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	ver's name	Social securit	y number	
LUC	CAS KENNEDY	574-25-	-5107	
Spouse	o's name	Spouse's soc	ial security nur	mber
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	∣ ∵year you a	re authorizi	ing.)
Enter	whole dollars only on lines 1 through 5.			
Note	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	66,312.
2	Total tax		2	7,458.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	7,584.
4	Amount you want refunded to you		4	126.
5	Amount you owe		5	
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and I	ceep a cop	y of your r	eturn)
return to sen for an Agent payme author payme busine taxes persor Electro	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmorted my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated from y federal taxes owed on this return and/or a payment of estimated tax, and the financial institution rization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests 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 penal identification number (PIN) below is my signature for the income tax return (original or amended) I approach to the context of the co	itter, or electro ection of the tr S. Treasury ar cated in the ta on to debit the e the authoriza- uests must be processing of ayment. I furt n now authori	nic return origansmission, (Ind its designation of the designation of the designation of the electronic her acknowled and, if a	ginator (ERO) b) the reason ited Financial in software for account. This ike (cancel) a later than 2 c payment of edge that the
	▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN	5 1 0	as my
٠	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, k n't enter all zer	out
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.			
Your	signature ▶ Date ▶ _	03/20/2024		
Spou	se's PIN: check one box only			
	I authorize to enter or generate	my PIN		as my
	ERO firm name	,	er five digits, k	
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all zer	os
	I will enter my PIN as my signature on the income tax return (original or amended) I am n 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 to rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Ir	itting this retu	rn in accorda	ance with the
FR∩'	s signature ▶ Date ▶			
	ERO Must Retain This Form — See Instructions			

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

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling	OMB 110. 10 10			See se	eparate instructions.		
Your first name	and m	iddle initial	Last na	me					Your so	ocial security number		
LUCAS				KENNEDY						574 25 5107		
	pouse's	s first name and middle initial	Last na						Spouse's social security number			
•												
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	Preside	ential Election Campaigi		
22593 E	POW	ERS PL								here if you, or your		
City, town, or p	ost offi	ice. If you have a foreign address, also co	omplete s	paces below.	Sta	ite	ZIP	code		e if filing jointly, want \$3 this fund. Checking a		
AURORA				CO 80015				015	box below will not change			
Foreign country	y name		F	Foreign province/state/o	coun	ty	Forei	gn postal code	your ta	x or refund.		
										You Spouse		
Filing Status	; <u>×</u>	Single				☐ Head of h	ousel	nold (HOH)				
Check only	L	Married filing jointly (even if only or	ne had i	ncome)								
one box.		Married filing separately (MFS)				☐ Qualifying						
	-	you checked the MFS box, enter the			ı che	ecked the HOF	H or C	SS box, ento	er the ch	ild's name if the		
	qu	ualifying person is a child but not you	ır deper	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	payr	ment for prope	erty or	services); o	r (b) sell,			
Assets	exch	nange, or otherwise dispose of a digi	ital asse	et (or a financial intere	est ir	n a digital asse	et)? (S	ee instructio	ns.)	☐ Yes ☒ No		
Standard	Som	neone can claim: You as a de	pendent	t	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	ı were a dual-status a	alien	1						
Age/Blindnes	s You:	: Were born before January 2, 1	959	Are blind Spo	ouse	: Was bor	rn bef	ore January	2, 1959	☐ Is blind		
Dependent	s (see	instructions):		(2) Social security	,	(3) Relationsh	ain (4) Check the b	oox if qual	lifies for (see instructions).		
If more	,	First name Last name		number		to you		Child tax of	redit	Credit for other dependents		
than four												
dependents, see instruction												
and check	s 											
here]											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions)					. 1 a	a 61,534.		
Attach Form(s)	b	Household employee wages not re	eported	on Form(s) W-2					. 1k)		
W-2 here. Also	С	Tip income not reported on line 1a	•	•					. 10	;		
attach Forms W-2G and	d	Medicaid waiver payments not rep			nstru	uctions)			. 10	<u>t</u>		
1099-R if tax	е	Taxable dependent care benefits f		*					. 16	•		
was withheld.	f	Employer-provided adoption bene	efits from	n Form 8839, line 29					. 11	f		
If you did not get a Form	g	Wages from Form 8919, line 6 .							. 10			
W-2, see	h	Other earned income (see instructi	,			1	i ·		. <u>1</u>	n 0.		
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1i</u>	i			61 504		
	Z	Add lines 1a through 1h	· ·						. 1z			
Attach Sch. B if required.	2a	'	2a	100		axable interest			. 2t			
ii required.	3a		3a			Ordinary divide			. 3k			
Standard	4a		4a			axable amoun			. 4k			
Deduction for—	5a		5a			axable amoun			. 5k			
 Single or Married filing 	6a	,	6a			axable amoun	ιτ		. 6k)		
separately, \$13,850	c	If you elect to use the lump-sum e			`	,			-	226		
 Married filing 	7	Capital gain or (loss). Attach Sche				-						
jointly or Qualifying	8 9	Add lines 17, 2h, 3h, 4h, 5h, 6h, 7							. 8			
surviving spouse, \$27,700	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							. 10			
 Head of 	11	Adjustments to income from Sche- Subtract line 10 from line 9. This is							. 11			
household, \$20,800	12	Standard deduction or itemized	-						. 12			
If you checked any box under	13	Qualified business income deducti				 15-Δ			. 13			
Standard	14								. 14			
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer					 ne					
				-, 0. 1111010 y	'					·		

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌	[16	6,813.
Credits	17	Amount from Schedule 2, lir	ne 3				[17	
	18	Add lines 16 and 17						18	6,813.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	6,813.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21 .		[23	645.
	24	Add lines 22 and 23. This is	your total tax					24	7,458.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 7	,584.		
	b	Form(s) 1099				25b	0.		
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	7 , 584.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return		[26	
qualifying child,	27	Earned income credit (EIC)			No .	27	Ī		
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	•	-	-		[33	7,584.
Refund	34	If line 33 is more than line 24						34	126.
11014114	35a	Amount of line 34 you want				•	+	35a	126.
Direct deposit?	b	Routing number 0 3 1					Savings		
See instructions.	d	Account number 4 1 1					3.		
	36	Amount of line 34 you want				36			
Amount	37	Subtract line 33 from line 24	· · · · · · · · · · · · · · · · · · ·						
You Owe	٥.	For details on how to pay, g						37	
	38	Estimated tax penalty (see in	_	-		38			
Third Party	Do	you want to allow another				See			
Designee		structions					omplete be	elow.	⋉ No
J	De	signee's		Phone			onal identific	ation	
	naı			no.			per (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here			ipiete. Deciaration t	· · · · ·	, <i>, ,</i>	ased on all illioinfall			, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					CIVIL ENG	TNEER	(see in		iiv, critor it riore
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat		If the I	RS ser	nt your spouse an
Keep a copy for		,					Identit	y Prote	ection PIN, enter it here
your records.							(see in	st.)	
	Ph	one no.		Email address	LUCASKENNED'	Y1398@GMAIL.CO	M(
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY.	A RAM SAC	GAR GUPTA	03/20/2024	P02082	703	Self-employed
Use Only	Firm's name GLOBAL TAXES LLC Phone no. (678) 965-								678) 965-9522
————	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

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

LUCAS KENNEDY

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.

Your social security number 574-25-5107

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	4,569.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		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		
- 1	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. Enter	here and on Form		
	1040. 1040-SR. or 1040-NR. line 8		10	4,569.

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

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	323.
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)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
_	Act of 1974	-	
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
ı	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		
	Housing deduction from Form 2555	-	
J k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
N	1041)		
z	Other adjustments. List type and amount:		
~	04-		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	323.
	· · · · · · · · · · · · · · · · · · ·		

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 02

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

Your social security number 574-25-5107

Par	tl Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	
Par	t Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	645.
5	Social security and Medicare tax on unreported tip income. Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.		
	If not required, check here	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(cc	ontini	ued on page 2)

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

Part II Other Taxes (continued)

7	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:				
		17a			
b	Recapture of federal mortgage subsidy, if you sold your home	4-1			
	see instructions	17b	_		
	Additional tax on HSA distributions. Attach Form 8889	17c	_		
a	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d			
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e			
f	Additional tax on Medicare Advantage MSA distributions. Attach				
	Form 8853	17f			
g	Recapture of a charitable contribution deduction related to a				
L	fractional interest in tangible personal property	17g			
n	plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred				
	compensation plan described in section 457A	17i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
I	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated	47			
	corporation	17m	_		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
o	Tax on non-effectively connected income for any part of the				
	year you were a nonresident alien from Form 1040-NR	170			
р	Any interest from Form 8621, line 16f, relating to distributions	47-			
	from, and dispositions of, stock of a section 1291 fund	17p	_		
q	Any interest from Form 8621, line 24	17q	_		
Z	Any other taxes. List type and amount:	47_			
	Tatal additional tanca Add lines 17a thurson 17a	17z	40		
8	Total additional taxes. Add lines 17a through 17z		18		Į
9	Reserved for future use		19		
20 21	Section 965 net tax liability installment from Form 965-A Add lines 4, 7 through 16, and 18. These are your total other taxe	20			
- 1	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.		21	645.	
					-

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074 Attachment

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.

Sequence No. 09

Name	of proprietor					Social	security number (SSN)
LUCA	AS KENNEDY					574	-25-5107
Α	Principal business or profession	n, incl	uding product or service (se	e instru	ictions)	B Ente	er code from instructions
	TAXES FARE					4	185300
С	Business name. If no separate	busin	ess name, leave blank.			D Emp	ployer ID number (EIN) (see instr.)
	TAXES FARE						
E	Business address (including su	uite or	room no.) 22593 E	POWE	RS PL		
	City, town or post office, state						
F	Accounting method: (1)	C as	h (2) Accrual (3) [](Other (specify)		
G	Did you "materially participate	" in th	e operation of this business	during	2023? If "No," see instructions for li	mit on l	osses . X Yes No
Н							
I	Did you make any payments in	n 2023	that would require you to fil-	e Form	(s) 1099? See instructions		🗌 Yes 🕱 No
J	If "Yes," did you or will you file	requi	red Form(s) 1099?				🗌 Yes 🗌 No
Part	Income						
1	Gross receipts or sales. See ir	struct	ions for line 1 and check the	box if	this income was reported to you or		
	•					1	11,119.
2	Returns and allowances					2	
3	Subtract line 2 from line 1 .					3	11,119.
4	Cost of goods sold (from line	42) .				4	
5							11,119.
6					efund (see instructions)		
7	Gross income. Add lines 5 an					7	11,119.
Part			es for business use of yo				
8	Advertising	8	•	18	Office expense (see instructions)	18	
9	Car and truck expenses			19	Pension and profit-sharing plans	19	
·	(see instructions)	9	6 , 550.	20	Rent or lease (see instructions):		
10	Commissions and fees .	10		а	Vehicles, machinery, and equipment	20a	
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		
	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) .	II.	
28	Total expenses before expen	ses fo	r business use of home. Add	lines 8	sthrough 27b	28	6,550.
29	Tentative profit or (loss). Subtr	act lin	e 28 from line 7			29	4,569.
30	Expenses for business use of	f your	home. Do not report these	exper	nses elsewhere. Attach Form 8829		
	unless using the simplified me	thod.	See instructions.				
	Simplified method filers only	: Ente	r the total square footage of	(a) you	r home:		
	and (b) the part of your home	used f	or business:		. Use the Simplified		
	Method Worksheet in the instr	uction	s to figure the amount to ent	er on li	ne 30	30	
31	Net profit or (loss). Subtract	ine 30	from line 29.		,		
	• If a profit, enter on both Sch	edule	1 (Form 1040), line 3, and o	n Sch e	edule SE, line 2. (If you		
	checked the box on line 1, see	instru	ictions.) Estates and trusts, e	enter o	n Form 1041, line 3.	31	4,569.
	• If a loss, you must go to line	e 32.			J		
32	If you have a loss, check the b	ox tha	t describes your investment	in this	activity. See instructions.		
	If you checked 32a, enter the	e loss	on both Schedule 1 (Form 1	040). I	ine 3, and on Schedule		
	SE, line 2. (If you checked the		•		· · · · · · · · · · · · · · · · · · ·	32a	X All investment is at risk.
	Form 1041, line 3.			-		32b	☐ Some investment is not
	• If you checked 32b, you mu	st atta	ch Form 6198. Your loss ma	y be lir	nited.		at risk.

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 (attack)	ch explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor. If "Yes," attach explanation	
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 Part	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	
43	When did you place your vehicle in service for business purposes? (month/day/year) 08/03/2020	
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 you while your vehicle during 2023, enter the number of miles you while your vehicle during 2023, enter the number of miles you while your vehicle during 2023, enter the number of miles	ehicle for:
а	Business 10,000 b Commuting (see instructions) c Of	ther 15,000
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	Other Expenses. List below business expenses not included on lines 8–26, line 2	27b, or line 30.
48	Total other expenses. Enter here and on line 27a	48

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

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

OMB No. 1545-0074

2023

Attachment Sequence No. 12

intern	al Revenue Service do to www.iis.gov/scrieduleb to	or monucuons and	uie iatest illioilliat				
	(s) shown on return CAS KENNEDY				our social 574-25		urity number
	you dispose of any investment(s) in a qualified opportunity	•	•				
IT "Y	es," attach Form 8949 and see its instructions for additiona	al requirements to	r reporting your ga	un or los	3S.		
Pa	rt I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less	; (see in	nstr	ructions)
lines	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to	(d) Proceeds	(e) Cost (or other basis)	Adju to gain o	(g) stments or loss from	n f	(h) Gain or (loss) Subtract column (e) from column (d) and
	e dollars.	(sales price)	(or other basis)		8949, Part column (g)		combine the result with column (g)
1a 	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.						
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	136.	217.				-81.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	1.	1.				0.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked						
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	24 .	. 4	.	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr		om . 5		
6	Short-term capital loss carryover. Enter the amount, if an	y, from line 8 of y		_	_	, (
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	ımn (h). If you have	e any lo	ng-		-81.
Pa	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Y	ear (see	e in	structions)
See lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	Adju	(g) stments or loss from		(h) Gain or (loss) Subtract column (e) from column (d) and
This who	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8	8949, Part I column (g)	II,	combine the result with column (g)
8a	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.						
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	1,364.	1,933.		984		415.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	3.	1.				2.
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					\top	
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			in or (lo	oss) . 1 1	1	
12	Net long-term gain or (loss) from partnerships, S corporat			dule(s) K	(-1 12	2	
	Capital gain distributions. See the instructions				. 13	3	
	Long-term capital loss carryover. Enter the amount, if any			Carryo	ver	\top	

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 336. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? X Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

8949

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence No. 12A

OMB No. 1545-0074

Internal Revenue Service Name(s) shown on return LUCAS KENNEDY

Department of the Treasury

Social security number or taxpayer identification number

574-25-5107

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). (d) Cost or other basis Gain or (loss) (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below Subtract column (e) Description of property Date acquired disposed of (sales price) from column (d) and and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) (see instructions) in the separate combine the result (g) Code(s) from Amount of adjustment instructions. with column (a). instructions 01/01/23 12/31/23 136. 217. -81.

ROBINHOOD SECURITIES LLC 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B 136. 217.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

-81.

above is checked), or line 3 (if Box C above is checked) .

Attachment Sequence No. 12A Form 8949 (2023)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side LUCAS KENNEDY

Social security number or taxpayer identification number 574-25-5107

Before you check Box D. E. or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker, A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

✓ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on I	Form(s) 1099)-B showing bas	•	`)
1					Adjustment, if any, to gain or loss	

(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	See the separate instructions.		If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).			
ROBINHOOD SECURITIES LLC	01/01/23	12/31/23	1,364.	1,933.	W	984.	415.			
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), lir	lude on your ne 9 (if Box E	1,364.	1,933.		984.	415.			

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

8949

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074 Attachment

Sequence No. 12A

Internal Revenue Service Name(s) shown on return LUCAS KENNEDY

Department of the Treasury

Social security number or taxpayer identification number 574-25-5107

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

-	-			reported on not reported		-	sis wasn't report	ed to the IF	RS		
1		(a)		(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)	
		le: 100 sh. X		(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(f) (g) Code(s) from Amount of	from column (d) and combine the result with column (g).	
ROBIN	IHOOD	CRYPTO	LLC	01/01/23	12/31/23	1.	1.			0.	
nega Sche	tive amo dule D, li	unts). Ente ine 1b (if Bo	r each tota ox A above	s (d), (e), (g), and all here and ince is checked), lin	lude on your ne 2 (if Box B	1.	1.			0.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Attachment Sequence No. 12A Form 8949 (2023)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side LUCAS KENNEDY

Social security number or taxpayer identification number 574-25-5107

Before you check Box D. E. or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker, A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B	showing basis was reported to the IRS (see Note above)
---	--

| (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

П	(F)	Long-term	transactions	not re	ported to	you on	Form	1099-E	3

	not reported	to you on i c	JIII 1099-D				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD CRYPTO LLC	01/01/23	12/31/23	3.	1.			2.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), lir	lude on your ne 9 (if Box E	3.	1.			2.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

SCHEDULE SE (Form 1040)

Self-Employment Tax

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

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

OMB No. 1545-0074 Attachment Sequence No. 17

Internal Revenue Service LUCAS KENNEDY

Department of the Treasury

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

574-25-5107

Part	Self-Employment Tax		
	If your only income subject to self-employment tax is church employee income , see instructions for home definition of church employee income.	w to re	port your income
Α	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form \$400 or more of other net earnings from self-employment, check here and continue with Part I		
Skip li	ines 1a and 1b if you use the farm optional method in Part II. See instructions.		
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ	1b ()
Skip li	ine 2 if you use the nonfarm optional method in Part II. See instructions.		
2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order	2	4,569.
3	Combine lines 1a, 1b, and 2	3	4,569.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 .	4a	4,219.
	Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
С	Combine lines 4a and 4b. If less than \$400, stop ; you don't owe self-employment tax. Exception: If less than \$400 and you had church employee income , enter -0- and continue	4c	4,219.
5a	Enter your church employee income from Form W-2. See instructions for definition of church employee income		
b	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0	5b	0.
6	Add lines 4c and 5b	6	4,219.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2023	7	160,200
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$160,200 or more, skip lines 8b through 10, and go to line 11		
b	Unreported tips subject to social security tax from Form 4137, line 10 8b		
С	Wages subject to social security tax from Form 8919, line 10 8c		
d	Add lines 8a, 8b, and 8c	8d	64,886.
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	95,314.
10	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	523.
11	Multiply line 6 by 2.9% (0.029)	11	122.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4, or Form 1040-SS, Part I, line 3	12	645.
13	Deduction for one-half of self-employment tax.	12	043.
10	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	line 15		

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

Part	Optional Methods To Figure Net Earnings (see instructions)		
	Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than 0, or (b) your net farm profits² were less than \$7,103.		
14	Maximum income for optional methods	14	6,560
15	Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$6,560. Also, include this amount on line 4b above	15	
and a	arm Optional Method. You may use this method only if (a) your net nonfarm profits ³ were less than \$7,103 lso less than 72.189% of your gross nonfarm income, ⁴ and (b) you had net earnings from self-employment east \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.		
16	Subtract line 15 from line 14	16	
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above	17	
¹ From	Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.	65), bo	x 14, code A.
² From you v	i Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A—minus the amount ⁴ From Sch. C, line 7; and Sch. K-1 (Form 106 would have entered on line 1b had you not used the optional method.	5), box	14, code C.

BAA

Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment Sequence No. **55**

LUCAS KENNEDY 574-25-5107	lame(s) shown on return	Your taxpayer identification number
	LUCAS KENNEDY	574-25-5107

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

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

1	(a) Trade, business, or aggregation name (b) Taxpayer identification nur			Qualified business income or (loss)
i				
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2		
3 4 5	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-Qualified business income component. Multiply line 4 by 20% (0.20)	4	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 2.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 2.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0.
10	Qualified business income deduction before the income limitation. Add lines 5 and	1	10	0.
11	Taxable income before qualified business income deduction (see instructions)	11 52,462.		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12 475.		
13	Subtract line 12 from line 11. If zero or less, enter -0	13 51,987.		10 000
14	Income limitation. Multiply line 13 by 20% (0.20)		14	10,397.
15	the applicable line of your return (see instructions)		15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0	nd 7. If greater than	17	(0.)