



2022 Federal Tax Return Filing
Instructions
FOR THE YEAR ENDING
December 31, 2022

| | | | | | | | | | | | | | | | | | |
|------------------------------|--|-------------------|----------|----------------------------|----------|-----------------------|---------|---------------------------|---------|----------------|---------|---------------------|---------|--------------------|-------|---------------------|-----|
| Prepared for | DAVID C VASQUEZ | | | | | | | | | | | | | | | | |
| Tax Summary | <table><tr><td>Gross Income.....</td><td>\$104486</td></tr><tr><td>Adjusted Gross Income.....</td><td>\$104486</td></tr><tr><td>Total Deductions.....</td><td>\$12950</td></tr><tr><td>Total Taxable Income.....</td><td>\$91536</td></tr><tr><td>Total Tax.....</td><td>\$15802</td></tr><tr><td>Total Payments.....</td><td>\$16733</td></tr><tr><td>Refund Amount.....</td><td>\$931</td></tr><tr><td>Amount You Owe.....</td><td>\$0</td></tr></table> | Gross Income..... | \$104486 | Adjusted Gross Income..... | \$104486 | Total Deductions..... | \$12950 | Total Taxable Income..... | \$91536 | Total Tax..... | \$15802 | Total Payments..... | \$16733 | Refund Amount..... | \$931 | Amount You Owe..... | \$0 |
| Gross Income..... | \$104486 | | | | | | | | | | | | | | | | |
| Adjusted Gross Income..... | \$104486 | | | | | | | | | | | | | | | | |
| Total Deductions..... | \$12950 | | | | | | | | | | | | | | | | |
| Total Taxable Income..... | \$91536 | | | | | | | | | | | | | | | | |
| Total Tax..... | \$15802 | | | | | | | | | | | | | | | | |
| Total Payments..... | \$16733 | | | | | | | | | | | | | | | | |
| Refund Amount..... | \$931 | | | | | | | | | | | | | | | | |
| Amount You Owe..... | \$0 | | | | | | | | | | | | | | | | |
| Make check payable to | | | | | | | | | | | | | | | | | |
| Mailing Address | Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return. | | | | | | | | | | | | | | | | |

Instructions

If you e-filed your return and it has been accepted, you will get notified via text or email if you opted for that option.

Your tax obligation is exactly met. No additional tax is due.



**2022 STATE TAX RETURN FILING
INSTRUCTIONS
OREGON
FOR THE YEAR ENDING
December 31, 2022**

| | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|--|----------------------------|----|--------|-----------------------|----|-------|---------------------------|----|--------|----------------|----|-------|---------------------|----|-------|--------------------|----|-----|---------------------|----|---|
| Prepared for | DAVID C VASQUEZ | | | | | | | | | | | | | | | | | | | | | |
| Tax Summary | <table><tr><td>Adjusted Gross Income.....</td><td>\$</td><td>97,236</td></tr><tr><td>Total Deductions.....</td><td>\$</td><td>2,420</td></tr><tr><td>Total Taxable Income.....</td><td>\$</td><td>94,816</td></tr><tr><td>Total Tax.....</td><td>\$</td><td>8,032</td></tr><tr><td>Total Payments.....</td><td>\$</td><td>8,138</td></tr><tr><td>Refund Amount.....</td><td>\$</td><td>106</td></tr><tr><td>Amount You Owe.....</td><td>\$</td><td>0</td></tr></table> | Adjusted Gross Income..... | \$ | 97,236 | Total Deductions..... | \$ | 2,420 | Total Taxable Income..... | \$ | 94,816 | Total Tax..... | \$ | 8,032 | Total Payments..... | \$ | 8,138 | Refund Amount..... | \$ | 106 | Amount You Owe..... | \$ | 0 |
| Adjusted Gross Income..... | \$ | 97,236 | | | | | | | | | | | | | | | | | | | | |
| Total Deductions..... | \$ | 2,420 | | | | | | | | | | | | | | | | | | | | |
| Total Taxable Income..... | \$ | 94,816 | | | | | | | | | | | | | | | | | | | | |
| Total Tax..... | \$ | 8,032 | | | | | | | | | | | | | | | | | | | | |
| Total Payments..... | \$ | 8,138 | | | | | | | | | | | | | | | | | | | | |
| Refund Amount..... | \$ | 106 | | | | | | | | | | | | | | | | | | | | |
| Amount You Owe..... | \$ | 0 | | | | | | | | | | | | | | | | | | | | |
| Make check payable to | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address | Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return. | | | | | | | | | | | | | | | | | | | | | |

Special Instructions

Keep A Copy

Click on Main Menu and then E-File or Print to print your return. Attach your copy of each W-2, W-2G, 1099R or 1099G with withholding. Keep with your records for three years.

2022 TWO YEAR COMPARISON

DAVID C VASQUEZ
606-05-4563

Keep for Your Records

| | 2022 | 2021 | Difference |
|---|---------|--------|------------|
| Filing status | Single | Single | |
| INCOME: | | | |
| Wages, salaries, tips, etc. | 104,486 | | 104,486 |
| Interest income | | | |
| Ordinary dividend income | | | |
| IRA distributions and pension income | | | |
| Taxable social security income | | | |
| Capital gain or (loss) (Schedule D) | | | |
| Schedule 1 - Income | | | |
| Refunds of state and local taxes | | | |
| Alimony received | | | |
| Business income or (loss) (Schedule C) | | | |
| Other gains or (losses) (Form 4797) | | | |
| Rental real estate, partnerships, estates, etc. (Schedule E) | | | |
| Farm income or (loss) (Schedule F) | | | |
| Unemployment compensation | | | |
| Other income | | | |
| Total income | 104,486 | | 104,486 |
| ADJUSTMENTS: | | | |
| Schedule 1 - Adjustments | | | |
| Educator expenses | | | |
| Busn expenses for reserviists, performing artists, etc | | | |
| Health savings account deduction | | | |
| Moving expenses | | | |
| Deductible part of self-employment tax | | | |
| Self-employed SEP, SIMPLE and qualified plans deduction. ... | | | |
| Self-employed health insurance | | | |
| Penalty on early withdrawal of savings | | | |
| Alimony paid | | | |
| IRA contributions | | | |
| Student loan interest deduction | | | |
| Archer MSA deduction | | | |
| Other adjustments | | | |
| Total adjustments | | | |
| ADJUSTED GROSS INCOME: | 104,486 | | 104,486 |
| DEDUCTIONS: | | | |
| Standard deduction or Itemized deductions | 12,950 | | 12,950 |
| Charitable contributions if taking standard deduction, | N/A | | |
| If itemized, Schedule A deductions: | | | |
| Medical and dental expenses | | | |
| Sales, income, and other taxes paid | 8,138 | | 8,138 |
| Interest paid | | | |
| Gifts to charity | | | |
| Casualty and theft losses | | | |
| Other miscellaneous deductions | | | |
| Qualified business income deduction | | | |
| TAXABLE INCOME: | 91,536 | | 91,536 |

2022 TWO YEAR COMPARISON

DAVID C VASQUEZ
606-05-4563

Keep for Your Records

| | 2022 | 2021 | Difference |
|--|--------|------|------------|
| TAX COMPUTATION (BEFORE CREDITS): | | | |
| Tax..... | 15,802 | | 15,802 |
| Tax calculation method | TABLE | | |
| Schedule 2 – Taxes | | | |
| Alternative minimum tax | | | |
| Excess advance premium tax credit repayment | | | |
| Total taxes | 15,802 | | 15,802 |
| Tax rate | 24% | | |
| CREDITS: | | | |
| Child and other dependents tax credit | | | |
| Schedule 3 – Non-Refundable Credits | | | |
| Foreign tax credit | | | |
| Child care credit | | | |
| Education credit | | | |
| Retirement savings contribution credit | | | |
| Other credits | | | |
| Total credits | | | |
| OTHER TAXES: | | | |
| Schedule 2 – Other Taxes | | | |
| Self-employment tax | | | |
| Additional tax on IRAs | | | |
| Other taxes | | | |
| TOTAL TAXES: | 15,802 | | 15,802 |
| PAYMENTS: | | | |
| Federal income tax withheld | 16,733 | | 16,733 |
| Estimated payments made | | | |
| Earned income credit | | | |
| Refundable child tax credit or additional child tax credit | | | |
| American opportunity credit | | | |
| Recovery rebate credit | | | |
| Schedule 3 – Refundable Credits & Payments | | | |
| ACA premium tax credit | | | |
| Qualified sick and family leave credit | | | |
| Other payments | | | |
| Total payments | 16,733 | | 16,733 |
| AMOUNT DUE / REFUND: | | | |
| Amount overpaid | 931 | | 931 |
| Overpayment applied to next year | | | |
| Refund | 931 | | 931 |
| Amount due | | | |
| Penalty | | | |

Tax Calculation Methods:

Sch D = Sch D tax worksheet
Sch J = Inc Aver for Farmer/Fisherman
FEITW = Foreign Earned Income Tax WS

QDCGTW = Qual Div Cap Gain Tax WS
F8615 = Child with unearned income

TCW = Tax Comp Worksheet (rates)
TABLE = Tax Table

Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
Check only 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 one box. qualifying person is a child but not your dependent:

| | | |
|---|-----------------------------|---|
| Your first name and middle initial DAVID C | Last name VASQUEZ | Your social security number 606-05-4563 |
| If joint return, spouse's first name and middle initial | Last name | Spouse's social security number |

| | | | |
|--|--|------------------------|---|
| Home address (number and street). If you have a P.O. box, see instructions. 155 NW KINGS BLVD | | Apt. no. 647 | Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse |
| City, town, or post office. If you have a foreign address, also complete spaces below. CORVALLIS | | State OR | |
| Foreign country name | | Foreign postal code | |

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent ☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1958 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1958 ☐ Is blind

| Dependents (see instructions): | | (2) Social security number | (3) Relationship to you | (4) Check the box if qualifies for (see inst.): | |
|--|-----------|-----------------------------------|--------------------------------|--|-----------------------------|
| (1) First name | Last name | | | Child tax credit | Credit for other dependents |
| If more than four dependents, see instructions and check here <input type="checkbox"/> | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| | | |
|--|--|---|
| Income | 1a Total amount from Form(s) W-2, box 1 (see instructions) | 1a 104,486 |
| Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions. | b Household employee wages not reported on Form(s) W-2 | 1b |
| | c Tip income not reported on line 1a (see instructions) | 1c |
| | d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) | 1d |
| | e Taxable dependent care benefits from Form 2441, line 26 | 1e |
| | f Employer-provided adoption benefits from Form 8839, line 29 | 1f |
| | g Wages from Form 8919, line 6 | 1g |
| | h Other earned income (see instructions) | 1h |
| | i Nontaxable combat pay election (see instructions) 1i | |
| | z Add lines 1a through 1h | 1z 104,486 |
| | Attach Sch. B if required. | 2a Tax-exempt interest 2a |
| 3a Qualified dividends 3a | | b Ordinary dividends 3b |
| 4a IRA distributions 4a | | b Taxable amount 4b |
| 5a Pensions and annuities 5a | | b Taxable amount 5b |
| 6a Social security benefits 6a | | b Taxable amount 6b |
| c If you elect to use the lump-sum election method, check here (see instructions) <input type="checkbox"/> | | |
| 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/> | | 7 |
| 8 Other income from Schedule 1, line 10 | | 8 |
| 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income | | 9 104,486 |
| 10 Adjustments to income from Schedule 1, line 26 | | 10 |
| 11 Subtract line 10 from line 9. This is your adjusted gross income | 11 104,486 | |
| 12 Standard deduction or itemized deductions (from Schedule A) | 12 12,950 | |
| 13 Qualified business income deduction from Form 8995 or Form 8995-A | 13 | |
| 14 Add lines 12 and 13 | 14 12,950 | |
| 15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income | 15 91,536 | |

| | | | |
|--|---|-----------|--------|
| Tax and Credits | 16 Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> | 16 | 15,802 |
| | 17 Amount from Schedule 2, line 3 | 17 | |
| | 18 Add lines 16 and 17 | 18 | 15,802 |
| | 19 Child tax credit or credit for other dependents from Schedule 8812 | 19 | |
| | 20 Amount from Schedule 3, line 8 | 20 | |
| | 21 Add lines 19 and 20 | 21 | |
| | 22 Subtract line 21 from line 18. If zero or less, enter -0- | 22 | 15,802 |
| | 23 Other taxes, including self-employment tax, from Schedule 2, line 21 | 23 | |
| 24 Add lines 22 and 23. This is your total tax | 24 | 15,802 | |

| | | | |
|---|---|------------|--------|
| Payments | 25 Federal income tax withheld from: | | |
| | a Form(s) W-2 | 25a | 16,733 |
| | b Form(s) 1099 | 25b | |
| | c Other forms (see instructions) | 25c | |
| | d Add lines 25a through 25c | 25d | 16,733 |
| | 26 2022 estimated tax payments and amount applied from 2021 return | 26 | |
| | 27 Earned income credit (EIC) | 27 | |
| | 28 Additional child tax credit from Schedule 8812 | 28 | |
| | 29 American opportunity credit from Form 8863, line 8 | 29 | |
| | 30 Reserved for future use | 30 | |
| 31 Amount from Schedule 3, line 15 | 31 | | |
| 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits | 32 | | |
| 33 Add lines 25d, 26, and 32. These are your total payments | 33 | 16,733 | |

| | | | |
|--|--|------------|-----|
| Refund | 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid | 34 | 931 |
| | 35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/> | 35a | 931 |
| | b Routing number XXXXXXXXXXXXXXXXXXXX c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings | | |
| | d Account number XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | |
| 36 Amount of line 34 you want applied to your 2023 estimated tax | 36 | | |

| | | | |
|-----------------------|---|-----------|--|
| Amount You Owe | 37 Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions | 37 | |
| | 38 Estimated tax penalty (see instructions) | 38 | |

| | | | |
|-----------------------------|--|-----------|--------------------------------------|
| Third Party Designee | Do you want to allow another person to discuss this return with the IRS? See instructions <input type="checkbox"/> Yes. Complete below. <input checked="" type="checkbox"/> No | | |
| | Designee's name | Phone no. | Personal identification number (PIN) |
| | | | |

| | | | | |
|------------------|--|---------------|--------------------------|---|
| Sign Here | Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. | | | |
| | Your signature | Date | Your occupation | If the IRS sent you an Identity Protection PIN, enter it here (see inst.) |
| | Spouse's signature. If a joint return, both must sign. | Date | Spouse's occupation | If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) |
| | Phone no. 925-818-1175 | Email address | Vasquezd@oregonstate.edu | |

| | | | | | |
|-------------------------------|-----------------|----------------------|------|------|---|
| Paid Preparer Use Only | Preparer's name | Preparer's signature | Date | PTIN | Check if: <input type="checkbox"/> Self-employed |
| | Firm's name | Phone no. | | | |
| | Firm's address | Firm's EIN | | | |

Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2022)

2022 WAGES AND SALARIES SUMMARY ATTACHMENT

DAVID C VASQUEZ
606-05-4563

| Employer Name | Employer EIN | T or S | Wages | Federal Withholding | Social Security Tax Withheld | State | State Wages | State Tax Withheld | Local Tax Withheld |
|----------------|--------------|--------------|---------|------------------------|---------------------------------|-------|----------------|-----------------------|-----------------------|
| TEKSYSTEMS INC | 52-2010575 | T | 104,486 | 16,733 | 6,478 | OR | 104,486 | 8,138 | |

| | | | | | |
|-------|---------|--------|-------|---------|-------|
| Total | 104,486 | 16,733 | 6,478 | 104,486 | 8,138 |
|-------|---------|--------|-------|---------|-------|

2022 FEDERAL TAX WITHHOLDINGS ATTACHMENT

DAVID C VASQUEZ
606-05-4563

W-2

TEKSYSTEMS INC

16,733

Total to Form 1040/1040-SR line 25d

16,733

2022 SCHEDULE A – STATE AND LOCAL TAX ATTACHMENT

DAVID C VASQUEZ
606-05-4563

OR STATE W2 W/H FROM TEKSYSTEMS INC

8,138

TOTAL TO SCHEDULE A LINE 5A

8,138

2022 STUDENT LOAN INTEREST DEDUCTION WORKSHEET – SCHEDULE 1, LINE 21

DAVID C VASQUEZ

Keep for Your Records

- Before you begin:** ✓ Figure any write-in adjustments to be entered on Schedule 1, line 24z (see the instructions for Schedule 1, line 24z).
✓ Be sure you have read the **Exception** in the instructions for this line to see if you can use this worksheet instead of Pub. 970 to figure your deduction.

1. Enter the total interest you paid in 2022 on qualified student loans (see instructions for line 21).
Don't enter more than \$2,500 1. 95
2. Enter the amount from Form 1040 or 1040-SR, line 9, plus any foreign earned income exclusion and/or housing exclusion (Form 2555, line 45), any foreign housing deduction (Form 2555, line 50), amount of excluded income from Puerto Rico, and amount of excluded income from American Samoa (Form 4563, line 15) 2. 104,486
3. Enter the total of the amounts from Schedule 1, lines 11 through 20, and 23 and 25 3.
4. Subtract line 3 from line 2 4. 104,486
5. Enter the amount shown below for your filing status.
 - Single, head of household, or qualifying surviving spouse – \$70,000
 - Married filing jointly – \$145,000..... 5. 70,000
6. Is the amount on line 4 more than the amount on line 5?
No. Skip lines 6 and 7, enter -0- on line 8, and go to line 9.
Yes. Subtract line 5 from line 4 6. 34,486
7. Divide line 6 by \$15,000 (\$30,000 if married filing jointly). Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000 7. 1.000
8. Multiply line 1 by line 7 8. 95
9. **Student loan interest deduction.** Subtract line 8 from line 1. Enter the result here and on Schedule 1, line 21. **Don't** include this amount in figuring any other deduction on your return (such as on Schedule A, C, E, etc.) 9.

2023 CARRYFORWARD INFORMATION

DAVID C VASQUEZ
606-05-4563

Keep for Your Records

| | |
|--|--------|
| Itemized Returns Only – 2022 state and local tax refund (this amount may not be taxable in 2022) | _____ |
| Charitable contributions carryover to 2023 | _____ |
| Estimated short-term capital loss carryover | _____ |
| Estimated long-term capital loss carryover | _____ |
| 2022 tax liability (for 2023 Form 2210 purposes) | 15,802 |
| Form 8839: 2021 carryover of unqualified expenses | _____ |
| Refund amount applied to 2023 | _____ |
| Disallowed investment interest in 2022 | _____ |
| Additional state taxes paid | _____ |
| Form 8396: Mortgage interest credit from 2020 | _____ |
| Mortgage interest credit from 2021 | _____ |
| Mortgage interest credit from 2022 | _____ |
| Form 8801: Minimum tax credit carryforward | 0 |
| Potential 2023 IRA contribution from 2022 tax refund | _____ |

| NOL carryforward: | | Regular Tax | | AMT Tax | |
|------------------------------------|-------|-------------|-------|------------------------------------|-------|
| from 2002 | _____ | from 2012 | _____ | from 2002 | _____ |
| from 2003 | _____ | from 2013 | _____ | from 2003 | _____ |
| from 2004 | _____ | from 2014 | _____ | from 2004 | _____ |
| from 2005 | _____ | from 2015 | _____ | from 2005 | _____ |
| from 2006 | _____ | from 2016 | _____ | from 2006 | _____ |
| from 2007 | _____ | from 2017 | _____ | from 2007 | _____ |
| from 2008 | _____ | from 2018 | _____ | from 2008 | _____ |
| from 2009 | _____ | from 2019 | _____ | from 2009 | _____ |
| from 2010 | _____ | from 2020 | _____ | from 2010 | _____ |
| from 2011 | _____ | from 2021 | _____ | from 2011 | _____ |
| Gross NOL generated in 2022 | _____ | | | Gross AMT NOL generated in 2022 | _____ |
| To be absorbed in carryback period | _____ | | | To be absorbed in carryback period | _____ |
| Net carryforward from 2022 | _____ | | | Net carryforward from 2022 | _____ |
| Total carryforward to 2023 | _____ | | | Total carryforward to 2023 | _____ |

- The amounts carried to next year from Schedule(s) E, pages 1 and/or 2, are found on Form 8582, Worksheet 6. Carryover AMT amounts are found on the AMT Form 8582, Worksheet 6.
- Foreign Tax Credit carryforward to 2023 _____
- General Business Credit carryforward to 2023 _____
- First-Time Homebuyer Credit Repayment carryforward to 2023 _____
- If there are Form(s) 6252 in this tax return, the gross profit ratio and prior payments received (including the current year payments) will carry forward from each Form 6252.
- Amounts from Form 6251, lines 16 through 18, lines 27 and 28 are automatically carried forward to 2023.

2022 OREGON TWO YEAR COMPARISON

Taxpayer's Last and First Name

Taxpayer's SSN

.....

| | Tax Year 2022 | Tax Year 2021 | Difference |
|------------------------------------|-----------------|---------------|------------|
| Filing status | <u>Single</u> | <u></u> | |
| Residency status | <u>Resident</u> | <u></u> | |
| Number of exemptions claimed | <u></u> | <u></u> | |
| State Base Form Filed | <u>OR 40</u> | <u>OR 40</u> | |

INCOME, DEDUCTIONS AND ADJUSTMENTS:

| | | | |
|--|----------------|---------|----------------|
| Federal Adjusted Gross Income | <u>104,486</u> | <u></u> | <u>104,486</u> |
| Additions to Federal Income | <u></u> | <u></u> | <u></u> |
| Subtractions from Federal Income | <u>7,250</u> | <u></u> | <u>7,250</u> |
| Oregon Income | <u>97,236</u> | <u></u> | <u>97,236</u> |
| Itemized/Standard Deduction | <u>2,420</u> | <u></u> | <u>2,420</u> |
| Taxable Income | <u>94,816</u> | <u></u> | <u>94,816</u> |

TAX, CREDIT AND PAYMENTS:

| | | | |
|--|--------------|---------|--------------|
| Oregon Tax | <u>8,032</u> | <u></u> | <u>8,032</u> |
| Exemption Credit | <u></u> | <u></u> | <u></u> |
| Other Credits | <u></u> | <u></u> | <u></u> |
| Net Tax | <u>8,032</u> | <u></u> | <u>8,032</u> |
| Income Tax Withheld | <u>8,138</u> | <u></u> | <u>8,138</u> |
| Estimated Tax Payments/PY Tax Refund Applied | <u></u> | <u></u> | <u></u> |
| Total Payments | <u>8,138</u> | <u></u> | <u>8,138</u> |

REFUND OR BALANCE DUE

| | | | |
|---|------------|---------|------------|
| Balance Due | <u></u> | <u></u> | <u></u> |
| Underpayment Penalty | <u></u> | <u></u> | <u></u> |
| Other Penalties and Interests | <u></u> | <u></u> | <u></u> |
| Amount You Owe | <u></u> | <u></u> | <u></u> |
| Overpayment | <u>106</u> | <u></u> | <u>106</u> |
| Overpayment Applied to Estimated Payments | <u></u> | <u></u> | <u></u> |
| Amount to be Refunded | <u>106</u> | <u></u> | <u>106</u> |

OREGON DEPT OF REVENUE

P.O. BOX 14950
SALEM, OR 97309

Fold here for #10 envelope

OREGON DEPT OF REVENUE

P.O. BOX 14950
SALEM, OR 97309

Fold here for 6x9 envelope

Fold here for #10 envelope

2022 Form OR-40
Oregon Individual Income Tax Return for Full-year Residents

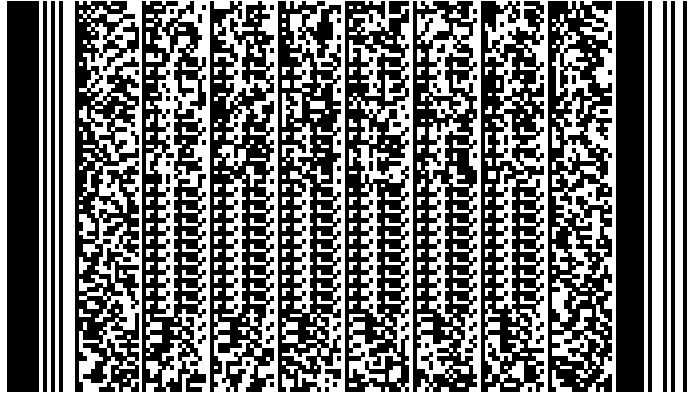
Oregon Department of Revenue

Page 1 of 8 • Use UPPERCASE letters. • Use blue or black ink. • Print actual size (100%). • Don't submit photocopies or use staples.

Fiscal year ending date (MM/DD/YYYY)

Space for 2-D barcode--do not write in box below

- ☐ Extension filed
- ☐ Form OR-24
- ☐ Form OR-243
- ☐ Federal Form 8379
- ☐ Federal Form 8886
- ☐ Disaster relief
- ☐ Amended return.
If amending for an NOL tax year (YYYY)
NOL, tax year the
NOL was generated:
- ☐ Calculated with "as if" federal return
- ☐ Short-year tax election



First name

Initial

Date of birth (MM/DD/YYYY)

DAVID

C

12/03/1979

Last name

VASQUEZ

Social Security number (SSN)

606-05-4563

☐ First time using this SSN (see instructions)

☐ Applied for ITIN

☐ Deceased

Spouse first name

Initial

Spouse date of birth (MM/DD/YYYY)

Spouse last name

Spouse SSN

☐ First time using this SSN (see instructions)

☐ Applied for ITIN

☐ Deceased

Current address

155 NW KINGS BLVD

City

CORVALLIS

Country

State

ZIP code

OR

97330

Phone

925-818-1175

Filing Status (check only one box)

1. ☒ Single
2. ☐ Married filing jointly
3. ☐ Married filing separately (enter spouse's information **above**)
4. ☐ Head of household (with qualifying dependent)
5. ☐ Qualifying surviving spouse



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Last name

SSN

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Note: Reprint page 1 if you make changes to this page.**Exemptions**

6a. Credits for yourself 6a.

Check boxes that apply: ☒ Regular ☐ Severely disabled ☐ Someone else can claim you as a dependent

6b. Credits for your spouse 6b.

Check boxes that apply: ☐ Regular ☐ Severely disabled ☐ Someone else can claim you as a dependent**Dependents.**

List your dependents in order from youngest to oldest.

Dependent 1: First name Initial Dependent 1: Last name

Dependent 1: Date of birth (MM/DD/YYYY) Dependent 1: SSN Code *

☐ Dependent 1: Check if child has a qualifying disability

Dependent 2: First name Initial Dependent 2: Last name

Dependent 2: Date of birth (MM/DD/YYYY) Dependent 2: SSN Code *

☐ Dependent 2: Check if child has a qualifying disability

Dependent 3: First name Initial Dependent 3: Last name

Dependent 3: Date of birth (MM/DD/YYYY) Dependent 3: SSN Code *

☐ Dependent 3: Check if child has a qualifying disability

*Dependent relationship code (see instructions).

6c. Total number of dependents 6c.

6d. Total number of dependent children with a qualifying disability (see instructions) 6d.

6e. Total exemptions. Add lines 6a through 6d **Total** 6e.

2022 Form OR-40

Oregon Department of Revenue

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Taxable income

7. Federal adjusted gross income from federal Form 1040, 1040-SR, or 1040-NR, line 11; or 1040-X, line 1C (see instructions) 7. 104,486.00
8. Total additions from Schedule OR-ASC, line A5 8.
9. Income after additions. Add lines 7 and 8 9. 104,486.00

Subtractions

10. 2022 federal tax liability (**see instructions**) 10. 7,250.00
11. Social Security amount on federal Form 1040 or 1040-SR, line 6b 11.
12. Oregon income tax refund included in federal income 12.
13. Total subtractions from Schedule OR-ASC, line B7 13.
14. Total subtractions. Add lines 10 through 13 14. 7,250.00
15. Income after subtractions. Line 9 minus line 14 15. 97,236.00

Deductions

16. **Oregon itemized deductions.** Enter your Oregon itemized deductions from Schedule OR-A, line 23. If you are not itemizing your deductions, enter 0 16. 0.00
17. **Standard deduction.** Enter your standard deduction 17. 2,420.00

You were:

17a. ☐

65 or older

17b. ☐

Blind

Your spouse was:

17c. ☐

65 or older

17d. ☐

Blind

Standard deductions

| Single | Married filing jointly | Married filing separately | Qualifying surviving spouse | Head of Household |
|---------|------------------------|---------------------------|-----------------------------|-------------------|
| \$2,420 | \$4,840 | \$2,420 or \$0 | \$4,840 | \$3,895 |

See instructions if you are age 65 or older, blind, or if someone can claim you as a dependent.

See instructions if you are married filing separately.



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Last name

SSN

VASQUEZ

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Note: Reprint page 1 if you make changes to this page.**Deductions** (continued)

18. Enter the larger of line 16 or 17. 18. 2,420.00
19. Oregon taxable income. Line 15 minus line 18. If line 18 is more than line 15, enter 0. 19. 94,816.00

Oregon tax

20. **Tax** (see instructions) 20. 8,032.00
- Check the appropriate box if you're using an alternative method to calculate your tax:

20a. ☐ Schedule OR-FIA-40 20b. ☐ Worksheet FCG 20c. ☐ Schedule OR-PTE-FY

21. Interest on certain installment sales 21.
22. Total tax before credits. Add lines 20 and 21 22. 8,032.00

Standard and carryforward credits

23. Exemption credit. If the amount on line 7 is \$100,000 or less, multiply your total exemptions on line 6e by \$219. Otherwise, see instructions 23.
24. Political contribution credit. **See limits in instructions.** 24.
25. Total standard credits from Schedule OR-ASC, line C16 25.
26. Total standard credits. Add lines 23 through 25 26.
27. Tax minus standard credits. Line 22 minus line 26. If line 26 is more than line 22, enter 0. 27. 8,032.00
28. Total carryforward credits used this year from Schedule OR-ASC, line D9. Line 28 can't be more than line 27 (see Schedule OR-ASC instructions) 28.
29. Tax after standard and carryforward credits. Line 27 minus line 28 29. 8,032.00
30. Total tax recaptures reported this year from Schedule OR-ASC, line E5 30.



2022 Form OR-40
Oregon Individual Income Tax Return for Full-year Residents

Oregon Department of Revenue

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Last name

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Standard and carryforward credits (continued)

31. Tax including tax recaptures. Line 29 plus line 30 31. 8,032.00

Payments and refundable credits

32. Oregon income tax withheld. **Include a copy of your Forms W-2 and 1099** 32. 8,138.00

33. Amount applied from your prior year's tax refund 33.

34. Estimated tax payments for 2022. **Include all payments you made** before
filing this return (see instructions). Do not include the amount on line 33 34.

35. Tax payments from a pass-through entity 35.

36. Earned income credit (see instructions) 36.

Reserved

38. Total refundable credits from Schedule OR-ASC, line F7 38.

39. Total payments and refundable credits. Add lines 32 through 38 39. 8,138.00

Tax to pay or refund

40. **Overpayment of tax.** If line 31 is **less** than line 39, you overpaid.
Line 39 minus line 31 40. 106.00

41. **Net tax.** If line 31 is **more** than line 39, you have tax to pay.
Line 31 minus line 39 41.

42. Penalty and interest for filing or paying late (see instructions) 42.

43. Interest on underpayment of estimated tax. **Include Form OR-10.** 43.

Exception number from Form OR-10, line 1 43a.

Check box if you annualized:

43b. ☐



Last name

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Tax to pay or refund (continued)

44. Total penalty and interest due. Add lines 42 and 43 44.

45. Net tax including penalty and interest.

Line 41 plus line 44 **This is the amount you owe. 45.**

46. Overpayment less penalty and interest.

Line 40 minus line 44 **This is your refund. 46.**

106.00

47. Estimated tax. Fill in the portion of line 46 you want applied to your open estimated tax account. 47.

48. Charitable checkoff donations from Schedule OR-DONATE, line 3048.

49. Political party \$3 checkoff 49.

Party code: 49a. You

49b. Spouse

50. Oregon 529 college savings plan deposits from Schedule OR-529, line 5 50.

51. Total. Add lines 47 through 50. Line 51 can't be more than your refund on line 46 51.

52. **Net refund.** Line 46 minus line 51 **This is your net refund.** 52.

106.00

Direct deposit

53. For direct deposit of your refund, see instructions. Check the box if the final deposit destination is outside the United States:

11

Type of account:

☐ Checking **or**

Account information:

Routing number

Account number

☐ Savings

Reserved



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Last name

SSN

VASQUEZ

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Note: Reprint page 1 if you make changes to this page.**Sign here.** Under penalty of false swearing, I declare that the information in this return and any attachments is true, correct and complete.

Your signature

X

Date (MM/DD/YYYY)

Spouse signature

X

Date (MM/DD/YYYY)

Signature of preparer other than taxpayer

X

Date (MM/DD/YYYY)

Preparer phone

Preparer license number

Preparer first name

Initial

Preparer last name

Preparer address

City

State

ZIP code

Signing this return does not grant your preparer the right to represent you or make decisions on your behalf. For more information, see the instructions for the Tax Information Authorization and Power of Attorney for Representation form on our website.

Important: Include a copy of your federal Form 1040, 1040-SR, 1040-X, or 1040-NR. **We may adjust your return without it.****Pay the amount due** (shown on line 45)

- **Online:** www.oregon.gov/dor.
- **By mail:** Payable to the **Oregon Department of Revenue**. Write "2022 Oregon Form OR-40" and the last four digits of your SSN or ITIN on your check or money order. If you include a payment with your return, **don't** include Form OR-40-V payment voucher.

Mail your return

- **Non-2-D barcode.** If the large 2-D barcode box on the first page of this form is blank:
 - Mail **tax-due** returns to: Oregon Department of Revenue, PO Box 14555, Salem OR 97309-0940.
 - Mail **refund and no-tax-due** returns to: Oregon Department of Revenue, PO Box 14700, Salem OR 97309-0930.
- **2-D barcode.** If the large 2-D barcode box on the first page of this form is filled in:
 - Mail **tax-due** returns to: Oregon Department of Revenue, PO Box 14720, Salem OR 97309-0463.
 - Mail **refund and no-tax-due** returns to: Oregon Department of Revenue, PO Box 14710, Salem OR 97309-0460.



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Last name

SSN

VASQUEZ

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Amended statement. Complete this section only if you're amending your 2022 return or filing with a new SSN.

If filing an amended return, use this space to explain what you're changing. Include the return line numbers and the reason for each change. If your filing status has changed, explain why. Include all supporting forms and schedules when you file your amended return, even if you haven't changed anything on them.

If filing with a new SSN, enter your former identification number.



2022 OREGON FEDERAL TAX LIABILITY SUBTRACTION WORKSHEET

VASQUEZ
606-05-4563

- | | | |
|--|-----|-----------------------------|
| 1. Enter your federal tax liability | 1. | <u>15,802</u> |
| 2. Enter your federal excess advance premium credit | 2. | <u> </u> |
| 3. Line 1 minus line 2. (if less than -0- enter -0-). | 3. | <u>15,802</u> |
| 4. Enter the total of any other taxes, plus any additions to tax that include only income tax, such as tax credit recaptures, from Form 1040, Schedule 2, lines 8, 16, and 17. Include any tax on non-effectively connected income from Form 1040-NR, line 23a. | 4. | <u> </u> |
| 5. Add lines 3 and 4 | 5. | <u>15,802</u> |
| 6. Enter your federal American opportunity credit | 6. | <u> </u> |
| 7. Enter your total premium tax credit from Form 8962, line 24. | 7. | <u> </u> |
| 8. Line 6 plus line 7 | 8. | <u> </u> |
| 9. Line 5 minus line 8. (If less than \$0, enter \$0). | 9. | <u>15,802</u> |
| 10. Maximum subtraction amount from Table 6. | 10. | <u>7,250</u> |
| 11. Enter the smaller of line 9 or line 10 here and on Form 40; or Form 40N or 40P. | 11. | <u>7,250</u> |

Amended Statement
