

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20 _____ See separate instructions.

Your first name and middle initial JENNIFER E	Last name BROWNSON	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.

PO BOX 1053

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

SNOWFLAKE AZ 85937

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

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 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):	(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 Credit for other dependents
If more than four dependents, see instructions and check here <input type="checkbox"/>				<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	Description	Amount
1a	Total amount from Form(s) W-2, box 1 (see instructions)	
b	Household employee wages not reported on Form(s) W-2	
c	Tip income not reported on line 1a (see instructions)	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	
e	Taxable dependent care benefits from Form 2441, line 26	
f	Employer-provided adoption benefits from Form 8839, line 29	
g	Wages from Form 8919, line 6	
h	Other earned income (see instructions)	
i	Nontaxable combat pay election (see instructions)	1i
z	Add lines 1a through 1h	

Income	Description	Amount	Amount
2a	Tax-exempt interest	2a	
2b	Taxable interest		27.
3a	Qualified dividends	3a	
3b	Ordinary dividends		
4a	IRA distributions	4a	
4b	Taxable amount		
5a	Pensions and annuities	5a	
5b	Taxable amount		
6a	Social security benefits	6a	
6b	Taxable amount		
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>		0.
8	Additional income from Schedule 1, line 10		16,000.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income		16,027.
10	Adjustments to income from Schedule 1, line 26		0.
11	Subtract line 10 from line 9. This is your adjusted gross income		16,027.
12	Standard deduction or itemized deductions (from Schedule A)		13,850.
13	Qualified business income deduction from Form 8995 or Form 8995-A		
14	Add lines 12 and 13		13,850.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income		2,177.

Table with columns for line numbers (16-24) and amounts. Includes sections for Tax and Credits, with sub-rows for various tax calculations and a total tax line.

Table for Payments (lines 25-33). Includes sub-sections for federal income tax withheld (25a-25d), 2023 estimated tax payments (26), and various tax credits (27-31). Total payments are shown on line 33.

Table for Refund (lines 34-36). Includes instructions for refunding tax (34), routing number and account number (35a, 35b, 35d), and amount applied to 2024 estimated tax (36).

Table for Amount You Owe (lines 37-38). Shows the amount owed on line 37 and an estimated tax penalty on line 38.

Third Party Designee section. Includes a question about allowing another person to discuss the return with the IRS, with Yes/No options and fields for name, phone number, and PIN.

Sign Here section. Includes a declaration of truthfulness and fields for the preparer's signature, date, occupation, and spouse's information.

Paid Preparer Use Only section. Includes fields for preparer's name, signature (SELF-PREPARED), date, PTIN, and firm information.