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		Single 🔲 Married filing jointly 🗌	Marrie	ed filing separately (	MFS)	Head of	household (HOH)					
Check only	16	spouse (QSS)										
one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualify person is a child but not your dependent:												
								1 1/				
Your first name	and mi	adie initial	_	Last name						Your social security number		
Mrs.			<u> </u>	Esparza								
If joint return, spouse's first name and middle initial Last name								Spous	Spouse's social security number			
									Presidential Election Campaign Check here if you, or your			
										g jointly, want \$3		
City, town, or po	ost offic	ce. If you have a foreign address, also co	omplete s	mplete spaces below. State			ZIP code			und. Checking a		
									Il not change			
Foreign country name				Foreign province/state/county			Foreign postal code	your t	your tax or refund.  You Spouse			
										You Spouse		
Digital		y time during 2022, did you: (a) rec								□ N.		
Assets	exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No											
Standard												
Deduction		Spouse itemizes on a separate retur	n or you	i were a duai-status	allen							
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Sp	ouse:	Was bo	n before January	2, 1958		Is blind		
Dependents	(see i	(see instructions): (2) Social security (3) Relationship (4) Check the box if qu								ualifies 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												
here $\square$												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .				. 1	la	7.0		
	b	Household employee wages not re	eported	on Form(s) W-2 .				. 1	b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	ot reported on line 1a (see instructions)						lc	81928.211		
attach Forms	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 1	d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							le			
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							lf	17687.47		
If you did not	g	Wages from Form 8919, line 6.							g	5.0		
get a Form W-2, see	h	Other earned income (see instruct	,			1		. 1	lh	9.0		
instructions.	i	Nontaxable combat pay election (	see instr	ructions)		<u>1</u> i				80425.899		
	Z	1							z			
Attach Sch. B	2a	· –	2a			xable interes		-	2b	400.0		
if required.	3a_		3a			•	nds	_	Bb	180.0		
	4a		4a			xable amoun			lb			
Standard Deduction for—	5a	<del>-</del>	5a				t		ib .			
Single or	6a	,	6a				t	<u>.</u>	6b	14210.11		
Married filing separately,	c	If you elect to use the lump-sum e		·	•	,		HF	_	48076.754		
\$12,950	7								7			
<ul> <li>Married filing jointly or</li> </ul>	8	•							8 9	2527.0		
Qualifying surviving spouse,	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							-	10	2321.0		
\$25,900	10	Adjustments to income from Schedule 1, line 26										
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>							11			
\$19,400	\$19,400 Standard deduction or itemized deductions (from Schedule A)								12			
If you checked any box under	13								13	8.0		
Standard Deduction,	14 15	Add lines 12 and 13							14	45176.737		
see instructions.	10	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>							15	73170.737		