CITY OF DETROIT FINANCE DEPARTMENT INCOME TAX DIVISION COLEMAN A. YOUNG MUNICIPAL CENTER 2 WOODWARD AVE., SUITE 1220 DETROIT, MICH. 48226-3456

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ESTIMATE TAXPAYMENT VOUCHERS

for 2015

FORM D1040 (ES)

- 1. PURPOSE OF CITY OF DETROIT ESTIMATED INCOME TAX VOUCHERS

- Payment vouchers are provided for paying currently any income tax due in excess of the tax withheld.

 2. WHO MUST MAKE ESTIMATED TAX PAYMENTS:

 A. Individuals and Unincorporated Businesses Every resident and nonresident subject to the tax from whom the tax is not withheld must pay Estimated Income Tax. A payment is not required from individuals and unincorporated businesses, if the estimated tax on line 6 is One Hundred Dollars (\$100.00) or less. A husband and wife may make joint payments unless they are legally separated or divorced, or have different taxable vears.
- taxable years.

 B. Corporations Every Corporation subject to the tax on all or part of its net profits must make payments of Estimated Income Tax. A payment is not required from corporations, if the estimated tax on line 6 is Two Hundred Fifty Dollars (\$250.00) or less.

 C. Partnerships A partnership whose partners are subject to the tax on all or part of their distributive share of net profits may make payments of Estimated Income Tax. If the partnership makes payments, the partnership whose payments as individuals, unless they have other income on which the Detroit income tax is expected to exceed One Hundred Dollars (\$100.00). The payments made by the partnership should be accompanied by a statement showing the names, addresses and social security numbers of the partners on whose behalf the payments are being made.

 3. WHEN AND WHERE TO PAY ESTIMATED TAX:

- A. First Payment for Calendar Year The First Payment for a calendar year must be filed on or before April 30th of that year. The estimated tax is payable in equal installments on or before Apr. 30th, June 30th, Sept. 30th and Jan. 31st.

 B. First Payment for Fiscal Year — The First Payment for a fiscal year, or period differing from the calendar year, must be filled within four (4) months after the beginning of each fiscal year or period. For example, if
- your fiscal year begins on April 1st, your first payment will be due on July 31st. Remaining installments will then be due on the last day of the 6th, 9th and 13th months after the beginning of the fiscal year.

 C. Filing and Payment The First Payment should be filed with the Treasurer, City of Detroit-Income Tax, P.O. Box 67000, Detroit, Michigan 48267-0216. The first installment payment may be made or you may pay in full. We do not send reminder notices requesting estimated tax installment payments. Please send your payments with the attached vouchers when due. Put your social security number on your check.

 INCOME SUBJECT TO TAX:

- The payment of estimated tax does not excuse the taxpayer from filing an annual return.

(Keep For Your Records — Do Not File) **ESTIMATED TAX WORKSHEET**

RECORD OF 2015 ESTIMATED TAX PAYMENTS

1.	Taxable Income Expected in 2015	\$.00.
2.	Exemptions (\$600 For Each Exemption)		.00
3.	Estimated Detroit Taxable Income (Line 1 less line 2)		.00
4.	Estimated Detroit Income Tax Resident Individuals enter 2.40% of line 3 Nonresident Individuals enter 1.20% of line 3 Corporation enter 2.0% of line 3		.00
5.	Amount of Detroit Income Tax to be withheld or other credit expected		.00
6.	ESTIMATED TAX (Line 4 less line 5)		.00
7.	Computation of Installment: Check Due Date of declaration below and enter portion of line 6 as indicated:		
	□ Apr. 30, 2015 - 1/4; □ June 30, 2015 - 1/3; □ Sept. 30, 2015 - 1/2; □ Jan. 31, 2016 - 100%		.00
8.	Amount of overpayment from last year elected to be credited to this year's estimated tax.		
9.	Amount to be paid (Line 7 less line 8)	\$ \$.01
	2014 OVERDAVMENT		TOTAL AMOUNT

VOUCHER NUMBER	A DATE	B AMOUNT PAID	2014 OVERPAYMENT CREDIT APPLIED TO INSTALLMENT		TOTAL AMOUNT PAID AND CREDITED ADD (B) AND (C)	
1		.00		.00	.00	
2		.00		.00	.00	
3		.00		.00	.00	
4		.00		.00	.00	
TOTAL		.00		.00	.00	

The disclosure of Social Security account number(s) on this tax return is mandatory. This solicitation and use of Social Security account numbers is authorized by federal law (42 USC § 405(c)(2)(C)(i)). Michigan law (MCL 141.642) and City of Detroit ordinance (1984 Detroit City Code § 18-10-11). The City of Detroit uses Social Security account numbers in the administration of its income tax law for the purpose of establishing taxpayer identification, to automate and unify its tax reporting and collection, and as otherwise needed for the administration of the City's income tax laws.

Under 1984 Detroit City Code § 18-10-16, any information gained by the income tax administrator, City treasurer, or other City official, agent or employee as a result of a tax return, investigation, hearing or verification required or authorized by the Uniform Income Tax Ordinance is confidential, except for official purposes in connection with the administration of the ordinance, and except in accordance with a proper judicial order.

D-1040-ES 2015 CHECK BOX FOR FISCAL YEAR BEGINNING IN 2014	MAKE CHECK & MAIL TO	DEPT. 21601 TREASURER CITY OF DETROIT INCOME TAX P.O. BOX 67000 DETROIT. MICHIGAN 48267-0216		PLEASE
YOUR SOCIAL SECURITY NO.	SPOUSE	E'S SOCIAL SECURITY NO.	Calendar Year — Due June 30, 2015 CORPORATION □ OR PARTNERSHIP □ FEDERAL I.D. NUMBER	TYPE
LAST NAME			CITY OF DETROIT	OR
FIRST		MID. INIT.	ESTIMATED TAX PAYMENT	PRINT
SPOUSE'S FIRST (IF JOINT)		MID. INIT.	AMOUNT	
ADDRESS			OF PAYMENT \$00	REMOVE THIS
CITY	S.	TATE ZIP	Fiscal year filers enter year ending (month and year)	STUB BEFORE
RETURN THIS VOUCHER WITH CH			(To be used for making payment)	MAILING
		DEPT. 21601	·	
D-1040-ES 2015	MAKE CHECK & MAIL TO	TREASURER CITY OF DETROIT INCOME TAX	Voucher 1	
☐ CHECK BOX FOR FISCAL YEAR BEGINNING IN 2014				
		P.O. BOX 67000 DETROIT, MICHIGAN 48267-0216	Calendar Year — Due April 30, 2015	PLEASE
YOUR SOCIAL SECURITY NO.	SPOUSI		Calendar Year — Due April 30, 2015 CORPORATION ☐ OR PARTNERSHIP ☐ FEDERAL I.D. NUMBER	TYPE
YOUR SOCIAL SECURITY NO. LAST NAME	SPOUSI	DETROIT, MICHIGAN 48267-0216	CORPORATION OR PARTNERSHIP FEDERAL I.D. NUMBER	
	SPOUSI	DETROIT, MICHIGAN 48267-0216	CORPORATION OR PARTNERSHIP FEDERAL I.D. NUMBER CITY OF DETROIT ESTIMATED	TYPE
LAST NAME	SPOUSI	DETROIT, MICHIGAN 48267-0216 E'S SOCIAL SECURITY NO.	CORPORATION OR PARTNERSHIP FEDERAL I.D. NUMBER CITY OF DETROIT ESTIMATED TAX PAYMENT	TYPE
LAST NAME FIRST	SPOUSI	DETROIT, MICHIGAN 48267-0216 E'S SOCIAL SECURITY NO. MID. INIT.	CORPORATION OR PARTNERSHIP FEDERAL I.D. NUMBER CITY OF DETROIT ESTIMATED	TYPE OR PRINT
LAST NAME FIRST SPOUSE'S FIRST (IF JOINT) ADDRESS		MID. INIT. MID. INIT.	CORPORATION OR PARTNERSHIP FEDERAL I.D. NUMBER CITY OF DETROIT ESTIMATED TAX PAYMENT AMOUNT OF PAYMENT Fiscal year filers enter year ending	TYPE OR PRINT
LAST NAME FIRST SPOUSE'S FIRST (IF JOINT)		DETROIT, MICHIGAN 48267-0216 E'S SOCIAL SECURITY NO. MID. INIT.	CORPORATION OR PARTNERSHIP FEDERAL I.D. NUMBER CITY OF DETROIT ESTIMATED TAX PAYMENT AMOUNT OF PAYMENT Fiscal year filers	TYPE OR PRINT REMOVE THIS STUB

D-1040-ES 2015	MAKE CHECK & MAIL TO	DEPT. 21601 TREASURER CITY OF DETROIT INCOME TAX	Voucher	4	
☐ CHECK BOX FOR FISCAL YEAR BEGINNING IN 2014		P.O. BOX 67000 DETROIT, MICHIGAN 48267-0216	Calendar Year -	— Due January 31, 2016	PLEASE
YOUR SOCIAL SECURITY NO.	SPOUS	E'S SOCIAL SECURITY NO.	CORPORATION FEDER	N □ OR PARTNERSHIP □ RAL I.D. NUMBER	TYPE
LAST NAME			CITY O	F DETROIT	– OR
FIRST MID. INIT.			ES	PRINT	
SPOUSE'S FIRST (IF JOINT) MID. INIT.			AMOUNT	PAYMENT	
ADDRESS			OF PAYMENT \$.00	REMOVE THIS
			Fiscal year filers enter year ending		STUB BEFORE
CITY STATE ZIP				(month and year)	MAILING
RETURN THIS VOUCHER WITH CH	ECK OR MONEY O	RDER	(To be used	for making payment)	
D-1040-ES 2015	MAKE CHECK & MAIL TO	DEPT. 21601 TREASURER CITY OF DETROIT INCOME TAX	Voucher	3	
☐ CHECK BOX FOR FISCAL YEAR BEGINNING IN 2014		P.O. BOX 67000 DETROIT, MICHIGAN 48267-0216	Calendar Year —	- Due September 30, 2015	PLEASE
YOUR SOCIAL SECURITY NO.	SPOUS	E'S SOCIAL SECURITY NO.		N □ OR PARTNERSHIP □ RAL I.D. NUMBER	TYPE
LAST NAME			CITY O	F DETROIT	- OR
FIRST MID. INIT.			ES	TIMATED	PRINT
SPOUSE'S FIRST (IF JOINT) MID. INIT.			AMOUNT	PAYMENT	
ADDRESS			OF PAYMENT \$.00	REMOVE THIS
			Fiscal year filers enter year ending		STUB BEFORE
CITY STATE ZIP				(month and year)	MAILING
RETURN THIS VOUCHER WITH CH	RDER	(To be used	for making payment)		

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DEPT 21601 INCOME TAX - ESTIMATE TREASURER CITY OF DETROIT PO BOX 67000 DETROIT MI 48267-0216

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