

<b>a</b> Employee's SSN XXX-XX-XXXX		<b>b</b> Employer ID No. (EIN) 22-1234567			OMB No. 1545-0008	
<b>c</b> Employer's name, address, and ZIP code DAVINCI RESIDENTIAL PAINTING INC.  1200 SISTINE CHAPEL DRIVE WACO TX 76701		<b>1</b> Wgs, tips, other compn 172579.15	<b>2</b> Fed inc tax withheld 17642.61	<b>3</b> Social security wages 132900.00		
		<b>4</b> SS tax withheld 8239.80	<b>5</b> Medicare wages & tips 183709.41	<b>6</b> Medicare tax withheld 2663.79		
		<b>7</b> Social security tips	<b>8</b> Allocated tips	<b>9</b>		
<b>d</b> Control No.		<b>10</b> Depdnt care benefits	<b>11</b> Nonqualified plans	<b>12a</b> D   24500.00		
<b>e</b> Employee's name, address, and ZIP code Suff.  JOHN HOMEOWNER 7 GALLOPING HILL ROAD DALLAS TX 75432		<b>13</b> Statutory employee.. <input type="checkbox"/>	<b>14</b> Other personal use 2756.79  s/h health 13369.74	<b>12b</b>		
		Retirement plan . . <input checked="" type="checkbox"/>		<b>12c</b>		
		Third-party sick pay <input type="checkbox"/>		<b>12d</b>		
<b>15</b> State	Employer's state ID number	<b>16</b> State wages, tips, etc	<b>17</b> State income tax	<b>18</b> Local wages, tips, etc	<b>19</b> Local income tax	<b>20</b> Locality name

Department of the Treasury — IRS

Form **W-2**  
**Wage and Tax Statement**  
**2019**

Copy B To Be Filed with Employee's FEDERAL Tax Return  
This information is being furnished to the Internal Revenue Service.

<b>a</b> Employee's SSN XXX-XX-XXXX		<b>b</b> Employer ID No. (EIN) 22-1234567			OMB No. 1545-0008	
<b>c</b> Employer's name, address, and ZIP code DAVINCI RESIDENTIAL PAINTING INC.  1200 SISTINE CHAPEL DRIVE WACO TX 76701		<b>1</b> Wgs, tips, other compn 172579.15	<b>2</b> Fed inc tax withheld 17642.61	<b>3</b> Social security wages 132900.00		
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		<b>7</b> Social security tips	<b>8</b> Allocated tips	<b>9</b>		
<b>d</b> Control No.		<b>10</b> Depdnt care benefits	<b>11</b> Nonqualified plans	<b>12a</b> D   24500.00		
<b>e</b> Employee's name, address, and ZIP code Suff.  JOHN HOMEOWNER 7 GALLOPING HILL ROAD DALLAS TX 75432		<b>13</b> Statutory employee.. <input type="checkbox"/>	<b>14</b> Other personal use 2756.79  s/h health 13369.74	<b>12b</b>		
		Retirement plan . . <input checked="" type="checkbox"/>		<b>12c</b>		
		Third-party sick pay <input type="checkbox"/>		<b>12d</b>		
<b>15</b> State	Employer's state ID No.	<b>16</b> State wages, tips, etc	<b>17</b> State income tax	<b>18</b> Local wages, tips, etc	<b>19</b> Local income tax	<b>20</b> Locality name

Form **W-2**  
**Wage and Tax Statement**  
**2019**

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

<b>a</b> Employee's SSN XXX-XX-XXXX		<b>b</b> Employer ID No. (EIN) 22-1234567			OMB No. 1545-0008	
<b>c</b> Employer's name, address, and ZIP code DAVINCI RESIDENTIAL PAINTING INC.  1200 SISTINE CHAPEL DRIVE WACO TX 76701		<b>1</b> Wgs, tips, other compn 172579.15	<b>2</b> Fed inc tax withheld 17642.61	<b>3</b> Social security wages 132900.00		
		<b>4</b> SS tax withheld 8239.80	<b>5</b> Medicare wages & tips 183709.41	<b>6</b> Medicare tax withheld 2663.79		
		<b>7</b> Social security tips	<b>8</b> Allocated tips	<b>9</b>		
<b>d</b> Control No.		<b>10</b> Depdnt care benefits	<b>11</b> Nonqualified plans	<b>12a</b> D   24500.00		
<b>e</b> Employee's name, address, and ZIP code Suff.  JOHN HOMEOWNER 7 GALLOPING HILL ROAD DALLAS TX 75432		<b>13</b> Statutory employee.. <input type="checkbox"/>	<b>14</b> Other personal use 2756.79  s/h health 13369.74	<b>12b</b>		
		Retirement plan . . <input checked="" type="checkbox"/>		<b>12c</b>		
		Third-party sick pay <input type="checkbox"/>		<b>12d</b>		
<b>15</b> State	Employer's state ID No.	<b>16</b> State wages, tips, etc	<b>17</b> State income tax	<b>18</b> Local wages, tips, etc	<b>19</b> Local income tax	<b>20</b> Locality name

Form **W-2**  
**Wage and Tax Statement**  
**2019**

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

**Filing Status**  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)  
 Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. ▶

Your first name and middle initial <b>John</b>	Last name <b>Homeowner</b>	<b>Your social security number</b> XXX-XX-XXXX
If joint return, spouse's first name and middle initial <b>Mary</b>	Last name <b>Homeowner</b>	<b>Spouse's social security number</b> XXX-XX-XXXX
Home address (number and street). If you have a P.O. box, see instructions. <b>7 Galloping Hill Road</b>		Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>Dallas TX 75432</b>		<b>Presidential Election Campaign</b> 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. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name	Foreign province/state/county	Foreign postal code

**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, 1955  Are blind **Spouse:**  Was born before January 2, 1955  Is blind

<b>Dependents</b> (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

**Standard Deduction for—**  
 • Single or Married filing separately, \$12,200  
 • Married filing jointly or Qualifying widow(er), \$24,400  
 • Head of household, \$18,350  
 • If you checked any box under **Standard Deduction**, see instructions.

<b>1</b> Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . .		<b>1</b> 172,579.
<b>2a</b> Tax-exempt interest . . . . .	<b>2a</b>	<b>2b</b> 1,987.
<b>3a</b> Qualified dividends . . . . .	<b>3a</b>	<b>3b</b>
<b>4a</b> IRA distributions . . . . .	<b>4a</b>	<b>4b</b>
<b>c</b> Pensions and annuities . . . . .	<b>4c</b>	<b>4d</b>
<b>5a</b> Social security benefits . . . . .	<b>5a</b>	<b>5b</b>
<b>6</b> Capital gain or (loss). Attach Schedule D if required. If not required, check here . . . . .		<b>6</b> -3,000.
<b>7a</b> Other income from Schedule 1, line 9 . . . . .		<b>7a</b> 287,399.
<b>b</b> Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your <b>total income</b> . . . . .		<b>7b</b> 458,965.
<b>8a</b> Adjustments to income from Schedule 1, line 22 . . . . .		<b>8a</b> 7,487.
<b>b</b> Subtract line 8a from line 7b. This is your <b>adjusted gross income</b> . . . . .		<b>8b</b> 451,478.
<b>9</b> <b>Standard deduction or itemized deductions</b> (from Schedule A) . . . . .	<b>9</b> 63,332.	
<b>10</b> Qualified business income deduction. Attach Form 8995 or Form 8995-A . . . . .	<b>10</b> 28,523.	
<b>11a</b> Add lines 9 and 10 . . . . .		<b>11a</b> 91,855.
<b>b</b> <b>Taxable income.</b> Subtract line 11a from line 8b. If zero or less, enter -0- . . . . .		<b>11b</b> 359,623.

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

<b>12a</b>	<b>Tax</b> (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	<b>12a</b>	77,712.	
<b>b</b>	Add Schedule 2, line 3, and line 12a and enter the total			<b>12b</b> 77,712.
<b>13a</b>	Child tax credit or credit for other dependents	<b>13a</b>		
<b>b</b>	Add Schedule 3, line 7, and line 13a and enter the total			<b>13b</b> 1,872.
<b>14</b>	Subtract line 13b from line 12b. If zero or less, enter -0-			<b>14</b> 75,840.
<b>15</b>	Other taxes, including self-employment tax, from Schedule 2, line 10			<b>15</b> 15,781.
<b>16</b>	Add lines 14 and 15. This is your <b>total tax</b>			<b>16</b> 91,621.
<b>17</b>	Federal income tax withheld from Forms W-2 and 1099			<b>17</b> 17,643.
<b>18</b>	Other payments and refundable credits:			
<b>a</b>	Earned income credit (EIC) . . . . . <b>No</b>	<b>18a</b>		
<b>b</b>	Additional child tax credit. Attach Schedule 8812	<b>18b</b>		
<b>c</b>	American opportunity credit from Form 8863, line 8	<b>18c</b>		
<b>d</b>	Schedule 3, line 14	<b>18d</b>		
<b>e</b>	Add lines 18a through 18d. These are your <b>total other payments and refundable credits</b>			<b>18e</b>
<b>19</b>	Add lines 17 and 18e. These are your <b>total payments</b>			<b>19</b> 17,643.

• If you have a qualifying child, attach Sch. EIC.  
 • If you have nontaxable combat pay, see instructions.

**Refund**

<b>20</b>	If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you <b>overpaid</b>	<b>20</b>																					
<b>21a</b>	Amount of line 20 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>21a</b>																					
<b>b</b>	Routing number <table border="1"><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table> <b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
<b>d</b>	Account number <table border="1"><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
<b>22</b>	Amount of line 20 you want <b>applied to your 2020 estimated tax</b>	<b>22</b>																					

**Amount You Owe**

<b>23</b>	<b>Amount you owe.</b> Subtract line 19 from line 16. For details on how to pay, see instructions	<b>23</b>	75,734.
<b>24</b>	Estimated tax penalty (see instructions)	<b>24</b>	1,756.

**Third Party Designee**

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions.  **Yes.** Complete below.  **No**

(Other than paid preparer) 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 owner	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation owner	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
Phone no.	Email address		

**Paid Preparer Use Only**

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
Firm's name <input type="text"/> <b>Self-Prepared</b>	Phone no.			
Firm's address <input type="text"/>	Firm's EIN <input type="text"/>			

**SCHEDULE 1**  
**(Form 1040 or 1040-SR)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

▶ **Attach to Form 1040 or 1040-SR.**  
▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

OMB No. 1545-0074

**2019**  
Attachment  
Sequence No. **01**

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

John & Mary Homeowner

Your social security number

XXX-XX-XXXX

At any time during 2019, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?  Yes  No

**Part I Additional Income**

<b>1</b>	Taxable refunds, credits, or offsets of state and local income taxes . . . . .	<b>1</b>	
<b>2a</b>	Alimony received . . . . .	<b>2a</b>	
<b>b</b>	Date of original divorce or separation agreement (see instructions) ▶ _____		
<b>3</b>	Business income or (loss). Attach Schedule C . . . . .	<b>3</b>	77,770.
<b>4</b>	Other gains or (losses). Attach Form 4797 . . . . .	<b>4</b>	
<b>5</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . . . .	<b>5</b>	209,629.
<b>6</b>	Farm income or (loss). Attach Schedule F . . . . .	<b>6</b>	
<b>7</b>	Unemployment compensation . . . . .	<b>7</b>	
<b>8</b>	Other income. List type and amount ▶ _____	<b>8</b>	
<b>9</b>	Combine lines 1 through 8. Enter here and on Form 1040 or 1040-SR, line 7a . . . . .	<b>9</b>	287,399.

**Part II Adjustments to Income**

<b>10</b>	Educator expenses . . . . .	<b>10</b>	
<b>11</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .	<b>11</b>	
<b>12</b>	Health savings account deduction. Attach Form 8889 . . . . .	<b>12</b>	
<b>13</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .	<b>13</b>	
<b>14</b>	Deductible part of self-employment tax. Attach Schedule SE . . . . .	<b>14</b>	7,487.
<b>15</b>	Self-employed SEP, SIMPLE, and qualified plans . . . . .	<b>15</b>	
<b>16</b>	Self-employed health insurance deduction . . . . .	<b>16</b>	
<b>17</b>	Penalty on early withdrawal of savings . . . . .	<b>17</b>	
<b>18a</b>	Alimony paid . . . . .	<b>18a</b>	
<b>b</b>	Recipient's SSN . . . . . ▶ _____		
<b>c</b>	Date of original divorce or separation agreement (see instructions) ▶ _____		
<b>19</b>	IRA deduction . . . . .	<b>19</b>	
<b>20</b>	Student loan interest deduction . . . . .	<b>20</b>	
<b>21</b>	Tuition and fees. Attach Form 8917 . . . . .	<b>21</b>	
<b>22</b>	Add lines 10 through 21. These are your <b>adjustments to income</b> . Enter here and on Form 1040 or 1040-SR, line 8a . . . . .	<b>22</b>	7,487.

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

REV 02/23/20 TTW

Schedule 1 (Form 1040 or 1040-SR) 2019

**SCHEDULE 2**  
**(Form 1040 or 1040-SR)**

Department of the Treasury  
Internal Revenue Service

**Additional Taxes**

▶ **Attach to Form 1040 or 1040-SR.**

▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

OMB No. 1545-0074

**2019**  
Attachment  
Sequence No. **02**

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

John & Mary Homeowner

Your social security number

XXX-XX-XXXX

**Part I Tax**

<b>1</b>	Alternative minimum tax. Attach Form 6251 . . . . .	<b>1</b>	0.
<b>2</b>	Excess advance premium tax credit repayment. Attach Form 8962 . . . . .	<b>2</b>	
<b>3</b>	Add lines 1 and 2. Enter here and include on Form 1040 or 1040-SR, line 12b . . . . .	<b>3</b>	0.

**Part II Other Taxes**

<b>4</b>	Self-employment tax. Attach Schedule SE . . . . .	<b>4</b>	14,973.
<b>5</b>	Unreported social security and Medicare tax from Form: <b>a</b> <input type="checkbox"/> 4137 <b>b</b> <input type="checkbox"/> 8919 . . . . .	<b>5</b>	
<b>6</b>	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required . . . . .	<b>6</b>	
<b>7a</b>	Household employment taxes. Attach Schedule H . . . . .	<b>7a</b>	
<b>b</b>	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required . . . . .	<b>7b</b>	
<b>8</b>	Taxes from: <b>a</b> <input checked="" type="checkbox"/> Form 8959 <b>b</b> <input type="checkbox"/> Form 8960 <b>c</b> <input type="checkbox"/> Instructions; enter code(s) _____	<b>8</b>	808.
<b>9</b>	Section 965 net tax liability installment from Form 965-A . . . . .	<b>9</b>	
<b>10</b>	Add lines 4 through 8. These are your <b>total other taxes</b> . Enter here and on Form 1040 or 1040-SR, line 15 . . . . .	<b>10</b>	15,781.

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

REV 02/23/20 TTW

Schedule 2 (Form 1040 or 1040-SR) 2019

**SCHEDULE 3**  
**(Form 1040 or 1040-SR)**

Department of the Treasury  
Internal Revenue Service

**Additional Credits and Payments**

▶ **Attach to Form 1040 or 1040-SR.**  
▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

OMB No. 1545-0074

**2019**  
Attachment  
Sequence No. **03**

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

John & Mary Homeowner

Your social security number

XXX-XX-XXXX

**Part I Nonrefundable Credits**

<b>1</b>	Foreign tax credit. Attach Form 1116 if required . . . . .	<b>1</b>	
<b>2</b>	Credit for child and dependent care expenses. Attach Form 2441 . . . . .	<b>2</b>	
<b>3</b>	Education credits from Form 8863, line 19 . . . . .	<b>3</b>	
<b>4</b>	Retirement savings contributions credit. Attach Form 8880 . . . . .	<b>4</b>	
<b>5</b>	Residential energy credits. Attach Form 5695 . . . . .	<b>5</b>	
<b>6</b>	Other credits from Form: <b>a</b> <input checked="" type="checkbox"/> 3800 <b>b</b> <input type="checkbox"/> 8801 <b>c</b> <input type="checkbox"/> _____	<b>6</b>	1,872.
<b>7</b>	Add lines 1 through 6. Enter here and include on Form 1040 or 1040-SR, line 13b . . . . .	<b>7</b>	1,872.

**Part II Other Payments and Refundable Credits**

<b>8</b>	2019 estimated tax payments and amount applied from 2018 return . . . . .	<b>8</b>	
<b>9</b>	Net premium tax credit. Attach Form 8962 . . . . .	<b>9</b>	
<b>10</b>	Amount paid with request for extension to file (see instructions) . . . . .	<b>10</b>	
<b>11</b>	Excess social security and tier 1 RRTA tax withheld . . . . .	<b>11</b>	
<b>12</b>	Credit for federal tax on fuels. Attach Form 4136 . . . . .	<b>12</b>	
<b>13</b>	Credits from Form: <b>a</b> <input type="checkbox"/> 2439 <b>b</b> <input checked="" type="checkbox"/> Reserved <b>c</b> <input type="checkbox"/> 8885 <b>d</b> <input type="checkbox"/> _____	<b>13</b>	
<b>14</b>	Add lines 8 through 13. Enter here and on Form 1040 or 1040-SR, line 18d . . . . .	<b>14</b>	

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

REV 02/23/20 TTW

Schedule 3 (Form 1040 or 1040-SR) 2019

**Itemized Deductions**

▶ Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.

▶ Attach to Form 1040 or 1040-SR.

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

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

John & Mary Homeowner

Your social security number

XXX-XX-XXXX

Section	Description	Line	Amount	Total
<b>Medical and Dental Expenses</b>	<b>Caution:</b> Do not include expenses reimbursed or paid by others.			
	1 Medical and dental expenses (see instructions)	1	0.	
	2 Enter amount from Form 1040 or 1040-SR, line 8b	2	451,478.	
	3 Multiply line 2 by 7.5% (0.075)	3	33,861.	
	4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4		
<b>Taxes You Paid</b>	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 <input type="checkbox"/>	5a		
	b State and local real estate taxes (see instructions)	5b	12,455.	
	c State and local personal property taxes	5c		
	d Add lines 5a through 5c	5d	12,455.	
	e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	5e	10,000.	
	6 Other taxes. List type and amount ▶	6		
7 Add lines 5e and 6	7		10,000.	
<b>Interest You Paid</b>	<b>Caution:</b> 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 <input type="checkbox"/>			
	a Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	21,422.	
	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 ▶	8b		
	c Points not reported to you on Form 1098. See instructions for special rules	8c		
	d Mortgage insurance premiums (see instructions)	8d		
	e Add lines 8a through 8d	8e	21,422.	
9 Investment interest. Attach Form 4952 if required. See instructions.	9			
10 Add lines 8e and 9	10		21,422.	
<b>Gifts to Charity</b>	<b>Caution:</b> 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	11	31,910.	
	12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500.	12		
	13 Carryover from prior year	13		
14 Add lines 11 through 13	14		31,910.	
<b>Casualty and Theft Losses</b>	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		
<b>Other Itemized Deductions</b>	16 Other—from list in instructions. List type and amount ▶	16		
<b>Total Itemized Deductions</b>	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 9	17		63,332.
	18 If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>			

**SCHEDULE B**  
**(Form 1040 or 1040-SR)**

**Interest and Ordinary Dividends**

OMB No. 1545-0074

**2019**  
Attachment  
Sequence No. **08**

Department of the Treasury  
Internal Revenue Service (99)

► Go to [www.irs.gov/ScheduleB](http://www.irs.gov/ScheduleB) for instructions and the latest information.  
► Attach to Form 1040 or 1040-SR.

Name(s) shown on return

John & Mary Homeowner

Your social security number

XXX-XX-XXXX

**Part I**  
**Interest**

(See instructions and the instructions for Forms 1040 and 1040-SR, line 2b.)

**Note:** If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

**1** List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ►

Community Bank  
American Credit Union

**Amount**

988.  
999.

**1**

**2** Add the amounts on line 1 . . . . .  
**3** Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 . . . . .  
**4** Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b . . . . . ►

1,987.  
  
1,987.

**2**  
**3**  
**4**

**Note:** If line 4 is over \$1,500, you must complete Part III.

**Amount**

**Part II**  
**Ordinary Dividends**

(See instructions and the instructions for Forms 1040 and 1040-SR, line 3b.)

**Note:** If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

**5** List name of payer ►

**5**

**6** Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b . . . . . ►

**6**

**Note:** If line 6 is over \$1,500, you must complete Part III.

**Part III**

You must complete this part if you **(a)** had over \$1,500 of taxable interest or ordinary dividends; **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

**Yes No**

**Foreign Accounts and Trusts**

**7a** At any time during 2019, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions . . . . .

X

**Caution:** If required, failure to file FinCEN Form 114 may result in substantial penalties. See instructions.

If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements . . . . .

**b** If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ►

**8** During 2019, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions . . . . .

X



**SCHEDULE C**  
**(Form 1040 or 1040-SR)**

**Profit or Loss From Business**  
**(Sole Proprietorship)**

OMB No. 1545-0074

**2019**  
Attachment  
Sequence No. **09**

Department of the Treasury  
Internal Revenue Service (99)

▶ Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

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

Name of proprietor <b>John Homeowner</b>		Social security number (SSN) <b>XXX-XX-XXXX</b>
<b>A</b> Principal business or profession, including product or service (see instructions) <b>Photographer</b>	<b>B</b> Enter code from instructions ▶ <b>5 6 1 6 0 0</b>	
<b>C</b> Business name. If no separate business name, leave blank. <b>Impressive Images</b>	<b>D</b> Employer ID number (EIN) (see instr.)	
<b>E</b> Business address (including suite or room no.) ▶ <b>7 Galloping Hill Road</b> City, town or post office, state, and ZIP code <b>Dallas, TX 75432</b>		
<b>F</b> Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶		
<b>G</b> Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses . . . . .		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>H</b> If you started or acquired this business during 2019, check here . . . . .		<input type="checkbox"/>
<b>I</b> Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>J</b> If "Yes," did you or will you file required Forms 1099? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part I Income**

<b>1</b> 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 . . . . .	<b>1</b>	149,655.
<b>2</b> Returns and allowances . . . . .	<b>2</b>	
<b>3</b> Subtract line 2 from line 1 . . . . .	<b>3</b>	149,655.
<b>4</b> Cost of goods sold (from line 42) . . . . .	<b>4</b>	
<b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3 . . . . .	<b>5</b>	149,655.
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .	<b>6</b>	5,111.
<b>7</b> <b>Gross income.</b> Add lines 5 and 6 . . . . .	<b>7</b>	154,766.

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

<b>8</b> Advertising . . . . .	<b>8</b>	9,651.	<b>18</b> Office expense (see instructions)	<b>18</b>	
<b>9</b> Car and truck expenses (see instructions). . . . .	<b>9</b>	19,648.	<b>19</b> Pension and profit-sharing plans . . . . .	<b>19</b>	
<b>10</b> Commissions and fees . . . . .	<b>10</b>		<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions)	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment	<b>20a</b>	
<b>12</b> Depletion . . . . .	<b>12</b>		<b>b</b> Other business property . . . . .	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions). . . . .	<b>13</b>	2,831.	<b>21</b> Repairs and maintenance . . . . .	<b>21</b>	
<b>14</b> Employee benefit programs (other than on line 19) . . . . .	<b>14</b>		<b>22</b> Supplies (not included in Part III) . . . . .	<b>22</b>	5,334.
<b>15</b> Insurance (other than health)	<b>15</b>		<b>23</b> Taxes and licenses . . . . .	<b>23</b>	850.
<b>16</b> Interest (see instructions):			<b>24</b> Travel and meals:		
<b>a</b> Mortgage (paid to banks, etc.)	<b>16a</b>		<b>a</b> Travel . . . . .	<b>24a</b>	14,963.
<b>b</b> Other . . . . .	<b>16b</b>		<b>b</b> Deductible meals (see instructions) . . . . .	<b>24b</b>	6,061.
<b>17</b> Legal and professional services	<b>17</b>	1,799.	<b>25</b> Utilities . . . . .	<b>25</b>	4,110.
<b>28</b> <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27a . . . . .	<b>28</b>		<b>26</b> Wages (less employment credits) . . . . .	<b>26</b>	
<b>29</b> Tentative profit or (loss). Subtract line 28 from line 7 . . . . .	<b>29</b>		<b>27a</b> Other expenses (from line 48) . . . . .	<b>27a</b>	11,749.
<b>30</b> Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). <b>Simplified method filers only:</b> enter the total square footage of: (a) your home: <u>4200</u> and (b) the part of your home used for business: <u>300</u> . Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . .	<b>30</b>		<b>27b</b> <b>Reserved for future use</b> . . . . .	<b>27b</b>	
<b>31</b> <b>Net profit or (loss).</b> Subtract line 30 from line 29. • If a profit, enter on both <b>Schedule 1 (Form 1040 or 1040-SR), line 3</b> (or <b>Form 1040-NR, line 13</b> ) and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see instructions). Estates and trusts, enter on <b>Form 1041, line 3</b> . • If a loss, you <b>must</b> go to line 32.	<b>31</b>				77,770.
<b>32</b> 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 <b>Schedule 1 (Form 1040 or 1040-SR), line 3</b> (or <b>Form 1040-NR, line 13</b> ) and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on <b>Form 1041, line 3</b> . • If you checked 32b, you <b>must</b> attach <b>Form 6198</b> . Your loss may be limited.					
			<b>32a</b> <input type="checkbox"/> All investment is at risk.		
			<b>32b</b> <input type="checkbox"/> Some investment is not at risk.		

**Part III Cost of Goods Sold** (see instructions)

**33** Method(s) used to value closing inventory:    **a**  Cost    **b**  Lower of cost or market    **c**  Other (attach explanation)

**34** Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  
If "Yes," attach explanation . . . . .  **Yes**     **No**

<b>35</b> Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . .	<b>35</b>	
<b>36</b> Purchases less cost of items withdrawn for personal use . . . . .	<b>36</b>	
<b>37</b> Cost of labor. Do not include any amounts paid to yourself . . . . .	<b>37</b>	
<b>38</b> Materials and supplies . . . . .	<b>38</b>	
<b>39</b> Other costs . . . . .	<b>39</b>	
<b>40</b> Add lines 35 through 39 . . . . .	<b>40</b>	
<b>41</b> Inventory at end of year . . . . .	<b>41</b>	
<b>42</b> <b>Cost of goods sold.</b> Subtract line 41 from line 40. Enter the result here and on line 4 . . . . .	<b>42</b>	

**Part IV Information on Your Vehicle.** Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

**43** When did you place your vehicle in service for business purposes? (month, day, year)    ▶ .....

**44** Of the total number of miles you drove your vehicle during 2019, enter the number of miles you used your vehicle for:

**a** Business .....    **b** Commuting (see instructions) .....    **c** Other .....

**45** Was your vehicle available for personal use during off-duty hours? . . . . .  **Yes**     **No**

**46** Do you (or your spouse) have another vehicle available for personal use?. . . . .  **Yes**     **No**

**47a** Do you have evidence to support your deduction? . . . . .  **Yes**     **No**

**b** If "Yes," is the evidence written? . . . . .  **Yes**     **No**

**Part V Other Expenses.** List below business expenses not included on lines 8–26 or line 30.

Shipping & Postage		1,433.
Outside Services		3,887.
Amortization		1,200.
Printing		3,474.
Casualty Loss/Theft Claim		1,755.
<b>48</b> <b>Total other expenses.</b> Enter here and on line 27a . . . . .	<b>48</b>	11,749.

**SCHEDULE D**  
**(Form 1040 or 1040-SR)**

**Capital Gains and Losses**

OMB No. 1545-0074

**2019**

Attachment  
Sequence No. **12**

Department of the Treasury  
Internal Revenue Service (99)

▶ **Attach to Form 1040, 1040-SR, or 1040-NR.**  
▶ **Go to [www.irs.gov/ScheduleD](http://www.irs.gov/ScheduleD) for instructions and the latest information.**  
▶ **Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.**

Name(s) shown on return  
**John & Mary Homeowner**

Your social security number  
**XXX-XX-XXXX**

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?  **Yes**  **No**  
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				<b>5</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				<b>6</b> ( 10,554. )
<b>7 Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . .				<b>7</b> -10,554.

**Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year** (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked. . . . .				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				<b>12</b>
<b>13</b> Capital gain distributions. See the instructions . . . . .				<b>13</b>
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				<b>14</b> ( )
<b>15 Net long-term capital gain or (loss).</b> Combine lines 8a through 14 in column (h). Then go to Part III on the back . . . . .				<b>15</b>

**Part III Summary**

<p><b>16</b> Combine lines 7 and 15 and enter the result . . . . .</p> <ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 22.</li> </ul>	<b>16</b>	-10,554.
<p><b>17</b> Are lines 15 and 16 <b>both</b> gains?</p> <p><input type="checkbox"/> <b>Yes.</b> Go to line 18.</p> <p><input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.</p>		
<p><b>18</b> If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . ▶</p>	<b>18</b>	
<p><b>19</b> If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet . . . . . ▶</p>	<b>19</b>	
<p><b>20</b> Are lines 18 and 19 <b>both</b> zero or blank?</p> <p><input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). <b>Don't</b> complete lines 21 and 22 below.</p> <p><input type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.</p>		
<p><b>21</b> If line 16 is a loss, enter here and on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14, the <b>smaller</b> of:</p> <ul style="list-style-type: none"> <li>• The loss on line 16; or</li> <li>• (\$3,000), or if married filing separately, (\$1,500) } . . . . .</li> </ul> <p><b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.</p>	<b>21</b>	( 3,000. )
<p><b>22</b> Do you have qualified dividends on Form 1040 or 1040-SR, line 3a; or Form 1040-NR, line 10b?</p> <p><input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42).</p> <p><input checked="" type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.</p>		

**SCHEDULE E**  
**(Form 1040 or 1040-SR)**

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

**2019**  
Attachment  
Sequence No. **13**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

▶ Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

Name(s) shown on return

John & Mary Homeowner

Your social security number

XXX-XX-XXXX

**Part I** **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use **Schedule C** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

**A** Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) . . . . .  Yes  No

**B** If "Yes," did you or will you file required Forms 1099? . . . . .  Yes  No

<b>1a</b>	Physical address of each property (street, city, state, ZIP code)				
<b>A</b>	234C Condo Court Dallas TX 75432				
<b>B</b>					
<b>C</b>					
<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	1		365	0	<input type="checkbox"/>
<b>B</b>					<input type="checkbox"/>
<b>C</b>					<input type="checkbox"/>

**Type of Property:**

- 1 Single Family Residence      3 Vacation/Short-Term Rental      5 Land      7 Self-Rental
- 2 Multi-Family Residence      4 Commercial      6 Royalties      8 Other (describe)

Income:		Properties:	A	B	C
<b>3</b>	Rents received . . . . .	<b>3</b>	33,199.		
<b>4</b>	Royalties received . . . . .	<b>4</b>			
<b>Expenses:</b>					
<b>5</b>	Advertising . . . . .	<b>5</b>			
<b>6</b>	Auto and travel (see instructions) . . . . .	<b>6</b>			
<b>7</b>	Cleaning and maintenance . . . . .	<b>7</b>	2,220.		
<b>8</b>	Commissions. . . . .	<b>8</b>			
<b>9</b>	Insurance . . . . .	<b>9</b>	2,011.		
<b>10</b>	Legal and other professional fees . . . . .	<b>10</b>	500.		
<b>11</b>	Management fees . . . . .	<b>11</b>	850.		
<b>12</b>	Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>	8,000.		
<b>13</b>	Other interest. . . . .	<b>13</b>			
<b>14</b>	Repairs. . . . .	<b>14</b>	3,911.		
<b>15</b>	Supplies . . . . .	<b>15</b>	1,877.		
<b>16</b>	Taxes . . . . .	<b>16</b>	9,422.		
<b>17</b>	Utilities. . . . .	<b>17</b>	2,233.		
<b>18</b>	Depreciation expense or depletion . . . . .	<b>18</b>	7,127.		
<b>19</b>	Other (list) ▶ Association Dues	<b>19</b>	2,998.		
<b>20</b>	Total expenses. Add lines 5 through 19 . . . . .	<b>20</b>	41,149.		
<b>21</b>	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b> . . . . .	<b>21</b>	-7,950.		
<b>22</b>	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) . . . . .	<b>22</b>	( 0. )	( )	( )
<b>23a</b>	Total of all amounts reported on line 3 for all rental properties . . . . .	<b>23a</b>		33,199.	
<b>b</b>	Total of all amounts reported on line 4 for all royalty properties . . . . .	<b>23b</b>			
<b>c</b>	Total of all amounts reported on line 12 for all properties . . . . .	<b>23c</b>		8,000.	
<b>d</b>	Total of all amounts reported on line 18 for all properties . . . . .	<b>23d</b>		7,127.	
<b>e</b>	Total of all amounts reported on line 20 for all properties . . . . .	<b>23e</b>		41,149.	
<b>24</b>	<b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses . . . . .	<b>24</b>			
<b>25</b>	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .	<b>25</b>	( 0. )		
<b>26</b>	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040 or 1040-SR), line 5, or Form 1040-NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . . . . .	<b>26</b>			0.

For Paperwork Reduction Act Notice, see the separate instructions.

BAA REV 02/23/20 TTW

Schedule E (Form 1040 or 1040-SR) 2019

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

John & Mary Homeowner

XXX-XX-XXXX

**Caution:** The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

**Part II Income or Loss From Partnerships and S Corporations** – Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you **must** check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column (f) on line 28 and attach **Form 6198** (see instructions).

**27** Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section . . . . .  Yes  No

<b>28</b>	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
<b>A</b>	Rehab Addict LLC	P	<input type="checkbox"/>	46-1234567	<input type="checkbox"/>	<input type="checkbox"/>
<b>B</b>	DaVinci Residential Painting Inc.	S	<input type="checkbox"/>	22-1234567	<input type="checkbox"/>	<input type="checkbox"/>
<b>C</b>			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<b>D</b>			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Passive Income and Loss		Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
<b>A</b>				91,230.
<b>B</b>			14,189.	132,588.
<b>C</b>				
<b>D</b>				
<b>29a</b> Totals				223,818.
<b>b</b> Totals			14,189.	
<b>30</b> Add columns (h) and (k) of line 29a.				<b>30</b> 223,818.
<b>31</b> Add columns (g), (i), and (j) of line 29b.				<b>31</b> ( 14,189. )
<b>32</b> Total partnership and S corporation income or (loss). Combine lines 30 and 31				<b>32</b> 209,629.

**Part III Income or Loss From Estates and Trusts**

<b>33</b>	(a) Name	(b) Employer identification number
<b>A</b>		
<b>B</b>		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
<b>A</b>			
<b>B</b>			
<b>34a</b> Totals			
<b>b</b> Totals			
<b>35</b> Add columns (d) and (f) of line 34a			<b>35</b>
<b>36</b> Add columns (c) and (e) of line 34b			<b>36</b> ( )
<b>37</b> Total estate and trust income or (loss). Combine lines 35 and 36			<b>37</b>

**Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) – Residual Holder**

<b>38</b>	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
<b>39</b>	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				<b>39</b>

**Part V Summary**

<b>40</b>	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below . . . . .	<b>40</b>	
<b>41</b>	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040 or 1040-SR), line 5, or Form 1040-NR, line 18▶	<b>41</b>	209,629.
<b>42</b>	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AC; and Schedule K-1 (Form 1041), box 14, code F (see instructions) . . . . .	<b>42</b>	
<b>43</b>	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules . . . . .	<b>43</b>	

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service (99)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Table with 3 columns: Name(s) shown on return, Business or activity to which this form relates, Identifying number. Values: John & Mary Homeowner, Section 179 Summary, XXX-XX-XXXX

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 columns: Line number, Description, Column (b) Cost, Column (c) Elected cost, Amount. Includes lines 1-13 for property election details.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

Table with 2 columns: Line number, Amount. Includes lines 14-16 for special depreciation allowance.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

Table with 2 columns: Line number, Amount. Includes lines 17-18 for MACRS deductions.

Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows 19a-i for various property types.

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

Table with 7 columns: (a) Class life, (b) Recovery period, (c) Convention, (d) Method, (e) Depreciation deduction. Includes rows 20a-d for class life categories.

Part IV Summary (See instructions.)

Table with 2 columns: Line number, Amount. Includes lines 21-23 for summary calculations.

**Depreciation and Amortization**  
(Including Information on Listed Property)

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.  
▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Name(s) shown on return <b>John &amp; Mary Homeowner</b>	Business or activity to which this form relates <b>Sch C Photographer</b>	Identifying number <b>XXX-XX-XXXX</b>
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**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions) . . . . .	<b>1</b>	1,020,000.
2 Total cost of section 179 property placed in service (see instructions) . . . . .	<b>2</b>	
3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	<b>3</b>	2,550,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	<b>4</b>	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	<b>5</b>	
<b>6</b> (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29 . . . . .	<b>7</b>	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 . . . . .	<b>8</b>	
9 Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8 . . . . .	<b>9</b>	
10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 . . . . .	<b>10</b>	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions . . . . .	<b>11</b>	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . . . . .	<b>12</b>	
13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12 ▶ . . . . .	<b>13</b>	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions . . . . .	<b>14</b>	
15 Property subject to section 168(f)(1) election . . . . .	<b>15</b>	
16 Other depreciation (including ACRS) . . . . .	<b>16</b>	

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2019 . . . . .	<b>17</b>	2,260.
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . . <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
<b>19a</b> 3-year property						
<b>b</b> 5-year property						
<b>c</b> 7-year property		3,996.	7.0	HY	200 DB	571.
<b>d</b> 10-year property						
<b>e</b> 15-year property						
<b>f</b> 20-year property						
<b>g</b> 25-year property			25 yrs.		S/L	
<b>h</b> Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
<b>i</b> Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System**

<b>20a</b> Class life						
<b>b</b> 12-year			12 yrs.		S/L	
<b>c</b> 30-year			30 yrs.	MM	S/L	
<b>d</b> 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21 Listed property. Enter amount from line 28 . . . . .	<b>21</b>	
22 <b>Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions . . . . .	<b>22</b>	2,831.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	<b>23</b>	



**Part V Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed?  **Yes**  **No** **24b** If "Yes," is the evidence written?  **Yes**  **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions .						<b>25</b>		
<b>26</b> Property used more than 50% in a qualified business use:								
Range Rover	01/03/2015	67.32 %						
		%						
		%						
<b>27</b> Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .						<b>28</b>		
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1 . . . . .							<b>29</b>	

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>30</b> Total business/investment miles driven during the year ( <b>don't</b> include commuting miles) . . . . .	7,554											
<b>31</b> Total commuting miles driven during the year . . . . .												
<b>32</b> Total other personal (noncommuting) miles driven . . . . .	3,667											
<b>33</b> Total miles driven during the year. Add lines 30 through 32 . . . . .	11,221											
<b>34</b> Was the vehicle available for personal use during off-duty hours? . . . . .	X											
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? . . . . .	X											
<b>36</b> Is another vehicle available for personal use? . . . . .	X											

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons. See instructions.

	Yes	No
<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? . . . . .		
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . . .		
<b>39</b> Do you treat all use of vehicles by employees as personal use? . . . . .		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? . . . . .		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? See instructions. . . . .		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2019 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2019 tax year . . . . .				<b>43</b>	
<b>44 Total.</b> Add amounts in column (f). See the instructions for where to report . . . . .					<b>44</b>

# Car and Truck Expenses Worksheet

**2019**

▶ Keep for your records

Name(s) Shown on Return <u>John &amp; Mary Homeowner</u>	Social Security Number <u>XXX-XX-XXXX</u>
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Activity: Sch C Photographer

## Part I – Vehicle Information

1	Make and model of vehicle . . . . .	<u>Range Rover</u>	Example: Ford Taurus
2	Date vehicle acquired . . . . .	<u>01/03/2015</u>	If converted from personal use
3	Date placed in service . . . . .	<u>01/03/2015</u>	Example: 06/15/2019
4	Type of vehicle . . . . .	<u>B2 - Heavy SUV</u>	
5 a	Ending mileage reading . . . . .	_____	Enter mileage readings, or
b	Beginning mileage reading . . . . .	_____	enter total miles on line 5c
c	<b>Total miles</b> vehicle was driven during 2019. . . . .	<u>11,221</u>	Line 5a less line 5b
6	Number of miles driven for business . . . . .	<u>7,554</u>	
7	Number of miles driven for commuting . . . . .	_____	Travel between home and work
8	Number of miles driven for personal purposes . . . . .	<u>3,667</u>	Line 5c less line 6 and 7
9	Percent of business use . . . . .	<u>67.32 %</u>	Line 6, divided by 5c
10 a	Have record of personal mileage for full year? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b	Months for special allocation . . . . .	_____	See Tax Help
11	Do you have another vehicle available for personal use? . . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
12	Was the vehicle available for personal use during off duty hours? . . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
13	Was the vehicle used primarily by a more than 5% owner of the business or related person? . . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
14 a	Do you have evidence to support the business use claimed? . . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b	If <b>Yes</b> , is the evidence written? . . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

## Part II – Standard Mileage Rate

15	Did you own this vehicle, lease this vehicle, or was it not your vehicle? . . . . .	<input checked="" type="checkbox"/>	Own	<input type="checkbox"/>	Lease	
		<input type="checkbox"/>	Not my vehicle			
16	Did you use this vehicle for hire? . . . . .	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No	Example: taxicab
17	Did you use less than 5 vehicles for business at a time? . . . . .	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	
18	If you <b>owned</b> this vehicle, did you use the standard mileage rate for this vehicle's first year, OR if you <b>leased</b> this vehicle, did you use the standard mileage rate for the portion of the lease period after 1997? . . . . .	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	Only applies to vehicles placed in service in prior years
<b>If you answered Own or Lease to line 15, and Yes to lines 17 and 18 you can take standard mileage for this vehicle (note: Line 16, vehicle for hire, is now allowed):</b>						
19	<b>Standard mileage deduction</b> . . . . .	<u>4,381.</u>	line 5 times .545			

## Part III – Actual Expenses

20 a	Gasoline . . . . .	_____	h Vehicle lease or rental fees:
b	Oil . . . . .	_____	1 30 days or more . . . . .
c	Tires . . . . .	_____	2 29 days or less . . . . .
d	Repairs . . . . .	_____	3 Total vehicle lease/rental fees . . . . .
e	Vehicle insurance . . . . .	_____	i Leased vehicle inclusion amount:
f	Vehicle registration, license (excluding property tax) . . . . .	_____	1 Year lease began . . . . .
g	Garage rent . . . . .	_____	2 FMV of leased vehicle . . . . .
			3 Number of lease days in year . . . . .
			4 Inclusion amount . . . . .
			j Other . . . . .
21	Expenses subtotal . . . . .	_____	Sum of lines 20a thru 20j
22	Expenses applicable to business . . . . .	_____	Line 21 times line 9
23	Vehicle depreciation and Section 179 . . . . .	<u>37,935.</u>	From Part VI

Vehicle: Range Rover  
 Activity: Sch C Photographer

**Part IV – Standard Mileage versus Actual Expenses**

- 25  Standard mileage . . . . . 4,381. The program automatically chooses the method  
 26  Actual expenses . . . . . 37,935. that gives you the largest deduction. Check the  
 other method if you want to use it instead.

**Part V – Total Car and Truck Expenses**

- 27 Line 25 or line 26 . . . . . 4,381.  
 28 Additional expenses:  
 a Parking fees . . . . . 866.  
 b Tolls . . . . . 4,311.  
 c Local transportation . . . . . \_\_\_\_\_  
 d Property taxes (include property tax  
 portion of registration) . . . . . \_\_\_\_\_  
 e Less: personal portion of property taxes . . . . . ( \_\_\_\_\_ )  
 f Interest on vehicle . . . . . 14,988.  
 g Less: personal portion of vehicle interest . . . . . ( 4,898. )  
 29 Total expenses . . . . . 19,648. Sum of lines 27 & 28a thru 28g.  
 30 Less: business portion of lease or rental fees Line 20h - 20i times line 9.  
 less inclusion amount (if using actual expenses) . . . . . ( \_\_\_\_\_ ) Reported separately.  
 31 Less: depreciation and Section 179 (if using From line 23.  
 actual expenses) . . . . . ( \_\_\_\_\_ ) Reported separately.  
 32 **Total car and truck expenses** . . . . . 19,648.

**Part VI – Vehicle Depreciation Information**

- 33 For vehicle converted from personal use, complete lines a and b  
 For vehicle acquired by trade-in, complete line c only  
 a Total cost when acquired . . . . . \_\_\_\_\_ include sales tax  
 b FMV when placed in service . . . . . \_\_\_\_\_  
 c Vehicle basis . . . . . 87,655.  
 34 Enter the amount of Section 179 expense elected . . . . . \_\_\_\_\_ Cannot be greater than  
 limit shown below.  
 35 Depreciation and Section 179 limit for luxury cars . . . . . \_\_\_\_\_ See Tax Help for computation.  
 36 a **Economic Stimulus - Qualified Property** . . . . .  Yes  No  
 1 If yes, and if placed in service after 9/27/17, was this property  
 acquired after 9/27/17? . . . . .  Yes  No  N/A  
 2 For post 9/27/17, elect 50% in place of 100% Special Depreciation  
 Allowance . . . . .  Yes  No  N/A  
 b **Qualified Disaster Area - Qualified Property** . . . . .  Yes  No  
 c **Kansas Disaster Zone - Qualified Property** . . . . .  Yes  No  
 d **Gulf Opportunity Zone - Qualified Property** . . . . .  Reg  Ext  No  
 e Percentage for Special Depreciation Allowance . . . . .  100% & 50%  30%  N/A  
 f Elect OUT of Special Depreciation Allowance . . . . .  Yes  No  
 g Elect 30% in place of 50% Special Depreciation Allowance . . . . .  Yes  No  
 h **QuickZoom** to view the Election statements . . . . . ▶  
 i Special Depreciation Allowance . . . . . \_\_\_\_\_  
 j AMT Special Depr Allowance . . . . . \_\_\_\_\_

If blank, prior depreciation from Asset Life History is used. Required if sold, or if standard mileage rate used in a prior year.

- 37 Prior depreciation . . . . . 2,106.  
 38 **Depreciation deduction** . . . . . ▶ 37,935.  Limited to luxury car maximum.  
 If blank, prior depreciation from Asset Life History is used. Required if sold, or if standard mileage rate used in a prior year.  
 39 AMT prior depreciation . . . . . 2,106.  
 40 AMT depreciation deduction . . . . . 37,935.  Limited to luxury car maximum.  
 41 AMT adjustment/preference . . . . . 0. See Tax Help for computation.

Schedule K-1 (Form 1065)

2019

Department of the Treasury Internal Revenue Service

For calendar year 2019, or tax year

beginning / / 2019 ending / /

Partner's Share of Income, Deductions, Credits, etc.

See back of form and separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number 46-123456
B Partnership's name, address, city, state, and ZIP code Rehab Addict LLC 334566 103rd Street Dallas, TX 75432
C IRS Center where partnership filed return efile
D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See inst.) XXX-XX-XXXX
F Name, address, city, state, and ZIP code for partner entered in E. See instructions. Mary Homeowner 7 Galloping Hill Road Dallas, TX 75432
G General partner or LLC member-manager Limited partner or other LLC member
H1 Domestic partner Foreign partner
H2 If the partner is a disregarded entity (DE), enter the partner's: TIN Name
I1 What type of entity is this partner? Individual
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here
J Partner's share of profit, loss, and capital (see instructions): Beginning Ending
K Partner's share of liabilities: Beginning Ending

L Partner's Capital Account Analysis
Beginning capital account \$ 0
Capital contributed during the year \$ 56,050
Current year net income (loss) \$
Other increase (decrease) (attach explanation) \$
Withdrawals & distributions \$ ( )
Ending capital account \$ 56,050

M Did the partner contribute property with a built-in gain or loss? Yes No
N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss) Beginning Ending

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with 4 columns: Item number, Description, Amount, and Code. Rows include Ordinary business income (loss) 91,230, Net rental real estate income (loss), Other net rental income (loss), Guaranteed payments for services, Total guaranteed payments, Interest income, Ordinary dividends, Qualified dividends, Dividend equivalents, Royalties, Net short-term capital gain (loss), Net long-term capital gain (loss), Collectibles (28%) gain (loss), Unrecaptured section 1250 gain, Net section 1231 gain (loss), Other income (loss), Section 179 deduction, Other deductions, Self-employment earnings (loss), More than one activity for at-risk purposes, More than one activity for passive activity purposes.

For IRS Use Only

**This list identifies the codes used on Schedule K-1 for all partners and provides summarized reporting information for partners who file Form 1040 or 1040-SR. For detailed reporting and filing information, see the separate Partner's Instructions for Schedule K-1 and the instructions for your income tax return.**

	<i>Report on</i>	<i>Code</i>	<i>Report on</i>	
<b>1. Ordinary business income (loss).</b> Determine whether the income (loss) is passive or nonpassive and enter on your return as follows.		<b>H</b> Undistributed capital gains credit	Schedule 3 (Form 1040 or 1040-SR), line 13, box a	
Passive loss	See the Partner's Instructions	<b>I</b> Biofuel producer credit	See the Partner's Instructions	
Passive income	Schedule E, line 28, column (h)	<b>J</b> Work opportunity credit	See the Partner's Instructions	
Nonpassive loss	See the Partner's Instructions	<b>K</b> Disabled access credit		
Nonpassive income	Schedule E, line 28, column (k)	<b>L</b> Empowerment zone employment credit		
<b>2. Net rental real estate income (loss)</b>	See the Partner's Instructions	<b>M</b> Credit for increasing research activities		
<b>3. Other net rental income (loss)</b>		<b>N</b> Credit for employer social security and Medicare taxes		
Net income	Schedule E, line 28, column (h)	<b>O</b> Backup withholding	See the Partner's Instructions	
Net loss	See the Partner's Instructions	<b>P</b> Other credits		
<b>4a. Guaranteed payment Services</b>	See the Partner's Instructions	<b>16. Foreign transactions</b>		
<b>4b. Guaranteed payment Capital</b>	See the Partner's Instructions	<b>A</b> Name of country or U.S. possession	Form 1116, Part I	
<b>4c. Guaranteed payment Total</b>	See the Partner's Instructions	<b>B</b> Gross income from all sources		
<b>5. Interest income</b>	Form 1040 or 1040-SR, line 2b	<b>C</b> Gross income sourced at partner level		
<b>6a. Ordinary dividends</b>	Form 1040 or 1040-SR, line 3b	<i>Foreign gross income sourced at partnership level</i>		
<b>6b. Qualified dividends</b>	Form 1040 or 1040-SR, line 3a	<b>D</b> Reserved for future use	Form 1116, Part I	
<b>6c. Dividend equivalents</b>	See the Partner's Instructions	<b>E</b> Foreign branch category		
<b>7. Royalties</b>	Schedule E, line 4	<b>F</b> Passive category		
<b>8. Net short-term capital gain (loss)</b>	Schedule D, line 5	<b>G</b> General category		
<b>9a. Net long-term capital gain (loss)</b>	Schedule D, line 12	<b>H</b> Other		
<b>9b. Collectibles (28%) gain (loss)</b>	28% Rate Gain Worksheet, line 4 (Schedule D instructions)	<i>Deductions allocated and apportioned at partner level</i>		
<b>9c. Unrecaptured section 1250 gain</b>	See the Partner's Instructions	<b>I</b> Interest expense	Form 1116, Part I	
<b>10. Net section 1231 gain (loss)</b>	See the Partner's Instructions	<b>J</b> Other	Form 1116, Part I	
<b>11. Other income (loss)</b>		<i>Deductions allocated and apportioned at partnership level to foreign source income</i>		
<i>Code</i>		<b>K</b> Reserved for future use	Form 1116, Part I	
<b>A</b> Other portfolio income (loss)	See the Partner's Instructions	<b>L</b> Foreign branch category		
<b>B</b> Involuntary conversions	See the Partner's Instructions	<b>M</b> Passive category		
<b>C</b> Sec. 1256 contracts & straddles	Form 6781, line 1	<b>N</b> General category		
<b>D</b> Mining exploration costs recapture	See Pub. 535	<b>O</b> Other		
<b>E</b> Cancellation of debt	See the Partner's Instructions	<i>Other information</i>		
<b>F</b> Section 743(b) positive adjustments			<b>P</b> Total foreign taxes paid	Form 1116, Part II
<b>G</b> Section 965(a) inclusion			<b>Q</b> Total foreign taxes accrued	Form 1116, Part II
<b>H</b> Income under subpart F (other than inclusions under sections 951A and 965)			<b>R</b> Reduction in taxes available for credit	Form 1116, line 12
<b>I</b> Other income (loss)			<b>S</b> Foreign trading gross receipts	Form 8873
<b>12. Section 179 deduction</b>	See the Partner's Instructions	<b>T</b> Extraterritorial income exclusion	Form 8873	
<b>13. Other deductions</b>		<b>U</b> through <b>V</b>	Reserved for future use	
<b>A</b> Cash contributions (60%)	See the Partner's Instructions	<b>W</b> Section 965 information	See the Partner's Instructions	
<b>B</b> Cash contributions (30%)		<b>X</b> Other foreign transactions		
<b>C</b> Noncash contributions (50%)		<b>17. Alternative minimum tax (AMT) items</b>		
<b>D</b> Noncash contributions (30%)		<b>A</b> Post-1986 depreciation adjustment	See the Partner's Instructions and the Instructions for Form 6251	
<b>E</b> Capital gain property to a 50% organization (30%)		<b>B</b> Adjusted gain or loss		
<b>F</b> Capital gain property (20%)		<b>C</b> Depletion (other than oil & gas)		
<b>G</b> Contributions (100%)		<b>D</b> Oil, gas, & geothermal—gross income		
<b>H</b> Investment interest expense		<b>E</b> Oil, gas, & geothermal—deductions		
<b>I</b> Deductions—royalty income		<b>F</b> Other AMT items		
<b>J</b> Section 59(e)(2) expenditures		<b>18. Tax-exempt income and nondeductible expenses</b>		
<b>K</b> Excess business interest expense	<b>A</b> Tax-exempt interest income	Form 1040 or 1040-SR, line 2a		
<b>L</b> Deductions—portfolio (other)	<b>B</b> Other tax-exempt income	See the Partner's Instructions		
<b>M</b> Amounts paid for medical insurance	<b>C</b> Nondeductible expenses	See the Partner's Instructions		
<b>N</b> Educational assistance benefits	<b>19. Distributions</b>			
<b>O</b> Dependent care benefits	<b>A</b> Cash and marketable securities	See the Partner's Instructions		
<b>P</b> Preproductive period expenses	<b>B</b> Distribution subject to section 737			
<b>Q</b> Commercial revitalization deduction from rental real estate activities	<b>C</b> Other property			
<b>R</b> Pensions and IRAs	<b>20. Other information</b>			
<b>S</b> Reforestation expense deduction	<b>A</b> Investment income	Form 4952, line 4a		
<b>T</b> through <b>U</b>	<b>B</b> Investment expenses	Form 4952, line 5		
<b>V</b> Section 743(b) negative adjustments	<b>C</b> Fuel tax credit information	Form 4136		
<b>W</b> Other deductions	<b>D</b> Qualified rehabilitation expenditures (other than rental real estate)	See the Partner's Instructions		
<b>X</b> Section 965(c) deduction	<b>E</b> Basis of energy property			
<b>14. Self-employment earnings (loss)</b>	<b>F</b> through <b>G</b>			
<b>Note:</b> If you have a section 179 deduction or any partner-level deductions, see the Partner's Instructions before completing Schedule SE.	<b>H</b> Recapture of investment credit		See Form 4255	
<b>A</b> Net earnings (loss) from self-employment	<b>I</b> Recapture of other credits		See the Partner's Instructions	
<b>B</b> Gross farming or fishing income	<b>J</b> Look-back interest—completed long-term contracts	See Form 8697		
<b>C</b> Gross non-farm income	<b>K</b> Look-back interest—income forecast method	See Form 8866		
<b>15. Credits</b>	<b>L</b> Dispositions of property with section 179 deductions	See the Partner's Instructions		
<b>A</b> Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	<b>M</b> Recapture of section 179 deduction			
<b>B</b> Low-income housing credit (other) from pre-2008 buildings	<b>N</b> Interest expense for corporate partners			
<b>C</b> Low-income housing credit (section 42(j)(5)) from post-2007 buildings	<b>O</b> through <b>Y</b>			
<b>D</b> Low-income housing credit (other) from post-2007 buildings	<b>Z</b> Section 199A information			
<b>E</b> Qualified rehabilitation expenditures (rental real estate)	<b>AA</b> Section 704(c) information			
<b>F</b> Other rental real estate credits	<b>AB</b> Section 751 gain (loss)			
<b>G</b> Other rental credits	<b>AC</b> Section 1(h)(5) gain (loss)			
	<b>AD</b> Deemed section 1250 unrecaptured gain			
	<b>AE</b> Excess taxable income			
	<b>AF</b> Excess business interest income			
	<b>AG</b> Gross receipts for section 59A(e)			
	<b>AH</b> Other information			

**U.S. Return of Partnership Income**

For calendar year 2019, or tax year beginning \_\_\_\_\_, 2019, ending \_\_\_\_\_, 20\_\_\_\_\_.

**2019**

► Go to [www.irs.gov/Form1065](http://www.irs.gov/Form1065) for instructions and the latest information.

<b>A</b> Principal business activity <u>Construction</u>	Name of partnership <u>Rehab Addict LLC</u>	<b>D</b> Employer identification number <u>46-1234567</u>
<b>B</b> Principal product or service <u>Construction</u>	Number, street, and room or suite no. If a P.O. box, see instructions. <u>334566 103rd Street</u>	<b>E</b> Date business started <u>11/30/2012</u>
<b>C</b> Business code number <u>123456</u>	City or town, state or province, country, and ZIP or foreign postal code <u>Dallas, TX 75432</u>	<b>F</b> Total assets (see instructions) \$ <u>0</u>

- G** Check applicable boxes: (1)  Initial return (2)  Final return (3)  Name change (4)  Address change (5)  Amended return
- H** Check accounting method: (1)  Cash (2)  Accrual (3)  Other (specify) ► \_\_\_\_\_
- I** Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year ► 2
- J** Check if Schedules C and M-3 are attached . . . . .
- K** Check if partnership: (1)  Aggregated activities for section 465 at-risk purposes (2)  Grouped activities for section 469 passive activity purposes

**Caution:** Include **only** trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

<b>Income</b>	<b>1a</b> Gross receipts or sales . . . . .	<b>1a</b>	<u>1,448,794</u>	
	<b>b</b> Returns and allowances . . . . .	<b>1b</b>		
	<b>c</b> Balance. Subtract line 1b from line 1a . . . . .			<b>1c</b> <u>1,448,794</u>
	<b>2</b> Cost of goods sold (attach Form 1125-A) . . . . .			<b>2</b> <u>0</u>
	<b>3</b> Gross profit. Subtract line 2 from line 1c . . . . .			<b>3</b> <u>1,448,794</u>
	<b>4</b> Ordinary income (loss) from other partnerships, estates, and trusts (attach statement) . . . . .			<b>4</b> _____
	<b>5</b> Net farm profit (loss) (attach Schedule F (Form 1040 or 1040-SR)) . . . . .			<b>5</b> _____
	<b>6</b> Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797) . . . . .			<b>6</b> _____
<b>7</b> Other income (loss) (attach statement) . . . . .			<b>7</b> _____	
<b>8</b> <b>Total income (loss).</b> Combine lines 3 through 7 . . . . .			<b>8</b> <u>1,448,794</u>	
<b>Deductions</b> (see instructions for limitations)	<b>9</b> Salaries and wages (other than to partners) (less employment credits) . . . . .			<b>9</b> <u>411,899</u>
	<b>10</b> Guaranteed payments to partners . . . . .			<b>10</b> _____
	<b>11</b> Repairs and maintenance . . . . .			<b>11</b> _____
	<b>12</b> Bad debts . . . . .			<b>12</b> _____
	<b>13</b> Rent . . . . .			<b>13</b> <u>8,961</u>
	<b>14</b> Taxes and licenses . . . . .			<b>14</b> <u>92,582</u>
	<b>15</b> Interest (see instructions) . . . . .			<b>15</b> _____
	<b>16a</b> Depreciation (if required, attach Form 4562) . . . . .	<b>16a</b>		
	<b>b</b> Less depreciation reported on Form 1125-A and elsewhere on return . . . . .	<b>16b</b>		<b>16c</b> _____
	<b>17</b> Depletion ( <b>Do not deduct oil and gas depletion.</b> ) . . . . .			<b>17</b> _____
	<b>18</b> Retirement plans, etc. . . . .			<b>18</b> <u>51,148</u>
<b>19</b> Employee benefit programs . . . . .			<b>19</b> <u>8,528</u>	
<b>20</b> Other deductions (attach statement) . . . . .			<b>20</b> <u>ste #2 779,644</u>	
<b>21</b> <b>Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 20 . . . . .			<b>21</b> <u>1,352,762</u>	
<b>22</b> <b>Ordinary business income (loss).</b> Subtract line 21 from line 8 . . . . .			<b>22</b> <u>96,032</u>	
<b>Tax and Payment</b>	<b>23</b> Interest due under the look-back method—completed long-term contracts (attach Form 8697) . . . . .			<b>23</b> _____
	<b>24</b> Interest due under the look-back method—income forecast method (attach Form 8866) . . . . .			<b>24</b> _____
	<b>25</b> BBA AAR imputed underpayment (see instructions) . . . . .			<b>25</b> _____
	<b>26</b> Other taxes (see instructions) . . . . .			<b>26</b> _____
	<b>27</b> <b>Total balance due.</b> Add lines 23 through 26 . . . . .			<b>27</b> _____
	<b>28</b> Payment (see instructions) . . . . .			<b>28</b> _____
	<b>29</b> <b>Amount owed.</b> If line 28 is smaller than line 27, enter amount owed . . . . .			<b>29</b> _____
	<b>30</b> <b>Overpayment.</b> If line 28 is larger than line 27, enter overpayment . . . . .			<b>30</b> _____

**Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member \_\_\_\_\_ Date \_\_\_\_\_

May the IRS discuss this return with the preparer shown below?  
 See instructions.  **Yes**  **No**

**Paid Preparer Use Only**

Print/Type preparer's name <u>Amy Accountant</u>	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ► <u>Accountants &amp; Daughters LLC</u>	Firm's EIN ► <u>98765</u>		Phone no.	
Firm's address ► <u>100 Main st, Waco, TX 76701</u>				

**Schedule B Other Information**

<b>1</b> What type of entity is filing this return? Check the applicable box:				<b>Yes</b>	<b>No</b>	
<b>a</b> <input type="checkbox"/> Domestic general partnership	<b>b</b> <input type="checkbox"/> Domestic limited partnership					
<b>c</b> <input checked="" type="checkbox"/> Domestic limited liability company	<b>d</b> <input type="checkbox"/> Domestic limited liability partnership					
<b>e</b> <input type="checkbox"/> Foreign partnership	<b>f</b> <input type="checkbox"/> Other ▶					
<b>2</b> At the end of the tax year:						
<b>a</b> Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership . . . . .					✓	
<b>b</b> Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership . . . . .				✓		
<b>3</b> At the end of the tax year, did the partnership:						
<b>a</b> Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below . . . . .					✓	
<b>(i)</b> Name of Corporation	<b>(ii)</b> Employer Identification Number (if any)	<b>(iii)</b> Country of Incorporation	<b>(iv)</b> Percentage Owned in Voting Stock			
<b>b</b> Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below . . . . .					✓	
<b>(i)</b> Name of Entity	<b>(ii)</b> Employer Identification Number (if any)	<b>(iii)</b> Type of Entity	<b>(iv)</b> Country of Organization	<b>(v)</b> Maximum Percentage Owned in Profit, Loss, or Capital		
<b>4</b> Does the partnership satisfy <b>all four</b> of the following conditions?				<b>Yes</b>	<b>No</b>	
<b>a</b> The partnership's total receipts for the tax year were less than \$250,000.						
<b>b</b> The partnership's total assets at the end of the tax year were less than \$1 million.						
<b>c</b> Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.						
<b>d</b> The partnership is not filing and is not required to file Schedule M-3 . . . . . If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.					✓	
<b>5</b> Is this partnership a publicly traded partnership, as defined in section 469(k)(2)? . . . . .					✓	
<b>6</b> During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? . . . . .					✓	
<b>7</b> Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction? . . . . .					✓	
<b>8</b> At any time during calendar year 2019, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶					✓	
<b>9</b> At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions . . . . .					✓	
<b>10a</b> Is the partnership making, or had it previously made (and not revoked), a section 754 election? . . . . . See instructions for details regarding a section 754 election.					✓	
<b>b</b> Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions . . . . .					✓	

**Schedule B Other Information** (continued)

	Yes	No
<b>c</b> Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		✓
<b>11</b> Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
<b>12</b> At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		✓
<b>13</b> If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
<b>14</b> Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		✓
<b>15</b> Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
<b>16a</b> Did you make any payments in 2019 that would require you to file Form(s) 1099? See instructions	✓	
<b>b</b> If "Yes," did you or will you file required Form(s) 1099?	✓	
<b>17</b> Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return		
<b>18</b> Enter the number of partners that are foreign governments under section 892		
<b>19</b> During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		✓
<b>20</b> Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		✓
<b>21</b> Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1T(b)(14)?		✓
<b>22</b> During the tax year, did the partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions <input type="text"/> \$		✓
<b>23</b> Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		✓
<b>24</b> Does the partnership satisfy one or more of the following? See instructions <b>a</b> The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. <b>b</b> The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the partnership has business interest. <b>c</b> The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		✓
<b>25</b> Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 <input type="text"/> If "No," complete Designation of Partnership Representative below.		✓

**Designation of Partnership Representative** (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR  Mary Homeowner

U.S. address of PR <input type="text"/> <u>7 Galloping Hill Road Dallas, TX 75432</u>	U.S. phone number of PR <input type="text"/>
---	--

If the PR is an entity, name of the designated individual for the PR

U.S. address of designated individual <input type="text"/>	U.S. phone number of designated individual <input type="text"/>
--	---

<b>26</b> Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 14 <input type="text"/> \$		✓
<b>27</b> Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership		
<b>28</b> At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		✓



<b>Schedule K Partners' Distributive Share Items</b>		<b>Total amount</b>	
<b>Income (Loss)</b>	<b>1</b> Ordinary business income (loss) (page 1, line 22)	<b>1</b>	96,032
	<b>2</b> Net rental real estate income (loss) (attach Form 8825)	<b>2</b>	
	<b>3a</b> Other gross rental income (loss)	<b>3a</b>	
	<b>b</b> Expenses from other rental activities (attach statement)	<b>3b</b>	
	<b>c</b> Other net rental income (loss). Subtract line 3b from line 3a	<b>3c</b>	
	<b>4</b> Guaranteed payments: <b>a</b> Services <b>4a</b> <b>b</b> Capital <b>4b</b>	<b>4c</b>	
	<b>c</b> Total. Add lines 4a and 4b	<b>4c</b>	
	<b>5</b> Interest income	<b>5</b>	
	<b>6</b> Dividends and dividend equivalents: <b>a</b> Ordinary dividends	<b>6a</b>	
	<b>b</b> Qualified dividends <b>6b</b> <b>c</b> Dividend equivalents <b>6c</b>	<b>6c</b>	
	<b>7</b> Royalties	<b>7</b>	
<b>8</b> Net short-term capital gain (loss) (attach Schedule D (Form 1065))	<b>8</b>		
<b>9a</b> Net long-term capital gain (loss) (attach Schedule D (Form 1065))	<b>9a</b>		
<b>b</b> Collectibles (28%) gain (loss)	<b>9b</b>		
<b>c</b> Unrecaptured section 1250 gain (attach statement)	<b>9c</b>		
<b>10</b> Net section 1231 gain (loss) (attach Form 4797)	<b>10</b>		
<b>11</b> Other income (loss) (see instructions) Type ▶	<b>11</b>		
<b>Deductions</b>	<b>12</b> Section 179 deduction (attach Form 4562)	<b>12</b>	
	<b>13a</b> Contributions	<b>13a</b>	25,000
	<b>b</b> Investment interest expense	<b>13b</b>	
	<b>c</b> Section 59(e)(2) expenditures: <b>(1)</b> Type ▶ <b>(2)</b> Amount ▶	<b>13c(2)</b>	
<b>d</b> Other deductions (see instructions) Type ▶	<b>13d</b>		
<b>Self-Employment</b>	<b>14a</b> Net earnings (loss) from self-employment	<b>14a</b>	96,032
	<b>b</b> Gross farming or fishing income	<b>14b</b>	
	<b>c</b> Gross nonfarm income	<b>14c</b>	1,448,794
<b>Credits</b>	<b>15a</b> Low-income housing credit (section 42(j)(5))	<b>15a</b>	
	<b>b</b> Low-income housing credit (other)	<b>15b</b>	
	<b>c</b> Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	<b>15c</b>	
	<b>d</b> Other rental real estate credits (see instructions) Type ▶	<b>15d</b>	
	<b>e</b> Other rental credits (see instructions) Type ▶	<b>15e</b>	
	<b>f</b> Other credits (see instructions) Type ▶	<b>15f</b>	
<b>Foreign Transactions</b>	<b>16a</b> Name of country or U.S. possession ▶	<b>16b</b>	
	<b>b</b> Gross income from all sources	<b>16b</b>	
	<b>c</b> Gross income sourced at partner level	<b>16c</b>	
	Foreign gross income sourced at partnership level		
	<b>d</b> Reserved for future use ▶ <b>e</b> Foreign branch category ▶	<b>16e</b>	
	<b>f</b> Passive category ▶ <b>g</b> General category ▶ <b>h</b> Other (attach statement) ▶	<b>16h</b>	
	Deductions allocated and apportioned at partner level		
	<b>i</b> Interest expense ▶ <b>j</b> Other ▶	<b>16j</b>	
	Deductions allocated and apportioned at partnership level to foreign source income		
	<b>k</b> Reserved for future use ▶ <b>l</b> Foreign branch category ▶	<b>16l</b>	
	<b>m</b> Passive category ▶ <b>n</b> General category ▶ <b>o</b> Other (attach statement) ▶	<b>16o</b>	
	<b>p</b> Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	<b>16p</b>	
<b>q</b> Reduction in taxes available for credit (attach statement)	<b>16q</b>		
<b>r</b> Other foreign tax information (attach statement)			
<b>Alternative Minimum Tax (AMT) items</b>	<b>17a</b> Post-1986 depreciation adjustment	<b>17a</b>	
	<b>b</b> Adjusted gain or loss	<b>17b</b>	
	<b>c</b> Depletion (other than oil and gas)	<b>17c</b>	
	<b>d</b> Oil, gas, and geothermal properties—gross income	<b>17d</b>	
	<b>e</b> Oil, gas, and geothermal properties—deductions	<b>17e</b>	
	<b>f</b> Other AMT items (attach statement)	<b>17f</b>	
<b>Other Information</b>	<b>18a</b> Tax-exempt interest income	<b>18a</b>	
	<b>b</b> Other tax-exempt income	<b>18b</b>	
	<b>c</b> Nondeductible expenses	<b>18c</b>	
	<b>19a</b> Distributions of cash and marketable securities	<b>19a</b>	
	<b>b</b> Distributions of other property	<b>19b</b>	
	<b>20a</b> Investment income	<b>20a</b>	
<b>b</b> Investment expenses	<b>20b</b>		
<b>c</b> Other items and amounts (attach statement)			

**Analysis of Net Income (Loss)**

<b>1</b>	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16p . . . . .					<b>1</b>	71,032
<b>2</b>	Analysis by partner type:						
	<b>(i)</b> Corporate	<b>(ii)</b> Individual (active)	<b>(iii)</b> Individual (passive)	<b>(iv)</b> Partnership	<b>(v)</b> Exempt Organization	<b>(vi)</b> Nominee/Other	
<b>a</b>	General partners						
<b>b</b>	Limited partners		71,032				

**Schedule L Balance Sheets per Books**

		Beginning of tax year		End of tax year	
		<b>(a)</b>	<b>(b)</b>	<b>(c)</b>	<b>(d)</b>
<b>Assets</b>					
<b>1</b>	Cash . . . . .				59,000
<b>2a</b>	Trade notes and accounts receivable . . . . .				
<b>b</b>	Less allowance for bad debts . . . . .				
<b>3</b>	Inventories . . . . .				
<b>4</b>	U.S. government obligations . . . . .				
<b>5</b>	Tax-exempt securities . . . . .				
<b>6</b>	Other current assets (attach statement) . . . . .				
<b>7a</b>	Loans to partners (or persons related to partners) . . . . .				
<b>b</b>	Mortgage and real estate loans . . . . .				
<b>8</b>	Other investments (attach statement) . . . . .				
<b>9a</b>	Buildings and other depreciable assets . . . . .				
<b>b</b>	Less accumulated depreciation . . . . .				
<b>10a</b>	Depletable assets . . . . .				
<b>b</b>	Less accumulated depletion . . . . .				
<b>11</b>	Land (net of any amortization) . . . . .				
<b>12a</b>	Intangible assets (amortizable only) . . . . .				
<b>b</b>	Less accumulated amortization . . . . .				
<b>13</b>	Other assets (attach statement) . . . . .				
<b>14</b>	Total assets . . . . .				59,000
<b>Liabilities and Capital</b>					
<b>15</b>	Accounts payable . . . . .				
<b>16</b>	Mortgages, notes, bonds payable in less than 1 year . . . . .				
<b>17</b>	Other current liabilities (attach statement) . . . . .				
<b>18</b>	All nonrecourse loans . . . . .				
<b>19a</b>	Loans from partners (or persons related to partners) . . . . .				
<b>b</b>	Mortgages, notes, bonds payable in 1 year or more . . . . .				
<b>20</b>	Other liabilities (attach statement) . . . . .				
<b>21</b>	Partners' capital accounts . . . . .				59,000
<b>22</b>	Total liabilities and capital . . . . .				59,000

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

**Note:** The partnership may be required to file Schedule M-3. See instructions.

<b>1</b>	Net income (loss) per books . . . . .	59,000	<b>6</b>	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
<b>2</b>	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize): _____		<b>a</b>	Tax-exempt interest \$ _____	
<b>3</b>	Guaranteed payments (other than health insurance) . . . . .		<b>7</b>	Deductions included on Schedule K, lines 1 through 13d, and 16p, not charged against book income this year (itemize):	
<b>4</b>	Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16p (itemize):		<b>a</b>	Depreciation \$ _____	
<b>a</b>	Depreciation \$ _____		<b>8</b>	Add lines 6 and 7 . . . . .	
<b>b</b>	Travel and entertainment \$ (1,101)	-1,101	<b>9</b>	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	57,899
<b>5</b>	Add lines 1 through 4 . . . . .	57,899			

**Schedule M-2 Analysis of Partners' Capital Accounts**

<b>1</b>	Balance at beginning of year . . . . .	0	<b>6</b>	Distributions: <b>a</b> Cash . . . . .	
<b>2</b>	Capital contributed: <b>a</b> Cash . . . . .		<b>b</b> Property . . . . .		
	<b>b</b> Property . . . . .		<b>7</b>	Other decreases (itemize): _____	
<b>3</b>	Net income (loss) per books . . . . .	59,000	<b>8</b>	Add lines 6 and 7 . . . . .	
<b>4</b>	Other increases (itemize): _____		<b>9</b>	Balance at end of year. Subtract line 8 from line 5	59,000
<b>5</b>	Add lines 1 through 4 . . . . .	59,000			

## FORM 1065

## OTHER DEDUCTIONS

## STATEMENT 2

<u>DESCRIPTION</u>	<u>AMOUNT</u>
ADVERTISING	25,330
ACCOUNTING	4,200
AUTOMOBILE	10,000
BANK SERVICE	
CHARGES	10
DELIVERY AND	
FREIGHT	53
EQUIPMENT RENT	4,699
INSURANCE	144,484
LEGAL AND PROFESSIONAL	635
MEALS AND ENTERTAINMENT (50%)	-1,100
MEALS AND ENTERTAINMENT (100%)	5,500
OUTSIDE SERVICES	234,803
PARKING FEES AND TOLLS	64
SUPPLIES	307,424
TELEPHONE AND INTERNET	7,315
TOOLS	24,258
TRAVEL	3,955
UNIFORMS	2,815
TRUCK FOR BUSINESS	3,592
PARTS	1,607
<u>TOTAL TO FORM 1065, LINE 20</u>	<u>779,644</u>

**Schedule K-1  
(Form 1120-S)**

**2019**

Department of the Treasury  
Internal Revenue Service

For calendar year 2019, or tax year

beginning  /  / 2019 ending  /  /

**Shareholder's Share of Income, Deductions, Credits, etc.**

▶ See back of form and separate instructions.

<b>Part I Information About the Corporation</b>		<b>Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items</b>	
<b>A</b> Corporation's employer identification number 22-1234567		<b>1</b> Ordinary business income (loss)	<b>13</b> Credits
		132,588	M 1,872
<b>B</b> Corporation's name, address, city, state, and ZIP code DaVinci Residential Painting, Inc. 1200 Sistine Chapel Drive Waco, TX 76701		<b>2</b> Net rental real estate income (loss)	
		<b>3</b> Other net rental income (loss)	
<b>C</b> IRS Center where corporation filed return e file		<b>4</b> Interest income	
		<b>5a</b> Ordinary dividends	
		<b>5b</b> Qualified dividends	<b>14</b> Foreign transactions
		<b>6</b> Royalties	
		<b>7</b> Net short-term capital gain (loss)	
		<b>8a</b> Net long-term capital gain (loss)	
		<b>8b</b> Collectibles (28%) gain (loss)	
		<b>8c</b> Unrecaptured section 1250 gain	
		<b>9</b> Net section 1231 gain (loss)	
		<b>10</b> Other income (loss)	<b>15</b> Alternative minimum tax (AMT) items
			A 166
		<b>11</b> Section 179 deduction	<b>16</b> Items affecting shareholder basis
		14,189	C 17,214
		<b>12</b> Other deductions	
		A 4,160	D 63,634
			<b>17</b> Other information
			V 118,398
			W 867,417
			X 267,548
		<b>18</b> <input type="checkbox"/> More than one activity for at-risk purposes*	
		<b>19</b> <input type="checkbox"/> More than one activity for passive activity purposes*	
* See attached statement for additional information.			

For IRS Use Only

This list identifies the codes used on Schedule K-1 for all shareholders and provides summarized reporting information for shareholders who file Form 1040 or 1040-SR. For detailed reporting and filing information, see the separate Shareholder's Instructions for Schedule K-1 and the instructions for your income tax return.

	<i>Report on</i>	<i>Code</i>	<i>Report on</i>	
<b>1. Ordinary business income (loss).</b> Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:				
Passive loss	See the Shareholder's Instructions	<b>N</b> Credit for employer social security and Medicare taxes	} See the Shareholder's Instructions	
Passive income	Schedule E, line 28, column (h)	<b>O</b> Backup withholding		
Nonpassive loss	See the Shareholder's Instructions	<b>P</b> Other credits		
Nonpassive income	Schedule E, line 28, column (k)			
<b>2. Net rental real estate income (loss)</b>	See the Shareholder's Instructions	<b>14. Foreign transactions</b>		
<b>3. Other net rental income (loss)</b>		<b>A</b> Name of country or U.S. possession	} Form 1116, Part I	
Net income	Schedule E, line 28, column (h)	<b>B</b> Gross income from all sources		
Net loss	See the Shareholder's Instructions	<b>C</b> Gross income sourced at shareholder level		
<b>4. Interest income</b>	Form 1040 or 1040-SR, line 2b	<i>Foreign gross income sourced at corporate level</i>		
<b>5a. Ordinary dividends</b>	Form 1040 or 1040-SR, line 3b	<b>D</b> Reserved for future use	} Form 1116, Part I	
<b>5b. Qualified dividends</b>	Form 1040 or 1040-SR, line 3a	<b>E</b> Foreign branch category		
<b>6. Royalties</b>	Schedule E, line 4	<b>F</b> Passive category		
<b>7. Net short-term capital gain (loss)</b>	Schedule D, line 5	<b>G</b> General category		
<b>8a. Net long-term capital gain (loss)</b>	Schedule D, line 12	<b>H</b> Other		
<b>8b. Collectibles (28%) gain (loss)</b>	28% Rate Gain Worksheet, line 4 (Schedule D instructions)	<i>Deductions allocated and apportioned at shareholder level</i>		
<b>8c. Unrecaptured section 1250 gain</b>	See the Shareholder's Instructions	<b>I</b> Interest expense	Form 1116, Part I	
<b>9. Net section 1231 gain (loss)</b>	See the Shareholder's Instructions	<b>J</b> Other	Form 1116, Part I	
<b>10. Other income (loss)</b>		<i>Deductions allocated and apportioned at corporate level to foreign source income</i>		
<i>Code</i>		<b>K</b> Reserved for future use	} Form 1116, Part I	
<b>A</b> Other portfolio income (loss)	See the Shareholder's Instructions	<b>L</b> Foreign branch category		
<b>B</b> Involuntary conversions	See the Shareholder's Instructions	<b>M</b> Passive category		
<b>C</b> Sec. 1256 contracts & straddles	Form 6781, line 1	<b>N</b> General category		
<b>D</b> Mining exploration costs recapture	See Pub. 535	<b>O</b> Other		
<b>E</b> Reserved for future use				
<b>F</b> Section 965(a) inclusion	} See the Shareholder's Instructions	<i>Other information</i>		
<b>G</b> Income under subpart F (other than inclusions under sections 951A and 965)			<b>P</b> Total foreign taxes paid	Form 1116, Part II
<b>H</b> Other income (loss)			<b>Q</b> Total foreign taxes accrued	Form 1116, Part II
<b>11. Section 179 deduction</b>	See the Shareholder's Instructions	<b>R</b> Reduction in taxes available for credit	Form 1116, line 12	
<b>12. Other deductions</b>		<b>S</b> Foreign trading gross receipts	Form 8873	
<b>A</b> Cash contributions (60%)	} See the Shareholder's Instructions	<b>T</b> Extraterritorial income exclusion	Form 8873	
<b>B</b> Cash contributions (30%)			<b>U</b> Section 965 information	See the Shareholder's Instructions
<b>C</b> Noncash contributions (50%)			<b>V</b> Other foreign transactions	See the Shareholder's Instructions
<b>D</b> Noncash contributions (30%)			<b>15. Alternative minimum tax (AMT) items</b>	
<b>E</b> Capital gain property to a 50% organization (30%)			<b>A</b> Post-1986 depreciation adjustment	} See the Shareholder's Instructions and the Instructions for Form 6251
<b>F</b> Capital gain property (20%)			<b>B</b> Adjusted gain or loss	
<b>G</b> Contributions (100%)			<b>C</b> Depletion (other than oil & gas)	
<b>H</b> Investment interest expense		Form 4952, line 1	<b>D</b> Oil, gas, & geothermal—gross income	
<b>I</b> Deductions—royalty income		Schedule E, line 19	<b>E</b> Oil, gas, & geothermal—deductions	
<b>J</b> Section 59(e)(2) expenditures		See the Shareholder's Instructions	<b>F</b> Other AMT items	
<b>K</b> Section 965(c) deduction	See the Shareholder's Instructions	<b>16. Items affecting shareholder basis</b>		
<b>L</b> Deductions—portfolio (other)	Schedule A, line 16	<b>A</b> Tax-exempt interest income	Form 1040 or 1040-SR, line 2a	
<b>M</b> Preproductive period expenses	See the Shareholder's Instructions	<b>B</b> Other tax-exempt income	} See the Shareholder's Instructions	
<b>N</b> Commercial revitalization deduction from rental real estate activities	See Form 8582 instructions	<b>C</b> Nondeductible expenses		
<b>O</b> Reforestation expense deduction	See the Shareholder's Instructions	<b>D</b> Distributions		
<b>P</b> through <b>R</b>	Reserved for future use	<b>E</b> Repayment of loans from shareholders		
<b>S</b> Other deductions	See the Shareholder's Instructions			
<b>13. Credits</b>		<b>17. Other information</b>		
<b>A</b> Low-income housing credit (section 42(j)(5)) from pre-2008 buildings	} See the Shareholder's Instructions	<b>A</b> Investment income	Form 4952, line 4a	
<b>B</b> Low-income housing credit (other) from pre-2008 buildings			<b>B</b> Investment expenses	Form 4952, line 5
<b>C</b> Low-income housing credit (section 42(j)(5)) from post-2007 buildings			<b>C</b> Qualified rehabilitation expenditures (other than rental real estate)	See the Shareholder's Instructions
<b>D</b> Low-income housing credit (other) from post-2007 buildings			<b>D</b> Basis of energy property	See the Shareholder's Instructions
<b>E</b> Qualified rehabilitation expenditures (rental real estate)			<b>E</b> Recapture of low-income housing credit (section 42(j)(5))	Form 8611, line 8
<b>F</b> Other rental real estate credits			<b>F</b> Recapture of low-income housing credit (other)	Form 8611, line 8
<b>G</b> Other rental credits			<b>G</b> Recapture of investment credit	See Form 4255
<b>H</b> Undistributed capital gains credit		Schedule 3 (Form 1040 or 1040-SR), line 13, box a	<b>H</b> Recapture of other credits	See the Shareholder's Instructions
<b>I</b> Biofuel producer credit		} See the Shareholder's Instructions	<b>I</b> Look-back interest—completed long-term contracts	See Form 8697
<b>J</b> Work opportunity credit				<b>J</b> Look-back interest—income forecast method
<b>K</b> Disabled access credit			<b>K</b> Dispositions of property with section 179 deductions	} See the Shareholder's Instructions
<b>L</b> Empowerment zone employment credit			<b>L</b> Recapture of section 179 deduction	
<b>M</b> Credit for increasing research activities			<b>M</b> through <b>U</b>	
		<b>V</b> Section 199A information	} Reserved for future use	
		<b>W</b> through <b>Z</b>		
		<b>AA</b> Excess taxable income		
		<b>AB</b> Excess business interest income	} See the Shareholder's Instructions	
		<b>AC</b> Other information		

Department of the Treasury  
Internal Revenue Service

▶ **Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.**  
▶ **Go to [www.irs.gov/Form1120S](http://www.irs.gov/Form1120S) for instructions and the latest information.**

**2019**

For calendar year 2019 or tax year beginning , 2019, ending , 20

<b>A</b> S election effective date 11/04/96	<b>TYPE OR PRINT</b>	Name DaVinci Residential Painting Inc.	<b>D</b> Employer identification number 22-1234567
<b>B</b> Business activity code number (see instructions) 339990		Number, street, and room or suite no. If a P.O. box, see instructions. 1200 Sistine Chapel Drive	<b>E</b> Date incorporated 09/11/96
<b>C</b> Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code Waco, TX 76701	<b>F</b> Total assets (see instructions) \$ 2,323,758

**G** Is the corporation electing to be an S corporation beginning with this tax year?  Yes  No If "Yes," attach Form 2553 if not already filed  
**H** Check if: (1)  Final return (2)  Name change (3)  Address change (4)  Amended return (5)  S election termination or revocation  
**I** Enter the number of shareholders who were shareholders during any part of the tax year . . . . . ▶ 5  
**J** Check if corporation: (1)  Aggregated activities for section 465 at-risk purposes (2)  Grouped activities for section 469 passive activity purposes

**Caution:** Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

<b>Income</b>	<b>1a</b>	Gross receipts or sales . . . . .	<b>1a</b>	10,010,213			
	<b>b</b>	Returns and allowances . . . . .	<b>1b</b>	7,687			
	<b>c</b>	Balance. Subtract line 1b from line 1a . . . . .				<b>1c</b>	10,002,526
	<b>2</b>	Cost of goods sold (attach Form 1125-A) . . . . .				<b>2</b>	7,450,176
	<b>3</b>	Gross profit. Subtract line 2 from line 1c . . . . .				<b>3</b>	2,552,350
	<b>4</b>	Net gain (loss) from Form 4797, line 17 (attach Form 4797) . . . . .				<b>4</b>	
	<b>5</b>	Other income (loss) (see instructions—attach statement) . . . . .			<b>5</b>		
	<b>6</b>	<b>Total income (loss).</b> Add lines 3 through 5 . . . . . ▶			<b>6</b>	2,552,350	
<b>Deductions</b> <small>(see instructions for limitations)</small>	<b>7</b>	Compensation of officers (see instructions—attach Form 1125-E) . . . . .	<b>7</b>	520,618			
	<b>8</b>	Salaries and wages (less employment credits) . . . . .	<b>8</b>	491,390			
	<b>9</b>	Repairs and maintenance . . . . .	<b>9</b>	12,730			
	<b>10</b>	Bad debts . . . . .	<b>10</b>				
	<b>11</b>	Rents . . . . .	<b>11</b>	130,738			
	<b>12</b>	Taxes and licenses . . . . .	<b>12</b>	ste 1 50,259			
	<b>13</b>	Interest (see instructions) . . . . .	<b>13</b>	41,741			
	<b>14</b>	Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562) . . . . .	<b>14</b>	5,703			
	<b>15</b>	Depletion ( <b>Do not deduct oil and gas depletion.</b> ) . . . . .	<b>15</b>				
	<b>16</b>	Advertising . . . . .	<b>16</b>	115,685			
	<b>17</b>	Pension, profit-sharing, etc., plans . . . . .	<b>17</b>	62,273			
	<b>18</b>	Employee benefit programs . . . . .	<b>18</b>				
	<b>19</b>	Other deductions (attach statement) . . . . .	<b>19</b>	ste 2 789,744			
	<b>20</b>	<b>Total deductions.</b> Add lines 7 through 19 . . . . . ▶	<b>20</b>	2,220,881			
	<b>21</b>	<b>Ordinary business income (loss).</b> Subtract line 20 from line 6 . . . . .	<b>21</b>	331,469			
<b>Tax and Payments</b>	<b>22a</b>	Excess net passive income or LIFO recapture tax (see instructions) . . . . .	<b>22a</b>				
	<b>b</b>	Tax from Schedule D (Form 1120-S) . . . . .	<b>22b</b>				
	<b>c</b>	Add lines 22a and 22b (see instructions for additional taxes) . . . . .				<b>22c</b>	
	<b>23a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019 . . . . .	<b>23a</b>				
	<b>b</b>	Tax deposited with Form 7004 . . . . .	<b>23b</b>				
	<b>c</b>	Credit for federal tax paid on fuels (attach Form 4136) . . . . .	<b>23c</b>				
	<b>d</b>	Reserved for future use . . . . .	<b>23d</b>				
	<b>e</b>	Add lines 23a through 23d . . . . .				<b>23e</b>	
	<b>24</b>	Estimated tax penalty (see instructions). Check if Form 2220 is attached . . . . . ▶ <input type="checkbox"/>	<b>24</b>				
	<b>25</b>	<b>Amount owed.</b> If line 23e is smaller than the total of lines 22c and 24, enter amount owed . . . . .	<b>25</b>				
<b>26</b>	<b>Overpayment.</b> If line 23e is larger than the total of lines 22c and 24, enter amount overpaid . . . . .	<b>26</b>					
<b>27</b>	Enter amount from line 26: <b>Credited to 2020 estimated tax</b> ▶ <b>Refunded</b> ▶	<b>27</b>					

**Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

	Date	President Title	<b>May the IRS discuss this return with the preparer shown below?</b> See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--	------	--------------------	--

<b>Paid Preparer Use Only</b>	Print/Type preparer's name Amy Accountant	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN 98765
	Firm's name ▶ Accounts and Daughters LLC.	Firm's EIN ▶			
	Firm's address ▶ 100 Main Street, Waco, TX 76701	Phone no.			

**Schedule B Other Information** (see instructions)

- 1** Check accounting method: **a**  Cash **b**  Accrual  
**c**  Other (specify) ▶ \_\_\_\_\_
- 2** See the instructions and enter the:  
**a** Business activity ▶ Sales **b** Product or service ▶ Paint and Supplies
- 3** At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation . . . . .
- 4** At the end of the tax year, did the corporation:  
**a** Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below . . . . .

Yes	No
	✓
	✓

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made

- b** Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below . . . . .

Yes	No
	✓

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

- 5a** At the end of the tax year, did the corporation have any outstanding shares of restricted stock? . . . . .  
 If "Yes," complete lines (i) and (ii) below.

Yes	No
	✓

- (i)** Total shares of restricted stock . . . . . ▶ \_\_\_\_\_  
**(ii)** Total shares of non-restricted stock . . . . . ▶ \_\_\_\_\_

- b** At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? . . . . .  
 If "Yes," complete lines (i) and (ii) below.

Yes	No
	✓

- (i)** Total shares of stock outstanding at the end of the tax year . . . . . ▶ \_\_\_\_\_  
**(ii)** Total shares of stock outstanding if all instruments were executed ▶ \_\_\_\_\_

- 6** Has this corporation filed, or is it required to file, **Form 8918**, Material Advisor Disclosure Statement, to provide information on any reportable transaction? . . . . .

Yes	No
	✓

- 7** Check this box if the corporation issued publicly offered debt instruments with original issue discount . . . . .   
 If checked, the corporation may have to file **Form 8281**, Information Return for Publicly Offered Original Issue Discount Instruments.

- 8** If the corporation **(a)** was a C corporation before it elected to be an S corporation **or** the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation **and** **(b)** has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions . . . . . ▶ \$ \_\_\_\_\_

- 9** Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions . . . . .

Yes	No
	✓

- 10** Does the corporation satisfy one or more of the following? See instructions . . . . .

Yes	No
✓	

- a** The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.  
**b** The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.  
**c** The corporation is a tax shelter and the corporation has business interest expense.  
 If "Yes," complete and attach Form 8990.

- 11** Does the corporation satisfy **both** of the following conditions? . . . . .

Yes	No
	✓

- a** The corporation's total receipts (see instructions) for the tax year were less than \$250,000.  
**b** The corporation's total assets at the end of the tax year were less than \$250,000.  
 If "Yes," the corporation is not required to complete Schedules L and M-1.

<b>Schedule B Other Information</b> (see instructions) <i>(continued)</i>		Yes	No
<b>12</b>	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? . . . . .		✓
	If "Yes," enter the amount of principal reduction . . . . . ▶ \$		
<b>13</b>	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions . . . . .		✓
<b>14a</b>	Did the corporation make any payments in 2019 that would require it to file Form(s) 1099? . . . . .	✓	
<b>b</b>	If "Yes," did the corporation file or will it file required Form(s) 1099? . . . . .	✓	
<b>15</b>	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? . . . . .		✓
	If "Yes," enter the amount from Form 8996, line 14 . . . . . ▶ \$		

<b>Schedule K Shareholders' Pro Rata Share Items</b>		Total amount	
<b>Income (Loss)</b>	<b>1</b> Ordinary business income (loss) (page 1, line 21) . . . . .	<b>1</b>	331,469
	<b>2</b> Net rental real estate income (loss) (attach Form 8825) . . . . .	<b>2</b>	
	<b>3a</b> Other gross rental income (loss) . . . . . <b>3a</b>		
	<b>b</b> Expenses from other rental activities (attach statement) . . . . . <b>3b</b>		
	<b>c</b> Other net rental income (loss). Subtract line 3b from line 3a . . . . . <b>3c</b>		
	<b>4</b> Interest income . . . . . <b>4</b>		
	<b>5</b> Dividends: <b>a</b> Ordinary dividends . . . . . <b>5a</b>		
	<b>b</b> Qualified dividends . . . . . <b>5b</b>		
	<b>6</b> Royalties . . . . . <b>6</b>		
	<b>7</b> Net short-term capital gain (loss) (attach Schedule D (Form 1120-S)) . . . . . <b>7</b>		
<b>Deductions</b>	<b>8a</b> Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)) . . . . . <b>8a</b>		
	<b>b</b> Collectibles (28%) gain (loss) . . . . . <b>8b</b>		
	<b>c</b> Unrecaptured section 1250 gain (attach statement) . . . . . <b>8c</b>		
	<b>9</b> Net section 1231 gain (loss) (attach Form 4797) . . . . . <b>9</b>		
<b>10</b> Other income (loss) (see instructions) . . . . . Type ▶ <b>10</b>			
<b>Credits</b>	<b>11</b> Section 179 deduction (attach Form 4562) . . . . . <b>11</b>		35,473
	<b>12a</b> Charitable contributions . . . . . <b>12a</b> ste 4		10,400
	<b>b</b> Investment interest expense . . . . . <b>12b</b>		
	<b>c</b> Section 59(e)(2) expenditures <b>(1)</b> Type ▶ <b>(2)</b> Amount ▶ <b>12c(2)</b>		
<b>d</b> Other deductions (see instructions) . . . . . Type ▶ <b>12d</b>			
<b>Foreign Transactions</b>	<b>13a</b> Low-income housing credit (section 42(j)(5)) . . . . . <b>13a</b>		
	<b>b</b> Low-income housing credit (other) . . . . . <b>13b</b>		
	<b>c</b> Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) . . . . . <b>13c</b>		
	<b>d</b> Other rental real estate credits (see instructions) Type ▶ <b>13d</b>		
	<b>e</b> Other rental credits (see instructions) . . . . . Type ▶ <b>13e</b>		
	<b>f</b> Biofuel producer credit (attach Form 6478) . . . . . <b>13f</b>		
	<b>g</b> Other credits (see instructions) . . . . . Type ▶ <b>13g</b> ste 3		4,679
<b>Foreign Transactions</b>	<b>14a</b> Name of country or U.S. possession ▶		
	<b>b</b> Gross income from all sources . . . . . <b>14b</b>		
	<b>c</b> Gross income sourced at shareholder level . . . . . <b>14c</b>		
	Foreign gross income sourced at corporate level		
	<b>d</b> Reserved for future use . . . . . <b>14d</b>		
	<b>e</b> Foreign branch category . . . . . <b>14e</b>		
	<b>f</b> Passive category . . . . . <b>14f</b>		
	<b>g</b> General category . . . . . <b>14g</b>		
	<b>h</b> Other (attach statement) . . . . . <b>14h</b>		
	Deductions allocated and apportioned at shareholder level		
	<b>i</b> Interest expense . . . . . <b>14i</b>		
	<b>j</b> Other . . . . . <b>14j</b>		
	Deductions allocated and apportioned at corporate level to foreign source income		
	<b>k</b> Reserved for future use . . . . . <b>14k</b>		
	<b>l</b> Foreign branch category . . . . . <b>14l</b>		
	<b>m</b> Passive category . . . . . <b>14m</b>		
	<b>n</b> General category . . . . . <b>14n</b>		
<b>o</b> Other (attach statement) . . . . . <b>14o</b>			
Other information			
<b>p</b> Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued . . . . . ▶ <b>14p</b>			
<b>q</b> Reduction in taxes available for credit (attach statement) . . . . . <b>14q</b>			
<b>r</b> Other foreign tax information (attach statement)			



<b>Schedule K</b>		<b>Shareholders' Pro Rata Share Items</b> (continued)	<b>Total amount</b>	
<b>Alternative Minimum Tax (AMT) Items</b>	<b>15a</b>	Post-1986 depreciation adjustment . . . . .	<b>15a</b>	415
	<b>b</b>	Adjusted gain or loss . . . . .	<b>15b</b>	
	<b>c</b>	Depletion (other than oil and gas) . . . . .	<b>15c</b>	
	<b>d</b>	Oil, gas, and geothermal properties—gross income . . . . .	<b>15d</b>	
	<b>e</b>	Oil, gas, and geothermal properties—deductions . . . . .	<b>15e</b>	
	<b>f</b>	Other AMT items (attach statement) . . . . .	<b>15f</b>	
<b>Items Affecting Shareholder Basis</b>	<b>16a</b>	Tax-exempt interest income . . . . .	<b>16a</b>	
	<b>b</b>	Other tax-exempt income . . . . .	<b>16b</b>	
	<b>c</b>	Nondeductible expenses . . . . .	<b>16c</b>	ste 9 43,035
	<b>d</b>	Distributions (attach statement if required) (see instructions) . . . . .	<b>16d</b>	159,086
	<b>e</b>	Repayment of loans from shareholders . . . . .	<b>16e</b>	
<b>Other Information</b>	<b>17a</b>	Investment income . . . . .	<b>17a</b>	
	<b>b</b>	Investment expenses . . . . .	<b>17b</b>	
	<b>c</b>	Dividend distributions paid from accumulated earnings and profits . . . . .	<b>17c</b>	
	<b>d</b>	Other items and amounts (attach statement) . . . . .		
<b>Reconciliation</b>	<b>18</b>	<b>Income (loss) reconciliation.</b> Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p . . . . .	<b>18</b>	285,596

<b>Schedule L</b>		<b>Balance Sheets per Books</b>		Beginning of tax year		End of tax year	
<b>Assets</b>		<b>(a)</b>	<b>(b)</b>	<b>(c)</b>	<b>(d)</b>		
<b>1</b>	Cash . . . . .		197,023		237,777		
<b>2a</b>	Trade notes and accounts receivable . . . . .	44,010		51,340			
<b>b</b>	Less allowance for bad debts . . . . .	( )	44,010	( )	51,340		
<b>3</b>	Inventories . . . . .		1,418,050		1,757,123		
<b>4</b>	U.S. government obligations . . . . .						
<b>5</b>	Tax-exempt securities (see instructions) . . . . .		ste 6 286,533		248,226		
<b>6</b>	Other current assets (attach statement) . . . . .						
<b>7</b>	Loans to shareholders . . . . .						
<b>8</b>	Mortgage and real estate loans . . . . .						
<b>9</b>	Other investments (attach statement) . . . . .						
<b>10a</b>	Buildings and other depreciable assets . . . . .	1,280,352		1,315,825			
<b>b</b>	Less accumulated depreciation . . . . .	( 1,245,357)	34,995	( 1,286,533)	29,292		
<b>11a</b>	Depletable assets . . . . .						
<b>b</b>	Less accumulated depletion . . . . .	( )		( )			
<b>12</b>	Land (net of any amortization) . . . . .						
<b>13a</b>	Intangible assets (amortizable only) . . . . .						
<b>b</b>	Less accumulated amortization . . . . .	( )		( )			
<b>14</b>	Other assets (attach statement) . . . . .						
<b>15</b>	<b>Total assets</b> . . . . .		1,980,611		2,323,758		
<b>Liabilities and Shareholders' Equity</b>							
<b>16</b>	Accounts payable . . . . .		806,602		1,039,320		
<b>17</b>	Mortgages, notes, bonds payable in less than 1 year . . . . .		493,878		592,362		
<b>18</b>	Other current liabilities (attach statement) . . . . .		ste 7 194,544		166,230		
<b>19</b>	Loans from shareholders . . . . .						
<b>20</b>	Mortgages, notes, bonds payable in 1 year or more . . . . .		108,680		65,464		
<b>21</b>	Other liabilities (attach statement) . . . . .						
<b>22</b>	Capital stock . . . . .		10,000		10,000		
<b>23</b>	Additional paid-in capital . . . . .						
<b>24</b>	Retained earnings . . . . .		ste 8 366,907		450,382		
<b>25</b>	Adjustments to shareholders' equity (attach statement) . . . . .						
<b>26</b>	Less cost of treasury stock . . . . .		( )		( )		
<b>27</b>	<b>Total liabilities and shareholders' equity</b> . . . . .		1,980,611		2,323,758		

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

**Note:** The corporation may be required to file Schedule M-3. See instructions.

<b>1</b>	Net income (loss) per books . . . . .	242,561	<b>5</b>	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
<b>2</b>	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) _____		<b>a</b>	Tax-exempt interest \$ _____	
<b>3</b>	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize):		<b>6</b>	Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):	
<b>a</b>	Depreciation \$ _____		<b>a</b>	Depreciation \$ _____	
<b>b</b>	Travel and entertainment \$ <u>ste 10</u> 43,035	43,035	<b>7</b>	Add lines 5 and 6 . . . . .	
<b>4</b>	Add lines 1 through 3 . . . . .	285,596	<b>8</b>	Income (loss) (Schedule K, line 18). Subtract line 7 from line 4 . . . . .	285,596

**Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account**  
(see instructions)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
<b>1</b> Balance at beginning of tax year . . . . .	366,907			
<b>2</b> Ordinary income from page 1, line 21 . . . . .	331,469			
<b>3</b> Other additions . . . . .				
<b>4</b> Loss from page 1, line 21 . . . . .	( )			
<b>5</b> Other reductions . . . . .	( <u>ste 11</u> 88,908)			( )
<b>6</b> Combine lines 1 through 5 . . . . .	609,468			
<b>7</b> Distributions . . . . .	159,086			
<b>8</b> Balance at end of tax year. Subtract line 7 from line 6 . . . . .				

### Compensation of Officers

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.**  
▶ **Information about Form 1125-E and its separate instructions is at [www.irs.gov/form1125e](http://www.irs.gov/form1125e).**

Name <b>DaVinci Residential Painting Inc.</b>	Employer identification number <b>22-1234567</b>
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**Note:** Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

(a) Name of officer	(b) Social security number (see instructions)	(c) Percent of time devoted to business	Percent of stock owned		(f) Amount of compensation
			(d) Common	(e) Preferred	
<b>1</b> John Homeowner	XXX-XX-XXXX	100 %	40 %	%	183,709
2 Neal Diamond	XXX-XX-XXXX	100 %	30 %	%	186,169
3 Patti LaBell	XXX-XX-XXXX	100 %	30 %	%	150,740
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
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		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
<b>2</b> Total compensation of officers . . . . .					<b>2</b> 520,618
<b>3</b> Compensation of officers claimed on Form 1125-A or elsewhere on return . . . . .					<b>3</b> _____
<b>4</b> Subtract line 3 from line 2. Enter the result here and on Form 1120, page 1, line 12 or the appropriate line of your tax return . . . . .					<b>4</b> 520,618

## FORM 1120S

## OTHER DEDUCTIONS

## STATEMENT 2

<u>DESCRIPTION</u>	<u>AMOUNT</u>
INSURANCE	180,862
CREDIT CARD FEES	252,502
TELEPHONE	56,799
OFFICE EXPENSE	60,201
PROFESSIONAL FEES	41,075
UTILITIES	31,218
MISCELLANEOUS	19,873
INTERNET	122,214
BOARD FEES	25,000
<u>TOTAL TO FORM 1120S, LINE 19</u>	<u>789,744</u>