2023 MICHIGAN Homestead Property Tax Credit Claim for Veterans and Blind People MI-1040CR-2

Amended Return

Type or print in blue or black ink.								Attachm	ent 06		
1. Filer's First Name M.I. Last Name					2	2. Filer's Full Social Security No. (Example: 123-45-6789)					
If a Joint Return, Spouse's First Name	M.I.	Last Name									
3. Spouse's Full Social dome Address (Number, Street, P.O. Box) If using a P.O. Box, you must complete line 34.				Security No. (Example: 123-45-6789)							
Home Address (Number, Street, P.O. Bo	k) ii using a	P.O. Box, you must co	mpiete line	34.							
City or Town			State	ZIP Code	4	. School District Code	(5 digits	s - see p. 19)			
5. 2023 FILING STATUS:		RESIDENCY STA	TUS:			ed box "c," enter dates as MM-DD-YYYY (Exa			3.		
Check one. a. Single		ck all that apply. Resident				FILER		SPOUSE			
		Cesident							_		
b. Married filing jointly	b. 🔲 I	Nonresident		FROM:		2023		20	023		
c. Married filing separately (Include Form 5049)	c. 🕅 I	Part-Year Resident *		TO:		2023		2023			
7. Check one of the following that a	pplies to y	/ou:									
a. Blind and own your homest	ead		с.	Survivin	g spouse of v	eteran deceased in	service	e			
b. Veteran with service-connector or veteran's surviving spous		pility	*d.	Active m	ilitary, pensic	oned veteran or his/h	ner sur	surviving spouse			
Enter percent of disability:		%	*e.			nondisabled or nor /ar II, or World War I		oned veteran of the			
* If you check "d" or "e" above and	d your Tota	al Household Resou	rces (line 3	32) are mo	ore than \$7,50	00, you cannot claim	a creo	dit on this form.			
8. Taxable value allowance fr	rom Table	e 2					8.		00		
9. Taxable Value of homester	ad. Hom	eowners: If greate	er than \$	154,400,	STOP; you	are not eligible	9.		00		
10. Property taxes levied on your home for 2023 (see instructions)					10.		00				
11. Percent of tax relief. Divid	de line 8	by line 9 (not to e	xceed 10	0%)			11.		%		
12. Multiply line 10 by line 11.	Enter the	e result (maximum	\$1 700)				12		00		
TOTAL HOUSEHOLD RESOUR If married filing separately, you	CES. If f	iling a joint retur	n, includ	e incom	e from both	n spouses.	12.		00		
13. Wages, salaries, tips, sick,					-	rity, SSI, and/or	ļ				
and SUB pay, etc		13	(rement benefits	20.		00		
14. All interest and dividend in (including nontaxable inter		14.				rt and foster nents received	21.		00		
15. Net business income (inclu farm income). If negative,	uding net	t 🔽		22.	Unemploym		22.		00		
16. Net royalty or rent income.				23.	Gifts receive	ed or expenses					
If negative, enter "0"		16	(r behalf	23.		00		
17. Retirement pension, annui IRA benefits.		17	(Other nonta Describe:	xable income	24.		00		
18. Capital gains less capital le (see instructions)		18	(erans' disability n/pension benefits	25.		00		
19. Alimony and other taxable Describe:		19.	(er MDHHS benefits de food assistance)	, 26.		00		
27. SUBTOTAL. Add lines 13	through	26				SUBTOTAL	27.		00		

Continue on page 2. This form cannot be processed if pages 2 and 3 are not completed and included.

28.	Enter subtotal from line 27	28.		00
	Other adjustments (see instructions). 29. 00			
30.	Medical insurance/HMO premiums you paid for you and your family (see instructions). 30. 00			
31.	Add lines 29 and 30	31.		00
32.	TOTAL HOUSEHOLD RESOURCES. Subtract line 31 from line 28. If more than \$67,300, STOP; you are not eligible for this credit.	32.		00
33.	 PROPERTY TAX CREDIT. (Maximum \$1,700). Enter one of the following: a. FIP/MDHHS RECIPIENTS, enter amount from the FIP/MDHHS Benefits Worksheet. b. If line 32 is more than \$58,300, see instructions and enter the reduced amount. c. ALL OTHERS, enter the amount from line 12. If you file an MI-1040, carry this amount to MI-1040, line 25 	33.		00

PART 1: HOMEOWNERS WHO MOVED IN 2023. Report on lines 34 and 35 the addresses and taxable values of the homesteads for which you are claiming a credit. Homesteads with a taxable value greater than \$154,400 are not eligible for this credit.

34. A	Taxable Value				
		00			
35. A	ddress of homestead sold (moved from) during 2023 (Number, Street, City, State, ZIP Code).			Taxable Value	
					00
Hom	eowners who moved during 2023, complete lines 36 through 44. Veterans: If	f vou	HOME	STEAD	
	rented a homestead during 2023, complete lines 45 through 56.	,	A. Moved Into	B. Moved From	
36.	Number of days occupied (total cannot be more than 365)	36.			
37.	Divide line 36 by 365 and enter percentage here	37.	%		%
38.	Property taxes levied for calendar year 2023	38.	00		00
39.	Prorated taxes. Multiply line 38 by percentage on line 37	39.	00		00
40.	Taxable value allowance (see Table 2)	40.	00		00
41.	Taxable value	41.	00		00
42.	Divide line 40 by line 41 and enter percentage here	42.	%		%
43.	Prorated credit. Multiply line 39 by line 42	43.	00		00
44.	Property tax credit. Add line 43 columns A and B. Enter here and on line 12. Part-year renters: do not carry to line 12; complete lines 45 through 56 instead				00

Veterans who rent or all other individuals who are not required to file an MI-1040 should continue to and complete page 3.

PART 2: RENTERS (Veterans Only)

45.	А	В	с	D		E
	Address of Homestead You Rented (Number, Street, Apt. #, City, State, ZIP Code)	Landowner's Name and Address (City, State and ZIP Code)	# Months Rented	Monthly Rent (see instructions		Total Rent Paid
					/	
					00	00
					00	00
46.	Total rent you paid (not more than 12 mo	nths). Add total rent for each period			46.	00
47.		ee housing residents use 10% (0.10) (se	e instruct	ions).	47.	00
48.		illage by 0.001 (see Credit Computation	Example	s in	48.	
49.	Full-year renters only, divide line 47 by	on line 9 4	49.	00		
Part-	year renters, complete lines 50 through	ı 56			i	
50.	Divide line 46 by the number of months y	vou rented		{	50.	00
51.	Multiply line 50 by 12 months				51.	00
52.	Multiply line 51 by 23% (0.23). Service fe	e housing residents use 10% (0.10) (se	e instruct	ions)	52.	00
53.	Divide line 52 by line 48 to get your taxab	ble value. Enter here and on line 9		{	53.	00
54.	Percent of tax relief. Divide line 8 by line	53 (not to exceed 100%)		{	54.	%
55.	Multiply line 47 by line 54				55.	00

56.	Add lines 44 and 55. Enter here and on line 12.	56.	

00

DIRECT DEPOSIT Deposit your refund directly to your financial		a. Routing Transit Number		b. Account Number		c. Type of Account			
institution! See instructions and complete a, b and c.						1. Checking	2. Savings		
	Taxpayer. If Filer and/or Spouse E OF DEATH ONLY. Example: 04			dates below.		ion. I declare under penalty of perjury that information of which I have any knowledge.			
Filer		Spouse -	· _		Preparer's PTIN, FEIN or SSN				
Taxpayer Certification. I declare under penalty of perjury that the informand attachments is true and complete to the best of my knowledge.			information ir	n this return	Preparer's Name (print or	type)			
Filer's Signature			Date		Preparer's Signature				
Spouse's Sigr	Date		Preparer's Business Name, Address and Telephone Number						
By checking this box, I authorize Treasury to discuss my return with my prepare									

If you are also filing Form MI-1040, include this form behind it. If not, mail this form to: Michigan Department of Treasury, Lansing, MI 48956