

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, _____, ending _____, _____		See separate instructions.																																																
Your first name and middle initial Ryan D. Work		Last name																																																
If joint return, spouse's first name and middle initial Sarah E. Work		Last name																																																
Home address (number and street). If you have a P.O. box, see instructions. 6401 Charlotte Hwy		Apt. no.																																																
City, town, or post office. If you have a foreign address, also complete spaces below. York, SC 29745		State ZIP code																																																
Foreign country name		Foreign province/state/county																																																
		Foreign postal code																																																
Filing Status <input type="checkbox"/> Single <input type="checkbox"/> Head of household (HOH) Check only one box. <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) <input type="checkbox"/> Qualifying surviving spouse (QSS) <input type="checkbox"/> Married filing separately (MFS)																																																		
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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																		
Standard Deduction Someone can claim: <input type="checkbox"/> You as a dependent <input type="checkbox"/> Your spouse as a dependent <input type="checkbox"/> Spouse itemizes on a separate return or you were a dual-status alien																																																		
Age/Blindness You: <input type="checkbox"/> Were born before January 2, 1959 <input type="checkbox"/> Are blind Spouse: <input type="checkbox"/> Was born before January 2, 1959 <input type="checkbox"/> Is blind																																																		
Dependents (see instructions): If more than four dependents, see instructions and check here. . . . <table border="1"> <tr> <td>(1) First name</td> <td>Last name</td> <td>(2) Social security number</td> <td>(3) Relationship to you</td> <td>(4) Check the box if qualifies for (see instructions): Child tax credit</td> <td>Credit for other dependents</td> </tr> <tr> <td>Work</td> <td></td> <td>*****</td> <td>Daughter</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Work</td> <td></td> <td>*****</td> <td>Daughter</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Work</td> <td></td> <td>*****</td> <td>Daughter</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Work</td> <td></td> <td>*****</td> <td>Daughter</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			(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	Work		*****	Daughter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Work		*****	Daughter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Work		*****	Daughter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Work		*****	Daughter	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
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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.																																																		
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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 31,731. 17 18 31,731. 19 8,000. 20 319. 21 8,319. 22 23,412. 23 24 23,412.			
	17 Amount from Schedule 2, line 3. 18 Add lines 16 and 17. 19 Child tax credit or credit for other dependents from Schedule 8812. 20 Amount from Schedule 3, line 8. 21 Add lines 19 and 20. 22 Subtract line 21 from line 18. If zero or less, enter -0. 23 Other taxes, including self-employment tax, from Schedule 2, line 21. 24 Add lines 22 and 23. This is your total tax .				
Payments	25 Federal income tax withheld from: a Form(s) W-2..... b Form(s) 1099..... c Other forms (see instructions)..... d Add lines 25a through 25c.....	25a 24,913. 25b 25c 25d 24,913. 26 2,500.			
	26 2023 estimated tax payments and amount applied from 2022 return. 27 Earned income credit (EIC)..... 28 Additional child tax credit from Schedule 8812..... 29 American opportunity credit from Form 8863, line 8..... 30 Reserved for future use..... 31 Amount from Schedule 3, line 15..... 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments				
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid . 35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here. <input type="checkbox"/> b Routing number..... d Account number.....	34 4,001. 35a 501.			
	c Type: <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings				
Amount You Owe	36 Amount of line 34 you want applied to your 2024 estimated tax	36 3,500. 37			
	37 Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions. 38 Estimated tax penalty (see instructions).....				
Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions.....	<input checked="" type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No			
	Designee's name Sarah Work, CPA	Phone no. [REDACTED]	Personal identification number (PIN) [REDACTED]		
Sign Here	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.				
Joint return? See instructions. Keep a copy for your records.	Your signature	Date	Your occupation Engineer		
			If the IRS sent you an Identity Protection PIN, enter it here (see Inst.)		
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation Accountant		
			If the IRS sent your spouse an Identity Protection PIN, enter it here (see Inst.)		
	Phone no. [REDACTED]	Email address			
Paid Preparer Use Only	Preparer's name	Preparer's signature Self-Prepared	Date	PTIN	Check if: <input checked="" type="checkbox"/> Self-employed
	Firm's name			Phone no. [REDACTED]	
	Firm's address			Firm's EIN	[REDACTED]

Go to www.irs.gov/Form1040 for instructions and the latest information.

Form 1040 (2023)