2013 MICHIGAN Farmland Preservation Tax Credit Claim MI-1040CR-5

Issued under authority of Public Act 281 of 1967.

Attach to Form MI-1040. Type or print in blue or black ink. Print numbers like this: $\it O/23456789$ - NOT like this: Ø $\it 1$ -	4	7
•		_

1. Filer's First Name		M.I. Last Name		2. Filer's Social Secu	2. Filer's Social Security No. (Example: 123-45-6789)			
a Jo	int Return, Spouse's First Name	M.I.	Last Name		3. Spouse's Social Soci	ecurity N	lo. (Example: 12	3-45-6789)
AR	Γ 1: COMPUTATION OF (CREDI	T — Complete a Schedule CR-5	before co	ompleting Part 1.			
4.	Total taxes for all agreemen	ts from	Schedule CR-5, line 3, column F			4.		0
5.	Check this box if all of are included in line 4.	your ta	xes that qualify for a homestead	oroperty t	ax credit			
6.			5, enter the taxes on your home ra Farmland Developmental Rig					0
7.	Total. Add lines 4 and 6					7.		c
8.	Total Household Resources	from M			00]		
9.	Total Loss Adjustment from (must be less than zero)		page 2	9.	00			
0.	Total Household Income, co	mbine	ines 8 and 9	10.	00	<u> </u>		
1.	Depletion allowance claimed	d on yo	ur federal return	11.	00			
2.	Total. Add lines 10 and 11			12	00			
3.			mland Developmental Rights	13.	00			
4.	Multiply line 12 by 3.5% (0.0	35). If	negative, enter "0"	14.	00			
5.	Subtract line 14 from line 13	3		15.	00			
6.	Homestead Property Tax Cr	edit fro		16	00]		
7.	Total Property Tax Credits.	Add line	es 15 and 16			17.		c
LIN	IE 17 IS LESS THAN LINE 7	, CARI	RY THE AMOUNT FROM LINE 1	5 TO YO	UR MI-1040, LINE 20	6, AND	STOP HER	E
8.	If line 17 is greater than 7, e	enter the	e amount from line 7			18.		c
9.	Enter the amount from line	16				19.		
			here and on Form MI-1040, line					

Continued on Page 2.

Filer's Social Security No.	

PART 2: SIGNED DISTRIBUTION STATEMENT FOR JOINT OWNERS

Complete only if you are a joint owner with someone other than your spouse. Part 2 must be signed by all joint owners.

A		В	С	D	E
Agreement Number County Code Expiration Date 2 digits) Contract Number (Enter as MM-DD-YY)		Partner's or Joint Owner's Social Security Number	Partner's or Joint Owner's Percentage of Income	Joint Owner Percentage	's Signatures are required of all partners
			%		%
			%		%
			%		%
			%		%
					%
	Agreement Nu	Agreement Number Expiration Date	Agreement Number Partner's or Expiration Date Joint Owner's	Agreement Number Expiration Date (Enter as MM-DD-YY) Partner's or Joint Owner's Social Security Number % % % % % % %	Agreement Number Expiration Date (Enter as MM-DD-YY) Partner's or Joint Owner's Percentage of Income % % % % % % % % % % % % %

PART 3: NET BUSINESS/FARM LOSS

Taxpa	ayers that had a net loss from business or farm on MI-1040CR line 16, MI-1040CR-2 line 15, MI-1040	CR-	7 line 18	
21.	Business income or (loss) from U.S. Form 1040	21.		0
00	F	00		

PART 4: NET ROYALTY/RENT LOSS

PART 5: NET OPERATING LOSS