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.

Check only	· 🗆 :	Single Married filing jointly	Marrie	ed filing sepa	rately (Mi	FS) He	ad of hou	usehold (HOH)		alifying surviving ouse (QSS)	
one box.		ou checked the MFS box, enter the na son is a child but not your dependent		our spouse.	If you che	ecked the H	OH or Q	SS box, enter th	ne child'	s name if the qualifying	
Your first name	and middle initial Last name Y							Your se	Your social security number		
James			Rivers								
If joint return, spouse's first name and middle initial				Last name						Spouse's social security number	
								Presidential Election Campaign			
City town or nost office. If you have a foreign address, also complete spaces below. State						spouse	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/county			Fo	bo		low will not change x or refund.		
			- Congression of the congression							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	Someone can claim: You as a dependent Your spouse as a dependent										
Deduction		Spouse itemizes on a separate return	_	_					2.4050		
		: Were born before January 2, 1	958 _	Are blind	Spot			efore January		ifies for (see instructions):	
Dependents		instructions): irst name Last name	(2) Social security number			1	(3) Relationship to you		-	Credit for other dependents	
If more than four	(1)	ist name Last name	110111001			10 year		Child tax credit		Credit for other dependents	
dependents,											
see instructions and check	3										
here											
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instructions	s)				. 1	a	
IIICOIII C	b	Household employee wages not re	ported	on Form(s) W	<i>l</i> -2				. 11	35887.6	
Attach Form(s) c Tip income not reported on line 1a (see instructions)							. 10	c			
attach Forms	A Madianid							. 10	11523.05		
W-2G and 1099-R if tax	е	, , , , ,								е	
was withheld.	f	f Employer-provided adoption benefits from Form 8839, line 29								f	
If you did not	g	Wages from Form 8919, line 6 .							. 19	9	
get a Form W-2, see	h	Other earned income (see instructi	ons) .				1 1		. 11	98117.167	
instructions.	i	Nontaxable combat pay election (s	see instr	uctions) .			1i		_		
	Z									Z	
Attach Sch. B	2a	•	2a			Taxable in			. 21		
if required.	3a		3a			•		3	. 31		
	4a		4a							20.0	
Standard Deduction for—	5a		5a							_	
• Single or	6a	,	b Taxable amount						. 6l	477.0	
Married filing separately,	C	•		•	,		,	_	_ ₇		
\$12,950	Capital gain or (loss). Attach Schedule D if required, if not required, check here Other income from Schedule 1, line 10							. 8			
 Married filing jointly or 								. 9			
Qualifying surviving spouse,	20 000100										
\$25,900	10	•									
 Head of household, 	11										
\$19,400 • If you checked	13										
any box under	14									4 457.0	
Standard Deduction,	15										
see instructions.		2									