Amended Return

2022 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 18, 2023. T	, .	r print in blue or blacl	k ink.							(Inclu	ude Schedule AMD)	
1. Filer's First Name	M.I.	Last Name					2. Filer's	s Full	Social Sec	curity	No. (Example: 123-45-6789	9)
VIJAYASIMHA If a Joint Return, Spouse's First Name	M.I.	BONAGIRY Last Name				\dashv	2	70		23	 8891	
							3. Spou	se's l	Full Social :	Secur	rity No. (Example: 123-45-6	789)
Home Address (Number, Street, or P.O. Box)		חת 201							_		_	
T/31 REGENCY SIREET City or Town	, A		7IP (`ode		\longrightarrow	4 Scho	ol Di	etrict Code	/5 dic	gits – see page 60)	\dashv
CANTON		MI					4. 3616		2160	(5 dig	ils – see page oo,	
filing a joint return) want \$3 of you	ır taxes	a. Filer b. Spouse			6. FAI	Che	eck this	box	if 2/3 of yo		AFARERS ncome is from farming,	
 7. 2022 FILING STATUS. Check one a. X Single b. Married filing jointly c. Married filing separately* 	Single * If you check box "c," complete line 3 and enter spouse's full name below: Married filing jointly * If you check box "c," complete line 3 and enter spouse's full name below: b. X Nonresident * c. Part-Year Res									Chec	* If you check box "b" or "c," you must complete and include Schedule NR .	г
9. EXEMPTIONS. NOTE: If some	ne els	e can claim you as a dε	∍pender	nt, che	ck box 9e	ente	er 0 on l	ine 9	}a and ent	ter \$1	1,500 on line 9e (see ins	str.).
2. Number of everytions (see in	entruot'	ional			(1	x	\$5,000	00	5000	00
blind, hemiplegic, paraplegic, c. Number of qualified disabled v.d. Number of Certificates of Stillbe. e. Claimed as dependent, see line	quadri veterar birth fro	plegic, or totally and pernsom MDHHS (see instruc	ctions)	ntly disa	abled 9 9 9	9c 9d 9e[x x x	\$400 \$5,000	9c. 9d. 9e.	F000	00 00 00
f. Add lines 9a, 9b, 9c, 9d and 9	e. Ent	er here and on line 15.							Г	9f.	5000	00
10. Adjusted Gross Income from yo	our U.S	3. Form 1040 (see instru	uctions))					. 10.		56289	00
11. Additions from Schedule 1, line 9	. Inclı	ıde Schedule 1							. 11.			00
Address (Number, Street, or P.O. Box)			. 12.		56289	00						
13. Subtractions from Schedule 1, lin	ıe 30.	Include Schedule 1							. 13.		29655	00
14. Income subject to tax. Subtract	line 1	3 from line 12. If line 13	3 is grea	ater tha	ın line 12	, ente	r "0"		. 14.		26634	00
15. Exemption allowance. Enter am	าount f	rom line 9f or Schedule	NR, lin	ıe 19					. 15.		2366	00
16. Taxable income. Subtract line 15	5 from	line 14. If line 15 is gre	ater tha	an line	14, enter	· "0"			. 16.		24268	00
	.0425)								. 17.			00
			Г		AMO	UNI		$\overline{}$			CREDIT	
			18a.					00	18b.			00
19. Michigan Historic Preservation Ta	ax Cre	dit (see instructions).	19a.					00	19b.			00
									. 20.		1031	00

2022 N	II-1040, Page 2 of 2					-			
		Filer	r's Full Social S	ecurity Number	2	70 -	_	23 — 8891	
21.	Enter amount of Income Tax from li	ne 20					21.	1033	1 00
22.	Voluntary Contributions from Form						22.		00
23.	USE TAX. Use tax due on Internet,						İ		
23.	Worksheet 1 (see instructions)					<u>.</u>	23.	(00
24.	Total Tax Liability. Add lines 21, 22	2 and 23				24.		1031	1 00
REFU	INDABLE CREDITS AND PAYN	MENTS					ī		
25.	Property Tax Credit. Include MI-1	040CR or MI-1040CF	₹-2				25.		00
	• •						İ		
26.	Farmland Preservation Tax Credi	it. Include MI-1040CF	₹-5				26.		00
			_	FEI	DERAL			MICHIGAN	
27.	Earned Income Tax Credit. Multiply enter result on line 27b	line 27a by 6% (0.06)) and			00	27b.		00
28.	Michigan Historic Preservation Tax		_	3581			28.		00
29.	Credit for allocated share of tax pai	,					29.		00
20.	Great for allocated share of tax par	a by an electing new t	anough chary	(500 111511401	101107		20.		
30.	Michigan tax withheld from Schedu	le W, line 6. Include \$	Schedule W ((do not subn	nit W-2s)		30.	1132	2 00
31.	Estimated tax, extension payments	and 2021 gradit forw	ard				31.		00
							31.		100
32.	2022 AMENDED RETURNS ONLY Amended returns must include Sci			2022 return s	noula skip to i	line 33.			
		•	,						
	32a. If you had a refund and/or negative number on line 3.		ginal return, che	eck box 32a an	d enter this amo	ount as a			
	If you paid with the origina	ıl return, check box 32b a	and enter the an	nount paid with	the original retu	ırn, plus			
	32b. any additional tax paid after	er filing, as a positive num	mber on line 32	c. Do not includ	e interest or per	nalty.	32c.		00
33.	Total refundable credits and payme	onte Add lines 25 26	27h 28 20 1	30 31 and 33	lo.	33.		1132	2 00
	IND OR TAX DUE	1113. Add 111163 23, 20,	270, 20, 29, 3	50, 51 and 52	.0	33. <u>L</u>			- 100
	If line 33 is less than line 24, subtra	act line 33 from line 24	l. If applicable	e. see instruct	ions.	Γ			
				,					
	Include interest 00 a	and penalty	00	\	OU OWE	34.			00
								10.	,
35.	Overpayment. If line 33 is greater	than line 24, subtract	line 24 from li	ine 33		35.		10-	1 00
36	Credit Forward. Amount of line 35	to be credited to your	· 2023 estima	ted tax for vo	ur 2023 tax re	turn	36.		00
00.	ordate of ward. A mount of mile of	to be orealized to your	2020 0001110	tou tax for yo	ui 2020 tax 10	Γ	00.1		
37.	Subtract line 36 from line 35				REFUND	37.		101	1 00
	ECT DEPOSIT	a. Routing Transi	it Number	b. A	ccount Numbe	er	╝.	c. Type of Account	
	it your refund directly to your financial ion! See instructions and complete a, b	11100000		40000	220400		1.	X Checking 2. Sav	ings
and c.	, · ·	111000025		<u> </u>	2339489				
	eased Taxpayer. If Filer and/or Spous							I declare under penalty of perjury ation of which I have any knowle	
ENIE	ER DATE OF DEATH ONLY. Example	104-15-2022 (MINI-DD-Y	Y Y Y)	————	Preparer's PTII			allon of which I have any knowle	uge.
Filer		Spouse -		-	P024708				
Тахр	ayer Certification. I declare under	penalty of perjury that th	ne information in	n this return	Preparer's Nan	**			
	tachments is true and complete to the bes	st of my knowledge.	12.				I PA	AVAN KUMAR DUDI	IΡ
Filer's	Signature		Date		Preparer's Sign		т D7	AVAN KUMAR DUDI	τD
Spous	se's Signature		Date					dress and Telephone Number	LF
			1		GLOBAL			•	
					245 RO				
	By checking this box, I authorize Tro	easury to discuss my	return with m	v preparer				J 08816	
╷╙		, alcoude my	. 2.2 *****************************	,	678-965				

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

2022 MICHIGAN Schedule 1 Additions and Subtractions

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

Include with Form MI-1040. Type o	r print	in blue or black ink.			Attachment
Filer's First Name	M.I.	Last Name	Filer's Full Social S	Security No. (Exa	ample: 123-45-6789)
X7T TA X7A CITAGITA		DOMAGEDA	270	2.2	0.001

VI	JAYASIMHA		BONAGIRY	270	_	23	8	8891	
Addi	tions to Income (all entries	must	be positive numbers)						
1.	Gross interest and dividends fr	om ob			1.				00
2.	Deduction for taxes on or measu	ured b	y income, including self-employment tax, taken tax paid by an electing flow-through entity (see i	on your	2.				00
3.	Gains from Michigan column o	f MI-1	040D and MI-4797		3.				00
4.	Losses attributable to other sta	tes (s	ee instructions)		4.				00
5.	Net loss from federal column o	f your	Michigan MI-1040D or MI-4797		5.				00
6.	Oil, gas, and nonferrous metall	ic mir	eral expenses (Michigan sourced) deducted to	arrive at	6.				00
7.	Federal Net Operating Loss de	ductio	on included in AGI		7.				00
8.	Other (see instructions). Descri	ibe: _			8.				00
9.	Total additions. Add lines 1 t	hroug	h 8. Enter here and on MI-1040, line 11		9.			0	00
Subt	ractions from Income (all e	entrie	s must be positive numbers)						
			and other U.S. obligations included in MI-104		10.				00
			from military retirement benefits due to service anal Guard, or taxable railroad retirement benef		11.				00
12.	Gains from federal column of M	/lichig	an MI-1040D and MI-4797		12.				00
13.	Income attributable to another	state.	Explain type and source: SCHEDULE NR		13.			29655	00
14.	Taxable Social Security benefit	s or n	nilitary pay (not retirement) included on MI-104	0, line 10	14.				00
15.	Income earned while a residen	t of a	Renaissance Zone (see instructions)		15.				00
	on MI-1040, line 10 (see instru	ctions	refunds received in 2022 and included)		16.				00
		_	n, MI 529 Advisor Plan, and Michigan Achievin	•	17.				00
18.	Michigan Education Trust				18.				00
19.	Oil, gas, and nonferrous metall	ic mir	erals income (Michigan sourced) included in A	.GI	19.				00
			mpted under a State/Tribal tax agreement or Bulletin 1988-47		20.				00
	, ,		gram. Enter amount from line 3 of Form 5792, gram. Include Form 5792.	_	21.				00
22.	Miscellaneous subtractions (se	e inst	ructions). Describe:		22.				00

Attachment 01

2022 MICHIGAN Schedule 1 Additions and Subtractions

Filer's First Name	M.I.	Last Name	Filer's Full Social Security No. (Example: 123-45-6789)
VIJAYASIMHA		BONAGIRY	270 — 23 — 8891

Deduction Based on Year of Birth

Complete 23A through 23H if claiming the Michigan Standard Deduction, the retirement benefits deduction or the senior investment income deduction on lines 24, 25, 26, or 27. Check box(es) 23C and/or 23G **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.										
23.		FI	ILER					SPC	USE		
	A.	В.	Age Check if filer received benefits as of from SSA exempt 01-01-2013 and (19xx) Check if filer retired as of 01-01-2013 and (19xx)				G. Check if spouse	H. Check if spo	ouse		
	Year of Birth (19xx)		received benefits	retired as of				2	received benefits from SSA exempt employment	retired as 01-01-2013 born after 1	of and
	1993	29									
24.										•	
	Year of Birth (19xx) Age as of 12-31-2022 Pear of Birth (19xx) 1993 29 Tier 2 Michigan Standard Deduction. Complete this line if the older of you or you (if married) was born during the period January 1, 1946 through December 31, 195 reached age 67. Do not complete lines 25, 26 or 27. Tier 3 Michigan Standard Deduction. Complete this line if the older of you or you (if married) was born during the period January 1, 1953 through January 1, 1956, a age 67 on or before December 31, 2022. Do not complete lines 24, 26 or 27. Ent from line 6 of Worksheet 2. Retirement benefits. Enter amount from line 16, 17 or 18 of Form 4884, Michigan Schedule. Include Form 4884. Dividend/interest/capital gains deduction for taxpayers 77 years and older. Deduct limited to \$12,697 for single or married filing separately filers and \$25,394 for joint from yededuction for retirement benefits (see instructions). Check this box if you are the unremarried surviving spouse claiming a dividend, interest gains deduction for someone born before 1946 who was at least age 65 at the time of description. Enter amount from line 11 or 12 of Form 5674, M. 2022 Michigan NOL Deduction. Enter amount from line 11 or 12 of Form 5674, M.						24.			00	
25.	(if married) wa age 67 on or b	s born during the efore December	and reached nter amount	25.			00				
26.							00				
27.	limited to \$12,6	697 for single or	married filing sepa	arately filers an	d \$	25,394 for joint	t filers, less	27.			00
		r 2 Michigan Standard Deduction. Complete this line if the older of you or your sponsoried age 67. Do not complete lines 25, 26 or 27. The sponsor of the older of you or your sponsoried age 67. Do not complete lines 25, 26 or 27. The sponsories of the older of you or your sponsories of the older of your your sponsories of the older of your your sponsories of the older of your your your your your your your your									
28.	Subtotal. Add	lines 10 through	ı 27					28.		29655	00
29.											00
30.	Total Subtrac	tions. Add lines	28 and 29. Enter	here and on MI	-10	40, line 13		30.		29655	00

Schedule NR

2022 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	1. Filer's First Name		Last Na	me					2. Filer's Full Socia	al Sec	eurity No. (Example: 123-4	5-6789	1)
\ \ \7.T	JAYASIMHA		BOM:	AGIRY					270 —	- :	23 — 889	1	
	oint Return, Spouse's First Name	M.I.	Last Na						3. Spouse's Full S	ocial S	Security No. (Example: 12	3-45-6	789)
										_	_		ŕ
4.	2022 RESIDENCY STATUS: Check all that apply.			*Dates	of Michig	an resid	ency			1M-D	D-YYYY, Example: 04-	15-202	22)
	a. X Nonresident				FROM:			FILER	— 2022		SPOUSE	202	
	b. Part-Year Resident of Enter dates of Michiga			2022*	TO:				— 2022			202	
Incor	ne Allocation												
IIICOI	ne Anocation			A.	Total Inc	come	-	<u>B. M</u>	ichigan Incom	<u>е</u> Т	C. Other State(s)	Inco	ne
5.	Wages, salaries, other payments	s (tips,	etc.)		58	3789	00		26634	00	321	55	00
6.	Interest and dividends					00			00			00	
7.	Business and farm income (inclu U.S. Schedules C and F)						00			00			00
8.	Gains/losses from MI-1040D or U.S. Schedule D, and/or MI-479 or U.S. Form 4797						00			00			00
9.	Income reported on U.S. Schedu U.S. Schedule E and supporting	,					00			00			00
10.	Pensions, IRA distributions, annuand Social Security (see Form 4						00			00			00
11.	Other (see instructions)						00			00			00
12.	Total income. Add lines 5 through	n 11			58	3789	00		26634 0		321	55	00
13.	Enter the total adjustments from Describe: STUDENT LOA					2500	00		0	00	25	00	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 Schedule 1, line 4.	ne 10. 1, line	Enter 13 or, if		56	5289	00		26634	00	296	55	00
Exen	nption Allowance (If one spo	use is	a full-ye	ear resid	ent, and t	he othe	r is	not, see	instructions.)	_			
15.	Enter amount from MI-1040, line	9f								15	50	00	00
16.	Enter Michigan source income fr	om line	e 14, colu	ımn B	10	3.		2	26634 00				
17.	Enter total income from line 14, o	column	Α		1	7			6289 00	Г			
18.	Divide line 16 by line 17 (if line 1	6 is gre	eater tha	n line 17,	enter 100%	%)			1	18.	47.	32	%
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	resident, o	complete	Wo	rksheet 6	and enter	19.	23	66	00

2022 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 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)
VIJAYASIMHA		BONAGIRY	270 — 23 — 8891
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

	ABEL II MIGHIGAN 1964 WILLIAM I TAN INC. OKT. 1964 W. 1, W. 20 01 CONTROLLED W. 2.1 CAMINE												
Α	В	С	D		E								
Enter "X" for Filer or Spou		Box c — Employer's name	Box 1 — Wages, tips, other compensation		Box 17 — Michigan income tax withheld								
X	27-0836130	LORHAN CORPORATI	26634	00	1132	00							
				00		00							
				00		00							
				00		00							
				00		00							
Enter Tal	ole 1 Subtotal from additional Sche			00									
4. S l	JBTOTAL. Enter total of Table 1, c	olumn E		4.	1132	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	\Box	E	
Enter "X" for: Filer or Spouse	Payer's federal identification number (Example: 38-1234567)	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)		Michigan income tax withheld	
			(00		00
			(00		00
				00		00
				00		00
				00		00
Enter Table	2 Subtotal from additional Sched	dule W forms (if applicable)				00
5. SUB	TOTAL. Enter total of Table 2, co	5.		00		
6. TOT	AL. Add lines 4 and 5. Enter here	e and carry to MI-1040, line 3	0	6.	1132	00

REV 02/09/23 PRO