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 one box.		ingle Married filing jointly under the name of the MFS box, enter the name of the market the name of the na						Head of				spou	se (QSS)	-	
	pers	on is a child but not your dependent	:												
					Last name								Your social security number		
Rachel					Mitchell										
If joint return, spouse's first name and middle initial Last name S								Sp	Spouse's social security number						
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.											Pre	Presidential Election Campaign			
											ere if you,				
City, town, or post office. If you have a foreign address, also complete				ete spaces below. State				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				Fore	eign postal co		your tax or refund. You Spouse				
Digital	At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sexchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instruction														
Assets									asse	et)? (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	efore Janua	ry 2, 19	958	☐ Is bli	ind	
Dependents	(see i	nstructions):		(2)	Social	security		(3) Relations	hip	(4) Check th	e box if	qualifi	es for (see	instructions):	
If more		rst name Last name		number			to you			Child tax cre		dit Credit for other depe		ner dependents	
than four															
dependents, see instructions															
and check															
here													L		
Income	1a	Total amount from Form(s) W-2, b	,			•						1a			
Attach Form(s)	b Household employee wages not reported on Form(s) W-2								1b						
W-2 here. Also	С	Tip income not reported on line 1a	•									1c		2.0	
attach Forms W-2G and	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									1d	•				
1099-R if tax	 e Taxable dependent care benefits from Form 2441, line 26 f Employer-provided adoption benefits from Form 8839, line 29 										1e 1f				
was withheld.	g	Wages from Form 8919, line 6.					•		•		•	1g			
If you did not get a Form	h	Other earned income (see instruct							•			1h		7.0	
W-2, see	i	Nontaxable combat pay election (s	,						ı İ						
instructions.	z	Add lines 1a through 1h						· ·				1z	64	194.36	
Attach Sch. B	2a	1	2a			b	Tax	xable interes	st			2b			
if required.	3a		3a			b	Ord	dinary divide	ends			3b	535	530.761	
	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 Schee	dule D if	require	d. If n	ot requir	red, d	check here			. 🗌	7	301	162.701	
Married filing jointly or	8	Other income from Schedule 1, lin										8		523.189	
Qualifying	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income											9		6.0	
surviving spouse, \$25,900	10	Adjustments to income from Sche										10			
Head of household,	11	, , , , , , , , , , , , , , , , , , ,									11				
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)									5.0				
If you checked any box under	13	Qualified business income deduct										13	5	566.0	
Standard Deduction,	14	Add lines 12 and 13										14			
see instructions.	15	15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15					