Amended Return

## 2022 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 18, 2023.	. Type o	r print in blue o	r black i	nk.						(Inclu	ude Schedule AMD)	1			
Filer's First Name	M.I.	The same						s Full	Social Sec	curity	No. (Example: 123-45-6789	))			
LISA	G	DIXON													
If a Joint Return, Spouse's First Name	oint Return, Spouse's First Name M.I. Last Name					ightharpoonup	381-54-4880								
Home Address (Number, Street, or P.O. B	(OX)						3. Spou	3. Spouse's Full Social Security No. (Example: 123-45-6789)							
390 STERLING	JX)														
City or Town		1	State	ZIP Code			4. Scho	ol Dis	strict Code	(5 dic	gits – see page 60)				
DIMONDALE		l	MI	48821					070	(	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
5. STATE CAMPAIGN FUND						FARN				SE/	AFARERS				
Check if you (and/or your spous filing a joint return) want \$3 of you to go to this fund. This will not in your tax or reduce your refund.	our taxes	, <u> </u>	Filer			П		box	if 2/3 of ye		ncome is from farming,				
7. 2022 FILING STATUS. Check of	one.				8.	2022	RESIDEN	CY S	STATUS. Check all that apply.						
a. X Single		ou check box "c,"			a.	X	Resident								
b. Married filing jointly	line 3	3 and enter spous w:	se's full n					ent *			* If you check box "b" or "c," you must complete and include Schedule				
c. Married filing separately*					с.		Part-Year	NR. Part-Year Resident *							
9. <b>EXEMPTIONS. NOTE:</b> If som	neone els	e can claim you	as a dep	endent, che	ck bo	x 9e, e	nter 0 on I	ine 9	and en	ter \$	1,500 on line 9e (see ins	tr.).			
a. Number of exemptions (see		,					1	х	\$5,000	9a.	5,000	00			
<ul> <li>b. Number of individuals who q</li> <li>blind, hemiplegic, paraplegi</li> </ul>								l .,	<u>ቀ</u> ጋ ጋጋጋ	2h					
c. Number of qualified disable				-		9b. 9c.		X	\$2,900 \$400	9b. 9c.		00			
d. Number of Certificates of St								^	\$5,000	9d.		00			
		»		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1	Ψ=,	-		-			
e. Claimed as dependent, see	line 9 No	OTE above				9e.				9e.		00			
f. Add lines 9a, 9b, 9c, 9d and	d 9e. Enf	ter here and on lii	ne 15						Г	9f.	5,000	00			
10. Adjusted Gross Income from	your U.	3. Form <i>1040</i> (se	e instruc	tions)					. 10.		52,657	00			
11. Additions from Schedule 1, line	ə 9. <b>Incl</b> ı	ude Schedule 1 .	•••••						. 11.	3,759					
12. <b>Total.</b> Add lines 10 and 11									. 12.	56,416					
13. Subtractions from Schedule 1,	line 30.	Include Schedu	ıle 1						. 13.		0	00			
14. Income subject to tax. Subtra	act line 1	3 from line 12. If	line 13 is	s greater th	an line	12, e	nter "0"		. 14.		56,416	00			
15. Exemption allowance. Enter	amount f	rom line 9f or Sch	hedule N	R, line 19					. 15.	5,000					
16. <b>Taxable income.</b> Subtract line	Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0"								. 16.	51,416					
17. <b>Tax.</b> Multiply line 16 by 4.25% (0.0425)								. 17.		2,185	   <sub>00</sub>				
NON-REFUNDABLE CREDITS			AMOUNT						· · · · <u>-</u>		CREDIT	100			
18. Income Tax Imposed by govern	nment ur	nits outside Michig	aan.												
Include a copy of the return (se				8a.				00	18b.			00			
19. Michigan Historic Preservation	ı Tax Cre	dit (see instructio	ns). 19	9a				00	19b.			00			
20. <b>Income Tax.</b> Subtract the sum If the sum of lines 18b and 19b									. 20.		2,185	00			

2022 M	I-1040, Page 2 of 2							
	Filer's Fu	ull Social S	ecurity Numbe	er		381-	-54-4880	
21.	Enter amount of Income Tax from line 20					21.	2,185	Ιοο
22.	Voluntary Contributions from Form 4642, line 6. <b>Include Form</b>	22.		00				
23.	<b>USE TAX.</b> Use tax due on Internet, mail order or other out-of					Ī		
23.	Worksheet 1 (see instructions)				<u>.</u>	23.	0	00
24.	Total Tax Liability. Add lines 21, 22 and 23				24.		2,185	00
REFU	NDABLE CREDITS AND PAYMENTS					г		
						.	0	
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
20.	Tailliand Fleservation Tax Credit. Include Mi-1040CK-5			DERAL		20.	MICHIGAN	100
07	Earned Income Tax Credit. Multiply line 27a by 6% (0.06) and	, Г				Γ		
27.	enter result on line 27b				00	27b.		00
28.	Michigan Historic Preservation Tax Credit (refundable). Inclu	_	3581		<u> </u>	28.		00
29.	Credit for allocated share of tax paid by an electing flow-through	ugh entity	(see instruc	tions)		29.	0	00
30.	Michigan tax withheld from Schedule W, line 6. Include Sche	edule W (	(do not subr	nit W-2s)		30.	0	00
31.	Estimated tax, extension payments and 2021 credit forward					31.	0	00
32.	2022 AMENDED RETURNS ONLY. Taxpayers completing ar	0	2022 return	should skip to l	line 33.			
	Amended returns must include Schedule AMD (see instruc	ctions).						
	32a. If you had a refund and/or credit forward on the original	return, che	eck box 32a ar	nd enter this amo	ount as a			
	inegative number on line 326.							
	32b. If you paid with the original return, check box 32b and e any additional tax paid after filing, as a positive number					32c.	0	00
	any additional tax paid allowing, as a positive number	011 1110 021	0. 20 1.01	ao	- I - I			
33.	Total refundable credits and payments. Add lines 25, 26, 27b	, 28, 29, 3	30, 31 and 32	2c	33.		0	00
REFU	ND OR TAX DUE				_			
34.	If line 33 is less than line 24, subtract line 33 from line 24. If a	applicable	e, see instruc	tions.				
		00	,	VOLLOWE			0 105	
	Include interest 00 and penalty	00]		YOU OWE	34.		2,185	100
35.	Overpayment. If line 33 is greater than line 24, subtract line	24 from li	ino 22		35.			00
33.	Over payment. If line 33 is greater than line 24, subtract line	24 11011111	IIIE 33		33.	T		100
36.	Credit Forward. Amount of line 35 to be credited to your 202	23 estimat	ted tax for vo	our 2023 tax re	turn	36.		00
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Γ			
37.	Subtract line 36 from line 35			REFUND	37.		0	00
	CT DEPOSIT a. Routing Transit Nu	ımber	b. /	Account Numbe	er		c. Type of Account	
	t your refund directly to your financial on! See instructions and complete a, b					1.	Checking 2. Savir	ngs
and c.								
	ased Taxpayer. If Filer and/or Spouse died after December 31, 20 R DATE OF DEATH ONLY. Example: 04-15-2022 (MM-DD-YYYY)		dates below.				declare under penalty of perjury a ation of which I have any knowled	
	R DATE OF DEATH ONLT. Example: 04-15-2022 (MINI-DD-1111)	)		Preparer's PTI			allon of which I have any knowled	ge.
Filer	Spouse				.,			
Tayn	avor Cortification I declare under nanelty of nations that the inf	farmatian in	thin roturn	Preparer's Nam	ne (print	or type)	SELF-PREPARED	
	ayer Certification. I declare under penalty of perjury that the info achments is true and complete to the best of my knowledge.	ormation in	i triis returri					
Filer's	Signature Da	ate		Preparer's Sigr	nature			
Spous	e's Signature Da	ate		Preparer's Bus	iness Na	me, Addı	ress and Telephone Number	
$  \sqcup  $	By checking this box, I authorize Treasury to discuss my return	rn with my	y 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 Schedule 1 Additions and Subtractions

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

Include with Form MI-	1040. Type or p	rint i	n blue or black ink.			Attachment 01			
Filer's First Name		M.I.	M.I. Last Name Filer's Full Soci		cial Security No. (Example: 123-45-6789)				
LISA		G DIXON							
Additions to Incon	ne (all entries	mus	t be positive numbers)						
			oligations issued by states		1.	00			
			y income, including self-employmen tax paid by an electing flow-through		2.	3,75900			
3. Gains from Mich	igan column of	MI-1	040D and MI-4797		3.	00			
4. Losses attributal	ble to other stat	es (s	ee instructions)		4.	00			
5. Net loss from fed	deral column of	your	Michigan MI-1040D or MI-4797		5.	00			
			neral expenses (Michigan sourced)		6.	00			
7. Federal Net Ope	erating Loss dec	ductio	on included in AGI		7.	00			
8. Other (see instru	uctions). Describ	oe: _			8.	00			
9. Total additions.	. Add lines 1 th	rouç	gh 8. Enter here and on MI-1040, I	line 11	9.	3,75900			
Subtractions from	Income (all e	ntrie	s must be positive numbers)		_				
			s and other U.S. obligations include		10.	00			
			from military retirement benefits du onal Guard, or taxable railroad retire		11.	00			
12. Gains from fede	ral column of M	ichig	an MI-1040D and MI-4797		12.	00			
13. Income attributa	ble to another s	tate.	Explain type and source:		13.	00			
14. Taxable Social S	Security benefits	or n	nilitary pay (not retirement) included	d on MI-1040, line 10	14.	00			
15. Income earned v	while a resident	of a	Renaissance Zone (see instruction	s)	15.	00			
•			refunds received in 2022 and include ()		16.	00			
17. Michigan Educa	tion Savings Pro	ogra	m, MI 529 Advisor Plan, and Michig	an Achieving a Better		00			
18. Michigan Educa	tion Trust				18.	00			
19. Oil, gas, and nor	nferrous metallio	c mir	nerals income (Michigan sourced) ir	ncluded in AGI	19.	00			
20. Resident Tribal I	Member income	exe	mpted under a State/Tribal tax agre Bulletin 1988-47	eement or	20.	00			
			gram. Enter amount from line 3 of F gram. Include Form 5792		21.	00			
22. Miscellaneous s	ubtractions (see	inst	ructions). <b>Describe:</b>		22.	00			

## 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)
LISA	G	DIXON	381-54-4880

## **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		SPOUSE							
	A.	B.	C.	D.		E.	F.		G.	H.		
	Year of Birth (19xx)	Age as of 12-31-2022	Check if filer received benefits from SSA exempt employment	Check if filer retired as of 01-01-2013 and born after 1952		Year of Birth (19xx)	Age as of 12-31-2022	2	Check if spouse received benefits from SSA exempt employment	Check if sporetired as 01-01-2013 born after 1	of and	
24.	(if married) wa	s born during the	duction. Complet e period January 1 lete lines 25, 26	I, 1946 through	De	cember 31, 19	52, and	24.			00	
	Tier 3 Michiga (if married) wa age 67 on or b from line 6 of V	and reached nter amount	25.			00						
26.			nount from line 16			•		26.			00	
27.	limited to \$12,0 any deduction  Check this	697 for single or for retirement be box if you are the	deduction for taxp married filing sep enefits (see instruc- unremarried survivir born before 1946 w	arately filers and ctions)	1 \$2 	25,394 for joint	t filers, less	27.			00	
		•	ı 27							C	00	
29.			on. Enter amount t lude Form 5674 .								00	
30.	Total Subtrac	tions. Add lines	28 and 29. Enter	here and on MI-	10	40, line 13		30.		C	00	