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 Check only								Head of				spou	se (QSS)	-
one box.		u checked the MFS box, enter the nation is a child but not your dependent		our spo	use. I	f you che	ecke	d the HOH o	or QS	S box, ente	the ch	nild's	name if the	qualifying
Your first name	me and middle initial Last name Yo									You	Your social security number			
George	Freeman													
If joint return, spouse's first name and middle initial  Last name							Spo	Spouse's social security number						
											Presidential Election Campaign			
City town or post office. If you have a foreign address, also complete spaces below.							spo	Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a						
Foreign country name			F	Foreign province/state/county					Fore				ow will not cl or refund.	_
 Digital	At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b):									or (b) s	sell,	You	Spouse	
Assets	exch	ange, gift, or otherwise dispose of a	digital a	asset (o	r a fin	ancial in	teres	st in a digital	l asse	et)? (See ins	tructio	ns.)	Yes	☐ No
Standard Deduction		eone can claim:	•			•		dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are b	lind	Spou	ıse:	☐ Was bo	orn be	efore Januar	y 2, 19	958	☐ Is blin	d
Dependents	(see i	e instructions): (2) Social security (3) Relationship (4) Check the box							e box if	if qualifies for (see instructions):				
If more than four	(1) Fi	rst name Last name		number			to you			Child tax credit		(	Credit for othe	r dependents
dependents,											ĺ			i
see instructions and check											ĺ			i
here											1			<u></u>
Incomo	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruc	ctions	)						1a	0	.0
Income	b	Household employee wages not re	eported (	on Form	า(s) W	'-2						1b		
Attach Form(s)	c Tip income not reported on line 1a (see instructions)								1c	1	.0			
W-2 here. Also attach Forms	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d						
W-2G and	e Taxable dependent care benefits from Form 2441, line 26									1e				
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	Form 8	3839,	line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .										1g		
get a Form	h	Other earned income (see instruct	ions) .						•			1h	1964	8.229
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)				1	i					
motruotions.	z	Add lines 1a through 1h										1z	88	8.0
Attach Sch. B	2a	Tax-exempt interest	2a			b	Tax	xable interes	st			2b		
if required.	За	Qualified dividends	3a			b	Or	dinary divide	ends			3b		
	4a	IRA distributions	4a			b	Tax	xable amour	nt.			4b	3795	52.916
Standard	5a	Pensions and annuities	5a			b	Tax	xable amour	nt.			5b		
Deduction for—	6a	Social security benefits	6a			b	Tax	xable amour	nt.			6b	5582	21.45
Single or Married filing	С	If you elect to use the lump-sum e	lection n	nethod,	chec	k here (s	ee ir	nstructions)						
separately, \$12,950	7	Capital gain or (loss). Attach Schee	dule D if	require	d. If n	ot requir	red, o	check here				7	32	13.0
Married filing	8	Other income from Schedule 1, lin	e 10 .									8	2036	63.02
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	s 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9	3421	11.49	
surviving spouse, \$25,900	10	Adjustments to income from Sche										10		
	11	·									11	48	37.0	
household, \$19,400	12	Standard deduction or itemized	mized deductions (from Schedule A)									12		
If you checked any box under	Qualified business income deduction from Form 8995 or Form 8995-A										13		70.01	
Standard	14										14	28	8.0	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter	-0 T	his is yo	ur <b>ta</b>	xable incor	ne			15		