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		ingle Married filing jointly	Marrie	ed filing	separ	ately (M	FS)	Head o	of hou	sehold (HOF			fying surv	iving	
Check only one box.	If you	u checked the MFS box, enter the n	ama of v	our coo	uco l	f vou ch	ooko	4 tha UOU	or 08	S hav anta			se (QSS)	o gualifying	
one box.		on is a child but not your dependent		our spo	use. i	i you cii	ecke	a lile non	or QS	S DOX, ente	r tille Ci	iliu S i	name ii iii	e qualifying	
Your first name			Last na	me							Vo	ur soc	ial securit	v numher	
Daniel	Norris							'0	Your social security number						
									Sn	Spouse's social security number					
ii joint return, sp	ouse s	mst hame and middle initial	Lastria	iic							Sp				
Home address (numhe	r and street). If you have a P.O. box, see	instructio	nns						Apt. no.	Dre	residential Election Campaign			
rionic address (паттьс	and streety. If you have a 1 .o. box, see	ii isti dotic	J113.						7 (pt. 110.		Check here if you, or your			
City town or no	nst offic	e If you have a foreign address, also co	molete si	naces he	low		State	,	ZIE	code		spouse if filing jointly, want \$3			
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code								_		Checking a					
Foreign country name			F	Foreign province/state/o			ounty Fa		For	Foreign postal code			w will not or refund.	cnange	
1 oreign country harne				r or orgin provinces, etaile, et						noigh poolal oods yes			You Spouse		
Digital	At an	y time during 2022, did you: (a) rec	oive (as	a rowar	d aw	ard or n	avm	ent for pror	orty (or carvicae):	or (b)	المء			
Digital Assets		ange, gift, or otherwise dispose of a											Yes	No	
Standard		eone can claim: You as a de						dependen		0.9.7 (0.00	J				
Deduction	_	spouse itemizes on a separate retur	•			•		аоронаон	•						
				_											
Age/Blindness	You:	Were born before January 2, 1	958 _	Are b	lind	Spo	use:	Was b	orn b	efore Janua					
Dependents				(2)		security		(3) Relation	ship			ox if qualifies for (see instructions):			
If more	(1) Fi	rst name Last name		number			to you			Child tax c		edit Credit for other depe		er dependents	
than four dependents,															
see instructions	_												L		
and check										L	_		L		
here \square										L				<u></u>	
Income	1a	Total amount from Form(s) W-2, b										1a	/	55.0	
Attach Form(s)	b	Household employee wages not re	•									1b			
W-2 here. Also	c Tip income not reported on line 1a (see instructions)									1c					
attach Forms W-2G and										1d					
1099-R if tax	e Taxable dependent care benefits from Form 2441, line 26							•	1e 1f						
was withheld.	f										•			10.308	
If you did not get a Form	g h	Wages from Form 8919, line 6 . Other earned income (see instruct									•	1g 1h		640.814	
W-2, see	i	Nontaxable combat pay election (s	,					1	 1i		•	111	100	740.014	
instructions.	z	Add lines 1a through 1h	SCC IIISII	uctions,			•					1z		6.0	
Attach Sch. B	2a		2a		•		h Ta	 xable intere	 2et		•	2b	3	59.0	
if required.	3a	· -	3a			_		dinary divid			•	3b		55.0	
	4a		4a			_		xable amou				4b			
Standard	5a		5a									5b	6	225.0	
Deduction for—	6a	_	6a			_						6b		5.0	
Single or Married filing	С	If you elect to use the lump-sum e	lection r	nethod,	chec	 k here (s	see ir	nstructions)							
separately, \$12,950 7 Capital gain or (loss). Attach Schedule D if required. If no							t required, check here					7			
• Married filing	8														
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	7, and 8. This is your total income							9	39	971.0			
surviving spouse, \$25,900	10	Adjustments to income from Sche								10					
Head of	Subtract line 10 from line 9. This is your adjusted gross income									11					
household, \$19,400									12	41982.65					
If you checked	Qualified business income deduction from Form 8995 or Form 8995-A										13	1590.0			
any box under Standard	14	4 Add lines 12 and 13									14	14628.0			
Deduction, see instructions.	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15	5 2.0					