tr>
</thead>
<tbody>
<tr>
<td>FROM:</td>
<td>2019</td>
</tr>
<tr>
<td>TO:</td>
<td>2019</td>
</tr>
</tbody>
</table>

Income Allocation

5. Wages, salaries, other payments (tips, etc.) .... 29,950 00

6. Interest and dividends ................................ 00 00 00

7. Business and farm income (include U.S. Schedules C and F) ................. 00 00 00

8. Gains/losses from MI-1040D or U.S. Schedule D, and/or MI-4797 or U.S. Form 4797 ........................................ 00 00 00

9. Income reported on U.S. Schedule E (include U.S. Schedule E and supporting statements) 00 00 00

10. Pensions, IRA distributions, annuities and Social Security (see Form 4884) ............... 00 00 00

11. Other (see instructions) ...................................... 00 00 00

12. Total income. Add lines 5 through 11 ............... 29,950 00 12,750 00 17,200 00

13. Enter the total adjustments from U.S. 1040, Schedule 1 Describe: .................. 00 00 00

14. Subtract line 13 from line 12. The amount in column A should equal MI-1040, line 10. Enter amount in column C on Schedule 1, line 13 or, if a negative amount, enter as a positive amount on Schedule 1, line 4. 29,950 00 12,750 00 17,200 00

Exemption Allowance (If one spouse is a full-year resident, and the other is not, see instructions.)

15. Enter amount from MI-1040, line 9f .................................. 15. 4,400 00

16. Enter Michigan source income from line 14, column B 16. 12,750 00

17. Enter total income from line 14, column A .................. 17. 29,950 00

18. Divide line 16 by line 17 (if line 16 is greater than line 17, enter 100%). .................. 18. 43 %

19. If both spouses are part-year or nonresidents, multiply line 15 by the percentage on line 18 and enter here and on MI-1040, line 15. If one spouse is a full-year resident, complete Worksheet 5 and enter here and on MI-1040, line 15. 19. 1,892 00

+ 0000 2019 13 01 27 4
# Michigan Withholding Tax Schedule

**2019 MICHIGAN Withholding Tax Schedule**

Issued under authority of Public Act 281 of 1967, as amended.

**INSTRUCTIONS:**
If you had Michigan income tax withheld in 2019, you must complete a Withholding Tax Schedule (Schedule W) to claim the withholding on your Individual Income Tax Return (MI-1040, line 29). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

### Table 1: Michigan Tax Withheld or Military Pay Reported on W-2, W-2G or Corrected W-2 Forms

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter &quot;X&quot; for: Filer or Spouse</td>
<td>Employer's identification number (Example: 38-1234567)</td>
<td>Box c — Employer’s name</td>
<td>Box 1 — Wages, tips, other compensation</td>
<td>Box 17 — Michigan income tax withheld</td>
</tr>
<tr>
<td>X</td>
<td>38-1234567</td>
<td>SUNNY SIDE DINER</td>
<td>12,750</td>
<td>472</td>
</tr>
</tbody>
</table>

Enter Table 1 Subtotal from additional Schedule W forms (if applicable) ............................................................................................................. 00

4. **SUBTOTAL.** Enter total of Table 1, column E. ................................................................................................................................. 4. 472 00

### Table 2: Michigan Tax Withheld or Military Retirement Benefits and Railroad Retirement Benefits (Both Tier 1 and Tier 2) Reported on 1099 Forms

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter &quot;X&quot; for: Filer or Spouse</td>
<td>Payer's federal identification number (Example: 38-1234567)</td>
<td>Payer's name</td>
<td>Taxable pension distribution, misc. income, etc. (see inst.)</td>
<td>Michigan income tax withheld</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter Table 2 Subtotal from additional Schedule W forms (if applicable) ............................................................................................................. 00

5. **SUBTOTAL.** Enter total of Table 2, column E. ................................................................................................................................. 5. 00

6. **TOTAL.** Add lines 4 and 5. Enter here and carry to MI-1040, line 29. ........................................................................................................ 6. 472 00

+ 0000 2019 57 01 27 2