<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Tax</b>		202	2	OMB No. 1545-	0074	IRS Use Only	—Do not w	vrite or staple i	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the na on is a child but not your dependent	ame of your	ing separately (M spouse. If you ch					spor	lifying surv use (QSS) s name if th	U
Your first name	and mi	ddle initial	Last name						Your so	cial securit	y number
JYOTHILI	NGAN	P	CHENNAI	I GANAPATH	Y				706-2	26-5469	9
If joint return, sp	ouse's	first name and middle initial	Last name						Spouse'	's social sec	curity number
SANGEETH	A		JYOTHII	LINGAM					977-	98-1643	3
Home address	(numbe	r and street). If you have a P.O. box, see	instructions.				A	pt. no.	Preside	ntial Electio	on Campaigr
27 TURNE	ERRY	Y LANE							Check I	here if you,	or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete space	s below.	Sta	te	ZIP c	ode	•		tly, want \$3
DEARBORN	[				MI	-	481	20	•	ow will not	Checking a change
Foreign country	name		Foreiç	gn province/state/c	ount	ty	Foreig	n postal code		k or refund.	0
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a								Yes	No
Standard		eone can claim: You as a de		Vour spouse			10001)	. (000 11010	0110110.)		
Deduction	_	Spouse itemizes on a separate retur	•			·					
Age/Blindness	You:	Were born before January 2, 1	958 🗌 Ar	re blind Spo	use	: 🗌 Was bor	n befo	ore January 2	2, 1958	🗌 Is bli	ind
Dependents	(see	instructions):		(2) Social security		(3) Relationshi	ip <b>(</b> 4	) Check the b	ox if quali	fies for (see	instructions):
If more	(1) Fi	rst name Last name		number		to you		Child tax ci	redit	Credit for oth	ner dependents
than four										[	
dependents, see instructions										[	
and check	,									[	
here 🗌										[	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see ins	structions)					. 1a	ı <u>ç</u>	98,521.
	b	Household employee wages not re	eported on F	Form(s) W-2					. 1b	)	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	ı (see instruc	ctions)					. 1c	;	
attach Forms	d	Medicaid waiver payments not rep	orted on Fo	rm(s) W-2 (see in	stru	ictions)			. 1d	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Form 24	441, line 26 .	•				. 1e	•	
was withheld.	f	Employer-provided adoption bene	fits from For	rm 8839, line 29					. 1f		
If you did not	g	Wages from Form 8919, line 6 .			•				. 1g		
get a Form W-2, see	h	Other earned income (see instruct	ions)			1	· ·		. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see instructio	ons)	•	<u>1</u> i					
	Z	Add lines 1a through 1h	1						. 1z		98,521.
Attach Sch. B	2a	· -	2a			axable interest					
if required.	<u>3a</u>		3a			ordinary divider					
	4a	-	4a			axable amount					
Standard Deduction for –	5a	-	5a			axable amount			. 5b		
Single or	6a	, _	6a			axable amount		· · ·	. <u>6b</u>	•	
Married filing separately,	_c	If you elect to use the lump-sum e					• •	L	-		
\$12,950	7	Capital gain or (loss). Attach Sche					• •	· · · L			0 4 5 0
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin		· · · · ·					. 8		<u>-9,450.</u>
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•			• •		. 9		39,071.
\$25,900	10	Adjustments to income from Sche							. <u>10</u> . 11		0 071
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is your adjusted gross income									<u>39,071.</u>
\$19,400	12 13	Qualified business income deduction					• •		. <u>12</u> . 13		25,900.
<ul> <li>If you checked any box under</li> </ul>	13 14				099	J-M	• •		. 13		25 000
Standard Deduction,	14 15	Subtract line 14 from line 11. If zer	 norless en		ייור י	axahle incom	 e		. 14 . 15		<u>25,900.</u> 53,171.
see instructions.			0 01 1000, 01	101 0 . 1110 13 yc			<b>.</b> .		. 13	· · · ·	, , , , , , , , , , , , , , , , , , ,

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	7,170.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	7,170.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	7,170.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	7,170.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				<b>25a</b> 1	4,323	-	
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	14,323.
If you have a	26	2022 estimated tax payment	ts and amount a	pplied from 20	)21 return			26	
If you have a l qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undable credits	<b>.</b>	32	
	33	Add lines 25d, 26, and 32. T	•	-	-			33	14,323.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>	I	34	7,153.
neiuliu	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	3 is attached, cheo	ck here	🗆	35a	7,153.
Direct deposit?	b	Routing number 0 7 2					Savings		
See instructions.	d	Account number 3 7 5			3 5 6				
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the <b>am</b>	ount vou owe					
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee	ins	structions				. 🗌 Yes.	Complete	below.	X No
		signee's		Phone			rsonal iden	tification	
	nai			no.			mber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature		Date	Your occupation				nt you an Identity
	10	al oignaturo		Duto	rour occupation				IN, enter it here
Joint return?					SOFTWARE E	ENGINEER	(se	e inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	<b>both</b> must sign.	Date	Spouse's occupati	ion			nt your spouse an
your records.					HOME MAKET	>		ntity Prot e inst.)	ection PIN, enter it here
	Dh	0000 (047)015 401	1	Email address	HOME MAKEP		`		
		one no. (947)215-481 eparer's name	⊥ Preparer's signat	1	JOTHY_SRCMM@	Date			Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM						20702	Self-employed
Preparer		m's name GLOBAL TA		TAUAL DAGAR	GOLIA IALLAM	101/20/2023			(678) 965-9522
Use Only			Y CT E BRU	INSWICK N	т 08816			n's EIN	88-2145487
		n1040 for instructions and the late		TIONICIC IN	D 00010				Eorm <b>1040</b> (2022)

Go to www.irs.gov/Form1040 for instructions and the latest information.

BAA REV 01/14/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

## Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **01** 

Your social security number

706-26-5469

Name(s) shown on Form 1040, 1040-SR, or 1040-NR J CHENNAI GANAPATHY & S JYOTHILINGAM

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-9,450.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property $\ldots$ .	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form	- (		
	1040, line 1a or 1d	8s (	)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	_	
u	Wages earned while incarcerated	8u	_	
Z	Other income. List type and amount:	-		
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-9,450.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	ernment		
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889				13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
15	Deductible part of self-employment tax. Attach Schedule SE				15	
16	Self-employed SEP, SIMPLE, and qualified plans				16	
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN	•				
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction				20	
21	Student loan interest deduction				21	
22	Reserved for future use				22	
23	Archer MSA deduction				23	
24	Other adjustments:					
а	Jury duty pay (see instructions)	24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
g	Contributions by certain chaplains to section 403(b) plans	24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	24h				
i	Attorney fees and court costs you paid in connection with an award					
	from the IRS for information you provided that helped the IRS detect					
	tax law violations	24i				
j	Housing deduction from Form 2555	24j				
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k				
z	Other adjustments. List type and amount:					
		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your adjustments to income	e. Ente	er here	and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u>.</u> .		<u> </u>	26	
	ВАА	REV	01/14/23 P	RO	Schedu	le 1 (Form 1040) 2022

	DULE E		Supplementa							OMB No	. 1545	-0074
(Form	1040)	(From r	ental real estate, royalties, partners	hips, S	corporati	ons, es	states,	trusts, REMICs	s, etc.)	20	2	2
	ent of the Treasury Revenue Service		Attach to Form 1040, Go to <i>www.irs.gov/ScheduleE</i> for					formation.		Attachm Sequend	ent ce No.	13
Name(s)	shown on return								our socia	al security		
Ј СН	ENNAI GANA	PATHY	& S JYOTHILINGAM						706-2	6-5469		
Part	I Income	or Loss	s From Rental Real Estate an					l				
	Note: If yo	ou are in th	he business of renting personal proper	ty, use	Schedule	C. See	instru	ctions. If you are	e an indiv	vidual, rep	ort far	m
Α			s from <b>Form 4835</b> on page 2, line 40. nts in 2022 that would require you	to filo	Form(c) 1	0002 0	Soo inc	structions			c X	No
			ou file required Form(s) 1099?								_	No
											5	110
1a			ach property (street, city, state, ZIF		·							
	MADAVARAM	MILK	COLONY CHENNAI TAMIL NA	ADU I	IN 6000	51						
<u> </u>												
<u>C</u>												
1b	Type of Prope (from list below		For each rental real estate prope above, report the number of fair				⊢a	ir Rental Days	Person Da		Q	JV
A	3	v)	personal use days. Check the Q			Α		365	Da	<b>y</b> 3 0	]	
B	5	_	if you meet the requirements to f	file as	a	B		505		0	[	
			qualified joint venture. See instru	ictions	6.	C					[	
	of Property:					•				I	L	<u> </u>
	Single Family R	esidence	e 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental				
	Multi-Family Re		4 Commercial		6 Roya	lties	8	Other (describ	be)			
					-			Properties				
Incom						Α		B	5.		С	
3		4		3			50.	D			0	
4			· · · · · · · · · · · · · ·	4								
Expen				<u> </u>								
5				5								
6			structions)	6								
7	Cleaning and r	naintena	nce	7		9	00.					
8	Commissions			8								
9	Insurance			9								
10			sional fees	10								
11				11		1,8	00.					
12			to banks, etc. (see instructions)	12								
13	Other interest			13								
14				14			00.					
15				15		2,3	00.					
16 17				16 17		2 0	00.					
18				18		2,0	00.					
19	Othor (list)		•	19								
20	· · · ·		nes 5 through 19	20		9.9	00.					
21			ne 3 (rents) and/or 4 (royalties). If			- , -						
			structions to find out if you must									
	file Form 6198	·		21		-9,4	50.					
22	Deductible ren	tal real e	estate loss after limitation, if any,									
	on Form 8582	(see inst	tructions)	22	(	9,45	50.)		)	(		)
23a			ported on line 3 for all rental prope				23a		450.			
b			ported on line 4 for all royalty prop				23b					
c			ported on line 12 for all properties			· ·	23c					
d			ported on line 18 for all properties				23d					
e			ported on line 20 for all properties				23e	9,	900.			
24 25			amounts shown on line 21. <b>Do no</b>		-				24	(	0 1	<u> </u>
25			ses from line 21 and rental real estat							l	9,4	50.)
26			<b>te and royalty income or (loss).</b> , and line 40 on page 2 do not									
			), line 5. Otherwise, include this ar						26		-9,	450.

2022 MICHIGAN Ind Return is due April 18, 2023				rm IVII-1(	U4U				anded Return [	
1. Filer's First Name	M.I.	Last Name			2. Filer's	s Full	Social Se	curitv	No. (Example: 123-45-67	789)
JYOTHILINGAM		CHENNAI GAN	ЈАРАТН	Y				-		
If a Joint Return, Spouse's First Name	M.I.	Last Name			/	06		26	<u> </u>	
SANGEETHA		JYOTHILINGA	M		3. Spou	se's	Full Social	Secur	ity No. (Example: 123-4	5-6789)
Home Address (Number, Street, or P.O. 27 TURNBERRY LANE	Box)				9	77		98	<u> </u>	
City or Town		State	ZIP Code		4. Scho			(5 dig	its – see page 60)	
DEARBORN		MI	4812	20		8	2160			
<ol> <li>STATE CAMPAIGN FUND Check if you (and/or your spot filing a joint return) want \$3 of to go to this fund. This will not your tax or reduce your refund</li> </ol>	your taxes increase	a. Filer 5 b. Spouse			IERS, FISI Check this ishing, or s	box	if 2/3 of y		FARERS	],
7. 2022 FILING STATUS. Check	one.			8. <b>2022</b>	RESIDEN	CYS	STATUS.	Chec	k all that apply.	
a. 🦳 Single	* If y	ou check box "c," compl	ete	a. X	Resident					
		3 and enter spouse's ful	Iname						* If you check box "b" "c," you must comple	
b. X Married filing jointly	belo	w:		b	Nonreside	nt *			and include Schedu	
c. Married filing separately	*			c. 🗌	Part-Year	Resi	ident *		NR.	
9. EXEMPTIONS. NOTE: If so	meone els	e can claim you as a de	pendent, cl	neck box 9e, e	nter 0 on I	ine §	a and en	ter \$´	,500 on line 9e (see	instr.).
a. Number of exemptions (se	e instructi	ons)			2	x	\$5,000	9a.	1000	0 00
b. Number of individuals who							. ,	Ì		
blind, hemiplegic, paraple		0,1				х	\$2,900	9b.		00
c. Number of qualified disabl						х	\$400	9c.		00
d. Number of Certificates of S	Stillbirth fro	om MDHHS (see instruc	tions)	9d.		х	\$5,000	9d.		00
e. Claimed as dependent, se	e line 9 N	OTE above						9e.		00
f. Add lines 9a, 9b, 9c, 9d ar	nd 9e. En	ter here and on line 15 .					r	9f.	1000	0 00
10. Adjusted Gross Income from	m your U.S	S. Form 1040 (see instru	ictions)				. 10.		8907	1 00
11. Additions from Schedule 1, lin	ne 9. <b>Inclu</b>	ude Schedule 1					. 11.			00
12. <b>Total.</b> Add lines 10 and 11							. 12.		8907	1 00
							ſ			
13. Subtractions from Schedule	1, line 30.	Include Schedule 1					. 13.			00
14. Income subject to tax. Subt	ract line 1	3 from line 12. If line 13	is greater t	han line 12, ei	nter "0"		. 14.		8907	1 00
15. Exemption allowance. Ente	r amount f	rom line 9f or Schedule	NR, line 19				. 15.		1000	0 00
16. Taxable income. Subtract lin	ne 15 from	line 14. If line 15 is great	ater than lir	ie 14, enter "0	"		. 16.		7907	1 00
17. Tax. Multiply line 16 by 4.259	% (0.0425)			AMOUN			. 17.		336 CREDIT	1 00
	romontur	sita autoida Miabigan		Alloon			Г		OREDIT	
18. Income Tax Imposed by gove Include a copy of the return (a			18a			00	18b.			00
19. Michigan Historic Preservatio	on Tax Cre	dit (see instructions).	19a.			00	19b.			00
20. <b>Income Tax.</b> Subtract the sur									336	1 00
If the sum of lines 18b and 19	b is great	er than line 17, enter "0"					20.		336	
									REV 01/12/23 P	RO

2022 M	II-1040, Page 2 of 2		Filer's	Full Social Se	ecurity Numbe	er 70	6 -		26 —	5469	
~ (										226	1 00
21.	Enter amount of Income Tax from lin							21.		336	
22.	Voluntary Contributions from Form 4							22.			00
23.	<b>USE TAX.</b> Use tax due on Internet, Worksheet 1 (see instructions)			•			 Г	23.			0 00
24.	Total Tax Liability. Add lines 21, 22	and 23					24.			336	1 00
REFU	INDABLE CREDITS AND PAYM	ENTS					_	г			
25.	Property Tax Credit. Include MI-10	040CR or	MI-1040CR-	2				25.			00
26.	Farmland Preservation Tax Credit	t. Include	MI-1040CR-	5		DERAL		26.	MI	CHIGAN	00
27.	Earned Income Tax Credit. Multiply enter result on line 27b					0	0	27b.			00
28.	Michigan Historic Preservation Tax (				3581	1*	•	28.			00
29.	Credit for allocated share of tax paid	•						29.			00
30.	Michigan tax withheld from Schedul	Michigan tax withheld from Schedule W, line 6. Include Schedule W (do not submit W-2s)									
24	Estimated tax, automaian novimenta		21			00					
31. 32.	Estimated tax, extension payments <b>2022 AMENDED RETURNS ONLY.</b>							31.			
02.	Amended returns must include Sch			•			000.				
	32a. If you had a refund and/or a negative number on line 32		d on the origi	nal return, che	eck box 32a ar	nd enter this amour	nt as a				
	32b. If you paid with the original any additional tax paid afte							32c.			00
33.	Total refundable credits and paymer	nts. Add lir	es 25, 26, 2	7b, 28, 29, 3	30, 31 and 3	2c	33.			401	00 0
REFU	IND OR TAX DUE						_				
34.	If line 33 is less than line 24, subtrac	ct line 33 f	rom line 24.	If applicable	, see instruc	tions.					
	Include interest 00 a	nd penalty	,	00		YOU OWE	34.				00
35.	Overpayment. If line 33 is greater t	han line 24	1, subtract lii	ne 24 from li	ne 33		35.			64	9 00
	• • • • • • • • • • • • • • • • • • •										
36.	Credit Forward. Amount of line 35	to be credi	ted to your 2	2023 estimat	ed tax for yo	our 2023 tax retu	"" Г	36.			00
37.	Subtract line 36 from line 35					REFUND	37.			64	9 00
	ECT DEPOSIT	a. Ro	uting Transit	Number	b	Account Number			с. Туре о	f Account	
institut	it your refund directly to your financial ion! See instructions and complete a, b	07200	0805		37502	2171985		1.	X Checking	2. Sav	/ings
and c. Dece	ased Taxpayer. If Filer and/or Spous			, 2021, enter o		Preparer Cer	tifica	tion. /	declare under p	enalty of perjury	/ that
ENTE	R DATE OF DEATH ONLY. Example:	04-15-2022	(MM-DD-YY	YY)		this return is base	ed on a	ll inform			
Filer		Spouse				Preparer's PTIN, P0208270	03				
	ayer Certification. I declare under la technication and the technication of technication o			information in	this return	Preparer's Name SYAM PR			I SAGAR	GUPTA '	ΓA
	Signature			Date		Preparer's Signat	ture				
						SYAM PR					ΓA
Spouse's Signature						Preparer's Business Name, Address and Telephone Numbe				one Number	
						GLOBAL S			ЪПС		
	By checking this box, I authorize Tre	easury to d	iscuss my re	eturn with my	/ preparer.	245 ROOI E BRUNSI	WIC	K NJ	J 08816		
						678-965	-93	66			

Refund, credit, or zero returns. Mail your return to:Michigan Department of Treasury, Lansing, MI48956Pay amount on line 34 (see instructions). Mail your check and return to:Michigan Department of Treasury, Lansing, MI48929

# 2022 MICHIGAN Withholding Tax Schedule

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

Type or print in blue or black ink.

**INSTRUCTIONS:** If you had Michigan income tax withheld in 2022, 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)
JYOTHILINGAM		CHENNAI GANAPATHY	706 — 26 — 5469
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)
SANGEETHA		JYOTHILINGAM	977 — 98 — 1643

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

4	A B		С	D	E
	inter "X" for: Employer's identification number (Example: 38-1234567)		Box c — Employer's name	Box 1 — Wages, tips, other compensation	Box 17 — Michigan income tax withheld
Х		38-3317204	TRILOGY INTERNAT	98521 <sub>0</sub>	4010 00
				C	0 00
				C	0 00
				C	0 00
				O	0 00
Enter	Table	1 Subtotal from additional Sche	. 00		
4.	SUB	TOTAL. Enter total of Table 1, c	4010 00		

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

A		В	С	D	E	
Enter "2 Filer or S		Payer's federal identification number (Example: 38-1234567)	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld	
				00		20
				00		00
				00		20
				00		00
				00		00
Enter	Table	2 Subtotal from additional Sche	dule W forms (if applicable)			00
		<b>TOTAL.</b> Enter total of Table 2, c		00		
6.	тоти	<b>AL.</b> Add lines 4 and 5. Enter her	. 4010 0	00		
					DEV/ 01/12/22 DDO	

Attachment 13

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

## Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **01** 

Your social security number

706-26-5469

Name(s) shown on Form 1040, 1040-SR, or 1040-NR J CHENNAI GANAPATHY & S JYOTHILINGAM

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	1
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-9,450.
6	Farm income or (loss). Attach Schedule F.		6	1
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I.	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property $\ldots$ .	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (	)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	-		
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-9,450.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gove	ernment		
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889				13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
15	Deductible part of self-employment tax. Attach Schedule SE				15	
16	Self-employed SEP, SIMPLE, and qualified plans				16	
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN	• _				
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction				20	
21	Student loan interest deduction				21	
22	Reserved for future use				22	
23	Archer MSA deduction				23	
24	Other adjustments:					
а	Jury duty pay (see instructions)	24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b			_	
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e			_	
f	Contributions to section 501(c)(18)(D) pension plans	24f			_	
g	Contributions by certain chaplains to section 403(b) plans	24g			_	
h	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	24h				
i	Attorney fees and court costs you paid in connection with an award					
	from the IRS for information you provided that helped the IRS detect					
	tax law violations	24i				
j	Housing deduction from Form 2555	24j			_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k			_	
Z	Other adjustments. List type and amount:					
		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your adjustments to income	e. Ente	er here	and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	01/14/23 PI	RO	Schedu	le 1 (Form 1040) 2022

SCHEDULE E			Supplementa							OMB No	. 1545	-0074	
(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								2022			
	ent of the Treasury Revenue Service	Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to <i>www.irs.gov/ScheduleE</i> for instructions and the latest information.								Attachment Sequence No. 13			
Name(s) shown on return									social security number				
J CHENNAI GANAPATHY & S JYOTHILINGAM								706-26-5469					
Part	I Income	or Loss	s From Rental Real Estate an					I					
	Note: If yo	ou are in th	he business of renting personal proper	ty, use	Schedule	C. See	instru	ctions. If you are	an indiv	idual, rep	ort far	m	
Α			s from Form 4835 on page 2, line 40.	to filo	Form(c) 1	0002 0	Soo inc	tructions				No	
		ake any payments in 2022 that would require you to file Form(s) 1099? See instructions									_	No	
										10	5		
1a			ach property (street, city, state, ZIF		,								
	MADAVARAM	MILK	COLONY CHENNAI TAMIL NA	ADU ]	EN 6000	51							
<u>C</u>							_		_				
1b	Type of Prope (from list below		For each rental real estate prope above, report the number of fair				ir Rental Days	Person Da		Q	JV		
A	3					Α	365		0		+		
B	5	_	if you meet the requirements to f	ile as	a	B		505			[		
			qualified joint venture. See instru	ictions	s	C					[	╡──	
	of Property:					•	1			I	L	<u> </u>	
	Single Family R	esidence	e 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental					
	Multi-Family Re		4 Commercial		6 Roya	lties	8	Other (describ	e)				
					-			Properties					
Incom						Α		B	<b>&gt;.</b>		С		
3		4		3			50.				0		
4				4		-							
Expen				+ ·									
5				5									
6			structions)	6									
7	Cleaning and r	naintena	nce	7		9	00.					-	
8	Commissions												
9	Insurance			9									
10			sional fees	10									
11				11		1,8	00.						
12			to banks, etc. (see instructions)	12									
13	Other interest			13									
14				14			00.						
15				15		2,3	00.						
16 17				16 17		2,8	0.0						
18				18		2,0	00.						
19	Othor (list)		•	19									
20	· · · ·		nes 5 through 19	20		9.9	00.						
21			ne 3 (rents) and/or 4 (royalties). If										
			structions to find out if you must										
	file Form 6198	·		21		-9,4	50.						
22	Deductible ren	tal real e	estate loss after limitation, if any,										
	on Form 8582	8582 (see instructions)			( 9,45		50.)(		)	(		)	
23a			ported on line 3 for all rental prope				23a		450.				
b			ported on line 4 for all royalty prop	erties			23b						
c			ported on line 12 for all properties			· ·	23c						
d			ported on line 18 for all properties			• •	23d						
e			ported on line 20 for all properties				23e	9,	900.				
24 25			amounts shown on line 21. <b>Do no</b>		-				24	(	0 1	<u> </u>	
25			ses from line 21 and rental real estat						25	l	9,4	50.)	
26			<b>te and royalty income or (loss).</b> ( , and line 40 on page 2 do not										
			), line 5. Otherwise, include this ar						26		-9,	450.	