1040

## Federal Return Summary

2023

Name

Taxpayer Identification Number

Martin Diko

122-87-4191

Tax Form	1040NR	Filing Status	SGL				
		Dependents					
ax Method Used <b>Tax Table</b>							
Income		Tax Computation					
alaries & wages	46,387	Regular tax					
axable interest income		Alternative minimum tax					
Tax exempt interest		Excess advance premium tax credit					
ividend income		Total tax before credits					
Qualified dividends	_	Child and dependent care credit					
axable state/local refunds		Education credits					
limony received		Other credits					
susiness income/-loss	-16,240	Total credits					
Capital gain/-loss		Tax after credits					
Other gain/-loss (Form 4797)		Self-employment tax					
axable IRA distributions		Additional tax on IRAs, etc.					
axable pension distributions		Other taxes	171				
Rental, royalty, partnership, etc. income/-loss	-20,285	Total tax	171				
arm income/-loss		Payments					
nemployment compensation		•					
axable social security benefits		Federal income tax withheld	10,205				
ther income	-46,387	Estimated payments					
otal income	-36,525	Other payments/credits					
Adjustments		Total payments	10,205				
Acuing expenses		Refund/Amount Due	е				
Moving expenses eductible part of self-employment tax		Amount overnaid	10,034				
EP, SIMPLE, and qualified plan deduction		Amount overpaid					
elf-employed health insurance deduction		Overpayment applied					
		Form 2210 penalty	_10 02/				
limony paid							
RA deduction		Failure to file penalty					
tudent loan interest deduction		Failure to pay penalty					
Other adjustments		Late filing interest  Net amount due/-refund	-10,034				
otal adjustments djusted gross income	-36,525	=	10,031				
		2024 Estimates					
Deductions		1st quarter					
Medical and Dental expenses		2nd quarter					
axes paid		3rd quarter					
nterest paid		4th quarter					
charitable contributions		Total Estimates					
ther itemized deductions		Tax Rates	· · · · · · · · · · · · · · · · · · ·				
otal itemized deductions		Tax Rates					
r, Standard deduction		Marginal tax rate - Ordinary income*	<u>10.0</u> %				
axable income before Qual Bus Inc Ded (QBID		Marginal tax rate - Capital income*	······································				
BID	<u> </u>	Effective tax rate	%				
axable income		* Marginal Tax Rate displayed may not reflect the true tax					

## Two Year Comparison Report - Page 1

2022 & 2023

Name Martin Diko

Taxpayer Identification Number 122-87-4191

	<u>M</u>	artin Diko			122-8	7-4191
				2022	2023	Differences
	Fil	ing Status		SGL	SGL	
	De	pendents		0	0	
	1.	Salaries and wages	1.	231,641	46,387	-185,254
		Interest income	2.	6		-6
	3.	Tax exempt interest income	3.			
	4.	Dividend income	1 4 1	894		-894
	5.	Qualified dividend income	_	884		-884
	6.	Taxable state/local refunds				
	7.	Alimony received				_
1	8.	Business income/loss	8.	-964	-16,240	-15,276
n	9.	Capital gain/loss	1 0 1	-35		35
С	10.	Other gains/losses	10.			
0	11.	Taxable IRA distributions	11.			
m	12.	Taxable pensions	142			
е	13.	Rent and royalty income including farm rental			-20,285	-20,285
	14.	Partnership/S corp income	14.			<u> </u>
	15.	Estate or trust income	15.			
	16.	Farm income/loss				
		Unemployment compensation	17.			
	18.	Taxable social security	18.			
	19.	Other income	19.		-46,387	-46,387
	20.	Total income	20.	231,542	-36,525	-268,067
A	21.	Moving expenses	21.	,		•
d		Deductible part of self-employment tax				
j.	23.	SEP/SIMPLE/Qualified plans deductions	23.			
u s		SE health insurance	24			
t		Penalty on early withdrawal of savings				
m		Alimony paid	امما			
e n	1	IRA deductions	127			
t		Student loan interest				
s	29.	Other adjustments	120			
		Adjusted gross income		231,542	-36,525	-268,067
	31.	Medical	31.	,	,	,
D	32.	Taxes	ו פפו	10,000		-10,000
е	33.	Interest	00	,		· · · · · · · · · · · · · · · · · · ·
d	34.	Contributions		200		-200
u		Casualty losses	25			
С		Miscellaneous expenses	26			
t		Allowable itemized deductions		10,200		-10,200
i	38.	Standard deduction	38.	12,950		-12,950
0				Standard		,
n	39.	Deduction taken	39.	12,950		-12,950
s		Taxable income before Qual Bus Inc Ded (QBID)	40.	218,592	-36,525	-255,117
	1	QBID	44	0	0	,
	1	Taxable income	42.	218,592	0	-218,592

70. Effective tax rate

#### Two Year Comparison Report - Page 2

2022 & 2023

Name Taxpayer Identification Number 122-87-4191 Martin Diko Differences 2022 2023 43. Taxable income from 2YR page 1, line 42 218,592 -218,592 43. **44.** Tax on taxable income 50,084 -50,08444. **45.** Alternative minimum tax 45. 46. Excess advance premium tax credit 46. 47. Child care credit 47. 48. Education credits 48. 49. Retirement savings credit 49. 50. Child & other dependent tax credit 50. **51.** General business credit 52. Other credits 52. 53. Total credits 53. 54. Net tax liability 50,084 -50,084 54. **55.** Self-employment taxes m 55. 498 -327 171 **56.** Other taxes 56. 50,582 171 -50,411 57. Total tax 57. -38,436 48,641 10,205 **58.** Income tax withheld 59. Estimated tax payments 59. **60.** Earned income credit 60. **61.** Additional Child tax credit 61. 62. Other refundable tax credits 1,941 -1,941 63. Other payments 63. 10,205 -40,377 50,582 64. Total payments 64. 65. Tax due/-refund -10,034 -10,03465. 66. Penalties and interest 66. -10,034 -10,034 67. Net tax due/-refund 67. 68. Refund applied to estimated tax payments 68. -10,034 -10,034 69. Refund received

#### Two Year Comparison - Tax Reconciliation Marginal Tax Rates

23.0

	2022	2022 Marginal	2023	2023 Marginal
	Taxable Income	Tax Rate	Taxable Income	Tax Rate
Ordinary income	217,708	35.0%		%
Capital income	884	15.0%		%
Capital - Sec. 1250		%		%
Capital - Sec. 1202	_	%		%

# Federal Tax Projection Worksheet 1 - Tax Computation Projection date: May 08, 2024

2023 & 2024

Name
Martin Diko

Taxpayer Identification Number 122-87-4191

	in Diko		2023	2024		7-4191 Differences
F	Filing Status		SGL	SGL		
1	Dependents					
1	Salaries and wages	1.	46,387	46,	387	
2	2. Interest income	2.	,	•		
3	3. Dividend income	3.				
1 .	I. Taxable state/local refunds	4.				
1 _	5. Alimony received	5.				
	3. Business income/loss	6.	-16,240	-16,	240	
	7. Capital gain/loss	7.				
	3. Other gains/losses	8.				
	Taxable IRA distributions	9.				
10		10.				
	Cabadula C income/less		-20,285	-20,	285	
	I. Schedule E income/loss	11.	-20,203	-20,	203	
	2. Farm income/loss	12.				
	3. Unemployment benefits	13.				
	1. Taxable social security benefits	14.	16 207	16	207	
15		15.	-46,387	-46,		
16		16.	-36,525	-36,	525	
	7. Moving expenses	17.				
	3. Deductible part of self-employment tax	18.				
19	9. SEP/SIMPLE/Qualified plans deductions	19.				
20	D. Self-employed health insurance deduction	20.				
	Penalty on early withdrawal of savings	21.				
22	2. Alimony paid	22.				
23	3. IRA deductions	23.				
24	1. Student loan interest deduction	24.				
25	5. Other adjustments	25.				
26	5. Adjusted gross income	26.	-36,525	-36,	525	
27	7. Medical	27.				
28	3. State/local income or sales taxes	28.				
29		29.				
30	). Personal property taxes	30.				
31	I. Total State/Local taxes. Add lines 28 - 30	31.				
32	2. State/Local taxes allowed. Lower of line 31 or					
	\$10,000 (\$5,000 if MFS)	32.				
33	3. Other taxes	33.				
	1. Interest	34.				
	5. Contributions	35.				
	5. Casualty losses from a federally declared disaster	36.				
	7. Miscellaneous expenses (including qualified disaster loss)	37.				
	Allowable itemized deductions	38.				
		39a.				
38	Da. Standard deduction	39b.				
38	9b. Reserved for future use	390.	Itemized	Itemize	4	
	Dodustian takan	40	T CEIIIT Z EC	тсештие	<u>u</u>	
	Deduction taken	40.	_26 525	36	F25	
	I. Subtract line 40 from line 26	41.	-36,525	-36,	_	
	2. Qualified business income deduction	42.			0	
43	3. Taxable income	43.	0		0	

# Federal Tax Projection Worksheet 2 - Tax Computation Projection date: May 08, 2024

2023 & 2024

Martin Diko

Taxpayer Identification Number 122-87-4191

				2023	2024	Differences
	Fili	ing Status		SGL	SGL	
	44.	Taxable income from TPW page 1, line 43	44.	0	0	
	45.	Tax on taxable income	45.			
	46.	Taxes from Forms 4972, 8814, and add'l taxes	46.			
	47.	Alternative minimum tax	47.			
	48.	Add lines 45, 46, and 47	48.			
	49.	Foreign tax credit	49.			
Т	50.	Child and dependent care credit	50.			
а	51.	Education credits	51.			
x	52.	Retirement savings credit	52.			
	53.	Credit for the elderly	53.			
С	54.	Child tax credit/credit for other dependents	54.			
0	55.	Energy Efficient Home Improvement Credit	55.			
m	56.	Previously owned clean vehicles credit (Form 8936	)56.			
р	57.	New clean vehicles credit (Form 8936)	57.			
u	58.	Mortgage interest credit	58.			
t	59.	D.C. first-time homebuyer credit	59.			
а	60.	Residential Clean Energy Credit	60.			
t	61.	Adoption credit	61.			
i		General business credit	62.			
0	63.		63.			
n	64.		64.			
	65.	Total credits	65.			
	66.	Net tax liability	66.			
	67.	Self-employment tax	67.			
	68.	Tax on unreported tips	68.			
	69.		69.			
	70.	Household employment taxes	70.			
	71.	First-time homebuyer credit repayment	71.			
	72.		72.			
	73.	Additional Medicare Tax	73.			
	74.	Net Investment Income Tax	74.			
	75.	Other taxes	75.	171	171	
	76.	Total tax	76.	171	171	
	77.	Income tax withheld	77.	10,205	10,205	
	78.	Estimated tax payments	78.	,	,	
		Earned income credit	79.			
	80.	Additional child tax credit	80.			
	81.	Reserved	81.			
	82.	Reserved	82.			
	83.	Other payments	83.			
	84.	Total payments	84.	10,205	10,205	
	85.	Net tax due/-refund	85.	-10,034	-10,034	
	86.	Marginal Tax Rate - Ordinary Income	86.	10.0%	10.0%	
	87.	Marginal Tax Rate - Capital Income	87.	%	%	
	88.		88.	%		
	88.	ETTECTIVE TAX Rate	88.	<u> </u>	%	

05/08/2024 11:42 AM Stevenson Group CPA Inc., PS 1951 Main St Ferndale, WA 98248 Martin Diko 2468 Balaclava St Apt. 510 VANCOUVER BRITISH COLUMBIA V6K 2H1 CANADA

## Stevenson Group CPA Inc., PS 1951 Main St Ferndale, WA 98248 360-647-1040

May 8, 2024

Martin Diko 2468 Balaclava St Apt. 510 Vancouver, BC British Columbia V6K 2H1 Canada

Federal law requires us, as paid tax return preparers, who prepare and file 11 or more federal income tax returns, to electronically file all 2023 federal income tax returns we prepare in 2024. You may independently elect to file your tax return on paper. We are required to obtain, and keep on file, a signed statement of your choice to file on paper. The signed statement will not be submitted to the IRS or attached to your 2023 tax return. Form 8948, Preparer Explanation for Not Filing Electronically will be attached to your tax return. Please sign and date the declaration below to document your choice to file your 2023 tax return on paper and return to:

Stevenson Group CPA Inc., PS 1951 Main St Ferndale, WA 98248

#### TAXPAYER DECLARATION TO FILE TAX RETURN ON PAPER

My tax return preparer, Stevenson Group CPA Inc., PS, has informed me that he or she may be required to electronically file my 2023 individual income tax return 1040NR if he or she files it with the IRS on my behalf (e.g., submits it by mail to the IRS). I understand that electronic filing may provide a number of benefits to taxpayers, including an acknowledgment that the IRS received the returns, a reduced chance of errors in processing the returns, and faster refunds. I do not want to have my return electronically filed, and I choose to file my return on paper forms. I will mail or otherwise submit my paper return to the IRS myself. My preparer will not file or otherwise mail or submit my paper return to the IRS. I was not influenced by Stevenson Group CPA Inc., PS or any member of his or her firm to sign this statement.

Taxpayer	Signature:	Martin	Diko		
Date Sign	ned				

## Stevenson Group CPA Inc., PS 1951 Main St Ferndale, WA 98248 360-647-1040

May 8, 2024

#### **CONFIDENTIAL**

Martin Diko 2468 Balaclava St Apt. 510 VANCOUVER BRITISH COLUMBIA V6K 2H1 CANADA

For professional services rendered in connection with the preparation of your 2023 individual tax return:

Tax Return Preparation	\$ 795.00
Additional time for Treaty and non-res. research	
Amount due	\$ 795.00
<del>-</del>	

## Stevenson Group CPA Inc., PS 1951 Main St Ferndale, WA 98248 360-647-1040

May 8, 2024

#### **CONFIDENTIAL**

Martin Diko 2468 Balaclava St Apt. 510 VANCOUVER BRITISH COLUMBIA V6K 2H1 CANADA

Dear Martin:

We have prepared the following returns from information provided by you without verification or audit:

U.S. Nonresident Alien Income Tax Return (Form 1040NR)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

This office is committed to using safeguards that protect your information from data theft. To further protect your identity, you can also take steps to stop thieves. IRS Publication 4524 (<a href="https://www.irs.gov/pub/irs-pdf/p4524.pdf">www.irs.gov/pub/irs-pdf/p4524.pdf</a>) outlines simple steps that help you keep your computer secure, avoid phishing and malware, and protect your personal information.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions or if we can be of assistance in any way, please do not hesitate to call.

Sincerely,

Stevenson Group CPA Inc., PS

## **Filing Instructions**

### Form 1040NR US Nonresident Alien Income Tax Return

### Taxable Year Ended December 31, 2023

Name: Martin Diko

Date Due: October 15, 2024

**Remittance:** None is required. The return shows a total overpayment of \$10,034, which is to

be refunded in its entirety.

Your refund will be direct deposited into your BECU checking account no.

\*\*\*\*\*7225.

Mail To: Department of the Treasury

Internal Revenue Service Austin, TX 73301-0215

**Signature:** You should sign and date the return on Page 2.

Other: Retain a copy of the signed and dated return for your records.

Department of the Treasury

Internal Revenue Service

#### SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

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

Your social security number 122-87-4191

Ma	rtin Diko		122-87-41	.91
Part	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	-16,240
4	Other gains or (losses). Attach Form 4797	4		
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedu	le E	5	-20,285
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		
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)	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 nonqualified deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount: W-2 Adj US Can Trty Art X			
			,387	4.0.00=
9	Total other income. Add lines 8a through 8z		9	-46,387
10	Combine lines 1 through 7 and 9. This is your additional income. Enter here and or	n Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-82,912

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

Schedule 1 (Form 1040) 2023

DIKOM 05/08/2024 11:42 AM

Form 1040 Tax Return Reconciliation Worksheet

2023

Filing Status:	<b>X</b> 1s	ingle 2	2 Married filing jointly		3 Married filing separate	elv	4 Head of h	ousehold*		5 Quali	ívina w	idow(er)*	
MFS spouse	_	g	,	ш	0 ,	ualifying person th			dent:	]	,	(,	
Taxpayer first nam  Martin		al	Last name Diko									security no 7 <b>- 41</b> 9	
If a joint return, s	pouse's first	name and initial	Last name							Spouse's	social	security nu	ımber
Home address (n	umber and	street). If you have a	P.O. box, see instruction	S.				Apt. no		Presiden	tial Ele	ction Cam	paign
		lava St						510		X	Taxpay	rer	Spouse
City, town or post		e, and ZIP code.		В	C.								
Foreign country r		004702	Foreign province/state		<u> </u>		Foreign p	ostal code					
Canada			British Co	lumbi	ia			V6K	2H	L			
At anytime du	ring 2023	s, did you receive	e, sell, send, exch	ange, or	otherwise acquire f	nancial intere	st in any o	digital assets	s?			Yes	X No
-	ayer. If som	eone can claim you a	is a dependent, <b>do not</b> d	heck box 6	a			Boxes check	ked on	6a and 6b			1
b Spou	se							Children on					
								Children on Dependents					
								Total. Add			u above		<u> </u>
6c Dependents:									✓ if qua				
(1) Firs	t name		Last name	(2)	Social security number	(3) Relationsh	nip to you	Child tax cre	dit C	Other depen	dents	If more that	an four
									$\perp \perp$		Ш	dependent	s,
									++		Н	√ here	
									++		++		
	7	Massa salarias tim	as at Attack Farm(a) V	<u> </u>						7		4	6,387
Income	, 8а		os, etc. Attach Form(s) V est. Attach Schedul		quired					8a			0,307
(Schedule 1)	b		nterest. <b>Do not</b> inc			ا م	1						
	9a	•	ends. Attach Sched				•			9a			
	b	Qualified divide				9b							
	10	Taxable refund	le refunds, credits, or offsets of state and local income taxes							10			
	11	Alimony receiv								11			
	12		usiness income or (loss). Attach Schedule C or C-EZ							12		-1	6,240
	13 14		apital gain or (loss). Attach Schedule D if required. If not required, check here ▶  ther gains or (losses). Attach Form 4797							13			
	15a	IRA distribution		15a			ble amou	 nt		15b			
	16a	Pensions and		16a			ible amou			16b			
	17	Rental real est	tate, royalties, part	nerships	, S corporations, tru	sts, etc. Attac	h Schedu	le E		17		-2	0,285
	18	Farm income of	or (loss). Attach So	hedule F	=					18			
	19	Unemployment	t compensation							19			
	20a	Social security be		20a	0 - 1		ble amou		· · <u></u>	20b			<u> </u>
	21		List type and amo			j US Ca				21			6,387
	22 23			ight colu	ımn for lines 7 throu	gh 21. This is 23	your <b>tota</b>	I income .	<u> </u>	22		-3	6,525
Adjusted	23 24	Educator expe		servists	performing artists, a								
Gross					m 2106 or 2106-E2								
Income	25	Health savings	account deduction	n. Attach	Form 8889	25							
(Schedule 1)	26	Moving expens	ses. Attach Form 3	903		26							
	27	Deductible par	t of self-employme	nt tax. A	ttach Schedule SE	27							
	28		SEP, SIMPLE, an			28							
	29				n								
	30	-	ly withdrawal of sa										
	31a 32	IRA deduction	<b>b</b> Recipient's S	_		31a 32							
	33												
	34	Reserved for for	utura una			24	<u></u>						
	35	Reserved for for	uturo uno			35							
	36	Add lines 23 th								36			
	37	Subtract line 3	6 from line 22. Thi	s is vour	adjusted gross in	come				37		-3	6,525

Form <b>10</b> 4		Tax Return Reconciliation Wo	orksheet, Page 2		2023
Name <b>Mar</b>	tin	Diko		Tp TI	
T	38	Amount from line 37 (adjusted gross income)		3	8 -36,525
Tax and Credits	39a		d. Total boxes		
Schedules 2, 3)			d. <b>∫ checked</b> ► 39a	<u> </u>	
Standard	b	If your spouse itemizes on a separate return or you were a dual-sta	•	$\sqcup$	
Deduction	<del>40</del>	Itemized deductions (from Schedule A) or your standard deduction	on (see left margin)	40	
for—	a	Outstand For AO and AOb form For OO		40	
People who check any	41	Subtract line 40 and 40b from line 38		4	
box on line 39a or 39b <b>or</b>	42 43	Qualified business income deduction (see instructions)			
who can be claimed as a	43 44	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-  Tax (see instr.). Check if any from: a Form(s) b Form c 4972 c		4:	·
dependent, see	45	Alternative minimum tay (see instructions) Attach Form 6251	<del></del> ,		·
instructions.	46	Excess advance premium tax credit repayment. Attach Form 8962		4	-
All others:	47	Add lines 44, 45, and 46		► 4	
Single or Married filing	48	Foreign tax credit. Attach Form 1116 if required	48	7	
separately, \$13,850	49	Credit for child and dependent care expenses. Attach Form 2441	49	_	
Married filing	50	Education credits from Form 8863, line 19	50		
jointly or Qualifying	51	Retirement savings contributions credit. Attach Form 8880	51		
widow(er), \$27,700	52	Child tax cradit/cradit for other dependents	52	_	
Head of	53	Residential energy credits. Attach Form 5695	53		
household, \$20,800	54	Other credits from Form: a 3800 b 8801 c	54		
	55	Add lines 48 through 54. Those are your total credits		5	5
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0		<b>▶</b> 50	6 C
Other Taxes	57	Self-employment tax. Attach Schedule SE		5	
Schedule 2)	58	Unreported social security and Medicare tax from Form: <b>a</b> 4	137 <b>b</b> 8919	5	8
	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach	Form 5329 if required	5	9
	60a	Household employment taxes from Schedule H		60	)a
	b	First-time homebuyer credit repayment. Attach Form 5405 if require		60	)b
	61	Taxes from: <b>a</b> Form 8959 <b>b</b> Form 8960 <b>c</b> X Instructions; enter $\infty$		6	1 171
	62	Section 965 net tax liability installment from Form 965-A	62		
	63	Add lines 56 through 61. This is your <b>total tax</b>		<b>▶</b> 6:	3 171
	64	Federal income tax withheld from:	64a 10,2	05	
		Form(s) W-2 Form(s) 1099	64a 10,2	05	
		Other forms	64c	_	
	65	2023 estimated tax payments and amount applied from 2022 return	65	$\overline{}$	
Payments	66	Formed income and it (FIC)	66	$\overline{}$	
Schedule 3)	67	Additional child tax credit. Attach Schedule 8812	67		
,	68	American appartunity gradit from Form 9962 line 9	68		
	69	Decement relate gradit	69		
	70	Net massium tou medit Attack Forms 0000	70		
	71	Amount paid with request for extension to file	71		
	72	Excess social security and tier 1 RRTA tax withheld	72		
	73	Credit for federal tax on fuels. Attach Form 4136	73		
	74	Other payments and refundable credits	74		
	75	Total pymts. Add lines 64 - 74.			5 10,205
Refund	76	If line 75 is more than line 63, subtract line 63 from line 75. This is the	ne amount you <b>overpaid</b>	7	6 10,034
	77a	Amount of line 76 you want refunded to you. If Form 8888 is attach	ned, check here	778	a 10,034
	<b>▶</b> b	Routing number 325081403 ▶ c Type: X Check	king Savings		
	► d	Account number 3611507225			
	78	Amount of line 76 you want <b>applied to your</b> 2024 estimated tax ▶	78		
Amount	79	Amount you owe. Subtract line 75 from line 63. For details on how		<b>▶</b> _79	)
ou Owe	80	Estimated tax penalty (see instructions)	80		
nt/Pen	Date file		Fail to pay		Total
Third Party	Do you				fication no. (PIN) 17329
Designee					360-647-1040
Other Info	Taxpaye		rogram Manager		
	Та	Spouse: Occupation		IRS Identi	ty Protection PIN

1040-NR

Department of the Treasury-Internal Revenue Service

## U.S. Nonresident Alien Income Tax Return

2023

B No. 15/15-007/

IRS Use Only—Do not write

For the year	Jan.	1-Dec. 31, 2023, or other tax ye	ear begin	ning	, and e	ending				1	separate ıctions.
Your first name	and	l middle initial	Las	st name						identifying	
									(see	instructions)	
Martir				Diko					12	22-87	-4191
Home address	(nun	nber and street). If you have a P.O.	box, see i	instructions.							Apt. no.
		laclava St									510
City, town, or p	ost c	office. If you have a foreign address,	also com	plete spaces below.				State		ZIP cod	е
Vancou	1VE	er	_					BC			
Foreign country	nan	me	Foreign	province/state/count	у			Foreign	postal o	code	
Canada			Bri	tish Columb	ia			V6F	( 2H	1	
Filing Status	X	Single Married filir	ng separa	ately (MFS)	Qualifying	surviving spouse	(OSS)		☐ Fst	tate	Trust
		you checked the QSS box, enter	-	•				ident:	□ -	iaio [	
Check only one box.		you officiated the Que Box, critic		ia o riamo ir trio que	anying person	is a sima bat not	your dopor	idoni.			
	· · · ·										
Digital Assets		at any time during 2023, did you	` '	,			,	` '		¬ĭ '	
	0	therwise dispose of a digital ass	et (or a t	inancial interest in a	a digital asset)	? (See instruction				Yes	X No
Dependents							(4) Check	the box if	qualifies 1	for (see instr. 	•
(see instructions)		(1) First name Last nam	0	(2) Dependent's identifying number (3) Relationship to you			C	hild tax cr	dit Credit for other dependents		
		(i) i iist name Last nam		identifying number	(3) (	elationship to you		П		чер	endents
If more than four	$\vdash$							-			
dependents, see instructions and											
check here								+			
Income	12	Total amount from Form(s) W-2	) hov 1	(see instructions)					1a		46,387
Effectively	h	Household employee wages no	t renorte	d on Form(s) W-2				├	1b		40,507
Connected	Č	Tip income not reported on line	1a (see	instructions)				├	1c		
With U.S.	d	Medicaid waiver payments not	reported	on Form(s) W-2 (s	ee instructions			····	1d		
Trade or	e	Taxable dependent care benefit	s from F	orm 2441 line 26		/		····	1e		
Business	f	Employer-provided adoption be	nefits fro	m Form 8839. line	29			····	1f		
		Employer-provided adoption benefits from Form 8839, line 29 Wages from Form 8919, line 6									
Attach	_	Other earned income (see instructions)									
Form(s) W-2, 1042-S,		Reserved for future use 1i									
SSA-1042-S,	j	Reserved for future use							1j		
RRB-1042-S, and 8288-A	k	Total income exempt by a treat									
here. Also		line (1)(e)		•	ŕ	1k	59,	667			
attach Form(s)	z	Add lines 1a through 1h							1z		46,387
1099-R if		Tax-exempt interest 2a			<b>b</b> Taxable in				2b		
tax was withheld.	3a	Qualified dividends 3a			<b>b</b> Ordinary divid	dends		L	3b		
	4a	IRA distributions 4a			<b>b</b> Taxable at	mount		L	4b		
If you did not get a Form	5a	Pensions and annuities 5a			<b>b</b> Taxable ar	mount		📙	5b		
W-2, see	6	Reserved for future use						,	6		
instructions.	7	Capital gain or (loss). Attach Schedule D (Form 1	040) if require	ed. If not required, check here				$\sqcup \downarrow$	7		20 010
	8	Other income from Schedule 1	(Form 10	040), line 10					8		<u>-82,912</u>
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7,						-	9	-	-36,52 <u>5</u>
,	10	Adjustments to income from Sc	nedule 1	(Form 1040), line 2	26. These are	your <b>total adjustr</b>	nents to		40		
		income							10		26 505
	11									•	-36,525
,	12	2 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction (see instructions)									
	40-							····	12		
		Ba Qualified business income deduction from Form 8995 or Form 8995-A b Exemptions for estates and trusts only (see instructions)  13a 13b									
								<del></del>	130		
		Add lines 13a and 13b							13c		
		Subtract line 14 from line 11. If							15		0
		Sasuast mis it not lill lill it. Il		,	io your taxabit	- 411004110					U

Form 1040-NR	(2023)	Martin Diko						12:	<u>2-87-4</u>	191 Page 2
Tax and	16	Tax (see instr.). Check if any from Form(s): 1 8814 2 49	72 3					16		0
Credits	17	Amount from Schedule 2 (Form 1040), line 3	·					17		
	18	Add lines 16 and 17						18		0
	19	Nonrefundable child tax credit or credit for other deper	ndents from	m Schedule	8812	(Form 1040)		19		
	20	Amount from Schedule 3 (Form 1040), line 8						20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18. If zero or less, enter -0-						22		0
	23a	Tax on income not effectively connected with a U.S. tr								
		Schedule NEC (Form 1040-NR), line 15			23a		171			
	b	Other taxes, including self-employment tax, from Sche								
		line Od	`	,,	23b					
	c	Transportation tax (see instructions)			23c					
	q	A 1 1 1' 00 11 1 00						23d		171
	24	Add lines 23 a through 23c  Add lines 22 and 23d. This is your <b>total tax</b>						24		171
Payments	25	Federal income tax withheld from:			<u> </u>					
i ayıncınıs		F(-) W 0			25a		10,205			
		F====/=\ 1000			25b	•	10,203	1		
	b				25c			-		
	ا	Other forms (see instructions)		L				254		10,205
	u	Add lines 25a through 25c						25d		10,203
	e	Form(s) 8805						25e		
	f	Form(s) 8288-A						25f		
	g	Form(s) 1042-S						25g		
	26	2023 estimated tax payments and amount applied from	n 2022 re	turn	- 1			26		
	27	Reserved for future use			27			-		
	28	Additional child tax credit from Schedule 8812 (Form 1040)			28			-		
	29	Credit for amount paid with Form 1040-C			29			-		
	30	Reserved for future use			30			4		
	31				31					
	32	Add lines 28, 29, and 31. These are your $total\ other\ \mu$						32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your <b>total paym</b>						33		10,205
Refund	34	If line 33 is more than line 24, subtract line 24 from line						34		10,034
5:	35a	Amount of line 34 you want <b>refunded to you.</b> If Form		_	_		. Ц	35a		10,034
Direct deposit? See instructions	<b>b</b>	Routing number 325081403 c Type:	: <b>X</b> C	Checking	Sa	vings				
		Account number 3611507225								
	е	If you want your refund check mailed to an address ou	ıtside the I	United State	s not	shown on pag	e 1,			
		enter it here.								
	36	Amount of line 34 you want applied to your 2024 esti	imated ta	x	36					
Amount	37	Subtract line 33 from line 24. This is the <b>amount you</b>	owe.							
You Owe		For details on how to pay, go to www.irs.gov/Payments	or see i	nstructions <sub>.</sub> .	;			37		
	38	Estimated tax penalty (see instructions)			38					
Third	Do y	ou want to allow another person to discuss this return w	vith the IR	S? See inst	ruction	ıs. <b>X Yes</b> . (	Complete be	elow.	☐ No	
Party	Design	90'5				Phone		P	ersonal identif	ication
Designee	-	Lew Stevenson					647-10		umber (PIN)	17329
		penalties of perjury, I declare that I have examined this return and accompany				the best of my kno	wledge and			
		they are true, correct, and complete. Declaration of preparer (other than taxpa ignature		on all information  Your occupation		ch preparer has any	knowledge.		If the IRS sent	you an Identity
Sign Here		Januar Ja		. our occupation					Protection PIN, (see instr.)	enter it here
Here				Techni	cal	Program	Manage	r		
	Phon							T	<del></del>	0
		er's name Preparer's	•				Date	PTIN		Check if:
Paid		Stevenson Lew Ste		Tm ~	DC.		05/08/24	_	37329	Self-employed
Preparer	Firm's		CPA	Inc.,	PS			Phone no.	300-6	47-1040
Use Only	Firm's	address 1951 Main St		ETT 00	040				01	4240562
		Ferndale		WA 98	<u> </u>			Firm's EIN	<u>8T-</u>	<u>4340562</u>

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

Form 1040-NR (2023)

## SCHEDULE NEC (Form 1040-NR)

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

Attach to Form 1040-NR.

OMB No. 1545-0074

2023

Attachment Sequence No. 7B

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

Your identifying number 122-87-4191

_Ma	artin Diko						1	22-87-4191
Ente	r amount of income under the a	approp	riate r	ate of tax. See inst	ructions.	Γ	T	
	Nature of Income			(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Other	
	Diddends and diddend and obstatents	<u> </u>	+		, ,	. ,	%	%
1	Dividends and dividend equivalents:	- 1	10		1,139			
a	Dividends paid by U.S. corporations		1a   1b		1,139			
D	Dividends paid by foreign corporation	ns	וטו					
С	Dividend equivalent payments received		10					
_	with respect to section 871(m) transaction	ons	1c					
2	Interest:		20					
a	Mortgage	··· [4	2a   2b					
D	0.11	··· F	20 2c					
с 3			3					
4	Industrial royalties (patents, trademarks,	′ /⊢	4					
5	Motion picture or TV copyright royalties  Other royalties (copyrights,	⊦	<del>"</del>  -					
3	recording publishing etc.)		5					
6	recording, publishing, etc.) Real property income and	⊦	+					
0	natural resources revelties		6					
7	Pensions and annuities	· · · -	7					
8	Social security benefits	· · · ·	8					
9	Capital gain from line 18 below	· · · -	9					
10	Gambling — Residents of Canada or		*					
10	Enter net income in column (c).	'''y.						
	If zero or less, enter -0							
а	Winnings							
b		-	10c			О		
11	Gambling winnings — Residents of	- ŀ						
• •	countries other than Canada.							
	Note: Enter winnings only. Losses not allowed	<sub>red</sub> .	11					
12	Other (specify):	-						
		- 1	12					
13	Add lines 1a through 12 in columns (a) through	· · · ·	13		1,139			
14	Multiply line 13 by rate of tax	"			,			
	at top of each column	·	14		171			
4-							4040 ND 11 00 45	171
15	Tax on income not effectively connecte						•	<u>  1/1</u>
					es From Sales or			
	only the capital gains and losses from prusiness. Do not include a gain or loss on							
	t property sales or exchanges that are eff		-				,	
16	(a) Kind of property and	<u> </u>		() 5 ( )	(1) (1)	() 0 (	(f) LOSS	(g) GAIN
	,,	Date ac mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	If (e) is more than (d), subtract (d) from (e).	If (d) is more than (e), subtract (e) from (d).
	details not shown below)		,,,				Subtract (d) from (c).	Subtract (c) from (d).
17	Add columns (f) and (g) of line 1	16		L	1	17	(	1
	Capital gain. Combine columns				not gain here and on	· · · · · · · · · · · · · · · · · · ·	enter -0- 18	1 0

#### **SCHEDULE OI** (Form 1040-NR)

Department of the Treasury

#### Other Information

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

OMB No. 1545-0074

Internal Revenue Service

	Martin Diko				10entifying 2-87-4		er	
-		re you a citizen or national during	the tay year? Canada		. 0, 1			
		sidence for tax purposes during the	ho tay year? Canada					
			ent resident) of the United States?			Yes	X	No
	Were you ever:	reen eara neider (lawrar permane	The residency of the Officer States.		Ш			
						Yes	X	No
		nanent resident) of the United Sta	ates?		1 1	Yes	X	No
_	• , ,	, see Pub. 519, chapter 4, for exp			Ш		ш	
_								
E	-	te tax year, enter your visa type. If you	didn't have a visa, enter your U.S.					
	immigration status on the last day of	the tax year. DACA			· · · · · · · · · · · · · · · · · · ·		· · <u>· · ·</u>	
F	Have you ever changed your visa typ	pe (nonimmigrant status) or U.S. immig	ration status?		Ц	Yes	X	No
	If you answered "Yes," indicate the da							
G		eft the United States during 2023.						
			work in the United States at frequent					
	check the box for Canada or I	<b>Viexico</b> and skip to item H		Mexico				
	Data antona di Unita di Otata	Data damanta di Unita di Otata	Determined to	leite d Otata a Data d			-4	7
	Date entered United States	Date departed United States	Date entered U		eparted Un		ates	
	mm/dd/yy	mm/dd/yy	mm/do	l/yy	mm/dd/y	У		-
		+						-
								1
								_
Н	~ ~ -		al days) you were present in the Unite	d States during:				
			3		_		_	
I	Did you file a U.S. income tax re	eturn for any prior year? I form number you filed:			X	Yes		No
	If "Yes," give the latest year and	form number you filed:	2022 1040					
J	Are you filing a return for a trust	?				Yes	X	No
			ntor trust rules, make a distribution or le		····· —		_	
	U.S. person, or receive a contrib	oution from a U.S. person?			🔲	Yes		No
ĸ		tion of \$250,000 or more during th				Yes	X	No
			ce of this compensation?			Yes	Ħ	No
L			ncome tax under a U.S. income tax tre		····· □ v.		ш	
		See Pub. 901 for more information		<b>,</b>	,			
1.	. Enter the name of the country, t	he applicable tax treaty article, the	e number of months in prior years you	claimed the treaty bene	efit, and the	Э		
	amount of exempt income in the	e columns below. Attach Form 88	33 if required. See instructions.					
	(a) Cou	ıntry	(b) Tax treaty article	(c) Number of months	<b>(d)</b> Am	nount of	exem	pt
				claimed in prior tax years	income ii	n curren	t tax y	ear_
	See Stateme	ent 1						
					+			
	(e) Total. Enter this amount on	Form 1040-NR, line 1k. Do not e	nter it anywhere else on line 1	1	1	5	9,6	67
2			shown in 1(d) above?		X	Yes	ÍΪ	No
	-		ity determination?			Yes	X	No
		ompetent Authority determination	-					
М	Check the applicable box if:	•						
1	. This is the first year you are ma	king an election to treat income f	rom real property located in the United	States as effectively co	nnected		_	_
		nder section 871(d). See instruction					. [2	K
2			revoked, to treat income from real pro	· · ·			_	7
	States as effectively connected	with a U.S. trade or business und	der section 871(d). See instructions				.	

#### SCHEDULE C (Form 1040)

Department of the Treasury

**Profit or Loss From Business** 

(Sole Proprietorship)

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

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

OMB No. 1545-0074

Attachment Sequence No. 09

Internal Revenue Service Name of proprietor Social security number (SSN) Martin Diko 122-87-4191 Principal business or profession, including product or service (see instructions) B Enter code from instructions Software Design & Development U.S. 541510 С Business name. If no separate business name, leave blank. Employer ID number (EIN) (see instr.) Diko LLC Business address (including suite or room no.) 2468 Balaclava St 510 F BC City, town or post office, state, and ZIP code Vancouver F (1) X Cash (2) Accrual (3) Uther (specify) Accounting method: Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses G 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 No If "Yes," did you or will you file required Form(s) 1099? Yes No Part I Income Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked 1 2 2 Returns and allowances 3 Subtract line 2 from line 1 Cost of goods sold (from line 42) 4 Gross profit. Subtract line 4 from line 3 5 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) 6 Gross income. Add lines 5 and 6 Part II **Expenses.** Enter expenses for business use of your home **only** on line 30. 180 8 Advertising 8 18 Office expense (see instructions) 19 19 Car and truck expenses Pension and profit-sharing plans 20 9 (see instructions) Rent or lease (see instructions): Commissions and fees Vehicles, machinery, and equipment 10 10 а Other business property ..... Contract labor (see instructions) ..... 11 11 b 20b 12 12 21 Repairs and maintenance 21 Depletion Supplies (not included in Part III) ...... Depreciation and section 179 22 13 22 expense deduction (not Taxes and licenses 2,112 23 23 included in Part III) (see 13 24 Travel and meals: instructions) ..... Travel Employee benefit programs а Deductible meals (see (other than on line 19) 14 instructions) Insurance (other than health) ..... 15 15 24b 25 Utilities Interest (see instructions): 16 25 Wages (less employment credits) 26 8,450 Mortgage (paid to banks, etc.) 16a а 26 27a Other expenses (from line 48) b 16b 5,348 **b** Energy efficient commercial bldgs 150 17 17 deduction (attach Form 7205) ...... 27b Legal and professional services. 16,240 Total expenses before expenses for business use of home. Add lines 8 through 27b 28 28 -16,24029 Tentative profit or (loss). Subtract line 28 from line 7 30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: and (b) the part of your home used for business: 210 . Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 30 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you -16,240checked 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 32b Some investment is not Form 1041, line 3. at risk • If you checked 32b, you must attach Form 6198. Your loss may be limited.

Martin Diko 122-87-4191

Sche	edule C (Form 1040) 2023	Software Design &	Development U.S.			Page	e 2
Pa	art III Cost of Goods Sold (s		-				
33	Method(s) used to value closing inventory: <b>a</b> Cos	st <b>b</b> Lower of cost or market	c Other (attach explanat	ion)			
34		uantities, costs, or valuations between or			Yes	_ N	۱o
35	Inventory at beginning of year. If different from	n last year's closing inventory, attach explanation	n	35			_
36	Purchases less cost of items withdrawn	for personal use		36			_
37	Cost of labor. Do not include any amour	nts 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		om line 40. Enter the result here and on					
Pa		<b>Yehicle.</b> Complete this part <b>only</b> if form 4562 for this business. See	•	•			
44 a	Of the total number of miles you drove y	your vehicle during 2023, enter the numb <b>b</b> Commuting (see instructions)					
45	Was your vehicle available for personal	use during off-duty hours?		[	Yes	□ N	١o
46	Do you (or your spouse) have another v	vehicle available for personal use?			Yes	□ N	l٥
47a	Do you have evidence to support your of	deduction?			Yes	N	lо
b	If "Yes," is the evidence written?				Yes	N	Ю
Pa	ort V Other Expenses. List b	elow business expenses not inclu	uded on lines 8-26, line 27b, or	line 30.		1,18	0
C	omputer Software ontinuing Education					1,10	
0	ther Expense mall Tools and Equip					F 0	_
Т	elephone & Internet					50 3,66	
	crephone u internet					3,00	
							_
							_
							_
							_
							_
							_
48	Total other expenses. Enter here and	on line 27a		48		5,34	8

#### **SCHEDULE E**

(Form 1040)

Department of the Treasury Internal Revenue Service

#### Supplemental Income and Loss

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

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

OMB No. 1545-0074

Attachment Sequence No 13

Name(s) shown on return

Go to www.irs.gov/ScheduleE for instructions and the latest information. Your social security number

Martin Diko				122-	87-41	L <b>91</b>		
Part I Income or Loss From Rental Real Estate	and Do	ovaltice						
Note: If you are in the business of renting personal pro			ections If w	ou are an in	dividual	renort	farm	
rental income or loss from <b>Form 4835</b> on page 2, line		e ochedule o. dee man	actions. If y	ou ale all ill	uividuai,	тероп	Iaiiii	
A Did you make any payments in 2023 that would require you to fil		) 1099? See instructions				$\top \top \mathbf{Y}$	'es	X No
<b>B</b> If "Yes," did you or will you file required Form(s) 1099?						$\vdash$	'es	No
1a Physical address of each property (street, city, state, ZIP coo								
A 5515 Beverly Ln, Everett, WA 98203	,							
В								
С								
<b>1b</b> Type of Property <b>2</b> For each rental real esta	ate prope	rty listed		Fair Rental	Persor	nal Use		QJV
(from list below) above, report the number				Days	Da	ays		QJ V
A personal use days. Chec if you meet the requirem			Α	365				
B qualified joint venture. S			В				<u> </u>	$\bot$
_ C			С					Ш
Type of Property:								
1 Single Family Residence 3 Vacation/Short-Term Rental 5	Land	7 Self-Rental						
2 Multi-Family Residence 4 Commercial 6	Royalti	es 8 Other (descri	oe)					
			Pro	perties:	<u> </u>			
Income:		A		В	_		С	
3 Rents received	-	59,559						
4 Royalties received	4				-			
Expenses:	_							
5 Advertising		197						
6 Auto and travel (see instructions)		6,225						
7 Cleaning and maintenance		0,223			+			
8 Commissions		1,320						
9 Insurance 10 Legal and other professional fees		150						
11 Management fees	-	4,176	+					
12 Mortgage interest paid to banks, etc. (see instructions)								
13 Other interest								
14 Repairs	-	7,095						
15 Supplies		. /						
16 Taxes		5,626						
17 Utilities		3,788						
18 Depreciation expense or depletion	18	32,748						
19 Other (list) See Statement 2	19	6,225						
20 Total expenses. Add lines 5 through 19	20	67,550						
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
result is a (loss), see instructions to find out if you must								
file Form 6198	21	-7,991						
22 Deductible rental real estate loss after limitation, if any,								
on Form 8582 (see instructions)		20,285	<b>X</b>		X			
23a Total of all amounts reported on line 3 for all rental properties				59,5	59			
<b>b</b> Total of all amounts reported on line 4 for all royalty properties								
c Total of all amounts reported on line 12 for all properties								
d Total of all amounts reported on line 18 for all properties				32,74				
e Total of all amounts reported on line 20 for all properties				67,5				
24 Income. Add positive amounts shown on line 21. Do not include a	-			· · · · · · · · ·	24			) 205
25 Losses. Add royalty losses from line 21 and rental real estate loss			nere	<u> </u>	25 (			,285
26 Total rental real estate and royalty income or (loss). Combine li								
here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, a Schedule 1 (Form 1040), line 5. Otherwise, include this amount in t					26		-20	,285
Constant I to the rotate of the contract wise. Illiciate this appoint in the contract wise.	וווט וטומו ל	nimio ≒i Ulipaye∠			-0		~ ~	,,

**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

Sequence No. 55

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Martin Diko

Your taxpayer identification number 122-87-4191

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 j	ointly), and you aren't a patron of an agricultural or horticultural cooperative.						
1	(a) Trade, business, or aggregation name		<b>(b)</b> Taxpayer identification number		(c) Qualified business income or (loss)		
i	Residential Rental- 5515 Beverly Ln Everett WA	7	122-87-4191		-7,991		
ii	Diko LLC		122-87-4191		-16,240		
iii							
iv							
v							
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2	-24,231				
3	Qualified business net (loss) carryforward from the prior year	3	24,083)				
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	0				
5	Qualified business income component. Multiply line 4 by 20% (0.20)			5			
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)						
	(see instructions)	6		-			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior						
	year	7		1			
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero	8	0				
9	or less, enter -0-			9			
10	REIT and PTP component. Multiply line 8 by 20% (0.20)  Qualified business income deduction before the income limitation. Add lines 5 and 9			10	0		
11	Taxable income before qualified business income deduction (see instructions)		-36,525	10	<u> </u>		
12	Enter your net capital gain, if any, increased by any qualified dividends		20,020	1			
	(see instructions)	12					
13	Subtract line 12 from line 11. If zero or less, enter -0-		0				
14	Income limitation. Multiply line 13 by 20% (0.20)			14	0		
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also er	nter this	amount on				
	the applicable line of your return (see instructions)			15	0		
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than 2			16	( 48,314)		
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7.	If greate	er than				
	zero, enter -0-			17	( )		

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

Form **8995** (2023)

**Passive Activity Loss Limitations** 

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2023
Attachment
Sequence No. 858

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

Identifying number

Ma	artin Diko					122	-87·	-4191
	rt I 2023 Passive Activity I	Loss				<u> </u>		
	Caution: Complete Parts IV a		g Part I.					
Renta	al Real Estate Activities With Active P			ipation, s	ee <i>Special</i>			
Allov	vance for Rental Real Estate Activities	in the instructions.)						
1a	Activities with net income (enter the amo	ount from Part IV, colur	mn (a))	1a				
b	Activities with net loss (enter the amoun	t from Part IV, column	(b))	1b (		<b>7,991</b> )		
С	Prior years' unallowed losses (enter the	amount from Part IV, o	column (c))	1c (	1	2,294		
d	Combine lines 1a, 1b, and 1c						1d	-20,285
All O	ther Passive Activities							
2a	Activities with net income (enter the amo	ount from Part V, colun	nn (a))	2a				
b	Activities with net loss (enter the amoun	t from Part V, column (	(b))	2b (		)		
С	Prior years' unallowed losses (enter the	amount from Part V, c	olumn (c))	2c (		)		
d	Combine lines 2a, 2b, and 2c						2d	
3	Combine lines 1d and 2d and subtract a				ine is			
	zero or more, stop here and include this	form with your return;	all losses are allowed,	including	any			
	prior year unallowed losses entered on I	ine 1c or 2c. Report the	e losses on the forms	and sched	dules			
	normally used						3	-20,285
	If line 3 is a loss and: • Line 1d is a	loss, go to Part II.						
	<ul> <li>Line 2d is a</li> </ul>	loss (and line 1d is zer	ro or more), skip Part I	l and go t	o line 10.			
Cauti	on: If your filing status is married filing s	eparately and you lived	with your spouse at a	ny time d	uring the year,	do not co	mplete	•
Part I	I. Instead, go to line 10.							
Pa	rt II Special Allowance for	Rental Real Estat	te Activities With	Active	Participation	n		
	Note: Enter all numbers in Pa	art II as positive amoun	ts. See instructions for	an exam	ple.			
4	Enter the $\boldsymbol{smaller}$ of the loss on line 1d	or the loss on line 3					4	20,285
5	Enter \$150,000. If married filing separat	ely, see instructions		5	15	0,000		
6	Enter modified adjusted gross income, b	out not less than zero.	See instructions	6		0		
	Note: If line 6 is greater than or equal to	line 5, skip lines 7 and	d 8 and enter -0-					
	on line 9. Otherwise, go to line 7.							
7	Subtract line 6 from line 5			7	15	0,000		
8	Multiply line 7 by $50\%$ (0.50). Do not en	nter more than \$25,000	. If married filing separ	ately, see	instructions		8	25,000
9	Enter the smallerof line 4 or line 8. If lin	ne 3 includes any CRD,	see instructions				9	20,285
<u>Pa</u>	rt III Total Losses Allowed							
10	Add the income, if any, on lines 1a and	2a and enter the total <sub>.</sub>					10	
11	Total losses allowed from all passive	activities for 2023. Ac	dd lines 9 and 10. See	instructio	ons to find			
	out how to report the losses on your tax						11	20,285
_Pa	rt IV Complete This Part Be	fore Part I, Lines	<b>1a, 1b, and 1c.</b> S	ee instr	uctions.			
	Name of activity	Currer	nt year	Pric	or years		Overa	all gain or loss
	name of additing	(a) Net income (line 1a)	(b) Net loss (line 1b)		nallowed (line 1c)	( <b>d)</b> G	ain	(e) Loss
Re	esidential Rental- 5	515 Beverly	Ln					
			7,991		12,294			20,285

7,991

12,294

Total. Enter on Part I, lines 1a, 1b, and 1c

Martin Diko 122-87-4191

Form 8582 (2023) Page 2 Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions. Current year Prior years Overall gain or loss Name of activity (c) Unallowed (a) Net income (b) Net loss (d) Gain (e) Loss (line 2a) (line 2b) loss (line 2c) Total. Enter on Part I, lines 2a, 2b, and 2c Part VI Use This Part if an Amount Is Shown on Part II, Line 9. See instructions. Form or schedule (d) Subtract and line number (c) Special Name of activity (a) Loss (b) Ratio column (c) from to be reported on allowance column (a). (see instructions) Residential Rental-5\$15 Beverly Ln 20,285 1.0000 20,285 Sch E1 20,285 20,285 1.00 **Total** Part VII Allocation of Unallowed Losses. See instructions Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions) 1.00 Total Part VIII Allowed Losses. See instructions Form or schedule Name of activity and line number (a) Loss (b) Unallowed loss (c) Allowed loss to be reported on (see instructions) **Total** 

#### Form (Rev. September 2018) Department of the Treasury Internal Revenue Service

## Preparer Explanation for Not Filing Electronically

▶ Go to www.irs.gov/Form8948 for instructions and the latest information.

OMB No. 1545-2200

Attachment Sequence No. 173

Tax year of return Taxpayer's identifying number Name(s) on tax return 2023 122-87-4191 Martin Diko Preparer's name Preparer Tax Identification Number (PTIN) P00037329 Lew Stevenson

Three out of four taxpayers now use IRS e- electronic filing include the following.	file. Go to www.irs.gov/efile for	details on using IRS e-file. The	benefits of
Faster refunds	Secure transmissions	·	ayment options
More accurate returns	Easier filing method	• Rec	eipt acknowledged
Check the applicable box to indicate the reaso	n this return is not being filed elec	ctronically. Do not check more that	n one box.
1 X Taxpayer chose to file this return on	paper.		
2 The preparer received a waiver from	the requirement to electronically	file the tax return.	
Waiver Reference Number		Approval Letter Date	
3 The preparer is a member of a reco	gnized religious group that is con	scientiously opposed to filing elec	etronically.
4 This return was rejected by IRS e-fil	e and the reject condition could n	ot be resolved.	
Reject code:	Nı	umber of attempts to resolve reject	ot:
The preparer's e-file software package attached to this return.  The preparer's e-file software package attached to this return.	ge does not support Form	or Schedule	
6 Check the box that applies and provide	additional information if requested	<b>I</b> .	
a The preparer is ineligible to file election numbers who live and work abroad.	tronically because IRS <i>e-file</i> does	not accept foreign preparers with	nout social security
<b>b</b> The preparer is ineligible to participate	ite in IRS <i>e-file</i> .		
c Other: Describe below the circumsta	inces that prevented the preparer	from filing this return electronica	lly.

For Paperwork Reduction Act Notice, see instructions.

Form **8948** (Rev. 9-2018)

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

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

OMB No. 1545-0172

tachment equence No. 17

Name(s) shown on return

Martin Diko

122-87-4191

	ness or activity to which this form relates							
	esidential Rental- 551							
Pa	art I Election To Expense Cert	• •						
	Note: If you have any listed	d property, complete Pa	irt V before yo	u com	olete Part	l.		1 160 000
1	Maximum amount (see instructions)						1	1,160,000
2	Total cost of section 179 property placed in	service (see instructions)					2	0 000 000
3	Threshold cost of section 179 property before						3	2,890,000
4	Reduction in limitation. Subtract line 3 from						4	
	Dollar limitation for tax year. Subtract line 4 from lin	ie 1. It zero or less, enter -0 It r	1	•			5	
6	(a) Description of property		(b) Cost (business	use only)	(C) I	Elected cost		
					_			
	Listed and the Colombia and the Colombia	00			_			
7	Listed property. Enter the amount from line	29						
8	Total elected cost of section 179 property. A		nes 6 and 7				8 9	
9	Tentative deduction. Enter the <b>smaller</b> of lin						10	
10	Carryover of disallowed deduction from line	13 Of your 2022 Form 4562						
11	Business income limitation. Enter the smalle	er of business income (not le	ss than zero) or i	ine 5. Se	ee instruction	18	11	
12	Section 179 expense deduction. Add lines 9				<u></u>		12	
13 Note	Carryover of disallowed deduction to 2024. As: Don't use Part II or Part III below for listed p			.   13				
				n't inc	luda liatad	proport	v So	o instructions \
					iuue iisteu	propert	y. 3e	e instructions.)
14	Special depreciation allowance for qualified		, .					
45							14 15	
15 16	Property subject to section 168(f)(1) election						16	
16 Da	Other depreciation (including ACRS)  Art III MACRS Depreciation (Do	n't include listed prope					16	
ГС	MIX III MIACKS Depreciation (Do		tion A	Cuons.	<u> </u>			
17	MACRS deductions for assets placed in ser						17	32,748
18	If you are electing to group any assets placed in service d						17	32,740
10		iced in Service During 2023				eciation S	vstem	
		th and year (c) Basis for depr			2 ор.	701010111 0	,	
	(a) Classification of property plan	ced in (business/investme rvice only–see instruc	ent use	'   (e)	Convention	(f) Meth	iod	(g) Depreciation deduction
19a	3-year property	Triod only doe mondo	uono,					
b	5-year property							
	7-year property							
d	10-year property							
е	15-year property							
f								
q	25-year property		25 yrs	3.		S/L		
— h	Residential rental		27.5 y		MM	S/L		
	property		27.5 y		MM	S/L		
ī	Nonresidential real		39 yrs		MM	S/L		
	property				MM	S/L		
	Section C—Assets Plac	ed in Service During 2023	Tax Year Using	the Alte	rnative Dep	reciation	Syster	m
20a	Class life				·	S/L		
b	12-year		12 yr	S.		S/L		
С	30-year		30 yrs	-	MM	S/L		
d	40-year		40 yr:	_	MM	S/L		
Pa	art IV Summary (See instructions	s.)	, ,	•				•
21	Listed property. Enter amount from line 28	•					21	
22	<b>Total.</b> Add amounts from line 12, lines 14 th	rough 17, lines 19 and 20 in	column (g), and	line 21.	Enter			_
	here and on the appropriate lines of your re-	eturn. Partnerships and S cor	porations—see in				22	32,748
23	For assets shown above and placed in serv							
	portion of the basis attributable to section 2	20 A 4 -	ı,	23				

	_
Page	"

Form	n 4562 (202	23)														Page
P	art V	Listed Prope entertainment Note: For any v	t, recreation,	or amuse	ement.)	andard ı	mileage	rate or o	deducting	ı lease			•			
		24b, columns (a	) through (c) of s —Depreciation								limite for	nassan	ner auto	mohiles	١	
2/2	Do you bo	ve evidence to support to			IIIIOIIIIa		Yes	No			" is the				Yes	XN
<u>24a</u>	(a)	(b)	(c)	(d	<b>.</b>	1	(e)	INO	(f)	11 163,	(g)	EVIGENCE	(h)	:	Τ' -	(i)
	e of property vehicles first)	Date placed in service	Business/ investment use percentage	Cost or ot			sis for depressiness/investuse only	stment	Recovery	' I	Method/ onvention		Depreciat deduction		Elected s	section 17
25	Special	depreciation allowa	ı ance for qualified	l listed prop	ertv plac	ed in se		,								
	•	year and used mor	•		, ,			U			2	5				
26	Property	used more than 5	50% in a qualifie	d business ι	use:											
			%													
		/	<u>%</u>													
27	Property uto	vused 50% or less I	s in a qualified bu I	usiness use:					Т							
A	uto	09/14/22	2.50%							S/	1					
		09/14/22	2.50%							3/	<u> </u>					
			%							S/	1_					
28	Δdd am	unts in column (h		ıh 27 Enter	here an	d on line	21 nac	1 ar	1			8			-	
29		ounts in column (i)	,.	•							L=	<u> </u>		29		
	7 tad am	ounto in column (i)	, iiio 20. Emor ii						Vehicles	<u></u>				.   20		
Com	nplete this	section for vehicle	s used by a sole								ed perso	n. If you	provide	d vehicle	es	
		yees, first answer t	•		•							-	•			
						a)	1	b)		c)		(d)	1	(e)		(f)
30	Total bu	ısiness/investment	miles driven du	ring	Vehi	cle 1	Vehi	icle 2	Vehi	cle 3	Veh	nicle 4	Veh	nicle 5	Veh	icle 6
	the year	(don't include co	mmuting miles)			300										
31	Total co	mmuting miles driv	ven during the ye	ear												
32	Total ot	her personal (nonc	commuting)													
	miles dr	riven			11	,700										
33	Total mi	les driven during th	he year. Add													
	lines 30	through 32			12	<u>,000</u>				1						
34	Was the	vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		ing off-duty hours?				X			<u> </u>				-			
35		vehicle used prim	, ,													
		o owner or related			X				1							
36	is anoth	er vehicle available	•		<u> </u>		<u> </u>			L	<del></del>	٠.				
۸ ۳۵۰	war than		Section C—Que							-						
		questions to deter- owners or related	-		on to cor	npieung	Section	D IOI VE	enicies u	sed by	employe	es who	aren t			
37	Do you	maintain a written	•		its all pe	rsonal u	se of ve	hicles, i	ncluding	commu	ting, by				Yes	No
20	•	nployees?	nolicy statement	that proble	ito norac	nol use	of Mobie	00 075		outipe '						X
38	-	maintain a written es? See the instru		•	•				•	-						x
39		treat all use of veh														X
40	•	provide more than							 ır emplox							1
0	-	he vehicles, and re				uni inioi		-								X
41		meet the requirem				demon			ee instrud							X
		your answer to 37														
P	art VI	Amortization														
		(a) Description of costs		( <b>b</b> Date amo begi	ortization			(c) able amou	nt	Code s		(e) Amortiza period percent	or	Amortiz	<b>(f)</b> ation for th	is year
42	Amortiza	ation of costs that	begins during yo	ur 2023 tax	year (se	e instru	ctions):									
43	Amortiza	ation of costs that I	began before yo	ur 2023 tax	year								43			

44

Total. Add amounts in column (f). See the instructions for where to report

(Rev. December 2022)

## Treaty-Based Return Position Disclosure Under Section 6114 or 7701(b)

Attach to your tax return.

Go to www.irs.gov/Form8833 for the latest information.

OMB No. 1545-1354

Attach a separate Form 8833 for each treaty-based return position taken. Failure to disclose a treaty-based return position may result in a penalty of \$1,000 (\$10,000 in the case of a C corporation) (see section 6712). Name U.S. taxpayer identifying number Reference ID number, if any (see instructions) 122-87-4191 Martin Diko Address in country of residence Address in the United States C/O 1951 Main Street 2468 Balaclava St#510, Vancouver BC CA WA 98248 Canada V6K 2H1 Ferndale Check one or both of the following boxes as applicable. • The taxpayer is disclosing a treaty-based return position as required by section 6114 X • The taxpayer is a dual-resident taxpayer and is disclosing a treaty-based return position as required by Regulations section 301.7701(b)-7 Note: If the taxpayer is a dual-resident taxpayer and a long-term resident, by electing to be treated as a resident of a foreign country for purposes of claiming benefits under an applicable income tax treaty, the taxpayer will be deemed to have expatriated pursuant to section 877A. For more information, see the instructions. Check this box if the taxpayer is a U.S. citizen or resident or is incorporated in the United States Enter the specific treaty position relied on: Name, identifying number (if available to the taxpayer), and Treaty country CA Canada address in the United States of the payor of the income (if Article(s) XI XV XIII X fixed or determinable annual or periodical). See instructions. List the Internal Revenue Code provision(s) overruled or Vanguard P.O. Box 982901 modified by the treaty-based return position TX 79998-2901 ElPaso IRC Secs. 1 61 871 List the provision(s) of the limitation on benefits article (if any) in the treaty that the taxpayer relies on to qualify for benefits under the treaty Is the taxpayer disclosing a treaty-based return position for which reporting is specifically required pursuant X No to Regulations section 301.6114-1(b)? Yes If "Yes," enter the specific subsection(s) of Regulations section 301.6114-1(b) requiring reporting Also include the information requested in line 6. Explain the treaty-based return position taken. Include a brief summary of the facts on which it is based. Also, list the nature and amount (or a reasonable estimate) of gross receipts, each separate gross payment, each separate gross income item, or other item (as applicable) for which the treaty benefit is claimed Interest Inc Art. XI exempts this income for a resident of Canada Dividend Inc Art. X establishes the treaty rate for this income for a resident of Canada Art. XIII(4) exempts gain on sale of U.S. Capital Gains on Stocks stocks for a resident of Canada W-2 Wages Art. XV exempts the employment income for a resident of Canada where the services are wholly performed in Canada.

8833

(Rev. December 2022)

#### Treaty-Based Return Position Disclosure Under Section 6114 or 7701(b)

Attach to your tax return.

Go to www.irs.gov/Form8833 for the latest information.

OMB No. 1545-1354

Attach a separate Form 8833 for each treaty-based return position taken. Failure to disclose a treaty-based return position may result in a penalty of \$1,000 (\$10,000 in the case of a C corporation) (see section 6712). Name U.S. taxpayer identifying number Reference ID number, if any (see instructions) 122-87-4191 Martin Diko Address in country of residence Address in the United States C/O 1951 Main Street 2468 Balaclava #510, Vancouver BC CA Canada V6K 2H1 Ferndale WA 98248 Check one or both of the following boxes as applicable. • The taxpayer is disclosing a treaty-based return position as required by section 6114 • The taxpayer is a dual-resident taxpayer and is disclosing a treaty-based return position as required by Regulations section 301.7701(b)-7 Note: If the taxpayer is a dual-resident taxpayer and a long-term resident, by electing to be treated as a resident of a foreign country for purposes of claiming benefits under an applicable income tax treaty, the taxpayer will be deemed to have expatriated pursuant to section 877A. For more information, see the instructions. Check this box if the taxpayer is a U.S. citizen or resident or is incorporated in the United States Enter the specific treaty position relied on: Name, identifying number (if available to the taxpayer), and Treaty country CA Canada address in the United States of the payor of the income (if Article(s) XI XV XIII X fixed or determinable annual or periodical). See instructions. Fidelity List the Internal Revenue Code provision(s) overruled or P.O. Box 28019 modified by the treaty-based return position NM 87125-8019 Albuquerque IRC Sec 1 61 871 List the provision(s) of the limitation on benefits article (if any) in the treaty that the taxpayer relies on to qualify for benefits under the treaty Is the taxpayer disclosing a treaty-based return position for which reporting is specifically required pursuant to Regulations section 301.6114-1(b)? Yes If "Yes," enter the specific subsection(s) of Regulations section 301.6114-1(b) requiring reporting Also include the information requested in line 6. Explain the treaty-based return position taken. Include a brief summary of the facts on which it is based. Also, list the nature and amount (or a reasonable estimate) of gross receipts, each separate gross payment, each separate gross income item, or other item (as applicable) for which the treaty benefit is claimed

8833

(Rev. December 2022) Department of the Treasury Internal Revenue Service

Go to www.irs

Attach a separate Form 8833 for each treaty-based return p

DAA

#### **Treaty-Based Return Position Disclosure** Under Section 6114 or 7701(b)

Attach to your tax return.

Go to www.irs.gov/Form8833 for the latest information.

OMB No. 1545-1354

		enalty of \$1,000 (\$10,000 in the case of a C corporation) (see s	section 6712).								
Address in country of residence  2468 Balclava St #510, Vancouver BC CA Canada V6k 2H1  V6k 2H1  The taxpayer is disclosing a treaty-based return position as required by section 6114  The taxpayer is a dual-resident taxpayer and a disclosing a treaty-based return position as required by section 6117  The taxpayer is a dual-resident taxpayer and a disclosing a treaty-based return position as required by section 61776 (b)-7  Regulations section 301.7701(b)-7  Note: If the taxpayer is a dual-resident taxpayer and a long-term resident, by electing to be treated as a resident of a foreign country for purposes of claiming benefits under an applicable income tax treaty, the taxpayer will be deemed to have expatiated pursuant to section 672h. For more information, see the instructions.  Check this box if the taxpayer is a U.S. citizen or resident or is incorporated in the United States.  1 Enter the specific treaty position relied on:  2 Treaty country CA Canada  3 Treaty country CA Canada  5 Ardelely XI XV XIII X  2 List the Internal Revenue Code provision(s) overruled or modified by the treaty-based return position  4 List the provision(s) of the limitation on benefits article (if any) in the treaty that the taxpayer relies on to qualify for benefits under the treaty  5 Is the taxpayer disclosing a treaty-based return position for which reporting is specifically required pursuant to Regulations section 301.6114-1(b)?  1 "Yes," order the specific subsection(s) of Regulations section 301.6114-1(b) requiring reporting  Also include the information requested in line 6.  6 Explain the treaty-based return position taken. Include a brief summary of the facts on which it is based. Also, list the nature and amount (or a reasonable ceitinate) of gross receipts, each separate gross payment, each separate gross income item, or other item (as applicable) for which the treaty benefit is claimed	Name										
2468 Balclava St #510, Vancouver BC CA Canada V6k 2HI Ferndale  Chock one or both of the following boxes as applicable.  The taxpayer is disclosing a treaty-based return position as required by section 6114  The taxpayer is a dual-resident taxpayer and is disclosing a treaty-based return position as required by Regulations section 501.7710(b)-7  Mote: If the taxpayer is a dual-resident taxpayer and is disclosing a treaty-based return position as required by Regulations section 501.7710(b)-7  Mote: If the taxpayer is a dual-resident taxpayer and is disclosing a treaty-based return position served to have expatiated pursuant to section 371A. For more information, see the instructions.  Chock this box if the taxpayer is a U.S. citizen or readent or is incorporated in the United States  1 Enter the specific treaty position relied on: a Treaty county-CA Canada b Articles) XT XV XIII X  2 List the internal Revenue Code provision(s) overruled or modified by the treaty-based return position  1 S1 871  4 List the provision(s) of the limitation on benefits article (if any) in the treaty that the taxpayer relies on to qualify for benefits under the treaty  5 Is the taxpayer disclosing a treaty-based return position for which reporting is specifically required pursuant to Regulations section 301.6114-1(b)?  If 'Yes' reter the spocific subsection(s) of Regulations section 301.6114-1(b) requiring reporting  Also include the Information requested in line 6.  6 Explain the treaty-based return position taken. Include a brief summary of the facts on which it is based. Also, list the nature and amount (or a reasonable estimate) of gross receipts, each separate gross payment, each separate gross income item, or other item (as applicable) for which the treaty benefit is claimed	Ma	rtin Diko									
Canada Vé 1211 Perndale WA 98248  - The taxpayer is disclosing a treaty-based return position as required by section 6114  - The taxpayer is a dual-resident taxpayer and is disclosing a treaty-based return position as required by Regulations section 301.70(b)-7  - Mote: If the taxpayer is a dual-resident taxpayer and a long-term resident, by electing to be treated as a resident of a foreign country for purposes of claring benefits under an applicable income tax treaty, the taxpayer will be deemed to have expatriated pursuant to section 877A. For more information, see the instructions.  - The this box of the taxpayer is a U.S. citzen or resident or is incorporated in the United States  1	Addres	s in country of residence	Address in the United States								
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• The taxpayer is a dual-resident taxpayer and is disclosing a treaty-based return position as required by Regulations section 301.710(b)?  **Note:* If the taxpayer is a dual-resident taxpayer and a long-term resident, by electing to be treated as a resident of a foreign country for purposes of claiming benefits under an applicable income tax treaty, the taxpayer will be deemed to have expatriated pursuant to section 877.A. For more information, see the instructions.  Check this box if the taxpayer is a U.S. citizen or resident or is incorporated in the United States.  Check this box if the taxpayer is a U.S. citizen or resident or is incorporated in the United States.  1			d by section 6114								
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other item (as applicable) for which the treaty benefit is claimed	6	Explain the treaty-based return position taken. Include a brief s	summary of the facts on which it is based. Also, list the nature								
		other item (as applicable) for which the treaty benefit is claime	∌d								
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## **Federal Statements**

## Statement 1 - Form 1040NR, Page 5, Line L - Income Exempt from Tax

Country	Tax Treaty Article	Months claimed _in prior years_	Exempt inc in current year			
Canada	xv for dep		\$	46,387		
Canada	XI Interest			43		
Canada	XI Dividend					
Canada	XIII Gains			13,237		
Total			\$	59 <b>,</b> 667		

## **Federal Statements**

# Residential Rental- 5515 Beverly Ln Everett WA Statement 2 - Schedule E, Line 19 - Other Expenses

Description	 Gross Amount	Business Use Percentage	 Net Amount
Outside Maintenance Painting Placement Fee Small Improvement	\$ 6,225		\$ 6,225
Total	\$ 6 <b>,</b> 225		\$ 6 <b>,</b> 225

## **Federal Statements**

#### **General Footnote**

#### Description

The taxpayer received W-2 wages from Microsoft Global Resources for work performed soley in Canada. The taxpayer is not a U.S. citizen and established residency in Canada in 2022 which residency continues to this day.

The W-2 wages are not to be considered U.S source income for this taxpayer since he is not a U.S. citizen and his residence is in Canada.

## COPY - Do not file

Form **4868** 

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File U.S. Individual Income Tax Return

Go to www.irs.gov/Form4868 for the latest information.

OMB No. 1545-0074

2023

Form 4868 (2023)

(on bottom of page)

Extension re		 riginal:	ly	CUT HERE	ectr	onica	11y	
Form 4868  Application for Automati To File U.S. Individual					OMB No. 1545-0074 <b>2023</b>			
Part I Identificati		ar 2023, or other t	tax yea	r beginning		, and end	Individual Income Tax	
1 Your name(s) (see instructions)  Martin Diko			4 Estimate of total tax liability for 2023 \$ 5 Total 2023 payments 1 6 Balance due. Subtract line 5 from line 4.		0 10,205			
Address (see instructions) 510 2468 Balaclava St				See instructions  7 Amount you're paying (see instructions)				
City, town, or post office  Vancouver  2 Your social security number 122-87-4191		State B 3 Spouse's so	3C	ZIP code		or resid 9 Check I wages	here if you're "out of the country" and dent. See instructions here if you file Form 1040-NR and d as an employee subject to U.S. inco ding	idn't receive me tax

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

Form	1040	A	uto Worksheet	į		2023
Name <b>Mart</b> :	in Diko				122-87	ntification Number -4191
Description	on	Reside	ntial Rental	l- 5515 Bev		
			Form	/Schedule <u><b>E</b></u>	Unit numbe	r <u>1</u>
	Asse	et Listina				
		et Listing Date		Description		
Vehic		1 <u>09/14/22</u> <u>Au</u>	ito			
	cle 2					
Venic	cle 3					
	cle 4		Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4
Gene 1.	ral Information Total mileage		12,000	Vernicle 2	Vernoie 5	Vernete 4
2.		( 65.5 cents per mile)				
3.						
4.	Other mileage		11,700			
5.	Business use percentage		2.50 %	%	%	%
Actua	al Expenses					
6.	Parking fees and tolls	–				
7 a.	Gasoline	·····	6,000			
b.	Oil		450			
c.	Repairs		2,800			
d.						
e.	Tires	<u> </u>				
f.	Car washes	<b>–</b>				
g.		<del>-</del>	900			
h.		<u> </u>				
i.	Registration	<u> </u>				
j.	Licenses	<del>-</del>				
k.	Property taxes	<del>-</del>				
I.	Other vehicle expenses	=				
m.	Vehicle rentals (net of inclusion	n amount)				
8.	Total expenses. Add lines		10,150			
9.	Business use percentage f	rom line 5	2.50 %	%	%	%
10.	Business use portion of ac	ctual expenses	254			
11.	Depreciation		254			
12.		able. Add lines 6, 10 and 11_	<u> </u>			
	dard Mileage Rate Me		107			
13.		multiplied by applicable rate _	<u> </u>			
14. 15.	Parking fees and tolls from	s) multiplied by bus pct (line 5)				
16.		· · · · · · · · · · · · · · · · · · ·	197			
10.	Standard mileage rate	····· =	<u> </u>			
		Vehicle expense	Vehicle rentals	Vehicle of	depreciation Total a	llowable deduction
Allo	wable Deduction	197			,	197

## **Deduction for Business Use of Home - Simplified Method**

2023

Name

Taxpayer Identification Number

Martin	Diko	122-87-4191

1.10	II CIII DIKO	122	07 4131				
Desc	ription <u>Software</u>	Design & Development U.S. Form/Schedule C	Unit number <u>1</u>				
		Simplified Method Worksheet					
2.	Allowable square footage f	ross income limitation for the qualified business use. Do not enter more than 300 square feet.	-16,240 210				
3.	<b>a.</b> Maximum allowable an <b>b.</b> For daycare facilities r	mount	<b>\$</b> 5				
4	otherwise, enter 1.0  c.Multiply line 3a by the line 3b and enter result to 2 decimal places  4. Multiply line 2 by line 3c						
		g the simplified method. Enter the smaller of line 1 or line 4. If zero or less, enter -0	1,050				
6.	Enter the amounts, if ar a.Operating expenses	penses from years simplified method was not used ny, from the most recent Form 8829 or Business Use of Home Worksheet . ses and depreciation.					
		Daycare Facility Worksheet					
2.	Total hours of daycare use Total hours available for use Divide line 1 by line 2. Ent	se during the year er the result as a decimal amount here and on line 3b of the Simplified Method Worksheet					
		Area Adjustment Worksheet - Area Changed During Year					
1.	Complete lines 1a through	1n when the area of the qualified business use was used for part of the year or the area used chan	ged during the year.				
		Note. If qualified business use was less than 15 days in a month, enter -0-					
	(i) Month	Otherwise, use the lower of qualified business use area or Maximum area (300).	(ii) Area				
a.	January						
b.	February · · · · · · · · · · · · · · · · · · ·						
C.	March						
d.	•						
e.							
f.	00						
g.	I July						
h.	August						
i.	September						

November December

m. Add lines 1a through 1I, column (ii) n. Average monthly allowable square footage. Divide line 1m by 12. Enter the results on line 2 of the Simplified Method Worksheet.

ı	Net Operating Loss Worksheet 1		2023	
lam				L dentification Number
	Martin Diko		122-87	7-4191
	Net Operating Loss Calculation			
1	For individuals, subtract your standard deduction or itemized deductions from your adjusted gross			
	income and enter it here. For estates and trusts, enter taxable income increased by the total of the			
	charitable deduction, income distribution deduction, and exemption amount		. 1	-36,525
2	Nonbusiness capital losses before limitation. Enter as a positive number	15,85	9	•
3	Nonbusiness capital gains (without regard to any section 1202 exclusion)	15,85		
4	If line 2 is more than line 3, enter the difference; otherwise, enter -0-	·	0	
5	If line 3 is more than line 2, enter the difference;			
	otherwise, enter -0-			
6	Nonbusiness deductions (see instructions) 6			
7	Nonbusiness income other than capital gains			
	(see instructions)			
3	Add lines 5 and 7			
)	If line 6 is more than line 8, enter the difference; otherwise, enter -0-		. 9	0
)	If line 8 is more than line 6, enter the difference;			
	otherwise, enter -0 But do not enter more than			
	line 5 0			
1	Business capital losses before limitation. Enter as a positive number 11			
2	Business capital gains (without regard to any			
	section 1202 exclusion) 12			
3	Add lines 10 and 12			
4	Subtract line 13 from line 11. If zero or less, enter -0-		0	
5	Add lines 4 and 14			
6	Enter the loss, if any, from line 16 of Schedule D (Form 1040). (Estates			
	and trusts, enter the loss, if any, from line 15, column (3), of Schedule D			
	(Form 1041).) Enter as a positive number. If you do not have a loss on			
	that line (and do not have a section 1202 exclusion), skip lines 16 through			
	21 and enter on line 22 the amount from line 15			
7	Section 1202 exclusion. Enter as a positive number		17	
8	Subtract line 17 from line 16. If zero or less, enter -0-		0	
9	Enter the loss, if any, from line 21 of Schedule D (Form 1040). (Estates			
	and trusts, enter the loss, if any, from line 16 of Schedule D (Form 1041).)			
_	Enter as a positive number 19		0	
0	If line 18 is more than line 19, enter the difference; otherwise, enter -0-		_	0
1	If line 19 is more than line 18, enter the difference; otherwise, enter -0-			0
2	Subtract line 20 from line 15. If zero or less, enter -0-		. 22	U
3	NOL deduction for losses from other years. Enter as a positive number		23	
4	NOL. Combine lines 1, 9, 17, and 21 through 23. If the result is less than zero, you have a current year			
	If the result is zero or more, you <b>do not</b> have an NOL		. 24	-36,525

1	Schedule F - Profit or Loss from farming	1	
2	Form 4835 - Farm Rental eligible for income averaging	2	
3	Partnership and S corporation income or loss from farming activities	3	
4	Net ordinary gain or loss form sale of farming business property	4	
5	Capital gain/loss from sale of faming property	5	
6	Farm NOL. Combine lines 1 through 5. If the result is less than zero, you have a current year farm NOL.	6	
	If the result is zero or more, you do not have a Farm NOL.		
7	Farm NOL available for carryback: Lesser of farm NOL or amount of NOL for the year	7	
			-

Form 1040 AMT Net Operating Loss Worksheet 2 2023

Name Taxpayer Identification Number 122-87-4191

	An	IT Net Operating	Loss Ca	alculation			
1	Enter the amount from your 2023 Form 6251, line 1					1	-36,525
2	AMT Nonbusiness capital losses before limitation. Ent	er as a positive numb	er	2	15,859		•
3	AMT Nonbusiness capital gains (without regard to any	section 1202 exclusion	on)	3	15,859		
4	If line 2 is more than line 3, enter the difference; other	wise, enter -0-		4	0		
5	If line 3 is more than line 2, enter the difference;						
	otherwise, enter -0-	5	0				
6	Nonbusiness deductions (that are included in AMTI)			6			
7	Nonbusiness income other than capital gains						
	(that are included in AMTI)	7					
8	Add lines 5 and 7			8			
9	If line 6 is more than line 8, enter the difference; other	wise, enter -0				9	0
10	If line 8 is more than line 6, enter the difference;						
	otherwise, enter -0 But do not enter more than						
	line 5	10	0				
11	AMT Business capital losses before limitation. Enter a	s a positive number <sub>.</sub>		11			
12	AMT Business capital gains (without regard to any						
	section 1202 exclusion)	12					
13	Add lines 10 and 12			13			
14	Subtract line 13 from line 11. If zero or less, enter -0-			14	0		
15	Add lines 4 and 14			15			
16	Enter the loss, if any, from line 16 of Schedule D - AM	•					
	If you do not have a loss on that line (and do not have						
	lines 16 through 21 and enter on line 22 and enter on						
17	Section 1202 exclusion. Enter as a positive number					17	
18	Subtract line 17 from line 16. If zero or less, enter -0-			18	0		
19	Enter the loss, if any, from line 21 of Schedule D - AM	·		19	0		
20	If line 18 is more than line 19, enter the difference; oth	nerwise, enter -0-		20			0
21	If line 19 is more than line 18, enter the difference; oth					21	0
22	Subtract line 20 from line 15. If zero or less, enter -0-					22	<u> </u>
23	AMT NOL deduction for losses from other years. Ente	r as a positive amoun	[.			23	2,124
24	Total adjustment and certain preference items from Fo					24	-34,401
25	AMTNOL. Combine lines 1, 9, 17, and 21 through 24.	ii the result is zero or	more, you	uo not nave a	an AMTNOL.	25	-34,401

DIKOM 05/08/2024 11:42 AM	
Form <b>1040</b>	Net Operating Loss Carryover Information

Name Taxpayer Identification Number 122-87-4191

2023

Post-2017 N	let Operating	Loss Carryover	Information
-------------	---------------	----------------	-------------

	Regular	AMT
Carryover from prior years		
Excess business loss		
2023 Net operating loss	36,525	34,401
2023 Utilized on carryback / return		
Carryover to 2024	36,525 <sub>_</sub>	34,401

#### Pre-2018 Net Operating Loss Carryover Information

	Prior Year Carryover	<b>Prior Amounts Utilized</b>	Carryov	er to 2024
2003		2003	_	
2004		2004	2004	
2005		2005	2005	
2006		2006	2006	
2007		2007	2007	
2008		2008	2008	
2009		2009	2009	
2010		2010	2010	
2011		2011	2011	
2012		2012	2012	
2013		2013	2013	
2014		2014	2014	
2015		2015	2015	
2016		2016	2016	
2017		2017	2017	
		2023	2023	
			Total	

Pre-2018 AMT Net Operating Loss Carryover Information

	Prior Year Carryover	Prior Amounts Utilized	Carryover to 2024
2003 _	2003		•
2004 _	2004	2004	
2005 _	2005	2005	
2006	2006	2005	
2007	2007	2007	
2008	2008	2008	
2009	2009	2009	
2010	2010	2010	
2011 _	2011	2011	
2012	2012	2012	
2013	2013	2013	
2014	2014	2014	
2015	2015	2015	
2016	2016	2016	
2017	2017	2017	
	2023	2023	
		Total	

Form <b>1040</b>	Passive Activit	y Deduction Works	sheet		2023
ame Martin Diko				Taxpayer Ide	ntification Number
	ntal- 5515 Beverly	In Everett WA	Form		
Type Rental real	estate w/active			e Disposition	
	Regular Ta	ax Loss Calculations		•	
	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	•	nded Losses lext Year
Operating	12,294	7,991	20,285	<u> </u>	
Short-term capital loss				_	
Long-term capital loss					
28% rate capital loss Section 1231 loss				_	
Ordinary business loss				_	
Other Losses - 1040 Schedule 1				_	
Other Losses - 1040 Otherdie 1					
	Alternative Minir	num Tax Loss Calcula	tions		
	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized		nded Losses ext Year
Operating	10,550	7,611	18,161		
Short-term capital loss			•		
Long-term capital loss					
28% rate capital loss				_	
Section 1231 loss				_	
Ordinary business loss				_	
Other Losses - 1040 Schedule 1					

Form	1040	Passive Activity	MAGI Calculatio	n		2023	
Name					Taxpayer lo	dentification Number	
Mar	tin Diko				122-87	-4191	
1 Adjus	sted gross inco	me			1 <u> </u>	-36,525	
		ty income	2(a)				
2(b)		I security income					
2(c)							
2(d)		ions			2(d)		
3 Addit							
3(a)		ve activity losses	3(a)	20,285			
3(b)	Rental real es	tate loss allowed to real estate professionals	3(b)	,			
3(c)		om a PTP					
3(d)	Taxpayer's IR	A deduction	3(d)				
3(e)	Spouse's IRA						
3(f)	One-half self-	employment tax					
3(g)	Series EE & I	Bond Interest	3(g)				
3(h)	Employer's ac	loption assistance program exclusion amount	3(h)				
3(i)	Student loan	interest deduction	3(i)				
3(j)							
3(k)							
	Total additions	S			3(m)	20,285	
4 Modif	4 Modified adjusted gross income 4						

	chedule C   Qualified Business Income Calculation Worksh	eet	2023
50	Qualified Dubiffed Suited and Control Workship	CCL	2020
Name <b>Ma</b>	rtin Diko	Taxpayer Iden 122-87	tification Number
	Principle business or profession	Form/Schedule	e Unit
<u>S</u>	oftware Design & Development U.S.	С	1
1.	Schedule C, Line 31, Net profit or (loss)	1.	-16,240
	Additions for qualified business income:		
2.	Form 4797, Ordinary income	2.	
	Prior suspended losses utilized this year		
3.	Passive suspended losses	3.	
4.	At-Risk suspended losses	4.	
5.	Section 179 carryover	5.	
6.	Total additions to net profit or (loss). Add lines 2 through 5.	6.	
	Subtractions for qualified business income		
7.	Form 4797, Ordinary loss (includes share of Net section 1231 losses)	7.	
8.	Deductible portion of self-employment taxes	8.	
9.	Self-employed SEP, SIMPLE, and qualified plans	9.	
10.	Self-employed health insurance deduction	10.	
11.	Reserved	11.	
12.	Reserved	12.	
13.	Total subtraction to net profit or (loss). Add lines 7 through 12.	13.	
14.	Qualified business income for this activity. Line 1 plus line 6 less line 13.	14.	-16,240

	Beginnir	ng of Year	End of Year			·	
Carryovers:	Pre -2018	After 2017	Allowed loss	Pre -2018	After 2017	QBI Portion of	
Passive activity:	(A)	(B)	(C)	(D)	(E)	Allowed Losses	
Operating							
Form 4797, Part II							
Section 1231 loss							
At-Risk:							
Operating							
Form 4797, Part II							
Section 1231 loss							
Section 179							
Section 179 - COGS_							
Other:							
Section 179							
Section 179 - COGS							

Amount to Form 8995, line 3 or Schedule C (Form 8995-A), line 2 qualified business loss carryforward

So	chedule <b>E</b>	Qualified Business Income Calculation Worksheet		2023
Name <b>Ma</b>	rtin Diko			dentification Number 7-4191
	Property Descri		Form/Sched	lule Unit
R	esidentia	l Rental- 5515 Beverly Ln Ever	E	1
1.	Schedule F. Pa	ge 1, Net rental real estate income or (loss)	1.	-20,285
••	Concadio E, i a	go 1, Net formal four count income of (1000)	···· [	
	Additions for qu	alified business income:		
2.	Form 4797, Ord	linary income	2.	
	Prior year suspe	ended losses utilized this year:		
3.	Passive suspe	ended losses	3.	12,294
4.	At-Risk suspe	nded losses	4.	
5.	Section 179 e	xpense	-	
6.	Total additions t	o net profit or (loss). Add lines 2 through 5.		12,294
	Subtractions for	qualified business income		
7.	Form 4797, Ord	inary loss (includes share of net 1231 loss)	7.	
8.				
9.	December			
10.		n to net profit or (loss). Add lines 7 through 9.		
11.		ss income for this activity. Line 1 plus line 6 less line 10.	11	-7,991

	Beginnir	ng of Year		End	of Year	
Carryovers:	Pre -2018	After 2017	Allowed loss	Pre -2018	After 2017	QBI Portion of
Passive activity:	(A)	(B)	(C)	(D)	(E)	Allowed Losses
Operating		12,294	12,294			12,294
Form 4797, Part II						
Section 1231 loss						
At-Risk:						
Operating						
Form 4797, Part II						
Section 1231 loss						
Section 179 expense						
Other:						
Section 179 expense						
	_			_		

Amount to Form 8995, line 3 or Schedule C (Form 8995-A), line 2 qualified business loss carryforward

12,294

20. Total expenses. Add lines 5 through 19

21. Income or (loss) from rental or royalty properties.

Form <b>1040</b>		Rent and Roy	alty Reconcili	ation		2023
Name Martin Di	.ko				Taxpayer iden	tification number
Property description				Unit <b>1</b> Ov	vnership Percer	tage
		5 Beverly Ln Ev	verett WA	T, S, J Bu	siness Use Per	centage
Passive type: Ac	tive participa	tion		State Pe	rsonal Use Per	centage
1. Physical addre	ess:				Use Information	
Street	5515 Bev	erly Ln		Fair Ren	tal Days	<u>365</u>
City, state, z	<u>Everett</u>	W	A 98203	Personal	Use Days	
Property type:		Single Family	Residence	_ QJV		<del>–</del>
		Column A	Column B	Column	C ((	Column A - B - C)
Income:		Total Income/Expense	Nonbusiness Expenses	Vacation Home / Pers Use Exper	n sonal In	come / Expenses
3. Rents received	d	50 550	<u> </u>	Coo Expo.	11000	59,559
	eived					,
Expenses:						
•						
Auto		197				
T						
	el (total)	197				197
7. Cleaning and	maintenance	6,225				6,225
8. Commissions						,
9. Insurance		1,320				1,320
10. Legal and other	er professional fees					150
11. Management f	fees	4,176				4,176
Mortgage inter	rest from 1098					
Refinancing po	oints on 1098					
12. Mortgage inter	est paid to banks, etc.					
	ge interest					
Other interest						
Refinancing po	oints					
Qualified mort	gage insurance					
13. Other interest	(total)					
14. Repairs		7 0051				7,095
15. Supplies						
Real estate tax	xes					
All other taxes		5,626				
<b>16.</b> Taxes (total)		5,626				5,626
17. Utilities		3,788				3,788
	expense or depletion	32,748				32,748
19. Other (list)						
Outside Ma	ıntenance	6,225				6,225
Painting						
Placement 1						
Small Impro	ovement					
				1		

67,550

67,550 -7,991

### **Federal Statements**

5/8/2024 11:42 AM

### Form 1040NR, Dividend Income

Payer

, ayo.						
		Ordinary Dividends		Qualified Dividends	_	Section 199A Dividends
Fidelity	\$	945	Ċ	945	Ċ	
Robinhood Securities LLC	Y	943	Y	943	Ų	
Nobiliilood Seculicles LLC		26		24		
US Can Treaty Art XI		20		2 1		
		-1,139		-1,125		-2
Vanguard		•		•		
-		168		156		2
Total	\$_	0	\$_	0	\$	0

### **Federal Statements**

5/8/2024 11:42 AM

### Form 1040NR, Page 4 - Dividends Paid by U.S. Corporations

Tax <u>Rate</u>	Description	axable Amount
15.0	Vanguard # 18193	\$ 168
15.0	Fidelity #70558	945
15.0	Robinhood # 82308	 26
To	otal	\$ 1,139

### **Federal Statements**

5/8/2024 11:42 AM

# Software Design & Development U.S. Schedule C, Line 23 - Taxes and Licenses

Description	 Amount
Payroll taxes	\$ 2,112
Payroll taxes ESD	 
Total	\$ 2,112

#### Software Design & Development U.S.

### Schedule C, Line 26 - Wages

Description	 Amount
Wages	\$ 8,450
Total	\$ 8,450

### **Federal Statements**

### Residential Rental- 5515 Beverly Ln Everett WA Schedule E, Line 9 - Insurance

Description	_	Gross Amount	Business Use Percentage	_	Net Amount
Insurance (Rent, 1)	\$	1,320		\$	1,320
Total	\$	1,320		\$	1,320

## Residential Rental- 5515 Beverly Ln Everett WA Schedule E, Line 10 - Legal and Other Professional Fees

Description	 Gross Amount	Business Use Percentage	 Net Amount
Legal & professional (Rent, 1)	\$ 150		\$ 150
Total	\$ 150		\$ 150

## Residential Rental- 5515 Beverly Ln Everett WA Schedule E, Line 16 - Taxes

Description	 Gross Amount	Business Use Percentage	 Net Amount
RE Tax	\$ 5,626		\$ 5,626
Total	\$ 5,626		\$ 5,626

Activity Name Screen Unit # Definit Definit Definition	DIKOM Diko, Martin 122-87-4191		Federal Sta	Statements	nts			(D)	3/8/2024	5/8/2024 11:42 AM
Name   Name   Name   Name   Name   National   Nationa	For	rm 8582, Pass	ive Activity Inc	come al	nd Allowe	ed Losses				
Screen Unit #   Net Income   Net Loss   Unallowed Loss	Activity Name									
1 Rental— 5515 Beverly In \$ 7,991 \$ 12,294 \$ \$ 20,285 Sch E Part \$ 7,991 \$ 7,991 \$ 12,294 \$ \$ 0 \$ \$ 20,285	Screen Unit #	Current Year Net Income		Pric Unallo	or Year wed Loss	١	Ъ	Allowed Loss	Fo	orm ation
\$ 7,991 \$ 12,294 \$ 0 \$ 20,285	Rental- 5515 Beverly E 1	Ln	\ \	W.	12,294	<b>₩</b>	ر ا م	20,285	Sch E	1
				₩.	12,294	W-		20,285		

### **Federal Statements**

5/8/2024 11:42 AM

### NOL Worksheet 1, Line 6 - Nonbusiness Deductions

	Description	 Amount
Standard	Deduction	\$
Tota	al	\$ 0

DIKOM Diko, Martin

122-87-4191

FYE: 12/31/2023

### Federal Asset Report Software Design & Development U.S.

<u>Asset</u>	Description	Date In Service	Cost	Bus Sec <u>%</u> 179 Bonus	Basis for Depr PerConv Meth	Prior Current
	Depreciation: Home Office  Total Other Depreciation	1/01/21 _	0	10.00	0 0 HY	00
	Total ACRS and Other Depre	ciation =	0		0	00
Grand Totals Less: Dispositions and Transfers Less: Start-up/Org Expense Net Grand Totals			0 0 0		0 0 0 0	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$

DIKOM Diko, Martin

122-87-4191

FYE: 12/31/2023

### Federal Asset Report Residential Rental- 5515 Beverly Ln

<u>Asset</u>	Des	scription	Date In Service	Cost	Bus <u>%</u>	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
	MACRS: Building Land Improvements Appliances Imrprovements	;	10/15/22 10/15/22 10/15/22 10/15/22 =	194,405 133,525 6,000 294,630 628,560			194,405 133,525 6,000 294,630 628,560		1,473 6,676 300 2,232 10,681	7,069 12,685 2,280 10,714 32,748
Other 3	Depreciation: Land Total O	ther Depreciation	10/15/22 _	186,781 186,781			186,781 186,781	0 Land	0 0	0
	Total Ac	CRS and Other Depre	ciation =	186,781			186,781		0	0
Listed 1	Property: Auto		9/14/22 _	28,846 28,846	2.50		721 721	0 Memo	130 5	Std. Mileage 0
	Less: St	Totals ispositions and Transfe tart-up/Org Expense and Totals	ers - =	844,187 0 0 844,187			816,062 0 0 816,062		10,811 0 0 10,811	32,748 0 0 32,748

FYE: 12/31/2023

AMT Asset Report Software Design & Development U.S.

<u>Asset</u>	Description	Date In Service	Cost	Bus Sec <u>%</u> 179 Bonus	Basis for Depr PerConv Meth	Prior Current
	Depreciation: Home Office Total Other Depreciation	1/01/21 _	0 0	10.00	0 0 HY	
	Total ACRS and Other Depre	eciation =	0		0	00
	Grand Totals Less: Dispositions and Transt Net Grand Totals	fers _	0 0		0 0 0	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$

FYE: 12/31/2023

### AMT Asset Report Residential Rental- 5515 Beverly Ln

Asset	Description	Date In Service	Cost	Bus Sec <u>%</u> 179 Bonus	Basis for Depr	Per Conv Meth	Prior .	Current
5 Ap	ACRS:  nd Improvements  upliances  rprovements	10/15/22 10/15/22 10/15/22	133,525 6,000 294,630 434,155	- -	133,525 6,000 294,630 434,155	5 MQ150DB 27 MM S/L	5,007 225 2,232 7,464	12,852 1,733 10,714 25,299
Other De 2 Bu 3 La	epreciation: ilding nd Total Other Depreciation	10/15/22 10/15/22	0 0	- -	0 0	0 HY	0 0 -	0 0
	Total ACRS and Other Depr	eciation =	0	=	0			0
Listed Pr 1 Au		9/14/22 _	0	2.50	0	0 HY	0 5	Std. Mileage 0
	Grand Totals Less: Dispositions and Transf Net Grand Totals	fers	434,155 0 434,155	- -	434,155 0 434,155		7,464 0 7,464	25,299 0 25,299

FYE: 12/31/2023

# Depreciation Adjustment Report All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	Description	Tax	AMT	AMT Adjustments/ Preferences
MACR	RS Adju	ustments:				
E	1	4	Land Improvements	12,685	12,852	-167
E	1	5	Appliances	2,280	1,733	547
E	1	6	Imrprovements	10,714	10,714	0
				25,679	25,299	380

DIKOM Diko, Martin

05/08/2024 11:42 AM

122-87-4191

Future Depreciation Report FYE: 12/31/24

FYE: 12/31/2023 Software Design & Development U.S.

<u>Asset</u>	Description	Date In Service	Cost	Tax	AMT
Other 1	Depreciation:				
1	Home Office	1/01/21	0	0	0
	<b>Total Other Depreciation</b>		0	0	0
	Total ACRS and Other Depreciation		0	0	0
	Grand Totals		0	0	0

DIKOM Diko, Martin

05/08/2024 11:42 AM

122-87-4191

Future Depreciation Report FYE: 12/31/24

FYE: 12/31/2023 Residential Rental- 5515 Beverly Ln

<u>Asset</u>	Description	Date In Service	Cost	Tax	AMT
Prior M	IACRS:				
2 4 5 6	Building Land Improvements Appliances Imrprovements	10/15/22 10/15/22 10/15/22 10/15/22	194,405 133,525 6,000 294,630 628,560	7,069 11,417 1,368 10,714 30,568	0 11,567 1,212 10,714 23,493
Other 1	Depreciation:				
3	Land	10/15/22	186,781	0	0
	<b>Total Other Depreciation</b>		186,781	0	0
	Total ACRS and Other Depreciation		186,781	0	0
Listed ]	Property:				
1	Auto	9/14/22	28,846	0	0
			28,846		0
	Grand Totals		844,187	30,568	23,493

2022 Amounts

2023 Amounts

Carryover to 2024

Available to 2023

Form <b>1040</b>	Car	ryover Report		2023
ame <u>Martin Diko</u>				Taxpayer Identification Numbe 122-87-4191
Carryover Item  Minimum tax credit Investment interest Investment interest - AMT Short-term capital loss Short-term capital loss - AMT Long-term capital loss Long-term capital loss - AMT Residential energy efficient pro	Available to 2023	2023 Amoui	nts	Carryover to 2024
D.C. first-time homebuyer cred Tax credit bonds Qualified business income loss Qualified REIT income and PTI Excess business loss portion o	11,789	Generated	36,525	48,314
Nonrecaptured Section 12 2018 Amounts 2019 Amounts 2020 Amounts 2021 Amounts	31 Losses - Line 8, Form 479	7 AMT Nonr 2018 Amounts 2019 Amounts 2020 Amounts 2021 Amounts	recaptured Section 12	231 Losses - Line 8, Form 479

2022 Amounts

2023 Amounts

Carryover to 2024

Available to 2023

Forn	n '	104	0	1			S	Salarie	s & W	age	s Repo	ort						2023
Name																Taxpayer	Identific	ation Number
Ma	rt 78	in	Dik	.0		mployer										122-8		
		Mi ~		-EL (							Federa		iges 387	Federa				ec Wages
A B	_ ÷	MIC	ros	ort (	GTOD	al Res	sour	ces				±ο,	367		10,	205		46,387
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									Taxpay									
									Spouse	е		16.	387		10.	205		46,387
									Totals				<del></del>					
		Soc				are Wages		edicare	Withheld	S	oc Sec Tip	os	Allocat	ed Tips	Dep	Care Ben	Othe	er, Box 14
A		-	2	<u>876</u>		46,387	<u>'</u> –		673						_			
В		-											_		_			
C		-											_		_			
E		-													_			
F		-													_			
G		-											_		_			
Н		-											_		_	_		
ı																		
J		_											_					
K		-											_		_			
L		-											_		_			
M		-											_		_			
		-													_			
Tax Spo													_		_			
Tot		е.	2	876		46,387	7 -		673				_		_			
100	ais					•	= =								_			
	Sta	ate	Sta	te Wage	s S	tate Withh	eld		Name of	Loca	ality			Loca	l Wag	jes	Loc	al Withheld
A	_																	
B	_																	
D	_																	
E	_																	
F																		
G																		
Н																		
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K L	_																	
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Tax Spo							_							-				
Tot		· .					_							_				

DIKOM 05/08/2024 11:42 AM 2022 & 2023 Form **1040** Two Year Comparison Report - Schedule C Name Taxpayer identification number Martin Diko 122-87-4191 Unit Principal business or profession Software Design & Development U.S. 1 Income 2023 Differences 19,004 -19,0041. 1. Gross receipts or sales 2. Returns and allowances 2. 3. Cost of goods sold 19,004 -19,0044. 4. Gross profit 5. Other income 5. 19,004 -19,004 6. Gross income 6. Expenses 7. Advertising 8. Car and truck expenses 8. 9. Commissions and fees 9. 10. 11. Depletion 11. 12. Depreciation and section 179 expense deduction 13. Employee benefit programs 13. 14. Insurance (other than health) 14. 15. Interest - mortgage (paid to banks, etc.) 15. 16. 350 150 -200 17. Legal and professional services 17. 180 18. 180 18. Office expense 19. Pension and profit-sharing plans 19. 20. Rent or lease - vehicles, machinery, and equipment 20. 21. Rent or lease - other business property 21. 22. Repairs and maintenance 22. 23. Supplies (not included in cost of goods sold) 23. 24. Taxes and licenses ..... 5,394 2,112 -3,28224. 25. Travel 25. 26. Total meals and entertainment ..... 26. 26a. Nondeductible meals and entertainment 26a. 26b. Deductible meals and entertainment ..... 26b. 27. -2,714 28. Wages (less employment credits) 11,164 8,450 28. 29. Other expenses 3,060 5,348 2,288 29. **30.** Energy efficient commercial buildings deduction (Form 7205) 31. Total expenses 19,968 16,240 -3,728 Profit/ (loss) -16,240-15,27632. Tentative profit (loss) -964 33. Expenses for business use of home 33. 34. Net profit or (loss) -964 -16,240 -15,276

	Cost of Goods Sold			
35.	Inventory - Beginning of year	35.		
36.	Purchases	36.		
37.	Labor	37.		
38.	Materials	38.		
39.	Other costs	39.		
40.	Goods available for sale (sum of lines 34-38)	40.		
	Inventory - End of year	41.		

Form **1040** 

#### Two Year Comparison Report - Schedule E Page 1

Unit

1

2022 & 2023

Name **Martin Diko** 

Taxpayer identification number 122-87-4191

Property description

Residential Rental- 5515 Beverly Ln Everett WA

21. Vacation home excess casualty & depreciation carryover to next yr 21.

2023 Differences 2022 Income 7,797 59,559 51,762 1. Total rents and royalties received **Expenses** 2. Advertising 2. 3. Auto and travel 197 -116 313 3. 6,225 6,225 4. Cleaning and maintenance ..... 4. 5. 197 1,320 1,123 6. Insurance 6. 7. Legal and other professional fees 150 150 7. 8. Management fees 4,176 624 3,552 8. 9. Mortgage interest paid to banks, etc. 9. 10. 10. 7,095 7,095 11. Repairs 11. Supplies 12. 1,187 5,626 4,439 13. 3,788 32,748 3,788 14. 10,681 22,067 15. Depreciation expense or depletion 15. 7,089 6,225 -864 16. Other expenses 16. 20,091 67,550 47,459 17. 17. Total expenses Profit/(loss) -12,294 -7,991 4,303 Income or (loss) from rental real estate or royalty properties 18. 19. Deductible rental real estate loss -20,285 -20,28519. Carryover 20. Vacation home operating expenses carryover to next year 20.

Fom <b>1040</b>	Tax Return	Tax Return History Report - Page	age 1		2023
Name Martin Diko			Taxpayer Identification Number	fication Number	122-87-4191
	2020	2021	2022	2023	2024 Projected
Filing Status	SGL	SGL	SGL	SGL	SGI
Salaries and wages	171,154	195,258	231,641	46,387	46,387
Interest income			9		
Dividend income	104	478	894		
Business income/loss		-10,825	-964	-16,240	-16,240
Capital gains/losses	3,273	55,700	-35		
Other gains/losses					
IRA distributions, pensions, annuities					
Rent, royalty, farm rental income				-20,285	-20,285
Partnership/S corp income					*
Estate or trust income					*
Farm income/loss					
Other income/loss	13			-46,387	-46,387
Total income	174,544	240,611	231,542	-36,525	-36,525
Total adjustments					
Adjusted gross income	174,544	240,611	231,542	-36,525	-36,525
Allowable itemized deductions	21,691	33,354	10,200		
Standard deduction	12,400	12,550	12,950		
Itemized or standard deduction taken	21,691	33,354	12,950		
Exemptions					
Taxable income before Qual Bus Inc Ded	152,853	207,257	218,592		-36,525
Qual Bus Inc Ded					
Taxable income	152,853	207,257	218,592		
* Amts in the projected col generate from the federal Tax Projection Wrk (TPW); th	ax Projection Wrk (TPW); this field is inc	is field is incl in the total Sch E income/loss amt on the TPW.	s amt on the TPW.		
Total income	E E		Adjusted a	Adiusted aross income	

\$120,000 ₽ \$240,000 \$120,000 \$273,000 \$182,000 \$91,000 2024 (Projected) 2023 Itemized or standard deduction taken 2022 i otal income 2021 2020 \$240,000 \$120,000 ₽ \$28,000 \$14,000 \$42,000 \$120,000

2024 (Projected)

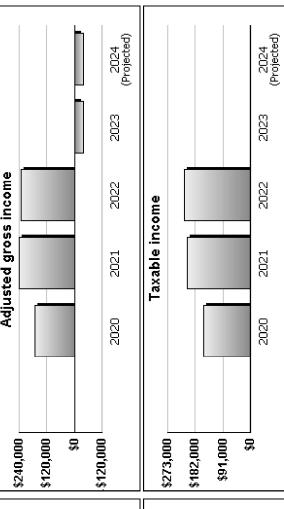
2023

2022

2021

2020

\$



	<u> </u>	lax Keturn History Keport - Page 2	t - Page 2		2023
Name <b>Martin Diko</b>			Taxpayer Iden	Taxpayer Identification Number	122-87-4191
	2020	2021	2022	2023	2024 Projected
Taxable income	152,8	853 207,257	218,592		
Tax on taxable income and Form 8962	30,7	,755 41,769	50,084		
Alternative minimum tax					
Total credits					
Net tax liability	30,7	755 41,769	50,084		
Self-employment taxes					
Other taxes		1,675	498	171	171
Total tax	30,7	755 43,444	50,582	171	171
Income tax withheld	34,1	175 40,470	48,641	10,205	10,205
Estimated tax payments					
Other payments			1,941		
Total payments	34,1	175 40,470	50,582	10,205	10,205
Total due/-refund	-3,4	420 2,974		-10,034	-10,034
Penalties and interest					
Net tax due/-refund	4:4:	420 2,974		-10,034	-10,034
Refund applied to estimated tax payments					
Refund received	7,4	420		-10,034	
Marginal tax rate	. 72	32.0%	35.0%	10.0%	10.0%
Effective tax rate	.02	0.0% 21.0%	23.0%	%	%

