Taxpayer's name

Taxpayer's SSN

2023 BIG RAPIDS

SCHEDULE TC, PART-YEAR RESIDENT TAX CALCULATION - CF-1040, PAGE 1, LINES 23a AND 23b

Attachment 1

SCHEDULE TC, PART-YEAR RESIDENT TAX CALCULATION - CF-1040, PAGE 1, LINES 23a AND 23b Attachment 1 A part-year resident is required to complete and attach this schedule along with a copy of deed/lease agreement to the city return:

- 1. Box A to report dates of residency of the taxpayer and spouse during the tax year
- 2. Box B to report the former address of the taxpayer and spouse
- 3. Column A to report all income from their federal income tax return
- 4. Column B to report all income taxable on their federal return that is not taxable to the city
- 5. Column C to report income taxable as a resident and compute tax due on this income at the resident tax rate

6. Column D to report income taxable as						
A. PART-YEAR RESIDENCY PERIOD	PART-YEAR RESIDENCY PERIOD From To B. PART-YEAR RESIDENT'S FORMER ADDRESS					
Taxpayer			Taxpayer			
Spouse			Spouse			
INCOME	Column Federal Retu	l I	Column B Exclusions and Adjustme	ents	Column C Taxable Resident Income	Column D Taxable Nonresident Income
Wages, salaries, tips, etc. (Attach Form(s) W-2)		.00		.00	.00	.00
2. Taxable interest 2		.00		.00	.00	NOT TAXABLE
Ordinary dividends		.00		.00	.00	NOT TAXABLE
Taxable refunds, credits or offsets 4		.00		.00	NOT APPLICABLE	NOT TAXABLE
5. Alimony received 5				.00	.00	.00
6. Business income or (loss) (Att. copy of fed. Sch. C) 6		.00		.00	.00	.00
7. Capital gain or (loss) 7a Mark if Sch. D not 7b (Att. copy of Sch. D) 7a required		.00		.00	.00	.00
8. Other gains or (losses) (Att. copy of Form 4797) 8		.00		.00	.00	.00
Taxable IRA distributions 9		.00		.00	.00	.00
10. Taxable pensions and annuities (Att. Form 1099-R) 10		.00		.00	.00	.00
11. Rental real estate, royalties, partnerships, S corps., trusts, etc. (Attach copy of fed. Sch. E)		.00		.00	.00	.00
12. Subchapter S corporation distributions (Attach copy of federal. Schedule K-1)	NOT APPLI	CABLE		.00	.00	.00
13. Farm income or (loss) (Att. copy of fed. Sch. F) 13		.00		.00	.00	.00
14. Unemployment compensation 14		.00		.00	NOT APPLICABLE	NOT TAXABLE
15. Social security benefits 15		.00		.00	NOT APPLICABLE	NOT TAXABLE
16. Other income (Att. statement listing type and amt) 16		.00		.00	.00	.00
17. Total additions (Add lines 2 through 16) 17		.00		.00	.00	.00
18. Total income (Add lines 1 through 16) 18		.00		.00	.00	.00
DEDUCTIONS SCHEDULE See instructions	s. Deductions must b	oe allocated on t	ne same basis as related in	come.		
IRA deduction (Attach copy of Schedule 1 of federal return & evidence of payment) 1		.00		.00	.00	.00
Self-employed SEP, SIMPLE and qualified 2. plans (Attach copy of Schedule 1 of fed. 2 return)		.00		.00	.00	.00
3. Employee business expenses (Attached BR- 2106 and detailed list)					.00	.00
Moving expenses (Into city area only) (Attach copy of federal Form 3903)		.00		.00	.00	.00
Alimony paid (DO NOT INCLUDE CHILD SUPPORT. (Att. copy of page 1 of fed. return)		.00		.00	.00	.00
Renaissance Zone deduction (Att. Sch. RZ) 6					.00	.00
19. Total deductions (Add lines 1 through 6)				19	.00	.00
20a. Total income after deductions (Subtract line 19 fro	m line 18)			20a	.00	.00
20b. Losses transferred between columns C and D (If line 2	0a is a loss in either	column C or D, s	ee instructions)	20b	.00	.00
20c. Total income after adjustment (Line 20a less line 20b)					.00	.00
21. Exemptions (Enter the number of exemptions from Formand multiply by the value of an exemption	n, and enter on line 2	1b)		21b	.00.	
(If the amount on line 21b exceeds the amount of resident income on line 20c, enter unused portion (line 20b less line 20c) on line 21c) 21c .00						
22a. Total income subject to tax as a resident (Subtract line 21b from line 20c; if zero or less, enter zero) 22a					.00	
22b. Total income subject to tax as a nonresident (Subtract line 21c from line 20c; if zero or less, enter zero)						.00
23a. Tax at resident rate (1%) (MULTIPLY LINE 22a BY RESIDENT TAX RATE)				23a	.00	
23b. Tax at nonresident rate (1/2%) (MULTIPLY LINE	22b BY NONRESID	ENT TAX RATE	E)	23b		.00
23b. Tax at nonresident rate (1/2%) (MULTIPLY LINE 22b BY NONRESIDENT TAX RATE) 23c. Total tax (Add lines 23a and 23b) (ENTER HERE AND ON FORM BR-1040, PAGE 1, LINE 23b, AND PLACE A MARK (X) IN BOX 23a OF FORM BR-1040)					.00	

Taxpayer's name		Taxpayer's SSN		2023 BIC	RAPIDS	
WAGES AND EXCLUDIBLE WA	AGES SCHEDU	LE - BR-1040, PA	AGE 1, LINE	1, COLUMN E	3	Attachment 2-1
All W-2 forms must be attache		· · · · · · · · · · · · · · · · · · ·	·	•		Revised 1/09/2024
Use this form to provide details for all Forms W-2 employee for which you did not receive a W-2; ti reported on Form W-2; disability pensions show shown on Form 1099-R from excess salary defer Use this form to calculate excludible (nontaxable	ps reported on federal Form on Form 1099-R if the frals and/or excess contrely wages included in total	orm 4137; taxable depend axpayer has not reached ibutions (plus earnings); v wages reported on your f	lent care benefits the minimum retin vages from Form dederal tax return	employer-provided ad ement age set by the e 3919, line 6; and other (Forms 1040, line 7; 10	option benefits; scholar mployer; corrective dis wage items not include 40A; line 7; or 1040EZ	rship and fellowship grants not tributions from a retirement plan d in a Form W-2. , line 1). Excludible wages for each
employer are also reported on Form BR-1040, pa						
WAGES, ETC. 1. Employer's ID number (W-2, box b) or	Employer (or source) 1	Emp	loyer (or source) 2	<u>'</u>	Employer (or source) 3
source's ID Number if available						
Employer's name (Form W-2, box c) or source's name						
3. SSN from Form W-2, box a						
4. Enter T for taxpayer or S for spouse						
Dates of employment during tax year	From	То	From	То	From	То
Mark (X) box If you work at multiple locations in and out of BIG RAPIDS						
7. Address of work station (Where you actually work, not address on Form W-2 unless you work there: include street number and street name, city, state and ZIP code; if line 6 is checked enter primary work location)						
Wages, tips, other compensation (Form W-2, Box 1); report statutory employee wages as zero						
Wages not included in Form W-2, box 1 (See instructions)						
10. Code for wage type reported on line 9						
NONRESIDENT WAGE ALLOCATION	Employer (or source) 1	Emp	loyer (or source) 2	2	Employer (or source) 3
For use by nonresidents or part-year reside while a nonresident must use the wage allow Nonresidents working all of their work time to the second sec	cation to determine wa	ages earned in city while	e a nonresident	(use only wages and	I days worked while a	nonresident for computations.)
Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work)						•
Vacation, holiday and sick days or hours included in line 11, only if work performed in and outside the city						
13. Actual number of days or hours worked (Line 11 less line 12)						
14. Enter actual number of days or hours worked in city						
15. Percentage of days or hours worked in city (Line 14 divided by line 13; default is 100%)		%			%	%
16. Wages earned in city (Total of lines 8 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident)						
EXCLUDIBLE WAGES	Employer (or source) 1	Emp	loyer (or source) 2		Employer (or source) 3
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)	1,7	,		, , ,		1 7 () / -
18. Enter resident excludible wages						
Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by BIG RAPIDS						
Total excludible wages (Line 17 plus line 18; Enter here and on BR-1040, page 2, Excluded Wages schedule)						
21. Total taxable wages (Line 8 plus line 9 less line 20)						
Total wages (Add lines 8 and 9 for all emplo amount reported on Form BR-1040, page 1, must equal amount reported on Schedule To	line 1, column A; Part-ye					
 Total excludible wages from all employers a Form BR-1040, page 1, line 1, column B; pa 	nd other sources (Add lin			n		

24. Total taxable wages from all employers and other sources (Line 22 less line 23); enter here and also on Form BR-1040, page 1, line 1, column C; part-year residents enter here and allocate on Schedule TC, line 1, between columns C and D)

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WAGES AND EXCLUDIBLE WAGE	ES SCHEDULE - BR-1040	. PAGE 1. LI	NE 1. COLUMN B	<u> </u>	Attachment 2-2
All W-2 forms must be attached to		, ,			Revised 1/09/2024
Use this form to provide details for all Forms W-2 and employee for which you did not receive a W-2; tips re reported on Form W-2; disability pensions shown on I shown on Form 1099-R from excess salary deferrals	all other wage income reported on fede ported on federal Form 4137; taxable de Form 1099-R if the taxpayer has not rea	ependent care beneath	efits; employer-provided adoption ber retirement age set by the employer; of	nefits; scholarship and fel corrective distributions fro	llowship grants not om a retirement plan
Use this form to calculate excludible (nontaxable) wag employer are also reported on Form BR-1040, page 2	ges included in total wages reported on the control of the control	your federal tax ret	urn (Forms 1040, line 7; 1040A; line al amount of excludible wages is rep	7; or 1040EZ, line 1). Exc orted on Form BR-1040,	cludible wages for each page 1, line 1, column B.
WAGES, ETC.	Employer (or source) 4		mployer (or source) 5		(or source) 6
Employer's ID number (W-2, box b) or source's ID Number if available	. , , ,				,
Employer's name (Form W-2, box c) or source's name					
3. SSN from Form W-2, box a					
4. Enter T for taxpayer or S for spouse					
Dates of employment during tax year From	То	From	То	From	То
Mark (X) box If you work at multiple locations in and out of BIG RAPIDS					
7. Address of work station (Where you actually work, not address on Form W-2 unless you work there: include street number and street name, city, state and ZIP code; if line 6 is checked enter primary work location)					
Wages, tips, other compensation (Form W-2, Box 1); report statutory employee wages as zero					
9. Wages not included in Form W-2, box 1 (See instructions)					
10. Code for wage type reported on line 9					
NONRESIDENT WAGE ALLOCATION	Employer (or source) 4	E	mployer (or source) 5	Employer	(or source) 6
For use by nonresidents or part-year residents v while a nonresident must use the wage allocatio Nonresidents working all of their work time for all	n to determine wages earned in city	while a nonresid	ent (use only wages and days wo	orked while a nonreside	ent for computations.)
Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work)					
Vacation, holiday and sick days or hours included in line 11, only if work performed in and outside the city					
13. Actual number of days or hours worked (Line 11 less line 12)					
14. Enter actual number of days or hours worked in city					
15. Percentage of days or hours worked in city (Line 14 divided by line 13; default is 100%)		%	%)	%
16. Wages earned in city (Total of lines 8 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident)					
EXCLUDIBLE WAGES	Employer (or source) 4	E	mployer (or source) 5	Employer	(or source) 6
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)					
18. Enter resident excludible wages					
Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by BIG RAPIDS					
Total excludible wages (Line 17 plus line 18; Enter here and on BR-1040, page 2, Excluded Wages schedule)					
21. Total taxable wages (Line 8 plus line 9 less line 20)					

Taxpayer's name

FAILURE TO ATTACH ALL FORMS W-2 OR PROPERLY COMPLETE AND ATTACH THIS SCHEDULE WILL DELAY PROCESSING OF RETURN.

Taxpayer's name		Taxpayers SSN	2023 BIG RAP	IDS	
WAGES AND EXCLUDIBLE W	AGES SCHEDULE -	BR-1040. PAGE 1.	LINE 1. COLUMN B		Attachment 2-3
All W-2 forms must be attached			,		Revised 1/09/2024
Use this form to provide details for all Forms W- employee for which you did not receive a W-2; t reported on Form W-2; disability pensions show shown on Form 1099-R from excess salary defe Use this form to calculate excludible (nontaxable employer are also reported on Form BR-1040, p	2 and all other wage income rep ips reported on federal Form 41; in on Form 1099-R if the taxpaye errals and/or excess contributions	orted on federal Forms 1040 37; taxable dependent care b or has not reached the minim or (plus earnings); wages from	enefits; employer-provided adoption benoum retirement age set by the employer; on Form 8919, line 6; and other wage items	efits; scholarship and f orrective distributions f s not included in a Forr	fellowship grants not from a retirement plan m W-2.
WAGES, ETC. 1. Employer's ID number (W-2, box b) or source's ID Number if available	Employer (or sou	irce) /	Employer (or source) 8	Employe	er (or source) 9
Employer's name (Form W-2, box c) or source's name					
3. SSN from Form W-2, box a					
4. Enter T for taxpayer or S for spouse					
5. Dates of employment during tax year	From To	From	То	From	То
Mark (X) box If you work at multiple locations in and out of BIG RAPIDS					
7. Address of work station (Where you actually work, not address on Form W-2 unless you work there: include street number and street name, city, state and ZIP code; if line 6 is checked enter primary work location)					
Wages, tips, other compensation (Form W-2, Box 1); report statutory employee wages as zero					
Wages not included in Form W-2, box 1 (See instructions)					
10. Code for wage type reported on line 9					
NONRESIDENT WAGE ALLOCATION	Employer (or sou	ırce) 7	Employer (or source) 8	Employe	er (or source) 9
For use by nonresidents or part-vear reside while a nonresident must use the wage allo Nonresidents working all of their work time 11. Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work) 12. Vacation, holiday and sick days or hours included in line 11, only if work performed	cation to determine wages ea	arned in city while a nonre	sident (use only wages and days wor	ked while a nonresid	dent for computations.)
in and outside the city 13. Actual number of days or hours worked (Line 11 less line 12)					
Enter actual number of days or hours worked in city					
15. Percentage of days or hours worked in city (Line 14 divided by line 13; default is 100%)		%	%		%
16. Wages earned in city (Total of lines 8 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident)					
EXCLUDIBLE WAGES	Employer (or sou	ırce) 7	Employer (or source) 8	Employe	er (or source) 9
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)					
18. Enter resident excludible wages					
 Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by BIG RAPIDS 					
Total excludible wages (Line 17 plus line 18; Enter here and on BR-1040, page 2, Excluded Wages schedule)					
21. Total taxable wages (Line 8 plus line 9					

Taxpayer's name

FAILURE TO ATTACH ALL FORMS W-2 OR PROPERLY COMPLETE AND ATTACH THIS SCHEDULE WILL DELAY PROCESSING OF RETURN.

Taxpayer's name		Taxpayers SSN	2023 BIG RA	APIDS	
WAGES AND EXCLUDIBLE W	AGES SCHEDULE -	BR-1040, PAGE 1	, LINE 1, COLUMN B	<u> </u>	Attachment 2-4
All W-2 forms must be attached		•	,		Revised 1/09/2024
Use this form to provide details for all Forms W- employee for which you did not receive a W-2; t reported on Form W-2; disability pensions show shown on Form 1099-R from excess salary defe Use this form to calculate excludible (nontaxable employer are also reported on Form BR-1040, p	ips reported on federal Form 413 on Form 1099-R if the taxpayer orrals and/or excess contributions	37; taxable dependent care or has not reached the mining (plus earnings); wages fro	benefits; employer-provided adoption num retirement age set by the employe m Form 8919, line 6; and other wage it	benefits; scholarship a er; corrective distributio ems not included in a l	nd fellowship grants not ns from a retirement plan Form W-2.
Employer's ID number (W-2, box b) or source's ID Number if available	Employer (or sou	rce) 10	Employer (or source) 11	Empio	yer (or source) 12
Employer's name (Form W-2, box c) or source's name					
3. SSN from Form W-2, box a					
4. Enter T for taxpayer or S for spouse					
5. Dates of employment during tax year	From To	From	То	From	То
Mark (X) box If you work at multiple locations in and out of BIG RAPIDS					
 Address of work station (Where you actually work, not address on Form W-2 unless you work there: include street number and street name, city, state and ZIP code; if line 6 is checked enter primary work location) 					
Wages, tips, other compensation (Form W-2, Box 1); report statutory employee wages as zero					
Wages not included in Form W-2, box 1 (See instructions)					
10. Code for wage type reported on line 9					
NONRESIDENT WAGE ALLOCATION	Employer (or sou	rce) 10	Employer (or source) 11	Emplo	yer (or source) 12
For use by nonresidents or part-vear reside while a nonresident must use the wage allo Nonresidents working all of their work time 11. Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work)	cation to determine wages ea	arned in city while a nonr	esident (use only wages and days	worked while a nonre	esident for computations.)
 Vacation, holiday and sick days or hours included in line 11, only if work performed in and outside the city 					
13. Actual number of days or hours worked (Line 11 less line 12)					
14. Enter actual number of days or hours worked in city					
15. Percentage of days or hours worked in city (Line 14 divided by line 13; default is 100%)		%		%	%
Wages earned in city (Total of lines 8 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident)					
EXCLUDIBLE WAGES	Employer (or sou	rce) 10	Employer (or source) 11	Emplo	yer (or source) 12
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)					
18. Enter resident excludible wages					
Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by BIG RAPIDS					
 Total excludible wages (Line 17 plus line 18; Enter here and on BR-1040, page 2, Excluded Wages schedule) 					
21. Total taxable wages (Line 8 plus line 9					

Taxpayer's name

FAILURE TO ATTACH ALL FORMS W-2 OR PROPERLY COMPLETE AND ATTACH THIS SCHEDULE WILL DELAY PROCESSING OF RETURN.

-	Taxpayer's SSN			
Taxpayer's name	RAPIDS			
EXCLUDIBLE INTEREST INCOME - BR-104	40, PAGE 1, LINE 2, COL	UMN B	•	Attachment 3
Nonbusiness interest income of a nonresider	nt individual is totally exclu	ıded		Revised 1/09/2024
Interest from federal obligations	.00			
2. Interest from Subchapter S corporations; not excludible for resi	idents of Flint and Grand Rapids (Attac	ch Schedule K-1)		.00
3. Other excludible interest income (Attach detailed explanation)				.00
4. Excludible interest income (Add lines 1, 2 and 3; enter total her	re and on page 1, line 2, column B; pa	rt-year residents see line 5)		.00
5. Part-year residents enter total from line 4 plus total interest red	eived while a nonresident on Schedule	e TC, line 2, column B (Lines 1, 2 a	and 3 should report only interes	t received while a resident)
EXCLUDIBLE DIVIDEND INCOME - BR-104	0, PAGE 1, LINE 3, COL	UMN B		Attachment 4
Dividend income of a nonresident individual i	s totally excluded			Revised 1/09/2024
Dividends from federal obligations				.00
2. Dividends from Subchapter S corporations; not excludible for re	esidents of Flint and Grand Rapids (Al	ttach Schedule K-1)		.00
3. Other excludible dividend income (Attach detailed explanation))			.00
4. Excludible dividend income (Add lines 1, 2 and 3; enter total he	ere and on page 1, line 3, column B; p:	art-year residents see line 5)		.00
5. Part-year residents enter total from line 4 plus total dividends r	eceived while a nonresident on Sched	ule TC, line 2, col. B (Lines 1, 2 an	nd 3 should report only dividend	s received while a resident)
EXCLUSIONS AND ADJUSTMENTS TO BU	SINESS INCOME OR (LO	OSS) - BR-1040, PAGE	1, LINE 6, COLUMI	N B Attachment 5
Nonresidents and part-year residents use this		-		
Schedule C that is from business activity outs	-		,	
Attach a copy of each Federal Schedule C.	•			
Attach a separate Business Allocation Formula calcula	ation for each separate federal	Schedule C if allocating inc	come of a business.	
Note: In determining the average percentage, if a fac				
Note: If you are authorized to use a special formula, a		tor's approval letter and atta	ach a schedule detailing o	calculation.
Note: Net operating loss from prior year is reported o BUSINESS INCOME	n Line 16, Other income.		BUSINESS # 1	BUSINESS # 2
Net profit (or loss) from business or profession			.00	.00
Business allocation percentage (For each separate business of Allocation Formula below and enter it here)	ompute the business allocation percer	tage using the Business	%	%
3. Allocated net profit (loss) (For each column, multiply line 1 by I	ine 2)		.00	.00
4. Excludible net profit (loss) (For each column, subtract line 3 from	om line 1)		.00	.00
5. Total excludible net profit (loss) (Add amounts on line 4 of each Schedule TC, line 6, column B)	h column; enter here and on Form BR-	1040, page 1, line 6, column B, or	for part-year residents, on	00
BUSINESS # 1 DBA				
BUSINESS ALLOCATION FORMULA WORKSHEET		COLUMN 1	COLUMN 2	COLUMN 3
BOSINESS ALEGOATION I ONWOLA WORKSHEET		EVERYWHERE	IN BIG RAPIDS	PERCENTAGE
1. Average net book value of real and tangible personal property		.00	.00	(Column 2 divided
Gross rents paid on real property multiplied by 8		.00	.00	by column 1)
3. Total property		.00	.00	%
4. Total wages, salaries and other compensation of all employees	s	.00	.00	%
Gross receipts from sales made or services rendered		.00	.00	%
6. Total percentages (Add the percentages computed in column	3)			%
7. Business allocation percentage (Divide line 6 by the number of				%
Dustrices unescaled percentage (211146 mile of 2) and manager of	арронаонноги паского ассау			70
BUSINESS # 2 DBA				
BOONVEOU # 2 BB/V	1	COLUMN 1	COLUMN 2	COLUMN 3
BUSINESS ALLOCATION FORMULA WORKSHEET		EVERYWHERE	IN BIG RAPIDS	PERCENTAGE
1 Avenue not book value of molton days the state of the s			.00	
Average net book value of real and tangible personal property .00				(Column 2 divided by column 1)
Gross rents paid on real property multiplied by 8		.00	.00	
3. Total property		.00	.00	%
Total wages, salaries and other compensation of all employees	ŝ	.00	.00	%
Gross receipts from sales made or services rendered		.00	.00	%

6. Total percentages (Add the percentages computed in column 3)

7. Business allocation percentage (Divide line 6 by the number of apportionment factors used)

Taxpayer's name	Taxpayer's SSN	2023 BIG	RAPIDS	
EXCLUSIONS AND ADJUSTMENTS TO CAP	PITAL GAIN OR (LOSS) -	BR-1040, PAGE 1	, LINE 7, COLUMN	B Attachment 6
Residents, nonresidents and part-year resident	ts use this schedule to rep	ort exclusions	RESIDENT	NONRESIDENT
and adjustments to capital gains or (losses)			COLUMN	COLUMN
Capital gain or (loss) on property located outside of city			NOT EXCLUDIBLE	.00
Capital gain or (loss) on securities issued by U.S. Government			.0	0 EXCLUDIBLE ON LINE 1
Portion of capital gain or (loss) from property owned prior to Ordin nonresidents only on property located in city.) (Attach a schedule	nance inception (For residents on all s that identifies and shows the calculati	uch property; for on for each.)	.0	.00
4. Capital gain or (loss) from Sub. S corporations (See instructions; (Attach schedule.)	not allowed for residents of Flint or Gr	and Rapids.)	.0	.00
Adjustment for capital loss carryover from period prior to residence carryover from property sold prior to their date of residency.)	cy (A resident is not allowed to claim a	capital loss	.0	NO ADJUSTMENT ALLOWED
Adjustment for difference between federal and city's capital loss of usually different from the amount reported on federal return; an advantage of the control of the	carryover from prior year (The city's ca djustment must be made for this differ	pital loss carryover is ence.)	.0	.00
7. Adjustment to limit capital loss to \$3,000 for tax year			.0	.00
8. Total exclusions and adjustments to capital gains or (losses) (Ent for part-year residents, enter on Schedule TC, line 7, column B)	ter total here and on Form BR-1040, p	age 1, line 7, column B, or	.0	00
Attach copy of federal Schedule D and all supporting schedules to retu		•		•
Deferred gains from sales of property located in city or property sold w	hile a resident of city are taxable when	reported on federal return.		Revised 1/09/2024

EXCLUSIONS AND ADJUSTMENTS TO OTHER GAINS OR (LOSSES) - BR-1040, PAGE 1, LINE 8, COLUMN B Attachment							
Residents, nonresidents and part-year residents use this schedule to report exclusions and adjustments to other gains or (losses)	RESIDENT COLUMN	NONRESIDENT COLUMN					
Other gains or (losses) on property located outside of city	NOT EXCLUDIBLE	.00					
2. Portion of other gains or (losses) from property owned prior to effective date of tax for city (For residents on all such property; for nonresidents only on property located in city.) (Attach a schedule that identifies and shows the calculation for each.)	.00	.00					
3. Other gains or (losses) from Sub. S corporations (See instructions; not allowed for residents of Flint or Grand Rapids.)	.00	.00					
4. Total excludible other gains and losses (Enter total here and on Form BR-1040, page 1, line 8, column B, or for part-year residents, enter on Schedule TC, line 8, column B)	.00	00					
Deferred gains from sales of property located in city or property sold while a resident of city are taxable when reported on federal return.							
Attach a copy of federal Form 4797 and all supporting schedules to return to explain.		Revised 1/09/2024					

EXCLU	XCLUSIONS AND ADJUSTMENTS TO IRA DISTRIBUTIONS - BR-1040, PAGE 1, LINE 9, COLUMN B Attachment 8						
List all	IRA distributions	reported as taxable on federal return			Revised 1/09/2024		
for taxpayer or S for spouse	Payer's federal ID Number	Payer's name	Federally taxable IRA distributions	Distribution Code (Form 1099-R, box 7)	Excludible IRA distributions		
1.			.00		.00		
2.			.00		.00		
3.			.00		.00		
4.			.00		.00		
	5. Total federally taxable IRA distributions (Add lines1 through 4 above for this column; amount should equal the amount reported on Form BR-1040, page 1, line 9, column A)						
6. Total	6. Total excludible IRA distributions (Add lines above for this column; enter here and also on Form BR-1040 (for part-year residents, Sch. TC), page 1, line 9, col. B)						

		JUSTMENTS TO PENSIONS AND ANNU s reported as taxable on federal return	111E3 - BK-10	J40, PAGE I, LINE I	U, COLUMI	Attachment 9 Revised 1/09/2024
Enter T for taxpayer or S for spouse	Payer's federal ID Number	Payer's name	Kind of pension distribution (employer's pension plan, 401k plan, 457 plan, etc.)	Federally taxable pension distributions	Distribution Code (Form 1099-R, box 7)	Excludible pension distributions
1.				.00		.00
2.				.00		.00.
3.				.00		.00
4.				.00		.00
		distributions (Add lines 1 through 4 above for this column; amou 3R-1040, page 1, line 10, column A)	unt should equal	.00		
6. Total	excludible pension distrib	outions (Add lines above for this column; enter here and also on	Form BR-1040 (for pa	art-year residents, Sch. TC), p.	1, I. 10, col. B)	.00

Taxpayer's name	Taxpayer's SSN	2023 BIG					
EXCLUSIONS AND ADJUSTMENTS TO INCOME FROM RENTAL REAL ESTATE, ROYALTIES, PARTNERSHIPS, S CORPORATIONS, TRUSTS, ETC BR-1040, PAGE 1, LINE 11, COLUMN B							
	Residents, nonresidents and part-year residents use this schedule to report exclusions and adjustments to income from rental real estate, royalties, partnerships, S corporations, estates, trusts, REMIC's and farm rentals.						
Rental income (loss) from real estate located outside the City			NOT EXCLUDIBLE ON RESIDENT RETURN				
	2. Royalties (A resident may exclude only royalty income upon which Michigan severance tax was paid; a nonresident may exclude royalty income upon which Michigan severance tax was paid and royalty income from sources outside the city)						
Partnership income (loss) from partnership business activity outside the control of the con	City		NOT EXCLUDIBLE ON RESIDENT RETURN				
Subchapter S corporation income (loss) (See instructions; not excludible	on Flint and Grand Rapids reside	ent returns.)	NOT EXCLUDIBLE ON RESIDENT RETURN	N .			
Estate or trust income or loss (Enter the total amount from federal Sched	ule E, line 37)		NOT EXCLUDIBLE ON RESIDENT RETURN				
Real estate mortgage investment conduits (REMIC's) income or loss and located outside the city	I net farm rental income or loss fr	om property	NOT EXCLUDIBLE ON RESIDENT RETURN				
Total adjustments to income from rental real estate, royalties, partnership 11, column B, or for part-year residents enter total of resident and nonres	os, trusts, etc. (Enter here and on ident columns on Schedule TC, I	From BR-1040, page 1, line ine 11, column B)		.00			
Attach a schedule detailing the complete address of each piece of rental real and Attach a schedule detailing name and ID number of each partnership and amount Attach a schedule detailing name and ID number of each Subchapter S Corpo Attach copy of federal Schedule E.	ount of adjustment.						
ADJUSTMENTS FOR TAX OPTION CORPORATION BR-1040, PAGE 1, LINE 12, COLUMN B	ON (LIKE SUBCHAP	TER S CORPORA	TION) DISTRIBUT	TIONS - Attachmen Revised 1/09/20			
Residents use this schedule to report distributions f		,	•	ns) taxable under the			
City Income Tax Ordinance; part-year residents rep	ort only distributions i	eceived while a res	sident				
CORPORATION NAME AND DBA			FEDERAL I.D. #	DISTRIBUTION RECEIVED			
1.							
2.							
3.							
4.							
Total tax option (Subchapter S) corporation distributions (Add lines 1 throener on Schedule TC, line 12, column B)	ugh 4; enter here and on Form B	R-1040, page 1, line 12, colu	mn B, or for part-year resid	lents .			
Complete above schedule or attach a separate schedule listing the name fede	ral ID number and amount of dis	tribution from each tax option	(Sub. S) corporation listed	on federal Sch. E, page 2.			
Attach a copy of each Schedule K-1 (1120-S) pages 1 and 2 to return.							
EXCLUSIONS AND ADJUSTMENTS TO FARM IN			LINE 13, COLUM				
Nonresidents use this schedule to exclude farm inc	ome from outside the	city		Revised 1/09/20			
Farm address							
FARM INCOME				FARM			
Net profit (or loss) from farm							
Farm allocation percentage							
Allocated net profit (or loss), multiply line 1 by line 2				ار			
Excludible net profit (or loss) (subtract line 3 from line 1; enter here and of the subtract line 3 from line 1; enter here and 0 from line 1; e	on Form BR-1040, page 1, line 1	3, column B)		-			
	3 7/1 3 7	,					
FARM ALLOCATION FORMULA		COLUMN 1 EVERYWHERE	COLUMN 2 IN BIG RAPIDS	COLUMN 3 PERCENTAGE			
Average net book value of real and tangible personal property		.00		0.0			
Average net book value of real and tanging personal property Gross rents paid on real property multiplied by 8		.00 (Column 2 divided by column 1)					
2. Gross rents paid on real property multiplied by 8 .00 3. Total property .00							
4. Total wages, salaries and other compensation of all employees .00 .00							
5. Gross receipts from sales made or services rendered .00 .00							
Total percentages (Add the percentages computed in column 3)							
7. Business allocation percentage (Divide line 6 by the number of apportionment factors used)							
ote: In determining the average percentage, if a factor does not exist, you must divide the total of the percentages by the number of factors used.							
Note: If you are authorized to use a special formula, attach a copy of the adm Note: Net operating loss from prior year is reported on Form BR-1040, line 16		ach a schedule detailing calc	ulation.				

Taxpayer's name	Taxpayer's SSN 2023 BIG I		RAPIDS						
EXCLUSIONS AND ADJUSTMENTS TO OTHER INCOME - BR-1040, PAGE 1, LINE 16, COLUMN B Attachment 13									
Residents and nonresidents use the	nis schedule to rep	ort exclusions and a	djustments to othe	r income	Revised 1/09/2024				
SOURCE OF INCOME	FEDERAL I.D. #	NATURE OF I	NCOME	RESIDENT COLUMN	NONRESIDENT COLUMN				
1.				.0	.00				
2.				.0	.00				
3.				.0	.00				
Total adjustments and exclusions to other incor 16, column B. Part-year residents enter totals of	.0	.00							
Attach an explanation of and calculation for any reported federal and city Net Operating Loss deduction. Attach an explanation for each item reported and excluded on the Other Income line. Add lines as needed.									

IRA DEDUCTION WORKSHEET - BR-1040, PAGE 2, DEDUCTIONS SCHEDULE - LINE 1

Attachment 14

RESIDENT: Claim 100% of the federal IRA deduction unless taxpayer or spouse has nontaxable earned income (military pay, etc.). If the taxpayer or spouse has nontaxable earned income, compute IRA deduction in the same manner as a nonresident using worksheet below.

NONRESIDENT: Use worksheet below to compute the city IRA deduction.

PART-YEAR RESIDENT: Compute the resident portion of the IRA deduction following the resident instructions and using the amount of earned income received while a resident and the portion of the federal IRA deductible contributions made while a resident; compute nonresident portion of the IRA deduction using the amount of earned income received while a nonresident and the portion of the federal IRA deductible contributions made while a nonresident; list amounts separately on worksheet and enter the resident and nonresident IRA deduction on Schedule TC, Deductions schedule, line 1.

Nonresidents and part-year residents claiming a city IRA deduction must attach this completed worksheet to their city return.

Revised 1/09/2024

							
	TAXP	AYER	SPO				
	COLUMN A EARNED INCOME TAXABLE BY BIG RAPIDS	COLUMN B EARNED INCOME NOT TAXABLE BY BIG RAPIDS	COLUMN C EARNED INCOME TAXABLE BY BIG RAPIDS	COLUMN D EARNED INCOME NOT TAXABLE BY BIG RAPIDS	COLUMN E TOTALS		
Earned income	.00	.00	.00	.00	.00		
2a.Federal IRA deduction	.00		.00		.00		
If part-year resident, enter portion 2b.of federal IRA deduction contributed while a resident	.00		.00		.00		
	TAXPAYER		SPOUSE	INSTRU	ICTIONS		
Percentage that the individual's 3. earned income taxable in city is to the individual's total earned income	%		%	Divide individual's earned incor column A) by individual's total e 1, column A plus column B).			
City IRA deduction based upon individual's earned income	.00		.00	Taxpayer's or spouse's federal multiplied by city earned income			
Amount individual's federal IRA 5. deduction exceeds individual's earned income taxable by city	.00		.00	Taxpayer's or spouse's federal the individual's earned income	taxable by city (line 1).		
Amount spouse's earned income 6. exceeds spouse's federal IRA deduction (excess earned income)	.00.		.00	Column A equals spouse's earn 1 of spouse's column C) less sp (line 2a of spouse's column C). earned income taxable by city (less taxpayer's federal IRA ded column A).	couse's federal IRA deduction Column C equals taxpayer's line 1 of taxpayer's column A)		
City IRA deduction based upon spouse's earned income	.00			If individual's (taxpayer or spou exceeds individual's earned inc income exceeds spouse's feder	ome and spouse's earned		
				the lesser of the individual's exc excess earned income multiplie income percentage (line 6), else	d by spouse's city earned		
8. City's IRA deduction	.00			Add individual's (taxpayer or sp upon their own city earned inco deduction based upon their spo	me (line 4) and their city IRA		
RESIDENT OR PART-YEAR RESID the total of the taxpayer's and spous 9. year resident, normally this is the tot columns A and C. If either the taxpay separately compute the resident IRA	e's city IRA deduction, line 2a of tal of the taxpayer's and spouse's yer or spouse has nontaxable ea a deduction in the same manner a	columns A and C. If a part- s city IRA deduction, line 2b of rned income while a resident, as a nonresident.		PART-YEAR RESIDENT: Enter Schedule TC, Deductions scher resident city IRA deduction in co city IRA deduction in column D;	dule, line 1, column A; enter the olumn C; enter the nonresident and enter in column B the		
NONRESIDENT: Total city nonresid 10. A) and spouse's (line 8, column C) of Deductions schedule, line 1) PART-	ity IRA deduction here and on Fo	orm BR-1040, page 2,	.00	difference of the amount in colu column C and column D.	IMN A less the amounts in		

Taxpaver's name	Taxpaver's SSN		I
	' '	2023 BIG RAPIDS	1

SELF-EMPLOYED, SEP, SIMPLE AND QUALIFIED PLANS DEDUCTION WORKSHEET - BR-1040, PAGE 2, DEDUCTIONS SCHEDULE, LINE 2

Attachment 15
Revised 1/09/2024

RESIDENT: No schedule required; a full year resident deducts amount reported on federal Form 1040, line 28.

NONRESIDENT: Nonresidents use the nonresident deduction column of this worksheet to calculate their deduction. A nonresident is required to attach a copy of this deduction schedule to their city return.

PART-YEAR RESIDENT: Part-year residents use a separate line to report the amount of deduction by related source of income as a resident or while a nonresident and indicate resident (R) or nonresident (N) relationship in front of the deduction by related source of income. The resident portion of the deduction is 100% of the related deduction. The nonresident deduction is related to the income earned in the city while a nonresident and is computed by entering the percentage the related income is taxable in the Percentage Related Income Is Taxable column and entering the product of multiplying the related deduction times the percentage and entering it in the Nonresident Deduction column.

RELATED SOURCE OF INCOME	FEIN (OR SSN) OF RELATED SOURCE OF INCOME	R OR N	FEDERAL DEDUCTION BY RELATED SOURCE OF INCOME	PERCENTAGE RELATED INCOME IS TAXABLE	RESIDENT DEDUCTION FOR A PART-YEAR RESIDENT	NONRESIDENT DEDUCTION
1.			.00	%	.00.	.00
2.			.00	%	.00	.00
3.			.00	%	.00	.00
4.			.00	%	.00	.00
Add lines 1 through 4 of each dollar column (Federal Deduction column should total amount reported on federal Form 1040, line 28)			.00		.00	.00

^{6.} Nonresidents enter total from nonresident deduction column on Form BR-1040, page 2, Deductions schedule, line 2. Part-year residents enter total from the part-year resident column on Schedule TC, Deductions schedule, line 2, column D

EMPLOYEE BUSINESS EXPENSE DEDUCTION WORKSHEET - BR-1040, PAGE 2, DEDUCTIONS SCHEDULE, LINE 3, Form BR-2106							
		Column 1 Employer 1	Column 2 Employer 2	Column 3 Employer 3	Column 4 Employer 4		
Employer's identification number (FEIN)							
2. Occupation (List for each employer)							
3. Vehicle expenses	.00	.00	.00	.00	.0		
Parking, fees, tolls and local transportation, including train, bus, etc.	.00	.00	.00	.00	.0		
Travel expenses while away from home overnight, 5. including, lodging, airfare, car rental, etc. Do not include meals and entertainment	.00	.00	.00	.00	.0		
Were you an outside salesperson? (Answer yes or no in 6. the column for each employer; see definition of outside salesperson below)							
Business expenses not included on lines 3, 4 or 5. Do not 7. include meals and entertainment (Enter these expenses only if an outside salesperson; see instruction below)	.00	.00	.00	.00	.0		
Meals (See meal expenses instruction below)	.00	.00	.00	.00	.0		
9. Total business expenses (Add lines 3, 4, 5, 7 and 8)	.00	.00	.00	.00	.0		
Enter reimbursements received from your employer for 10. expenses included in line 9 that were not reported to you in box 1 of Form W-2	.00	.00	.00	.00	.0		
11. Business expense deduction (Line 9 less line 10)		.00	.00	.00	.0		
12. Percentage deductible (Same percentage related wages are taxable)		%	%	%	9/		
13. Allowable business expense deduction (Line 11 times line 12)		.00	.00	.00	.0		
Total business expense deduction (Enter the total of line 14. 13, columns 2 through 5 here and also on Form BR-1040, page 2, Deductions schedule, line 3)					.0		

Outside salesperson:

An "outside salesperson" is one who solicits business while working away from the employer's place of business as a full-time salesperson. If the individual is required to spend a stated period of time selling at the employer's place of business as part of their job, the individual is not an outside salesperson. If the individual only performs incidental activities there, such as writing up and handing in orders, the individual qualifies for the expense deduction. A salesperson whose principal activity is service and delivery is not an "outside salesperson." An inside salesperson who makes incidental outside calls and sales is not an "outside salesperson."

Line 7 instructions:

Business expenses reported are allowed as an expense on the city's return only when the individual employee qualifies as an outside salesperson when the expenses were incurred.

Meal expenses:

Under the Uniform City Income Tax Ordinance meal expenses are allowed only when incurred while away from home. No deduction is allowed for entertainment unless incurred by an outside salesperson.

ı a	xpayers name				raxpayers s	No		2023 BIG	RAPIDS		
M	OVING EX	PENS	E DEDUCTION W	ORKSHEET	- BR-104	10, PAGE 2,	DEDU	CTIONS SO	CHEDULE, LINE 4		Attachment 17
Fc	or tax years af	ter 20	17, only members of th	ne military are el	igible to cla	aim moving exp	ense. I	f applicable at	tach federal Form 390	3.	Revised 1/09/2024
DI	STANCE TES	ST WC	RKSHEET								
1.	Number of miles	s from y	our old home to your new wo	orkplace	1			miles			
2.	Number of miles	s from y	our old home to your old wor	kplace	2			miles			
3.	Subtract line 2 f	rom line	1. If zero or less, enter -0-		3			miles			
	If line 3 is greate	er than s	0 miles continue, otherwise	you are not qualified	to claim this	deduction.					
4.	. Cost of transpor	rtation a	nd storage of household goo	ds and personal effe	ects (See inst	ructions for federal	Form 390	3)		4	.00
5.	. Cost of travel (in	ncluding	lodging) from your old home	to your new home.	(See instructi	ons for federal For	m 3903) (Do not include the	cost of meals.)	5	.00
6.	. Add lines 4 and	5								6	.00
7.			employer paid you for the expour Form W-2 with a code P		s 4 and 5 that	is not included in t	oox 1 of ye	our Form W-2 (wa	ges) (This amount should	7	.00
ls line 6 more			No You cannot deduct your moving expenses. (If line 6 is less than line 7, subtract line 6 from line 7 and include the result on Form BR-1040, page 1 line 1, column A and report exclusion of this income on the excluded wages schedule)						8a	.00	
0	than line 7?		Yes Subtract line 7 from	line 6						8b	.00
9.	9. Enter percentage of income earned as a resident after moving into area 9 %						%				
10. Enter percentage of income earned as a nonresident in the city after moving into area							%				
11. Multiply line 8b by the percentage on line 9 (Moving expense deduction allowed while a resident; enter here and on Form BR-1040, page 2, Deductions schedule, line 4)					.00						
12.	Multiply line 8b by the percentage on line 10 (Moving expense deduction allowed while a nonresident; enter here and on Form BR-1040, 12. page 2, Deductions schedule, line 4) (If a part-year resident add amounts on line 11 and 12 and enter on Schedule TC, Deductions schedule, line 4)							12	.00		

ALIMONY PAID DEDUCTION WORKSHEET - BR-1040, PAGE 2, DEDUCTIONS SCHEDULE, LINE 5

Attachment 18

RESIDENT: Full-year residents claim the entire amount of alimony reported on federal Form 1040. A full-year resident is not required to attach this deduction schedule to their city income tax return.

Revised 1/09/2024

NONRESIDENT: Nonresidents use the nonresident column of this worksheet to calculate their city alimony deduction.

PART-YEAR RESIDENT: A part-year resident may need to use both the resident and nonresident columns of this worksheet to calculate their alimony deduction. For each line of the worksheet, compute the amount to enter into the resident and/or nonresident columns and follow the line by line instructions. A part-year resident with no city income while a nonresident ignores the nonresident column of this form.

Nonresidents and part-year residents use this worksheet to compute the alimony paid deduction	RESIDENT COLUMN	NONRESIDENT COLUMN
Enter resident portion of federal adjusted gross income (Form 1040) in resident column and/or nonresident portion in nonresident column	.00	.00
2. Enter resident portion of federal alimony paid while a resident in the resident column and/or nonresident portion of the alimony paid while a nonresident in the nonresident column (Actual amount paid while a resident of the city and while nonresident)	.00	.00
3. Federal income for alimony deduction computation (Line 1 plus line 2 of column)	.00	.00
Enter resident portion of total income for city in resident column and/or nonresident portion in nonresident column. Part-year 4. residents enter total income for city as a resident and/or nonresident as reported on Schedule TC, line 18, columns C (resident) and D (nonresident)	.00	.00
5. Enter resident portion of total deductions for city other than alimony deduction (Add lines 1, 2, 3, 4 & 6 on Form BR-1040, page 2, Deductions schedule) in resident column and/or nonresident portion in nonresident column	.00	.00
6. Taxable income for city prior to alimony deduction (Line 4 less line 5)	.00	.00
7. Resident column: Enter 100%. Nonresident column: Enter alimony deduction percentage (Line 6 divided by line 3)	100 %	%
Alimony deduction (Line 2 multiplied by line 7) (Residents and nonresidents enter amount from respective column on Form 8. BR-1040, page 2, Deductions schedule, Line 5. Part-year residents enter amount from each column on Schedule TC, Deductions schedule, line 5, column C and D)	.00	.00

Taxpayer's name Taxpa	ayer's SSN		2023 BIG RAP	PIDS			
OTHER TAX PAYMENTS - BR-1040, PAGE 1, LINE 24	4b. PAYMENTS	AND CR	EDITS (ESTIMA	TED TAX		Attachment 20	
PAYMENTS, EXTENSION PAYMENTS, CREDIT FORWARD, TAX PAID BY A PARTNERSHIP AND CREDIT Revised 1/09/2024 FOR TAX PAID BY A TAX OPTION CORPORATION)							
A resident of Flint or Grand Rapids may claim a credit for tax paid to the corporation (see instructions as this credit is not allowed by a		oration bas	sed on income taxab	le to the resident	t and a	also taxed by a city	
OTHER TA	AX PAYMENTS					OTHER TAX PAYMENTS	
Estimated tax payments						.00	
2. Tax paid with an extension						.00	
Credit forward from last tax year						.00	
Tax paid by a partnership Partnership FEIN	Part	nership name	е			.00	
Tax paid by a partnership Partnership FEIN	Part	nership name	е			.00	
6. Credit for tax paid by a tax option corporation Corporation FEIN	Corp	oration name	е			.00	
7. Credit for tax paid by a tax option corporation Corporation FEIN	Corp	oration name	е			.00	
8. Total credit for estimated tax, extension and partnership tax payments and credit schedule, line 24b)	lit forward (Add lines 1 th	rough 7; ente	er here and on BR-1040, F	Page1, Payments and	d	.00	
CREDIT FOR TAX PAID TO ANOTHER CITY - BR-104	0, PAGE 1, PAY	MENTS .	AND CREDITS S	CHEDULE,		Attachment 21	
LINE 24c (Credit will be disallowed if a copy of page	1 of the other o	ity's ret	urn is not attach	ned)		Revised 1/09/2024	
Credit for tax paid to another city may be claimed by a resident who	o paid tax on the sar	ne income	e to another city.				
Part-year residents may claim the credit for tax paid to another city							
OTHER CITY'S NAME OR CORPORATION FEDER	AL EMPLOYER IDE	NTIFICAT	TON NUMBER AND	NAME		TAX CREDIT	
Tax paid to another city City name						.00	
Tax paid to another city City name						.00	
3. Total credit for tax paid to another city (Add lines 1 and 2; enter here and on BF	R-1040, Page 1, Payment	s and Credits	s schedule, line 24c)			.00	
CALCULATION OF CREDIT FOR TAX PAID TO ANOT	HER CITY (Resi	dents o	nly)	RESIDENT CI		OTHER CITY	
Use a separate calculation worksheet for each city		,		BIG RAPIDS		00	
Income taxable in the nonresident city that is also taxable in the resident city (S	ame amount for both citie	es)			.00	.00	
Exemptions amount per city's return Truth to income for any ith					.00	.00	
Taxable income for credit					.00	.00	
Tax for credit purposes at each city's nonresident tax rate		4)			.00	.00	
 Credit allowed for tax paid to another city (Enter the smaller of resident city's or 	other city's tax from line	4)			.00		
CALCULATION OF CREDIT FOR TAX PAID BY TAX O	DETION CORRO	DATION	(C CORRORATI	ON)			
(Residents of Flint and Grand Rapids only)	PHON CORPO	KATION	(S CORPORATI	ON)			
The cities of Flint and Grand Rapids tax the flow through income of					,		
taxpayer's proportionate share of the city income tax paid by the ta							
CALCULATION OF CREDIT FOR TAX PAID BY A TAX OPTION CORPORATION (S-CORPORATION)	RESIDENT	CITY	OTHER CITY	OTHER CIT	Y	OTHER CITY	
Corporation income tax paid to city by tax option corporation		.00	.00		.00	.00	
Corporation income tax rate for city and other cities where tax option corporation corporation income tax	n paid	%	%		%	%	
If the corporate tax rate of the other city is less than the city's corporation tax rate enter the tax paid by the tax option corporation to the other city, otherwise enter total tax that would have been paid to the other city if their corporation tax rate the same as the city's corporation tax rate (Computation if other city's corporate rate is higher than the city's corporation tax rate: [City's corporation tax rate] / [city's corporation tax rate] * [corporation tax paid to other city])	r the was e tax		.00		.00	.00	
4. Taxpayer's percentage of ownership of tax option corporation (from federal Schedule K-1 (Form 1120s), line H, or other federal schedule) 96							
Enter the taxpayer's proportionate share of the corporation tax paid to the city at the taxpayer's proportionate share of the lesser of the corporation tax paid to the other city or the tax that would have been paid if the other city's corporation inc tax rate was the same as the city's corporation tax rate	e	.00	.00		.00	.00	
Credit allowed for tax paid by tax option corporation (Add amounts on line 5 of 6. column; enter total here; and list corporation FEIN, name and credit claimed in above for Other Tax Payments, Attachment 20)		.00					

Taxpayer's name

axpayer's name	Taxpayer's SSN	2023 BIG RAPIDS	
SUPPORTING NOTES AND STATEMENTS			Attachment 22
			Revised 1/09/2024