Amended Return

2022 MICHIGAN Individual Income Tax Return MI-1040

| Return is due April 18, 2023. T | * - | , ' | lack ir | nk. | | | | | | | (Inclu | ude Schedule AMD) | |
|---|---|---|-----------|--------------|--------|-----------------------------|-------------------------|-----------------------------|---------------|------------------|--------------------------|---|-------------|
| 1. Filer's First Name | M.I. | Last Name | | | _ | | 2. | . Filer's | Full | Social Sec | curity | No. (Example: 123-45-6789 | 9) |
| ANURAG NARAYAN If a Joint Return, Spouse's First Name | M.I. | WADKAR Last Name | | | | | \dashv | 3(| 00 | | 83 | 6768 | |
| | | <u> </u> | | | | | 3. | . Spous | e's F | -ull Social : | Secur | rity No. (Example: 123-45-6 | 789) |
| Home Address (Number, Street, or P.O. Box) | | | | | | | | | | | | | |
| 8156 HONEYTREE BLVD | | C+ | · | ZIP Code | | | $\frac{1}{4}$ | Schoo | - Dic | triot Codo | /E dic | | \dashv |
| City or Town CANTON | | | tate I | 4818 | 37 | | 4. | School | | 2160 | (5 uiy | gits – see page 60) | |
| 5. 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 incr your tax or reduce your refund. | ır taxes | a. Filer S b. Spou | | | 6. | | Check | | box i | 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* | * If you line 3 below | | 's full n | name | t c | a. X b c | Resid Nonro Part- | ident residen -Year F | nt * Resid | ident * | | * If you check box "b" or "c," you must complete and include Schedule NR . | |
| 9. EXEMPTIONS. NOTE: If some | ne els | e can claim you as a | a depe | endent, ch | ieck b | юх 9е, е | enter (| 0 on lir | ne 9 | a and ent | ter \$1 | 1,500 on line 9e (see ins | str.). |
| Number of exemptions (see in | netructi | ions) | | | | 9a. | , | 1 | x | \$5,000 | 9a | 5000 | 00 |
| b. Number of individuals who quablind, hemiplegic, paraplegic, c. Number of qualified disabled vid. Number of Certificates of Stills e. Claimed as dependent, see ling f. Add lines 9a, 9b, 9c, 9d and 9 | quadri veterar birth fro ne 9 No | iplegic, or totally and insom MDHHS (see insi | d perma | nanently dis | isable | ed 9b. 9c. 9d. 9e. | e | | x x x | \$400 \$5,000 | 9b. 9c. 9d. 9e. | 5000 | 00 00 00 00 |
| | | | | | | | | | | | <u> </u> | • | |
| 10. Adjusted Gross Income from you | our U.S | 3. Form 1040 (see in | nstruct | iions) | | | | | | . 10. | | 50279 | 00 |
| 11. Additions from Schedule 1, line 9 |). Inclu | ıde Schedule 1 | | | | | | | | . 11. | | | 00 |
| 12. Total. Add lines 10 and 11 | | | | | | | | | | . 12. | | 50279 | 00 |
| 13. Subtractions from Schedule 1, lin | ne 30. | Include Schedule 1 | 1 | | | | | | | . 13. | | | 00 |
| 14. Income subject to tax. Subtract | line 1 | 3 from line 12. If line | e 13 is | s greater th | han li | ne 12, ε | enter " | 0" | | . 14. | | 50279 | 00 |
| 15. Exemption allowance. Enter an | nount f | rom line 9f or Sched | lN elut | R, line 19. | | | | | | . 15. | | 5000 | 00 |
| 16. Taxable income. Subtract line 19 | 5 from | line 14. If line 15 is | ; great | er than line | e 14, | enter "(| 0" | | | . 16. | | 45279 | 00 |
| 17. Tax. Multiply line 16 by 4.25% (0 | .0425) | | | | | | | | | . 17. | | 1924 | 00 |
| NON-REFUNDABLE CREDITS | | | | | | AMOUN | NT | | — | | | CREDIT | _ |
| 18. Income Tax Imposed by governm Include a copy of the return (see | | | | За. | | | | | 00 | 18b. | | | 00 |
| 19. Michigan Historic Preservation Ta | ax Cre | dit (see instructions) |). 19 | Эа | | | | | 00 | 19b. | | | 00 |
| 20. Income Tax. Subtract the sum of If the sum of lines 18b and 19b is | | | | | | | | | | . 20. | | 1924 | 00 |

| 2022 M | II-1040, Page 2 of 2 | | | | | | | | | |
|----------|---|--|---------------------|--|------------------|-------------------|----------|------------|----------|---|
| | | File | er's Full Social S | ecurity Number | r 3 | 00 - | _ | 83 — | 6768 | |
| 21. | Enter amount of Income Tax from li | ine 20 | | | | | 21. | | 1924 | 4 100 |
| 22. | Voluntary Contributions from Form | | | | | | 22. | | | 00 |
| | • | | | | | | | | | 100 |
| 23. | USE TAX. Use tax due on Internet, Worksheet 1 (see instructions) | | | | | | 23. | | (| 00 |
| 24 | Total Tax Liability. Add lines 21, 22 | 2 and 23 | | | | 24 | | | 1924 | 4 00 |
| | INDABLE CREDITS AND PAYN | | | | | | | | | |
| 25. | Property Tax Credit. Include MI-1 | 040CR or MI-1040C | R-2 | | | | 25. | | | 00 |
| 26. | Farmland Preservation Tax Credi | it. Include MI-1040C | :R-5 | | | | 26. | | | 00 |
| | | | | FE | DERAL | | | MIC | HIGAN | |
| 27. | Earned Income Tax Credit. Multiply enter result on line 27b | line 27a by 6% (0.06 | 6) and 27a | | | 00 | 27h | | | 00 |
| 28. | | | _ | 3581 | | - | 28. | | | _ |
| 29. | · · | , | | | | | 29. | | | _ |
| | · | , , | , | • | , | | | | | |
| 30. | Michigan tax withheld from Schedu | le W, line 6. Include | Schedule W | (do not subn | nit W-2s) | | 30. | | 237 | 1 00 |
| 31. | Estimated tax, extension payments | and 2021 credit forv | vard | | | | 31. | | | 00 |
| 32. | | ' ' | 0 | 2022 return s | should skip to | line 33. | | | | |
| | | • | , | | | | | | | |
| | | | riginal return, che | eck box 32a an | d enter this amo | ount as a | | | | |
| | | | | | | | 32c. | | | 00 |
| 33. | Total refundable credits and payme | ents. Add lines 25, 26 | , 27b, 28, 29, 3 | 30, 31 and 32 | 2c | 33. | | | 237 | $\begin{vmatrix} 1 \\ 00 \end{vmatrix}$ |
| REFU | IND OR TAX DUE | | | | | | | | | |
| 34. | If line 33 is less than line 24, subtra | act line 33 from line 2 | 4. If applicable | e, see instruct | tions. | | | | | |
| | | | | | | | | | | |
| | Include interest 00 a | and penalty | 00 | \ | YOU OWE | 34. | | | | 00 |
| 35. | Overpayment. If line 33 is greater | than line 24, subtrac | t line 24 from li | ine 33 | | 35. | | | 44 | 7 00 |
| 36 | Cradit Forward Amount of line 35 | to be credited to you | ır 2023 ostima | tod tay for yo | ur 2023 tay ro | turn | 36 | | | امرا |
| 30. | orealt i orward. Amount or line 33 | to be credited to you | 11 2025 estima | ied tax for yo | ui 2025 tax ie | тапт _. | 30.1 | | | |
| 37. | Subtract line 36 from line 35 | chedule W, line 6. Include Schedule W (do not submit W-2s) | | | | | | | | |
| | ECT DEPOSIT | a. Routing Trans | sit Number | b. <i>A</i> | Account Number | er | ┙. | | Account | |
| institut | it your refund directly to your financial ion! See instructions and complete a, b | 041000124 | | 41618' | 78285 | | 1. | X Checking | 2. Sav | rings |
| and c. | acced Townsyer KET 44 0 | | 04 0004 1 | ' | | 4!£! | <u> </u> | | | |
| | | | | | | | | | | |
| Filer | | Spouse | | _] [| | | or SSN | | | |
| | | | | | | | or type) | | | |
| | | | the information in | n this return | • | | . , | SAGAR | GUPTA : | ГА |
| Filer's | Signature | | Date | | | | R A M | SAGAR | GIIPTA ' | ГΔ |
| Spous | se's Signature | | Date | | | | | | | |
| | | Preservation Tax Credit. Include MI-1040CR-5 Preservation Tax Credit. Include MI-1040CR-5 Preservation Tax Credit. Multiply line 27a by 6% (0.06) and 27a. Done Tax Credit. And 10a by 6% (0.06) and 27a. Done Tax Credit. Multiply line 27a by 6% (0.06) and 27a. Done Tax Credit. Multiply line 27a by 6% (0.06) and 27a. Done Tax Credit. Multiply line 27a by 6% (0.06) and 27a. Done Tax Credit. Multiply line 27a by 6% (0. | | | | | | | | |
| | | | • | | | | | | | |
| | By checking this box, I authorize Tre | easury to discuss my | return with m | y preparer. | | | | 08816 | | |
| l | | | | | 678-965 | 5-95 | 2.2 | | | |

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 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) |
|--|------|-----------|---|
| ANURAG NARAYAN | | WADKAR | 300 — 83 — 6768 |
| 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

| <i>*</i> | ۱ ۴ | В | C | ט | | E | | | | |
|---|-------|----------------------------------|-------------------------|----------------------|----|---------------------|--------|--|--|--|
| Enter "X" for: Employer's identification number | | | | Box 1 — Wages, tips, | | Box 17 — Michigan | | | | |
| Filer or Spouse (Example: 38-1234567) | | (Example: 38-1234567) | Box c — Employer's name | other compensation | | income tax withheld | | | | |
| X | | 76-0689539 | INSPERITY PEO SE | 55779 | 00 | 2371 | 00 | | | |
| | | | | | 00 | | 100 | | | |
| | | | | | 00 | | 00 | | | |
| | | | | | | | \Box | | | |
| | | | | | 00 | | 00 | | | |
| | | | | | | | | | | |
| | | | | | 00 | | 00 | | | |
| | | | | | | | | | | |
| | | | | | 00 | | 00 | | | |
| | | | | | | | | | | |
| Enter | Table | 1 Subtotal from additional Sche | | | 00 | | | | | |
| | | | | | | | | | | |
| 4. | SUB | TOTAL. Enter total of Table 1, c | 4. | 2371 | 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: Payer's federal identification number (Example: 38-1234567) | | Payer's name Taxable pension distribution misc. income, etc. (see instructions) | | Michigan income tax withheld |
| | | | 00 | 00 |
| | | | 00 | 00 |
| | | | 00 | 00 |
| | | | 00 | 00 |
| | | | 00 | 00 |
| Enter Table | e 2 Subtotal from additional Sche | dule W forms (if applicable) | | 00 |
| 5. SUE | STOTAL. Enter total of Table 2, co | olumn E | 5 | . 00 |
| 6. TOT | AL. Add lines 4 and 5. Enter her | . 2371 00 | | |

REV 02/21/23 PRO