Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Subm	nission Identification Number (SID)			
Taxpay	yer's name	Social securit	y number	
RAJ	JASHEKAR RAGHAVAPURAM	305-53-	-8168	
Spouse	e's name	Spouse's soc	ial security nu	mber
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	 r year you a	re authoriz	ing.)
	whole dollars only on lines 1 through 5.	, ,		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	30,238.
2	Total tax		2	1,745.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3,629.
4	Amount you want refunded to you		4	1,884.
5	Amount you owe		5	
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your r	eturn)
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abo (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm in my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Loto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutirization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminatent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the pall identification number (PIN) below is my signature for the income tax return (original or amended) I a onic Funds Withdrawal Consent.	nitter, or electro- ection of the tr .S. Treasury ar icated in the ta on to debit the e the authoriza- uests must be processing of payment. I furt	nic return ori ansmission, (nd its designa xx preparation entry to this; received no the electroni her acknowle	ginator (ERO) b) the reason ated Financial n software for account. This bke (cancel) a later than 2 c payment of edge that the
	ayer's PIN: check one box only			
	▼ I authorize GLOBAL TAXES LLC to enter or generate	mv PIN 3	8 1 6	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	* Ent	er five digits, l n't enter all zer	out
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.			
Your	signature ▶ Date ▶			
Snou	nas'a DINI, ahaak ana hay aniy			
Spou	se's PIN: check one box only I authorize to enter or generate	my DINI		00 1001
L	I authorize to enter or generate to enter or generate		er five digits. I	as my
	signature on the income tax return (original or amended) I am now authorizing.		i't enter all zer	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.			
Spou	se's signature ▶ Date ▶			
	Practitioner PIN Method Returns Only—continue below	,		
Part	Certification and Authentication — Practitioner PIN Method Only			
ERO'	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		6 0 8 2 er all zeros	7 1
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income t rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subnements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in accorda	ance with the
EDO'	s signature ▶ Date ▶			
LNU	s signature ► Date ► ERO Must Retain This Form — See Instructions			
	ENO IVIUSI NEIGIII IIIIS FOITII — See IIISITUCTIONS			

Don't Submit This Form to the IRS Unless Requested To Do So

E1040-NR Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jan	ı. 1–C	ec. 31, 2023, or other tax year beginning	g	·,	2023,	ending	,	20	instructions.	
Your first name and middle initial				ime		our identifying number				
									(see instructions)	
RAJASHEKA									53-8168	
	•	per and street). If you have a P.O. box, s	ee ins	tructions.					Apt. no.	
		OOR STREET				T	<u> </u>		710	
		fice. If you have a foreign address, also	comp	lete spaces below			State		ZIP code	
OVERLAND							KS		66223	
Foreign country	патт	e r	-oreigi	n province/state/co	unity		Foreign	postal cod	ue	
Filing										
Status	1	Single	• .	•	•	ig surviving spouse (,	☐ Est	ate Trust	
Check only	lf y	ou checked the QSS box, enter the chi	ld's na	ame if the qualifyin	g pers	on is a child but not	your dep	endent:		
one box.										
Digital Assets	At a	ny time during 2023, did you: (a) receive	(as a	reward, award, or	payme	ent for property or se	rvices); c	r (b) sell, e	exchange, or	
		rwise dispose of a digital asset (or a fina	ancial	interest in a digital	asset	? (See instructions.)			. 🗌 Yes 🔀 No	
Dependents				(8) 5			(4) Ch	eck the box	if qualifies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number		(3) Relationship to yo	u Chi	ld tax credi	t Credit for other dependents	
		() Leave Laborator		, 0		(-)		П		
If more than four										
dependents, see instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box 1	(see i	nstructions)				. 1a	22,263.	
Effectively	b	Household employee wages not repor	ted on	Form(s) W-2				. 1b		
Connected	С	Tip income not reported on line 1a (se	e instr	uctions)				. 1c		
With U.S.	d	Medicaid waiver payments not reporte	d on F					. 1d		
Trade or	е	Taxable dependent care benefits from	Form	2441, line 26				. 1e		
Business	f	Employer-provided adoption benefits	from F	orm 8839, line 29				. 1f		
	g	g Wages from Form 8919, line 6								
Attach Form(s) W-2,	h	Other earned income (see instructions	. 1h							
1042-S,	i	Reserved for future use								
SSA-1042-S, RRB-1042-S,	j	Reserved for future use	. <u>1j</u>							
and 8288-A	k	Total income exempt by a treaty from	Sched	ule OI (Form 1040-	NR), i	em L,				
here. Also		line 1(e)				1k				
attach Form(s)	Z	Add lines 1a through 1h		1				. 1z	22,263.	
1099-R if	2a	Tax-exempt interest 2a						. 2b		
tax was withheld.	3a	Qualified dividends 3a				inary dividends		. 3b		
	4a	IRA distributions 4a				able amount				
If you did not get a Form	5a Pensions and annuities 5a b Taxable amount									
W-2, see	6 7	Capital gain or (loss). Attach Schedule								
instructions.	8	Additional income from Schedule 1 (Fo	•	, ,		•			7,975.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8.							30,238.	
				-					30,230.	
	10	Adjustments to income from Schedule income								
	11	Subtract line 10 from line 9. This is you							30,238.	
	12	Itemized deductions (from Schedule	-	•					, , , ,	
	deduction (see instructions)								13,850.	
	13a	Qualified business income deduction f				1 1				
	b	Exemptions for estates and trusts only								
	С	Add lines 13a and 13b						. 13c		
	14	Add lines 12 and 13c						. 14	13,850.	
	15	Subtract line 14 from line 11. If zero or	less,	enter -0 This is yo	our ta x	cable income		. 15	16,388.	

Form 1040-NR (2023)									Page 2
Tax and	16	Tax (see instructions). Check if an	y from For	rm(s): 1	814 2 [497	2 3 🗌		16	1,745.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					. 17	0.
	18	Add lines 16 and 17							. 18	1,745.
	19	Child tax credit or credit for other	r depende	ents from Sched	lule 8812 (F	orm 10	40)		. 19	
	20	Amount from Schedule 3 (Form	1040), line	8					. 20	
	21	Add lines 19 and 20							. 21	
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					. 22	1,745.
	23a	Tax on income not effectively co								
		Schedule NEC (Form 1040-NR),	line 15 .				23a			
	b	Other taxes, including self-emple	oyment ta	x, from Schedu	le 2 (Form 1	040),				
		line 21					23b			
	С	Transportation tax (see instruction	,				23c			
	d	Add lines 23a through 23c							. 23d	
	24	Add lines 22 and 23d. This is you	ur total ta :	x					. 24	1,745.
Payments	25	Federal income tax withheld from	n:							
	а	Form(s) W-2					25a	3 , 62	9.	
	b	Form(s) 1099					25b			
	С	Other forms (see instructions) .					25c			
	d	Add lines 25a through 25c							. 25d	3,629.
	е	Form(s) 8805							. 25e	
	f	Form(s) 8288-A							. 25f	
	g	Form(s) 1042-S								
	26	2023 estimated tax payments ar	nd amount	applied from 20	022 return .				. 26	
	27	Reserved for future use					27			
	28	Additional child tax credit from S	Schedule 8	8812 (Form 1040))		28			
	29	Credit for amount paid with Forn					29			
	30	Reserved for future use					30			
	31	Amount from Schedule 3 (Form 1040), line 15								
	32	Add lines 28, 29, and 31. These								
	33	Add lines 25d, 25e, 25f, 25g, 26,								3,629.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid								1,884.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here								1,884.
Direct deposit? See instructions.	b	Routing number 0 7 1 9				: X	Checking	☐ Savin	gs	
oce manuchons.	d	Account number 4 7 2 1 6 2 7 2 1 5								
	е	If you want your refund check mailed to an address outside the United States not shown on page								
		enter it here.								
	36	Amount of line 34 you want app					36			
Amount	37	Subtract line 33 from line 24. Thi		_		tiono			0.7	
You Owe	20	For details on how to pay, go to	_	-					. 37	
Theirest	38	Estimated tax penalty (see instru					38	7 Vac. Co	malete be	elow. 🗵 No
Third Party	,	ou want to allow another person to	discuss ti			HISTRU			mplete be	
Designee	Desig	esignee's Phone						ersonal ide umber (PIN		
<u> </u>		penalties of perjury, I declare that I have	ve evamine	no.	ccompanying	r echadu				of my knowledge and
		they are true, correct, and complete. I								
Sign	Your	signature		Date	Your occu	upation			f the IRS s	sent you an Identity
Here										PIN, enter it here
				DATA ANALYST			(see inst.)		
	Phone			Email address						
Paid	Prepa	rer's name	Preparer	's signature			Date	PTIN	I	Check if:
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA	SYAM I	PRIYA RAM	SAGAR G	UPTA	03/25/20)24 P02	082703	Self-employed
Use Only	Firm's	s name GLOBAL TAXES	LLC					Phor	ne no. (6	78) 965-9522
—————	Firm's	address 245 ROONEY C	T E BF	RUNSWICK N	J 08816)		Firm	's EIN	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

RAJASHEKAR RAGHAVAPURAM

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

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

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

	Sequence No. 01
Your soc	ial security number
305-53	-8168

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	7,975.
4	Other gains or (losses). Attach Form 4797		4	·
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att.		5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or	_		
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente			7 075
	1040, 1040-SR, or 1040-NR, line 8		10	7,975.

Page **2** Schedule 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a		_	
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c		-	
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
_	Act of 1974	24e		-	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
_	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
	Housing deduction from Form 2555	24i 24j		-	
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24 j		-	
k	1041)	24k			
_		24K		-	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		07/24 PRO		le 1 (Form 1040) 2023
	BAA	INEV U3/	ULIZA FINO	uu	

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information.

Sequence No. 7B

Your identifying number

RAJASHEKAR RAGHAVAPURAM 305-53-8168 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business 17 Add columns (f) and (g) of line 16 on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Answer all questions.

OMB No. 1545-0074 Attachment Sequence No. **7C**

Department of the Treasury Internal Revenue Service

Name sl	Name shown on Form 1040-NR Your identifying number									
RAJA	SHEKAR RAGHAVAPURAM				305-53-816					
Α	Of what country or countries w	vere you a citizen or nationa	al during the tax y	ear? INDIA						
В	In what country did you claim	residence for tax purpose	s during the tax y	ear? United States						
С	Have you ever applied to be a	green card holder (lawful p	ermanent resider	nt) of the United States? .	[☐ Yes				
D	Were you ever:				_	_				
1.	A U.S. citizen?									
2.	A green card holder (lawful per	· · · · · · · · · · · · · · · · · · ·			L	☐ Yes				
_	If you answer "Yes" to (1) or (2		•							
Е	If you had a visa on the last of immigration status on the last of	day of the tax year. $F1$								
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and	left the United States durin	g 2023. See instri	uctions.						
	Note: If you're a resident of C									
	check the box for Canada or	-			Mexico					
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	es	Date entered United State mm/dd/yy		ed United States n/dd/yy				
	Tillin dan yy	ППП/ аа/ уу	 	типлаалуу		плаалуу				
			_							
Н	Give number of days (including	vacation, nonworkdays, and	l d partial days) you	were present in the United	States during:					
	2021	, 2022	, an	d 2023 365						
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?.			[☐ Yes				
J	Are you filing a return for a trus	st?			[☐ Yes				
	If "Yes," did the trust have a U.S. person, or receive a contr				_	☐ Yes ☐ No				
K	Did you receive total compens	ation of \$250,000 or more	during the tax yea	ar?	[☐ Yes 🗵 No				
	If "Yes," did you use an alterna			•		☐ Yes ☐ No				
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with a	foreign country,				
1.	Enter the name of the country, amount of exempt income in the				claimed the treat	ty benefit, and the				
	(a) Cou	ntry	(b) Tax treaty art			ınt of exempt				
				claimed in prior tax ye	ars income in	current tax year				
	(e) Total. Enter this amount of	n Form 1040-NR, line 1k. D	o not enter it any	where else on line 1						
2.	Were you subject to tax in a fo		-		[☐ Yes ☐ No				
	Are you claiming treaty benefit				[☐ Yes				
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to y	our return.						
M	Check the applicable box if:									
1.	This is the first year you are multiplier with a U.S. trade or business to					ctively connected				
2.	You have made an election in States as effectively connected									
For Pa	perwork Reduction Act Notice,	see the Instructions for Fo	rm 1040-NR.	RAA REV 03/07/24 PRO	Schedule OI (F	Form 1040-NR) 2023				

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to www.irs.gov/ScheduleC for instructions and the latest information.

Attachment Sequence No. **09**

	of proprietor	ъл					security number (SSN)
	ASHEKAR RAGHAVAPURA		uding product as assis a fac	a l==±:	votions)		-53-8168
Α	Principal business or profession	ווכ, incl	uding product or service (se	e instru	ucuofis)		er code from instructions
	SOFTWARE SERVICES		- -				5 1 9 2 0 0
С	Business name. If no separate	D Emp	bloyer ID number (EIN) (see instr.)				
E	Business address (including s	uite or	room no.) 14125 BF	ROADN	MOOR STREET		
	City, town or post office, state		ZIP code OVERLANI		RK, KS 66223		
F	Accounting method: (1)	≺ Cas	h (2) 🗌 Accrual (3	3) 🗌	Other (specify)		
G	Did you "materially participate	e" in the	e operation of this business	during	2023? If "No," see instructions for li	mit on l	osses . X Yes No
Н	If you started or acquired this	busine	ess during 2023, check here				\square
I	Did you make any payments is	n 2023	that would require you to fil	e Form	n(s) 1099? See instructions		🗌 Yes 🕱 No
J		e requi	red Form(s) 1099?		<u> </u>		🗌 Yes 🗌 No
Par	Income						
1					this income was reported to you or		7 075
_					d	1	7,975.
2							7 075
3							7,975.
4							7 075
5							7,975.
6			•		refund (see instructions)		7 075
7 Part	Fynansas Enter av	10 b .	es for business use of yo	ur ho		1	7,975.
Part	Advertising	8	o for business use of yo	18	Office expense (see instructions)	18	
9	Car and truck expenses			19	Pension and profit-sharing plans		
9	(see instructions)	9		20	Rent or lease (see instructions):	10	
10	Commissions and fees .	10		а	Vehicles, machinery, and equipment	20a	1
11	Contract labor (see instructions)	11		b	Other business property		
12	Depletion	12		21	Repairs and maintenance		
13	Depreciation and section 179			22	Supplies (not included in Part III)		
	expense deduction (not included in Part III) (see			23	Taxes and licenses	23	
	instructions)	13		24	Travel and meals:		
14	Employee benefit programs			а	Travel	24a	
	(other than on line 19) .	14		b	Deductible meals (see instructions)	24b	
15	Insurance (other than health)	15		25	Utilities	25	
16	Interest (see instructions):			26	Wages (less employment credits)	26	
а	Mortgage (paid to banks, etc.)	16a		27a	Other expenses (from line 48)	27a	
b	Other	16b		b	Energy efficient commercial bldgs		
17	Legal and professional services	17			deduction (attach Form 7205) .	27b	
28					8 through 27b		
29	Tentative profit or (loss). Subt	ract lin	e 28 from line 7			29	7,975.
30	•	-	•	e expe	nses elsewhere. Attach Form 8829		
	unless using the simplified me			(=) -	la a a .		
	Simplified method filers only			. , .			
	and (b) the part of your home		•			-	
31	Net profit or (loss). Subtract		-	ter on I	line 30	30	
31	. ,)		
	 If a profit, enter on both Sch checked the box on line 1, see 	e instru	• • •		, , ,	31	7,975.
	• If a loss, you must go to line				J		
32	If you have a loss, check the b	oox tha	it describes your investment	ın this	activity. See instructions.		
	• If you checked 32a, enter the		•		· · · · · · · · · · · · · · · · · · ·	00	▼ All incomptants of the of the
	SE, line 2. (If you checked the	box on	i line 1, see the line 31 instruc	tions.)	Estates and trusts, enter on		X All investment is at risk.
	Form 1041, line 3. • If you checked 32b, you mu	et atta	ch Form 6109 Vour loss me	av bo li	mited	32b	Some investment is not at risk.
	- 11 YOU CHECKEU JZD, YOU MU	or alld	on r onni o 130. 1001 1088 1118	ᇄᄱᅜᄞ	mitou.		

BAA

Schedule C (Form 1040) 2023 Page **2**

Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (atta	ıch ex	nlanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor if "Yes," attach explanation	y?	. Tes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part	Information on Your Vehicle. Complete this part only if you are claiming car or are not required to file Form 4562 for this business. See the instructions for line 1 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 2023, enter the number of miles you used your vehicle during 2023, enter the number of miles your vehicle during 2023, enter the number of miles your vehicle during 2024, enter the number of miles your vehicle during 2024, enter the number of miles your vehicle during 2024, enter the number of miles your vehicle during 2024, enter the num	ehicle	e for:	
а	Business b Commuting (see instructions) c C	ther		
45	Was your vehicle available for personal use during off-duty hours?			☐ No
46	Do you (or your spouse) have another vehicle available for personal use?			☐ No
47a	Do you have evidence to support your deduction?			☐ No
b	If "Yes," is the evidence written?		Tes	☐ No
Part	If "Yes," is the evidence written?	27b,	or line 30.	
48	Total other expenses. Enter here and on line 27a	48		