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§1040		rtment of the Treasury-Internal Revenue Serv		<b>22</b>					
ž I UTU	U.	S. Individual Income Tax	x Return	ععو	OMB No. 1545-00	74 IRS Use Only	-Do not write or	r staple in this space.	
Filing Status		Single Married filing jointly	Married filing separa	tely (MFS)	☐ Head of hou	sehold (HOH)	Qualifyin	na survivina	
Check only				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,	spouse (	QSS)	
one box.		u checked the MES have enter the a	ama of vour anouga M	uou obool	IT CTUDE	C how onter th	o obilde pon	the qualifying	
	_		ire an INDEPE	NDEN	II STUDEN	II, your r	iame		
Your first name	and mi	ddle initial	mus	t anne	ear here			urity number	
			11103	Сирр	Jar Here				
If joint return, sp	ouse's	first name and middle initial	Last name				Spouse's so	cial security number	
Home address	Home address (number and street). If you have a P.O. box, see instructions.  Apt. no.  Presidential Election Campaign								
-				-				if you, or your ng jointly, want \$3	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete spaces below.	Sta	ite ZI	P code	to go to this	fund. Checking a	
	box below will not change								
Foreign country	name		Foreign province	/state/coun	ty Fo	reign postal code	your tax or r		
								You Spouse	
Digital		y time during 2022, did you: (a) rec						W	
Assets		ange, gift, or otherwise dispose of				et)? (Sée instru	ictions.)	Yes No	
Standard		eone can claim: You as a de			a dependent				
Deduction		Spouse itemizes on a separate retur	n or you were a dual-s	tatus alier					
Age/Blindness	You:	Were born before	are a DEDE	NDEN	T CTUDEN	T			
Dependents	(see	instructions):	u are a DEPE				ame mu	ust appear	
If more	(1) Fi	rst name Last r		on c	ne of the	se lines			
than four									
dependents, see instructions		NOT	E: If you're De <sub>l</sub>	nende	nt and file s	enarately	from v	our	
and check									
here		<u>paren</u>	t(s), provide y	ourou	ın tax doc A	(ND your	parent's	s tax doc	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see instructions)				. 1a		
	ь	Household employee wages not re		2			. 1b		
Attach Form(s) W-2 here, Also	C	Tip income not reported on line 1a					. 1c		
attach Forms	d	Medicaid waiver payments not rep			uctions)		. 1d		
W-2G and 1099-R if tax	e	Taxable dependent care benefits					. 1e		
was withheld.	f	Employer-provided adoption bene	fits from Form 8839, li	ne 29 .			. 1f		
If you did not	g	Wages from Form 8919, line 6 .					. 1g		
get a Form W-2, see	h	Other earned income (see instruct			1 1 1 1 1		. 1h		
instructions.	i	Nontaxable combat pay election (	see instructions)		<u>1i</u>				
$\overline{}$	Z	Add lines 1a through 1h		100			. 1z		
Attach Sch. B	2a		2a	_	axable interest		. 2b		
if required.	3a		3a	_	Ordinary dividends		. 3b		
	4a		4a	_	axable amount .		. 4b		
Standard Deduction for—	5a	-	5a	_	axable amount .		. 5b		
Single or	6a	_	6a	_	axable amount .		. 6b		
Married filing separately,	c	If you elect to use the lump-sum e							
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							
Married filing jointly or	8	Other income from Schedule 1, lin		tal lanears			. 8		
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		tal incom					
\$25,900		Adjustments to income from Sche		income.			. 10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is					11 12		
\$19,400 • If you checked	12	Standard deduction or itemized			Adjusted G	ross	12		
any box under	13 14	Qualified business income deduct Add lines 12 and 13	ion from Form 8995 or	10	•		. 13		
Standard Deduction,	15	Subtract line 14 from line 11. If ze	ro or less enter O. Th		ncome (AC	15 (10	. 15		
see instructions.	10	Subtract line 14 from line 11. If Zei	o or less, enter -U In	15 13	on line 1	.1	. 15		
For Disclosure	Privace	Act, and Paperwork Reduction Act N	lotice, see separate lost	nuctions		at. No. 11320B		Form 1040 (2022)	
. or bisciosure,		rese, and rapermore neduction Act I	rouse, see separate inst	westernia.	· ·	- 140. 1 1 JCUD		· unit 1040 (cucz)	

Preparer Use Only Firm's name Phone no.	Form 1040 (2022	)									Page 2
18 Add lines 16 and 17 19 Child tax credit or orderit for other dependents from Schedule 8812 19 Child tax credit or orderit for other dependents from Schedule 8812 19 Child tax credit or orderit for other dependents from Schedule 8812 10 Amount from Schedule 3, line 8 21 Add lines 19 and 20 22 Subtract line 21 from line 18, lif zero or loss, enter -0 22 Subtract line 23 This is your total tax 24 Add lines 22 and 23. This is your total tax 25 Federal income tax withheld from: 26 Federal income tax withheld from: 27 Earne(s) 1099 28 College from(s) 1099 29 College from(s) 1099 20 College from(s) 1099 20 College from(s) 1099 20 College from Schedule 8812 21 Earned income credit (EIC) 22 Earned income credit (EIC) 23 Add lines 25a through 25c 24 Add lines 25a through 25c 25d 27 Earned income credit (EIC) 28 Additional child tax credit from Schedule 8812 29 American opportunity credit from Form 8863, line 8 29 American opportunity credit from Form 8863, line 8 29 American opportunity credit from Form 8863, line 8 29 Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 31 Amount from Schedule 3, line 15 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 35a Bround of line 34 you want refunded to you. If Form 8888 is attached, check here 37 Subtract line 33 from line 24. This is the amount you owe. 38 Ferinance of the start in the start	Tax and	16	Tax (see	instructions). Check	if any from Form	(s): 1 🔲 881	4 <b>2</b> 4972	3 🔲		16	
19   Child tax credit or credit for other dependents from Schedule 8812   19   20   Amount from Schedule 3, line 8   20   21   21   22   22   23   24   24   24   25   25   22   24   24	Credits	17	Amount f	from Schedule 2, line	e3					17	
Amount from Schedule 3, line 8  21 Add lines 19 and 20  22 Subtract line 21 from line 18. If zero or less, enter -0- 23 Other taxes, including self-employment tax, from Schedule 2, line 21 24 Add lines 22 and 23. This is your total tax  25 Federal income tax withheld from: 26 Form(s) W-2 27 Earned income tax withheld from: 28 Form(s) W-2 29 Line 21 Line 25 Line 21 Line 22 Line 21 Line 21 Line 22 Line 21 Line 21 Line 22 Line 22 Line 21 Line 22 Line 21 Line 22 Line 22 Line 22 Line 21 Line 22		18	Add lines	16 and 17						18	
Add lines 19 and 20		19	Child tax	credit or credit for o	other dependent	s from Sched	ule 8812			19	
Add lines 19 and 20		20								20	
22 Subtract line 21 from line 18. If zero or less, enter -0.											
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 24 24 24 24 24 25 25 24 24 24 25 25 25 24 24 24 25 25 25 25 25 25 25 25 25 25 25 25 25					If zero or less	enter -0-					
Payments 25 Federal income tax withheld from: a Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c d Add lines 25a through 25c 25c d Add lines 25c 25c d Ad							2 line 21				
Payments 25 Federal income tax withheld from: a Form(s) W-2 b Form(s) 1099 c Other forms (see instructions) d Add lines 25s through 25c				,							
a Form(s) W-2 b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c 25c 25d	Doumente									24	
b Form(s) 1099 c C Other forms (see instructions) 25c	Payments				Irom.			os-			
c Other forms (see instructions) d Add lines 25s through 25c 26 022 estimated tax payments and amount applied from 2021 returm 27 Earned income credit (EIC) 28 Additional child tax credit from Schedule 8812 29 American opportunity credit from Form 8863, line 8 29 American opportunity credit from Form 8863, line 8 29 American opportunity credit from Form 8863, line 8 30 Reserved for future use 30 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 32 Add lines 27, 28, 29, and 31. These are your total payments 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here \$\begin{array}{ c c c c c c c c c c c c c c c c c c c										1	
d Add lines 25a through 25c		_	4-1							1	
# you have a qualifying child, 27 attach Sch. EIC. 28 Additional child tax credit (EIC)					•			25C			
# Journal of the Party Designee    Sign Here		_									
attach Sch. BIC.  28 Additional child tax credit from Schedule 8812							21 retum			26	
Additional child tax credit from Schedule 8812  29 American opportunity credit from Form 8863, line 8	qualifying child, attach Sch. EIC. f	_		,							
Reserved for future use   30   31   Amount from Schedule 3, line 15   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   31   31   32   33   Add lines 25d, 26, and 32. These are your total payments   33   31   31   32   33   Add lines 25d, 26, and 32. These are your total payments   33   31   31   32   33   Add lines 25d, 26, and 32. These are your total payments   33   31   31   32   32   33   Add lines 25d, 26, and 32. These are your total payments   33   31   32   33   33   33   34   34   34   34											
Amount of line 34 you want refunded to you. If Form 8888 is attached, check here		29	American	opportunity credit	from Form 8863	, line 8		29			
Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 32  Add lines 25d, 26, and 32. These are your total payments 33  Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34  Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 58  Bouting number 64 Account number 65  Bouting number 65  C Type: 65  C Type: 75  C Type: 7		30	Reserved	for future use				30			
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Refund  34		32	Add lines	27, 28, 29, and 31.	These are your	total other pa	syments and refu	ndable credits		32	
Sign   Here   Sign   Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge here instructions.   Sign   Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge here instructions.   Spouse's signature. If a joint return, both must sign.   Date   Preparer's name   Preparer's signature   Preparer   Prim's name   Preparer's signature   Phone no.   Prince   Princ		33	Add lines	25d, 26, and 32. Th	hese are your <b>to</b>	tal payments				33	
35a	Refund	34	If line 33	is more than line 24	, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	
See instructions.  d Account number 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	Herana	35a	Amount of	of line 34 you want r	efunded to you	ı. If Form 8888	is attached, chec	khere	. 🔲	35a	
Amount of line 34 you want applied to your 2023 estimated tax		b	Routing n	number			c Type:	Checking	Savings		
Amount You Owe  37	See instructions.	d	Account r	number							
For details on how to pay, go to www.irs.gov/Payments or see instructions		36	Amount o	of line 34 you want a	pplied to your	2023 estimate	ed tax	36			
For details on how to pay, go to www.irs.gov/Payments or see instructions	Amount	37	Subtract	line 33 from line 24.	This is the amo	ount you owe.					
Third Party Designee    Do you want to allow another person to discuss this return with the IRS? See instructions		•								37	
Third Party Designee  Do you want to allow another person to discuss this return with the IRS? See instructions		38			_			38			
Designee's name    Designee's name   Phone no.   Phone no.   Personal identification number (PIN)	Third Party	Do				cuss this retur	n with the IRS?				
Designee's name    Designee's name   Personal identification   Persona									mplete b	elow.	No
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct has any knowledge belief,		Des	signee's			Phone		Perso	nal identif	ication	
Here  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.  Spouse's signature. If a joint return, both must sign.  Phone no.  Preparer's name  Preparer's signature  Date  Your occupation  If the IRS sent you an Identity Protection PIN, enter it here (see inst.)  If the IRS sent your spouse an Identity Protection PIN, enter it (see inst.)  Phone no.  Preparer's signature  Date  PTIN  Check if:  Self-employee  Firm's name  Phone no.		nar	me			no.		numb	er (PIN)		
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Joint return? See instructions. Keep a copy for your records.  Phone no.  Preparer's name  Preparer  Use Only  Joint return, both must sign.  Date  Spouse's occupation  Date  Spouse's occupation  If the IRS sent your spouse an Identity Protection PIN, enter it (see inst.)  If the IRS sent your spouse an Identity Protection PIN, enter it (see inst.)  Date  Preparer's signature  Date  PTIN  Check if:  Self-employee  Firm's name  Phone no.		You	our signature		Date Your occupation						
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Identity Protection PIN, enter it (see inst.)   Identity PIN, enter		Sp	ouse's signs	ature. If a joint return, b	oth must sign.	Date	Spouse's occupation	on	If the	IRS ser	nt your spouse an
Phone no.  Preparer's name  Preparer's signature  Date  PTIN  Check if:  Self-employe  Firm's name  Phone no.		Op	ouse s signs	aure. Ir a joint rotarri, a	our most sign.	Date	ороши и оссирии				
Paid Preparer's name Preparer's signature  Date PTIN Check if:  □ Self-employe Firm's name  Phone no.	your records.							(se		inst.)	
Paid Preparer Use Only Firm's name Phone no.		Pho	one no.			Email address					
Preparer Use Only Firm's name Phone no.	Doid	Pre	parer's nam	ne	Preparer's signat	ure		Date	PTIN		Check if:
Use Only Phone no.											Self-employed
Use Only ————	· · · · ·	Fire	Firm's name Phon						e no.		
Firm's address Firm's EIN	Use Only								_		
	Go to warm in a				et information						Form 1040 (2022)