

Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying surviving spouse (QSS)

Check only one box. 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 qualifying person is a child but not your dependent:

Your first name and middle initial	Last name	Your social security number
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.		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.		
State	ZIP code	
Foreign country name	Foreign province/state/county	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):

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

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

Standard Deduction for —

- Single or Married filing separately, \$12,950
- Married filing jointly or Qualifying surviving spouse, \$25,900
- Head of household, \$19,400
- If you checked any box under *Standard Deduction*, see instructions.

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
	17 Amount from Schedule 2, line 3		17
	18 Add lines 16 and 17		18
	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
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	

Payments	25 Federal income tax withheld from:		
	a Form(s) W-2	25a	
	b Form(s) 1099	25b	
	c Other forms (see instructions)	25c	
	d Add lines 25a through 25c		25d
	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	

If you have a qualifying child, attach Sch. EIC.

Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .	34
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a
	b Routing number: _____ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	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.	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 **Yes**. Complete below. **No**

Designee's name	Phone no.	Personal identification number (PIN)
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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.	Email address		

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