	2 MICHIGAN Indiv rn is due April 18, 2023.					niv	-' (	040				ended Return [ ude Schedule AMD)	
	r's First Name	M.I.	Last Name	K IIIK				2. File	r's Ful	Social Se	curitv	No. (Example: 123-45-67	789)
SH	ALINI		BODE								-		,
lf a Jo	int Return, Spouse's First Name	M.I.	Last Name						843		63	<u> </u>	
<u></u>								3. Spo	use's	Full Social	Secu	rity No. (Example: 123-45	5-6789
	Address (Number, Street, or P.O. Box 986 POLO CLUB DR.]	,										_	
	r Town		State	ZIF	P Code			4. Sch	ool Di	strict Code	(5 dig	its – see page 60)	
	RMINGTON HILLS		MI		48335	5				3200	(* J		
	STATE CAMPAIGN FUND Check if you (and/or your spouse filing a joint return) want \$3 of you to go to this fund. This will not inc your tax or reduce your refund.	ur taxes	a. Filer			6.			s box	if 2/3 of y		AFARERS	],
7.	2022 FILING STATUS. Check on	ie.				8.	2022	RESIDE		TATUS.	Chec	k all that apply.	
a.	X Single	* If y	ou check box "c," comp	lete		a.	Х	Resident					
b.	Married filing jointly	line belo	3 and enter spouse's fu w:	ll nan		b.		Nonresid	lent *		* If you check box "b" or "c," you must complete and include Schedule		te
C.	Married filing separately*					c.		Part-Yea	r Res	ident *		NR.	
9.	EXEMPTIONS. NOTE: If some	one els	e can claim you as a d	epend	lent, che	ck box	9e, e	nter 0 on	line 9	a and en	ter \$	1,500 on line 9e (see	instr.).
	a. Number of exemptions (see i	nstruct	ons)				9a.	1	x	\$5,000	9a.	500	0 00
	b. Number of individuals who qu		<b>.</b>		•		af,						
	blind, hemiplegic, paraplegic,				-		9b.		×	\$2,900	9b.		00
	c. Number of qualified disabled						9c. 9d.		- X	\$400	9c.		00
	d. Number of Certificates of Stil		SIII MUHHS (see Instru	cuons	)		90.		×	\$5,000	9d.		
	e. Claimed as dependent, see li	ine 9 N	OTE above				9e.				9e.		00
	f. Add lines 9a, 9b, 9c, 9d and	9e. En	ter here and on line 15							 Г	9f.	500	<u>0 oc</u>
10.	Adjusted Gross Income from y	our U.	S. Form 1040 (see instr	uctior	ıs)					. 10.		7377	<u>4 oc</u>
11.	Additions from Schedule 1, line	9. <b>Incl</b> ı	Ide Schedule 1							. 11.			00
12.	Total. Add lines 10 and 11									. 12.		7377	4 00
13.	Subtractions from Schedule 1, li	ne 30.	Include Schedule 1							. 13.			00
14.	Income subject to tax. Subtrac	t line 1	3 from line 12 If line 13	3 is a	eater th	an line	12 ei	nter "0"		. 14.		7377	4 00
15.	Exemption allowance. Enter a			-						Γ		500	
										Γ		6877	
16.	Taxable income. Subtract line	15 11011	ine 14. ii ine 15 is gre	eater	inan iine	14, er	iter U			. 16.			
	Tax. Multiply line 16 by 4.25% ( REFUNDABLE CREDITS	0.0425)					MOUN			. 17.		292 CREDIT	3  00
18.	Income Tax Imposed by governi Include a copy of the return (see			18a.					00	18b.			00
19.	Michigan Historic Preservation 1	Гax Cre	dit (see instructions).	19a.					00	19b.			00
20.	<b>Income Tax.</b> Subtract the sum of lines 18b and 19b i									20.		292	3 00
	in the sufficiences for and 1901	is great	er mannne 17, enter U							. 20. L		<u> </u>	2 100

2022 M	II-1040, Page 2 of 2	File	r's Full Social S	ecurity Numbe	r 843		63 —	4152	
21.	Enter amount of Income Tax from lin	ne 20				21.		2923	00
22.	Voluntary Contributions from Form	4642, line 6. <b>Include</b>	Form 4642			22.			00
23.	<b>USE TAX.</b> Use tax due on Internet, Worksheet 1 (see instructions)					23.		0	00
24	Total Tax Liability. Add lines 21, 22	and 23						2923	
	INDABLE CREDITS AND PAYM					· .			
25.	Property Tax Credit. Include MI-1	040CR or MI-1040CI	R-2			25.			00
26.	Farmland Preservation Tax Credi	t. Include MI-1040Cl	R-5		DERAL	26.	MIC	HIGAN	00
27.	Earned Income Tax Credit. Multiply enter result on line 27b				00	27b.			00
28.	Michigan Historic Preservation Tax			3581					00
29.	Credit for allocated share of tax paid	· · · · · ·							00
30.	Michigan tax withheld from Schedul	le W, line 6. <b>Include</b> :	Schedule W (	(do not subn	nit W-2s)	30.		3484	00
31.	Estimated tax, extension payments	and 2021 credit forw	vard			31.			00
32.	2022 AMENDED RETURNS ONLY. Amended returns must include Sch	. Taxpayers completir	ng an original						
	32a. If you had a refund and/or negative number on line 32		iginal return, che	eck box 32a an	d enter this amount a	sa			
	32b. If you paid with the original any additional tax paid after					lus 32c.			00
33.	Total refundable credits and payment	nts. Add lines 25, 26,	27b, 28, 29, 3	30, 31 and 32	2c 33	s.		3484	00
	IND OR TAX DUE								
34.	If line 33 is less than line 24, subtra	ct line 33 from line 24	4. If applicable	e, see instruct	tions.				
	Include interest 00 a	and penalty	00	۱	YOU OWE 34				00
35.	Overpayment. If line 33 is greater t	than line 24, subtract	line 24 from li	ine 33		j.		561	00
36.	Credit Forward. Amount of line 35	to be credited to you	r 2023 estima	ted tax for yo	ur 2023 tax return	<u>36.</u>			00
37.	Subtract line 36 from line 35				REFUND 37	,		561	00
	ECT DEPOSIT	a. Routing Trans			Account Number	·	c. Type of	Account	
	it your refund directly to your financial ion! See instructions and complete a, b	071921891		46924	70959	1.	X Checking	2. Savir	ngs
Dece	eased Taxpayer. If Filer and/or Spous R DATE OF DEATH ONLY. Example:				Preparer Certifi				
Filer		Spouse		-	Preparer's PTIN, FE				
Taxpayer Certification. I declare under penalty of perjury that the information			he information in	n this return	Preparer's Name (print or type) SYAM PRIYA RAM SAGAR GUPTA TA				
and attachments is true and complete to the best of my knowledge. Filer's Signature			Date		Preparer's Signature	)			
C =	no's Cienatura		Deta		SYAM PRIY				A
Spous	se's Signature		Date		Preparer's Business GLOBAL TA			one number	
			<u> </u>		245 ROONE				
	By checking this box, I authorize Tre	easury to discuss my	return with m	y preparer.	E BRUNSWI 678-965-9	CK N	J 08816		

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.

M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
	BODE	843 — 63 — 4152
M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)
		BODE

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

	4	В	С	D		E	
Enter <b>Filer</b> or	"X" for: <b>Spouse</b>	Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation		Box 17 — Michigan income tax withheld	
x		46-1786678	FRANKLIN INFOTEC	81984	00	3484	00
				(	00		00
				(	00		00
				(	00		00
				(	00		00
Enter	Table			00			
4.	SUB	3484	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" f Filer or Spor		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 Ta	ble 2 Subtotal from additional Sche		00		
5. <b>S</b> I	JBTOTAL. Enter total of Table 2, c		00		
6. <b>TC</b>	<b>DTAL.</b> Add lines 4 and 5. Enter her	3484	00		

## Attachment 13