Taxpayer's name		Taxpayer's	Taxpayer's SSN		2015 LANSING		
WAGES AND EXCLUDIBLE W. All W-2 forms must be attached		-	PAGE 1,	LINE 1, CO	LUMN B		Attachment 2-1  Revised 04/29/2015
Use this form to provide details for all Forms W-			eral Forms 104	10 (line 7),1040A (	line 7), or 1040EZ (line	1) such as: wages	
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 defe	n on Form 1099-R if rrals and/or excess o	the taxpayer has not reacontributions (plus earni	ached the minir ings); wages fro	mum retirement a om Form 8919, lin	ge set by the employer; e 6; and other wage iter	corrective distribuns not included in	tions from a retirement plan a Form W-2.
Use this form to calculate excludible (nontaxable employer are also reported on Form CF-1040, p	e) wages included in age 2, Excluded Wa	total wages reported on ges and Tax Withheld S	your federal ta Schedule and th	ix return (Forms 1 ne total amount of	040, line 7; 1040A; line excludible wages is rep	7; or 1040EZ, line orted on Form CF	1). Excludible wages for each -1040, page 1, line 1, column B.
WAGES, ETC.	Employ	er (or source) 1		Employer (	or source) 2	Emp	oloyer (or source) 3
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 the Lansing							
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)  8. Wages, tips, other compensation							
(Form W-2, Box 1)							
Wages not included in Form W-2, box 1     (See instructions)							
10. Code for wage type reported on line 9							
NONRESIDENT WAGE ALLOCATION	Employ	/er (or source) 1		Employer (	or source) 2	Emp	oloyer (or source) 3
For use by nonresidents or part-year residents we must use the wage allocation to determine wage							
work time for an employer in the Lansing should						ompatationo). Hon	residents working all or their
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 of Lansing							
Actual number of days or hours worked     (Line 11 less line 12)							
Enter actual number of days or hours worked in Lansing							
Percentage of days or hours     worked in Lansing (Line 14 divided by line 13; default is 100%)			%		9	6	%
Wages earned in Lansing (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	Employ	er (or source) 1		Employer (	or source) 2	Emp	oloyer (or source) 3
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 Lansing							
Total excludible wages (Line 17 plus line     18; Enter here and on L-1040, page 2,     Excluded Wages schedule)							
21. Total taxable wages (Line 8 plus line 9 less line 20)							
22. Total wages (Add lines 8 and 9 for all emplo amount reported on Form L-1040, page 1, li	ine 1, column A; Part		ı				
must equal amount reported on Schedule T 23. Total excludible wages from all employers a Form L-1040, page 1, line 1, column B; part	and other sources (A						
Total taxable wages from all employers and residents enter here and allocate on Schedi			nere and also or	n Form L-1040, pa	age 1, line 1, column C;	part-year	

Taxpayer's name		Taxpayer's SSN		2015 LANSIN			
WΔC	SES AND EXCLUDIBLE W	AGES SCHEDU	 	F 1 LINE	E 1 COLUMN B		Attachment 2-2
			•	L I, LINE	I, COLOWIN B		
	V-2 forms must be attaches form to provide details for all Forms W-			ma 1040 (lina	7) 10404 (line 7) or 1040E7 (line 1)	auch ac: wages	Revised 04/29/2015
	ee for which you did not receive a W-2; ti						
	d on Form W-2; disability pensions show						
	on Form 1099-R from excess salary defe						
Use thi	s form to calculate excludible (nontaxable er are also reported on Form CF-1040, p	e) wages included in total	wages reported on your fe	deral tax retur	n (Forms 1040, line 7; 1040A; line 7;	or 1040EZ, line	1). Excludible wages for each
	S, ETC.	Employer	(or source) 4	E	mployer (or source) 5	Emp	oloyer (or source) 6
	nployer's ID number (W-2, box b) or urce's ID Number if available						
	nployer's name (Form W-2, box c) or urce's name						
3. SS	SN from Form W-2, box a						
	ter T for taxpayer or S for spouse	_					
	<u> </u>			_		_	
5. Da	ites of employment during tax year	From	То	From	То	From	То
-	ark (X) box If you work at multiple cations in and out of the Lansing	L					
7. Ac	dress of work station (Where you						
	tually work, not address on Form W-2						
	less you work there: include street						
	mber and street name, city, state and code; if line 6 is checked enter						
	mary work location)						
	ages, tips, other compensation						
	orm W-2, Box 1)						
	ages not included in Form W-2, box 1						
,	ee instructions)						
10. 00	ode for wage type reported on line 9						
NONR	ESIDENT WAGE ALLOCATION	Employer	(or source) 4	Er	mployer (or source) 5	Emp	oloyer (or source) 6
	by nonresidents or part-year residents w						
	se the wage allocation to determine wage					nputations). Non	residents working all of their
	ne for an employer in the Lansing should	skip this Nonresident W	age Allocation section for the	iat employer a I	is all of their wages are taxable.	I	
	ter actual number of days or hours on of for employer during period (Do not						
	clude weekends you did not work)						
	cation, holiday and sick days or hours						
inc	cluded in line 11, only if work performed						
	and outside of Lansing						
	tual number of days or hours worked ne 11 less line 12)						
,	<u> </u>						
	rter actual number of days or hours orked in Lansing						
15. Pe	rcentage of days or hours						
	orked in Lansing (Line 14 divided by		%		%		%
	e 13; default is 100%) ages earned in Lansing (Total of lines 8						
	d 9 multiplied by line 15; part-year						
	sidents use only the portion of wages						
	rned while a nonresident)						
EXCI	UDIBLE WAGES	Employer	(or source) 4	Ε,	mployer (or source) 5	Emr	oloyer (or source) 6
	ter nonresident excludible wages (Total	Employer	(or source) 4		Tiployer (or source) 5	EIIIk	bloyer (or source) o
	lines 8 & 9 less line 16)						
18. Er	ter resident excludible wages						
19. Er	ter reason excludible wages reported on						
	es 17 and/or 18 are not taxable by						
	nsing						
	tal excludible wages (Line 17 plus line						
	; Enter here and on L-1040, page 2, cluded Wages schedule)						
	tal taxable wages (Line 8 plus line 9						
	s line 20)			1			

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

Taxpayer's name		Taxpayer's SSN		2015 LANSING		
WAGES AND EXCLUDIBLE W All W-2 forms must be attached		-	E 1, LINE 1	, COLUMN B		Attachment 2-3 Revised 04/29/2015
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 CF-1040, p	2 and all other wage income repoips reported on federal Form 4137 non Form 1099-R if the taxpayer grals and/or excess contributions and wages included in total wages reported.	rted on federal Forn ; taxable dependen has not reached the (plus earnings); was eported on your fed	t care benefits; e e minimum retire ges from Form 8 eral tax return (F	mployer-provided adoption benel ment age set by the employer; co 919, line 6; and other wage items orms 1040, line 7; 1040A; line 7;	fits; scholarship rrective distribut not included in or 1040EZ, line	and fellowship grants not tions from a retirement plan a Form W-2. 1). Excludible wages for each
WAGES, ETC.	Employer (or sou			oyer (or source) 8		ployer (or source) 9
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						
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 the Lansing						
<ol> <li>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)</li> </ol>						
Wages, tips, other compensation (Form W-2, Box 1)						
Wages not included in Form W-2, box 1     (See instructions)						
10. Code for wage type reported on line 9						
NONRESIDENT WAGE ALLOCATION  For use by nonresidents or part-year residents v	Employer (or sou	,		oyer (or source) 8		oloyer (or source) 9
must use the wage allocation to determine wage work time for an employer in the Lansing should	es earned in Lansing while a nonre	esident (use only wa	ages and days wo	orked while a nonresident for com		
<ol> <li>Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work)</li> </ol>						
<ol> <li>Vacation, holiday and sick days or hours included in line 11, only if work performed in and outside of Lansing</li> </ol>						
Actual number of days or hours worked     (Line 11 less line 12)						
Enter actual number of days or hours worked in Lansing						
Percentage of days or hours     worked in Lansing (Line 14 divided by line 13; default is 100%)		%		%		%
Wages earned in Lansing (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) 7	Empl	oyer (or source) 8	Emp	oloyer (or source) 9
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)						
18. Enter resident excludible wages						
<ol> <li>Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by Lansing</li> </ol>						
Total excludible wages (Line 17 plus line     18; Enter here and on L-1040, page 2,     Excluded Wages schedule)						
21. Total taxable wages (Line 8 plus line 9						

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