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

12022

OMB No. 1545-0074

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

Filing Status		Single Married filing jointly	Marrie	ed filing	separ	ately (M	IFS)	Head	of hou	sehold (HOH	,		fying surv	iving		
Check only one box.														e aualifyina		
ONE BOX.		on is a child but not your dependent		oui spo	usc. I	i you on	CORC		OI QC	o box, crito	i tile el	iliu 3	name ii tii	c qualifying		
Your first name	-		Last na	me							Yo	Your social security number				
Edward	rd Wil					Villiams										
If joint return, spouse's first name and middle initial Last name											Sp	ouse's	social sec	urity number		
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.													Presidential Election Campaign			
										Ch	eck h	ere if you,	or your			
City, town, or post office. If you have a foreign address, also complete spaces below.									code				tly, want \$3			
													w will not	Checking a change		
Foreign country	F	oreign p	rovince	e/state/c	ounty		For	eign postal co	de yo	ur tax	or refund.	ŭ				
												You Spouse		Spouse		
Digital	At an	y time during 2022, did you: (a) rec	eive (as	a rewar	d, awa	ard, or p	oaym	ent for prop	perty (or services);	or (b)	sell,				
Assets	exch	ange, gift, or otherwise dispose of a	a digital a	asset (o	r a fin	ancial ir	ntere	st in a digit	al ass	et)? (See ins	structio	ns.)	☐ Yes	☐ No		
Standard	Som	neone can claim: You as a dependent Your spouse as a dependent														
Deduction		spouse itemizes on a separate retur	n or you	were a	dual-	status a	lien									
Age/Blindness	You:	Were born before January 2, 1	958	Are b	lind	Spo	use:	☐ Was b	orn b	efore Januai	rv 2. 19	958	☐ Is bli	nd		
	(see instructions): (2) Social security (3) Relationship (4) Check the box if qualifies for (see															
If more		rst name Last name		number			to you			Child tax cre		edit Credit for other dependents				
than four																
dependents, see instructions																
and check																
here																
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instrud	ctions)						1a				
	b	Household employee wages not re	/ee wages not reported on Form(s) W-2								1b 5108.0		108.0			
Attach Form(s) W-2 here. Also	diso d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									1c						
attach Forms										1d						
W-2G and 1099-R if tax	е	•	ent care benefits from Form 2441, line 26								1e		400.0			
was withheld.	f	Employer-provided adoption bene			-							1f	1,	403.0		
If you did not	g	Wages from Form 8919, line 6 .									•	1g	00	10.001		
get a Form W-2, see	h	Other earned income (see instruct	,					1	 i		•	1h	384	42.681		
instructions.	i	Nontaxable combat pay election (see instr	uctions)			•		1i				599	959.65		
		Add lines 1a through 1h	 o-			·	L T.				•	1z				
Attach Sch. B if required.	2a	' <u>-</u>	2a 3a			_		xable intere dinary divic			•	2b 3b	0	956.0		
	3a 4a		4a					xable amou			•	4b	-	30.0		
Standard	т а 5а		та 5а								•	5b		70.0		
Deduction for—	6a		6a			_		xable amou			•	6b				
Single or Married filing	С	If you elect to use the lump-sum e		nethod	chec						Ė	0.5				
separately,		7 Capital gain or (loss). Attach Schedule D if required. If not required, check here														
\$12,950 Married filing	8	Other income from Schedule 1, line 10									8		8.0			
jointly or Qualifying	9	·	b, 6b, 7, and 8. This is your total income									9				
surviving spouse,	10	Adjustments to income from Sche										10	411	67.645		
\$25,900 • Head of	11	· · · · · · · · · · · · · · · · · · ·									11					
household, \$19,400	12	<u> </u>									12					
If you checked	13	Qualified business income deduct					-	-A				13	6	569.0		
any box under Standard	14	14 Add lines 12 and 13										14	223	352.868		
Deduction, see instructions.	15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									15						