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 Check only	□ S	ingle Married filing jointly	Marrie	ed filing separately (M	IFS)	Head of h	ousehold (HOH)		llifying surv use (QSS)	iving	
one box.		u checked the MFS box, enter the non- on is a child but not your dependent		our spouse. If you ch	necked th	ne HOH or	QSS box, enter tl	ne child's	s name if th	e qualifying	
Your first name a	and mic	ddle initial	Last na	me				Your so	cial securit	y number	
Brian			lartinez								
If joint return, sp	ouse's	first name and middle initial	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 sp				ete spaces below.			ZIP code	spouse to go to	buse if filing jointly, want \$3 go to this fund. Checking a color will not change		
Foreign country name				Foreign province/state/county			Foreign postal code your tax or		x or refund.	cnange Spouse	
Digital Assets		y time during 2022, did you: (a) rec									
Standard		change, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No meone can claim: You as a dependent Your spouse as a dependent									
Deduction		pouse itemizes on a separate retur	•			Portaorit					
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	Was borr	before January	2, 1958	Is bli	nd	
Dependents	(see i	nstructions):		(2) Social security	(3) Relationsh		(4) Check the b	ox if quali	fies 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 (se	e instructions)				. 1a		_	
Income	b	Household employee wages not re	•	•				. 1b	,		
Attach Form(s)	orm(s) c Tip income not reported on line 1a (see instructions)							. 10	;		
W-2 here. Also attach Forms								. 10	ı		
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							,	93.0	
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29									
If you did not	g	Wages from Form 8919, line 6 .						. 19			
get a Form	h	Other earned income (see instruct	ions) .					. 1h	n		
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		. 1i					
	Z	Add lines 1a through 1h						. 1z	: 696	15.422	
Attach Sch. B	2a	Tax-exempt interest	2a		b Taxab	ole interest		. 2b)		
if required.	3a	Qualified dividends	3a		b Ordina	ary dividen	ds	. 3b			
	4a	IRA distributions	4a		b Taxab	ole amount		. 4b	,	36.0	
Standard	5a	-	5a		b Taxab	ole amount		. 5b)		
Deduction for— Single or	6a	,	6a					. 6b)		
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)							400	00 004	
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								392.301	
 Married filing jointly or 	8	Other income from Schedule 1, line 10									
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								19.148	
\$25,900	10	Adjustments to income from Sche	,					. 10			
 Head of household, 	pohold									017.0	
\$19,400	Standard deduction or itemized deductions (from Schedule A)							. 12	•	217.0	
any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								19 000	
Standard	14	Add lines 12 and 13								18.909	
see instructions.	15	Subtract line 14 from line 11. If zer	ro or less	s, enter -u This is ye	our taxa l	pie income		. 15	636	36.249	
										1010	