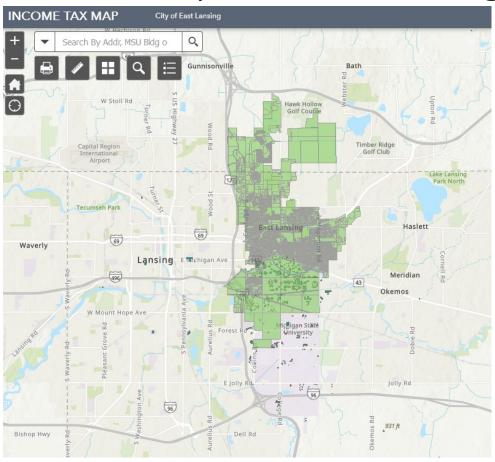
City of East Lansing Income Tax Return (EL-1040)

• This presentation is for information purposes only. They are based on typical international student and scholar circumstances. Your individual circumstances may be different. Consult a tax advisor if you have questions.

| CF-1040 Eas | t Lansing | Resident | Non-Resident | Part Y | ear | | | 24MI-ELA- | -1040-1 | |
|--------------------------|---|--|--|-----------------------------------|-------------------------------|-------------------|-----------------------|--------------------------|--------------|--|
| TAXPAYER'S SSN | | TAXPAYER'S FIRST NAME | | INITIAL | LAST NAME | | | FILING STATU | s | |
| | | | | | | | | Single | | |
| SPOUSE'S SSN | | IF JOINT RETURN SPOUSE | 'S FIRST NAME | INITIAL | LAST NAME | | | = | | |
| PRESENT HOME ADDRESS | (NUMBED AND STREET) | | | | APT. NO. | | | Married filing jointly | | |
| PRESENT HOWE ADDRESS | (NUMBER AND STREET) | | | | AFI. NO. | | | Married fili separately. | | |
| ADDRESS LINE 2 (P.O. BO) | (ADDRESS FOR MAILING US | E ONLY) | | | | | | spouse's S | | |
| | | , | | | | | | | ull name her | |
| CITY, TOWN OR POST OFF | ICE | | | STATE | ZIP CODE | | | | | |
| | | | | | | | | • | | |
| FOREIGN COUNTRY NAME | | FOREIGN PROVINCE/COUN | ITY | | FOREIGN POSTAL | CODE | | SPOUSE'S FULL NAME | | |
| | | | | | | | | | | |
| | Taxpayer Spou n page 2, right side of t | | | ral Form 1310 a zed deductions | ttached on your Federal ta | ax return for 202 | 24 | SPOUSE'S SSN | | |
| EXEMPTIONS | 1a You Da | ate of birth (mm/dd/yyyy) | | Regular | 65 or over | Blind | Deaf Disab | led | | |
| SCHEDULE | 1b Spouse Da | te of birth (mm/dd/yyyy) | | Regular | 65 or over | Blind | Deaf Disab | led | | |
| | 1c. Check box if yo | Check box if you can be claimed as a dependent on another per- | | | | | | | | |
| | 1d. Enter the numb | 1d. Enter the number of boxes checked on lines 1a and 1b | | | | | | | | |
| | 1e. Enter number of dependent children and/or other dependents claimed on your federal return | | | | | | | | | |
| | 1f. Total exemptions (Add lines 1d and 1e; enter here and also on page 1, line 16a) | | | | | | | | | |
| INCOME | ROUND ALL FIGURE under \$0.50 and inc | ES TO NEAREST DOLLAI crease amounts from \$.5 | R (Drop amounts 0 to \$0.99 to next dollar) | | .UMN A Return Data | | UMN B /Adjustments | COLU Taxable | | |
| SEND COPY | 1 Wages, salarie | s, tips, etc. (W-2 forms n | nust be attached) | | | | | | | |
| OF PAGE 1 OF FEDERAL | 2 Taxable interes | st | | | | | | | | |
| RETURN | 3 Ordinary divide | ends | | | | | | | | |
| SEND W-2 | 4 Business incom | ne or (loss) attach federa | al Schedule C | | | | | | | |
| FORMS | 5 Capital gain or (loss) attach federal Schedule D | | | | | | | | | |
| | 6 Other gains or (losses) attach federal Form 4797) | | | | | | | | | |
| | 7 Taxable IRA distributions from Form(s) 1099-R (attach) | | | | | | | | | |
| | | ns and annuities from Fo | ., , | | | | | | | |
| | 9 Rental real esta | ate, royalties attach fede | ral Sched E pg 1 | | | | | | | |
| | 10 Partnershin es | tate trust etc attach fec | leral Sched Fing 2 | | | | | | | |

City of East Lansing Map



The following individuals are required to file an individual return for the City of East Lansing:

- If you lived in the City during any part of the tax year and had taxable income (see map)
- If you did not live in the City, but earned more than \$600 of taxable income from within City limits.

If you are not sure, check with the city.

Physically Present in East Lansing

- Some people worked remotely in 2024. The City of East Lansing only taxes income that was earned while physically present within the city boundaries.
- If you worked remotely in 2024, you may need to calculate how much of your income was earned while physically present in the city verse how much was earned while you worked remotely outside of the city boundaries.
- For more information, please see the city's website https://www.cityofeastlansing.com/1812/Income-Tax

Documents Needed

You will need your 1040NR, which was completed in Sprintax, and all tax documents (for example: W2 and 1042-S) just as you used for your 1040NR.

| 55555 AOID 4 c | | OMB No. 15 | | | |
|---|----------------------------|---------------|---------------|---|--|
| Employer identification number (EIN) | | | 1 Waq | ges, tips, other compensation | 2 Federal income tax withheld |
| Employer's name, address, and ZIP cod | de | | 3 Soc | cial security wages | 4 Social security tax withheld |
| | | | 5 Me | dicare wages and tips | 6 Medicare tax withheld |
| | | | 7 Soc | cial security tips | 8 Allocated tips |
| Control number | | | 9 | | 10 Dependent care benefits |
| Employee's first name and initial | Last name | Suff. | 11 No | nqualified plans | 12a See instructions for box 12 |
| ······································ | | | 13 State | utory Retirement Third-party loyee plan sick pay | 12b |
| | | | 14 Oth | er | 12c |
| | | | | | 12d |
| Employee's address and ZIP code | | | | | |
| State Employer's state ID number | 16 State wages, tips, etc. | 17 State inco | me tax | 18 Local wages, tips, etc. | 19 Local income tax 20 Localit |
| | | | | | |
| W-2 Wage and Tax | x Statement | 20 | 24 | For | of the Treasury—Internal Revenue S |
| py A—For Social Security Adminion m W-3 to the Social Security Admin | | | | Ac | t Notice, see the separate instruction. 10 |

§ 1040-NR Department of the Treasury—Internal Revenue Service U.S. Nonresident Allen Income Tax Return See separate instructions. For the year Jan. 1-Dec. 31, 2024, or other tax year beginning , 2024, ending Your identifying number Your first name and middle initial Home address (number and street). If you have a P.O. box, see instructions. Apt. no. City, town, or post office. If you have a foreign address, also complete spaces below ZIP code Foreign country name Foreign province/state/county Foreign postal code Filing Qualifying surviving spouse (QSS) Married filing separately (MFS) Estate Status If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent Check only one box. Digital Assets At any time during 2024, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or Yes No otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) (4) Check the box if qualifies for (see inst.): Dependents (2) Dependent's Credit for other (see instructions): Child lax credit (1) First name Last name (3) Relationship to you dependents, see instructions and check here 1a Total amount from Form(s) W-2, box 1 (see instructions)

Do Not Cut, Fold, or Staple Forms on This Page

Enter Your Personal Information

If you are a nonresident for federal tax purposes, then check the "Nonresident" box on this tax form. This is true regardless of where you lived.

| CF-1040 East Lansing | Resident Non-Resident | Part Ye | ear De | 24MI-ELA1040-1 |
|---|-------------------------------------|--------------------------------------|---|--|
| TAXPAYER'S SSN | TAXPAYER'S FIRST NAME | INITIAL | LAST NAME | FILING STATUS |
| SPOUSE'S SSN | IF JOINT RETURN SPOUSE'S FIRST NAME | INITIAL | LAST NAME | Single Married filing jointly |
| PRESENT HOME ADDRESS (NUMBER AND STREET) | Married filing separately. Enter | | | |
| ADDRESS LINE 2 (P.O. BOX ADDRESS FOR MAILING USE | ONLY) | | | spouse's SSN and Spouse's full name here. |
| CITY, TOWN OR POST OFFICE | | STATE | ZIP CODE | , |
| FOREIGN COUNTRY NAME | FOREIGN PROVINCE/COUNTY | | FOREIGN POSTAL CODE | SPOUSE'S FULL NAME |
| Mark box if deceased Taxpayer Spouse Enter date of death on page 2, right side of the | | al Form 1310 att ed deductions or | ached n your Federal tax return for 2024 | SPOUSE'S SSN |

| | | | | | | | | 1 |
|------------|-----|-------------|---|------------------------------|---------------|-------|------|----------|
| EXEMPTIONS | 1a | You | Date of birth (mm/dd/yyyy) | Regular | 65 or over | Blind | Deaf | Disabled |
| SCHEDULE | 1b | Spouse | Date of birth (mm/dd/yyyy) | Regular | 65 or over | Blind | Deaf | Disabled |
| | 1c. | Check box | if you can be claimed as a dependent on | another person's tax return | | | | |
| | 1d. | Enter the r | number of boxes checked on lines 1a and | 1b | | | 11 7 | |
| | 1e. | Enter num | ber of dependent children and/or other de | pendents claimed on your fe | ederal return | | | |
| | 1f. | Total exem | nptions (Add lines 1d and 1e; enter here ar | nd also on page 1, line 16a) | | | | |

- Enter your date of birth in box 1a. Place an "X" under Regular. Enter 1 in box 1d. Enter 1 in box 1f.
 - Do not enter spouse and dependent information because they cannot be claimed as exemptions by nonresident aliens

Income

- You will need to enter your income information. The next slides highlight the areas you most likely will have information to input.
- Please read the description of each line carefully; you may need to supply information on that line.

INCOME

SEND COPY OF PAGE 1 OF FEDERAL RETURN

SEND W-2 FORMS

ROUND ALL FIGURES TO NEAREST DOLLAR (Drop amounts under \$0.50 and increase amounts from \$.50 to \$0.99 to next dollar) Wages, salaries, tips, etc. (W-2 forms must be attached) 2 Taxable interest Ordinary dividends Business income or (loss) attach federal Schedule C 5 Capital gain or (loss) attach federal Schedule D Other gains or (losses) attach federal Form 4797) Taxable IRA distributions from Form(s) 1099-R (attach) Taxable pensions and annuities from Form(s) 1099-R (attach) Rental real estate, royalties attach federal Sched E pg 1 10 Partnership, estate, trust, etc attach federal Sched E pg 2 Additional income from page 2 Sched A line 6 11 12 Total additions (Add lines 2 through 11) Total income (Add lines 1 and 12)

| | | e e e | | | 1 |
|---|----|--|---------------------------------|------------------------------------|----------------------------|
| INCOME | | UND ALL FIGURES TO NEAREST DOLLAR (Drop amounts der \$0.50 and increase amounts from \$.50 to \$0.99 to next dollar) | COLUMN A Federal Return Data | COLUMN B Exclusions/Adjustments | COLUMN C Taxable Income |
| SEND COPY OF PAGE 1 OF FEDERAL RETURN SEND W-2 FORMS | 1 | Wages, salaries, tips, etc. (W-2 forms must be attached) | | | |
| | 2 | Taxable interest | | | |
| | 3 | Ordinary dividends | | | |
| | 4 | Business income or (loss) attach federal Schedule C | | | |
| | 5 | Capital gain or (loss) attach federal Schedule D | | | |
| | 6 | Other gains or (losses) attach federal Form 4797) | | | |
| | 7 | Taxable IRA distributions from Form(s) 1099-R (attach) | | | |
| | 8 | Taxable pensions and annuities from Form(s) 1099-R (attach) | | | |
| | 9 | Rental real estate, royalties attach federal Sched E pg 1 | | | |
| | 10 | Partnership, estate, trust, etc attach federal Sched E pg 2 | | | |
| | 11 | Additional income from page 2 Sched A line 6 | | | |
| | 12 | Total additions (Add lines 2 through 11) | | | |
| | 13 | Total income (Add lines 1 and 12) | | | |
| | | | | | |

There are three columns in the section of the tax return where you report your income.

- Column A should be information reported on your federal tax return.
- Column B is for income that is not subject to taxation by the City.

Example No. 1: you did not live in East Lansing, but worked in East Lansing, then Column B would be for excluding all income you earned outside of the City of East Lansing.

Example No. 2: you only lived in East Lansing part of the year, then Column B would be for excluding all income your earned when you lived elsewhere.

• **Column C** is the result of Subtracting Column B from Column A. For many international students who live in East Lansing, Column B will be a "0", so you will just carry over what is Column A over to Column C. If you have a number in Column A and the corresponding Column C has "Not Taxable" in it, then that income is not taxed by the city.

Reporting Income

| INCOME | | UND ALL FIGURES TO NEAREST DOLLAR (Drop amounts ler \$0.50 and increase amounts from \$.50 to \$0.99 to next dollar) | COLUMN A Federal Return Data | COLUMN B Exclusions/Adjustments | COLUMN C Taxable Income |
|-------------------------|---|--|---------------------------------|------------------------------------|----------------------------|
| SEND COPY | 1 | Wages, salaries, tips, etc. (W-2 forms must be attached) | | | |
| OF PAGE 1 OF FEDERAL | 2 | Taxable interest | | | |
| RETURN | 3 | Ordinary dividends | | | |
| CEND W-2 | 4 | Business income or (loss) attach federal Schedule C | | | |

Reporting Income Continued

- Line 1: This line is for your wages, salaries, tips, and other income that is reported on your W2.
 - You will need to attach a copy of your W2 to the return when filing
- Line 2: This line is for taxable interest; while you do not pay taxes on bank interest on your federal and state of Michigan tax returns, interest is taxable on the City tax return.
 - Interest can also be reported a 1042-S, income code 29.
- Line 3: This line if for Ordinary Dividends; if you received an ordinary dividend from stock you own, report that here.
- Line 4: If you have business income or loss, it is reported on this line and attach a copy of your federal Schedule C

Income Continued

• The next set of lines may or may not apply to you. Please read each description carefully to determine if they apply to you.

SEND W-2 FORMS

| 5 | Capital gain or (loss) attach federal Schedule D | | |
|----|---|--|--|
| 6 | Other gains or (losses) attach federal Form 4797) | | |
| 7 | Taxable IRA distributions from Form(s) 1099-R (attach) | | |
| 8 | Taxable pensions and annuities from Form(s) 1099-R (attach) | | |
| 9 | Rental real estate, royalties attach federal Sched E pg 1 | | |
| 10 | Partnership, estate, trust, etc attach federal Sched E pg 2 | | |
| | | | |

- Line 5: If you recognized a capital gain or loss, report it here and attach your federal Schedule D, if required
- Line 6: If you have other gains or losses from the sale of business property, report it here and attach a Form 4797
- Line 7: If you received an IRA distribution, report it on this line and attach a copy of your Form 1099-R
- Line 8: If you received income from a pension and/or annuity, report it here and attach a copy of your Form 1099-R
- Line 9: If you have rental real estate, royalties, report it here and attach your federal Schedule E pg 1
- Line 10: Partnerships, estate, trust, report it here and attach your federal Schedule E pg 2

Page 2 – Schedule A:

The next set of lines may not apply to you. Please read each description carefully to determine if they apply to you.

SCHEDULE A - OTHER INCOME

ROUND ALL FIGURES TO NEAREST DOLLAR (Drop amounts under \$0.50 and increase amounts from \$.50 to \$0.99 to next dollar)

- 1 Alimony Date of Original Divorce or Separation:
- 2 Subchapter S corporation distributions (Att copy of fed Sch K-1)
- 3 Farming Income or (loss) (Attach copy of federal Schedule F)
- 4 Gambling Income
- 5 Other Income. List type:
- 6 Total additions (Add lines 1 through 5)
- Line 1: If you receive alimony, you will report that here
- Line 2: If you received distributions from a Subchapter S corporation, report it here and attach a copy of your federal Schedule K-1
- Line 3: If you received farm income, report it here and attach a copy of your federal Schedule F
- Line 4: Gambling income
- Line 5: Other Income
 - If you received unemployment, report that income here
 - If you receive social security benefits, report those benefit amounts here
 - If you have any other income, report it here and attach a statement of the type of income and amount received. If your scholarship was taxable on your federal return (form Schedule 1, line 8r), it likely must be listed here.
- Line 6: Total additions, add lines 1 through 5
 - Enter total on page 1, line 11.

Page 2 – Deduction Schedule:

The next set of lines may not apply to you. Please read each description carefully to determine if they apply to you.

DEDUCTIONS SCHEDULE

- 1 IRA deduction (Attach copy of Schedule 1 of federal return & evidence of payment)
- 2 Self-employed SEP, SIMPLE and qualified plans (Attach copy of Schedule 1 of federal return)
- 3 Employee business expenses (Attach copy of CF-2106 and detailed list)
- 4 Moving expenses (Into city area only, Military ONLY) (Attach copy of federal Form 3903)
- 5 Alimony paid (DO NOT INCLUDE CHILD SUPPORT. Attach copy of Schedule 1 of federal return)
- 6 Renaissance Zone deduction (Attach Schedule RZ 0F 1040)
- 7 Total deductions (Add line 1 through line 6, enter total here and on page 1, line 14)

- Line 1: If you received a deduction from and IRA account, report it here and attach a copy of your Schedule 1 and evidence of the payment
- Line 2: If you received self-employment SEP, SIMPLE and qualified plans, enter here and attach Schedule 1
- Line 3: If you have employee business expenses, enter the amount here and attach an EL-2106 and detailed list of those expenses
- Line 4: This should not apply to you; it is for Active Military members who are ordered to move
- Line 5: If you have paid alimony, enter the amount here (NOTE: Do not include child support payments!)
- Line 6: If you are in a residential area that is being phased out, you may enter a Renaissance Zone Deduction. Check with City of East Lansing if you think this could apply to your residential area.
- Line 7: Total the deductions by adding lines 1 through line 6. Enter the total here.
 - Enter total on page 1, line 14

Income Continued

After entering your income information, you will total the income by following the instructions of Line 11 through 16

| 11 | Additional income from page 2 Sched A line 6 | | | | |
|----|--|-----------------|-----|-----|--|
| 12 | Total additions (Add lines 2 through 11) | | | | |
| 13 | 3 Total income (Add lines 1 and 12) | | | | |
| 14 | Total deductions (Subtractions) (Total from page 2, Deductions sch | nedule, line 7) | | | |
| 15 | 5 Total income after deductions (Subtract line 14 from line 13) | | | | |
| 16 | 6 Exemptions – Enter number from line 1f in 16a, multiply by \$600, enter in 16b | | 16a | 16b | |

- Line 11: Report additional income from page 2 Schedule A, line 6 if applicable
- Line 12: Total additions, add lines 2 through 11
- Line 13: Total income, add lines 1 and 12
- Line 14: Total deductions from page 2 Deduction Schedule, line 7 if applicable
- Line 15: Total income after deductions, subtract line 14 from line 13
- Line 16: Exemptions
 - As a nonresident alien, you are not able to claim any additional exemptions for a spouse or dependent. Therefore, put a "1" in 16a and "\$600" in box 16b

Calculating Taxes Owed

| 17 | Total income subject to | tax (Subtract line 16b from line | | 17 | | | |
|----|---|--|---|----|--|-----|--|
| 18 | | Fax at (rate). Multiply line 17 by the resident rate (1.00%) or non-resident rate (0.50%) and enter on 18b. If using Schedule TC, check box 18a and enter tax from Sch TC, line 23c. | | | | 18b | |
| 19 | Payments and credits, enter total 19a, b, c in 19d | 19a East Lansing tax withheld | 19b Other tax payments (est,extension, cr fwd, partnership & tax option corp) | | c Credit for tax id to another city | 19d | |
| 20 | Interest and penalty for estimated tax payment estimated tax; or late p | s; underpayment of | 20a Interest | 20 | b Penalty | 20c | |

- Line 17: Subtract line 16b (\$600) from the amount on line 15
- Line 18: Nonresident aliens (NR) are taxed at .5% (.005). Multiply line 17 by .005. Enter the result in 18b
- Line 19: Enter any payments and credits paid
 - Box 19a: most people will enter an amount for East Lansing tax withheld. It can be found in Box 19 on your W2. There is no city withholding on the 1042-S.
 - Box 19b: leave blank if this is your first time filing a city of East Lansing tax return
 - Box 19c: this will be blank unless you paid taxes to another city (other than East Lansing), if so, then put the total amount of taxes paid to all other cities here. Many taxpayers may have paid tax to the City of Lansing.
 - Line 19d: Total the amounts in box 19a, 19b, and 19c.
- Line 20c: Leave blank; if you owe penalty or interest, the city will calculate this amount and send you a bill.

Calculating Amount Due or Refund Amount

Line 21 and 22: Compare lines 18b (tax owed) with 19d (tax withheld or already paid):

If 18b is larger than 19d – then write the difference between the two lines on line 21 and pay with your tax return.

If 18b is **smaller** than 19d – then write the difference between the two lines on **line 22** and this is **your refund amount**.

Calculating Amount Due

- Line 21: Tax Due.
 - If line 19d (or 20c) is **Less** than line 18b, you owe tax and will report the amount on line 21.
 - To pay with a check or money order, please make payable to:
 - East Lansing City Treasurer
 - Be sure your name and Social Security or account number is on the payment.
 - If you will be mailing a payment with a payment voucher separately from the tax return:

East Lansing Income Tax Department

PO Box 276

Eaton Rapids, MI 48827

OVERPAYMENT

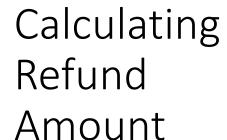
| 22 | Overpayment (subtract 18b, 20c from 19d); choose overpayment options on lines 23-25. | | | | | | | |
|----|--|--|---------------------------|-------------------------------------|--|--|--|--|
| 23 | Amount of overpayment donated | 23a Parks, Stewardship & Conservation | 23b Parks and Playgrounds | 23c Recreational Youth Scholarships | | | | |
| 24 | Amount of overpaymen | | AMOUNT OF CREDIT TO 2025 | | | | | |
| 25 | | t refunded (Line 22 less lines 23d a account, mark refund box, line 26a | , , | REFUND AMOUNT | | | | |

- Line 22: Overpayment. If line 19d (or 20c) is MORE than line 18b, you are due a refund and will report the amount on line 22
 Options for donating all or part of your refund are on line 23.
 - Amounts donated will be subtracted from the total refund you will receive.
 - If you would like all or part of your refund to be credited to the next year, put the amount on Line 24.
 - If you would like the full amount to be refunded, put the amount on line 25.
 - For most people this will probably be the same as line 22.
- If you would like your refund to be issued as a direct deposit, please fill out the bank account information at the bottom of the form.
 - Please allow 45 days before contacting the City of East Lansing Income Tax Department to inquire about refund status.
- Mail your completed return when you are owed a refund to the following address:

East Lansing Income Tax Department

PO Box 526

Eaton Rapids, MI 48827





Direct Withdraw or Direct Deposit

You can pay the tax due or receive a refund directly from a bank account.

- If you are receiving a refund, put at "X" in box 26a.
- If you owe tax, put a "X" in box 26b.
- Enter your bank's routing number in box 26c.
- Enter your bank account number in box 26d.

MAKE SURE ACCOUNT NUMBER IS ACCURATE!

Neither the City nor your bank will make sure it is accurate. It is very hard to get the money back if it is deposited into the wrong account.

• Select the account type with an "X" in box 26e1 or box 26e2.

| 26 | Direct dep | osit refund or direct withdrawal | | | | | |
|-----|------------|----------------------------------|--------------------|--|------|----------|--|
| 26a | | Refund (direct deposit) | 26c Routing number | | 26e1 | Checking | |
| 26b | | Tax due (direct withdrawal) | 26d Account number | | 26e2 | Savings | |

Page 2: Excluded Wages and Tax Withheld

- Column A: Enter a "T" for each W2 you are going to list
- Column B: Enter your social security number
- Column C: Enter your employer's ID number from box b on your W-2
- Column D: Enter your excluded wages, attach excluded wages schedule (Attachment 2-1)
- Column E: Enter Local Tax withheld from box 19 on your W-2
- Column F: Enter the Locality Name from box 20 on your W-2

In this section, you will need to list wages that are <u>not</u> taxable in East Lansing, if any. This could include income earned outside of the United States or income earned in another city other than East Lansing.

EXCLUDED WAGES AND TAX WITHHELD SCHEDULE (SEE INSTRUCTIONS – RESIDENT WAGES GENERALLY NOT EXCLUDED) FAILURE TO ATTACH W-2 FORMS TO PAGE 1 WILL DELAY PROCESSING OF RETURN. WAGE INFORMATION STATEMENTS PRINTED FROM TAX PREPARATION SOFTWARE ARE NOT ACCEPTABLE W-2 COLUMN A COLUMN B COLUMN C COLUMN D COLUMN E COLUMN F T or S SOCIAL SECURITY NUMBER EMPLOYER'S ID NUMBER **EXCLUDED WAGES** EAST LANSING TAX WITHHELD LOCALITY NAME (Form W-2, box 19) (Form W-2, box a) (Form W-2, box b) (Attach Excluded Wages Sch) (Form W-2, box 20) 2 3 4 5 6 8 Enter on pg 1,ln 1, col B >> Totals (Enter here and on page 1; part-yr residents on Sch TC) << Enter on pg 1, In 19a

Page 2: Address Schedule

- Enter "T" in the first column for each address you are entering.
- Enter your local address (with street number, street name, city, and zip code) in the second column.
- Enter the date range you lived in each address during 2024.

You are going to need to list every address you lived at during 2024 ONLY.

| ADDRE | SS SCHEDULE (WHERE TAXPAYER (T), SPOUSE (S) OR BOTH (B) RESIDED DURING YEAR AND DATES OF RESIDENCY) | | | | |
|---------|---|-------|-----|-------|-----|
| MARK | List all residence (domicile) addresses (Include city, state & zip code). Start with address used on last year's return. If the address on page 1 of this return is the same as listed on last year's return, print "Same." If no return filed last year, list reason. Continue listing this tax year's | FROM | | T0 | |
| T, S, B | residence addresses. If address listed on page 1 of this return is in care of another person, enter current residence (domicile) address. | MONTH | DAY | MONTH | DAY |
| _ | | | | | |
| _ | | | | | |
| - | | | | | |
| | | | | | |
| | | | | | |

| THIRD PARTY DESIGNEE | | | | | |
|---|-------|--------------|--|--|--|
| Do you want to allow another person to discuss this return with the Income Tax Office? Yes, complete the following No | | | | | |
| Designee's | Phone | Personal ID | | | |
| name | No. | number (PIN) | | | |

Page 2: Third Party Designee

• If you would like someone to be able to speak to the City of East Lansing Income Tax Office on your behalf, place an "X" in the first box and fill in the requested information. If not, simply put an "X" in the second box and move on to the last section.

Under the penalty of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. If I am a resident claiming a credit for taxes paid to another city, I acknowledge and consent to the City's verification of unrefunded payment to that city. If prepared by a person other than tax payer, the preparer's declaration is based on all information of which preparer has any knowledge

| TAXPAYER'S SIGNATURE If joint return, both spouses must sign | Date (MM/DD/YY) | Taxpayer's occupation | Daytime phone no. | If deceased, date of death |
|--|-----------------|--------------------------|-------------------|----------------------------|
| | | | | |
| SPOUSE'S SIGNATURE | Date (MM/DD/YY) | Spouse's occupation | Daytime phone no. | If deceased, date of death |
| | | | | |
| Some cities are using new communication methods. If your City participates and you would like email notifications regarding important changes and Income Tax related information please provide your email address. No City will email you asking for your social security number. | | | Email | |
| SIGNATURE OF PREPARER OTHER THAN TAXPAYER | Date (MM/DD/YY) | PTIN, EIN OR SSN | Preparer's Phone | |
| | | | | |
| FIRM'S NAME (or yours if self-employed), ADDRESS AND ZIP CODE | | NACTP software number | | |

MAIL TO: EAST LANSING INCOME TAX DEPARTMENT, PO BOX 526, EATON RAPIDS, MI, 48827
MAIL PAYMENT RETURNS TO: EAST LANSING INCOME TAX DEPARTMENT, PO BOX 276, EATON RAPIDS, MI 48827

Completing Your Return

- You will need to print, sign, and date your tax return.
- BE SURE TO MAIL YOUR RETURN by April 30, 2025
- If you owe a tax, and did not select direct debit, then you will need to send a check or money order with your tax return.
- Before you mail your return to the City, be sure to make a copy of it for your records.
- Staple to your return copies of:
 - W-2, 1042-S forms
 - First page of your 1040NR