

Federal Return

Thank you for using FreeTaxUSA.com to prepare your 2023 income tax return.

You can view the status of your tax return by signing in to your account at www.freetaxusa.com.

2024 tax preparation on FreeTaxUSA.com will be available starting in January of 2025.

We look forward to preparing your 2024 tax return.

E 1040 Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2023

	Ο.	o. marriada moonic raz	· IICL	ш			OIVID NO. 13	45-0072	I INS USE	Offiny—L	JO HOL WI	ite or sta	ipie iri triis space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2	2023, endin	9		, 20	5	See sep	arate i	nstructions.
Your first name and middle initial Last name											our soc	cial sec	urity number
SAI A			DANDA								173	111	5754
If joint return, s	Last name						s	pouse's	social	security number			
		er and street). If you have a P.O. box, see	instructi	ons.					Apt. no.	1			ection Campaign
		ENIX AVE							517				ou, or your jointly, want \$3
		ice. If you have a foreign address, also co	omplete s										nd. Checking a
FLAGST	AZ									not change			
Foreign country name				Foreign province/state/county					eign postai c	ode y	our tax	or refu	
Filipa Chaha	_ \ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	7 Single					□ Hood of	house	hald (HOL	1/			u opouse
Filing Status	S <u>⊬</u>												
Check only one box.	F	✓ Married filing jointly (even if only one had income)✓ Married filing separately (MFS)✓ Qualifying surviving spouse (QSS)											
one box.	If v	you checked the MFS box, enter the	e name o	of vour s	spous	e. If you c		-				d's na	me if the
		ualifying person is a child but not you											
	^+ -		-: /										
Digital Assets		ny time during 2023, did you: (a) rec nange, or otherwise dispose of a dig										∏Ye	es 🛚 No
Standard		neone can claim: You as a de					as a dependen		JCC IIISti di	Stions	.)		.3 22 140
Deduction	_	Spouse itemizes on a separate retur	•			•	•						
		·											
		: Were born before January 2, 1	959	_ Are b	lind	Spou	se: U Was b		fore Janua				s blind
Dependent	•	·		(2)	Social num	l security	(3) Relation	isilib	(4) Check ti Child t			,	see instructions): r other dependents
If more	(1) F	First name Last name			Hulli	iber	to you		Offilia ti				Tother dependents
than four dependents,									L	=			
see instruction	s —									┽			
and check here \Box	1 —									_			H
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instru	ctions	: s)					1a	T	9,323.
	b	Household employee wages not re	•			,					1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a						e instructions)					
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	Taxable dependent care benefits from Form 2441, line 26								1e		
was withheld.	f	Employer-provided adoption bene	efits fron	from Form 8839, line 29							1f	↓	
If you did not get a Form	g	Wages from Form 8919, line 6 .									1g		
W-2, see	h	Other earned income (see instruct					1				1h	_	
instructions.	i	Nontaxable combat pay election (s	see inst	ructions				1i			٠.	4	0 202
	Z	Add lines 1a through 1h	2a		•		Taxable interes				1z	+-	9,323.
Attach Sch. B if required.	2a 3a		2a 3a				Ordinary divid				2b 3b	+	
	4a	· –	4a				Taxable amou				4b	+	
Standard	5a		5a				Taxable amou				5b	+	
Deduction for— Single or	6a		6a				Taxable amou				6b		
Married filing separately,	С	_	he lump-sum election method, check here (see instructions)							. \square			
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7		0.	
Married filing jointly or	8	Additional income from Schedule 1, line 10								8			
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9		9,323.	
\$27,700 Head of	10	Adjustments to income from Schedule 1, line 26								10	1	0.	
household,	11		line 10 from line 9. This is your adjusted gross income								11		9,323.
\$20,800 If you checked	12		Indard deduction or itemized deductions (from Schedule A)							12	+	13,850.	
any box under Standard	13	Qualified business income deduction from Form 8995 or Form 8995-A								13	+	12 050	
Deduction, see instructions.	14	Add lines 12 and 13								14	+	13,850.	
200 111011 40110113.	15	Subtract line 14 from line 11. If zer	ro or les	s, enter	-0 7	I his is you	ır taxable inco	ome			15	1	0.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 11320B

Form **1040** (2023)

Form 1040 (2023	3) SA	I A DANDA						173	-11	-5754	Page 2		
Tax and	16	Tax (see instructions). Check	if any from Form	ı(s): 1 881	4 2 🗌 4972	з 🗌		[16		0.		
Credits	17	Amount from Schedule 2, lir	ne 3					[17		0.		
	18	Add lines 16 and 17						[18		0.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			[19				
	20	Amount from Schedule 3, lir	ne 8					[20		0.		
	21	Add lines 19 and 20						[21		0.		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				[22		0.		
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			[23				
	24	Add lines 22 and 23. This is	your total tax					[24				
Payments	25	Federal income tax withheld											
•	а	Form(s) W-2				25a		148.					
	b	Form(s) 1099				25b							
	С	Other forms (see instruction	s)			25c							
	d	Add lines 25a through 25c							25d		148.		
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return			[26				
qualifying child,	27	Earned income credit (EIC)				27							
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28							
	29	American opportunity credit	from Form 8863	3, line 8		29							
	30	Reserved for future use .				30							
	31	Amount from Schedule 3, lir				31							
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable cı	redits		32				
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				[33		148.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid									148.		
	35a	·									148.		
Direct deposit?	b	Routing number 1 2 2 1 0 1 7 0 6 c Type: X Checking Savings											
See instructions.	d	Account number 4 5 7 0 4 8 6 7 5 2 4 4											
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36							
Amount	37	Subtract line 33 from line 24	. This is the amo	ount vou owe									
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions									0.		
	38	Estimated tax penalty (see instructions)											
Third Party	Do	you want to allow another				See							
Designee	ins	instructions							elow.	$\overline{\mathbb{X}}$ No			
		signee's						identification					
		name no. number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the								-f l l			
Sign		lief, they are true, correct, and com									-		
Here	Yo	ur signature	Date		If the I	RS ser	nt vou an Iden	tity					
	10	ar signature	Date	Oate Your occupation					Protection PIN, enter it here				
Joint return?					STUDENT			(see ir	nst.)				
See instructions.	Sp	ouse's signature. If a joint return, I	Date	Spouse's occupat	ion		the IRS sent your spouse an						
Keep a copy for your records.								Identity Protection PIN, enter it here (see inst.)					
,		Phone no. 928 – 310 – 7959 Email address						(000	,				
		one no. 928-310- eparer's name			TIN		Check if:						
Paid	1 10	sparer o name		Preparer's signature Date						Self-em	nloved		
Preparer		m'a nama	PARED							Jioyeu			
Use Only		Firm's name Phone											
_	⊢ır	Firm's address Firm's									EIN		