



YOUR SOCIAL SECURITY NUMBER			SPOUSE'S SOCIAL SECURITY NUMBER			DATE(S) OF BIRTH
FIRST NAME(S) AND INITIAL(S)			LAST NAME			TELEPHONE HOME ( ) WORK ( )
(STREET OR RURAL ROUTE) DO NOT USE P.O. BOX						Your Occupation
CITY, TOWN OR POST OFFICE		STATE	POSTAL ZIP CODE		Spouse's Occupation	

FILING STATUS:  
RESIDENT FROM \_\_\_\_ TO \_\_\_\_

SINGLE  JOINT

EMPLOYERS NAME & LOCAL ADDRESS

\_\_\_\_\_

\_\_\_\_\_

EXEMPTIONS:  
Children are allowed their own exemption even if being claimed on parents return:

- a.  YOURSELF  65 & Over  SPOUSE  65 & Over  
b.  Blind  Paralegic  Blind  Paralegic

Did you file a 2019 City Return? .....  
 Yes  No  
If yes, are the Name(s) and Address the same?  
 Yes  No  
If no, list name and address used on previous return: .....

Dependents Name (first, initial, and last name)	Check if under age 2	If age 2 or over dependent's social security number	Relationship	No. of months in your home

NO. OF BOXES CHECKED ON a AND b

NO. OF OTHER DEPENDENTS LISTED ON c

TOTAL EXEMPTIONS ADD NUMBERS ENTERED ON BOXES ABOVE

DO NOT ROUND  
DROP CENTS

W-2'S HERE

ATTACH CHECK HERE

- 1A. TOTAL INCOME: (all W2's Schedules and / or documents to substantiate totals must be attached in order to process return)  
RESIDENTS: enter total gross income for 2020. ....
- 1B. NONRESIDENTS: enter gross wages from W-2, or Schedule 1, page 2 .....  
(If you have no additions or subtractions, carry this amount to line 4)
2. ADDITIONS TO INCOME: (from page 2 Schedule 2R line C for Residents or 2NR line E for Non-Residents) 1120-S income is not taxable on individual return. ....
3. SUBTRACTIONS FROM INCOME (From page 2 schedule 2R line M for Residents/Schedule 2NR line I for Non-Residents) 1120-S loss not deductible on individual return. ....
- ATTACH ALL SCHEDULES AND EXPLANATIONS**
4. ADJUSTED INCOME (Add lines 1 and 2 less line 3.) .....
5. EXEMPTIONS: Multiply the number of exemptions claimed by \$600.00. ....
6. TAXABLE INCOME (line 4 less line 5) .....
7. TAX - Multiply amount on line 6 by one of the following:  
A. RESIDENT ONLY - 1% (.01) .....  
B. NONRESIDENT ONLY - 1/2% (.005). ....  
C. PART-YEAR RESIDENT - Tax from Schedule 4, line M. ....

1A.	00
1B.	00
2.	00
3.	00
4.	00
5.	00
6.	00
7.	00
	00
12.	00
13A.	00
13B.	00
13C.	00
14.	00
15.	00

PAYMENTS AND TAX CREDITS: **ATTACH COPIES OF W2'S**

8. Jackson tax withheld (You must attach copies of all W2's to obtain credit for withholding.)  00
9. 2020 Estimate payments (including carry forward credit from 2018 J-1040) .....  00
10. Credits for income tax paid to another Michigan municipality (Residents Only) or by a partnership. \*Attach copy of other municipalities return.  00
11. TOTAL PAYMENTS AND CREDITS (Add lines 8, 9 and 10.) .....  
(Make checks payable to City Treasurer.) (No payment necessary if less than \$1.00)
12. BALANCE DUE: (line 7 larger than line 11.) ..... **PAY WITH RETURN**  
Direct Deposit- Routing Number   Checking  Savings
13. A. REFUND: (line 11 larger than 7.) Account Number  **REFUND CREDIT**  
..... refunds will not be made for less than \$1.00
13. B. Credit to 2021 Estimated tax .....
13. C. Donate your refund to the City Parks and Recreation Fund .....
14. Interest and penalty, will be assessed, after April 30th .....
15. TOTAL AMOUNT DUE add lines 12 & 14 (Do not enter refunds) .....

I declare that I have examined this return (including accompanying schedules and statements) and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, his declaration is based on all information of which he has any knowledge.

SIGN HERE ..... (Taxpayer's signature and date)

SIGN HERE ..... (Spouse's signature and date)

..... (Signature of preparer other than taxpayer and date)

..... (Address) ..... (Telephone)

MAKE CHECKS PAYABLE TO: TREASURER, CITY OF JACKSON  
MAIL RETURNS TO: CITY INCOME TAX DIVISION, 161 W. MICHIGAN AVE., JACKSON, MI 49201  
DUE ON OR BEFORE APRIL 30TH.

# J 1040

## SCHEDULE 1

DO NOT USE THIS SCHEDULE IF ALL OF YOUR WORK IS PERFORMED IN JACKSON

### NON-RESIDENTS ONLY

**COMPUTATION OF WAGES EARNED IN JACKSON** - To be completed by Non-Residents who performed only part of their job in Jackson and part outside on same job. Where husband and wife have income subject to allocation, figure separately. **Send in supporting documents or work calendar for verification. Working at home counts as a day in the city. Do not subtract out.**

A. Actual number of days worked everywhere 260 maximum.....	A.		Days
B. Subtract sick days, vacation days, holidays and other paid leave days.....	B.		Days
C. Total number of days worked.....	C.		Days
D. Actual number of days worked on job in Jackson (Attach Statement).....	D.		Days
E. Percent of days worked in Jackson to total days (line D divided by line C).....	E.		%
F. Wages shown on W-2 (Less allowable employee expenses per attached 2106) Subject to 2% Federal Limit.....	F.	\$	
G. Line F multiplied by line E.....	G.	\$	
H. Add all other W-2 income not allocated.....	H.	\$	
I. TOTAL WAGES - subject to Jackson City Tax (line G and H) Enter on page 1, line 1B.....	I.	\$	

### SCHEDULE 2R

#### RESIDENTS (See instructions)

ADDITIONS TO INCOME	A. Loss on sale of property portion prior to 1/1/70 (included in line 1 - total income).....	A.		
	B. Other - explain and attach schedules.....	B.		
	C. Total Additions - enter here and on page 1, line 2.....	C.		
SUBTRACTIONS FROM INCOME ONLY IF INCLUDED IN LINE 1	D. Gain on sale of property - portion prior to 1/1/70 (included in line 1 - total income).....	D.		
	E. Interest on U.S. and State obligations.....	E.		
	F. Annuities, pensions, and insurance proceeds.....	F.		
	G. Compensation from services in U.S. Armed Forces.....	G.		
	H. IRA Payments as allowed on Federal 1040 (attach copy of Federal return).....	H.		
	I. Unemployment benefits.....	I.		
	J. Moving expense (active military only).....	J.		
	K. Employees Business Expenses (subject to 2% Federal limit) (attach copy of Federal Form 2106).....	K.		
L. Total Subtractions - enter here and on page 1, line 3.....	L.			

### SCHEDULE 2NR

#### NON-RESIDENTS (See instructions)

ADDITIONS TO INCOME	A. Net profits from Jackson rental property (Attach Schedule E).....	A.		
	B. Net profits from sale of property located in Jackson.....	B.		
	C. Net profits of a business or profession earned in Jackson (attach schedule C).....	C.		
	D. Other - explain (attach schedule).....	D.		
	E. Total Additions - enter here and on page 1, line 2.....	E.		
SUBTRACTIONS FROM INCOME IF INCLUDED IN LINE 1	F. Employees business expenses incurred in the production of Jackson Income. (if not deducted in schedule 1) (include Federal Form 2106) subject to 2% Federal Limit.....	F.		
	G. IRA Payments as allowed on Federal 1040 and in proportion to income taxed by city (attach copy of Federal return).....	G.		
	H. Other - explain (attach schedule).....	H.		
	I. Total Subtractions - enter here and on page 1, line 3.....	I.		