

2022 MICHIGAN Individual Income Tax Return MI-1040

Amended Return
(Include Schedule AMD)

Return is due April 18, 2023. Type or print in blue or black ink.

1. Filer's First Name Benjamin		M.I. J	Last Name Hawver		2. Filer's Full Social Security No. (Example: 123-45-6789) ● — ● — ●	
If a Joint Return, Spouse's First Name Leslie		M.I. M	Last Name Hawver		3. Spouse's Full Social Security No. (Example: 123-45-6789) ● — ● — ●	
Home Address (Number, Street, or P.O. Box) ●					4. School District Code (5 digits – see page 60) ●	
City or Town Tekonsha			State MI	ZIP Code 49092		
5. STATE CAMPAIGN FUND Check if you (and/or your spouse, if filing a joint return) want \$3 of your taxes to go to this fund. This will not increase your tax or reduce your refund. a. <input type="checkbox"/> Filer b. <input type="checkbox"/> Spouse				6. FARMERS, FISHERMEN, OR SEAFARERS <input type="checkbox"/> Check this box if 2/3 of your income is from farming, fishing, or seafaring.		
7. 2022 FILING STATUS. Check one. a. <input type="checkbox"/> Single b. <input checked="" type="checkbox"/> Married filing jointly c. <input type="checkbox"/> Married filing separately* <div style="border: 1px solid black; width: 200px; height: 20px; margin-left: 100px;"></div> <small>* If you check box "c," complete line 3 and enter spouse's full name below:</small>				8. 2022 RESIDENCY STATUS. Check all that apply. a. <input checked="" type="checkbox"/> Resident b. <input type="checkbox"/> Nonresident * c. <input type="checkbox"/> Part-Year Resident * <small>* If you check box "b" or "c," you must complete and include Schedule NR.</small>		

9. **EXEMPTIONS. NOTE:** If someone else can claim you as a dependent, check box 9e, enter 0 on line 9a and enter \$1,500 on line 9e (see instr.).

a. Number of exemptions (see instructions).....	9a.	3	x	\$5,000	9a.	15,000	00
b. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled	9b.		x	\$2,900	9b.	0	00
c. Number of qualified disabled veterans	9c.		x	\$400	9c.	0	00
d. Number of Certificates of Stillbirth from MDHHS (see instructions)	9d.		x	\$5,000	9d.	0	00
e. Claimed as dependent, see line 9 NOTE above	9e.	<input type="checkbox"/>			9e.	0	00
f. Add lines 9a, 9b, 9c, 9d and 9e. Enter here and on line 15	9f.				9f.	0	00
10. Adjusted Gross Income from your U.S. Form 1040 (see instructions)	10.					0	00
11. Additions from Schedule 1, line 9. Include Schedule 1	11.					0	00
12. Total. Add lines 10 and 11	12.					0	00
13. Subtractions from Schedule 1, line 30. Include Schedule 1	13.					0	00
14. Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0"	14.					0	00
15. Exemption allowance. Enter amount from line 9f or Schedule NR, line 19	15.					15,000	00
16. Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0"	16.					0	00
17. Tax. Multiply line 16 by 4.25% (0.0425)	17.					0	00

NON-REFUNDABLE CREDITS

		AMOUNT		CREDIT		
18. Income Tax Imposed by government units outside Michigan. Include a copy of the return (see instructions).....	18a.		00	18b.		00
19. Michigan Historic Preservation Tax Credit (see instructions).	19a.		00	19b.		00
20. Income Tax. Subtract the sum of lines 18b and 19b from line 17. If the sum of lines 18b and 19b is greater than line 17, enter "0"	20.					00

Filer's Full Social Security Number

371 — 98 — 5514

21. Enter amount of Income Tax from line 20.....	21.	0	00
22. Voluntary Contributions from Form 4642, line 6. Include Form 4642	22.	0	00
23. USE TAX. Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1 (see instructions).....	23.	0	00
24. Total Tax Liability. Add lines 21, 22 and 23.....	24.	0	00

REFUNDABLE CREDITS AND PAYMENTS

25. Property Tax Credit. Include MI-1040CR or MI-1040CR-2.....	25.	0	00
26. Farmland Preservation Tax Credit. Include MI-1040CR-5.....	26.	0	00
27. Earned Income Tax Credit. Multiply line 27a by 6% (0.06) and enter result on line 27b.....	27a.		00
	27b.	0	00
28. Michigan Historic Preservation Tax Credit (refundable). Include Form 3581	28.	0	00
29. Credit for allocated share of tax paid by an electing flow-through entity (see instructions).....	29.	0	00
30. Michigan tax withheld from Schedule W, line 6. Include Schedule W (do not submit W-2s)	30.	4,087	00
31. Estimated tax, extension payments and 2021 credit forward.....	31.	0	00
32. 2022 AMENDED RETURNS ONLY. Taxpayers completing an original 2022 return should skip to line 33. Amended returns must include Schedule AMD (see instructions) .			
32a. <input type="checkbox"/> If you had a refund and/or credit forward on the original return, check box 32a and enter this amount as a negative number on line 32c.			
32b. <input type="checkbox"/> If you paid with the original return, check box 32b and enter the amount paid with the original return, plus any additional tax paid after filing, as a positive number on line 32c. Do not include interest or penalty.			
32c.		0	00
33. Total refundable credits and payments. Add lines 25, 26, 27b, 28, 29, 30, 31 and 32c.....	33.	4,087	00

REFUND OR TAX DUE

34. If line 33 is less than line 24, subtract line 33 from line 24. If applicable, see instructions.	34.	0	00
Include interest <input type="text"/> 00 and penalty <input type="text"/> 00..... YOU OWE			
35. Overpayment. If line 33 is greater than line 24, subtract line 24 from line 33.....	35.	4,087	00
36. Credit Forward. Amount of line 35 to be credited to your 2023 estimated tax for your 2023 tax return ...	36.	0	00
37. Subtract line 36 from line 35.....	37.	4,087	00

DIRECT DEPOSIT

Deposit your refund directly to your financial institution! See instructions and complete a, b and c.

a. Routing Transit Number	b. Account Number	c. Type of Account
		1. <input type="checkbox"/> Checking 2. <input type="checkbox"/> Savings

Deceased Taxpayer. If Filer and/or Spouse died after December 31, 2021, enter dates below. **ENTER DATE OF DEATH ONLY.** Example: 04-15-2022 (MM-DD-YYYY)

Filer	— —	Spouse	— —
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Preparer Certification. I declare under penalty of perjury that this return is based on all information of which I have any knowledge.

Preparer's PTIN, FEIN or SSN

Taxpayer Certification. I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.

Preparer's Name (print or type)

Filer's Signature
 Date 2/6/2022

Preparer's Signature

Spouse's Signature
 Date 2/6/2022

Preparer's Business Name, Address and Telephone Number

By checking this box, I authorize Treasury to discuss my return with my preparer.

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 Benjamin	M.I. J	Last Name Hawver	2. Filer's Full Social Security No. (Example: 123-45-6789) [REDACTED]
If a Joint Return, Spouse's First Name Leslie	M.I. M	Last Name Hawver	3. Spouse's Full Social Security No. (Example: 123-45-6789) [REDACTED]

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

A	B	C	D	E
Enter "X" for: Filer or Spouse	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	[REDACTED]	[REDACTED]	0 00	2,611 00
	X [REDACTED]	[REDACTED]	0 00	731 00
	X [REDACTED]	[REDACTED]	0 00	745 00
	X [REDACTED]	[REDACTED]	0 00	0 00
	X [REDACTED]	[REDACTED]	0 00	0 00
Enter Table 1 Subtotal from additional Schedule W forms (if applicable).....				0 00
4. SUBTOTAL. Enter total of Table 1, column E.			4.	4,087 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	B	C	D	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
			0 00	00
			0 00	00
			00	00
			00	00
			00	00
Enter Table 2 Subtotal from additional Schedule W forms (if applicable).....				00
5. SUBTOTAL. Enter total of Table 2, column E.			5.	00
6. TOTAL. Add lines 4 and 5. Enter here and carry to MI-1040, line 30.....			6.	00