Ε.	4	n A	1	Department of the Treasury—Internal Revenue Ser	ue Servi	
O		V4	·U	U.S. Individual Income Tax	Ę	

2023 OMB No. 1545-0074 IRS Use Only-Do not write or staple in this space.

For the year	Jan.	1-Dec. 31, 2023, or oth	er tax year beg	inning		, 2023, en	ding		. , 20	See	separate inst	ructions.
Your first nar	ne ar	nd middle initial		Last name	7-0-1 S000 000 000 000 000 000 000 000 000 0				-	Vall	reacial contri	h, number
If joint return	spo	use's first name and mid	ddle initial	Last name		255201100000			···	Spou	ise's social sec	urity number
Home addre	ss (ni	umber and street). If you	u have a P.O b	ox, see instruc	tions.			1	Apt. no.	1	Presidential Ele Check here if	ection Campaign
City, town or	post	office. If you have a for	eign address, a	also complete	spaces below.	State		ZIP code	ئىمىنى 		spouse if fling to go to this fur box below will	
Filing Status Single				Foreign province/state/county						Foreign postal code		
Filing Status Check only one box.		Single  Married filing jointly  Married filing separ  f you checked the MFS	ately (MFS)			checked the	Qua	ad of household	g spouse (QS			20 AS
1 to 1		qualifying person is a ch					······································	, , , enter the	·····		****	
Digital Assets		t any time during 202 xchange, or otherwise								0.00	Yes	X No
Standard		omeone can claim:		as a depende		200	se as a dep	-	udctions.)	********	. 163	25 140
Deduction		Spouse itemizes of	n a separate	return or you	were a dual-	status alier						
Age/Blindness		ou: X Were born	before Janua	ary 2, 1959	Are b	lind Spo	use:	Was born befo	ore January	2, 1959	ls blir	nd
Dependents (see instructions):  If more (1) First name Last name than four					(2) Social security number			elationship to you		the box if o	qualifies for (see instructions):  Credit for other dependents	
dependents,	Ext					59	Naga Carata Mariana			+		
see instr. —— and check	i 1	en e	in the Vita			110	Service and		. 1 000 1		2 1 10 2 2 2	
here	17							1				
Income	1a	Total amount from F	orm(s) W -2,	box 1 (see in	structions)					1a		47,910
Attach Form(s)	b	Household employe								1b		
W-2 here, Also attach Forms	C	Tip income not repo								1c		
W-2G and	d	Medicaid waiver pay								1d		
1099-R if tax was withheld.	е	Taxable dependent								1e	<u> </u>	
If you did not	f	Employer-provided								1f		Y.
get a Form	g	Wages from Form 8								1g		long of the court
W-2, see	h	Other earned incom	e (see instruc	tions)			,	,		1h	erii ka asas	imana da na ma
instructions.	i	Nontaxable combat								1.5		
	z	Add lines 1a through	1 1h							1z		47,910
Attach Sch. B	2a	Tax-exempt interest	2a		804	b Taxable	einterest			2b	a a la	1,356
if required.	3a	Qualified dividends	3a		1,447	<b>b</b> Ordinal	y dividends			3b		2,277
	4a		4a	2	and the second	b Taxable	The second second second			4b		
Standard	5a	Pensions and annuities	5a			b Taxable			e dance	5b		
Single or	6a	Soc. sec. ben.	6a	14.5	31,355	b Taxable	e amount			6b	Maria de la companya	26,140
Married filling	C	If you elect to use th	e lump-sum e	election meth	od, check her	re (see inst	ructions)			100		
separately, \$13,850	7	Capital gain or (loss). Atta	ach Schedule D i	required. If not	required, check I	here			an of the state	7		-331
Married filing     jointly or	8	Other income from 8	Schedule 1, lin	ne 10	alialianiania.		and partic			8		0
Qualifying	9	Add lines 1z, 2b, 3b	4b, 5b, 6b, 7	, and 8. This	is your total	Income				9		77,352
surviving spouse, \$27,700	10	Adjustments to incom								10		0
Head of household,	11	Subtract line 10 from								11		77,352
\$20,800	12	Standard deductio								12		29,200
If you checked     any box under	13	Qualified business in								13		4
Standard Deduction,	14	Add lines 12 and 13								14		29,204
see instructions.	15	Subtract line 14 from line 11								15	ranjigiya Nedi	48,148
											The second second	

Form 1040 (202	3)									Page 2	
Tax and Credits	16	Tax (see instructions). Check	k if any from Form	n(s): 1	8814 2	4972	20				
Ciedits	¥	3	16		<u>5,167</u>						
	17									889	
	18	Add lines to and 17								6,056	
	19	Child tax credit or credit for other dependents from Schedule 8812									
	20	Amount from Schedule 3, line 8								15	
	21	1 Add lines 19 and 20								15	
	22	Subtract line 21 from line 18.	22		6,041						
	23	Other taxes, including self-er	23								
	24	Other taxes, including self-employment tax, from Schedule 2, line 21 Add lines 22 and 23. This is your total tax								6,041	
Payments	25										
	а	Form(s) W-2				25a	4,160				
	b	Form(a) 1000				25b	775				
	C	Other forms (see instructions	3)			25c		1.			
	d	Add lines 25a through 25c		**********				25d		4,160	
If you have a	26	2023 estimated tax payments	s and amount app	lied from	2022 return	*******		26		2,000	
qualifying child,	27	Earned income credit (EIC)				27	******	20	-		
attach Sch. EIC.	28	Additional child tax credit from				28					
	29	American opportunity credit f				29					
	30	Reserved for future use				30					
	31			· · · · · · · · · · · · · · · · · · ·	·	31		140			
	32	Amount from Schedule 3, line 15  Add lines 27, 28, 29 and 31. These are your total other payments and refundable credits									
	33	Add lines 25d, 26, and 32. These						32		6,160	
Refund	34	If line 33 is more than line 24						34		119	
	35a							35a		119	
Direct deposit?	ь										
See instructions,	d	yp									
			muliad to your 0	004		1 1	110				
Amount	36 Amount of line 34 you want applied to your 2024 estimated tax 36 119										
Amount You Ow e	37										
10uOwe	20	For details on how to pay, go to www.irs.gov/Payments or see instructions  Estimated tax penalty (see instructions)  38							- 20	Att and the second	
Third Party	38										
		you want to allow another per									
Designee		structions		minimi			X Yes. Complete	below	/. N	0	
		signee's				Phone		F	Personal identification	f	
<u> </u>		me					The state of the s				
•	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.										
пете		사람들은 얼마나 그 이번에 얼마나 가는 이번에 가지 않는데 얼마나 하셨다면서 얼마나 있다면 하는데 그리고 있다. 그는									
Joint return?	rour sig	jnature	Date Your occupation				If the IRS sent you Protection PIN, en	an Identity ter it here			
See instructions.				CONSTRUCTION				(see instr.)			
Keep a copy for syour records.	Spouse's signature. If a joint return, both must sign.  Date Spouse's occupation								If the IRS sent you Identity Protection	r spouse an PIN, enter it here	
_					OFFICE	MANAGER	<b>\</b>		(see instr.)		
	Phone no. Email address								agentative pa		
Paid											
Paid Preparer Use Only											