

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/16/2024

General Information

Name: Mr Rick Crews

PID 300418

AGENCY INFORMATION

Organization	Suborganization	Title
Bonifay	City Council	City Councilman

Net Worth

My Net Worth as of December 31, 2023 was \$ 496,370.44.

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effect is N/A.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Land at 2031 Crews Place Bonifay, FL 32425	\$ 189,469.00
Residence at 312 E. Pennsylvania Ave	\$ 82,412.00
Checking Account First Federal Bank, Bonifay, FL	\$ 1,115.00
2011 Toyota 4Runner	\$ 15,000.00
1999 Ford F-150 Truck	\$ 5,000.00
Massey Ferguson Tractor, Bush Hog, & Box Blade	\$ 8,000.00
Voya Retirement Annuity	\$ 198,000.00
See Attached	

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Communtiy South Credit Union	1044 Hwy. 90 E. Chipley, FL 32428	\$ 7,777.12
Capitol One	3324 Peachtree Rd. NE Atlanta, GA 30326	\$ 4,263.44

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2023 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☒ I elect to file a copy of my 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
See Attached		

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
See Attached			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

☒ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Rick Crews

Digitally signed: 05/16/2024

Filed with COE: 05/16/2024

FOR TAX YEAR 2023

RICK V CREWS

Thompson Walker and Associates LLC

PO Box 810

Bonifay, FL 32425

(850) 547-4217

Thompson Walker and Associates LLC

PO Box 810
Bonifay, FL 32425
mmillercmb@embarqmail.com
Phone: (850)547-4217 | Fax: (850)547-2329

March 06, 2024

Rick V Crews
312 E Pennsylvania Ave
Bonifay, FL 32425

Subject: Preparation of Your 2023 Tax Returns

Rick V Crews:

Thank you for choosing Thompson Walker and Associates LLC to assist you with your 2023 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2023 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your 2023 tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. If you have any questions, contact our office at (850)547-4217.

Sincerely,

R Bryan Thompson CPA
Thompson Walker and Associates LLC

(Both spouses must sign for preparation of joint returns.)

Accepted By:

Taxpayer

Spouse

Date

Thompson Walker and Associates LLC

PO Box 810
Bonifay, FL 32425
mmillercmb@embarqmail.com
Phone: (850)547-4217 | Fax: (850)547-2329

March 06, 2024

Rick V Crews
312 E Pennsylvania Ave
Bonifay, FL 32425

Rick V Crews:

Below is a summary of your 2023 tax year.

Return Type	Refund/Balance Due	Transaction Method
Federal Income Tax	\$4,648 Balance Due	Mail a check

The following returns will be e-filed and do not need to be mailed to the taxing authority:

* Federal Income Tax

Mail payment on or before due date to the following address:

Federal Income Tax
Internal Revenue Service
P.O. Box 1214
Charlotte, NC 28201-1214

Sincerely,

R Bryan Thompson CPA
Thompson Walker and Associates LLC

Thompson Walker and Associates LLC

PO Box 810
Bonifay, FL 32425
~~mrc@cwab.com~~ mrc@cwab.com
Phone: (850)547-4217 | Fax: (850)547-2329

March 06, 2024

Rick V Crews
312 E Pennsylvania Ave
Bonifay, FL 32425

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (850)547-4217.

Sincerely,

R Bryan Thompson CPA
Thompson Walker and Associates LLC

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS e-file

Taxpayer name

Rick V Crews

Taxpayer address (optional)

312 E Pennsylvania Ave
Bonifay, FL 32425

- 1 ☐ Your federal income tax return for 2023 was filed electronically with the IRS Submission Processing Center. The electronic filing services were provided by Thompson Walker and Associates LLC
- 2 ☐ Your return was accepted on _____ using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is _____
- 3 ☐ Your return was accepted on _____ Allow 4 to 6 weeks for the processing of your return. The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.
- 4 ☐ Your electronic funds withdrawal payment request was accepted for processing.
- 5 ☐ Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.
- 6 ☐ Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on _____ The Submission ID assigned to your extension is _____

**DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at www.irs.gov or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to www.irs.gov and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to www.irs.gov. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.

Instructions for Electronic Return Originators

Line 2 - PIN Presence Indicator - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS e-file Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. Use Form 9465, U.S. Individual Income Tax Transmittal for an IRS e-file Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).

Line 3 - Exception Processing - Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.

Line 4 - Payment Acknowledgement Literal - Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."

Line 5 - Payment Acknowledgement Literal - Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

Note: EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325

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

Your first name and middle initial
Rick V

Last name
Crews

See separate instructions.

If joint return, spouse's first name and middle initial

Last name

Your social security number
XXX-XX-XXXX

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.
312 E Pennsylvania Ave

Apt. no.

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

State
FL

ZIP code
32425

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)

Check only one box. ☐ Married filing jointly (even if only one had income) ☐ Qualifying surviving spouse (QSS)

☐ 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) ☐ 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 if qualifies for (see instructions):	
				Child tax credit	Credit for other dependents
				☐	☐
				☐	☐
				☐	☐
				☐	☐

Income

1a Total amount from Form(s) W-2, box 1 (see instructions) 1a 24,087

b Household employee wages not reported on Form(s) W-2 1b

c Tip income not reported on line 1a (see instructions) 1c

d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d

e Taxable dependent care benefits from Form 2441, line 28 1e

f Employer-provided adoption benefits from Form 8839, line 29 1f

g Wages from Form 8919, line 5 1g

h Other earned income (see instructions) 1h

i Nontaxable combat pay election (see instructions) 1i

z Add lines 1a through 1h 1z 24,087

2a Tax-exempt interest 2a

3a Qualified dividends 3a

4a IRA distributions 4a

5a Pensions and annuities 5a 51,433

6a Social security benefits 6a 22,356

b Taxable interest 2b

b Ordinary dividends 3b

b Taxable amount 4b

b Taxable amount 5b 51,408

b Taxable amount 6b 19,003

7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐ 7

8 Additional income from Schedule 1, line 10 8 3,900

9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 98,398

10 Adjustments to income from Schedule 1, line 26 10 64

11 Subtract line 10 from line 9. This is your adjusted gross income 11 98,334

12 Standard deduction or itemized deductions (from Schedule A) 12 13,850

13 Qualified business income deduction from Form 8995 or Form 8995-A 13 167

14 Add lines 12 and 13 14 14,017

15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income 15 84,317

Tax and Credits

16	Tax (see instructions). Check if any from Form(s). 1 ☐ 8814 2 ☐ 4972 3 ☐	16	13,859
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	13,859
19	Child tax credit or credit for other dependents 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	13,859
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	127
24	Add lines 22 and 23. This is your total tax	24	13,986

Payments

25	Federal income tax withheld from:		
a	Form(s) W-2	25a	1,609
b	Form(s) 1099	25b	7,794
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	9,403
26	2023 estimated tax payments and amount applied from 2022 return	26	
27	Earned income credit (EIC)	27	
28	Additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Reserved for future use	30	
31	Amount from Schedule 3, line 15	31	
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	0
33	Add lines 25d, 26, and 32. These are your total payments	33	9,403

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	0
35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ☐	35a	0
b	Routing number	c Type ☐ Checking ☐ Savings	
d	Account number		
36	Amount of line 34 you want applied to your 2024 estimated tax	36	

Amount You Owe

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	37	4,648
38	Estimated tax penalty (see instructions)	38	65

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions

☐ Yes. Complete below ☒ No

Designee's name

Phone no.

Personal identification number (PIN)

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.

Your signature

Date

Your occupation

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

69702

02-27-2024

Spouse's signature. If a joint return, both must sign.

Date

Spouse's occupation

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no.

Email address

Paid Preparer Use Only

Preparer's signature

Date

PTIN

Check if:

☐ Self-employed

Preparer's name: Bryan Thompson CPA

03-06-2024

XXXXXXXXXX

Phone no. 850-547-4217

Firm's name: Thompson Walker and Associates LLC

Firm's address: PO Box 810

Monifay, FL 32425

Firm's EIN 27-4333978

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

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

OMB No 1545-0074

2023

Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Rick V Crews

Your social security number

XXX-XX-XXXX

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	3	900
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling	8b	3,000
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	Income from Form 8853	8e	
f	Income from Form 8889	8f	
g	Alaska Permanent Fund dividends	8g	
h	Jury duty pay	8h	
i	Prizes and awards	8i	
j	Activity not engaged in for profit income	8j	
k	Stock options	8k	
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
n	Section 951(a) inclusion (see instructions)	8n	
o	Section 951A(a) inclusion (see instructions)	8o	
p	Section 461(l) excess business loss adjustment	8p	
q	Taxable distributions from an ABLE account (see instructions)	8q	
r	Scholarship and fellowship grants not reported on Form W-2	8r	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	()
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
u	Wages earned while incarcerated	8u	
z	Other income. List type and amount:	8z	
9	Total other income. Add lines 8a through 8z	9	3,000
10	Combine lines 1 through 7, and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	3,900

For Paperwork Reduction Act Notice, see your tax return instructions.

EEA

Schedule 1 (Form 1040) 2023

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	64
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c		
d	Reforestation amortization and expenses	24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount:	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10.		26	64

SCHEDULE 2
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Taxes

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No 1545-0074

2023

Attachment
Sequence No **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Rick V Crews

Your social security number

XXX-XX-XXXX

Part I Tax

- | | | | |
|---|--|---|---|
| 1 | Alternative minimum tax. Attach Form 6251 | 1 | |
| 2 | Excess advance premium tax credit repayment. Attach Form 8962 | 2 | |
| 3 | Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 | 3 | 0 |

Part II Other Taxes

- | | | | |
|----|---|----|-----|
| 4 | Self-employment tax. Attach Schedule SE | 4 | 127 |
| 5 | Social security and Medicare tax on unreported tip income.
Attach Form 4137 | 5 | |
| 6 | Uncollected social security and Medicare tax on wages. Attach
Form 8919 | 6 | |
| 7 | Total additional social security and Medicare tax. Add lines 5 and 6 | 7 | |
| 8 | Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.
If not required, check here ☐ | 8 | |
| 9 | Household employment taxes. Attach Schedule H | 9 | |
| 10 | Repayment of first-time homebuyer credit. Attach Form 5405 if required | 10 | |
| 11 | Additional Medicare Tax. Attach Form 8959 | 11 | |
| 12 | Net investment income tax. Attach Form 8960 | 12 | |
| 13 | Uncollected social security and Medicare or RRTA tax on tips or group-term life
insurance from Form W-2, box 12 | 13 | |
| 14 | Interest on tax due on installment income from the sale of certain residential lots
and timeshares | 14 | |
| 15 | Interest on the deferred tax on gain from certain installment sales with a sales price
over \$150,000 | 15 | |
| 16 | Recapture of low-income housing credit. Attach Form 8611 | 16 | |

(continued on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions.

EEA

Schedule 2 (Form 1040) 2023

Part II Other Taxes (continued)

17	Other additional taxes:		
a	Recapture of other credits. List type, form number, and amount:		
		17a	
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b	
c	Additional tax on HSA distributions. Attach Form 8889	17c	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	
e	Additional tax on Archer MSA distributions. Attach Form 8853	17e	
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f	
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i	
j	Section 72(m)(5) excess benefits tax	17j	
k	Golden parachute payments	17k	
l	Tax on accumulation distribution of trusts	17l	
m	Excise tax on insider stock compensation from an expatriated corporation	17m	
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n	
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o	
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p	
q	Any interest from Form 8621, line 24	17q	
z	Any other taxes. List type and amount:	17z	
18	Total additional taxes. Add lines 17a through 17z		18
19	Reserved for future use		19
20	Section 965 net tax liability installment from Form 965-A	20	
21	Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21

127

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service

Name(s) shown on Form 1040 or 1040-SR

Itemized Deductions

Attach to Form 1040 or 1040-SR.

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

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16

OMB No 1545-0074

2023

Attachment
Sequence No. **07**

Rick V Crews

Your social security number

XXX-XX-XXXX

**Medical
and
Dental
Expenses**

Caution: Do not include expenses reimbursed or paid by others.

- 1 Medical and dental expenses (see instructions)
- 2 Enter amount from Form 1040 or 1040-SR, line 11 **2**
- 3 Multiply line 2 by 7.5% (0.075)
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-

1	
2	
3	
4	

**Taxes You
Paid**

- 5 State and local taxes.
 - a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box ☒
 - b State and local real estate taxes (see instructions)
 - c State and local personal property taxes
 - d Add lines 5a through 5c
 - e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)
- 6 Other taxes. List type and amount: _____

5a	1,381
5b	
5c	
5d	1,381
5e	1,381
6	

7 Add lines 5e and 6

7 **1,381**

**Interest
You Paid**

Caution: Your mortgage interest deduction may be limited. See instructions.

8 Home mortgage interest and points: If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ☐

- a Home mortgage interest and points reported to you on Form 1098. See instructions if limited
- b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address

8a	
8b	

c Points not reported to you on Form 1098. See instructions for special rules

d Reserved for future use

e Add lines 8a through 8c

8c	
8d	
8e	

9 Investment interest. Attach Form 4952 if required. See instructions

9	
---	--

10 Add lines 8e and 9

10

**Gifts to
Charity**

Caution: If you made a gift and got a benefit for it, see instructions.

11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions

12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500

13 Carry over from prior year

14 Add lines 11 through 13

11	
12	
13	

14

**Casualty and
Theft Losses**

15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions

15

**Other
Itemized
Deductions**

16 Other - from list in instructions. List type and amount: _____

16

**Total
Itemized
Deductions**

17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12

17 **1,381**

18 If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service

Profit or Loss From Business

(Sole Proprietorship)

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.

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

OMB No. 1545-0074

2023

Attachment
Sequence No **09**

Name of proprietor

Rick V Crews

Social security number (SSN)

XXX-XX-XXXX

A Principal business or profession, including product or service (see instructions)

B Enter code from instructions

C Business name. If no separate business name, leave blank.

Form 1099 from Double U Farms LLC

D Employer ID number (EIN) (see instr.)

E Business address (including suite or room no.)

312 E Pennsylvania Ave

City, town or post office, state, and ZIP code

Bonifay, FL 32425

F Accounting method (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify)

G Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses ☒ Yes ☐ No

H If you started or acquired this business during 2023, check here

I Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions ☐ Yes ☐ No

J If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐	1	1,080
2 Returns and allowances	2	0
3 Subtract line 2 from line 1	3	1,080
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	1,080
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	1,080

Part II Expenses. Enter expenses for business use of your home only on line 30.

8 Advertising	8		18 Office expense (see instructions)	18	
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest (see instructions):			24 Travel and meals:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals (see instructions)	24b	
17 Legal and professional services	17	180	25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27b	28	180	26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29	900	27a Other expenses (from line 48)	27a	
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.	30		b Energy efficient commercial bldgs deduction (attach Form 7205)	27b	

Simplified method filers only: Enter the total square footage of (a) your home and (b) the part of your home used for business: _____ Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30

31 Net profit or (loss). Subtract line 30 from line 29.

• If a profit, enter on both **Schedule 1 (Form 1040), line 3**, and on **Schedule SE, line 2**. (If you checked the box on line 1, see instructions.) Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you must go to line 32.

32 If you have a loss, check the box that describes your investment in this activity. See instructions.

• If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 3**, and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you must attach **Form 6198**. Your loss may be limited.

32a ☐ All investment is at risk

32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2023

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

Attach to Form 1040, 1040-SR, 1040-SS, or 1040-NR.

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

OMB No. 1545-0074

2023

Attachment
Sequence No **17**

Name of person with self-employment income (as shown on Form 1040, 1040-SR, 1040-SS, or 1040-NR)

Social security number of person
with self-employment income

XXX-XX-XXXX

Rick V Crews

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is **church employee income**, see instructions for how to report your income and the definition of church employee income.

- A** If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I ☐

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

- 1a** Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A

1a

- b** If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ

1b

Skip line 2 if you use the nonfarm optional method in Part II. See instructions.

- 2** Net profit or (loss) from Schedule C, line 31, and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order

2

900

- 3** Combine lines 1a, 1b, and 2

3

900

- 4a** If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3

4a

831

Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions

- b** If you elect one or both of the optional methods, enter the total of lines 15 and 17 here

4b

- c** Combine lines 4a and 4b. If less than \$400, stop; you don't owe self-employment tax. **Exception:** If less than \$400 and you had church employee income, enter -0- and continue

4c

831

- 5a** Enter your church employee income from Form W-2. See instructions for definition of church employee income

5a

- b** Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-

5b

- 6** Add lines 4c and 5b

6

831

- 7** Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2023

7

160,200

- 8a** Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$160,200 or more, skip lines 8b through 10, and go to line 11

8a

24,087

- b** Unreported tips subject to social security tax from Form 4137, line 10

8b

- c** Wages subject to social security tax from Form 999, line 10

8c

- d** Add lines 8a, 8b, and 8c

8d

24,087

- 9** Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11

9

136,113

- 10** Multiply the smaller of line 9 or line 7 by 12.4% (0.124)

10

103

- 11** Multiply line 9 by 2.9% (0.029)

11

24

- 12** Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4, or Form 1040-SS, Part I, line 3

12

127

- 13** Deduction for one-half of self-employment tax.

Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040), line 15

13

64

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule SE (Form 1040) 2023

Form **8879**

(Rev. January 2021)

Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization**

- ▶ ERO must obtain and retain completed Form 8879.
▶ Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

2023

Submission Identification Number (SID) ▶

Taxpayer's name

Rick V Crews

Spouse's name

Social security number

XXX-XX-XXXX

Spouse's social security number

Part I Tax Return Information - Tax Year Ending December 31, 2023 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	98,334
2	Total tax	2	13,986
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	9,403
4	Amount you want refunded to you	4	
5	Amount you owe	5	4,648

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize Thompson Walker and Associates LLC to enter or generate my PIN 69702 as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name Enter five digits, but don't enter all zeros

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ Date ▶

Spouse's PIN: check one box only

☐ I authorize _____ to enter or generate my PIN _____ as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name Enter five digits, but don't enter all zeros

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ Date ▶

Part III Certification and Authentication - Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

XXXXXXX-
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ Date ▶ 03-06-2024

ERO Must Retain This Form - See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8879 (Rev. 01-2021)

EEA

Federal Income Tax Withheld

(This page is not filed with the return. It is for your records only.)

2023 PG01

Name(s) as shown on return

Rick V Crews

Tax ID Number

XXX-XX-XXXX

Description

Amount

W2 - Variety Stores Inc

1,434

W2 - City of Bonifay

175

W-2 Subtotal

1,609

1099R - RELIASTAR LIFE INSURANCE CO.

1,600

1099R - FLORIDA RETIREMENT SYSTEM

4,629

1099 SSA

1,565

1099 Subtotal

7,794

Total Withholdings

9,403

W-2G Detail Listing

(This page is not filed with the return. It is for your records only.)

2023

Name(s) as shown on return

Tax ID Number

Rick V Crews		FEDERAL		STATE	
T/S	Payer's Name	Gross	W/H	State Code	Gross
T	FLA DEPT OF THE LOTTERY	1,000		FL	1,000
T	FLA DEPT OF THE LOTTERY	1,000		FL	1,000
T	FLA DEPT OF THE LOTTERY	1,000		FL	1,000
T	Taxpayer Totals	3,000			3,000

Original Copy

Worksheet 1
Forms 1040

Social Security Benefits Worksheet
Figuring Your Taxable Benefits

(This page is not filed with the return. It is for your records only.)

2023

Name(s) as shown on return

Tax ID Number

Rick V Crews

XXX-XX-XXXX

Before you begin:

- If you are married filing separately and you lived apart from your spouse for all of 2023, enter "D" to the right of the word "benefits" on Form 1040 or 1040-SR, line 6a
- Don't use this worksheet if you repaid benefits in 2023 and your total repayments (box 4 of Forms SSA-1099 and RRB-1099) were more than your gross benefits for 2023 (box 3 of Forms SSA-1099 and RRB-1099). None of your benefits are taxable for 2023. For more information, see Repayments More Than Gross Benefits.
- If you are filing Form 8815, Exclusion of Interest From Series EE and I U S. Savings Bonds Issued After 1989, don't include the amount from line 2b of Form 1040 or 1040-SR on line 3 of this worksheet. Instead, include the amount from Schedule B (Form 1040), line 2.

1. Enter the total amount from box 5 of ALL your Forms SSA-1099 and RRB-1099 . Also enter this amount on Form 1040 or 1040-SR, line 6a	1.	22,356
2. Multiply line 1 by 50% (0.50)	2.	11,178
3. Combine the amounts from Form 1040 or 1040-SR, lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3.	79,395
4. Enter the amount, if any, from Form 1040 or 1040-SR, line 2a	4.	
5. Enter the total of any exclusions/adjustments for: - Adoption benefits (Form 8839, line 28). - Foreign earned income or housing (Form 2555, lines 45 and 50), and - Certain income of bona fide residents of American Samoa (Form 4563, line 15) or Puerto Rico	5.	
6. Combine lines 2, 3, 4, and 5 above	6.	90,573
7. Enter the total of the amounts from Schedule 1 (Form 1040), lines 11 through 20, and 23 and 25	7.	64
8. Is the amount on line 7 less than the amount on line 6? No. STOP None of your social security benefits are taxable. Enter -0- on Form 1040 or 1040-SR, line 6b X Yes. Subtract line 7 from line 6	8.	90,509
9. If you are: - Married filing jointly, enter \$32,000; or - Single, head of household, qualifying surviving spouse, or married filing separately and you lived apart from your spouse for all of 2023, enter \$25,000 Note. If you are married filing separately and you lived with your spouse at any time in 2023, skip lines 9 through 16, multiply line 8 by 85% (0.85), and enter the result on line 17. Then, go to line 18	9.	25,000
10. Is the amount on line 9 less than the amount on line 8? No. STOP None of your benefits are taxable. Enter -0- on Form 1040 or 1040-SR, line 6b. If you are married filing separately and you lived apart from your spouse for all of 2023, be sure you entered "D" to the right of the word "benefits" on Form 1040 or 1040-SR, line 6a X Yes. Subtract line 9 from line 8	10.	65,509
11. Enter \$12,000 if married filing jointly, or \$9,000 if single, head of household, qualifying surviving spouse, or married filing separately and you lived apart from your spouse for all of 2023	11.	9,000
12. Subtract line 11 from line 10. If zero or less, enter -0-	12.	56,509
13. Enter the smaller of line 10 or line 11	13.	9,000
14. Multiply line 13 by 90% (0.90)	14.	4,500
15. Enter the smaller of line 12 or line 14	15.	4,500
16. Multiply line 12 by 85% (0.85). If line 12 is zero, enter -0-	16.	48,033
17. Add lines 15 and 16	17.	52,533
18. Multiply line 1 by 85% (0.85)	18.	19,003
19. Taxable benefits. Enter the smaller of line 17 or line 18. Also enter this amount on Form 1040 or 1040-SR, line 6a	19.	19,003

TIP

If you received a lump-sum payment in 2023 that was for an earlier year, also complete Worksheet 2 or 3 and Worksheet 4 to see if you can report a lower taxable benefit.

Computation of Regular Tax

(This page is not filed with the return. It is for your records only.)

2023

Name(s) as shown on return

Tax ID Number

Rick V Crews

XXX-XX-XXXX

Statement for line 16 of Form 1040

Tax from Tax Table found in form instructions \$ 13,859

\$ 13,859 Tax computed using only available method

Original

Worksheet B
Form 1040

Name(s) as shown on return

Earned Income Credit (EIC) - Line 27

(Keep for your records)

2023

Tax ID Number

Rick V Crews

XXX-XX-XXXX

Use this worksheet if you answered "Yes" to Step 5, question 2.

- Complete the parts below (Parts 1 through 3) that apply to you. Then, continue to Part 4
- If you are married filing a joint return, include your ~~spouse's~~ amounts, if any, with yours to figure the amounts to enter in Parts 1 through 3

Part 1

**Self-Employed,
Members of the
Clergy, and
People With
Church
Employee
Income Filing
Schedule SE**

1a. Enter the amount from Schedule SE, Part I, line 3

1a 900

b. Enter any amount from Schedule SE, Part I, line 4b and line 5a

+ 1b

c. Combine lines 1a and 1b.

= 1c 900

d. Enter the amount from Schedule SE, Part I, line 13

- 1d 64

e. Subtract line 1d from line 1c.

= 1e 836

Part 2

**Self-Employed
NOT Required
To File
Schedule SE**

For example, your
net earnings from
self-employment
were less than \$400.

2. Don't include on these lines any statutory employee income, any net profit from services performed as a notary public, any amount exempt from self-employment tax as the result of the filing and approval of Form 4029 or Form 4361, or any other amounts exempt from self-employment tax.

a. Enter any net farm profit or (loss) from Schedule F, line 34, and from farm partnerships, Schedule K-1 (Form 1065), box 14, code A.

2a

b. Enter any net profit or (loss) from Schedule C, line 31, and Schedule K-1 (Form 1065), box 14, code A (other than farming).

+ 2b

c. Combine lines 2a and 2b.

= 2c

If you have any Schedule K-1 amounts, complete the appropriate line(s) of Schedule SE, Part I. Reduce the Schedule K-1 amounts as described in the Partner's Instructions for Schedule K-1. Enter your name and social security number on Schedule SE and attach it to your return.

Part 3

**Statutory
Employees
Filing
Schedule C**

3. Enter the amount from Schedule C, line 1, that you are filing as a statutory employee.

3

Part 4

**All Filers Using
Worksheet B**

Combine lines 1e, 2c, and 3. This is your total self-employed income.

4 836

State and Local General Sales Tax Deduction Worksheet - Line 5a

(This page is not filed with the return. It is for your records only.)

2023

Name(s) as shown on return

Tax ID Number

Rick V Crews

XXX-XX-XXXX

Before you begin: See the instructions for line 1 of the worksheet if you:

- Lived in more than one state during 2023, or
- Had any nontaxable income in 2023.

1. Enter your state general sales taxes from the 2023 Optional State Sales Tax Table 1. 1,105

Next. If, for all of 2023, you lived only in Connecticut, the District of Columbia, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Jersey, or Rhode Island, skip lines 2 through 5, enter -0- on line 6, and go to line 7. Otherwise, go to line 2.

2. Did you live in Alabama, Alaska, Arizona, Arkansas, Colorado, Georgia, Illinois, Kansas, Louisiana, Mississippi, Missouri, New York, North Carolina, South Carolina, Tennessee, Utah, or Virginia in 2023?

- ☒ No. Enter -0-.
- ☐ Yes. Enter your base local general sales taxes from the 2023 Optional Local Sales Tax Tables.

3. Did your locality impose a local general sales tax in 2023? Residents of California and Nevada, see the instructions for line 3 of the worksheet.

- ☐ No. Skip lines 3 through 5, enter -0- on line 6, and go to line 7.
- ☒ Yes. Enter your local general sales tax rate, but omit the percentage sign. For example, if your local general sales tax rate was 2.5%, enter 2.5. If your local general sales tax rate changed or you lived in more than one locality in the same state during 2023, see the instructions for line 3 of the worksheet. 3. 1.500000

4. Did you enter -0- on line 2?

- ☐ No. Skip lines 4 and 5 and go to line 6.
- ☒ Yes. Enter your state general sales tax rate (shown in the table heading for your state), but omit the percentage sign. For example, if your state general sales tax rate is 6%, enter 6.0 4. 6.000000

5. Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places) 5. 0.250000

6. Did you enter -0- on line 2?

- ☐ No. Multiply line 2 by line 3.
- ☒ Yes. Multiply line 1 by line 5 if you lived in more than one locality in the same state during 2023, see the instructions for line 6 of the worksheet. 6. 276

7. Enter your state and local general sales taxes paid on specified items, if any. See the instructions for line 7 of the worksheet 7.

8. Deduction for general sales taxes. Add lines 1, 6, and 7. Enter the result here and the total from all your state and local general sales tax deduction worksheets, if you completed more than one, on Schedule A, line 5a. Be sure to check the box on that line 8. 1,381

Optional Sales Tax Table Computation

State: FL

Income	101,712			
Family Size*	1			
Amount from table:	1,105			
Days:	365			
Deduction:	1,105			

* "Over 5" is the maximum number in family size for the optional sales tax tables in Schedule A instructions. Returns with a family size of 6 or more will display a "6" on this line.

Worksheet for Form 2210, Part III, Section B - Figure the Penalty

(This page is not filed with the return. It is for your records only.)

2023

Name(s) as shown on return

Tax ID Number

XXX-XX-XXXX

Rick V Crews

Complete Rate Period 1 of each column before going to the next column; then go to Rate Periods 2, 3, and 4 in the same manner. If multiple estimated tax payments are applied to the underpayment amount in a column of line 1a, you'll need to make more than one computation for that column.

		Payment Due Dates			
		(a) 04/15/23	(b) 06/15/23	(c) 09/15/23	(d) 01/15/24
1a Enter your underpayment from Part III, Section A, line 17	1a	314	628	942	1,256
1b Date and amount of each payment applied to the underpayment in the same column. Don't enter more than the underpayment amount on line 1a for each column (see instructions). Note: Your payments are applied in the order made first to any underpayment balance in an earlier column until that underpayment is fully paid.	1b	06-15-2023 314	09-15-2023 628	01-15-2024 942	04-15-2024 1,256
Rate Period 1: April 16, 2023 - June 30, 2023					
2 Computation starting dates for this period	2	04/15/23	06/15/23		
3 Number of days from the date on line 2 to the date the amount on line 1a was paid or 6/30/23, whichever is earlier	3	Days: 61	Days: 15		
4 Underpayment on line 1a x $\frac{\text{Number of days on line 3}}{365} \times 0.07$	4	\$ 4	\$ 2		
Rate Period 2: July 1, 2023 - September 30, 2023					
5 Computation starting dates for this period	5	06/30/23	06/30/23	09/15/23	
6 Number of days from the date on line 5 to the date the amount on line 1a was paid or 9/30/23, whichever is earlier	6	Days: 77	Days: 15		
7 Underpayment on line 1a x $\frac{\text{Number of days on line 6}}{365} \times 0.07$	7	\$ 9	\$ 3		
Rate Period 3: October 1, 2023 - December 31, 2023					
8 Computation starting dates for this period	8	09/30/23	09/30/23	09/30/23	
9 Number of days from the date on line 8 to the date the amount on line 1a was paid or 12/31/23, whichever is earlier	9	Days: 92	Days: 15	Days: 15	
10 Underpayment on line 1a x $\frac{\text{Number of days on line 9}}{365} \times 0.08$	10	\$ 19	\$ 3	\$ 3	
Rate Period 4: January 1, 2024 - April 15, 2024					
11 Computation starting dates for this period	11	12/31/23	12/31/23	12/31/23	01/15/24
12 Number of days from the date on line 11 to the date the amount on line 1a was paid or 4/15/24, whichever is earlier	12	Days: 15	Days: 15	Days: 15	Days: 91
13 Underpayment on line 1a x $\frac{\text{Number of days on line 12}}{366} \times 0.08$	13	\$ 3	\$ 3	\$ 3	\$ 25
14 Penalty Add all amounts on lines 4, 7, 10, and 13 in all columns. Enter the total here and on line 19 of Part III, Section B	14	\$ 65			

**Qualified Business Income Deduction
Simplified Computation**

OMB No. 1545-2294

2023Department of the Treasury
Internal Revenue ServiceAttach to your tax return.
Go to www.irs.gov/Form8995 for instructions and the latest information.Attachment
Sequence No. **55**

Name(s) shown on return

Your taxpayer identification number

Rick V Crews**XXX-XX-XXXX**

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	Schedule C: Form 1099 from Double U Farms LLC	XXX-XX-XXXX	836
ii			
iii			
iv			
v			

2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2	836	5	167
3	Qualified business net (loss) carryforward from the prior year	3	()		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	836		
5	Qualified business income component. Multiply line 4 by 20% (0.20)	5			
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6	0	9	0
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7	()		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8	0		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)	9			
10	Qualified business income deduction before the income limitation. Add lines 5 and 9	10	167	14	16,897
11	Taxable income before qualified business income deduction (see instructions)	11	84,484		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12	0		
13	Subtract line 12 from line 11. If zero or less, enter -0-	13	84,484		
14	Income limitation. Multiply line 11 by 20% (0.20)	14		15	167
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)	15			
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-	16	(0)		
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-	17	(0)		

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

Form **8995** (2023)

EEA

Amount from Form 1040, line 11..... 98,334
 Amount from Form 1040, line 12..... 13,850

Line 11 above is the difference between these amounts..... 84,484

QBI Explanation Worksheet

Form 1040

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2023

Name(s) as shown on return

Tax ID Number

Rick V Crews

XXX-XX-XXXX

Name of business activity

Schedule C: Form 1099 from Double U Farms LLC

	As reported	As allowed on 1040 after limitations
1 Ordinary business income (loss)	900	900
2 Rental income (loss)		
3 Royalty income (loss)		
4 Section 1231 gain (loss)		
5 Other income (loss)		
6 Section 179 deduction		
7 Other deductions		
8 Deduction for half of SE tax		64
9 Self-employed health insurance deduction		
10 Self-employed pension deduction		
11 QBI amount carried to Form 8995 / 8995-A		836
12 W-2 wages carried to Form 8995 / 8995-A		
13 UBIA of qualified property carried to Form 8995 / 8995-A		
14 Section 199A REIT dividends		
15 199(A)(g) deduction		
16 QBI allocable to cooperative payments		
17 W-2 wages allocable to cooperative payments		

The income amount from line 11 will show on one of the following lines, depending on circumstances:

- ☒ Form 8995, line 1
- ☐ Form 8995-A, line 2
- ☐ Form 8995-A, Schedule A, line 2
- ☐ Form 8995-A, Schedule A, line 16
- ☐ Form 8995-A, Schedule B, line 3
- ☐ Form 8995-A, Schedule C, line 1

Note: The Tax Cuts and Jobs Act and the related proposed regulations state that losses or deductions that were disallowed, suspended, limited, or carried over from taxable years ending before January 1, 2018 (including under sections 465, 469, 704(d), and 1366(d)), are not taken into account in a later taxable year for purposes of computing QBI.

Carryover Worksheet
List of items that will carryover to the 2024 tax return

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2023

Name(s) as shown on return

Tax ID Number

Rick V Crews

XXX-XX-XXXX

Itemized Deductions

	Carryover Amount
Contributions subject to 100% of AGI limitations	
Contributions subject to 60% of AGI limitations	
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property)	
Contributions subject to 30% of AGI limitations	
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property)	
Taxable state and local refunds to Schedule 1 (Form 1040) line 1	
State/local taxes paid in 2024 to flow to the Schedule A	
State donations and contributions carryover	
State overpayment applied to next year	

Expenses

Office in home operating expenses	
Office in home excess casualty losses and depreciation	
Disallowed investment interest expense	AMT
Section 179 expense	Reg. Tax
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	

Losses

Short-term capital loss	AMT	Reg. Tax
Long-term capital loss	AMT	Reg. Tax
Net operating loss	AMT	Reg. Tax
Excess business loss from Form 461 (becomes part of NOL next year)	AMT	Reg. Tax
Qualified REIT and PTP loss carryover		
QBI loss carryover		
Nonrecaptured net section 1231 losses from WK_1231C	AMT	Reg. Tax

Credits

Mortgage interest credit	
Credit for prior year minimum tax	
Foreign Tax credit	AMT
District of Columbia first time home owner's credit	Reg. Tax
Residential clean energy credit	

Other

Preparer Fee	
Overpayment applied to next year's estimates	
Estimated Tax Payment 1	Estimated Tax Payment 2
Estimated Tax Payment 3	Estimated Tax Payment 4
Federal tax liability for 2210 calculation	
State tax liability for state 2210 calculation	13,986
IRA basis	Taxpayer
Disaster distributions taxable in 2024	Spouse
Disaster distributions taxable in 2025	Taxpayer
Excess repayments from 8815-R	Spouse

Passive Activity

At Risk Limitations

TAX RETURN COMPARISON
2021 / 2022 / 2023

2023

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Name(s) as shown on return

Identifying number

Rick V Crews

XXX-XX-XXXX

	2021	2022	2023	Difference 2022-2023
Filing Status	Single	Single	Single	
Number of Dependents				
Income				
Wages, salaries, tips, etc.	2,515	15,251	24,087	8,836
Taxable interest and dividends	45			
Taxable state and local refunds				
Alimony				
Business income (loss)	840	2,267	900	(1,367)
Gains (losses)				
Pensions and IRA distributions	82,914	57,143	51,408	(5,735)
Rent and royalty income (loss)				
Part, S-corps, trusts income (loss)				
Farm income (loss)				
Unemployment compensation				
Total SS benefits received		6,856	22,356	15,500
Taxable SS benefits		5,828	19,003	13,175
Other income (loss)	15,000	3,000	3,000	
Total Income	101,314	83,489	98,398	14,909
Adjusted Gross Income				
Half of self-employment tax	60	161	64	(97)
IRA deduction				
Other adjustments	7	2,106		(2,106)
Total Adjusted Gross Income	101,247	81,222	98,334	17,112
Deductions				
Medical deductions				
State and local taxes				
Interest				
Contributions				
Other deductions				
Total itemized deductions				
Standard deduction	12,550	12,950	13,850	900
Total deductions claimed	12,550	12,950	13,850	900
Qualified Business Income Deduction	156		167	167
Tax and Credits				
Taxable Income	88,541	68,272	84,317	16,045
Tax	15,267	10,638	13,859	3,221
Credits		300		(300)
Self-employment tax	119	321	127	(194)
Other taxes				
Total Tax	15,386	10,659	13,986	3,327
Payments				
Withholdings	15,253	8,783	9,403	620
Estimated tax payments				
Earned income credit				
Other payments and credits				
Estimated tax penalty		68	65	(3)
Overpayment				
Overpayment applied				
Refund				
Balance Due	133	1,944	4,648	2,704
Marginal tax rate	24.00	22.00	22.00	
Effective tax rate	17.24	15.58	16.44	0.86

Schedule C Comparison

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2023

Tax ID Number

XXX-XX-XXXX

Name of proprietor

Rick V Crews

Principal business:

Business name:

Form 1099 from Double U Farms LLC

	2022	2023	Difference
Income			
Gross Receipts or sales	2,442	1,080	(1,362)
Returns & allowances			
Cost of goods sold	2,442	1,080	(1,362)
Gross profit			
Other income	2,442	1,080	(1,362)
Gross income			
Expenses			
Advertising			
Car and truck expenses			
Commissions and fees			
Contract labor			
Depletion			
Depreciation & section 179			
Employee benefit programs			
Insurance			
Mortgage interest			
Other interest			
Legal & Professional services			
Office expense			
Pension & profit-sharing			
Rent or lease - machinery			
Rent or lease - other property			
Repairs & maintenance			
Supplies			
Taxes and licenses			
Travel			
Deductible meals			
Utilities			
Wages			
Other expenses			
Total expenses			
Business use of home	175	180	5
Net profit or (loss)			
	2,267	900	(1,367)
Allowed on return after Form 6198 and Form 8582 limitations	2,267	900	(1,367)