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 Check only one box.	If you	single Married filing jointly unchecked the MFS box, enter the nation is a child but not your dependent	ame of y	ed filing our spo	•	•	,	_		usehold (HOH	, <u> </u>	spous	fying survi se (QSS) name if the	· ·		
					t name									Your social security number		
Kathryn Smit				nith												
If joint return, spouse's first name and middle initial Last name					name								Spouse's social security number			
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.											Pre	siden	tial Election	n Campaign		
									Check here if you, or your							
City, town, or post office. If you have a foreign address, also complete s					e spaces below. State				ZI	ZIP code		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				,	Fo	reign postal co			or refund.			
D'. 'I. I	۸ ـ ـ ـ ـ ـ		/	s a reward, award, or payment for property or services);							(l-) -	You Spouse				
Digital Assets		y time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a	,				•			, .	` '		Yes	☐ No		
Standard	Som	eone can claim:	pendent	: 🔲	Your	spouse	as a	depende	ent							
Deduction		spouse itemizes on a separate return	n or you	were a	dual-	status a	alien									
Age/Blindness	You:	Were born before January 2, 19	958 F	Are b	lind	Spo	use:	☐ Was	s born b	efore Janua	rv 2. 19	58	Is blin	nd		
										_	box if qualifies for (see instruction			nstructions):		
If more		rst name Last name	number			-	to you		ou .	Child tax credit		C	Credit for other dependents			
than four																
dependents, see instructions																
and check									<u> </u>				<u> </u>			
here \square					Ш											
Income	1a	Total amount from Form(s) W-2, bo	•			•					•	1a	205	00.40		
Attach Form(s)	b	1 7 3 1							•	1b						
W-2 here. Also	C	1										1c	13	16.0		
attach Forms W-2G and	d e	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										1d 1e	10	10.0		
1099-R if tax	f											1f				
was withheld.	g	W														
If you did not get a Form	h	Other earned income (see instructi										1g 1h				
W-2, see	i	Nontaxable combat pay election (s	,						1i							
instructions.	z	Add lines 1a through 1h										1z				
Attach Sch. B	2a	Tax-exempt interest	2a				b Ta	xable inte	erest			2b				
if required.	3a	Qualified dividends	3a				b Or	dinary di	vidends	s		3b				
	4a	IRA distributions	4a				b Ta	xable am	ount .		. [4b				
Standard Deduction for— Single or	5a	Pensions and annuities	5a				b Ta	xable am	ount .		. [5b	2411	16.707		
	6a	Social security benefits 6a b Taxable amount								6b						
Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)														
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here											5434	10.743		
Married filing jointly or	8	Other income from Schedule 1, line 10									8	301	12.49			
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income										9				
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26											9339	99.164		
Head of household,	11	Subtract line 10 from line 9. This is	•	-	_							11				
\$19,400	12 Standard deduction or itemized deductions (from Schedule A)									. 0						
If you checked any box under	13										t t	13 14		3.0 49.05		
Standard Deduction,	14													48.05		
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter	-U I	riis is yo	our t a	ixable in	come			15	8465	57.604		