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.		Single Married filing jointly under the national street was designed as the MFS box, enter the national street.	_	ŭ		, -	Head of the HOH or	`	, _	spou	ifying surviving ise (QSS) name if the qualifying	
	pers	on is a child but not your dependent	:									
Your first name	and mi	ddle initial	Last name						١ ١	Your social security number		
Mark			Steele									
If joint return, spouse's first name and middle initial Last name S							Spouse's social security number					
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ons.				Apt. no). F	Presidential Election Campaign		
							Check here if you, or your					
City, town, or post office. If you have a foreign address, also complete				pplete spaces below. State Z					to		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					Foreign post			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											
Assets	exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No											
Standard Deduction	Someone can claim: You as a dependent Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status alien											
Age/Blindness	You:	Were born before January 2, 19	958	Are blir	nd Spo	use: [Was bor	n before Ja	nuary 2,	1958	Is blind	
Dependents	(see	instructions):		(2) Sc	cial security	((3) Relationsh	ip (4) Che	ck the box	if qualif	ies for (see instructions):	
If more		rst name Last name	number				to you		Child tax credit		Credit for other dependents	
than four												
dependents, see instructions												
and check									Ц_			
here												
Income	1a	Total amount from Form(s) W-2, bo	•		,					1a 1b	5889.0	
b Household employee wages not reported on Form(s) W-2							_		5009.0			
W-2 here. Also	e. Also orms d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1c 1d				
attach Forms W-2G and									1e			
1099-R if tax	f										7344.32	
was withheld.	g g										82159.0	
If you did not get a Form	h	Other earned income (see instructi								1g 1h	54801.817	
W-2, see instructions.	i	Nontaxable combat pay election (s	ee instr	uctions)			. 1i					
instructions.	z	, , , , , , , , , , , , , , , , , , , ,										
Attach Sch. B	2a	Tax-exempt interest	2a			b Taxa	able interest	t		2b		
if required.	3a	Qualified dividends	3a			b Ordi	nary divide	nds		3b	56996.471	
	4a	IRA distributions	4a			b Taxa	able amoun	t		4b	4.0	
Standard	5a		5a			b Taxa	able amoun	t		5b		
• Single or	6a	Social security benefits	ба			b Taxa	able amoun	t	<u>.</u>	6b		
Married filing	С	If you elect to use the lump-sum el		•	,	•	•		📙			
separately, \$12,950 7 Capital gain or (loss). Attach Schedule D if required. If not required,									🗀	7		
Married filing 8 Other income from Schedule 1, line 10								8	97243.0			
Qualifying	9		Id lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	55830.02	
surviving spouse, \$25,900	10	•	to income from Schedule 1, line 26							10	0.0	
 Head of household, 	11	12 Standard deduction or itemized deductions (from Schedule A)									3654.0	
\$19,400	12											
If you checked any box under	13									13	75092.364	
Standard Deduction,	14 15									14	73032.304	
see instructions.	13	oublidet inte 14 from tille 11. il 2010 of 1000, enter "0". Il ilo io your taxable income							15			