Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return				202	3	OMB No. 1545	-0074	IRS Use Onl	y—Do not v	vrite or stapl	e in this space.	
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20								See se	See separate instructions.			
Your first name	niddle initial	Last name	ie						Your social security number			
LAWSON		HAWKINS	KINS						579 78 3453			
If joint return, s	s first name and middle initial	Last name	9					Spouse's social security number				
Home address	(numb	er and street). If you have a P.O. box, se	e instructions.		44.00		A	pt. no.	Preside	ntial Elec	tion Campaigr	
2626 S COCHRAN AVE										Check here if you, or your spouse if filing jointly, want \$3		
	ice. If you have a foreign address, also c	complete spaces t				ZIP code		to go to this fund. Checking a				
LOS ANG		······································			C			box below will not change				
Foreign country name			Foreign	Foreign province/state/county Foreign postal code					your ta	or refund	d. Spouse	
Filing Status	s X	X Single Head of household (HOH)										
Check only		☐ Married filing jointly (even if only one had income)☐ Married filing separately (MFS)☐ Qualifying surviving spouse (Compared to the property of t										
one box.												
		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										
	qu	qualifying person is a child but not your dependent:										
Digital Assets		ny time during 2023, did you: (a) re					the second resemble			ΠV	[V] AL-	
		hange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)										
Standard Deduction	200000000	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/Blindnes	s You	: X Were born before January 2,	1959	blind Spe	ouse	: Was born	n befo	re January	2, 1959	☐ Is b	olind	
Dependent	pendents (see instructions): (2) Social security (3) Relationship (4) Check the box								ox if quali	fies for (se	e instructions):	
If more	(1) F	(1) First name Last name			number to you			Child tax o	redit Credit for other dependents			
than four												
dependents,			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				£					
see instruction and check	5						1					
here												
Income	1a	Total amount from Form(s) W-2, I	oox 1 (see instru	uctions) .					. 1a		0	
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2							. 1b		0	
W-2 here. Also	C	Tip income not reported on line 1a (see instructions)							. 10		0	
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 1d	g z wy ha	0	
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							. 1e		0	
was withheld.	f	Employer-provided adoption ben-	efits from Form	8839, line 29					. 1f		0	
If you did not	g	Wages from Form 8919, line 6							. 1g		0	
get a Form W-2, see	h	Other earned income (see instructions)							. 1h	in editory	0	
instructions.	i	i Nontaxable combat pay election (see instructions)							State			
100000000000000000000000000000000000000	Z	Add lines 1a through 1h							. 1z		0	
Attach Sch. B	2a	Tax-exempt interest	2a	0	b Ta	axable interest			. 2b		225	
if required.	3a	Qualified dividends	3a	0	b 0	rdinary dividen	ds .		. 3b	100	0	
	4a	IRA distributions	4a		b Ta	axable amount			. 4b	1,150	0	
Standard Deduction for—	5a	Pensions and annuities	5a		b Ta	axable amount			. 5b		0	
Single or	6a	Social security benefits	6a	19115	b Ta	axable amount			. 6b		0	
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)									1940-2	
\$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		. 0	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								225	
\$27,700	10	Adjustments to income from Schedule 1, line 26							. 10		0	
Head of household,	11	Subtract line 10 from line 9. This is your adjusted gross income							. 11		225	
\$20,800 If you checked any box under 13 Standard deduction or itemized deductions (from Schedule A)							. 12		15700			
							. 13		0			
Standard Deduction,	n, 14 Add lines 12 and 13						. 14		15700			
see instructions.	15	Subtract line 14 from line 11. If ze	ro or less enter	r-N- This is v	our t	avable income	2		15		0	

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

Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income

Form **1040** (2023)

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