

# FreeTaxUSA<sup>®</sup>

## 2022 Income Tax Return

### Federal Return

Thank you for using  
FreeTaxUSA.com to prepare your  
2022 income tax return.

You can view the status of your tax return by  
signing in to your account at [www.freetaxusa.com](http://www.freetaxusa.com).

2023 tax preparation on FreeTaxUSA.com will be  
available starting in January of 2024.

We look forward to preparing your 2023 tax return.

**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 <b>MICHAEL A</b>	Last name <b>BISHOP</b>	Your social security number 376 88 8095	
If joint return, spouse's first name and middle initial <b>CELESTE A</b>	Last name <b>BISHOP</b>	Spouse's social security number 383 92 7557	
Home address (number and street). If you have a P.O. box, see instructions. <b>8607 CARLSBAD LANE</b>		Apt. no.	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.
City, town, or post office. If you have a foreign address, also complete spaces below. <b>LANSING</b>		State <b>MI</b>	ZIP code <b>48917</b>
Foreign country name	Foreign province/state/county	Foreign postal code	<input type="checkbox"/> You <input type="checkbox"/> Spouse

**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: <input type="checkbox"/> Were born before January 2, 1958 <input type="checkbox"/> Are blind	Spouse: <input type="checkbox"/> Was born before January 2, 1958 <input type="checkbox"/> Is blind		
<b>Dependents</b> (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 <input type="checkbox"/> Credit for other dependents <input type="checkbox"/>

<b>Income</b>	1a Total amount from Form(s) W-2, box 1 (see instructions) . . . . .	1a <b>181,186.</b>
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	1b Household employee wages not reported on Form(s) W-2 . . . . .	1b
If you did not get a Form W-2, see instructions.	1c Tip income not reported on line 1a (see instructions) . . . . .	1c
	1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) . . . . .	1d
	1e Taxable dependent care benefits from Form 2441, line 26 . . . . .	1e
	1f Employer-provided adoption benefits from Form 8839, line 29 . . . . .	1f
	1g Wages from Form 8919, line 6 . . . . .	1g
	1h Other earned income (see instructions) . . . . .	1h
	1i Nontaxable combat pay election (see instructions) . . . . .	1i
	1z Add lines 1a through 1h . . . . .	1z <b>181,186.</b>
Attach Sch. B if required.	2a Tax-exempt interest . . . <b>2a</b>	b Taxable interest . . .
	3a Qualified dividends . . . <b>3a</b>	b Ordinary dividends . . .
	4a IRA distributions . . . <b>4a</b>	b Taxable amount . . .
	5a Pensions and annuities . . . <b>5a</b>	b Taxable amount . . .
	6a Social security benefits . . . <b>6a</b>	b Taxable amount . . .
Standard Deduction for—	c If you elect to use the lump-sum election method, check here (see instructions) . . . <input type="checkbox"/>	
• Single or Married filing separately, \$12,950	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here . . . <input type="checkbox"/>	7 <b>0.</b>
• Married filing jointly or Qualifying surviving spouse, \$25,900	8 Other income from Schedule 1, line 10 . . . . .	8
• Head of household, \$19,400	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b> . . . . .	9 <b>181,198.</b>
• If you checked any box under Standard Deduction, see instructions.	10 Adjustments to income from Schedule 1, line 26 . . . . .	10 <b>0.</b>
	11 Subtract line 10 from line 9. This is your <b>adjusted gross income</b> . . . . .	11 <b>181,198.</b>
	12 Standard deduction or itemized deductions (from Schedule A) . . . . .	12 <b>50,040.</b>
	13 Qualified business income deduction from Form 8995 or Form 8995-A . . . . .	13
	14 Add lines 12 and 13 . . . . .	14 <b>50,040.</b>
	15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your <b>taxable income</b> . . . . .	15 <b>131,158.</b>

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Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

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Form 1040 (2022)

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Itemized Deductions**

Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. 07

Name(s) shown on Form 1040 or 1040-SR

**MICHAEL A BISHOP & CELESTE A BISHOP**

Your social security number  
**376-88-8095**

**Medical  
and  
Dental  
Expenses**

**Caution:** Do not include expenses reimbursed or paid by others.

1	Medical and dental expenses (see instructions) . . . . .	1	3 , 449 .
2	Enter amount from Form 1040 or 1040-SR, line 11	2	181 , 198 .
3	Multiply line 2 by 7.5% (0.075) . . . . .	3	13 , 590 .
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- . . . . .	4	

**Taxes You  
Paid**

5	State and local taxes.		
a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box . . . . .	5a	7 , 488 .
b	State and local real estate taxes (see instructions) . . . . .	5b	5 , 296 .
c	State and local personal property taxes . . . . .	5c	
d	Add lines 5a through 5c . . . . .	5d	12 , 784 .
e	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) . . . . .	5e	10 , 000 .
6	Other taxes. List type and amount: _____	6	
7	Add lines 5e and 6 . . . . .	7	10 , 000 .

**Interest  
You Paid**

**Caution:** Your mortgage interest deduction may be limited. See instructions.

8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box . . . . .	8a	9 , 487 .
a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited . . . . .	8b	
b	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address . . . . .	8c	
c	Points not reported to you on Form 1098. See instructions for special rules . . . . .	8d	
d	Reserved for future use . . . . .	8e	9 , 487 .
e	Add lines 8a through 8c . . . . .	9	
9	Investment interest. Attach Form 4952 if required. See instructions . . . . .	10	9 , 487 .
10	Add lines 8e and 9 . . . . .		

**Gifts to  
Charity**

**Caution:** If you made a gift and got a benefit for it, see instructions.

11	Gifts by cash or check. If you made any gift of \$250 or more, see instructions . . . . .	11	30 , 553 .
12	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500. . . . .	12	
13	Carryover from prior year . . . . .	13	
14	Add lines 11 through 13 . . . . .	14	30 , 553 .

**Casualty and  
Theft Losses**

15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions . . . . .	15	
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**Other  
Itemized  
Deductions**

16	Other—from list in instructions. List type and amount: _____	16	
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**Total  
Itemized  
Deductions**

17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12 . . . . .	17	50 , 040 .
18	If you elect to itemize deductions even though they are less than your standard deduction, check this box . . . . .		