

For the year Jan. 1-Dec. 31, 2023, or other tax year beginning 2023, ending 2023, See separate instructions.

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. Apt. no. Presidential Election Campaign

City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code 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.

Foreign country name Foreign province/state/county Foreign postal code You Spouse

Filing Status X Single Married filing separately (MFS) Head of household (HOH) Check only one box. Married filing jointly (even if only one had income) Qualifying surviving spouse (QSS) 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.

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, 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, 1959 Are blind Spouse: Was born before January 2, 1959 Is blind

Dependents (see instructions): (1) First name Last name (2) Social security number (3) Relationship to you (4) Check the box if qualifies for (see inst.): Child tax credit Credit for other dependents If more than four dependents, see instructions and check here.

Income 1a Total amount from Form(s) W-2, box 1 (see instructions). 1a 8,775

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. b Household employee wages not reported on Form(s) W-2 1b

c Tip income not reported on line 1a (see instructions) 1c

d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d

e Taxable dependent care benefits from Form 2441, line 26 1e

f Employer-provided adoption benefits from Form 8839, line 29 1f

g Wages from Form 8919, line 6 1g

h Other earned income (see instructions) 1h

i Nontaxable combat pay election (see instructions) ii

z Add lines 1a through 1h 1z 8,775

Attach Sch. B if required. 2a Tax-exempt interest 2a 570 b Taxable interest 2b 5,610

3a Qualified dividends 3a 1,887 b Ordinary dividends 3b 3,536

4a IRA distributions 4a b Taxable amount 4b

5a Pensions and annuities 5a 694 b Taxable amount: ROLLOVER 5b 519

6a Social security benefits 6a b Taxable amount 6b

c If you elect to use the lump-sum election method, check here (see instructions)

7 Capital gain or (loss). Attach Schedule D if required. If not required, check here 7 363

8 Additional income from Schedule 1, line 10 8

9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 18,803

10 Adjustments to income from Schedule 1, line 26 10

11 Subtract line 10 from line 9. This is your adjusted gross income 11 18,803

12 Standard deduction or itemized deductions (from Schedule A) 12 13,850

13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14

14 Add lines 12 and 13 14 13,864

15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income 15 4,939

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form 1040 (2023)

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	269
17 Amount from Schedule 2, line 3				17	
18 Add lines 16 and 17				18	269
19 Child tax credit or credit for other dependents from Schedule 8812				19	
20 Amount from Schedule 3, line 8				20	94
21 Add lines 19 and 20				21	94
22 Subtract line 21 from line 18. If zero or less, enter -0-				22	175
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	175
Payments					
25 Federal income tax withheld from:					
a Form(s) W-2		25a	1,931		
b Form(s) 1099		25b	52		
c Other forms (see instructions)		25c			
d Add lines 25a through 25c		25d	1,983		
26 2023 estimated tax payments and amount applied from 2022 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	1,983		
Refund					
34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid		34	1,808		
35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>		35a	1,808		
Direct deposit? b Routing number c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings					
d Account number					
36 Amount of line 34 you want applied to your 2024 estimated tax		36			
Amount You Owe					
37 Subtract line 36 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**Sign Here**

Joint return?
See instructions.
Keep a copy for
your records.

Paid Preparer Use OnlyGo to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2023)