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

2022

OMB No. 1545-0074

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

Filing Status		Single Married filing jointly	Marrie	ed filing	separ	ately (M	FS)	Head	of hou	sehold (HOF	l) 🗌		fying surv	viving	
Check only one box.	If vo	u checked the MFS box, enter the n	ama of v	our coo	uco l	f vou ch	ooko	d tha UOU	or 09	S hav anta	r tha al		se (QSS)	o gualifying	
one box.		on is a child but not your dependent		our spo	use. i	i you cii	ecke	a the non	or Qa	S DOX, ente	r trie Ci	illiu S i	name ii u	le qualifying	
Your first name			Last nar	me							Yo	ur soc	ial securit	v number	
Paul	Olsor												Tour coolar coolarsy manipor		
	n, spouse's first name and middle initial Last name											Spouse's social security number			
,,	. joint totally operate a mot mand and model minut										"				
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ons.						Apt. no.	Pro	esiden	tial Election	on Campaign	
·	7 pt. 110.											Check here if you, or your			
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code													tly, want \$3		
									to go to this fund. Checking a box below will not change						
Foreign country name				Foreign province/state/			ounty		Foi	reign postal co			or refund.		
													You	Spouse	
Digital	At an	y time during 2022, did you: (a) rec	eive (as	a rewar	d, awa	ard, or p	aym	ent for pro	perty	or services);	or (b)	sell,			
Assets		ange, gift, or otherwise dispose of a											☐ Yes	☐ No	
Standard Someone can claim: You as a dependent Your spouse as a dependent															
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-	status a	llien								
Ago/Plindness	Vau	Were born before January 2, 1	050	Are b	lind	Cno		□ Mee k	orn b	efore Janua	n, 0 10	250	☐ Is bli	ind	
			936	Ī		Spor	use.							instructions):	
-	(see instructions): (1) First name Last name			(2) Social securi number			/ (3) Relationship to you			Child tax cre		· 1	,	ner dependents	
If more than four	(1)11	Last Hairie		Tidilloo!			10)00			Crilid tax ci					
dependents,	_										_				
see instructions	_									_	1				
and check here	_										-			╡──	
	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruc	ctions)						1a	Τ	_	
Income	b	Household employee wages not re										1b			
Attach Form(s)	c Tip income not reported on line 1a (see instructions)									1c					
W-2 here. Also attach Forms										1d					
W-2G and										1e	e 32.0				
1099-R if tax was withheld.	f	f Employer-provided adoption benefits from Form 8839, line 29										1f	364.0		
If you did not	g	Wages from Form 8919, line 6 .										1g	13	325.07	
get a Form	h	Other earned income (see instruct	ions) .									1h			
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions))				1i						
	z	Add lines 1a through 1h				. , .						1z	10	332.62	
Attach Sch. B	2a	Tax-exempt interest	2a				b Ta	xable inter	est			2b			
if required.	3a	· ·	3a			_		dinary divi				3b	53	3468.0	
	4a	IRA distributions	4a			ا	b Ta	xable amo	unt .			4b			
Standard Deduction for—	5a		5a			_						5b	67	778.91	
Single or	6a	,	6a					xable amo				6b	-		
Married filing separately,	C	• • • • • • • • • • • • • • • • • • • •										_			
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									. 📙	7		7.0	
 Married filing jointly or 	8	Other income from Schedule 1, lin	4b, 5b, 6b, 7, and 8. This is your total income								\vdash		7.0		
Qualifying surviving spouse,	9											07/	200,000		
\$25,900	10	· · · · · · · · · · · · · · · · · · ·									10				
 Head of household, 	11										11				
\$19,400	12										•	12			
If you checked any box under	13											13			
Standard Deduction,	14 15										14				
see instructions.	13	Cubil act line 14 HOTH line 11. If Zer	o or less	s, enter	·U 1	ino io yc	ou t a	ivanie ilici	JIII C		•	15			