2021 MICHIGAN Individual Income Tax Return MI-1040

2021 MICHIGAN Return is due April 18, :				tetur	n IVII-1	040	J		•		ended Return ude Schedule AMD)		l
1. Filer's First Name	M.I.	Last Name	ICK IIIK.				Filer's	e Full	Social Sec	surity l	No. (Example: 123-45-	3780	
VIJAYA		NANNAPANE	NI			_				-		0109	,
If a Joint Return, Spouse's First Na	ame M.I.	Last Name			1					79			
Home Address (Number, Street, o	r P.O. Box)					3	. Spou	se's F	ull Social	Secur	ity No. (Example: 123-	45-67	'89)
7255 TEXAS RANG		APT. 1207											
City or Town		Sta	te ZIP	Code		4	. Scho	ol Dis	trict Code	(5 dig	its – see page 60)		
FRISCO		T	x 7	75034	:				0000	. 0	, ,		
5. STATE CAMPAIGN FUN	D				6. FAR	MERS	, FIS	HER	MEN, OR	SEA	AFARERS		
Check if you (and/or your filing a joint return) want to go to this fund. This wi your tax or reduce your re	\$3 of your taxes Il not increase	a. Filer	se			Chec fishin				our ir	ncome is from farmir	ıg,	
7. 2021 FILING STATUS. C	check one.				8. 2021	RES	IDEN	CY S	TATUS.	Chec	k all that apply.		
a. X Single		ou check box "c," cor			a	Resi	dent						
b. Married filing jointly		B and enter spouse's v:	full nam	ie	b. X	Non	reside	ent *			* If you check box "k "c," you must comple and include Sched	ete	
c. Married filing separ	rately*				c	Part	-Year	Resi	dent *		NR.		
9. EXEMPTIONS. NOTE:	If someone els	e can claim you as a	depend	ent, che	ck box 9e,	enter	0 on I	ine 9	a and en	ter \$1	1,500 on line 9e (see	ins	tr.).
a. Number of exemption	ns (see instruction	ons)			9a	l.	1	x	\$4,900	9a.	49(00	00
 b. Number of individuals blind, hemiplegic, pa 								x	\$2,800	9b.			00
c. Number of qualified of				-				x	\$400	9c.			00
d. Number of Certificate						ı.		×	\$4,900	9d.			00
e. Claimed as depende	nt, see line 9 NO	OTE above			9e	. <u> </u>				9e.			00
f. Add lines 9a, 9b, 9c,	9d and 9e. Ent	er here and on line 1	5							9f.	490	00	00
10. Adjusted Gross Incom	e from your U.S	6. Form <i>1040</i> (see ins	struction	s)					10.		2710) 4	00
11. Additions from Schedule	e 1, line 9. Inclu	de Schedule 1							11.				00
12. Total. Add lines 10 and	11								12.		2710) 4	00
13. Subtractions from Sche	dule 1, line 29.	Include Schedule 1							13.		2187	71	00
14. Income subject to tax.	Subtract line 13	3 from line 12. If line	13 is gre	eater tha	n line 12, e	enter '	'0"		14.		523	33	00
15. Exemption allowance.	Enter amount fo	om line 9f or Schedu	ıle NR, li	ine 19					15.		94	16	00
16. Taxable income. Subtra	act line 15 from	line 14. If line 15 is ç	greater tl	han line	14, enter "(0"			16.		428	37	00
17. Tax. Multiply line 16 by					AMOU				17.		18	32	00
Income Tax Imposed by Include a copy of the re-	government un							00	18b.				00
Michigan Historic Prese instructions)	rvation Tax Cred	dit carryforward (see						00	19b.				00
20. Income Tax. Subtract the lifthe sum of lines 18b a	ne sum of lines	18b and 19b from line	e 17.						20.		18	32	

2021 N	II-1040, Page 2 of 2									
		F	iler's Full Social S	ecurity Number	r 6	64 -	_ '	79 41	09	
21.	Enter amount of Income Tax from li	ine 20					21.		182	00
22.	Voluntary Contributions from Form						22.			00
	•									
23.	USE TAX. Use tax due on Internet, Worksheet 1 (see instructions)						23.		0	00
24	Total Tax Liability. Add lines 21, 22	2 and 23				24			182	00
	JNDABLE CREDITS AND PAYN									
25.	Property Tax Credit. Include MI-1	040CR or MI-1040	CR-2				25.			00
26.	Farmland Preservation Tax Credi	it. Include MI-1040	CR-5				26.			00
				FEI	DERAL		_	MICHIGA	N.	
27.	Earned Income Tax Credit. Multiply enter result on line 27b	line 27a by 6% (0.0	06) and			00	27b.			00
28.	Michigan Historic Preservation Tax		_	3581			28.			00
29.	Credit for allocated share of tax pai	` ,					29.			00
		,g	g,	(, , , , , , , , , , , , , , , , , , , ,					
30.	Michigan tax withheld from Schedu	le W, line 6. Includ	e Schedule W ((do not subn	nit W-2s)		30.		222	00
31.	Estimated tax, extension payments	and 2020 credit for	rward				31.			00
32.	2021 AMENDED RETURNS ONLY	. Taxpayers comple	eting an original	2021 return s	should skip to	line 33.	Γ			
	Amended returns must include Sci									
	32a. If you had a refund and/or negative number on line 3:		original return, che	eck box 32a an	d enter this amo	ount as a				
	32b. If you paid with the origina any additional tax paid after	al return, check box 32					32c.			00
	any additional tax paid and	er illing, as a positive i	number on line 320	c. Do not includ	ie interest or per	Ilaity.	020.1			
33.	Total refundable credits and payme	nts. Add lines 25, 2	26, 27b, 28, 29, 3	30, 31 and 32	2c	33.			222	00
	JND OR TAX DUE					_				
34.	If line 33 is less than line 24, subtra	act line 33 from line	24. If applicable	e, see instruct	ions.					
	In about a find a most			,	OU OWE					
	Include interest00 a	and penalty	00	\	TOU OWE	34.				00
35.	Overpayment. If line 33 is greater	than line 24, subtra	ct line 24 from li	ine 33		35.			40	00
26	Credit Forward Amount of line 25	to be exadited to w	our 2022 actimat	tad tay far ya	ur 2022 tov ro	t	26			امما
30.	Credit Forward. Amount of line 35	to be credited to yo	our 2022 estima	ied tax for yo	ur 2022 tax re	rum	36.			00
37.	Subtract line 36 from line 35				REFUND	37.			40	00
	ECT DEPOSIT	a. Routing Train			Account Number			c. Type of Acco		
	it your refund directly to your financial tion! See instructions and complete a, b						1.	X Checking 2.	Savin	gs
and c.		041000124	1	41622	54044 					
	eased Taxpayer. If Filer and/or Spous							declare under penalty		
ENTE	ER DATE OF DEATH ONLY. Example	: 04-15-2021 (MM-DD	0-YYYY)					tion of which I have ar	ıy knowlede	ge.
Filer		Spouse		-	Preparer's PTII	703				
	ayer Certification. I declare under tachments is true and complete to the bes		t the information in	n this return	Preparer's Nan SYAM PI	**		SAGAR GUI	PTA T	A
	Signature	<u> </u>	Date		Preparer's Sign		D 7/ 1/4	SAGAR GUI	 PTA T.	7\
Spous	se's Signature		Date					ess and Telephone Nu		
			2		GLOBAL			•		
					2530 PI					
	By checking this box, I authorize Tre	easury to discuss m	ny return with m	y preparer.	CUMMING					
╵┶┙	,g and 2000, I damonize III	, 15 a.50a00 ii	,	,	678-96					

Refund, credit, or zero returns. Mail your return to:

Michigan Department of Treasury, Lansing, MI 48956

Pay amount on line 34 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

2021 MICHIGAN Schedule 1 Additions and Subtractions

Issued under authority of Public Act 281 of 1967, as amended.

Include with Form MI-10	40. Type or print i	n blue or black ink.			Attachmen	t 01
Filer's First Name	M.I.	Last Name	Filer's Full Soci	al Security No. (Ex	(ample: 123-45-6789)	
VIJAYA		NANNAPANENI	664 -	 79	4109	
Additions to Income	(all entries mus	t be positive numbers)				
		oligations issued by states al subdivisions		1.		00
		oy income, including self-employme tax paid by an electing flow-through		2.		00
3. Gains from Michiga	an column of MI-1	040D and MI-4797		3.		00
4. Losses attributable	to other states (s	ee instructions)		4.		00
5. Net loss from feder	al column of your	Michigan MI-1040D or MI-4797		5.		00
. 0		neral expenses (Michigan sourced	,	6.		00
7. Federal Net Opera	ting Loss deduction	on included in AGI		7.		00
8. Other (see instructi	ions). Describe: _			8.		00
9. Total additions. A	dd lines 1 throu	gh 8. Enter here and on MI-1040,	line 11	9.	0	00
Subtractions from In	come (all entrie	s must be positive numbers)				
		s and other U.S. obligations includ		10.		00
		from military retirement benefits d onal Guard, or taxable railroad retin		11.		00
12. Gains from federal	column of Michig	an MI-1040D and MI-4797		12.		00
13. Income attributable	to another state.	Explain type and source: SCHE	DULE NR	13.	21871	00
14. Taxable Social Sec	urity benefits or r	nilitary pay (not retirement) include	ed on MI-1040, line 10	14.		00
15. Income earned whi	le a resident of a	Renaissance Zone (see instructio	ns)	15.		00
on MI-1040, line 10) (see instructions	refunds received in 2021 and inclusion (16.		00
<u> </u>		m, MI 529 Advisor Plan, and Michi	0	17.		00
18. Michigan Education	n Trust			18.		00
19. Oil, gas, and nonfe	rrous metallic mir	nerals income (Michigan sourced)	included in AGI	19.		00
		mpted under a State/Tribal tax agı <i>Bulletin 1988-47</i>		20.		00
21. Miscellaneous subt	tractions (see inst	ructions). Describe:		21.		00

REV 03/22/22 PRO

2021 MICHIGAN Schedule 1 Additions and Subtractions

Filer's First Name	M.I.	Last Name	Filer's Full Social Security No. (Example: 123-45-6789)
VIJAYA		NANNAPANENI	664 — 79 — 4109

Deduction Based on Year of Birth

Complete 22A through 22H if claiming the Michigan Standard Deduction, the retirement benefits deduction or the senior investment income deduction on lines 23, 24, 25, or 26. Check box(es) 22C and/or 22G **only** if you or your spouse received retirement benefits from employment with a governmental agency not covered by the federal Social Security Act (SSA exempt employment). **See instructions before continuing**.

befo	re continuing.										
22.		FI	ILER					SPC	USE		
	A.	B.	C.	D.		E.	F.		G.	Н.	
	Year of Birth (19xx)	Age as of 12-31-2021	Check if filer received benefits from SSA exempt employment	Check if filer retired as of 01-01-2013 and born after 1952		Year of Birth (19xx)	Age as of 12-31-202	1	Check if spouse received benefits from SSA exempt employment	Check if sporetired as 01-01-2013 born after 1	of and
	1998	23									
23.	Tier 2 Michiga	an Standard De	duction. Complet	e this line if the	old	er of you or yo	ur spouse				
_0.	(if married) wa	s born during the	e period January 1 lete lines 24, 25 (I, 1946 through	De	cember 31, 19	52, and	23.			00
24.	(if married) wa	s born during the efore December	duction. Complet e period January 1 31, 2021. Do not	l, 1953 through a complete lines	Jai s 2	nuary 1, 1955, 3, 25 or 26. Er	and reached nter amount	24.			00
25.			nount from line 16					25.			00
26.	limited to \$12,	127 for single or	deduction for taxp married filing sepa enefits (see instruc	arately filers and	1 \$	24,254 for joint	filers, less	26.			00
			unremarried survivir born before 1946 w								
27.	Subtotal. Add	lines 10 through	ı 26					27.		21871	00
28.			on. Enter amount f lude Form 5674 .					28.			00
29.	Total Subtrac	tions. Add lines	27 and 28. Enter	here and on MI-	10	40, line 13		29.		21871	00

Schedule NR

2021 MICHIGAN Nonresident and Part-Year Resident Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Include with Form MI-1040. Read all instructions before completing this form.

Attachment 02

1. File	r's First Name	M.I.	Last Na	 me				2 Filer's Full Soc	ial Sec	curity No. (Example: 123-45-678	
								664 -		79 — 4109	,
	JAYA int Return, Spouse's First Name	M.I.	NANI Last Na	NAPANENI me						Security No. (Example: 123-45-	6789
								_	_		
4.	2021 RESIDENCY STATUS:	<u> </u>		*D-4					44.5	D 1000/ Francis 04 45 0	004
4.	Check all that apply.			^Dates of Mic	nigan resid	dency	FILER	Enter dates as i	MM-D	D-YYYY, Example: 04-15-2 SPOUSE	021)
	a. X Nonresident			FROM	Λ :	_	_	 2021		<u> </u>)21
	b. Part-Year Resident of Enter dates of Michiga			2021* TO):		_	2021		<u> </u>)21
icon	ne Allocation			A. Total	Income		B. Mi	chigan Incom	ne	C. Other State(s) Inco	ome
5.	Wages, salaries, other payments	s (tips, c	etc.)		29604	00		5233	3 00	24371	. 00
6.	Interest and dividends		,			00			00		00
7.	Business and farm income (inclu U.S. Schedules C and F)	ıde				00			00	İ	00
8.	Gains/losses from MI-1040D or U.S. Schedule D, and/or MI-479 or U.S. Form 4797	7				00			00		00
9.	Income reported on U.S. Schedu U.S. Schedule E and supporting	<i>ıle E</i> (ir	nclude			00			00	İ	00
10.	Pensions, IRA distributions, annuand Social Security (see Form 4)	uities	,			00			00		00
11.	Other (see instructions)					00			00		00
12.	Total income. Add lines 5 through	h 11			29604	00		5233	00	24371	. 00
13.	Enter the total adjustments from Describe: STUDENT LOA				2500	00		() 00	2500	00
14.	Subtract line 13 from line 12. The column A should equal MI-1040, li amount in column C on Schedule a negative amount, enter as a pos	amoun ne 10. 1, line	t in Enter 13 or, if								
	Schedule 1, line 4.				27104			5233	00	21871	- 00
	ption Allowance (If one spo							,	Γ	4000	\overline{T}
15.	Enter amount from MI-1040, line	9f			<u> </u>				15	4900	0 00
16.	Enter Michigan source income fr	om line	14, colu	ımn B	16.			5233 00			
17.	Enter total income from line 14, o	column	A		17.		2	7104 00	Г		\top
18.	Divide line 16 by line 17 (if line 1	6 is gre	eater tha	n line 17, enter 10	00%)				18.	19.31	- %
19.	If both spouses are part-year or here and on MI-1040, line 15. If here and on MI-1040, line 15	one sp	ouse is a	a full-year residen	t, complet	e Wo	rksheet 6 a	and enter	19.	946	5 00

2021 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2021, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 30). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
VIJAYA		NANNAPANENI	664 — 79 — 4109
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

		В		<u>_</u>			\neg
1	`	В	С	D		E	
Enter	'X" for:	Employer's identification number		Box 1 — Wages, tips,		Box 17 — Michigan	
Filer or	Spouse	(Example: 38-1234567)	Box c — Employer's name	other compensation		income tax withheld	
Х		38-6004447	CENTRAL MICHIGAN	5233	00	222	00
							\Box
					00		00
					00		00
					00		00
					00		00
Enter	Table	1 Subtotal from additional Sche	dule W forms (if applicable)				00
4.	SUB	TOTAL. Enter total of Table 1, c	olumn E		4.	222	00

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Α	В	С	D	E			
Enter "X" for: Filer or Spouse	101.] i /E 1 00 100 1507) B 1		Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld			
			00	00			
			oc	00			
			00	00			
			00	00			
			00	00			
Enter Table	e 2 Subtotal from additional Sche	dule W forms (if applicable)		00			
5. SUBTOTAL. Enter total of Table 2, column E							
6. TOT	AL. Add lines 4 and 5. Enter her	222 00					

REV 03/22/22 PRO