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

2023
2023

							CIVID 140. 10 10		O, D	0	no or otapio iii tino opaco.
For the year Jan	n. 1–Dec	. 31, 2023, or other tax year beginning			, 2	023, ending		, 20	S	ee sep	arate instructions.
Your first name and middle initial Last name							Y	Your social security number			
PETER PRO					ROFESSOR					111	11 1111
If joint return, s	pouse's	first name and middle initial	Last nar	ne				7	S	oouse's	social security number
PAULA			PROF	ESSC)R				2	222	22 2222
Home address	(numbe	er and street). If you have a P.O. box, s	ee instructio	ons.				Apt. no.	Pi	residen	tial Election Campaign
		STIC AVENUE									ere if you, or your
City, town, or post office. If you have a foreign address, also complete spaces below.					ZIP code			f filing jointly, want \$3 this fund. Checking a			
LUBBOC							TX	79409	bo	ox belo	w will not change
Foreign countr	y name			oreign p	rovinc	e/state/coun	ty	Foreign postal co	ode yo	our tax	or refund. You Spouse
		l o:							n\		You Spouse
Filing Status		Single					Head of ho	ousehold (HOF	1)		
Check only	X	Married filing jointly (even if only Married filing separately (MFS)	one nad ii	icome)			Qualifying	surviving spou	100 (OS	26)	
one box.	If v	ou checked the MFS box, enter t	ne name o	f vour s	nous	e If you ch					d's name if the
	-	alifying person is a child but not y			pous	o. II you oik		101 000 000,	oritor ti	iic oi iii	a s name ii tiie
				7		·					
Digital		ny time during 2023, did you: (a) re						,	. ,	_	Yes X No
Assets		ange, or otherwise dispose of a						t)? (See Instruc	ctions.) <u> </u>	Yes A No
Standard Deduction	_	eone can claim:				•	•		`	X	
		_		_	uuai	-Status allei				$\overline{}$	
Age/Blindnes	s You	Were born before January 2	1959	Are b	lind	Spouse	: Was bor	n before Janua		_	s blind
Dependent	•			(2)		security	(3) Relationsh	ib I.			es for (see instructions):
If more		irst name Last name			num		to you		ax cred	it (Credit for other dependents
than four dependents,		RT PROFESSOR				6789	SON		X		
see instruction	s LIS	SA PROFESSOR		987	65	4321	DAUGHTER		<u> </u>		X
and check here	1 —										
	1a	Total amount from Form(s) W-2,	boy 1 (co	o inetru	otiono	.)				1a	124,000.
Income	b	Household employee wages not	•			•				1b	124,000.
Attach Form(s) W-2 here. Also	c	Tip income not reported on line								1c	
attach Forms	d	Medicaid waiver payments not r	•		,		uctions)			1d	
W-2G and 1099-R if tax	е	Taxable dependent care benefit								1e	
was withheld.	f	Employer-provided adoption be	nefits from	Form 8	3839,	line 29 .				1f	
If you did not	g	Wages from Form 8919, line 6								1g	
get a Form W-2, see	h	Other earned income (see instru	ctions) .		\blacksquare					1h	
instructions.	i	Nontaxable combat pay election	(see instr	uctions)			<u>li</u>				
	Z	Add lines 1a through 1h .								1z	124,000.
Attach Sch. B if required.	2a	Tax-exempt interest	2a	1 17	0.0		axable interest			2b	6,000.
	3a	Qualified dividends	3a	17	_		Ordinary divider			3b	20,000. 9,750.
Standard	4a	IRA distributions Pensions and annuities	4a	<u>Z</u> 5,	00		axable amount axable amount			4b 5b	9,750.
Deduction for—	5a 6a	Social security benefits	5a 6a				axable amount			6b	
Single or Married filing	C	If you elect to use the lump-sum		nethod	chec					OD	
separately, \$13,850	7	Capital gain or (loss). Attach Sch				•	,		. 📙	7	22,000.
Married filing jointly or	8	Additional income from Schedul								8	52,900.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b,								9	234,650.
surviving spouse, \$27,700	10	Adjustments to income from Sc		-						10	3,738.
 Head of household, 	11	Subtract line 10 from line 9. This	is your ac	djusted	gros	s income				11	230,912.
\$20,800 If you checked	12	Standard deduction or itemize	d deducti	ons (fro	m Sc	hedule A)				12	42,000.
any box under Standard	13	Qualified business income dedu	ction from	Form 8	995 c	or Form 899	95-A			13	9,832.
Deduction,	14									14	51,832.
see instructions.	15	Subtract line 14 from line 11. If a	ero or less	s, enter	-0 T	his is your	taxable incom	ie		15	179,080.

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

Cat. No. 11320B

Form **1040** (2023)

Form 1040 (2023	3) PE'	TER PROFESSOR &	PAULA P	ROFESSO	R			111	-11	-1111 Page
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌	<u> </u>		16	27,458
Credits	17	Amount from Schedule 2, lir	ne 3						17	0 .
	18	Add lines 16 and 17							18	27,458
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19	2,500
	20	Amount from Schedule 3, lir	ne 8						20	7,200
	21	Add lines 19 and 20							21	9,700
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	17,758
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .				23	7,475
	24	Add lines 22 and 23. This is	your total tax						24	25,233
Payments	25	Federal income tax withheld	from:			. Y.				
_	а	Form(s) W-2				25a	25,	000.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	25,000
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return				26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
attacii ocii. Lio.	28	Additional child tax credit from	m Schedule 8812	2		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							32	
-	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	25,000
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	ınt you ov e	erpaid		34	
	35a	Amount of line 34 you want							35a	
Direct deposit?	b	Routing number X X X			c Type:		g 🗋 Sa	avings		
See instructions.	d	Account number X X X	XXXX	$X \mid X \mid X \mid X$	(XXX				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24		•						
You Owe		For details on how to pay, g	_						37	233
	38	Estimated tax penalty (see in				38				
Third Party		you want to allow another	person to disc							₹7
Designee		structions				. 🗆	Yes. Con	•		⊠ No
		signee's me		Phone no.			Person numbe	al identifi r (PIN)	cation	
Sign	Un	der penalties of perjury, I declare t	nat I have examine	d this return and	accompanying sche	edules and s	tatements,	and to th	e best	of my knowledge and
Here	bel	lief, they are true, correct, and com	plete. Declaration	of preparer (other	than taxpayer) is b	ased on all i	nformation	of which	prepar	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation			If the	IRS se	nt you an Identity
								Prote (see ii		IN, enter it here
Joint return? See instructions.		PROFESSOR								
Keep a copy for	Sþ									nt your spouse an ection PIN, enter it her
your records.					BUSINESS (OWNER		(see ir	nst.)	
	Ph	one no.		Email address						
Doid	Pre	eparer's name	Preparer's signa	ture		Date	F	PTIN		Check if:
Paid	_		SELF-PREF	PARED						Self-employed
Preparer	Fir	m's name						Phone	e no.	
Use Only							Firm's	Firm's EIN		

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

Your social security number

Department of the Treasury Internal Revenue Service

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. Attachment Sequence No. **01**

OMB No. 1545-0074

5 E.T.F	ER PROFESSOR & PAULA PROFESSOR	<u> </u>	<u> </u>
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	52,900.
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F ,	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss)	
b	Gambling		
С	Net operating loss		
d	Foreign earned income exclusion from Form 2555 \ 8d (
е	Income from Form 8853		
f	Income from Form 8889		
g	Income from Form 8853		
h	Jury duty pay		
i	Jury duty pay		
J	Activity not engaged in for profit income		
k	Stock options		
ı	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)	-	
n	Section 951(a) inclusion (see instructions) 8n		
0	Section 951A(a) inclusion (see instructions)		
р	Section 461(I) excess business loss adjustment	_	
_	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	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 8t		
	Wages earned while incarcerated 8u		
u	Other income. List type and amount:	-	
Z	Other income. List type and amount.		
9	Total other income. Add lines 8a through 8z	9	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form	9	
.0	1040, 1040-SR, or 1040-NR, line 8	10	52,900.
	12.12, 12.12.21, 21.12.10.11, 11.12.2	1.0	<u> </u>

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		13		
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14		
15	Deductible part of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans	15	3,	<u>738.</u>
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	Self-employed health insurance deduction	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 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
-1	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 chaptains to section 403(b) plans 24g Attorney fees and court costs for actions involving certain unlawful			
h	discrimination claims (see instructions)			
	Attorney fees and court costs you paid in connection with an award	-		
٠	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
i	Housing deduction from Form 2555			
, k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
_	24z			
25	Total other adjustments. Add lines 24a through 24z	25		
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on			
-	Form 1040 1040-SB or 1040-NB line 10	26	٦ ا	732

Schedule 1 (Form 1040) 2023

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

Your social security number

PET	ER_PROFESSOR & PAULA PROFESSOR 1	11-11	1111
Pa	rt I Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	7,475.
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	
		ontinue	ed on page 2)

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

Cat. No. 71478U

Schedule 2 (Form 1040) 2023

Schedule 2 (Form 1040) 2023

Part II Other Taxes (continued)

					_
17	Other additional taxes:	4			
а	Recapture of other credits. List type, form number, and amount:				
		17a			
b	Recapture of federal mortgage subsidy, if you sold your home				
	see instructions	17b			
		17c			
d	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 fractional interest in tangible personal property	17g			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
1	Tax on accumulation distribution of trusts	17 I			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17 0			
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
Z	Any other taxes. List type and amount:				
		17z			
18	Total additional taxes. Add lines 17a through 17z		 18		
19	Reserved for future use		 19		
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your total other taxe				
	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		 21	7,475	

Schedule 2 (Form 1040) 2023

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
PETER PROFESSOR & PAULA PROFESSOR

Your social security number 111-11-1111

Par	Nonrelundable Credits		
1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441	2	1,200.
3	Education credits from Form 8863, line 19	3	
4	Retirement savings contributions credit. Attach Form 8880	4	
5a	Residential clean energy credit from Form 5695, line 15	5a	6,000.
b	Energy efficient home improvement credit from Form 5695, line 32	5b	
6	Other nonrefundable credits:		
а	General business credit. Attach Form 3800 6a		
b	Credit for prior year minimum tax. Attach Form 8801 6b		
С	Adoption credit. Attach Form 8839 6c		
d	Credit for the elderly or disabled. Attach Schedule R 6d		
е	Reserved for future use		
f	Clean vehicle credit. Attach Form 8936 6f		
g	Mortgage interest credit. Attach Form 8396 6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6h		
i	Qualified electric vehicle credit. Attach Form 8834 6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911		
k	Credit to holders of tax credit bonds. Attach Form 8912 6k		
I	Amount on Form 8978, line 14. See instructions 6I		
m	Credit for previously owned clean vehicles. Attach Form 8936 . 6m		
Z	Other nonrefundable credits. List type and amount:		
	6z		
7	Total other nonrefundable credits. Add lines 6a through 6z	7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20		
		8 Contin	7 , 200 . ued on page 2
		J	334 J., pago 2,

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

Cat. No. 71480G

Schedule 3 (Form 1040) 2023

Schedule 3 (Form 1040) 2023 Page **2**

Par	t II Other Payments and Refundable Credits		
9	Net premium tax credit. Attach Form 8962		9
10	Amount paid with request for extension to file (see instructions)		10
11	Excess social security and tier 1 RRTA tax withheld		11
12	Credit for federal tax on fuels. Attach Form 4136		12
13	Other payments or refundable credits:		
а	Form 2439	13a	
b	Credit for repayment of amounts included in income from earlier years	13b	
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c	
d	Deferred amount of net 965 tax liability (see instructions)	13d	
Z		13z	
14	Total other payments or refundable credits. Add lines 13a through	13z	14
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15

Schedule 3 (Form 1040) 2023

SCHEDULE A (Form 1040)

Itemized Deductions

Attach to Form 1040 or 1040-SR.

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

Department of the Treasury Internal Revenue Service

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

PETER PROFESSOR & PAULA PROFESSOR

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

	С	OMB No. 1545-0074					
		2023					
16.	9	Attachment Sequence No. 07					
	ur so	cial security number					
111-11-1111							
	4						
0. 0. 0.	7	10,000.					
0.							

THILL III	<u> </u>	ESSOR & PAULA PROFESSOR	++-	
Medical		Caution: Do not include expenses reimbursed or paid by others.		
and		Medical and dental expenses (see instructions)		
Dental		Enter amount from Form 1040 or 1040-SR, line 11 2		
Expenses		Multiply line 2 by 7.5% (0.075)		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0	4	
Taxes You	5	State and local taxes.		
Paid	i (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		
		separately)		
	6	Other taxes. List type and amount:	YZ	
	_	<u> </u>	-	10.000
1.1.		Add lines 5e and 6	7	10,000.
Interest You Paid Caution: Your mortgage interest deduction may be limited. See instructions.		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		
		Phome 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	_	
		rules		
	(Reserved for future use		
		Add lines 8a through 8c		
	9	Investment interest. Attach Form 4952 if required. See instructions		
	10	Add lines 8e and 9	10	22,000.
Gifts to Charity	11	Gifts by cash or check. If you made any gift of \$250 or more, see instructions		
Caution: If you made a gift and got a benefit for it,	12	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 12 10,000		
see instructions.	13			
-		Add lines 11 through 13	14	10,000.
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions	15	
Other	16	Other—from list in instructions. List type and amount:		
Itemized				
Deductions			16	
Total Itemized	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12	17	42,000.
Deductions	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box		
For Panerwork	Rad	uction Act Notice, see the Instructions for Form 1040. Cat. No. 17145C So	hodu	le A (Form 1040) 2023

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

Cat. No. 17145C

Schedule A (Form 1040) 2023

SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service Name(s) shown on return

PETER PROFESSOR & PAULA PROFESSOR

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR. Go to www.irs.gov/ScheduleB for instructions and the latest information. OMB No. 1545-0074

Attachment Sequence No. **08**

Your social security number

111-11-1111

Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the		Amount
Interest		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:		
(See instructions and the Instructions for Form 1040, line 2b.)		BANK OF AMERICA ALLY BANK SCHWAB		1,500 2,000 2,500
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	
	2 3 4	Add the amounts on line 1	3	6,000
		If line 4 is over \$1,500, you must complete Part III.	-	Amount
Part II	5	List name of payer:		
Ordinary Dividends		VANGUARD SCHWAB		10,000
(See instructions and the Instructions for Form 1040, line 3b.)	Q		5	
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	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	20,000
on that form.	Note:	If line 6 is over \$1,500, you must complete Part III.		
Part III Foreign		sust complete this part if you (a) had over $1,500$ of taxable interest or ordinary dint; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign		
Accounts				Yes No
and Trusts Caution: If required, failure to file FinCEN Form		At any time during 2023, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) locate country? See instructions	ed in	financial
114 may result in substantial penalties. Additionally, you	_	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See FinC and its instructions for filing requirements and exceptions to those requirements.	EN F	orm 114
may be required to file Form 8938, Statement of Specified Foreign		If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-financial account(s) is (are) located:		
Financial Assets. See instructions.	8	During 2023, did you receive a distribution from, or were you the grantor of, or to foreign trust? If "Yes," you may have to file Form 3520. See instructions		

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

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

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/ScheduleC for instructions and the latest information. Sequence No. 09 Name of proprietor Social security number (SSN) 222-22-2222 PAULA PROFESSOR Principal business or profession, including product or service (see instructions) B Enter code from instructions 7 | 1 | 1 | 5 | 1 | 0 FOOD BLOGGER Business name. If no separate business name, leave blank. Employer ID number (EIN) (see instr.) PAULA'S PALATE Е Business address (including suite or room no.) City, town or post office, state, and ZIP code (3) Other (specify) F Accounting method: (1) X Cash (2) Accrual G Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses ... н If you started or acquired this business during 2023, check here Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions Yes X No If "Yes," did you or will you file required Form(s) 1099? Part I Income Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on 1 Form W-2 and the "Statutory employee" box on that form was checked . . . 65,000. 2 Returns and allowances . . 2 65,000. 3 Subtract line 2 from line 1 3 4 Cost of goods sold (from line 42) 4 5 Gross profit. Subtract line 4 from line 3 5 65,000. 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . 65,000. Gross income. Add lines 5 and 6 **Expenses.** Enter expenses for business use of your home **only** on line 30. Part II 1,500. 8 Office expense (see instructions) . 750. 19 Pension and profit-sharing plans . 19 Car and truck expenses 9 9 20 Rent or lease (see instructions): (see instructions) Commissions and fees Vehicles, machinery, and equipment 10 10 20a Other business property . Contract labor (see instructions) 11 11 b 20h 12 Depletion 12 21 Repairs and maintenance . . . 21 Depreciation and section 179 13 22 Supplies (not included in Part III) . 22 1,000. expense deduction (not included in Part III) (see 23 Taxes and licenses 23 13 24 Travel and meals: instructions) Travel. 24a Employee benefit programs 14 6,000. (other than on line 19) Deductible meals (see instructions) 24b 14 Utilities 500. 15 Insurance (other than health) 15 25 25 26 Wages (less employment credits) 26 16 Interest (see instructions): Mortgage (paid to banks, etc.) 16a Other expenses (from line 48) . . 27a а 16b h Other Energy efficient commercial bldgs 17 Legal and professional services 17 .750 deduction (attach Form 7205). 27b 11,500. 28 Total expenses before expenses for business use of home. Add lines 8 through 27b 28 29 Tentative profit or (loss). Subtract line 28 from line 7. 29 53,500. Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 30 unless using the simplified method. See instructions. **Simplified method filers only:** Enter the total square footage of (a) your home: 120 . Use the Simplified and (b) the part of your home used for business: Method Worksheet in the instructions to figure the amount to enter on line 30 30 600. 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you 52,900. checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. 31 If a loss, you must go to line 32. 32 If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule **32a** All investment is at risk. SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3. **32b** Some investment is not at risk. • If you checked 32b, you must attach Form 6198. Your loss may be limited.

SCHEDULE D (Form 1040)

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**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

PETER PROFESSOR & PAULA PROFESSOR

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Your social security number

111-11-1111

X 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 (h) Gain or (loss) (g) (d) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) 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. 2,500 2,500. 5,000. 1b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts Schedule(s) K-1 . . 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 2,500.

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. (g) Adjustment to gain or loss (sales price) (or other basis) (g) Adjustment to gain or loss Form(s) 8949, P line 2, column						(h) Gain or (loss) Subtract column (e) from column (d) and 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.	12,000.	5,000.			7,000.
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11 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						
12	Net long-term gain or (loss) from partnerships, S corporations	12				
13						12,500.
14	Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions					()
15	Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back					19,500.
						I- D /F 4040\ 0000

Schedule D (Form 1040) 2023

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	22,000.
	• 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 line 22.		
	• 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	10	
	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.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	• 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.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	☐ 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.		

Schedule D (Form 1040) 2023

SCHEDULE SE (Form 1040)

Department of the Treasury

Internal Revenue Service

Part I

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

PAULA PROFESSOR

Self-Employment Tax

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

222-22-2222

	If your only income subject to self-employment tax is church employee income , see instructions for home definition of church employee income.	w to r	eport your income
A	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		
	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	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ	1b	()
Skip 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	52,900.
3	Combine lines 1a, 1b, and 2	3	52,900.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 . Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	48,853.
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	48,853.
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	
6	Add lines 4c and 5b	6	48,853.
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		
d	Add lines 8a, 8b, and 8c	8d	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	160,200.
10	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	6,058.
11	Multiply line 6 by 2.9% (0.029)	11	1,417.
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	7,475.
13	Deduction for one-half of self-employment tax.		
	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	line 15		

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

Part II Optional Methods To Figure Net Earnings (see instructions)		
Farm Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than		
\$9,840, or (b) your net farm profits² were less than \$7,103.		
14 Maximum income for optional methods	14	
15 Enter the smaller of: two-thirds (2/3) of gross farm income¹ (not less than zero) or \$6,560. Also, include		
this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits were less than \$7,103		
and also less than 72.189% of your gross nonfarm income, 4 and (b) you had net earnings from self-employment		
of at least \$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 income4 (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.

² From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A—minus the amount you would have entered on line 1b had you not used the optional method.

Schedule SE (Form 1040) 2023

Child and Dependent Care Expenses

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Form2441 for instructions and the latest information.

Your social security number				
	Attachment Sequence No. 21			
	2023			
	OND NO. 1545-0074			

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1 (a	a) Care provider's name		ber, street,	(b) Address apt. no., city, s		ZIP code)	(c) Identifyin (SSN or		For example, this ge	nerally in	cludes (e) Amount paid see instructions)	
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	ed in 2024, d									A .			
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2	Information a	bout your qua	alifying p	erson(s). If	you have	e more than	three quali	fying per	sons, see the ins	truction	s and che	eck this box [\Box
(c) Check here i								lified expenses	_				
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11									ine 10 here and			1 004	`
	on Schedule 3 (Form 1040), line 2									11		1,200	1.

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Attachment Sequence No. **47** Your social security number

Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR
2a Enter income from Puerto Rico that you excluded b Enter the amounts from lines 45 and 50 of your Form 2555 c Enter the amount from line 15 of your Form 4563 d Add lines 2a through 2c 3 Add lines 1 and 2d 3 Add lines 1 and 2d 4 Number of qualifying children under age 17 with the required social security number 5 Multiply line 4 by \$2,000 6 Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number 6 Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 Multiply line 6 by \$500 8 Add lines 5 and 7 9 Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 • All other filing statuses—\$200,000 • All other filing statuses—\$200,000 • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 11 Multiply line 10 by \$% (0.05) 12 Is the amount on line 8 more than the amount on line 11? 12 Is the amount on line 8 more than the amount on line 11? 12 Is the amount on line 8 more than the amount on line 11?
b Enter the amounts from lines 45 and 50 of your Form 2555
c Enter the amount from line 15 of your Form 4563 2c d Add lines 2a through 2c 2d 3 Add lines 1 and 2d 3 230,912 4 Number of qualifying children under age 17 with the required social security number 4 1 5 Multiply line 4 by \$2,000 5 2,000 6 Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number 6 1 Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 500 8 Add lines 5 and 7 7 500 9 Enter the amount shown below for your filing status. Married filing jointly—\$400,000 All other filing statuses—\$200,000 All other filing statuses—\$200,000 Subtract line 9 from line 3. If zero or less, enter -0. If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 0 11 Multiply line 10 by \$% (0.05) 11 12 2,500
d Add lines 2a through 2c 2d 3 Add lines 1 and 2d 3 230,912 4 Number of qualifying children under age 17 with the required social security number 4 1 5 Multiply line 4 by \$2,000 5 2,000 6 Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number 6 1 Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 500 8 Add lines 5 and 7 8 2,500 9 Enter the amount shown below for your filing status. Married filing jointly—\$400,000 All other filing statuses—\$200,000 All other filing statuses—\$200,000 If zero or less, enter -0 If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. In 0 Multiply line 10 by 5% (0.05) In 1 Is the amount on line 8 more than the amount on line 11?
3 230,912 4 Number of qualifying children under age 17 with the required social security number 5 Multiply line 4 by \$2,000
Number of qualifying children under age 17 with the required social security number Multiply line 4 by \$2,000 Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. Multiply line 6 by \$500 Add lines 5 and 7 Enter the amount shown below for your filing status. Married filing jointly—\$400,000 All other filing statuses—\$200,000 All other filing statuses—\$200,000 If zero or less, enter -0 If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. Multiply line 10 by 5% (0.05) Is the amount on line 8 more than the amount on line 11? 12 2,500
Multiply line 4 by \$2,000
Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. Multiply line 6 by \$500
17 or who do not have the required social security number
Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 Multiply line 6 by \$500
alien. Also, do not include anyone you included on line 4. 7
7 Multiply line 6 by \$500
8 Add lines 5 and 7
Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 10 Subtract line 9 from line 3. • If zero or less, enter -0 • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 11 Multiply line 10 by 5% (0.05)
 Married filing jointly—\$400,000 All other filing statuses—\$200,000 Subtract line 9 from line 3. If zero or less, enter -0 If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. Multiply line 10 by 5% (0.05) Is the amount on line 8 more than the amount on line 11? Is the amount on line 8 more than the amount on line 11?
• All other filing statuses—\$200,000
Subtract line 9 from line 3. • If zero or less, enter -0 • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 11 Multiply line 10 by 5% (0.05)
• If zero or less, enter -0 • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 11 Multiply line 10 by 5% (0.05)
• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 11 Multiply line 10 by 5% (0.05)
example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 11 Multiply line 10 by 5% (0.05)
11 Multiply line 10 by 5% (0.05)
12 Is the amount on line 8 more than the amount on line 11?
1 No. STOP. Tou cannot take the child tax credit, credit for other dependents, or additional child tax credit.
Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.
X Yes, Subtract line 11 from line 8. Enter the result.
13 Enter the amount from Credit Limit Worksheet A
14 Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents 14 2,500
Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.
If the amount on line 12 is more than the amount on line 14, you may be able to take the additional child tax credit
on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27
(also complete Schedule 3, line 11) before completing Part II-A.

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

Cat. No. 59761M

Schedule 8812 (Form 1040) 2023

Schedule 8812 (Form 1040) 2023

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27 .	
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	
b	Number of qualifying children under 17 with the required social security number: x \$1,600.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		> .
	Otherwise, go to line 21.	<u> </u>	- Di
Part		S Of F	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or		
	if you are a bona fide resident of Puerto Rico, see instructions	-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	-	
23	Add lines 21 and 22	-	
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the larger of line 20 or line 25	26	
20	Next, enter the smaller of line 17 or line 26 on line 27.	20	
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	
	2 10 10 10 10 10 10 10 10 10 10 10 10 10		

Schedule 8812 (Form 1040) 2023

Department of the Treasury

Nondeductible IRAs

Attach to 2023 Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8606 for instructions and the latest information. OMB No. 1545-0074 Attachment

Internal Revenue Service Sequence No. 48 Name. If married, file a separate form for each spouse required to file 2023 Form 8606. See instructions. Your social security number 111-11-1111 PETER PROFESSOR Apt. no. Home address (number and street, or P.O. box if mail is not delivered to your home) Fill in Your Address Only if You Are City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions). Filing This Form by **Itself and Not With** Foreign country name Foreign province/state/county **Your Tax Return** Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, Traditional SEP, and Traditional SIMPLE IRAs Complete this part only if one or more of the following apply. You made nondeductible contributions to a traditional IRA for 2023. You took distributions from a traditional, traditional SEP, or traditional SIMPLE IRA in 2023 and you made nondeductible contributions to a traditional IRA in 2023 or an earlier year. For this purpose, a distribution does not include a rollover (other than certain qualified disaster distribution repayments from 2023 Form(s) 8915-F), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions. • You converted part, but not all, of your traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023 and you made nondeductible contributions to a traditional IRA in 2023 or an earlier year. 1 Enter your nondeductible contributions to traditional IRAs for 2023, including those made for 2023 from January 1, 2024, through April 15, 2024. See instructions 6,000. 2 Enter your total basis in traditional IRAs. See instructions 9,250. 3 3 Add lines 1 and 2 . . . 15,250. In 2023, did you take a distribution from Enter the amount from line 3 on line 14. traditional, traditional SEP, or traditional Do not complete the rest of Part I. SIMPLE IRAs, or make a Roth, Roth SEP, Yes — Go to line 4. or Roth SIMPLE IRA conversion? Enter those contributions included on line 1 that were made from January 1, 2024, through April 15, 2024 4 4 15,250. 5 5 Enter the value of all your traditional, traditional SEP, and traditional SIMPLE IRAs as of December 31, 2023, plus any outstanding rollovers. Subtract certain repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions) 6 Enter your distributions from traditional, traditional SEP, and traditional SIMPLE IRAs in 2023. Do not 7 include rollovers (other than repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)); qualified charitable distributions; a one-time distribution to fund an HSA; conversions to a Roth, Roth SEP, or Roth SIMPLE IRA; certain returned contributions; or 7 Enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023. Also, enter this amount on line 16 . . . 8 9 10 Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 10 Multiply line 8 by line 10. This is the nontaxable portion of the amount you 11 converted to Roth, Roth SEP, or Roth SIMPLE IRAs. Also, enter this amount on line 17 11 Multiply line 7 by line 10. This is the nontaxable portion of your distributions 12 that you did not convert to a Roth, Roth SEP, or Roth SIMPLE IRA Add lines 11 and 12. This is the nontaxable portion of all your distributions 13 13 15,250. Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2023 and earlier years . 14 14 15a 15a

59½ at the time of the distribution. See instructions.

15b

15c

Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 18, as applicable (see

c Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2023

Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age

Form 8606 (2023) Page **2**

Part			onversions From Tradition MPLE IRAs	onal, Traditional SI	EP, or Traditior	nal SIMPLE IR	As to Ro	th, Ro	oth SEP, or
			e this part if you converted p P, or Roth SIMPLE IRA in 20		tional, traditional	SEP, and tradition	onal SIMP	LE IRA	s to a Roth,
16	from tr	aditiona	ted Part I, enter the amount al, traditional SEP, and trad	ditional SIMPLE IRAs	to Roth, Roth S	EP, or Roth SI	MPLE		05 000
17								6	25,000.
17	line 16	(see ins	structions)				1	7	15,250.
18			unt. Subtract line 17 from li 040-SR, or 1040-NR, line 4b					8	9,750.
Part	III D	istribu	tions From Roth, Roth	SEP, or Roth SIMP	LE IRAS		1		
	di 89	istributio 915-F (s	e this part only if you took a on does not include a rollow see instructions)), qualified o certain contributions (see in	er (other than a repayi haritable distribution,	ment of a qualified	d disaster distrib	ution fron	n 2023	Form(s)
19	includir	ng any d	tal nonqualified distribution qualified first-time homebuy 8915-F (see instructions)	er distributions, and a	ny qualified disas	ter distributions	from	9	
20			time homebuyer expenses all your prior qualified first-t					0	
21			20 from line 19. If zero or less					1	0.
22	Enter y	our bas	sis in Roth, Roth SEP, and F	oth SIMPLE IRA cont	ributions (see ins	tructions). If line	21 is	2	
23			22 from line 21. If zero or les					3	
24			sis in conversions from tra qualified retirement plans to					4	
25a			24 from line 23. If zero or less					5a	
b			ount on line 25a attributable						
	8915-F		estructions). Also, enter this	amount on 2023 Forn		19, as applicable	,	5b	
С			unt. Subtract line 25b from I			this amount on		JU	
)40-SR, or 1040-NR, line 4b					5c	
f You This F and N	lere On Are Fili orm by ot With	ng Itself	Under penalties of perjury, I declare to is true, correct, and complete. Declared			information of which p	oreparer has a		
Гах R	eturn		Your signature			Date	e		
Paid Prep	arer	Print/Ty	pe preparer's name	Preparer's signature		Date	Check self-employ		
Use (Firm's n					Firm's EIN		
		Firm's a	address				Phone no.		

Form **8606** (2023)

^{*}From Worksheet 1-1 in Publication 590 B

Form **8995**

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**

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

PETER PROFESSOR & PAULA PROFESSOR

Your taxpayer identification number 111-11-111

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

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

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business income or (loss)
i_	PAULA'S PALATE	222-22-2222		49,162.
ii				
			X	
v				
2		2 49,162.		
3		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 49,162.	5	0 022
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)		3	9,832.
O		6		
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		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	
10	Qualified business income deduction before the income limitation. Add lines 5 and	i i	10	9,832.
11 12	Taxable income before qualified business income deduction (see instructions) Enter your net capital gain, if any, increased by any qualified dividends	11 188,912.		
12		36,500.		
13		13 152,412.		
14	Income limitation. Multiply line 13 by 20% (0.20)		14	30,482.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also e			
	the applicable line of your return (see instructions)		15	9,832.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	()
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 an zero, enter -0-		17	(<u>)</u>

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

Cat. No. 37806C

Form **8995** (2023)

Form **5695**

Department of the Treasury Internal Revenue Service

Residential Energy Credits

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

Go to www.irs.gov/Form5695 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 75

Name(s) shown on return

Part I

Your social security number

PETER PROFESSOR & PAULA PROFESSOR 111-11-1111

Residential Clean Energy Credit (See instructions before completing this part.)

Note: Skip lines 1 through 11 if you only have a credit carryforward from 2022. Enter the complete address of the home where you installed the property and/or technology associated with lines 1 through 4 and 5b. For more than one home, see instructions. 123 FANTASTIC AVENUE LUBBOCK ΤX 79409 Unit no. ZIP code Number and street City or town State 20,000. 1 Qualified solar electric property costs 1 2 Qualified solar water heating property costs 2 3 Qualified small wind energy property costs 3 Qualified geothermal heat pump property costs Qualified battery storage technology. Does the qualified battery storage technology have a capacity of at least 3 kilowatt hours? (See instructions.) If you checked the "No" box, you cannot claim a credit for qualified battery storage technology. 5a Yes No If you checked the "Yes" box, enter the qualified battery technology costs 5b 6a Add lines 1 through 5b 6a 20,000. Multiply line 6a by 30% (0.30) 6,000. 6b Qualified fuel cell property. Was qualified fuel cell property installed on, or in connection with, your main home located in the United States? (See instructions.) . . . 7a Yes If you checked the "No" box, you cannot claim a credit for qualified fuel cell property. Skip lines 7b through 11. Enter the complete address of the main home where you installed the fuel cell property. State Number and street City or town ZIP code 8 8 Qualified fuel cell property costs 9 Multiply line 8 by 30% (0.30) 9 10 Kilowatt capacity of property on line 8 above ... x \$1,000 10 Enter the smaller of line 9 or line 10 11 11 12 Credit carryforward from 2022. Enter the amount, if any, from your 2022 Form 5695, line 16 12 13 Add lines 6b, 11, and 12 . 13 6,000. Limitation based on tax liability. Enter the amount from the Residential Clean Energy Credit Limit 14 Worksheet. (See instructions.) . . 14 25,358. Residential clean energy credit. Enter the smaller of line 13 or line 14. Also include this amount on 15 Schedule 3 (Form 1040), line 5a 15 6,000.

Credit carryforward to 2024. If line 15 is less than line 13, subtract line 15

16

16

Form 5695 (2023) Page **2**

Part II Energy Efficient Home Improvement Credit

Section	on A—Qualified Energy Efficiency Improvements					
17a	Are the qualified energy efficiency improvements installed in or on your main United States? (See instructions.)	home	located in the	17a	Yes	□No
b	Are you the original user of the qualified energy efficiency improvements?	. .		17b	Yes	No
С	Are the components reasonably expected to remain in use for at least 5 years? If you checked the "No" box for line 17a, 17b, or 17c, you cannot claim the improvement credit. Do not complete Part II, Section A.	energy	efficient home	17c	☐ Yes	□ No
d	Enter the complete address of the main home where you made the qualifying in Caution: You can only have one main home at a time. (See instructions.)	provem	nents.			
	Number and street Unit no. City or town	State	ZIP code			
е	Were any of these improvements related to the construction of this main home? If you checked the "Yes" box, you can only claim the energy efficient home i qualifying improvements that were not related to the construction of the home. Derelated to the construction of your main home, even if the improvements were into the home.	mprove o not inc	clude expenses	17e	Yes	□ No
18	Insulation or air sealing material or system.					
а	Enter the cost of insulation material or system (include air sealing material or system) specifically and primarily designed to reduce heat loss or gain of your home that meets the criteria established by the IECC. (See instructions.)	18a				
b	Multiply line 18a by 30% (0.30). Enter the results. Do not enter more than \$1,200)		18b		
19	Exterior doors that meet the applicable Energy Star requirements.					
а	Enter the cost of the most expensive door you bought	19a		1		
b	Multiply line 19a by 30% (0.30). Do not enter more than \$250	19b		_		
C	Enter the cost of all other qualifying exterior doors	19c		-		
d	Multiply line 19c by 30% (0.30)	19d		10-		
e 20 a b	Add lines 19b and 19d. Do not enter more than \$500	20a		19e		
Section	on B—Residential Energy Property Expenditures					
21a	Did you incur costs for qualified energy property installed on or in connection of the United States?	vith a h	ome located in	21a	Yes	☐ No
b	Was the qualified energy property originally placed into service by you? If you checked the "No" box for line 21a or 21b, you cannot claim the cree energy property costs. Skip lines 22 through 25 and line 29. Go to line 26.		 our residential	21b	Yes	□ No
С	Enter the complete address of each home where you installed qualified energy p	property	<i>'</i> .			
	Number and street Unit no. City or town	State	ZIP code			
22	Residential energy property costs (include labor costs for onsite preparation, assembly, and original installation). (See instructions.)					
а	Enter the cost of central air conditioners	22a				
b	Multiply line 22a by 30% (0.30). Enter the results. Do not enter more than \$600	1 1		22b		
23a	Enter the cost of natural gas, propane, or oil water heaters	23a				
b 04=	Multiply line 23a by 30% (0.30). Enter the results. Do not enter more than \$600	1 1		23b		
24a b	Enter the cost of natural gas, propane, or oil furnace or hot water boilers Multiply line 24a by 30% (0.30). Enter the results. Do not enter more than \$600	24a		24b		
	widitiply line 24a by 5070 (0.50). Litter the results. Do not effect more than \$000			240		

Form 5695 (2023) Page **3**

Section B—Residential Energy Property Expenditures (continued)

			_
25a	Enter the cost of improvements or replacement of panelboards, subpanelboards, branch circuits, or feeders		
b	Multiply line 25a by 30% (0.30). Enter the results. Do not enter more than \$600	25b	
26	Home energy audits.		
а	Did you incur costs for a home energy audit that included an inspection of your main home located in		
	the United States and a written report prepared by a certified home energy auditor? (See instructions.)	26a	Yes No
	If you checked the "No" box, you cannot claim the home energy audit credit. Stop. Go to line 27.		
b	Enter the cost of the home energy audits		
С	Multiply line 26b by 30% (0.30). Enter the results. Do not enter more than \$150	26c	
27	Add lines 18b, 19e, 20b, 22b, 23b, 24b, 25b, and 26c		
28	Enter the smaller of line 27 or \$1,200	28	
29	Heat pumps and heat pump water heaters; biomass stoves and biomass boilers.		
а	Enter the cost of electric or natural gas heat pumps		
b	Enter the cost of electric or natural gas heat pump water heaters	_	
С	Enter the cost of biomass stoves and biomass boilers	_	
d	Add lines 29a, 29b, and 29c		
е	Multiply line 29d by 30% (0.30). Enter the results. Do not enter more than \$2,000	29e	
30	Add lines 28 and 29e	30	
31	Limitation based on tax liability. Enter the amount from the Energy Efficient Home Improvement Credit Limit Worksheet. (See instructions.)	31	
32	Energy efficient home improvement credit. Enter the smaller of line 30 or line 31. Also include this amount on Schedule 3 (Form 1040), line 5b	32	

Form **5695** (2023)

Form **8283** (Rev. December 2023)

Department of the Treasury Internal Revenue Service **Noncash Charitable Contributions**

Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over \$500 for all contributed property.

Go to www.irs.gov/Form8283 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **155**

Name	ame(s) shown on your income tax return									number	
	TER PROFESSOR & PAULA PROFESSOR									11-11-1111	
Enter the entity name and identifying number from the tax return where the noncash charitable contribution was originally reported, if											
different from above.											
Name:Identifying number:Check this box if a family pass-through entity made the noncash charitable contribution. See instructions											
Note: Figure the amount of your contribution deduction before completing this form. See your tax return instructions.											
Section A. Donated Property of \$5,000 or Less and Publicly Traded Securities—List in this section only an item											
(or a group of similar items) for which you claimed a deduction of \$5,000 or less. Also list publicly traded											
securities and certain other property even if the deduction is more than \$5,000. If you need more space,											
attach a statement. See instructions.											
1				(b) If donated property is a vehicle (see instructions),						of donated property	
	donee organization			check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).			(For a vehicle, enter the year, make, model, and mileage. For securities and other property,				
							see instructions.)				
Α	UNITED WAY SEE STATEMENT						SEE STATEMENT				
В	SHE STITLEMENT										
С											
D											
Note	If the amount you	u claimed as a	deduction for an	item is	\$500 or less, you	do not have	to com	plete c	olumns (e)	, (f), and (g).	
		(e) Date acquired by donor (mo., yr.)	(f) How acquire by donor	d	(g) Donor's cost or adjusted basis	(h) Fair market (see instruction		(i)	Method used the fair mar	to determine ket value	
Α	05/01/23	VARIOUS	PURCHASE		5,000.	10,0	00.F	MV C	F STOC	CKS	
В					,						
С											
D											
Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or											
	Inventory Reportable in Section A) —Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than \$5,000 per item or group (except contributions reportable in Section A).										
	Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal										
					and in certain cas						
Par		ion on Donat									
2					nated. See instruction						
			•	Other real estate i Vehicles							
	b Qualified conservation contributionb(1) Certified historic structure				e ☐ Equipment j ☐ Clothing and ho f ☐ Securities k ☐ Digital assets					isenoid items	
	NPS #	i c u nistoric strt		f ☐ Securities							
		ibution of less	than \$20,000)	h	Intellectual prop	erty	• 🗀	Other			
				(14) 14	· ·		anorty	donota	Laive a brief	(c) Appraised fair	
3	(a) Description of donated property (if you need more space, attach a separate statement)				(b) If any tangible personal property or real property was donated, give a briesummary of the overall physical condition of the property at the time of the gi					market value	
Α											
В	-										
С		T					-				
	(d) Date acquired by donor	(e) Ho	w acquired by donor		(f) Donor's cost or adjusted basis	(g) For barga			Qualified servation	(i) Amount claimed as a deduction	
	(mo., yr.)				adjusted basis	receive		con	tribution	(see instructions)	
									rant basis estructions)		
Α									-		
В											

Social Security Number 111-11-1111 222-22-222

Federal Form 8283 Line 1 - Name and address of donee organization

Name	Address
UNITED WAY	123 UNITED WAY DRIVE CHAPEL HILL NC 27516

Name(s) as shown on federal return PETER PROFESSOR PAULA PROFESSOR Social Security Number 111-11-1111 222-22-222

Federal Form 8283 Line 1, Column C - Description of Property Donated to UNITED WAY

SHARES OF GOOGLE	
*	