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		ingle Married filing jointly	Marrie	ed filing	separa	ately (MF	FS)	Head of	hous	ehold (HOH			fying surv se (QSS)	iving
one box.		u checked the MFS box, enter the na		our spo	use. If	f you che	ecked	d the HOH o	r QSS	S box, ente	the ch	nild's	name if th	e qualifying
		on is a child but not your dependent												
Your first name and middle initial Last name							You	Your social security number						
If joint return, spouse's first name and middle initial Last name					name						Spo	Spouse's social security number		
Home address (	numbe	and street). If you have a P.O. box, see	instructio	ons.						Apt. no.		Presidential Election Campaign		
City, town, or post office. If you have a foreign address, also complete spaces below.  State  ZIP code							code	Check here if you, or your spouse if filing jointly, want to go to this fund. Checking			tly, want \$3			
Foreign country name				Foreign province/state/county				Fore	box box		x belo	w will not or refund.		
				, ,									You	Spouse
Digital Assets		y time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a											☐ Yes	☐ No
Standard		eone can claim:				•		dependent						
Deduction	<u></u>	pouse itemizes on a separate return	n or you	were a	dual-s	status al	ien							
	-	Were born before January 2, 19	958	Are b	lind	Spou	ise:			fore Januar	•		☐ Is bli	
Dependents				(2)		security		(3) Relations	hip				alifies for (see instructions):	
If more than four	(1) Fi	(1) First name Last name			number			to you		Child tax credit			Credit for oth	er dependents
dependents,											]			
see instructions and check														
here														
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instruc	ctions)	)						1a		
	b	Household employee wages not re	•			-2						1b		
Attach Form(s) W-2 here. Also	c Tip income not reported on line 1a (see instructions)								•	1c				
attach Forms		d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								•	1d			
W-2G and 1099-R if tax	e Taxable dependent care benefits from Form 2441, line 26								•	1e				
was withheld.		f Employer-provided adoption benefits from Form 8839, line 29								•	1f			
If you did not get a Form	g	Wages from Form 8919, line 6.							•		•	1g 1h		
W-2, see	h i	Other earned income (see instructi Nontaxable combat pay election (s						1	. i		•	ın		
instructions.	ı Z	Add lines 1a through 1h	ee iiisii	uctions,			•	· · <u> </u>	•			1z		
Attach Sch. B	2a	1	 2a			   h	· Tay	 kable interes	· et		•	2b		
if required.	3a	· —	3a					dinary divide			•	3b		
	4a		la					kable amour				4b		
Standard	5a		5a					cable amour				5b		
Deduction for—	6a	_	3a					cable amour				6b		
Single or Married filing	С													
separately, \$12,950	7	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here [									7			
Married filing 8 Other income from Schedule 1, line 10									8					
jointly or Qualifying	9	<b>9</b> Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>									9			
surviving spouse, \$25,900 <b>10</b> Adjustments to income from Schedule 1, line 26										10				
Head of	11 Subtract line 10 from line 9. This is your adjusted gross income													
household, \$19,400														
If you checked	13	Qualified business income deducti	on from	Form 8	995 o	r Form 8	3995-	-A				13		
Otal raar a	14	<b>14</b> Add lines 12 and 13									14			
Deduction, see instructions.	15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									15				

Form 1040 (2022)	()						_		Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16		
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18		
	19	Child tax credit or credit for	other dependent	ts from Schedi	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22		
	23 Other taxes, including self-employment tax, from Schedule 2, line 21									
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24		
Payments	25	Federal income tax withheld								
•	а	Form(s) W-2				25a				
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d		
If you have a	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			26		
qualifying child,	27	Earned income credit (EIC)	'			27				
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28	omplete belough and to the condition of which protecting (see institute of the IRS).			
	29	American opportunity credit	from Form 8863	, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	yments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. T	33							
Refund	34									
	35a	Amount of line 34 you want	35a							
Direct deposit?	b	Routing number								
See instructions.	d	Account number								
	36	Amount of line 34 you want a	applied to your	2023 estimate	d tax	36				
Amount	37	Subtract line 33 from line 24								
You Owe		For details on how to pay, g	37							
	38	Estimated tax penalty (see in				38				
Third Party Designee		you want to allow another tructions	helow	No						
Designee		signee's		Phone			•			
	nar			no.			ber (PIN)			
Sign		der penalties of perjury, I declare t								
Here		ief, they are true, correct, and com	piete. Declaration o		. , ,	ased on all informati			, ,	
	You	ur signature		Date Your occupation				If the IRS sent you an Identity Protection PIN, enter it here		
Joint return?										
See instructions.	Spe	ouse's signature. If a joint return, t	Date	tion	If the IRS sent your spouse a					
Keep a copy for your records.						1		entity Protection PIN, enter it here		
,				For all and done		(300	11131.)			
		one no.	Preparer's signat	Email address		Date	PTINI		Check if:	
Paid	116	paror o namo	SignByMichael	ui o		Duic	' ' ' ' '		Self-employed	
Preparer		m's name					Dha	no no		
Use Only		n's address								
Go to want ire as	gov/Form1040 for instructions and the latest information.								Form <b>1040</b> (2022)	