Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2022	
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OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.		Single Married filing jointly under the name of the MFS box, enter the name of the market because the market						Head of d the HOH o				spou	se (QSS)	
		on is a child but not your dependent	:											
Your first name and middle initial Last name								Yo	Your social security number					
Brandon Graham														
If joint return, spouse's first name and middle initial Last name									Sp	Spouse's social security number				
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ns.						Apt. no.	Pre	residential Election Campaign		
												Check here if you, or your		
City, town, or post office. If you have a foreign address, also complete spaces below.							to	spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change						
Foreign country name				Foreign province/state/county				Fore				tax or refund.		
Digital	At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) s													
Assets		ange, gift, or otherwise dispose of a							asse	t)? (See in	Structio	ns.)	∐ Yes	∐ No
Standard Deduction		eone can claim:	•			•		dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are b	lind	Spot	use:	☐ Was bo	rn be	fore Janua	ıry 2, 19	958	☐ Is bli	nd
Dependents	(see i										instructions):			
If more		rst name Last name		number			to you		·	Child tax cr		edit Credit for other de		er dependents
than four														
dependents, see instructions														
and check														
here]
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instruc	ctions)						1a		
	b	Household employee wages not re	•			'-2						1b		
Attach Form(s) W-2 here. Also	•	ee instructions)							1c 7.0					
attach Forms	d		id waiver payments not reported on Form(s) W-2 (see instructions)								1d			
W-2G and 1099-R if tax	e	, , , , , , , , , , , , , , , , , , , ,									1e			
was withheld.	f	head a hear and hear									1f			
If you did not	g	Wages from Form 8919, line 6.							•			1g		940.0
get a Form W-2, see	h :	Other earned income (see instruction	,					1	. i			1h	08	940.0
instructions.	i	Nontaxable combat pay election (s	see instr	uctions	,			<u>1</u> i				4-		
Attach Cab D	z 2a	Add lines 1a through 1h Tax-exempt interest	2a			 	· • To	 xable interes				1z 2b		
Attach Sch. B if required.	2a 3a		3a					dinary divide				3b	85	72.73
	4a		4a					xable amoun				4b		137.04
Standard	5a		5a					xable amoun				5b		30.0
Deduction for—	6a	_	6a					xable amoun				6b	10	080.0
Single or Married filing	С	If you elect to use the lump-sum e		nethod.	chec						. n			
separately, \$12,950	7	Capital gain or (loss). Attach Scheo				•		•			. 🗖	7	(62.0
• Married filing	8	Other income from Schedule 1, lin	e 10 .									8		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,										9		4.0
surviving spouse, \$25,900	10	Adjustments to income from Sche												2.0
Head of	11	•	s is your adjusted gross income							8.0				
household, \$19,400	12	Standard deduction or itemized								76.0				
If you checked	13	Qualified business income deducti						-A				13	281	172.14
any box under Standard	14	14 Add lines 12 and 13								14	91545.54			
Deduction, see instructions.	15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15	15 94186.81					