

Michigan Return

Thank you for using FreeTaxUSA.com to prepare your 2022 income tax return.

You can view the status of your tax return by signing in to your account at www.freetaxusa.com.

2023 tax preparation on FreeTaxUSA.com will be available starting in January of 2024.

We look forward to preparing your 2023 tax return.

Amended Return

2022 MICHIGAN Individual Income Tax Return MI-1040

Retu	rn is due April 18, 2023. Ty	pe o	print in blue or b	lack	ink.							(Incit	ide Schedule AMD)		
1. File	s First Name M.I. Last Name						2. Filer's Full Social Security No. (Example: 123-45-6789)								
	MICHELLE	M KOHN													
If a Jo	Joint Return, Spouse's First Name M.I. Last Name						-	375-98-1217							
Home	Address (Number, Street, or P.O. Box)								3. Spous	se's F	Full Social	Secur	ity No. (Example: 123-45-6	789)	
	1690 SPRINGBROOK	מם	C												
	r Town	KD_		tate	ZIP Cod	de		\dashv	4 Schoo	ol Dis	trict Code	(5 dia	its – see page 60)	\dashv	
	BOYNE FALLS			ΔI	497						030	(3	pg/		
	STATE CAMPAIGN FUND		1.		1 10,	Ť	6. FA	RME				SEA	AFARERS		
	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.							ARMERS, FISHERMEN, OR SEAFARERS Check this box if 2/3 of your income is from farming, fishing, or seafaring.							
7.	2022 FILING STATUS. Check one						8. 20 2	22 RE	SIDENC	Y S	TATUS.	Chec	k all that apply.		
a.	X Single		ou check box "c," co				a. X	Re	esident						
b.	Married filing jointly	line 3	3 and enter spouse' w:	s full	name		b. Nonresident * "c," you mus					* If you check box "b" or "c," you must complete and include Schedule	t complete		
_	Manufact Climan and a taken						. —	٦ ۵.	V I	.	-l		NR.		
C.	Married filing separately*]	C	_ Pa	ırt-Year I	≺esi	aent "				
9.	EXEMPTIONS. NOTE: If someon	ne els	e can claim vou as	a der	pendent	chec	k hox 9e	e ente	er 0 on li	ne 9	and ent	ter \$1	1 500 on line 9e (see ins	str)	
0.			o our oranni you uo		, , , ,	, 000.		, J	7. 0 0]	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	a. Number of exemptions (see ins	structi	ons)				9	9a.	2	х	\$5,000	9a.	10,000	00	
	b. Number of individuals who qual	ify for	one of the following	spec	ial exem	nptions	s: deaf,								
	blind, hemiplegic, paraplegic, c	ıuadri	olegic, or totally and	d pern	manently	/ disat		9b		Х	\$2,900	9b.		00	
c. Number of qualified disabled veterans								Х	\$400	9c.		00			
	d. Number of Certificates of Stillb	irth fro	om MDHHS (see ins	structi	ions)		9	9d		Х	\$5,000	9d.		00	
	e. Claimed as dependent, see line	e 9 N	OTE above				9	9e. [9e.		00	
	f. Add lines 9a, 9b, 9c, 9d and 9e	e. Ent	er here and on line	15							г	9f.	10,000	00	
10.	Adjusted Gross Income from yo	ur U.S	6. Form 1040 (see in	nstrud	ctions)						10.		33,737	00	
11.	Additions from Schedule 1, line 9.	Inclu	de Schedule 1								11.		0	00	
12.	Total. Add lines 10 and 11										12.		33,737	00	
13.	Subtractions from Schedule 1, line	e 30.	Include Schedule	1							13.		0	00	
14.	Income subject to tax. Subtract	line 13	3 from line 12. If lin	e 13 i	is greate	er than	line 12	, ente	r "0"		14.		33,737	00	
15.	Exemption allowance. Enter am	ount f	om line 9f or Scheo	dule N	NR, line ′	19					15.		10,000	00	
16.	Taxable income. Subtract line 15	from	line 14. If line 15 is	grea	iter than	line 1	4, enter	"0"…			16.		23,737	00	
17.	Tax. Multiply line 16 by 4.25% (0.0	0425)									17.		1,009	00	
NON	REFUNDABLE CREDITS						AMO	UNT			_		CREDIT		
18.	Income Tax Imposed by governme Include a copy of the return (see i				8a					00	18b.			00	
19.	Michigan Historic Preservation Ta	x Cre	dit (see instructions). 1	9a					00	19b.			00	
20.	Income Tax. Subtract the sum of If the sum of lines 18b and 19b is										20.		1,009	00	

2022 N	I-1040, Page 2 of 2							
	Filer's	Full Social S	Security Number	er		375-	-98-1217	
21.	Enter amount of Income Tax from line 20					21.	1,009	00
22.	Voluntary Contributions from Form 4642, line 6. Include Fo					22.	,	00
23.	USE TAX. Use tax due on Internet, mail order or other out Worksheet 1 (see instructions)	of-state pu	rchases from	1		23.	0	00
					Γ			"
24.	Total Tax Liability. Add lines 21, 22 and 23				24.		1,009	00
REFU	NDABLE CREDITS AND PAYMENTS					Г		_
25.	Property Tax Credit. Include MI-1040CR or MI-1040CR-	2				25.	0	00
26.	Farmland Preservation Tax Credit. Include MI-1040CR-	5		DERAL		26.	0 MICHIGAN	00
27.	Earned Income Tax Credit. Multiply line 27a by 6% (0.06) a enter result on line 27b				00	27b.		00
28.	Michigan Historic Preservation Tax Credit (refundable). Inc		3581			28.		00
29.	Credit for allocated share of tax paid by an electing flow-th					29.	0	00
20	Michigan tox withhold from Schodule W. line 6. Include Sc	shadula W	(de net cub	mit \W 20\		20	983	
30.	Michigan tax withheld from Schedule W, line 6. Include Sc	cneaule w	(ao not subi	mit vv-28)		30.	903	100
31.	Estimated tax, extension payments and 2021 credit forwar	d				31.	0	00
32.	2022 AMENDED RETURNS ONLY. Taxpayers completing	0	2022 return	should skip to l	line 33.			
	Amended returns must include Schedule AMD (see instr	•						
	32a. If you had a refund and/or credit forward on the origin negative number on line 32c.	nal return, ch	eck box 32a ar	nd enter this amo	ount as a			
	32b. If you paid with the original return, check box 32b and any additional tax paid after filing, as a positive number					32c.	0	00
33.	Total refundable credits and payments. Add lines 25, 26, 2	7b, 28, 29,	30, 31 and 3	2c	33.		983	00
REFU	ND OR TAX DUE				_			
34.	If line 33 is less than line 24, subtract line 33 from line 24.	If applicable	e, see instruc	tions.				
	Include interest 00 and penalty	00		YOU OWE	34.		26	00
		,						
35.	Overpayment. If line 33 is greater than line 24, subtract lin	ne 24 from I	ine 33		35.			00
36.	Credit Forward. Amount of line 35 to be credited to your 2	2023 estima	ited tax for yo	our 2023 tax re	turn	36.		00
				DEELIND			•	
	Subtract line 36 from line 35			REFUND Account Number	37.		c. Type of Account	00
Depos	it your refund directly to your financial	Italiibei	D. /	Account Number	*1	\dashv $_{1, \lceil}$	Checking 2. Savir	ıas
institut and c.	ion! See instructions and complete a, b					"	ccog	3-
	ased Taxpayer. If Filer and/or Spouse died after December 31 R DATE OF DEATH ONLY. Example: 04-15-2022 (MM-DD-YY)		dates below.				declare under penalty of perjury tation of which I have any knowled	
Filer	Spouse			Preparer's PTI	N, FEIN o	r SSN		
				Preparer's Nam	ne (print d	or type)		
	ayer Certification. I declare under penalty of perjury that the achments is true and complete to the best of my knowledge.	information ii	n this return	i roparor o rian	ю (ринск	or typo)	SELF-PREPARED	
Filer's	Signature	Date		Preparer's Sigr	nature			
Spous	e's Signature	Date		Preparer's Bus	iness Na	me, Add	Iress and Telephone Number	
Ш	By checking this box, I authorize Treasury to discuss my re	turn with m	y preparer.					
1				1				

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)
MICHELLE	M	KOHN	375-98-1217
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

Α		В	С	D		E	П
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	
Х		38-2687736	MORLEY COMPANIE	549	00	15 0	00
X		93-1221825	XPO LOGISTICS M	23,024	00	868 0	00
X		38-1750383	FLETCH'S, INC	2,542	00	92 0	00
X		59-1219168	GMRI, INC.	177	00	8 0	00
					00	0	00
Enter	Table	0 0	00				
4.	SUB	983 0	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 Filer or Spous		Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld
			00	00
			000	
			00	00
			00	00
			00	00
Enter Tab	00			
5. SU	BTOTAL. Enter total of Table 2, c	olumn E	5.	0 00
6. TO	TAL. Add lines 4 and 5. Enter her	983 00		

2022 MICHIGAN Direct Debit of Individual Income Tax Payment

Issued under authority of Public Act 281 of 1967 and Public Act 284 of 1964, as amended.

DO NOT MAIL TO TREASURY; RETAIN FOR YOUR RECORDS.

MICHIGAN Direct Debit of Individual Income Tax Payment (Form 5472) provides a record of the direct debit request included in the Michigan and/or City of Detroit electronic return submission. Do not use Form 5472 to make payments to the Michigan Department of Treasury.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
MICHELLE	M	KOHN	
If a Joint Return, Spouse's First Name	M.I.	Last Name	375-98-1217
			3. Spouse's Full Social Security No. (Example: 123-45-6789)
Submission Identification Number			
44082820230300119490			

DIRECT DEBIT DETAILS

4.	Name of Financial Institution	SEE ACCOUNT INFO BELOW				
5.	Routing Transit Number (RTN)	272485385				
6.	Account Number	10008000239460				
7.	Type of Account	X (a) Checking (b) Savings				
8.	Requested Debit Date (MM-DD-YYYY)	01-30-2023				
9.	State Individual Income Tax Payment		9.		26	00
10.	City of Detroit Individual Income Tax Pa	lyment	10.			00
11.	Total. Add lines 9 and 10	DEBIT AMOUNT	11.		26	00

DIRECT DEBIT AUTHORIZATION

Submitting the return through e-file, and including the direct debit information shown above, authorizes the Michigan Department of Treasury and its designated financial agent to initiate an electronic funds withdrawal entry to the financial institution account indicated above for payment of my Michigan and/or City of Detroit taxes owed on this return. The authorization is valid for this transaction only.

In the event the payment is returned as unpaid, the Michigan Department of Treasury may charge a return item fee, up to the maximum amount allowed by law. Penalty and interest will accrue on any tax due that has not been paid by the original due date of the return or extended due date for a city return.