

F-1040-R - 2006

CITY OF FLINT RESIDENT Individual Income Tax Return
 or other taxable year beginning _____ 2006 ending _____, 20__

CIT LTR# _____ Do not write in this space
 CHG LTR# _____ Rec. _____

IDENTIFICATION

IMPORTANT
 Taxpayer to complete this information

DID YOU FILE A 2005 FLINT RETURN?
 Yes No If No, Explain _____

IF YES, IS THE NAME(S) AND ADDRESS IDENTICAL TO 2005 TAX RETURN?
 Yes No If No, State Prior Information And Date of Change _____

Incomplete/incorrect information will result in a late or incorrect refund.

First Name and Initial _____ Last Name _____ Your Social Security Number _____

If Joint Return: First Name and Initial of Spouse _____ Spouse's Social Security Number if Joint Return _____

Present Home Address (Number and Street) _____ (if you have P.O. Box, list Home Address on attached paper) Your Occupation _____

City, State and Zip Code _____ Spouse's Occupation _____

FILING STATUS

(Spouse's Name and SS# _____) →

Single
 Married filing joint return
 Married filing separately

EXEMPTIONS

	Regular	65 & Over	Blind	Deaf	Disabled	
a. Yourself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Number of boxes checked on a and b <input type="checkbox"/>
b. Spouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Number of children on c who lived with you <input type="checkbox"/>

Name (first, initial and last name)	Social Security Number	Relationship	Number of months lived in your home in 2006	
_____	_____	_____	_____	Number of children on c who didn't live with you due to divorce or separation <input type="checkbox"/>
_____	_____	_____	_____	Number of other dependents listed on c <input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>

d. Total number of exemptions claimed _____

FORMS W2 MUST BE ATTACHED HERE

INCOME

1. W-2 income (Wages, salaries, tips, etc., do not include SUB pay)
 Enter Federal gross income from Form(s) W-2, Box 1 - ALL W2'S MUST BE ATTACHED

Employer's Name _____ Complete Address of Actual Work Station _____

	FLINT INCOME TAX WITHHELD	TOTAL FEDERAL WAGES (W-2, Box 1)
1. _____	_____	00
2. Total W-2 income	TOTALS	00
3. Dividend and interest income per Federal Return (do not include interest from U.S. obligations) _____		00
4. Other income, losses, or deductions: Complete Schedule A, Page 2 _____		00
5. Total (Line 2, plus Line 3, plus or minus Line 4) _____		00
6. Exemptions (number of exemptions claimed on Line d above) _____ x \$600.00 _____		00
7. Taxable income (Line 5 minus Line 6) _____		00
8. City of Flint tax (multiply Line 7 by 1%) (.01) - part-year resident, complete Line 9C for credit _____		00

PAYMENTS AND CREDITS

9. a. City of Flint Tax withheld by employer - from Line 2 above **W2 FORMS MUST BE ATTACHED** _____

b. Payments and credits on 2006 Estimated Flint Income Tax _____

c. Part year resident credit (see Schedule B, Page 2 for instructions) and credit for tax paid to another city - attach copy of other city return (see instructions #24)
 Part year resident, taxpayer(s) lived inside Flint from 2006 to 2006

10. Total of payments and credits - add Lines 9a, 9b and 9c _____

REFUND OR AMOUNT YOU OWE

Return due April 30, 2007, amounts not paid by due date are subject to interest and penalty.

11. If Line 8 is larger than Line 10 enter **AMOUNT YOU OWE**. If \$1.00 or more **PAY IN FULL WITH RETURN**
 Write Social Security Number on remittance and make payable to: "TREASURER, CITY OF FLINT",
 mail to: P.O. Box 99, FLINT, MI 48501-0099

12. If Line 10 is larger than Line 8, enter amount **OVERPAID**, mail to: P.O. Box 1800 Flint, MI 48501 _____

13. Overpaid amount on Line 12 is to be: (check one box only) _____ 13. Credited to 2007 estimated tax / Refunded to you

MUST ROUND TO NEAREST DOLLAR AMOUNT

SIGNATURE

I declare under penalty of perjury that the information in this return, and attachments, is true and complete
 I authorize Treasury to discuss my return and attachments with my preparer
 Do not discuss with my preparer.

Your Signature _____ Date _____ Your birthdate _____

Spouse's Signature _____ Date _____ Spouse's birthdate _____

Preparer's Signature _____

Daytime Phone () _____ Evening Phone () _____ Phone () _____ Identification No. _____

SCHEDULE A

SALES AND EXCHANGES OF PROPERTY

1. Net income (or loss) from sale or exchange of property - **attach Federal Schedule** 1. .00

RENTS AND ROYALTIES

2. Net income (or loss) from rents and royalties - **attach Federal Schedule E** 2. .00

PROFIT (OR LOSS) FROM BUSINESS OR PROFESSION

3. Net profit (or loss) from business or profession - **attach Federal Schedule C** 3. .00

OTHER FLINT INCOME

4. Other income (or loss) from partnerships, estates, trusts, lottery, casino gambling, etc. - **attach copy of Federal return (or Flint return if located in Flint)**

Received from	Kind of income	Federal I.D No.	Amount
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. Total of Lines 4a and 4b - enter on 4c.			4c. .00

5. IRA distribution..... 5. .00

DEDUCTIONS ALLOWED

6. Employee business expense (see instructions for which expenses are allowed from Federal Form 2106) **attach Federal Form 2106**..... 6. (.00)

7. Moving expenses (into Flint only) **attach Federal Form 3903** 7. (.00)

8. IRA deduction - **enter on Line 8a your 'total income' from your 2006 Federal Tax Return** 8a. \$
 (Use amount on Line #22 if you file a Federal 1040 Tax Return, or use amount from Line #15 if you file a Federal 1040-A)
Attach Form 5498 or similar proof issued by your financial institution
 (must have name, SS#, amount and contribution year)..... 8. (.00)

9. Other (please identify) - **attach documentation**..... 9. (.00)

10. Renaissance Zone (**attach a copy of approval letter for 2006**)..... 10.(.00)

11. TOTAL OF INCOME (OR LOSSES) AND DEDUCTIONS - total Lines 1 through 10
 ENTER TOTAL HERE AND ON PAGE 1, LINE 4..... 11. .00

SCHEDULE B

COMPUTATION OF CREDIT FOR PART-YEAR RESIDENCY

TABLE "A" TO BE USED IF ALL WORK PERFORMED INSIDE FLINT			
NUMBER OF MONTHS LIVED OUTSIDE FLINT	PERCENTAGE	NUMBER OF MONTHS LIVED OUTSIDE FLINT	PERCENTAGE
1	.0417	6 1/2	.2708
1 1/2	.0625	7	.2917
2	.0833	7 1/2	.3125
2 1/2	.1042	8	.3333
3	.1250	8 1/2	.3542
3 1/2	.1458	9	.3750
4	.1667	9 1/2	.3958
4 1/2	.1875	10	.4167
5	.2083	10 1/2	.4375
5 1/2	.2292	11	.4583
6	.2500	11 1/2	.4792

TABLE "B" TO BE USED IF ALL WORK PERFORMED OUTSIDE OF FLINT			
NUMBER OF MONTHS LIVED OUTSIDE FLINT	PERCENTAGE	NUMBER OF MONTHS LIVED OUTSIDE FLINT	PERCENTAGE
1	.0833	6 1/2	.5417
1 1/2	.1250	7	.5833
2	.1667	7 1/2	.6250
2 1/2	.2083	8	.6667
3	.2500	8 1/2	.7083
3 1/2	.2917	9	.7500
4	.3333	9 1/2	.7917
4 1/2	.3750	10	.8333
5	.4167	10 1/2	.8750
5 1/2	.4583	11	.9167
6	.5000	11 1/2	.9583

1 - 15 days are to be considered 1/2 month and 16 - 31 days are to be considered a full month. Determine length of residency OUTSIDE Flint to the half month and locate the tax rate factor in (1) Table A if all income was earned inside the City of Flint, or (2) Table B if all income was earned outside the City of Flint. Multiply the Flint tax (Line 8 of Page 1) by the tax factor and enter the credit on Line 9C, page 1.

- NOTE**
- 1) Do not use these schedules if income was earned both inside and outside the City of Flint during the year or if income reported was not for a 12 month period. Compute tax separately for each job and attach worksheet, also give exact dates during 2006 you worked at each job.
 - 2) No credit is allowed if all income reported was earned while a resident of Flint.