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

2022
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OMB No. 1545-0074

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

Filing Status Check only			_	_			_	household (HO	. —	spou	fying surviving se (QSS)	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spou	ise. If you ch	necked	d the HOH or	QSS box, ent	er the ch	ıild's	name if the qualifying	
Your first name									You	Your social security number		
Catherine	herine Barrett											
If joint return, spouse's first name and middle initial  Last name  Signature:								Spo	Spouse's social security number			
									Presidential Election Campaign Check here if you, or your			
City, town, or post office. If you have a foreign address, also complete space					spaces below. State			ZIP code	spo to g	spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change		
Foreign country name			Foreign province/state/county					Foreign postal of		<b>-</b>		
Digital Assets	At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instruction									Yes No		
Standard Someone can claim: You as a dependent Your spouse as a dependent											100 110	
Deduction	<del>-</del>											
Age/Blindness	You:	Were born before January 2, 19	958	Are bli	nd <b>Spo</b>	use:	☐ Was bor	n before Janu			☐ Is blind	
Dependents	(see	(see instructions): (2) Social security (3) Relationship (4) Check the							he box if	oox if qualifies for (see instructions):		
If more	<b>(1)</b> Fi	rst name Last name	number			_	to you	Child t	Child tax credit		Credit for other dependents	
than four dependents,						-			<u> </u>			
see instructions	_					+						
and check here	_					_						
<u> </u>	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instruct	ions)				<u> </u>	1a	2520.102	
Income	b	Household employee wages not re	•		,					1b	37225.253	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								1c		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d	47.0	
W-2G and 1099-R if tax	е	,								1e		
was withheld.	f	h - 3 - 1								1f	70327.038	
If you did not	g	Wages from Form 8919, line 6 .								1g	32512.2	
get a Form W-2, see	h	Other earned income (see instructi	,				1			1h		
instructions.	i -	Nontaxable combat pay election (s		uctions)			<u>1i</u>			4-		
Attach Sch. B	z 2a	1	 2a		· · i ·	<b>h</b> Tav	· · · · · · · · · · · · · · · · · · ·			1z 2b	70263.378	
if required.	3a	· —	3a					nds		3b	29.0	
	4a		ta				-	t		4b	9.0	
Standard	5a		5a					t		5b		
Deduction for—	6a	Social security benefits	3a			<b>b</b> Tax	able amoun	t		6b	30.0	
<ul> <li>Single or Married filing</li> </ul>	С	If you elect to use the lump-sum el	ection r	nethod, c	check here (	see in	structions)					
separately, \$12,950	7	Capital gain or (loss). Attach Sched	dule D if	required	. If not requ	ired, c	check here		. $\square$	7	5.0	
Married filing     is in the arr	8	Other income from Schedule 1, line	e 10 .							8		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9		
surviving spouse, \$25,900	10	Adjustments to income from Scheo	dule 1, li	ine 26						10	398.0	
<ul> <li>Head of household,</li> </ul>	11	- · · · · · · · · · · · · · · · · · · ·									51020.203	
\$19,400	12	Standard deduction or itemized								12	05507.04	
If you checked any box under	13									13	85527.81	
Standard Deduction,	14									14	11020.648 87185.272	
see instructions.	15	Subtract line 14 from line 11. If Zer	o or iess	s, enter -t	u IIIIS IS Y	Jui <b>(a)</b>	AADIE INCOM			15	07100.272	