

SCROLL DOWN TO NEXT PAGE TO VIEW YOUR TAX RETURN

2022 Tax Return Information

Please read this page carefully! Then print and save this page with your tax return and other important documents.

Prepared for: TINA M SIMPSON using ezTaxReturn.com's Online Tax Program

Confirmation of IRS Acceptance

Go to <u>www.ezTaxReturn.com</u> and login to your account to check the status of your tax return. Your myAccount page will contain a confirmation number called a Submission ID.

Enter your Submission ID here: _____ Your Submission ID serves as proof that your tax return was successfully e-filed.

Where is my Refund?

Log in to your account to obtain the real-time status of your tax refund

Questions About Your Tax Return

If you have any questions about your return, visit <u>www.ezTaxReturn.com</u> and click the Contact Us link on the homepage. Follow the directions to submit a question or request a phone call.

www.ezTaxReturn.com

2022 Federal Filing Instructions

| Taxpayer Name: | Tina M Simpson | Taxpayer SSN: | 563-85-3890 |
|------------------|-------------------------------|-----------------|----------------------|
| Username: | tinasimp70 | Password: | |
| Customer email: | dirtridertinasimp70@gmail.com | | |
| Mailing Address: | 36614 116 St E | City/State/Zip: | Littlerock, CA 93543 |

PRINT AND SAVE THIS TAX RETURN WITH YOUR IMPORTANT DOCUMENTS! YOUR TAX RETURN WILL BE AVAILABLE FOR UNLIMITED DOWNLOADS THROUGH MAY 18, 2023. AFTER THAT, THERE WILL BE A CHARGE OF \$9.95 TO ACCESS YOUR RETURN.

INSTRUCTIONS

INCLUDED IN THIS PACKAGE IS YOUR COMPLETED FEDERAL TAX RETURN AND ALL SUPPORTING FORMS AND SCHEDULES REQUIRED FOR FILING.

REFUND INSTRUCTIONS

TOTAL TAX: \$0

PAYMENTS: \$650

REFUND AMOUNT: \$650

YOUR REFUND WILL BE TRANSFERRED BY DIRECT DEPOSIT INTO THE FOLLOWING BANK ACCOUNT:

ROUTING NUMBER: 041215663 ACCOUNT NUMBER: 1296604332398

ALLOW 2 TO 4 WEEKS FOR THE DIRECT DEPOSIT TO OCCUR.

NOTE CAREFULLY: AS OF 01/30/2023 00:58 THIS RETURN HAS NOT YET BEEN E-FILED. FOR THE INFORMATION ABOVE TO BE VALID, YOU MUST E-FILE YOUR RETURN.

| E 1040 | | artment of the Treasury—Internal Revo | | | 2 | 022 | OMB No. 1545 | -0074 | IRS Use O | nly—Do n | iot writ | e or staple in this space. | |
|--|---|---|--------------|-------------------------------|---------------------------------|-------------|------------------|--------|--|-----------------------------|-------------|---|--|
| Filing Status Check only one box. | lf yo | Single D Married filing joir u checked the MFS box, ent on is a child but not your de | er the nan | Married fili | | | | | hold (HOH) box, enter | s | pous | ying surviving se (QSS) name if the qualifying | |
| Your first name | and mi | and middle initial Last name | | | | | | | You | Your social security number | | | |
| TINA | | | M S | IMPSON | ١ | | | | | 56 | 563 85 3890 | | |
| lf joint return, sp | If joint return, spouse's first name and middle initial Last name S | | | | | | | Spor | Spouse's social security number | | | | |
| | | | | | | | | Che | Presidential Election Campaign Check here if you, or your | | | | |
| City, town, or post office. If you have a foreign address, also co | | | | mplete spaces below. State CA | | | | | 02542 to | | | filing jointly, want \$3 his fund. Checking a w will not change | |
| Foreign country | oreign country name | | | | Foreign province/state/county F | | | | | | | or refund. | |
| Digital Assets | | ny time during 2022, did you ange, gift, or otherwise disp | • • | • | | | • • • | - | | | | Yes X No | |
| Standard | | eone can claim: You | | - | _ | | is a dependent | | (1.10 | | , | | |
| Deduction | | Spouse itemizes on a separa | • | | | • | • | | | | | | |
| Age/Blindness | You: | Were born before Janu | ary 2, 195 | 58 🗌 Ar | e blind | Spous | se: 🗌 Was bor | n befo | ore Januar | y 2, 195 | 58 | Is blind | |
| Dependents | (see | instructions): | | | (2) Social | | (3) Relationsh | ip (4 | Check the | e box if q | ualifie | es for (see instructions): | |
| If more | (1) F | rst name Last name | | | num | lber | to you | | Child tax | c credit | С | redit for other dependents | |
| than four dependents, | | | | | | | | | | <u> </u> | | | |
| see instructions | | | | | | | | | | | | | |
| and check here | - | | | | | | | | |] | - | <u> </u> | |
| | 1a | Total amount from Form(s) | W/2 box | | tructions | <u> </u> | | | |] | 1a | 6,396 | |
| Income | b | Household employee wage | | | | | | | | ÷ | 1b | 0,000 | |
| Attach Form(s) | c | | | | | | | | | . | 1c | | |
| W-2 here. Also attach Forms | d | | | | | | | | | . [| 1d | | |
| W-2G and | е | | | | | | | | | | | | |
| 1099-R if tax was withheld. | f | Employer-provided adoption benefits from Form 8839, line 29 | | | | | | | | 1f | | | |
| If you did not | g | Wages from Form 8919, lir | ne6 | | | | | | | | 1g | | |
| get a Form | h | | | | | | | | | 1h | | | |
| W-2, see instructions. | i | | | | | | | | | | | | |
| | z | Add lines 1a through 1h | | <u>.</u> | | | | | | | 1z | 6,396 | |
| Attach Sch. B | 2a | Tax-exempt interest | . 2 a | 1 | | b | Taxable interest | t. | | | 2b | | |
| if required. | 3a | Qualified dividends | . 3 a | 1 | | b | Ordinary divider | nds . | | | 3b | | |
| | 4a | IRA distributions | . 4a | 1 | | b | Taxable amount | t | | | 4b | | |
| Standard | 5a | Pensions and annuities . | | 1 | | | Taxable amount | | | • | 5b | | |
| • Single or | 6a | Social security benefits . | | | | | Taxable amount | t | | · | 6b | | |
| Married filing | С | If you elect to use the lump | | | - | | , | | | | | | |
| separately, \$12,950 | 7 | Capital gain or (loss). Attac | | • | uired. If r | not require | ed, check here | | | | 7 | | |
| Married filing jointly or | 8 | Other income from Schedule 1, line 10 | | | | | | | • | 8 | | | |
| Qualifying | 9 | Add lines 1z, 2b, 3b, 4b, 5 | | | | otal incor | ne | | | | 9 | 6,396 | |
| surviving spouse, \$25,900 | 10 | 10 Adjustments to income from Schedule 1, line 26 | | | | | | · | 10 | | | | |
| Head of household, | 11 | Subtract line 10 from line 9. This is your adjusted gross income | | | | | | | 11 | 6,396 | | | |
| \$19,400 r | 12 | Standard deduction or ite | | | | | | | | • | 12 | 12,950 | |
| If you checked any box under | 13 | Qualified business income | deduction | n from For | n 8995 d | or Form 89 | 995-A | • • | | • | 13 | 40.050 | |
| Standard | 14 Add lines 12 and 13 | | | | | | | 14 | 12,950 | | | | |
| Deduction, see instructions. | 15 | Subtract line 14 from line 1 | 1. If zero | or less, en | ter -0 T | his is you | r taxable incom | ie . | | · | 15 | | |
| For Disclosure. | Privac | Act, and Paperwork Reduction | on Act Not | ice, see ser | parate ins | structions. | | Cat. I | No. 11320B | | | Form 1040 (2022) | |

| Form 1040 (2022 |) | | | | | | | | | | Page 2 |
|---|---|---|--------------------------|---------------------|------------|----------|---------|-----------|-------------------------------|---|---------------------|
| Tax and | 16 | Tax (see instructions). Check | if any from Form | (s): 1 🗌 881 | 4 2 | 4972 | 3 | | | 16 | |
| Credits | 17 | | | | | | | | 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, lir | 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 | | | | | | | | | 23 | |
| | 24 | Add lines 22 and 23. This is | your total tax | | | | | | | 24 | |
| Payments | 25 | Federal income tax withheld | | | | | | | | | |
| | а | Form(s) W-2 | | | | | 25a | | 16 | 52 | |
| | b | Form(s) 1099 | | | | | 25b | | | | |
| | с | Other forms (see instruction | s) | | | | 25c | | | | |
| | d | Add lines 25a through 25c | | | | | | | | 25d | 162 |
| | 26 | 2022 estimated tax payment | ts and amount a | pplied from 20 | 21 return | | | | | 26 | |
| If you have a ^L qualifying child, | 27 | Earned income credit (EIC) | | | | | 27 | | 48 | 38 | |
| attach Sch. EIC. | 28 | Additional child tax credit from | | | | | 28 | | | | |
| | 29 | American opportunity credit | | | | | 29 | | | | |
| | 30 | Reserved for future use . | | | | | 30 | | | | |
| | 31 | Amount from Schedule 3, lir | | | | | 31 | | | | |
| | 32 | Add lines 27, 28, 29, and 31 | | | | | undabl | e credits | | 32 | 488 |
| | 33 | Add lines 25d, 26, and 32. T | hese are your to | tal payments | | | | | | 33 | 650 |
| Refund | 34 | If line 33 is more than line 24 | | | | | | | | 34 | 650 |
| neiuliu | 35a | Amount of line 34 you want | refunded to you | I. If Form 8888 | is attach | ed, che | ck here | | 🗆 | 35a | 650 |
| Direct deposit? | b | Routing number 0 4 1 2 1 5 6 6 3 c Type: X Checking Savings | | | | | | | | 5 | |
| See instructions. | d | Account number 1 2 9 6 6 0 4 3 3 2 3 9 8 | | | | | | | | | |
| | 36 | Amount of line 34 you want a | applied to your | 2023 estimate | d tax . | | 36 | | | | |
| Amount | 37 | Subtract line 33 from line 24 | . This is the amo | ount you owe. | | | | | | | |
| You Owe | | For details on how to pay, g | o to <i>www.ir</i> s.gov | //Payments or | see instru | ictions | | | | 37 | |
| | 38 | Estimated tax penalty (see in | nstructions) . | | | | 38 | | | | |
| Third Party | Do | you want to allow another | person to disc | cuss this retur | n with th | ne IRS? | ? See | | | | |
| Designee | ins | tructions | | | | · · | | Yes. | Complete | e below. | X No |
| | De: nar | signee's | | Phone no. | | | | | rsonal ider nber (PIN) | | |
| 0. | | | hat I have averaine | | Lagarmar | uina ook | | | | | |
| Sign | | der penalties of perjury, I declare t ief, they are true, correct, and com | | | | | | | | | |
| Here | Yo | ur signature | | Date | Your occu | upation | | | lft | he IRS se | ent you an Identity |
| | | 5 | | | | | | Pr | Protection PIN, enter it here | | |
| Joint return? | | | HOUSE KEEPING | | | | | | e inst.) | | |
| See instructions. Keep a copy for | Sp | ouse's signature. If a joint return, I | Date | Spouse's | occupat | tion | | | | ent your spouse an tection PIN, enter it here | |
| your records. | | | | | | | | | e inst.) | | |
| | Pho | one no. (661) 202 - 0253 | | Email address | | DERT | TINAS | IMP70 | @GMA | | Λ |
| | | eparer's name | Preparer's signat | | 2 | | Date | | PTIN | | Check if: |
| Paid | | | | | | | | | | | Self-employed |
| Preparer | Firr | n's name | I | | | | | | Pr | one no. | |
| Use Only | | n's address | | | | | | | | m's EIN | |
| | Go to www.irs.gov/Form1040 for instructions and the latest information. | | | | | | | | | | |