Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2022
2022

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

Filing Status Check only	□ S	ingle Married filing jointly	Marrie	ed filing separately (M	IFS)	Head of h	ousehold (HOH)		llifying surviving use (QSS)	
one box.		u checked the MFS box, enter the nonis a child but not your dependent		our spouse. If you ch	necked th	ne HOH or (QSS box, enter ti	ne child's	s name if the qualifying	
Your first name	and mid	ddle initial	ame					Your social security number		
William Key				Сеу						
If joint return, spouse's first name and middle initial Last n				st name					Spouse's social security number	
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.							Presidential Election Campaign Check here if you, or your			
City, town, or post office. If you have a foreign address, also complete				olete spaces below. State ZI			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			Foreign postal code			
Digital Assets		any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) change, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructi								
Standard		Someone can claim: You as a dependent Your spouse as a dependent								
Deduction	Spouse itemizes on a separate return or you were a dual-status alien									
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	Was born	before January	2, 1958	Is blind	
Dependents	(see i	nstructions):		(2) Social security (3) Relations			(4) Check the b	ox if qual	ifies for (see instructions):	
If more than four	(1) Fir	st name Last name		number		to you	Child tax o	redit	Credit for other dependents	
dependents,										
see instructions and check							H			
here										
Incomo	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)				. 1a	13092.4	
Income	b	Household employee wages not re	,	•				. 1k	718.0	
Attach Form(s)	С	Tip income not reported on line 1a (see instructions)							;	
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						. 10	i	
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26								
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29						. 11		
If you did not	g	Wages from Form 8919, line 6 .						. 19	3	
get a Form	h	Other earned income (see instruct	ions) .					. 1h	1	
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		. 1i				
	Z	Add lines 1a through 1h						. 12	75073.47	
Attach Sch. B	2a	Tax-exempt interest	2a		b Taxab	le interest		. 2t		
if required.	3a	Qualified dividends	3a		b Ordina	ary dividend	ds	. 3b	22821.486	
	4a	IRA distributions	4a		b Taxab	le amount		. 4t	16892.0	
Standard	5a	-	5a		b Taxab	le amount		. 5b	38192.842	
Deduction for— Single or	6a	Social security benefits	6a		b Taxab	le amount		. 6b	95365.849	
Married filing separately,	c If you elect to use the lump-sum election method, check here (see instructions)							վ		
\$12,950	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here						_			
 Married filing jointly or 	8	Other income from Schedule 1, line 10						. 8		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income						. 9		
\$25,900	10	•							18596.949	
 Head of household, 	11	-								
\$19,400	Standard deduction or itemized deductions (from Schedule A)							. 12		
any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A						. 13	2222	
5 tarradi d	14 15	Add lines 12 and 13								
see instructions.	15	Subtract line 14 from line 11. If Zer	or ies	s, enter -u This is yo	our taxat	ole income		. 15		
									4040	