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 one box.		ingle Married filing jointly u checked the MFS box, enter the na						Head of				spou	se (QSS)		
one box.		on is a child but not your dependent		our opo	uoc. I	r you one	CORC		i QO	o box, crite	1 1110 01	ilia 5	name ii tii	5 qualitying	
Your first name a	me and middle initial Last name								Yo	Your social security number					
Rachael	Gutierrez														
If joint return, spouse's first name and middle initial  Last name								Sp	Spouse's social security number						
Home address (i	numbe	r and street). If you have a P.O. box, see	instructio	ons.						Apt. no.	Pre	Presidential Election Campaign			
												Check here if you, or your spouse if filing jointly, want \$3			
City, town, or post office. If you have a foreign address, also complete				lete spaces below. State				ZIP	ZIF code			to go to this fund. Checking a box below will not change			
Foreign country name				Foreign province/state/county					Fore	Foreign postal code you			our tax or 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.												Yes	□ No	
Standard		eone can claim: You as a de						dependent	4000	7. (000 11.1	oti dotio	,,,,			
Deduction		pouse itemizes on a separate return				•									
Age/Blindness	You:	Were born before January 2, 1	958	Are b	lind	Spou	ıse:	☐ Was bo	rn be	fore Janua	ry 2, 19	958	☐ Is bli	nd	
Dependents	(see i	structions): (2) Social security (3) Relationship (4) Check the bo							e box if	if qualifies for (see instructions):					
If more than four	(1) First name Last name			number			to you			Child tax cre		(	Credit for other dependents		
dependents,	_										_			┽──	
see instructions and check											1				
here														<u> </u>	
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instruc	ctions	)						1a			
	b	Household employee wages not re	eported o	on Form	ı(s) W	-2						1b			
Attach Form(s) W-2 here. Also	<ul> <li>Tip income not reported on line 1a (see instructions)</li> <li>Medicaid waiver payments not reported on Form(s) W-2 (see instructions)</li> </ul>									1c					
attach Forms										1d					
W-2G and 1099-R if tax	e Taxable dependent care benefits from Form 2441, line 26											1e	557	00.077	
was withheld.	f	Employer-provided adoption bene					٠		٠			1f		60.277	
If you did not	g	Wages from Form 8919, line 6.							•			1g		6.0	
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	•			4-			
Attach Cab D	z 2a	Ĭ	 2a			   .	· • To	 xable interes				1z 2b			
Attach Sch. B if required.	2a 3a	· —	3a					dinary divide			•	3b	577	780.42	
	4a		4a					xable amour				4b		212.0	
Standard	5a		5a					xable amour				5b		3494.0	
Deduction for—	6a		6a	<b>b</b> Taxable amount <b>6b</b>				18869.39							
Single or Married filing	С	If you elect to use the lump-sum el		nethod,	chec						. 🗆				
separately, \$12,950	7	Capital gain or (loss). Attach Scheo	dule D if	require	d. If n	ot requir	red, o	check here			. 🔲	7		1.0	
• Married filing	8	Other income from Schedule 1, line										8	14	912.0	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is y	our <b>t</b> o	otal inco	me					9	514	08.243	
aum di dina anauca	10	Adjustments to income from Schee	stments to income from Schedule 1, line 26								10	4	57.0		
Head of	<u>11</u>	Subtract line 10 from line 9. This is	0 from line 9. This is your <b>adjusted gross income</b>									11	8055.0		
household, \$19,400	12	Standard deduction or itemized	deducti	ons (fro	m Sc	hedule A	4)					12	52	206.0	
If you checked	13 Qualified business income deduction from Form 8995 or Form 8995-A											13	13		
Otal raar a	14	Add lines 12 and 13										14	14		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>								15	15				