

For the year Jan. 1—Dec. 31, 2023, or other tax year beginning _____, ending _____

Your **[REDACTED]**
[REDACTED] initial **[REDACTED]** Last name **[REDACTED]**
[REDACTED] social security number **[REDACTED]**

Home address (number and street). If you have a P.O. box, see instructions.
[REDACTED] Apt. no. _____
[REDACTED], also complete spaces below. State **[REDACTED]** ZIP code **[REDACTED]**

Foreign country name **[REDACTED]** Foreign province/state/county **[REDACTED]** Foreign postal code **[REDACTED]**

See separate 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.
 You Spouse

Filing Status

Check only one box.
 Single Head of household (HOH)
 Married filing jointly (even if only one had income)
 Married filing separately (MFS) 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):		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
If more than four dependents, see instructions and check here . . . <input type="checkbox"/>	(1) First name Last name			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"/>

Income

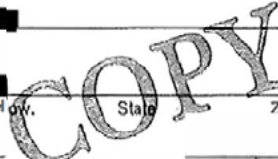
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
 If you did not get a Form W-2, see instructions.

1 a Total amount from Form(s) W-2, box 1 (see instructions)	1a	
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) 1i		
z Add lines 1a through 1h	1z	

2 a Tax-exempt interest 2a		b Taxable interest 2b	
3 a Qualified dividends 3a		b Ordinary dividends 3b	
4 a IRA distributions 4a		b Taxable amount 4b	
5 a Pensions and annuities 5a	1,819.	b Taxable amount 5b	1,615.
6 a Social security benefits 6a	28,249.	b Taxable amount 6b	0.
c If you elect to use the lump-sum election method, check here (see instructions) <input type="checkbox"/>			
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>		7	
8 Additional income from Schedule 1, line 10 8			-3,061.
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9			-1,446.
10 Adjustments to income from Schedule 1, line 26 10			1,310.
11 Subtract line 10 from line 9. This is your adjusted gross income 11			-2,756.
12 Standard deduction or itemized deductions (from Schedule A) 12			30,700.
13 Qualified business income deduction from Form 8995 or Form 8995-A 13			
14 Add lines 12 and 13 14			30,700.
15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income 15			0.

Standard Deduction for —

- Single or Married filing separately, \$13,850
- Married filing jointly or Qualifying surviving spouse, \$27,700
- Head of household, \$20,800
- If you checked any box under Standard Deduction, see instructions.



SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Name(s) shown: [REDACTED]

Your social security number
[REDACTED]

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
	b Date of original divorce or separation agreement (see instructions): _____		
3	Business income or (loss). Attach Schedule C	3	4,538.
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
	a Net operating loss SEE STMT 1	8a	(7,599.)
	b Gambling	8b	
	c Cancellation of debt	8c	
	d Foreign earned income exclusion from Form 2555	8d	()
	e Income from Form 8853	8e	
	f Income from Form 8889	8f	
	g Alaska Permanent Fund dividends	8g	
	h Jury duty pay	8h	
	i Prizes and awards	8i	
	j Activity not engaged in for profit income	8j	
	k Stock options	8k	
	l Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l	
	m Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
	n Section 951(a) inclusion (see instructions)	8n	
	o Section 951A(a) inclusion (see instructions)	8o	
	p Section 461(l) excess business loss adjustment	8p	
	q Taxable distributions from an ABLÉ account (see instructions)	8q	
	r Scholarship and fellowship grants not reported on Form W-2	8r	
	s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	()
	t Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
	u Wages earned while incarcerated	8u	
	z Other income. List type and amount: _____	8z	
9	Total other income. Add lines 8a through 8z	9	-7,599.
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	-3,061.

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	321.
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	989.
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c		
d	Reforestation amortization and expenses	24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount:	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10		26	1,310.

SCHEDULE C
(Form 1040)

Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074

2023

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.
Go to www.irs.gov/ScheduleC for instructions and the latest information.

Attachment
Sequence No. **09**

A Principal business or profession, including product or service (see instructions) EXCAVATING	Social security number (SSN) [REDACTED]
C Business name. If no separate business name, leave blank. ONSITE	B Enter code from instructions 238990
E Business address (including suite or room no.) City, town or post office, state, and ZIP code [REDACTED]	D Employer ID number (EIN) (see instr.) [REDACTED]
F Accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) _____	
G Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
H If you started or acquired this business during 2023, check here. <input type="checkbox"/>	
I Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
J If "Yes," did you or will you file required Form(s) 1099? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked. <input type="checkbox"/>	1	49,845.
2 Returns and allowances.	2	
3 Subtract line 2 from line 1.	3	49,845.
4 Cost of goods sold (from line 42).	4	25,402.
5 Gross profit. Subtract line 4 from line 3.	5	24,443.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions).	6	
7 Gross income. Add lines 5 and 6.	7	24,443.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising.	8		18 Office expense (see instructions)	18	
9 Car and truck expenses (see instructions).	9	10,478.	19 Pension and profit-sharing plans.	19	
10 Commissions and fees.	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions).	11		a Vehicles, machinery, and equipment.	20a	
12 Depletion.	12		b Other business property.	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions).	13	1,026.	21 Repairs and maintenance.	21	
14 Employee benefit programs (other than on line 19).	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health).	15	4,138.	23 Taxes and licenses.	23	477.
16 Interest (see instr.):			24 Travel and meals:		
a Mortgage (paid to banks, etc.).	16a		a Travel.	24a	
b Other.	16b		b Deductible meals (see instructions)	24b	
17 Legal and professional services	17		25 Utilities.	25	1,100.
28 Total expenses before expenses for business use of home. Add lines 8 through 27b.	28	19,905.	26 Wages (less employment credits).	26	
29 Tentative profit or (loss). Subtract line 28 from line 7.	29	4,538.	27a Other expenses (from line 48).	27a	2,686.
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.	30		b Energy efficient commercial buildings deduction (attach Form 7205).	27b	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3 , and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	4,538.			
32 If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3 , and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a <input type="checkbox"/> All investment is at risk.		
			32b <input type="checkbox"/> Some investment is not at risk.		