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								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	r QSS	S box, ente	r the ch	nild's	name if the	e qualifying	
Your first name	ne and middle initial Last name You										our social security number				
Marc			Taylo	aylor											
If joint return, sp	joint return, spouse's first name and middle initial				ist name								Spouse's social security number		
Home address (Presidential Election Campaign			
City, town, or post office. If you have a foreign address, also complete spaces below. State									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			ounty					below will not change rax or refund.			
Digital	At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) s												You	Spouse	
Assets		ange, gift, or otherwise dispose of a							asse	t)? (See ins	structio	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	rn be	fore Janua	ry 2, 19	958	ls blir	nd	
Dependents	(see i	instructions):		(2) Social securi			(3) Relationshi		hip	(4) Check the b		qualifi	ies for (see i	nstructions):	
If more than four	(1) Fi	rst name Last name		number			to you			Child tax credi		(Credit for othe	er dependents	
dependents,											-			<u>-</u>	
see instructions and check										Ī	i		Ī		
here											<u> </u>			<u> </u>	
Incomo	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instruc	ctions)						1a	53	90.0	
Income	b	Household employee wages not re	eported (on Form	า(s) W	'-2						1b	757	'67.73	
Attach Form(s)	c Tip income not reported on line 1a (see instructions)											1c			
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 benefits from Form 8839, line 29											1f	11	157.0	
If you did not	g	Wages from Form 8919, line 6 .										1g			
get a Form	h	Other earned income (see instruct	ions) .									1h			
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)) .			1	i						
motruotions.	z	Add lines 1a through 1h										1z			
Attach Sch. B	2a	Tax-exempt interest	2a			b	Tax	xable interes	st			2b	407	65.41	
if required.	За	Qualified dividends	3a			b	Or	dinary divide	ends			3b			
	4a	IRA distributions	4a			b	Tax	xable amour	nt.			4b			
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			
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 Sche	dule D if	require	d. If n	ot requir	red, d	check here			. 🗆	7	676	606.37	
Married filing	8	Other income from Schedule 1, lin	e 10 .									8	914	403.0	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	and 8.	This is y	our t o	otal inco	ome					9			
surviving spouse, \$25,900	10	Adjustments to income from Sche									10				
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income									11	843	326.06		
household, \$19,400	12	Standard deduction or itemized	deducti	ons (fro	m Sc	hedule A	4)					12			
If you checked	13	Qualified business income deduct	on from	Form 8	995 o	or Form 8	3995	-A				13	1113	39.693	
any box under Standard	14 Add lines 12 and 13									14					
Deduction, see instructions.	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									15	;	3.0			