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

202	2
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OMB No. 1545-0074

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

Filing Status		Single 🗌 Marr	ried filing jointly	Marı	ried filing	separa	ately (N	1FS)	Hea	d of hou	sehold (HO	H)			iving	
Check only	16	. ala a al . a al Ala a N	450 haar amtam th			14	اء ـ				00 6	41		se (QSS)		
one box.			MFS box, enter the not your dependence.		your spo	ouse. II	r you cr	еске	ea the HO	H or Qs	os dox, ent	er the c	niia's i	name ir tn	e qualitying	
			not your depend													
_	and middle initial Last name Kirk						Yo	Your social security number								
Dr.																
If joint return, sp	ouse's	first name and mi	ddle initial	Last n	iame							Sp	Spouse's social security number			
											1					
Home address (	numbe	r and street). If you	u have a P.O. box,	see instruc	tions.						Apt. no.		Presidential Election Campaign Check here if you, or your			
								_							or your tly, 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								
				1										w will not	0	
Foreign country name				Foreign province/state/			county	unty For		oreign postal code yo		our tax or refund.				
														You	Spouse	
Digital		-	022, did you: (a)											□ <b>v</b>	□ M.	
Assets	exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) LYes No												□ NO			
Standard			n: You as a	•			•		a depende	ent						
Deduction		pouse itemizes	on a separate re	eturn or yo	ou were a	a duai-s	status a	allen								
Age/Blindness	You:	☐ Were born	before January 2	2, 1958	Are b	olind	Spo	use:	☐ Was	born b	efore Janua	ary 2, 1	958	☐ Is bli	nd	
Dependents	(see i	nstructions):			(2)	Social	security		(3) Relati	onship	(4) Check t	he box if	qualifie	es for (see	instructions):	
If more	<b>(1)</b> Fi	rst name		number				to yo	Child t	ax credit	dit Credit for other dependen					
than four	n four															
dependents, see instructions											[					
and check																
here																
Income	1a	Total amount f	rom Form(s) W-2	2, box 1 (s	ee instru	ctions)	)						1a			
	b	Household em	ployee wages no	ot reported	d on Forr	n(s) W	-2						1b			
Attach Form(s) W-2 here. Also	c Tip income not reported on line 1a (see instructions)									1c						
attach Forms	<ul> <li>d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)</li></ul>								1d							
W-2G and 1099-R if tax										1e						
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29											1f		119.0	
If you did not										1g	5	538.0				
get a Form W-2, see	h		ncome (see instr										1h			
instructions.	i		mbat pay election	n (see ins	tructions	s)				1i				3	196.0	
		Add lines 1a th	ŭ	1				. <u>.</u>					1z			
Attach Sch. B if required.	2a	•	terest	2a			_		xable inte				2b	004	110 100	
ii required.	3a	Qualified divide		3a			_		•				3b	294	110.199	
	4a	IRA distribution		4a									4b			
Standard Deduction for—	5a		annuities	5a									5b	10	)504 E	
• Single or	6a	Social security		6a	month and	ah a a l							6b	12	2524.5	
Married filing separately,	С 7	•	use the lump-sur			•	,			•		. 📙	7	748	307.951	
\$12,950	8	Capital gain or (loss). Attach Schedule D if required. If not required, check here									8					
Married filing jointly or		·									9	27	190.61			
Qualifying surviving spouse,	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							•	10		2047.0					
\$25,900	10 11	Adjustments to income from Schedule 1, line 26								11	1 02	-0 17.0				
<ul> <li>Head of household,</li> </ul>		Subtract line 10 from line 9. This is your <b>adjusted gross income</b>														
\$19,400	` ' '									12						
If you checked any box under	13 14	Qualified business income deduction from Form 8995 or Form 8995-A										•	14	696	609.659	
Standard Deduction,	14 15	Add lines 12 and 13										15		3023.0		
see instructions.	13	Oubtract fine 14 from fine 11. if zero of less, effect -0 This is your taxable income								15	10	,020.0				