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

2022

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 na on is a child but not your dependent		our spo	use. I	f you che	ecke	d the HOH o	r QSS	5 box, enter	the cr	nild's	name if the	e qualifying	
Your first name											You	our social security number			
Amy	Col				coleman										
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. State 7IP code									spo	Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a					
Foreign country name					Foreign province/state/co				Fore	box		x belo	w will not on refund.		
								You			Spouse				
Digital Assets	At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)											☐ No			
Standard		eone can claim:	•			•		dependent							
Deduction		Spouse itemizes on a separate return		were a	dual-										
		Were born before January 2, 1	958 _	Are b	lind	Spou	ıse:			fore Januar	•		Is bli		
Dependents				(2) Social securi number			/ (3) Relationshi		hip	(4) Check the bo		· 1			
If more than four	(1) FI	rst name Last name		Humber			to you			Child tax cr			realt for oth	er dependents	
dependents,]				
see instructions and check														<u> </u>	
here															
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instruc	ctions)						1a	7	70.0	
	b	Household employee wages not re	•			-2						1b			
Attach Form(s) W-2 here. Also	С	·	income not reported on line 1a (see instructions)									1c		266.36	
attach Forms	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							٠	1d	2//	01.965				
W-2G and 1099-R if tax	e	Taxable dependent care benefits f							•		•	1e			
was withheld.	f	Employer-provided adoption bene					٠				•	1f			
If you did not	g	Wages from Form 8919, line 6.							•		•	1g			
get a Form W-2, see	h :	Other earned income (see instruction						1	. i			1h			
instructions.	i -	Nontaxable combat pay election (s Add lines 1a through 1h	see instr	uctions	,		•	1	1			4-	298	341.84	
Attach Soh B	z 2a	ı ı	2a			 .	. Tav	 kable interes			•	1z 2b			
Attach Sch. B if required.	2a 3a		3a			_		dinary divide			•	3b	290	920.06	
	4a		4a					kable amour				4b		972.17	
Standard	5a		5a					kable amour				5b	100	,,_,,	
Deduction for—	6a	_	6a			_		kable amour				6b	40	079.0	
Single or Married filing	С	If you elect to use the lump-sum e		nethod,	chec										
separately, \$12,950	7	Capital gain or (loss). Attach Scheo				•		,				7		6.0	
• Married filing	8	Other income from Schedule 1, lin	e 10 .									8		5.0	
jointly or Qualifying	9	dd lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9					
aumining anauga	10	Adjustments to income from Sche									10				
Head of	11	Subtract line 10 from line 9. This is	your ac	ljusted	gross	s incom	е					11			
household, \$19,400	12	Standard deduction or itemized	deducti	ons (fro	m Sc	hedule A	A)					12	5	19.0	
If you checked	13	Qualified business income deducti	on from	Form 8	995 o	r Form 8	3995	-A				13	3	31.0	
any box under Standard	14	Add lines 12 and 13										14			
Deduction, see instructions.	15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									15					