

CITY OF PONTIAC NON-RESIDENT INDIVIDUAL INCOME TAX RETURN

P-1040NR

Due April 30, 2020

2019

Your first name & initial		Last name		Birthdate	Your Social Security Number--REQUIRED			
If joint, spouse's first name & initial		Last name		Birthdate	Spouse's Social Security Number if filing joint return			
Home address (Number and street or rural route)				Apt #				
City, town or post office			State	Zip code	Daytime phone		Evening phone	
If married, is spouse filing a separate return? Yes <input type="checkbox"/> No <input type="checkbox"/>				If Yes, provide spouse's Social Security Number				

Schedule 1 Exemption Amount

YOURSELF Regular 65 or over Blind **SPOUSE** Regular 65 or over Blind 1. Number of boxes checked to the left 1.

DEPENDENTS
Name (first, middle initial, and last name) Social Security Number Relationship How many months living in your home

2. Number of dependent children and/or other dependents which you listed on your federal return 2.

3. Total number of exemptions--add lines 1 and 2 and enter on line 5 of RETURN SUMMARY below 3.

Schedule 2 Wage Detail DO NOT INCLUDE S.U.B. Pay, or unemployment compensation

Attach Pontiac copy of Form(s) W-2

Employer's name	Street address of actual work location(s)	Column A Total wages from Box 1 of W-2	Column B Pontiac Tax withheld	Column C Wages earned in Pontiac from Schedule 4 (NOT BOX 18)
		.00	.00	.00
		.00	.00	.00
		.00	.00	.00
If additional lines are needed--attach schedule		Totals 1a.	1b.	1c.
		.00	.00	.00

Schedule 3 Payments

1. Tax withheld by your employer from Schedule 2, line 1b	1.	.00
2. Payments and credits on 2019 Declaration of estimated payments (1040-ES), credit from 2018 P-1040NR, payment with extension or from partnership return P-1065.	2.	.00
3. Total payments--add lines 1 and 2--enter here and on line 8 of RETURN SUMMARY below	3.	.00

RETURN SUMMARY	1. Total wages, salaries and tips from Schedule 2, line 1c. Attach your W-2 form(s)	1.	.00
	2. Other income/loss from Page 2, Schedule 5, line 6	2.	.00
	3. Deductions from Page 2, Schedule 6, Line 8 (Enter as negative amount)	3.	.00
	4. Combine lines 1, 2 and 3. This is your total Pontiac income	4.	.00
Exemptions	5. Enter number of exemptions from Schedule 1, line 3 here ____ then multiply by \$600.00 and enter in box 5	5.	.00
Taxable Income	6. Subtract line 5 from line 4. This is your taxable income	6.	.00
Tax	7. Multiply line 6 by one-half of one percent (.005) This is your Pontiac tax Tax >>>	7.	.00
Payments	8. Total of Pontiac payments from Schedule 3, line 3 above Payments >>>	8.	.00
Tax Due	9. If tax (line 7) is larger than payments (line 8) enter amount you owe. MAKE CHECK PAYABLE TO "CITY OF PONTIAC" OR PAY WITH A DIRECT ELECTRONIC WITHDRAWAL (Mark pay tax due, line 14b, and complete lines 14 c,d,e & f) Pay With Return >>>	9.	.00
Overpayment	10. If payments (line 8) are larger than tax (line 7) ENTER OVERPAYMENT Overpayment >>>	10.	.00
Credit to 2020	11. Amount of overpayment to be held and applied to your 2020 estimated tax Credit to 2020 >>>	11.	.00
Donation	12. Overpayment donated to City of Pontiac Donation >>>	12.	.00
Refund	13. Amount of overpayment to be refunded (For direct deposit, mark refund box, line 14a, and complete lines 14 c,d,e & f) Refund >>>	13.	.00
Direct Deposit or Direct Payment	14. Direct deposit refund or direct withdrawal payment Mark one: 14a <input type="checkbox"/> Refund-direct deposit 14b <input type="checkbox"/> Pay tax due-direct withdraw c. Routing number <input style="width: 50px;" type="text"/> e. Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings (Default is date processed) d. Account number <input style="width: 50px;" type="text"/> f. Withdrawal date: <input style="width: 50px;" type="text"/>		

I have read this return. Under the penalties of perjury, I declare that to the best of my knowledge and belief the return is true, correct and accurately lists all amounts and sources of Pontiac income I received during the tax year. If prepared by a person other than the taxpayer, his/her declaration is based on all information of which he/she has any knowledge.

PLEASE SIGN HERE	Your signature		Spouse's signature if joint return		Paid preparer's signature	
	Date	Your occupation	Date	Spouse's occupation	Address	

Schedule 4 Wages Earned in Pontiac

A SEPARATE COMPUTATION MUST BE MADE FOR EACH JOB PERFORMED BOTH INSIDE AND OUTSIDE OF PONTIAC

	EMPLOYER #1	EMPLOYER #2
1. Actual number of days/hours paid while employed for each employer:	1.	1.
2. Number of vacation, holiday and sick days/hours included in time paid for each employer:	2.	2.
3. Actual number of days/hours WORKED for each employer (Line 1 less Line 2.)	3.	3.
4. Actual number of days/hours WORKED INSIDE Pontiac (provide documentation from employer/supervisor)	4.	4.
5. Percentage of days/hours worked in Pontiac (line 4 divided by line 3)	5. %	5. %
6. Total wages shown in Box 1 of W-2	6. .00	6. .00
7. Wages earned in Pontiac (line 6 multiplied by percentage on line 5) Enter here and in Column C, "Wages earned in Pontiac," on Schedule 2	7. .00	7. .00

IMPORTANT! You must provide the street address of your work station outside of Pontiac on Schedule 2 or on additional documentation, or your allocation will be disallowed.

Schedule 5 Other Income/Loss

INCLUDE INCOME/LOSS ONLY TO THE EXTENT THAT THE INCOME/LOSS IS RELATED TO PONTIAC--SEE INSTRUCTIONS

1. Income/loss from business--Federal Schedule C	1a. .00	SEP deduction	1b. .00	1c. .00
2. Income/loss from rents/royalties--Federal Schedule E, page 1 (include copy of form with return)				2. .00
3. Income/loss from partnerships--Federal Schedule E, page 2 (include copy of form with return)				3. .00
4. Income/loss from sale or exchange of tangible property in Pontiac (Capital gains)--Federal Schedule D/Form 8949				4. .00
5. Premature pension and IRA/401k distributions if previously deducted from Pontiac income.				5. .00
6. Total--combine lines 1c. through 5--enter here and on page 1, line 2 of RETURN SUMMARY				6. .00

Schedule 6 Deductions

1. IRA deduction--attach Schedule 1 of Federal 1040 (No deduction is allowed for contributions to a ROTH IRA)	1. .00
2. Employee business expenses--see instructions and attach detailed list	2. .00
3. Moving expenses--see instructions and if eligible, attach Federal 3903	3. .00
4. Subtotal--add lines 1 through 3	4. .00
5. % from Schedule 4, line 3 (enter 100% if Schedule 4 is not required)	5. %
6. Multiply line 4 by line 5	6. .00
7. Allowable alimony deductions--see instructions and Schedule 1 of Federal 1040	7. .00
8. Total deductions--add lines 6 and 7--enter here and on page 1, line 3 of RETURN SUMMARY	8. .00

Worksheet 1

USE THIS WORKSHEET TO CALCULATE THE BUSINESS INCOME OR LOSS ATTRIBUTABLE TO PONTIAC IF YOU OPERATE YOUR SCHEDULE C BUSINESS PARTLY WITHIN PONTIAC AND PARTLY OUTSIDE PONTIAC.

1. Net profit or loss from business--from Federal Schedule(s) C	1. .00
2. LESS: SEP deduction--attach copy of Schedule 1 of Federal Form 1040	2. .00
3. Subtotal--subtract line 2 from line 1	3. .00
4. Apportionment percentage from Worksheet 2 below (line 12)	4. %
5. Apportioned income--multiply line 3 by line 4	5. .00
6. LESS: applicable portion of net operating loss carryover	6. .00
7. Total--subtract line 6 from line 5--enter here and on Schedule 5, line 1c.	7. .00

Worksheet 2 Business Allocation Formula

	A	B	B Divided by A
	Located Everywhere	Located in Pontiac	Percentage
8. Average net book value of real and tangible personal property			
a. Gross rent paid for real property only , multiplied by the factor 8			
b. Total--add lines 8 and 8a.			%
9. Total wages, salaries, commissions and other compensation of employees			%
10. Gross receipts from sales made or services rendered			%
11. Total percentages--add the three percentages computed for lines 8, 9 and 10 which you entered in the last column			%
12. Average percentage -- divide line 11 by 3 -- enter here and on line 4 of Worksheet 1 above			%

If you have any questions regarding the City of Pontiac Income Tax, please call (248) 758-3236

Third Party Designee

Do you want to allow another person to discuss this return with the Income Tax Division?

No

Yes--Complete the following:

Designee's Name:

Phone No. ()