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 Check only				_				Head o				spou	se (QSS)	-		
one box.		u checked the MFS box, enter the nation is a child but not your dependent		our spo	use. I	f you che	ecke	d the HOH o	or QS	S box, ente	r the ci	nild's	name if the	qualifying		
Your first name	our first name and middle initial				Last name									Your social security number		
Robert	Bui				Surnett											
If joint return, spouse's first name and middle initial Last name)							Spouse's social security number				
											Presidential Election Campaign Check here if you, or your					
City, town, or post office. If you have a foreign address, also complete s				e spaces below. State			ZIP	ZIP code		spouse if filing jointly, want \$3 to go to this fund. Checking a						
Foreign country name				Foreign province/state/co			 ounty		eign postal co		box below will not change your tax or refund. You Spous					
Digital Assets	At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructi											Yes	□ No			
Standard		eone can claim: You as a de						dependent		ot): (OCC IIIC	Structio	,,,,				
Deduction		Spouse itemizes on a separate retur	•			•										
Age/Blindness	You:	Were born before January 2, 1	958	Are b	lind	Spou	ıse:	☐ Was bo	orn be	efore Janua	ry 2, 19	958	Is blin	d		
Dependents	(see i	instructions):		(2) Social security			(3) Relationship		ship	(4) Check the box it		qualifi	es for (see ir	structions):		
If more than four	(1) Fi	rst name Last name		number			to you			Child tax cre		(Credit for othe	r dependents		
dependents,							\pm				-			<u>. </u>		
see instructions and check							\top]]		
here]		
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruc	ctions)						1a	524	02.0		
	b	Household employee wages not re	eported (on Forn	n(s) W	-2						1b				
Attach Form(s) W-2 here. Also	(see ins	struction	າຣ)							1c 22362.48						
attach Forms	ch Forms d Medicaid waiver payments not reported on Form(s) W-2 (see						nstructions)						37347.961			
W-2G and 1099-R if tax	e Taxable dependent care benefits from Form 2441, line 26										1e					
was withheld.	f	h share the second of the seco										1f				
If you did not	g	Wages from Form 8919, line 6.										1g	563	84.45		
get a Form W-2, see	h	Other earned income (see instruct	,						. 1		•	1h				
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)	,			1	li				531	40.16		
		Add lines 1a through 1h							. •		•	1z				
Attach Sch. B if required.	2a	' <u> </u>	2a					xable intere			•	2b		29.16		
	3a		3a					dinary divide				3b		5.0		
<u> </u>	4a		4a					xable amou xable amou				4b				
Standard Deduction for—	5a 6a		5a 6a					xable amou xable amou				5b 6b				
Single or	C	If you elect to use the lump-sum e		nothod	choo						Ė	GD				
Married filing separately,	7	Capital gain or (loss). Attach Sche		•		`		,				7	579	93.0		
\$12,950 Married filing	8	Other income from Schedule 1, lin										8				
jointly or	9										•	9				
Qualifying surviving spouse,	10	Adjustments to income from Sche	6b, 7, and 8. This is your total income							•	10					
\$25,900	11	Subtract line 10 from line 9. This is	•								•	11	3384	14.143		
household,	12	Standard deduction or itemized	•	-	-						·	12				
\$19,400 If you checked										13	3888	81.09				
any box under Standard	14	Add lines 12 and 13										14				
Deduction,	15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15	2082	20.897					
see instructions.																