1040	Depa U.	rtment of the Treasury-Internal Revenue Service S. Individual Income T	ax Return	202	3 01	//B No. 1545-0074	IRS Use On	ly-Do not writ	e or staple in this space.				
For the year Ja	ec. 31, 2023, or other tax year beginning	, 2023, ending					See separate instructions.						
Your first name and middle initial Last name									Your social security number				
JOHN		DOE					111-22-3333						
If joint return, spouse's first name and middle initial Last name									Spouse's social security number				
JANE DOE							111-33-4444						
	number	r and street). If you have a P.O. box, see ir	-				Apt. no.		Presidential Election Campaign				
ADFD									Check here if you, or your				
	st office	. If you have a foreign address, also comp	olete spaces below		State	ZIP	code	spouse if	filing jointly, want \$3				
HARKER HEIGHTS							5548	to go to this fund. C box below will not c					
Foreign country i			Foreign pr	Foreign province/state/county			eign postal code	your tax o	•				
							0 1		You Spouse				
Filing Status		Single	•			Head of househ	old (HOH)						
-		Married filing jointly (even if only one											
Check only one box.	$\overline{\Box}$	Married filing separately (MFS)	(SS)										
one box.	lf y	ou checked the MFS box, enter the n	child's nar	ne if the									
		qualifying person is a child but not your dependent:											
Digital	Aton	vitime during 2022 did your (a) reacti		oward or po	maant fa	r proporti (or oo	ricco), or (b) o						
Digital Assets		y time during 2023, did you: (a) receiv ange, or otherwise dispose of a digita			·	,	,. (<i>)</i>		∏ Yes ∏ No				
Standard		eone can claim: You as a der]	Your spouse			instructions.)						
Deduction		Spouse itemizes on a separate return				pendent							
					-		fama amusamu 0	4050					
Age/Blindness			959 🔄 Are bl		ouse:	(3) Relationshi	fore January 2	-	Is blind				
•		irst name Last name	(2) Social security number			to you	Child tax	. i I	Credit for other dependents				
lf more than four			314-22-		0111	0.01	X						
dependents,	JACI TIM		313-22			SON	x		<u> </u>				
see instructions	<u>1 IM</u>	DOE		515-22	-2111	SON							
and check									<u> </u>				
	1a	1a Total amount from Form(s) W-2, box 1 (see instructions)							60,000,000				
Income	b	Household employee wages not rep						. 1b					
Attach Form(s)	с	c Tip income not reported on line 1a (see instructions)											
W-2 here. Also	d												
attach Forms W-2G and	е	Taxable dependent care benefits from Form 2441, line 26						. 1e					
1099-R if tax	f	Employer-provided adoption benefits from Form 8839, line 29						. 1f					
was withheld.	g	Wages from Form 8919, line 6											
lf you did not get a Form	h	Other earned income (see instructions)											
W-2, see	i Nontaxable combat pay election (see instructions)												
instructions.	z	Add lines 1a through 1h						. 1z	60,000,000				
Attach Sch. B	2a	Tax-exempt interest	2a		b Taxa	ble interest		. 2b					
if required.	<u>3a</u>	Qualified dividends	3a		b Ordir	nary dividends		. 3b					
Standard	4a	IRA distributions	4a		b Taxa	ble amount		. 4b					
Deduction for-	5a	Pensions and annuities • • •	5a		b Taxa	ble amount		. <u>5</u> b					
 Single or Married filing 	6a	Social security benefits 6a b Taxable amount											
separately, \$13,850	С	If you elect to use the lump-sum ele											
 Married filing 	7	Capital gain or (loss). Attach Schede	. 8										
jointly or Qualifying	8												
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							60,000,000				
\$27,700 ● Head of	10	Adjustments to income from Schedule 1, line 26											
household, \$20,800	11 Subtract line 10 from line 9. This is your adjusted gross income							. 11	60,000,000				
 If you checked 	12	Standard deduction or itemized d	. <u>12</u> . 13	27,700									
any box under <i>Standard</i>	13	Qualified business income deduction from Form 8995 or Form 8995-A											
Deduction, see instructions.	14								27,700				
	15	Subtract line 14 from line 11. If zero	. 15	59,972,300									

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

Form 1040 (2023)

EEA

Form 1040 (2023	5)	JOHN & JANE DOE						111-22	-3333	Page 2	
Tax and	16	Tax (see instructions). Check if any from F	orm(s): 1 881	4 2 49	972 3			. 16	22,3	119,665	
Credits	17	Amount from Schedule 2, line 3						. 17			
	18	Add lines 16 and 17							22,3	119,665	
	19	Child tax credit or credit for other depender	nts from Schedule	8812 .				. 19			
	20	Amount from Schedule 3, line 8						. 20			
	21	Add lines 19 and 20						. 21		0	
	22	Subtract line 21 from line 18. If zero or less	, enter -0- ••					. 22	22,3	119,665	
	23	Other taxes, including self-employment tax	, from Schedule 2,	line 21 •				. 23	-,	537,750	
	24	Add lines 22 and 23. This is your total tax						. 24	22,	657,415	
Payments	25	Federal income tax withheld from:									
	а	Form(s) W-2									
	b	Form(s) 1099			25b						
	С	Other forms (see instructions)			25c		538,2	00			
	d	Add lines 25a through 25c						. 25d	!	538,200	
If you have a	26	2023 estimated tax payments and amount	applied from 2022	return .				. 26			
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			27						
	28	Additional child tax credit from Schedule 88	312		28						
	29	American opportunity credit from Form 886	3, line 8 • • •		29						
	30										
	31	Amount from Schedule 3, line 15 • • •			31						
	32	Add lines 27, 28, 29, and 31. These are you	r total other paym	nents and ref	fundable cr	edits		. 32		0	
	33	Add lines 25d, 26, and 32. These are your total payments						. 33		538,200	
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33. Thi	s is the amou	nt you overp	aid		34		0	
	35a	Amount of line 34 you want refunded to yo	u. If Form 8888 is	attached, che	eck here •	• • • •	<u> </u>	35a		0	
Direct deposit?	b	Routing number C Type: Checking Savings						gs			
See instructions.	d	Account number									
	36	Amount of line 34 you want applied to you	r 2024 estimated t	ax	36						
Amount	37	Subtract line 33 from line 24. This is the am	ount you owe.								
You Owe		For details on how to pay, go to www.irs.go						. 37	22,2	119,215	
	38	Estimated tax penalty (see instructions)			38						
Third Party		you want to allow another person to discuss		e IRS? See		—			—		
Designee			Yes. Comp				•		X No		
	De na	signee's ne					Personal Id 1umber (Pl	entification N)			
Cierra		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									
Sign		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
Here	You	ır signature	Date Your occupation			If the IRS s					
laint naturn 2		-					Protection P (see inst.)	N, enter it h	iere		
Joint retum? See instructions.								If the IRS se			
Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date	cupation					enter it here		
your records.								(see inst.)			
	Ph	one no.	Email address				•			<u> </u>	
	Pre	parer's signature		Date PTIN		PTIN		Check if:			
Paid				11-27-2024 P010		P0107	3338	338 Self-employed			
Preparer	Pre	parer's name Derland G Bahr CPA	Phone no. 254-432								
Use Only	Fin	m's name Derland Bahr CPA Inc									
-	Fin	irm's address 581 Pan American Drive Ste 7									
		Harker Heights, TX	76548				F	irm's EIN	82-38	40304	
	·//	1010 for instructions and the latest information							Form	1040 (2023)	

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