

## 2022 Federal Tax Return Filing Instructions FOR THE YEAR ENDING

December 31, 2022

Prepared for	MICHAEL R MCDERMOTT	
Tax Summary	Gross Income  Adjusted Gross Income  Total Deductions  Total Taxable Income  Total Tax  Total Payments	\$79805 \$79805 \$12951 \$66854 \$10322 \$8903
Make check payable to	Refund AmountAmount You Owe	\$1419
Mailing Address	Since you are filing your return electronic signature, you do not mail y	

## Instructions

If you e-filed your return and it has been accepted, you will get notified via text or email if you opted for that option.

If you have a balance due, but have elected to have it electronically withdrawn. Keep a copy of your return and supporting documents for your records.



## 2022 STATE TAX RETURN FILING INSTRUCTIONS

**MICHIGAN** 

## FOR THE YEAR ENDING

December 31, 2022

Prepared for	MICHAEL R MCDERMOTT
Tax Summary	Adjusted Gross Income
Mailing Address	Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return.

## Special Instructions

Keep A Copy

Click on Main Menu and then E-File or Print to print your return. Attach your copy of each W-2, W-2G, 1099R or 1099G with withholding. Keep with your records for three years.

MICHAEL MCDERMOTT

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NCOME: Wages, salaries, tips, etc.	2022 Single	2021	Difference
NCOME: Wages, salaries, tips, etc.	Bingie		
Wages, salaries, tips, etc.			
	79,709	71,883	7,826
Interest income	<u> </u>	<u> </u>	•
Ordinary dividend income · · · · · · · · · · · · · · · · · · ·	96	88	8
IRA distributions and pension income			
Taxable social security income			
Capital gain or (loss) (Schedule D)			
Schedule 1 - Income			
Refunds of state and local taxes			
Alimony received			
Business income or (loss) (Schedule C) · · · · · · · · · · · · · · · · · ·		<del></del>	
Other gains or (losses) (Form 4797) · · · · · · · · · · · · · · · · · · ·			
Rental real estate, partnerships, estates, etc. (Schedule E)			
Farm income or (loss) (Schedule F)			
Unemployment compensation			
Other income			
Total income	70 005	71,971	7 02/
Total income	79,805	11,911	7,834
Health savings account deduction  Moving expenses  Deductible part of self-employment tax  Self-employed SEP, SIMPLE and qualified plans deduction  Self-employed health insurance  Penalty on early withdrawal of savings  Alimony paid  IRA contributions  Student loan interest deduction  Archer MSA deduction  Other adjustments			E
Total adjustments  DJUSTED GROSS INCOME:	79,805	71,971	7,834
	19,000	1	
EDUCTIONS:			
Standard deduction or Itemized deductions	12,950	12,550	400
Charitable contributions if taking standard deduction	N/A	<u> </u>	
If itemized, Schedule A deductions:		<del></del>	
Medical and dental expenses			
Sales, income, and other taxes paid	8,815		8,815
Interest paid			3,086
Gifts to charity			
Casualty and theft losses			
Other miscellaneous deductions · · · · · · · · · · · · · · · · · · ·			
Qualified business income deduction	1		1
AXABLE INCOME:		59,421	7,433

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CDERMOTT			Keep for Your Record
	2022	2021	Difference
AX COMPUTATION (BEFORE CREDITS):			
Tax	10,322	8,812	1,510
Tax calculation method	QDCGTW	QDCGTW	
Alternative minimum tax			
Excess advance premium tax credit repayment			
Total taxes	10,322	·	1,510
Tax rate	22%	22%	
CREDITS:			
Child and other dependents tax credit			
Schedule 3 - Non-Refundable Credits			
Foreign tax credit · · · · · · · · · · · · · · · · · · ·			
Child care credit			
Education credit			
Retirement savings contribution credit · · · · · · · · · · · · · · · · · · ·			
Other credits · · · · · · · · · · · · · · · · · · ·			
Total credits			
OTHER TAXES:  Schedule 2 - Other Taxes  Self-employment tax  Additional tax on IRAs		OF	2Y
Other taxes			
TOTAL TAXES:	10,322	8,812	1,510
PAYMENTS:			
Federal income tax withheld	8,903	7,273	1,630
Estimated payments made			
Earned income credit		FIL	E
Schedule 3 - Refundable Credits & Payments			
ACA premium tax credit			
Other payments			
Total payments	8,903	7,273	1,630
AMOUNT DUE / REFUND:			
Amount overpaid · · · · · · _			
Overpayment applied to next year · · · · · · · · · · · · · · · · · · ·			
Refund			
Amount due	1,419	1,553	-134
Penalty · · · · · · · · · · · · · · · · · · ·	_	14	-134

Tax Calculation Methods:

QDCGTW = Qual Div Cap Gain Tax WS F8615 = Child with unearned income TCW = Tax Comp Worksheet (rates)
TABLE = Tax Table

XQB

Department of the Treasury--Internal Revenue Service 1040 U.S. Individual Income Tax Return OMB No. 1545-0074 IRS Use Only--Do not write or staple in this space Filing Status Single | Married filing jointly | Married filing separately (MFS) Head of household (HOH) Qualifying surviving spouse (QSS) Check only If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the one box qualifying person is a child but not your dependent: Your first name and middle initial Your social security number Last name MICHAEL R MCDERMOTT If joint return, spouse's first name and middle initial Last name Spouse's social security number Home address (number and street). If you have a P.O. box, see instructions. Presidential Election Campaign Apt. no. Check here if you, or your 652 FOREST ST spouse if filing jointly, want \$3 City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code to go to this fund. Checking a 48186 MΙ WESTLAND box below will not change your tax or refund. Foreign country name Foreign province/state/county Foreign postal code ⊠ You Spouse Digital At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, No exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Assets Standard Someone can claim: You as a dependent Your spouse as a dependent Deduction Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You: Were born before January 2, 1958 Are blind Spouse: | Was born before January 2, 1958 Is blind (4) Check the box if qualifies Dependents (see instructions): (2) Social security (3) Relationship for (see inst.) number Child tax credit (1) First name If more than four dependents see instructions and check here . . . Total amount from Form(s) W-2, box 1 (see instructions) 79, Income 1a 1a 1b Household employee wages not reported on Form(s) W-2 ...... b Attach Form(s) С Tip income not reported on line 1a (see instructions) 1c W-2 here. Also attach Forms d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d W-2G and Taxable dependent care benefits from Form 2441, line 26. 1e 1099-R if tax was withheld. 1f Employer-provided adoption benefits from Form 8839, line 29 Wages from Form 8919, line 6. 1g If you did not get a Form Other earned income (see instructions) 1h W-2, see Nontaxable combat pay election (see instructions) instructions Add lines 1a through 1h. 79**,**709 Attach Tax-exempt interest 2a **b** Taxable interest 2h 2a Sch. B if 90 3b За Qualified dividends..... За **b** Ordinary dividends required. 4a 4b IRA distributions 4a **b** Taxable amount Standard 5a Pensions and annuities 5a **b** Taxable amount 5b 6a Social security benefits 6a **b** Taxable amount 6b **Deduction for-**С If you elect to use the lump-sum election method, check here (see instructions) Single or Married filing separately. 7 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here \$12,950 8 8 Married filing iointly or 79,805 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 Qualifying surviving spouse, 10 10 Adjustments to income from Schedule 1, line 26 . . . . . . . . . . \$25,900 79,805 11 Subtract line 10 from line 9. This is your adjusted gross income 11 Head of Standard deduction or itemized deductions (from Schedule A) 12,950 12 12 household \$19,400 13 Qualified business income deduction from Form 8995 or Form 8995 13 If you checked 14 Add lines 12 and 13... 14 any box under

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

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Standard

Deduction, see instructions. Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income

Form 1040 (20	022) MICHAEL R MCDERN	TTOM			Page 2
Tax and	16 Tax (see instructions). Check if any	from Form(s): 1 881	4972 3	16	10,322
Credits	17 Amount from Schedule 2, line 3				_
	<b>18</b> Add lines 16 and 17				10,322
	19 Child tax credit or credit for other de				
	20 Amount from Schedule 3, line 8 · · ·			20	
	<b>21</b> Add lines 19 and 20			21	
	22 Subtract line 21 from line 18. If zero	or less, enter -0		22	10,322
	23 Other taxes, including self-employm	nent tax, from Schedule 2,	line 21	23	
	24 Add lines 22 and 23. This is your to	tal tax		24	10,322
<b>Payments</b>	25 Federal income tax withheld from:				
	<b>a</b> Form(s) W-2			8,903	
	<b>b</b> Form(s) 1099				
	c Other forms (see instructions) · · · ·				
	d Add lines 25a through 25c · · · · · ·			25d	8,903
	26 2022 estimated tax payments and a	• •	The state of the s	26	
If you have a qualifying	Earned income credit (EIC)				
child, attach Sch. EIC.	28 Additional child tax credit from Schedule 8	8812	28		
	29 American opportunity credit from Form 886				
	<b>30</b> Reserved for future use				
	31 Amount from Schedule 3, line 15				
	<b>32</b> Add lines 27, 28, 29, and 31. These	are your total other payr	ments and refundable credits		
	<b>33</b> Add lines 25d, 26, and 32. These an				8,903
Refund	34 If line 33 is more than line 24, subtra		, ,		
	35a Amount of line 34 you want refund			35a	
Direct deposit?	<b>b</b> Routing number XXXXXXXXX		c Type:	_ Savings	
See instructions	d Account number AAAAAAAA				
	36 Amount of line 34 you want applied		tax		
Amount	37 Subtract line 33 from line 24. This is	-			1 110
You Owe	For details on how to pay, go to ww		1 1		1,419
	38 Estimated tax penalty (see instructio				
	Do you want to allow another person t				
Designee	instructions				
	Designee's	T110	Phone	Personal identif	
	name HRB TAX GROUP		no. 831-722-086		55951
Sign	Under penalties of perjury, I declare that I have ex- correct, and complete. Declaration of preparer (oth				belief, they are true,
Here					
Joint return?	Your signature	Date	Your occupation	If the IRS sent you an Io Protection PIN, enter	lentity
See instructions.			Recruiter	it here (see inst.)	una an Idantifu
Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sig	<sup>jn.</sup> Date	Spouse's occupation	If the IRS sent your spo Protection PIN, enter	use an identity
,				it here (see inst.)	
	Phone no. 734-890-2146		rmcdermott87@hot		
Paid		reparer's signature	Date	PTIN	Check if:
Preparer	SANDY VILLANUEVA		03/22/2023	3P01307042	Self-employed
=	Firm's name HRB TAX GI			Phone no. 83	31-722-0862
Use Only	Firm's address 1842 MAIN				
	WATSONVILI	LE CA 95076		Firm's EIN	431871840

Go to www.irs.gov/Form1040 for instructions and the latest information.

Form **1040** (2022)

Form **8995** 

## Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2022
Attachment
Sequence No. 55

MICHAEL R MCDERMOTT

Your taxpayer identification number

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c)	Qualified business income or (loss)
i				
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (o	2) 2		<b>5</b> 1 7
3	Qualified business net (loss) carryforward from the prior year	3 (		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	· · · · <b>4</b> 0		
5	Qualified business income component. Multiply line 4 by 20% (0.20) · · · · · · ·	,,	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)		/	
	(see instructions)	····· <u>6</u> 4		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	ar <mark>7 (</mark> )		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
_	or less, enter -0-	_	_	
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	<u> </u>
10	Qualified business income deduction before the income limitation. Add lines 5 ar		10	1
11 12	Taxable income before qualified business income deduction (see instructions) . Net capital gain (see instructions)		-	
13	Subtract line 12 from line 11. If zero or less, enter -0- · · · · · · · · · · · · · · · · · ·			
14	Income limitation. Multiply line 13 by 20% (0.20)	13 00,700	14	13,353
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also		1-7	13,333
. •	the applicable line of your return (see instructions)		15	1
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater that		16	( )
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and			,
	zero, enter -0	- 	17	(
_	Drivery Act and Denominal Deduction Act Notice are instructions			Form 8005 (2022)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8995 (2022)

## Form **8879**

(Rev. January 2023)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

► ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information. **CLIENT COPY** 

OMB No. 1545-0074

Submission Identification Number (SID)			
Taxpayer's name	Social security nu	ımber	
MICHAEL R MCDERMOTT			
Spouse's name	Spouse's social s	ecurity number	
Part I Tax Return Information Tax Year Ending December 31,	(Enter year you are	authorizing.)	
Enter whole dollars only on lines 1 through 5.			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income · · · · · · · · · · · · · · · · · · ·			,805
2 Total tax			,322
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3 8	<u>,903</u>
4 Amount you want refunded to you · · · · · · · · · · · · · · · · · · ·		4	
5 Amount you owe			<u>,419</u>
Part II Taxpayer Declaration and Signature Authorization (Be sure you ge	t and keep a copy o	f your return)	
(ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applic designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the fin preparation software for payment of my federal taxes owed on this return and/or a payment of estimate entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasure To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. In olater than 2 business days prior to the payment (settlement) date. I also authorize the financial institipayment of taxes to receive confidential information necessary to answer inquiries and resolve issues the personal identification number (PIN) below is my signature for the income tax return (original or army Electronic Funds Withdrawal Consent.	cable, I authorize the ancial institution accouted tax, and the financiary Financial Agent to Payment cancellation tutions involved in the related to the paymer	U.S. Treasury and unt indicated in the cial institution to determinate the authorequests must be processing of the ont. I further acknown	its e tax ebit the orization. received e electroni vledge tha
Taxpayer's PIN: check one box only		245	
☐ I authorize HRB TAX GROUP INC to enter or general to enter or g	_	2345	as my
<b>ERO firm name</b> signature on the income tax return (original or amended) I am now authorizing.		er five digits, but	
I will enter my PIN as my signature on the income tax return (original or amended) I am now au if you are entering your own PIN and your return is filed using the Practitioner PIN method. The Your signature   SIGNATURE AND DATE ON FILE	thorizing. Check this t	box <b>only</b> Part III below.	2023
Spouse's PIN: check one box only			
I authorize to enter or gene	erate my PIN		as my
<b>ERO firm name</b> signature on the income tax return (original or amended) I am now authorizing.		er five digits, but t enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am now au if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method. The			
Spouse's signature •	Date	e <b>▶</b>	
Practitioner PIN Method Returns Only contin			
Part III Certification and Authentication Practitioner PIN Method On	ıly		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	773556559	)51	
		enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income	, ,	*	
authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s	submitting this return i	n accordance with	the
requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Pro-	viders of Individual In	come Tax Returns.	
ERO's signature •	Date	e ▶03-22-2	2023
ERO Must Retain This Form See Instruc			

### 2022 WAGES AND SALARIES SUMMARY ATTACHMENT

MICHAEL MCDERMOTT R

MCDERMOTI									
Employer Name	Employer EIN	⊢o S	Wages	Federal Withholding	Social Security Tax Withheld	State	State Wages	State Tax Withheld	Local Tax Withheld
	38-3144240 38-1810301	T T	61,501 18,208	7,441 1,462	,		61,501 18,208	•	

## CLIENT COPY DO NOT FILE

Total 79,709 8,903 5,147 79,709 3,388

MICHAEL MCDERMOTT

## 2022 FEDERAL TAX WITHHOLDINGS ATTACHMENT

W-2 SUN COMMUNITIES 7,441 W-2 City of Westland 1,462

## CLIENT COPY DO NOT FILE

Total to Form 1040/1040-SR line 25d

8,903

### 2022 SCHEDULE A - STATE AND LOCAL TAX ATTACHMENT

MICHAEL	R
MCDERMOTT	

ΜI	STATE	W2	W/H	FROM	SUN	COMMUN	ITIES				2,6	614
ΜI	STATE	W2	W/H	FROM	City	of Wes	stland				-	774
STA	ATE OT	HER	STAI	ΓE &	LOCAL	TAXES	ENTERED	ON	SCH	Α	2,8	851

# CLIENT COPY DO NOT FILE

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## 2022 QUALIFIED DIVIDENDS and CAPITAL GAIN TAX WORKSHEET - LINE 16

**MICHAEL** R **MCDERMOTT Keep for Your Records Before you begin:** √ See the instructions for line 16 in the instructions to see if you can use this worksheet to figure your tax. Before completing this worksheet, complete Form 1040 or 1040-SR through line 15. If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on Form 1040 or 1040-SR, line 7. 1. Enter the amount from Form 1040 or 1040-SR, line 15. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of 66,854 2. Enter the amount from Form 1040 or 1040-SR, line 3a\* 2. 90 3. Are you filing Schedule D?\* Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 3. is blank or a loss, enter -0-X No. Enter the amt from Fm 1040 or 1040-SR, In 7. 90 66,764 Subtract line 4 from line 1. If zero or less, enter -0-Enter: 6. \$41,675 if single or married filing separately, \$83,350 if married filing jointly or Qualifying surviving spouse, 41,675 \$55,800 if head of household. 7. Enter the smaller of line 1 or line 6 . . . . . . . . . 675 Enter the smaller of line 5 or line 7 . . . . . . . . . . . . Subtract line 8 from line 7. This amount is taxed at 0% Enter the smaller of line 1 or line 4 . . . . . . . . . . 90 Enter the amount from line 9 . . . . . . . . . . . . 11 90 Enter: 13. \$459,750 if single, 459,750 \$258,600 if married filing separately, 13. \$517,200 if married filing jointly or Qualifying surviving spouse, \$488,500 if head of household. Enter the smaller of line 1 or line 13 14. Add lines 5 and 9 Subtract line 15 from line 14. If zero or less, enter -0-90 16. Enter the smaller of line 12 or line 16 ..... 17. 14 18. Add lines 9 and 17 ..... 90 19. 0 20. 0 Figure the tax on the amount on line 5. If the amount on line 5 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 5 is \$100,000 or more, use the Tax Computation Worksheet ....... 22. 10,308 10,322 23. 24. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet ....... 24. 10,330 Tax on all taxable income. Enter the smaller of line 23 or line 24. Also include this amount on the entry space

on Form 1040 or 1040–SR, line 16. If you are filing Form 2555, don't enter this amount on the entry space on Form 1040 or 1040–SR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet

10,322

<sup>\*</sup> If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

## 2022 INVESTMENT INCOME WORKSHEET FOR EIC

MICHAEL	R
MCDERMOTT	

Keen for Your Records

CDE	ERMOTI	Keep for Your Record
		Publication 59
Use th	is worksheet to figure investment income for the earned income credit when you file Form 1040.	
	act and Dividends	
	est and Dividends  Enter any amount from Form 1040, line 2b	
2.		
3.		96
	Enter any amount norm to to, mile of	90
4.	,, , , , , , , , , , , , , , , , , , , ,	
	to report your child's interest and dividend income on your return. (If your child received an	
	Alaska Permanent Fund dividend, use Worksheet 2 to figure the amount to enter on this line.) 4.	
Capit	tal Gain Net Income	
5.	Enter the amount from Schedule 1 (Form 1040), line 13. If the amount on	
	that line is a loss, enter -0 5.	
6.	Enter any gain from Form 4797, Sales of Business Property, line 7.	
	If the amount on that line is a loss, enter -0 (But, if you completed	
	lines 8 and 9 of Form 4797, enter the amount from line 9 instead.) 6.	
7.	Subtract line 6 of this worksheet from line 5 of this worksheet. (If the result is less than zero, enter -0) 7.	0
Roya	alties and Rental Income from Personal Property	
8.	Enter any royalty income from Schedule E, line 23b, plus any income from the	
	rental of personal property shown on Schedule 1 (Form 1040), line 21 8.	
9.	Enter any expenses from Schedule E, line 20, related to royalty income,	
	plus any expenses from the rental of personal property deducted on	
	Schedule 1 (Form 1040), line 36	
10.	Subtract the amount on line 9 of this worksheet from the amount on line 8. (If the result is less than	
	zero, enter -0)	0
	ive Activities	
11.	Enter the total of any net income from passive activities (such as income	
	included on Schedule E, lines 26, 29a (col. (g)), 34a (col. (d)), or 40;	
	or an ordinary gain identified as "FPA" on Form 4797, line 10).	
	(See instructions below for lines 11 and 12.)	
12.	Enter the total of any losses from passive activities (such as losses	
	included on Schedule E, lines 26, 29b (col. (f)), 34b (col. (c)), or 40;	
	or an ordinary loss identified as "PAL" on Form 4797, line 10).	
	(See instructions below for lines 11 and 12.)	
13.	Combine the amounts on lines 11 and 12 of this worksheet. (If the result is less than zero, enter-0) 13.	
14.	Add the amounts on lines 1, 2, 3, 4, 7, 10, and 13. Enter the total. This is your investment income	96
15.	Is the amount on line 14 more than \$10,300?	
	Yes. You cannot take the credit.	
	No. Go to Step 3 of the Form 1040 instructions for line 17a to find out if you can	
	take the credit (unless you are using this publication to find out if you can take the	

Instructions for lines 11 and 12. In figuring the amount to enter on lines 11 and 12, do not take into account any royalty income (or loss) included on line 26 of Schedule E or any income (or loss) included in your earned income or on line 1, 2, 3, 4,7, or 10 of this worksheet. To find out if the income on line 26 or line 40 of Schedule E is from a passive activity, see the Schedule E instructions. If any of the rental real estate income (or loss) included on Schedule E, line 26, is not from a passive activity, print "NPA" and the amount of that income (or loss) on the dotted line next to line 26.

credit; in that case, go to Rule 7, next.)

## 2023 CARRYFORWARD INFORMATION

MICHAEL MCDERMOTT R

/ICDERMOTT			Keep for Your Record
Itemized Returns Only - 2022 s	state and local tax refund (this amount r	nay not be taxable in 2022)	
Charitable contributions carryo	ver to 2023		
Estimated short-term capital lo	ss carryover		· · · · · · · · <u> </u>
Estimated long-term capital los	ss carryover · · · · · · · · · · · · · · · · · · ·		· · · · · · · · <u> </u>
2022 tax liability (for 2023 Form	2210 purposes)		10,322
Form 8839: 2021 carryover of u	inqualified expenses		
Refund amount applied to 2023	3		· · · · · · · · <u> </u>
Disallowed investment interest	in 2022		<u></u>
Additional state taxes paid			· · · · · · · · · · · · · · · · · · ·
Form 8396: Mortgage interest of	credit from 2020 · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
Mortgage interest of	credit from 2021 · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
Mortgage interest of	credit from 2022 · · · · · · · · · · · · · · · · ·		
Form 8801: Minimum tax credi	it carryforward		0
Potential 2023 IRA contribution	from 2022 tax refund		
NOL carryforward:	Regular Tax		AMT Tax
from 2002	from 2012	from 2002	from 2012
from 2003	from 2013	from 2003	from 2013
from 2004	from 2014	from 2004	from 2014
from 2005	from 2015	from 2005	from 2015
from 2006	from 2016	from 2006	from 2016
from 2007	from 2017	from 2007	from 2017
from 2008	from 2018	from 2008	from 2018
from 2009	from 2019	from 2009	from 2019
from 2010	from 2020	from 2010	from 2020
from 2011	from 2021	from 2011	from 2021
Gross NOL genera	ited in 2022	Gross AMT NOL gene	rated in 2022
To be absorbed in	carryback period	To be absorbed in car	ryback period
Net carryforward fr	om 2022	Net carryforward from	2022
Total carryforward	to 2023	Total carryforward to 2	2023
		<del>_</del>	

- The amounts carried to next year from Schedule(s) E, pages 1 and/or 2, are found on Form 8582, Worksheet 6. Carryover AMT amounts are found on the AMT Form 8582, Worksheet 6.
- Foreign Tax Credit carryforward to 2023
- General Business Credit carryforward to 2023
- First-Time Homebuyer Credit Repayment carryforward to 2023 . . . . . . .
- If there are Form(s) 6252 in this tax return, the gross profit ratio and prior payments received (including the current year payments) will carry forward from each Form 6252.
- Amounts from Form 6251, lines 16 through 18, lines 27 and 28 are automatically carried forward to 2023.

Keep For Your Records

	Tax Year 2022	Tax Year 2021	Difference
Filing status	Single		
Residency status · · · · · · · · · · · · · · · · · · ·	Resident		
Number of exemptions claimed	1		
State Base Form Filed	MI1040		
INCOME, DEDUCTIONS AND ADJUSTMENTS:			
Federal Adjusted Gross Income	79,805		79 <b>,</b> 805
Additions to Federal Income			
Subtractions from Federal Income			
Michigan Income	79,805		79,805
Exemption Amount (Allowance) / Personal Exemptions	5,000		5,000
Taxable Income	74,805		74,805
Michigan Tax  Credit for Taxes Paid to Another State Other Nonrefundable Credits Net Tax Income Tax Withheld Other Payments Including Refundable Credits Total Payments	3,179 3,179 3,388 3,388	0/	3,179 3,179 3,388 3,388
REFUND OR BALANCE DUE			
Underpayment Penalty Amount You Owe  Overpayment	209	FIL	209

Amended Return

## 2022 MICHIGAN Individual Income Tax Return MI-1040

Retu	rn is due April 18, 2023.⊤y	pe or	print in blue or black ink.				(Include Schedule AM	1D) —	•
1. File	r's First Name	M.I.	Last Name		2. Filer's Full	Social Sec	curity No. (Example: 123	-45-6789)	
MI	CHAEL	R	MCDERMOTT						
If a Jo	int Return, Spouse's First Name	M.I.	Last Name						
					3. Spouse's F	ull Social S	Security No. (Example: 1	123-45-6789	9)
	Address (Number, Street, or P.O. Box)								
	2 FOREST ST		04-4- 7100-	J -	4.0-h1D:-	-1-:-1-01-	/E disits in standard	>	
-	r Town		State ZIP Co				e (5 digits – see instruction	ons)	
	STLAND		MI   481		82160				
	STATE CAMPAIGN FUND Check if you (and/or your spouse, filing a joint return) want \$3 of your to go to this fund. This will not incre your tax or reduce your refund.	taxes	a. Filer b. Spouse		,	if 2/3 of y	R SEAFARERS your income is from	farming,	
7.	2022 FILING STATUS. Check one			8. <b>2022 R</b>	RESIDENCY S	STATUS.	Check all that apply	y.	
a.	X Single	* If v	ou check box "c," complete	a. 💢 F	Resident				
			3 and enter spouse's full name				* If you check box "b" or		
b.	Married filing jointly	belo	N:	_   b.	Nonresident*		"c," you must and <b>include</b>	-	
							NR.	Concadic	
C.	Married filing separately*			C F	Part-Year Res	ident*			
9.	EXEMPTIONS. NOTE: If someone	else (	can claim you as a dependent, c	heck box 9e, enter	r 0 on line 9a	and ente	r \$1,500 on line 9e (	see instr.).	
			/\						
	a. Number of exemptions (see ins	structio	ons)	9a.	1 x	\$5,000	9a	5,000	00
			r one of the following special exe						
		•	plegic, or totally and permanently	·	X	\$2,900	9b.		00
	<ul> <li>Number of qualified disabled v</li> </ul>				x	\$400	9c		00
	d. Number of Certificates of Stillbi	rth fro	om MDHHS (see instructions)	9d.	x	\$5,000	9d		00
	Claimed as dependent, see line	. O N/	OTE above	9e.			9e.		00
	o. Claimed as dependent, see line	5 5 INC	JIL above				36.		00
	f. Add lines 9a, 9b, 9c, 9d and 9e	. Ente	er here and on line 15				_9f.	5 <b>,</b> 000	00
								_	
10.	Adjusted Gross Income from yo	ur U.S	S. Form 1040 (see instructions)			. 10.		9,805	00
11.	Additions from Schedule 1, line 9.	Incl	ude Schedule 1			. 11.			00
							_		
12.	Total. Add lines 10 and 11					12.	.//	9,805	00
13.	Subtractions from Schedule 1, line	30.	Include Schedule 1	• • • • • • • • • • • • • • • • • • • •		13.			00
	Income cubicat to tax Cubicat	: 40	) from line 40. If line 40 is supplied	u than line 40 anta	"0"		7	9,805	
14.	Income subject to tax. Subtract	me is	3 Irom line 12. It line 13 is greater	r trian line 12, ente	r U	14.		J, 003	00
15.	Exemption allowance. Enter amo	nunt fr	om line 9f or Schedule NR line	19		15		5 <b>,</b> 000	00
10.	Exemption anovarioe. Enter arric	, di it ii	on mile of or concade rail, line	10				3,000	00
16.	Taxable income. Subtract line 15	from	line 14. If line 15 is greater than	line 14, enter "0".		16.	7.	4,805	00
			ŭ	•		Ī			
17.	<b>Tax.</b> Multiply line 16 by 4.25% (0.0	)425)				17.	<u> </u>	3 <b>,</b> 179	00
NON-	REFUNDABLE CREDITS			AMOUN	Т		CRED	ĪT	
18.	Income Tax Imposed by governm	ent ur	nits outside Michigan.						
	Include a copy of the return (see i	nstruc	otions)		00	18b.			00
19.	Michigan Historic Preservation Tax	(Cred	dit (see instructions)19a.		00	19b.			00
20.	<b>Income Tax.</b> Subtract the sum of If the sum of lines 18b and 19b is		18b and 19b from line 17. er than line 17, enter "0"			20.		3 <b>,</b> 179	00

2022 MI	-1040, Page 2 of 2										
			Filer's	Full Social Se	curity Number						
21.	Enter amount of Income Tax from line	20						21.		3,179	00
	Voluntary Contributions from Form 46										00
	-							· ·			100
	<b>USE TAX.</b> Use tax due on Internet, m Worksheet 1 (see instructions)			•			 F	23.		0	00
24.	Total Tax Liability. Add lines 21, 22 a	and 23					24.			3 <b>,</b> 179	00
	NDABLE CREDITS AND PAYMENTS						_	Г			
25.	Property Tax Credit. Include MI-10	40CR or M	I-1040CF	R-2				. 25.			00
26.	Farmland Preservation Tax Credit.	Include MI	-1040CR	-5		DERAL		26.	MI	CHIGAN	00
	Earned Income Tax Credit. Multiply lin										
	enter result on line 27b						00	27b.			00
	Michigan Historic Preservation Tax Cr										00
29.	Credit for allocated share of tax paid	by an electir	ng flow-tr	rough entity	(see instruc	tions)		. 29.			00
30.	Michigan tax withheld from Schedule	W, line 6. Ir	nclude So	chedule W (	(do not subr	mit W-2s)		30.		3,388	00
31.	Estimated tax, extension payments ar	nd 2021 cred	dit forward	d				31.			00
	2022 AMENDED RETURNS ONLY. T Amended returns must include Sche			_	2022 return s	should skip to lin	e 33.				
	32a. If you had a refund and/or cre negative number on line 32c.  32b. If you paid with the original re any additional tax paid after fi	turn, check be	ox 32b and	enter the amo	unt paid with th	ne original return, p		32c.	P	Y	00
33.	Total refundable credits and payment	s. Add lines	25, 26, 2	7b, 28, 29, 3	30, 31 and 32	2c	. 33.			3,388	00
	ND OR TAX DUE						_				
34.	If line 33 is less than line 24, subtract	line 33 from	line 24. l	f applicable,	see instructi	ions.					
	Include interest 00 an	d penalty		00		YOU OWE	34.				00
	Overpayment. If line 33 is greater that Credit Forward. Amount of line 35 to				) /		. 35	36.		209	00
37.	Subtract line 36 from line 35					REFUND	37.			209	00
	CT DEPOSIT	a. Routi	ng Trans	it Number	b. /	Account Numbe	er		c. Type	of Account	
	t your refund directly to your financial on! See instructions and complete a, b							1.	X Checking	2. Savir	ngs
	sed Taxpayer. If Filer and/or Spouse die R DATE OF DEATH ONLY. Example:				below.	Preparer Certithis return is base					·.
Filer		Spouse				Preparer's PTIN, F		rSSN			
						P013070		- 4a\			
	yer Certification. I declare under penalty achments is true and complete to the best of			mation in this r	eturn	Preparer's Name ( Sandy V:			va		
Filer's	Signature			Date		Preparer's Signati	ure				
Spouse	e's Signature			Date		Preparer's Busine	ess Nar	ne, Addres	ss and Telephon	e Number	
•						HRB TAX			·		
						1842 MA			±110		
Y	By checking this box, I authorize Trea	surv to disci	uss mv re	turn with my	preparer	WATSONV:			95076		
	=, 5.100kmg tillo 500, i dutiloli20 116d	- ary 10 01001	iiiy iG	-and will filly	Propulor.	831-722			2010		

Refund, credit, or zero returns. Mail your return to:

Pay amount on line 34 (see instructions). Mail your check and return to:

Michigan Department of Treasury, Lansing, MI 48956 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.

**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)
R	   MCDERMOTT	
M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123–45–6789)
	R	R MCDERMOTT

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

-	A B		B C D			E		
Enter "X" for: 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		38-3144240	SUN COMMUNITIES	61 <b>,</b> 501	00	2,614	00	
Х		38-1810301	City of Westland	18,208	00	774	00	
			7		00		00	
					00		00	
					00		00	
Enter 7	Table 1			00				
4.	SUBT	OTAL. Enter total of Table 1, column	4.	3,388	00			

## TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Enter '	<b>\</b> 'X" for:	B Payer's federal identification	O	<b>D</b> Taxable pension distribution,	Mic	<b>E</b> chigan income	
1	Spouse	number (Example: 38-1234567)	Payer's name	misc. income, etc. (see inst.)		ax withheld	
					00	C	00
					00	C	00
					00	C	00
					00	C	00
				ı	00	C	00
Enter Table 2 Subtotal from additional Schedule W forms (if applicable)						C	00
5.	SUBT	TOTAL. Enter total of Table 2, column	5.	C	00		
6.	TOTA	AL. Add lines 4 and 5. Enter here and	6.	3,388	00		