

GOLDEN STATE ACCOUNTING INC.  
1221 BRIDGEWAY SUITE 2  
SAUSALITO, CA 94965  
415-331-9900

May 31, 2024

Philip and Mary Smith  
21325 Back Drive  
Smith, CA 95713

Dear Philip and Mary,

Your 2023 Federal Individual Income Tax return will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879 - IRS e-file Signature Authorization. No tax is payable with the filing of this return. The refund of \$1,211 will be directly deposited into your checking account.

Your 2023 California Individual Income Tax Return will be electronically filed with the Franchise Tax Board upon receipt of a signed Form 8879 - California e-file Signature Authorization. There is a balance due of \$534.

Mail your California payment voucher on or before April 15, 2024 and make your check payable to:

FRANCHISE TAX BOARD  
P.O. BOX 942867  
SACRAMENTO, CA 94267-0008

Your 2024 estimated tax payment schedule is listed below. If not paying electronically, mail your payments to the address shown on your estimated tax payment vouchers.

Due Date	Federal
4/15/24	\$ 910
6/17/24	910
9/16/24	910
1/15/25	910
	-----
	\$ 3,640

Please be sure to call if you have any questions.

Sincerely,

David Haase, CPA

## PHILIP SMITH AND MARY

	2023	2022	DIFF
<b>INCOME</b>			
TAXABLE IRA DISTRIBUTIONS.....	27,360	0	27,360
TAXABLE PENSIONS.....	12,317	0	12,317
TAXABLE SOCIAL SECURITY BENEFITS.....	41,002	26,055	14,947
BUSINESS INCOME.....	-11,965	0	-11,965
RENT, ROYALTY, PARTNERSHIP, SCORP, TRUST	46,796	45,399	1,397
TOTAL INCOME.....	115,510	71,454	44,056
<b>ADJUSTMENTS TO INCOME</b>			
TOTAL ADJUSTMENTS.....	0	0	0
ADJUSTED GROSS INCOME.....	115,510	71,454	44,056
<b>ITEMIZED DEDUCTIONS</b>			
TAXES.....	9,873	9,137	736
CONTRIBUTIONS.....	0	115	-115
TOTAL ITEMIZED DEDUCTIONS.....	9,873	9,252	621
<b>TAX COMPUTATION</b>			
STANDARD DEDUCTION.....	30,700	28,700	2,000
LARGER OF ITEMIZED OR STANDARD DEDUCTION	30,700	28,700	2,000
QUALIFIED BUSINESS INCOME DEDUCTION.....	6,966	8,551	-1,585
TAXABLE INCOME.....	77,844	34,203	43,641
TAX BEFORE CREDITS.....	8,899	3,696	5,203
<b>CREDITS</b>			
RESIDENTIAL ENERGY CREDITS.....	147	3,696	-3,549
CLEAN VEHICLE CREDIT.....	7,500	0	7,500
TOTAL CREDITS.....	7,647	3,696	3,951
TAX AFTER CREDITS.....	1,252	0	1,252
<b>OTHER TAXES</b>			
TOTAL TAX.....	1,252	0	1,252
<b>PAYMENTS &amp; REFUNDABLE CREDITS</b>			
FEDERAL INCOME TAX WITHHELD.....	2,463	0	2,463
TOTAL PAYMENTS.....	2,463	0	2,463
<b>REFUND OR AMOUNT DUE</b>			
AMOUNT OVERPAID.....	1,211	0	1,211
AMOUNT REFUNDED TO YOU.....	1,211	0	1,211
AMOUNT YOU OWE.....	0	0	0
<b>TAX RATES</b>			
ORDINARY INCOME TAX BRACKET.....	12.0%	12.0%	0.0%
EFFECTIVE TAX RATE.....	1.6%	0.0%	1.6%

## PHILIP SMITH AND MARY

	2023	2022	DIFF
<b>FEDERAL ADJUSTED GROSS INCOME</b>			
FEDERAL ADJUSTED GROSS INCOME.....	115,510	71,454	44,056
<b>CALIFORNIA SUBTRACTIONS</b>			
SOCIAL SECURITY BENEFITS.....	41,002	26,055	14,947
TOTAL SUBTRACTIONS FROM FEDERAL AGI.....	41,002	26,055	14,947
<b>ADJUSTED GROSS INCOME</b>			
ADJUSTED GROSS INCOME.....	74,508	45,399	29,109
<b>ITEMIZED DEDUCTIONS</b>			
ITEMIZED DEDUCTION BEFORE LIMITATION.....	8,411	8,202	209
CALIFORNIA ITEMIZED DEDUCTIONS.....	8,411	8,202	209
CALIFORNIA STANDARD DEDUCTION.....	10,726	10,404	322
<b>TAX COMPUTATION</b>			
TOTAL TAXABLE INCOME.....	63,782	34,995	28,787
TAX.....	1,356	498	858
EXEMPTION CREDITS.....	576	560	16
NET TAX.....	780	0	780
<b>PAYMENTS</b>			
CALIFORNIA INCOME TAX WITHHELD.....	246	0	246
TOTAL PAYMENTS.....	246	0	246
<b>REFUND OR AMOUNT DUE</b>			
AMOUNT OVERPAID.....	0	0	0
AMOUNT YOU OWE.....	534	0	534
<b>TAX RATES</b>			
MARGINAL TAX RATE.....	4.0%	2.0%	2.0%
EFFECTIVE TAX RATE.....	1.2%	0.0%	1.2%

2023

FINANCIAL TRANSACTION SUMMARY

PAGE 1

PHILIP SMITH AND MARY

**FEDERAL**

**2023 FEDERAL FORM 1040 ELECTRONIC FINANCIAL TRANSACTION INFORMATION.**

THE TAXPAYER WILL RECEIVE A REFUND OF \$1,211 WHICH WILL BE DEPOSITED  
DIRECTLY INTO THE FOLLOWING ACCOUNT.

NAME OF BANK: BANK OF AMERICA  
ROUTING TRANSIT NUMBER: 121000358  
ACCOUNT NUMBER: \*\*\*\*\*1383  
ACCOUNT TYPE: CHECKING

Client

Philip Smith and Mary

**California Disclosure Statements****Statement: Use of information**

By using a computer system and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's tax return to the California Franchise Tax Board, as applicable by law.

An ERO shall not disclose or use any tax return information for a purpose other than preparing, assisting in preparing, obtaining or providing services in connection with the preparation of tax returns. Disclosure among accepted participants in California's e-file Program for preparing and transmitting the return information is permissible.

**Statement: Refund Expectations**

California Franchise Tax Board is providing a URL about refund processing. Industry partners must use this URL or other method prescribed by the jurisdiction in all products. The messages must be shown to end-users within the software in a way to maximize the likelihood the message is read. For more information, please visit

<https://www.ftb.ca.gov/refund/index.asp>

**Statement: Driver's License/ID Card Expectations**

California driver's license or state ID card information is not required to e-file a California tax return and tax returns will not be rejected if this information isn't provided. Providing this information will help expedite the tax return process time, as well as combat stolen identity tax fraud. For more information, please visit

<https://www.ftb.ca.gov/file/ways-to-file/online/help-with-filing-online.html>

## PHILIP SMITH AND MARY

## FORMS NEEDED FOR THIS RETURN

FEDERAL: 1040, SCH 1, SCH 3, 1040-ES, SCH C, SCH E, 4562, 5695, 8829, 8879  
 8936, SCH A (8936), 8995  
 CALIFORNIA: 540, SCH CA, 3582, E-FILE INSTRUCTIONS, E-FILE CONSENT  
 E-FILE FORM 8879

## PDF ATTACHMENTS

FEDERAL

QBI RENTAL REAL ESTATE SAFE HARBOR STATEMENT, SAFE HARBOR STATEMENT FOR SCH E - ALOT

## TAX RATES

	<u>MARGINAL</u>	<u>EFFECTIVE</u>
FEDERAL	12.0%	1.6%
CALIFORNIA	4.0%	1.2%

## CARRYOVERS TO 2024

FEDERAL CARRYOVERS

BUS USE OF HOME OPERATING EXPENSES	4,769.
BUS USE OF HOME DEPR/CASUALTY	3,638.
AMT BUS USE OF HOME OPERATING EXP	4,971.
AMT BUS USE OF HOME DEPR/CASUALTY	3,638.
DEDUCTIBLE STATE AND LOCAL TAXES	534.

CALIFORNIA CARRYOVERS

BUS USE OF HOME OPERATING EXPENSES	4,769.
BUS USE OF HOME DEPR/CASUALTY	3,638.
AMT BUS USE OF HOME OPERATING EXP	4,971.
AMT BUS USE OF HOME DEPR/CASUALTY	3,638.

## ESTIMATES

## FEDERAL ESTIMATES

	<u>ESTIMATE</u>	<u>OVERPAYMENT</u>	<u>BALANCE</u>
4/15/24	910.	0.	910.
6/17/24	910.	0.	910.
9/16/24	910.	0.	910.
1/15/25	910.	0.	910.
TOTAL	\$ 3,640.	\$ 0.	\$ 3,640.

PHILIP SMITH AND MARY

**THE TAXPAYER'S 2023 FEDERAL TAX RETURN IS NOT FINISHED UNTIL YOU COMPLETE THE FOLLOWING INSTRUCTIONS.**

## **PRIOR TO TRANSMISSION OF THE RETURN**

### **FORM 1040**

THE TAXPAYER(S) SHOULD REVIEW THEIR 2023 FEDERAL INDIVIDUAL INCOME TAX RETURN ALONG WITH ANY ACCOMPANYING SCHEDULES AND STATEMENTS.

### **PAPERLESS E-FILE**

THE TAXPAYER(S) SHOULD READ, SIGN AND DATE THE FORM 8879.

### **OVERPAYMENT**

THE TAXPAYER(S) WILL RECEIVE A REFUND OF \$1,211.

**THE INTERNAL REVENUE SERVICE WILL DEPOSIT THE REFUND OF \$1,211 DIRECTLY INTO THE FOLLOWING ACCOUNT:**

NAME OF BANK: BANK OF AMERICA  
ROUTING TRANSIT NUMBER: \*\*\*\*\*0358  
ACCOUNT NUMBER: \*\*\*\*\*1383  
ACCOUNT TYPE: CHECKING

**THE TAXPAYER(S) SHOULD DOUBLE CHECK THE BANK INFORMATION.**

## **AFTER TRANSMISSION OF THE RETURN**

### **RECEIVE ACKNOWLEDGEMENT OF YOUR E-FILE TRANSMISSION STATUS.**

WITHIN SEVERAL HOURS, ACCESS PROCONNECT TAX ONLINE AND GET YOUR FIRST ACKNOWLEDGEMENT (ACK) THAT PROCONNECT TAX ONLINE HAS RECEIVED YOUR TRANSMISSION FILE.

ACCESS PROCONNECT TAX ONLINE AGAIN AFTER 24 AND THEN 48 HOURS TO RECEIVE YOUR FEDERAL ACKNOWLEDGEMENTS.

**KEEP A SIGNED COPY OF FORM 8879 IN YOUR FILES FOR 3 YEARS.**

### **DO NOT MAIL:**

FORM 8879

PHILIP SMITH AND MARY

THE TAXPAYER'S 2023 CALIFORNIA TAX RETURN IS NOT FINISHED UNTIL YOU COMPLETE THE FOLLOWING INSTRUCTIONS.

**PRIOR TO TRANSMISSION OF THE RETURN****FORM 540**

THE TAXPAYER(S) SHOULD REVIEW THEIR 2023 CALIFORNIA INDIVIDUAL INCOME TAX RETURN ALONG WITH ANY ACCOMPANYING SCHEDULES AND STATEMENTS.

**CA FORM 8453**

IT IS NOT NECESSARY FOR THE TAXPAYER(S) TO SIGN CA FORM 8453 WHEN USING A PAPERLESS E-FILE PIN.

**PAPERLESS E-FILE**

THE TAXPAYER(S) SHOULD READ AND, IF APPLICABLE, SIGN THE E-FILE SIGNATURE/CONSENT AUTHORIZATION.  
THE TAXPAYER(S) SHOULD READ, SIGN AND DATE THE FORM 8879.

**BALANCE DUE**

THERE IS A BALANCE DUE IN THE AMOUNT OF \$534.

**AFTER TRANSMISSION OF THE RETURN****RECEIVE ACKNOWLEDGEMENT OF YOUR E-FILE TRANSMISSION STATUS.**

WITHIN SEVERAL HOURS, ACCESS PROCONNECT TAX ONLINE AND GET YOUR FIRST ACKNOWLEDGEMENT (ACK) THAT PROCONNECT TAX ONLINE HAS RECEIVED YOUR TRANSMISSION FILE.

ACCESS PROCONNECT TAX ONLINE AGAIN AFTER 24 AND THEN 48 HOURS TO RECEIVE YOUR CALIFORNIA ACKNOWLEDGEMENTS.

**KEEP A SIGNED COPY OF FORM 8879 IN YOUR FILES FOR 4 YEARS.**

**DO NOT MAIL:**

E-FILE SIGNATURE/CONSENT AUTHORIZATION  
FORM 8879

**MAIL CA FORM 3582 (E-FILE) AND PAYMENT TO:**

FRANCHISE TAX BOARD  
P.O. BOX 942867  
SACRAMENTO, CA 94267-0008

**CAUTION**

DO NOT MAIL CA FORM 3582 (E-FILE) UNTIL THE CALIFORNIA FRANCHISE TAX BOARD HAS ACCEPTED FORM 540.

EXCEPTION: MAIL CA FORM 3582 (E-FILE) WITH PAYMENT BY THE DUE DATE, EVEN IF THE RETURN IS STILL PENDING, TO AVOID LATE PAYMENT PENALTIES AND INTEREST CHARGES.



2024

## Record of Estimated Tax Payments

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PHILIP SMITH AND MARY

## Federal

Payment Number	Date Due	2023 Overpayment Credit Applied	Balance Due	Check or money order number or credit card confirmation number	Amount Paid (do not include any credit card convenience fee)	Date paid
1	4/15/24		910.			
2	6/17/24		910.			
3	9/16/24		910.			
4	1/15/25		910.			
5						
6						
7						
8						
Total.....			3,640.			

State: \_\_\_\_\_

## State

Payment Number	Date Due	2023 Overpayment Credit Applied	Balance Due	Check or money order number or credit card confirmation number	Amount Paid (do not include any credit card convenience fee)	Date paid
1						
2						
3						
4						
5						
6						
7						
8						
Total.....						

This document is for your records. Please use it to record your estimated tax payments and bring it with you for reference in the preparation of your 2024 tax return.

## PHILIP SMITH AND MARY

## PENSION AND ANNUITIES SCHEDULE

<u>SPOUSE - PAYER</u>	<u>TOTAL RECEIVED</u>	<u>TAXABLE AMOUNT</u>	<u>FEDERAL W/H</u>	<u>STATE W/H</u>
LINCOLN NATL LIFE INS CO	12,317.	12,317.	2,463.	246.
GRAND TOTAL	<u>12,317.</u>	<u>12,317.</u>	<u>2,463.</u>	<u>246.</u>

## IRA DISTRIBUTION SCHEDULE

<u>SPOUSE - PAYER</u>	<u>TOTAL RECEIVED</u>	<u>TAXABLE AMOUNT</u>	<u>FEDERAL W/H</u>	<u>STATE W/H</u>
BANK OF AMERICA	6,513.	6,513.		
NAVY FEDERAL CREDIT UNION	20,847.	20,847.		
GRAND TOTAL	<u>27,360.</u>	<u>27,360.</u>	<u>0.</u>	<u>0.</u>

## SOCIAL SECURITY BENEFITS WORKSHEET (PUB 915) (FORM 1040 OR 1040-SR, LINES 6

1. SOCIAL SECURITY BENEFITS (SSA-1099, BOX 5)	48,238.
2. ENTER ONE-HALF OF LINE 1	24,119.
3. COMBINE AMOUNTS FROM FORM 1040 OR 1040-SR, LINES 1Z, 2B, 3B, 4B, 5B 7, AND 8 (ADD BACK EXCLUDABLE INTEREST FROM FORM 8815)	74,508.
4. ENTER THE AMOUNT FROM FORM 1040 OR 1040-SR, LINE 2A	0.
5. ENTER THE TOTAL OF ANY EXCLUSIONS/ADJUSTMENTS	0.
6. COMBINE LINES 2, 3, 4 AND 5	98,627.
7. ENTER THE AMOUNTS FROM FORM SCHEDULE 1, LINES 11 THROUGH 20, AND 23 AND 25	0.
8. SUBTRACT LINE 7 FROM LINE 6 (NOT LESS THAN 0)	98,627.
9. THRESHOLD FOR YOUR FILING STATUS	32,000.
10. SUBTRACT LINE 9 FROM LINE 8 (NOT LESS THAN 0)	66,627.
11. ADDITIONAL THRESHOLD FOR YOUR FILING STATUS	12,000.
12. SUBTRACT LINE 11 FROM LINE 10 (NOT LESS THAN 0)	54,627.
13. ENTER THE SMALLER OF LINE 10 OR LINE 11	12,000.
14. ENTER ONE-HALF OF LINE 13	6,000.
15. ENTER THE SMALLER OF LINE 2 OR LINE 14	6,000.
16. MULTIPLY LINE 12 BY 85% (.85)	46,433.
17. ADD LINES 15 AND 16	52,433.
18. MULTIPLY LINE 1 BY 85% (.85)	41,002.
19. TAXABLE SOCIAL SECURITY BENEFITS (THE SMALLER OF LINE 17 OR LINE 18)	<u>41,002.</u>

## QUALIFIED BUSINESS INCOME

TRADE OR BUSINESS NAME:

A/C CONSTRUCTION

TAXPAYER IDENTIFICATION NUMBER:

BUSINESS INCOME.....	-11,965.
QUALIFIED BUSINESS INCOME	<u>-11,965.</u>

## PHILIP SMITH AND MARY

## QUALIFIED BUSINESS INCOME (CONTINUED)

TRADE OR BUSINESS NAME: 27+29 PERALTA AVE  
 TAXPAYER IDENTIFICATION NUMBER:  
 BUSINESS INCOME..... 46,796.  
 QUALIFIED BUSINESS INCOME 46,796.

## TAX BRACKET WORKSHEET (FORM 1040, 1040-SR, OR 1040-NR, LINE 16)

ORDINARY INCOME RATES (TAX TABLE/TAX COMPUTATION WKS)	INCOME	TAX
10% ORDINARY TAX BRACKET (\$0 - \$22,000).....	\$ 22,000.	\$ 2,200.
12% ORDINARY TAX BRACKET (\$22,001 - \$89,450).....	55,825.	6,699.
TAXABLE INCOME	\$ 77,844.	
TAXABLE INCOME MIDPOINT USED ON TAX TABLE	\$ 77,825.	
TOTAL TAX USING ORDINARY INCOME RATES		\$ 8,899.

\* ORDINARY INCOME WOULD HAVE TO INCREASE BY OVER \$11,606  
 TO BEGIN BEING TAXED IN THE NEXT 22% TAX BRACKET (\$89,451 - \$190,750)

## FEDERAL INCOME TAX WITHHELD

LINCOLN NATL LIFE INS CO  
 TOTAL 2,463.  
 2,463.

## NET NONFARM PROFIT OR (LOSS) (SCHEDULE SE, LINE 2)

	TAXPAYER
SCHEDULE C	-11,965.
SCHEDULE E, PAGE 2 (FROM SCH. K-1)	0.
OTHER INCOME (SCHEDULE 1, LINE 8)	0.
SECTION 1256 CONTRACTS	0.
MINISTER WAGES	0.
MINISTER HOUSING ALLOWANCE	0.
MINISTER PARSONAGE - UTILITIES	0.
EMPLOYEE BUSINESS EXPENSES	0.
NET NONFARM INCOME ADJUSTMENT	0.
TOTAL NET NONFARM PROFIT OR (LOSS)	-11,965.

FORM 5695, LINE 14  
CREDIT LIMIT WORKSHEET

1. ENTER THE AMOUNT FROM FORM 1040, 1040-SR, OR 1040-NR, LINE 18 8,899.
2. ENTER THE AMOUNTS FROM SCHEDULE 3, LINE 1, 2, 3, 4, 6L, AND SCHEDULE R, LINE 22. 0.

## PHILIP SMITH AND MARY

**FORM 5695, LINE 14 (CONTINUED)**  
**CREDIT LIMIT WORKSHEET**

3. ENTER THE AMOUNT FROM FORM 5695, LINE 32	0.
4. ENTER THE AMOUNT FROM FORM 1040, LINE 19 (OR SCHEDULE 8812 CREDIT LIMIT WORKSHEET B, LINE 14)	0.
5. ENTER THE AMOUNT FROM FORM 8396, LINE 9	0.
6. ENTER THE AMOUNT FROM FORM 8839, LINE 16	0.
7. ENTER THE AMOUNT FROM FORM 8859, LINE 3	0.
8. ENTER THE AMOUNT FROM FORM 8936, LINE 18	0.
9. ENTER THE AMOUNT FROM FORM 8936, LINE 13	<u>7,500.</u>
10. ADD LINES 2 THROUGH 9	<u>7,500.</u>
11. SUBTRACT LINE 10 FROM LINE 1. ALSO ENTER THIS AMOUNT ON FORM 5695, LINE 14. IF ZERO OR LESS, ENTER -0- HERE AND ON FORM 5695, LINES 14 AND 15.	<u><u>1,399.</u></u>

PHILIP SMITH AND MARY

**VEHICLE EXPENSES - SCHEDULE C  
ELECTRICAL CONTRACTOR**

FORD T150  
TRUCK

1. DATE PLACED IN SERVICE	11/18/15
2. TOTAL MILEAGE	12,000
3. BUSINESS MILEAGE	8,000
4. BUSINESS USE PERCENTAGE (DIVIDE LINE 3 BY LINE 2)	0.6667

## STANDARD MILEAGE RATE:

5. MULTIPLY LINE 3 BY 0.655 CENTS (65.5)	5,240.
DEPR. PORTION OF MILEAGE (28 CENTS PER MILE)	2,240.
OPER. EXP. PORTION OF MILEAGE (37.5 CENTS PER MILE)	3,000.

## ACTUAL EXPENSES:

6. GASOLINE, LUBE AND OIL	1,814.
7. REPAIRS	49.
8. TIRES	
9. INSURANCE	921.
10. MISCELLANEOUS	
11. AUTO LICENSE (EXCEPT PERSONAL PROPERTY TAXES)	244.
12. VALUE OF EMPLOYER-PROVIDED VEHICLE	
13. VEHICLE RENT OR LEASE (LESS INCLUSION)	
14. ADD LINES 6 THROUGH 13	3,028.
15. MULTIPLY LINE 14 BY LINE 4	2,019.
16. DEPRECIATION AND SECTION 179 DEDUCTION	
17. ADD LINES 15 AND 16	2,019.

## TOTAL VEHICLE EXPENSES:

ACTUAL EXP

18. ENTER LINE 5 OR LINE 17	2,019.
19. PARKING FEES AND TOLLS	
20. ADD LINES 18 AND 19	2,019.

## VEHICLE EXPENSE ALLOCATION:

21. CAR AND TRUCK EXPENSES	2,019.
22. DEPRECIATION	
23. VEHICLE RENT OR LEASE PAYMENTS	
24. ADD LINES 21, 22, AND 23	2,019.
25. INTEREST EXPENSE (BUSINESS PORTION)	
26. TAXES AND LICENSES (BUSINESS PORTION)	69.
27. PERSONAL PROPERTY TAXES (SCHEDULE A)	35.

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
SCHEDULE C - A/C CONSTRUCTION										
AUTO / TRANSPORT EQUIPMENT										
9	FORD T150 TRUCK	11/18/15		36,138	66.67		36,138	200DB HY	5	0
	TOTAL AUTO / TRANSPORT EQUI			36,138		0	36,138			0
	TOTAL DEPRECIATION			36,138		0	36,138			0
SCHEDULE E - 27+29 PERALTA AVE										
AMORTIZATION										
7	REFINANCE COSTS	5/29/13		1,437			463	S/L	30	48
	TOTAL AMORTIZATION			1,437		0	463			48
BUILDINGS										
1	BUILDING	9/01/96		132,500			121,861	S/L MM	27.5	4,818
	TOTAL BUILDINGS			132,500		0	121,861			4,818
FURNITURE AND FIXTURES										
2	APPLIANCES	9/01/96		3,975			3,975	200DB HY	7	0
5	REFRIGERATOR	7/01/01		862			862	200DB HY	7	0
	TOTAL FURNITURE AND FIXTURE			4,837		0	4,837			0
IMPROVEMENTS										
4	IMPROVEMENTS	2/01/98		7,586			6,622	S/L MM	27.5	276
6	ROOF	6/01/02		10,575			7,901	S/L MM	27.5	385
	TOTAL IMPROVEMENTS			18,161		0	14,523			661
LAND										
3	LAND	9/01/96		27,500						0
	TOTAL LAND			27,500		0	0			0
	TOTAL DEPRECIATION			182,998		0	141,221			5,479

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
BUSINESS USE OF HOME - A/C CONSTRUCTION										
BUILDINGS										
8	HOME OFFICE BLDG	1/01/19		450,000	8.58		4,255	S/L MM	39	990
	TOTAL BUILDINGS			450,000		0	4,255			990
IMPROVEMENTS										
10	WORKSHOP	4/19/21		40,000	8.58		172	S/L MM	39	88
11	WATER WELL	5/15/22		13,000	8.58		18	S/L MM	39	29
12	FRONT PORCH	7/01/22		7,500	8.58		8	S/L MM	39	17
	TOTAL IMPROVEMENTS			60,500		0	198			134
	TOTAL DEPRECIATION			510,500		0	4,453			1,124
	GRAND TOTAL AMORTIZATION			1,437		0	463			48
	GRAND TOTAL DEPRECIATION			729,636		0	181,812			6,603

12/31/23

## 2023 FEDERAL DEPRECIATION SCHEDULE

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
SCHEDULE C - A/C CONSTRUCTION																	
AUTO / TRANSPORT EQUIPMENT																	
9	FORD T150 TRUCK **	11/18/15		36,138	66.67						24,093	36,138	200DB HY	5		0	
TOTAL AUTO / TRANSPORT EQUIP				36,138		0	0	0	0	0	24,093	36,138					0
TOTAL DEPRECIATION				36,138		0	0	0	0	0	24,093	36,138					0
SCHEDULE E - 27+29 PERALTA AVE																	
AMORTIZATION																	
7	REFINANCE COSTS	5/29/13		1,437							1,437	463	S/L	30		48	
TOTAL AMORTIZATION				1,437		0	0	0	0	0	1,437	463					48
BUILDINGS																	
1	BUILDING **	9/01/96		132,500							132,500	121,861	S/L	MM	27.5	.03636	4,818
TOTAL BUILDINGS				132,500		0	0	0	0	0	132,500	121,861					4,818
FURNITURE AND FIXTURES																	
2	APPLIANCES	9/01/96		3,975							3,975	3,975	200DB HY	7		0	
5	REFRIGERATOR	7/01/01		862							862	862	200DB HY	7		0	
TOTAL FURNITURE AND FIXTURE				4,837		0	0	0	0	0	4,837	4,837					0



12/31/23

## 2023 FEDERAL DEPRECIATION SCHEDULE

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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
IMPROVEMENTS																	
4	IMPROVEMENTS **	2/01/98		7,586							7,586	6,622	S/L	MM	27.5	.03637	276
6	ROOF **	6/01/02		10,575							10,575	7,901	S/L	MM	27.5	.03637	385
TOTAL IMPROVEMENTS				18,161		0	0	0	0	0	18,161	14,523					661
LAND																	
3	LAND	9/01/96		27,500							27,500						0
TOTAL LAND				27,500		0	0	0	0	0	27,500	0					0
TOTAL DEPRECIATION				182,998		0	0	0	0	0	182,998	141,221					5,479
BUSINESS USE OF HOME - A/C CONSTRUCTION																	
BUILDINGS																	
8	HOME OFFICE BLDG	1/01/19		450,000	8.58						38,610	4,255	S/L	MM	39	.02564	990
TOTAL BUILDINGS				450,000		0	0	0	0	0	38,610	4,255					990
IMPROVEMENTS																	
10	WORKSHOP	4/19/21		40,000	8.58						3,432	172	S/L	MM	39	.02564	88
11	WATER WELL	5/15/22		13,000	8.58						1,115	18	S/L	MM	39	.02564	29
12	FRONT PORCH	7/01/22		7,500	8.58						644	8	S/L	MM	39	.02564	17
TOTAL IMPROVEMENTS				60,500		0	0	0	0	0	5,191	198					134

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## 2023 FEDERAL DEPRECIATION SCHEDULE

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			<u>510,500</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>43,801</u>	<u>4,453</u>				<u>1,124</u>
	GRAND TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	463				48
	GRAND TOTAL DEPRECIATION			<u>729,636</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>250,892</u>	<u>181,812</u>				<u>6,603</u>

\*\*ASSET INCLUDED IN UNADJUSTED BASIS IMMEDIATELY AFTER ACQUISITION FOR THE QBI CALCULATION.

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## 2023 FEDERAL ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
SCHEDULE C - A/C CONSTRUCTION															
AUTO / TRANSPORT EQUIPMENT															
9	FORD T150 TRUCK	11/18/15		24,093	9,477	150DB HY	5		1,317	0		-1,317			0
	TOTAL AUTO / TRANSPORT EQUIP			24,093	9,477				1,317	0		-1,317	0	0	0
	TOTAL DEPRECIATION			24,093	9,477				1,317	0		-1,317	0	0	
SCHEDULE E - 27+29 PERALTA AVE															
BUILDINGS															
1	BUILDING	9/01/96		132,500	69,566	S/L MM	40	.02500	3,313	4,818		1,505			0
	TOTAL BUILDINGS			132,500	69,566				3,313	4,818		1,505	0	0	0
FURNITURE AND FIXTURES															
2	APPLIANCES	9/01/96		3,975		150DB HY	10		0	0					0
5	REFRIGERATOR	7/01/01		862		150DB HY	7		0	0					0
	TOTAL FURNITURE AND FIXTURE			4,837	0				0	0		0	0	0	0
IMPROVEMENTS															
4	IMPROVEMENTS	2/01/98		7,586	3,985	S/L MM	40	.02500	190	276		86			0
6	ROOF	6/01/02		10,575	1,155	S/L MM	27.5	.03637	385	385					0
	TOTAL IMPROVEMENTS			18,161	5,140				575	661		86	0	0	0

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## 2023 FEDERAL ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
LAND															
3	LAND	9/01/96		27,500					0	0					0
	TOTAL LAND			27,500	0				0	0		0	0	0	0
	TOTAL DEPRECIATION			182,998	74,706				3,888	5,479		1,591	0	0	
BUSINESS USE OF HOME - A/C CONSTRUCTION															
BUILDINGS															
8	HOME OFFICE BLDG	1/01/19		38,610	3,306	S/L MM	39	.02564	990	990					0
	TOTAL BUILDINGS			38,610	3,306				990	990		0	0	0	0
IMPROVEMENTS															
10	WORKSHOP	4/19/21		3,432	172	S/L MM	39	.02564	88	88					0
11	WATER WELL	5/15/22		1,115	18	S/L MM	39	.02564	29	29					0
12	FRONT PORCH	7/01/22		644	8	S/L MM	39	.02564	17	17					0
	TOTAL IMPROVEMENTS			5,191	198				134	134		0	0	0	0
	TOTAL DEPRECIATION			43,801	3,504				1,124	1,124		0	0	0	0
	GRAND TOTAL DEPRECIATION			250,892	87,687				6,329	6,603		274	0	0	0

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
SCHEDULE C - A/C CONSTRUCTION																	
AUTO / TRANSPORT EQUIPMENT																	
9	FORD T150 TRUCK	11/18/15		36,138	66.67						24,093	36,138	200DB HY	5		0	
TOTAL AUTO / TRANSPORT EQUIP				36,138		0	0	0	0	0	24,093	36,138					0
TOTAL DEPRECIATION				36,138		0	0	0	0	0	24,093	36,138					0
SCHEDULE E - 27+29 PERALTA AVE																	
AMORTIZATION																	
7	REFINANCE COSTS	5/29/13		1,437							1,437	463	S/L	30		48	
TOTAL AMORTIZATION				1,437		0	0	0	0	0	1,437	463					48
BUILDINGS																	
1	BUILDING	9/01/96		132,500							132,500	121,861	S/L	MM	27.5	.03636	4,818
TOTAL BUILDINGS				132,500		0	0	0	0	0	132,500	121,861					4,818
FURNITURE AND FIXTURES																	
2	APPLIANCES	9/01/96		3,975							3,975	3,975	200DB HY	7		0	
5	REFRIGERATOR	7/01/01		862							862	862	200DB HY	7		0	
TOTAL FURNITURE AND FIXTURE				4,837		0	0	0	0	0	4,837	4,837					0

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## 2023 BOOK DEPRECIATION SCHEDULE

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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
IMPROVEMENTS																	
4	IMPROVEMENTS	2/01/98		7,586							7,586	6,622	S/L	MM	27.5	.03637	276
6	ROOF	6/01/02		10,575							10,575	7,901	S/L	MM	27.5	.03637	385
TOTAL IMPROVEMENTS				18,161		0	0	0	0	0	18,161	14,523					661
LAND																	
3	LAND	9/01/96		27,500							27,500						0
TOTAL LAND				27,500		0	0	0	0	0	27,500	0					0
TOTAL DEPRECIATION				182,998		0	0	0	0	0	182,998	141,221					5,479
BUSINESS USE OF HOME - A/C CONSTRUCTION																	
BUILDINGS																	
8	HOME OFFICE BLDG	1/01/19		450,000	8.58						38,610	4,255	S/L	MM	39	.02564	990
TOTAL BUILDINGS				450,000		0	0	0	0	0	38,610	4,255					990
IMPROVEMENTS																	
10	WORKSHOP	4/19/21		40,000	8.58						3,432	172	S/L	MM	39	.02564	88
11	WATER WELL	5/15/22		13,000	8.58						1,115	18	S/L	MM	39	.02564	29
12	FRONT PORCH	7/01/22		7,500	8.58						644	8	S/L	MM	39	.02564	17
TOTAL IMPROVEMENTS				60,500		0	0	0	0	0	5,191	198					134

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## 2023 BOOK DEPRECIATION SCHEDULE

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			510,500		0	0	0	0	0	43,801	4,453				1,124
	GRAND TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	463				48
	GRAND TOTAL DEPRECIATION			729,636		0	0	0	0	0	250,892	181,812				6,603

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## 2024 FEDERAL DEPRECIATION SCHEDULE

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
SCHEDULE C - A/C CONSTRUCTION																
AUTO / TRANSPORT EQUIPMENT																
9	FORD T150 TRUCK	11/18/15		36,138	66.67						24,093	36,138	200DB HY	5		0
	TOTAL AUTO / TRANSPORT EQUIP			36,138		0	0	0	0	0	24,093	36,138				0
	TOTAL DEPRECIATION			36,138		0	0	0	0	0	24,093	36,138				0
SCHEDULE E - 27+29 PERALTA AVE																
AMORTIZATION																
7	REFINANCE COSTS	5/29/13		1,437							1,437	511	S/L	30		48
	TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	511				48
BUILDINGS																
1	BUILDING	9/01/96		132,500							132,500	126,679	S/L	MM	27.5	0
	TOTAL BUILDINGS			132,500		0	0	0	0	0	132,500	126,679				0
FURNITURE AND FIXTURES																
2	APPLIANCES	9/01/96		3,975							3,975	3,975	200DB HY	7		0
5	REFRIGERATOR	7/01/01		862							862	862	200DB HY	7		0
	TOTAL FURNITURE AND FIXTURE			4,837		0	0	0	0	0	4,837	4,837				0



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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
IMPROVEMENTS																	
4	IMPROVEMENTS	2/01/98		7,586							7,586	6,898	S/L	MM	27.5	.03636	276
6	ROOF	6/01/02		10,575							10,575	8,286	S/L	MM	27.5	.03636	385
TOTAL IMPROVEMENTS				18,161		0	0	0	0	0	18,161	15,184					661
LAND																	
3	LAND	9/01/96		27,500							27,500						0
TOTAL LAND				27,500		0	0	0	0	0	27,500	0					0
TOTAL DEPRECIATION				182,998		0	0	0	0	0	182,998	146,700					661
BUSINESS USE OF HOME - A/C CONSTRUCTION																	
BUILDINGS																	
8	HOME OFFICE BLDG	1/01/19		450,000	8.58						38,610	5,245	S/L	MM	39	.02564	990
TOTAL BUILDINGS				450,000		0	0	0	0	0	38,610	5,245					990
IMPROVEMENTS																	
10	WORKSHOP	4/19/21		40,000	8.58						3,432	260	S/L	MM	39	.02564	88
11	WATER WELL	5/15/22		13,000	8.58						1,115	47	S/L	MM	39	.02564	29
12	FRONT PORCH	7/01/22		7,500	8.58						644	25	S/L	MM	39	.02564	17
TOTAL IMPROVEMENTS				60,500		0	0	0	0	0	5,191	332					134

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## 2024 FEDERAL DEPRECIATION SCHEDULE

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			510,500		0	0	0	0	0	43,801	5,577				1,124
	GRAND TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	511				48
	GRAND TOTAL DEPRECIATION			729,636		0	0	0	0	0	250,892	188,415				1,785

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## 2024 FEDERAL ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
SCHEDULE C - A/C CONSTRUCTION															
AUTO / TRANSPORT EQUIPMENT															
9	FORD T150 TRUCK	11/18/15		24,093	10,794	150DB HY	5		1,317	0		-1,317			0
	TOTAL AUTO / TRANSPORT EQUIP			24,093	10,794				1,317	0		-1,317	0	0	0
	TOTAL DEPRECIATION			24,093	10,794				1,317	0		-1,317	0	0	
SCHEDULE E - 27+29 PERALTA AVE															
BUILDINGS															
1	BUILDING	9/01/96		132,500	72,879	S/L MM	40	.02500	3,313	0		-3,313			0
	TOTAL BUILDINGS			132,500	72,879				3,313	0		-3,313	0	0	0
FURNITURE AND FIXTURES															
2	APPLIANCES	9/01/96		3,975		150DB HY	10		0	0					0
5	REFRIGERATOR	7/01/01		862		150DB HY	7		0	0					0
	TOTAL FURNITURE AND FIXTURE			4,837	0				0	0		0	0	0	0
IMPROVEMENTS															
4	IMPROVEMENTS	2/01/98		7,586	4,175	S/L MM	40	.02500	190	276		86			0
6	ROOF	6/01/02		10,575	1,540	S/L MM	27.5	.03636	385	385					0
	TOTAL IMPROVEMENTS			18,161	5,715				575	661		86	0	0	0

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## 2024 FEDERAL ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
LAND															
3	LAND	9/01/96		27,500					0	0					0
	TOTAL LAND			27,500	0				0	0		0	0	0	0
	TOTAL DEPRECIATION			182,998	78,594				3,888	661		-3,227	0	0	
BUSINESS USE OF HOME - A/C CONSTRUCTION															
BUILDINGS															
8	HOME OFFICE BLDG	1/01/19		38,610	4,296	S/L MM	39	.02564	990	990					0
	TOTAL BUILDINGS			38,610	4,296				990	990		0	0	0	0
IMPROVEMENTS															
10	WORKSHOP	4/19/21		3,432	260	S/L MM	39	.02564	88	88					0
11	WATER WELL	5/15/22		1,115	47	S/L MM	39	.02564	29	29					0
12	FRONT PORCH	7/01/22		644	25	S/L MM	39	.02564	17	17					0
	TOTAL IMPROVEMENTS			5,191	332				134	134		0	0	0	0
	TOTAL DEPRECIATION			43,801	4,628				1,124	1,124		0	0	0	0
	GRAND TOTAL DEPRECIATION			250,892	94,016				6,329	1,785		-4,544	0	0	0

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## 2024 BOOK DEPRECIATION SCHEDULE

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
SCHEDULE C - A/C CONSTRUCTION																
AUTO / TRANSPORT EQUIPMENT																
9	FORD T150 TRUCK	11/18/15		36,138	66.67						24,093	36,138	200DB HY	5		0
	TOTAL AUTO / TRANSPORT EQUIP			36,138		0	0	0	0	0	24,093	36,138				0
	TOTAL DEPRECIATION			36,138		0	0	0	0	0	24,093	36,138				0
SCHEDULE E - 27+29 PERALTA AVE																
AMORTIZATION																
7	REFINANCE COSTS	5/29/13		1,437							1,437	511	S/L	30		48
	TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	511				48
BUILDINGS																
1	BUILDING	9/01/96		132,500							132,500	126,679	S/L	MM	27.5	0
	TOTAL BUILDINGS			132,500		0	0	0	0	0	132,500	126,679				0
FURNITURE AND FIXTURES																
2	APPLIANCES	9/01/96		3,975							3,975	3,975	200DB HY	7		0
5	REFRIGERATOR	7/01/01		862							862	862	200DB HY	7		0
	TOTAL FURNITURE AND FIXTURE			4,837		0	0	0	0	0	4,837	4,837				0

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## 2024 BOOK DEPRECIATION SCHEDULE

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## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
IMPROVEMENTS																	
4	IMPROVEMENTS	2/01/98		7,586							7,586	6,898	S/L	MM	27.5	.03636	276
6	ROOF	6/01/02		10,575							10,575	8,286	S/L	MM	27.5	.03636	385
TOTAL IMPROVEMENTS				18,161		0	0	0	0	0	18,161	15,184					661
LAND																	
3	LAND	9/01/96		27,500							27,500						0
TOTAL LAND				27,500		0	0	0	0	0	27,500	0					0
TOTAL DEPRECIATION				182,998		0	0	0	0	0	182,998	146,700					661
BUSINESS USE OF HOME - A/C CONSTRUCTION																	
BUILDINGS																	
8	HOME OFFICE BLDG	1/01/19		450,000	8.58						38,610	5,245	S/L	MM	39	.02564	990
TOTAL BUILDINGS				450,000		0	0	0	0	0	38,610	5,245					990
IMPROVEMENTS																	
10	WORKSHOP	4/19/21		40,000	8.58						3,432	260	S/L	MM	39	.02564	88
11	WATER WELL	5/15/22		13,000	8.58						1,115	47	S/L	MM	39	.02564	29
12	FRONT PORCH	7/01/22		7,500	8.58						644	25	S/L	MM	39	.02564	17
TOTAL IMPROVEMENTS				60,500		0	0	0	0	0	5,191	332					134

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## 2024 BOOK DEPRECIATION SCHEDULE

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PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			510,500		0	0	0	0	0	43,801	5,577				1,124
	GRAND TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	511				48
	GRAND TOTAL DEPRECIATION			729,636		0	0	0	0	0	250,892	188,415				1,785

PHILIP SMITH AND MARY

**INDIVIDUAL SHARED RESPONSIBILITY PENALTY**STEP 1 ALL FILERS

1. CAN SOMEONE CLAIM YOU AS A DEPENDENT?
  - NO. CONTINUE.
2. DID YOU, AND EVERYONE IN YOUR APPLICABLE HOUSEHOLD, HAVE MEC FOR EVERY MONTH OF THIS TAX YEAR?
  - YES. STOP. YOU DO NOT OWE AN INDIVIDUAL SHARED RESPONSIBILITY PENALTY.



**FTB e-file**  
**Tax Return Signature / Consent to Disclosure**

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**ERO Declaration**

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was prepared by a paid preparer, I declare that the paid preparer manually signed the return and that I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

I have provided the taxpayer(s) with a copy of all forms and information that I will file with the FTB and I have followed all other requirements described in FTB Pub. 1345, *2023 e-file Handbook for Authorized e-file Providers*.

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**ERO Signature**

I am signing this Tax Return by entering my PIN below.

ERO's PIN 68474294965  
(enter EFIN plus 5 Self-Selected numerics)

PHILIP SMITH AND MARY

VEHICLE EXPENSES - SCHEDULE C  
ELECTRICAL CONTRACTORFORD T150  
TRUCK

1. DATE PLACED IN SERVICE	11/18/15
2. TOTAL MILEAGE	12,000
3. BUSINESS MILEAGE	8,000
4. BUSINESS USE PERCENTAGE (DIVIDE LINE 3 BY LINE 2)	0.6667

## STANDARD MILEAGE RATE:

5. MULTIPLY LINE 3 BY 0.655 CENTS (65.5)	5,240.
DEPR. PORTION OF MILEAGE (28 CENTS PER MILE)	2,240.
OPER. EXP. PORTION OF MILEAGE (37.5 CENTS PER MILE)	3,000.

## ACTUAL EXPENSES:

6. GASOLINE, LUBE AND OIL	1,814.
7. REPAIRS	49.
8. TIRES	
9. INSURANCE	921.
10. MISCELLANEOUS	
11. AUTO LICENSE (EXCEPT PERSONAL PROPERTY TAXES)	244.
12. VALUE OF EMPLOYER-PROVIDED VEHICLE	
13. VEHICLE RENT OR LEASE (LESS INCLUSION)	
14. ADD LINES 6 THROUGH 13	3,028.
15. MULTIPLY LINE 14 BY LINE 4	2,019.
16. DEPRECIATION AND SECTION 179 DEDUCTION	
17. ADD LINES 15 AND 16	2,019.

## TOTAL VEHICLE EXPENSES:

ACTUAL EXP

18. ENTER LINE 5 OR LINE 17	2,019.
19. PARKING FEES AND TOLLS	
20. ADD LINES 18 AND 19	2,019.

## VEHICLE EXPENSE ALLOCATION:

21. CAR AND TRUCK EXPENSES	2,019.
22. DEPRECIATION	
23. VEHICLE RENT OR LEASE PAYMENTS	
24. ADD LINES 21, 22, AND 23	2,019.
25. INTEREST EXPENSE (BUSINESS PORTION)	
26. TAXES AND LICENSES (BUSINESS PORTION)	69.
27. PERSONAL PROPERTY TAXES (SCHEDULE A)	35.

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
SCHEDULE C - A/C CONSTRUCTION										
AUTO / TRANSPORT EQUIPMENT										
9	FORD T150 TRUCK	11/18/15		36,138	66.67		36,138	200DB HY	5	0
	TOTAL AUTO / TRANSPORT EQUI			36,138		0	36,138			0
	TOTAL DEPRECIATION			36,138		0	36,138			0
SCHEDULE E - 27+29 PERALTA AVE										
AMORTIZATION										
7	REFINANCE COSTS	5/29/13		1,437			463	S/L	30	48
	TOTAL AMORTIZATION			1,437		0	463			48
BUILDINGS										
1	BUILDING	9/01/96		132,500			121,861	S/L MM	27.5	4,818
	TOTAL BUILDINGS			132,500		0	121,861			4,818
FURNITURE AND FIXTURES										
2	APPLIANCES	9/01/96		3,975			3,975	200DB HY	7	0
5	REFRIGERATOR	7/01/01		862			862	200DB HY	7	0
	TOTAL FURNITURE AND FIXTURE			4,837		0	4,837			0
IMPROVEMENTS										
4	IMPROVEMENTS	2/01/98		7,586			6,622	S/L MM	27.5	276
6	ROOF	6/01/02		10,575			7,901	S/L MM	27.5	385
	TOTAL IMPROVEMENTS			18,161		0	14,523			661
LAND										
3	LAND	9/01/96		27,500						0
	TOTAL LAND			27,500		0	0			0
	TOTAL DEPRECIATION			182,998		0	141,221			5,479

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE	CURRENT DEPR.
BUSINESS USE OF HOME - A/C CONSTRUCTION										
BUILDINGS										
8	HOME OFFICE BLDG	1/01/19		450,000	8.58		4,255	S/L MM	39	990
	TOTAL BUILDINGS			450,000		0	4,255			990
IMPROVEMENTS										
10	WORKSHOP	4/19/21		40,000	8.58		172	S/L MM	39	88
11	WATER WELL	5/15/22		13,000	8.58		18	S/L MM	39	29
12	FRONT PORCH	7/01/22		7,500	8.58		8	S/L MM	39	17
	TOTAL IMPROVEMENTS			60,500		0	198			134
	TOTAL DEPRECIATION			510,500		0	4,453			1,124
	GRAND TOTAL AMORTIZATION			1,437		0	463			48
	GRAND TOTAL DEPRECIATION			729,636		0	181,812			6,603

12/31/23

## 2023 CALIFORNIA DEPRECIATION SCHEDULE

PAGE 1

PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
SCHEDULE C - A/C CONSTRUCTION																	
AUTO / TRANSPORT EQUIPMENT																	
9	FORD T150 TRUCK	11/18/15		36,138	66.67						24,093	36,138	200DB HY	5		0	
TOTAL AUTO / TRANSPORT EQUIP				36,138		0	0	0	0	0	24,093	36,138					0
TOTAL DEPRECIATION				36,138		0	0	0	0	0	24,093	36,138					0
SCHEDULE E - 27+29 PERALTA AVE																	
AMORTIZATION																	
7	REFINANCE COSTS	5/29/13		1,437							1,437	463	S/L	30		48	
TOTAL AMORTIZATION				1,437		0	0	0	0	0	1,437	463					48
BUILDINGS																	
1	BUILDING	9/01/96		132,500							132,500	121,861	S/L	MM	27.5	.03636	4,818
TOTAL BUILDINGS				132,500		0	0	0	0	0	132,500	121,861					4,818
FURNITURE AND FIXTURES																	
2	APPLIANCES	9/01/96		3,975							3,975	3,975	200DB HY	7		0	
5	REFRIGERATOR	7/01/01		862							862	862	200DB HY	7		0	
TOTAL FURNITURE AND FIXTURE				4,837		0	0	0	0	0	4,837	4,837					0

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## 2023 CALIFORNIA DEPRECIATION SCHEDULE

PAGE 2

PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
IMPROVEMENTS																	
4	IMPROVEMENTS	2/01/98		7,586							7,586	6,622	S/L	MM	27.5	.03637	276
6	ROOF	6/01/02		10,575							10,575	7,901	S/L	MM	27.5	.03637	385
	TOTAL IMPROVEMENTS			18,161		0	0	0	0	0	18,161	14,523					661
LAND																	
3	LAND	9/01/96		27,500							27,500						0
	TOTAL LAND			27,500		0	0	0	0	0	27,500	0					0
	TOTAL DEPRECIATION			182,998		0	0	0	0	0	182,998	141,221					5,479
BUSINESS USE OF HOME - A/C CONSTRUCTION																	
BUILDINGS																	
8	HOME OFFICE BLDG	1/01/19		450,000	8.58						38,610	4,255	S/L	MM	39	.02564	990
	TOTAL BUILDINGS			450,000		0	0	0	0	0	38,610	4,255					990
IMPROVEMENTS																	
10	WORKSHOP	4/19/21		40,000	8.58						3,432	172	S/L	MM	39	.02564	88
11	WATER WELL	5/15/22		13,000	8.58						1,115	18	S/L	MM	39	.02564	29
12	FRONT PORCH	7/01/22		7,500	8.58						644	8	S/L	MM	39	.02564	17
	TOTAL IMPROVEMENTS			60,500		0	0	0	0	0	5,191	198					134

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## 2023 CALIFORNIA DEPRECIATION SCHEDULE

PAGE 3

PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			510,500		0	0	0	0	0	43,801	4,453				1,124
	GRAND TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	463				48
	GRAND TOTAL DEPRECIATION			729,636		0	0	0	0	0	250,892	181,812				6,603

12/31/23

## 2023 CALIFORNIA ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

PAGE 1

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
SCHEDULE C - A/C CONSTRUCTION															
AUTO / TRANSPORT EQUIPMENT															
9	FORD T150 TRUCK	11/18/15		24,093	9,477	150DB HY	5		1,317	0		-1,317			0
	TOTAL AUTO / TRANSPORT EQUIP			24,093	9,477				1,317	0		-1,317	0	0	0
	TOTAL DEPRECIATION			24,093	9,477				1,317	0		-1,317	0	0	
SCHEDULE E - 27+29 PERALTA AVE															
BUILDINGS															
1	BUILDING	9/01/96		132,500	69,566	S/L MM	40	.02500	3,313	4,818		1,505			0
	TOTAL BUILDINGS			132,500	69,566				3,313	4,818		1,505	0	0	0
FURNITURE AND FIXTURES															
2	APPLIANCES	9/01/96		3,975		150DB HY	10		0	0					0
5	REFRIGERATOR	7/01/01		862		150DB HY	7		0	0					0
	TOTAL FURNITURE AND FIXTURE			4,837	0				0	0		0	0	0	0
IMPROVEMENTS															
4	IMPROVEMENTS	2/01/98		7,586	3,985	S/L MM	40	.02500	190	276		86			0
6	ROOF	6/01/02		10,575	1,155	S/L MM	27.5	.03637	385	385					0
	TOTAL IMPROVEMENTS			18,161	5,140				575	661		86	0	0	0



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## 2023 CALIFORNIA ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

PAGE 2

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
LAND															
3	LAND	9/01/96		27,500					0	0					0
	TOTAL LAND			27,500	0				0	0		0	0	0	0
	TOTAL DEPRECIATION			182,998	74,706				3,888	5,479		1,591	0	0	
BUSINESS USE OF HOME - A/C CONSTRUCTION															
BUILDINGS															
8	HOME OFFICE BLDG	1/01/19		38,610	3,306	S/L MM	39	.02564	990	990					0
	TOTAL BUILDINGS			38,610	3,306				990	990		0	0	0	0
IMPROVEMENTS															
10	WORKSHOP	4/19/21		3,432	172	S/L MM	39	.02564	88	88					0
11	WATER WELL	5/15/22		1,115	18	S/L MM	39	.02564	29	29					0
12	FRONT PORCH	7/01/22		644	8	S/L MM	39	.02564	17	17					0
	TOTAL IMPROVEMENTS			5,191	198				134	134		0	0	0	0
	TOTAL DEPRECIATION			43,801	3,504				1,124	1,124		0	0	0	0
	GRAND TOTAL DEPRECIATION			250,892	87,687				6,329	6,603		274	0	0	0

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## 2024 CALIFORNIA DEPRECIATION SCHEDULE

PAGE 1

PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
SCHEDULE C - A/C CONSTRUCTION																
AUTO / TRANSPORT EQUIPMENT																
9	FORD T150 TRUCK	11/18/15		36,138	66.67						24,093	36,138	200DB HY	5		0
	TOTAL AUTO / TRANSPORT EQUIP			36,138		0	0	0	0	0	24,093	36,138				0
	TOTAL DEPRECIATION			36,138		0	0	0	0	0	24,093	36,138				0
SCHEDULE E - 27+29 PERALTA AVE																
AMORTIZATION																
7	REFINANCE COSTS	5/29/13		1,437							1,437	511	S/L	30		48
	TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	511				48
BUILDINGS																
1	BUILDING	9/01/96		132,500							132,500	126,679	S/L	MM	27.5	0
	TOTAL BUILDINGS			132,500		0	0	0	0	0	132,500	126,679				0
FURNITURE AND FIXTURES																
2	APPLIANCES	9/01/96		3,975							3,975	3,975	200DB HY	7		0
5	REFRIGERATOR	7/01/01		862							862	862	200DB HY	7		0
	TOTAL FURNITURE AND FIXTURE			4,837		0	0	0	0	0	4,837	4,837				0

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## 2024 CALIFORNIA DEPRECIATION SCHEDULE

PAGE 2

PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
IMPROVEMENTS																	
4	IMPROVEMENTS	2/01/98		7,586							7,586	6,898	S/L	MM	27.5	.03636	276
6	ROOF	6/01/02		10,575							10,575	8,286	S/L	MM	27.5	.03636	385
TOTAL IMPROVEMENTS				18,161		0	0	0	0	0	18,161	15,184					661
LAND																	
3	LAND	9/01/96		27,500							27,500						0
TOTAL LAND				27,500		0	0	0	0	0	27,500	0					0
TOTAL DEPRECIATION				182,998		0	0	0	0	0	182,998	146,700					661
BUSINESS USE OF HOME - A/C CONSTRUCTION																	
BUILDINGS																	
8	HOME OFFICE BLDG	1/01/19		450,000	8.58						38,610	5,245	S/L	MM	39	.02564	990
TOTAL BUILDINGS				450,000		0	0	0	0	0	38,610	5,245					990
IMPROVEMENTS																	
10	WORKSHOP	4/19/21		40,000	8.58						3,432	260	S/L	MM	39	.02564	88
11	WATER WELL	5/15/22		13,000	8.58						1,115	47	S/L	MM	39	.02564	29
12	FRONT PORCH	7/01/22		7,500	8.58						644	25	S/L	MM	39	.02564	17
TOTAL IMPROVEMENTS				60,500		0	0	0	0	0	5,191	332					134

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## 2024 CALIFORNIA DEPRECIATION SCHEDULE

**PAGE 3**

PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			510,500		0	0	0	0	0	43,801	5,577				1,124
	GRAND TOTAL AMORTIZATION			1,437		0	0	0	0	0	1,437	511				48
	GRAND TOTAL DEPRECIATION			729,636		0	0	0	0	0	250,892	188,415				1,785

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## 2024 CALIFORNIA ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

PAGE 1

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
SCHEDULE C - A/C CONSTRUCTION															
AUTO / TRANSPORT EQUIPMENT															
9	FORD T150 TRUCK	11/18/15		24,093	10,794	150DB HY	5		1,317	0		-1,317			0
	TOTAL AUTO / TRANSPORT EQUIP			24,093	10,794				1,317	0		-1,317	0	0	0
	TOTAL DEPRECIATION			24,093	10,794				1,317	0		-1,317	0	0	
SCHEDULE E - 27+29 PERALTA AVE															
BUILDINGS															
1	BUILDING	9/01/96		132,500	72,879	S/L MM	40	.02500	3,313	0		-3,313			0
	TOTAL BUILDINGS			132,500	72,879				3,313	0		-3,313	0	0	0
FURNITURE AND FIXTURES															
2	APPLIANCES	9/01/96		3,975		150DB HY	10		0	0					0
5	REFRIGERATOR	7/01/01		862		150DB HY	7		0	0					0
	TOTAL FURNITURE AND FIXTURE			4,837	0				0	0		0	0	0	0
IMPROVEMENTS															
4	IMPROVEMENTS	2/01/98		7,586	4,175	S/L MM	40	.02500	190	276		86			0
6	ROOF	6/01/02		10,575	1,540	S/L MM	27.5	.03636	385	385					0
	TOTAL IMPROVEMENTS			18,161	5,715				575	661		86	0	0	0

12/31/24

## 2024 CALIFORNIA ALTERNATIVE MINIMUM TAX DEPRECIATION SCHEDULE

PAGE 2

## PHILIP SMITH AND MARY

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	AMT BASIS	AMT PRIOR DEPR	AMT METHOD	AMT LIFE	AMT RATE	AMT DEPR	REG. DEPR	OWN PCT	POST-86 DEPR ADJ	REAL PROP PREF	LEAS PER PROP PREF	59 (E)(2) AMORT
LAND															
3	LAND	9/01/96		27,500					0	0					0
	TOTAL LAND			27,500	0				0	0		0	0	0	0
	TOTAL DEPRECIATION			182,998	78,594				3,888	661		-3,227	0	0	
BUSINESS USE OF HOME - A/C CONSTRUCTION															
BUILDINGS															
8	HOME OFFICE BLDG	1/01/19		38,610	4,296	S/L MM	39	.02564	990	990					0
	TOTAL BUILDINGS			38,610	4,296				990	990		0	0	0	0
IMPROVEMENTS															
10	WORKSHOP	4/19/21		3,432	260	S/L MM	39	.02564	88	88					0
11	WATER WELL	5/15/22		1,115	47	S/L MM	39	.02564	29	29					0
12	FRONT PORCH	7/01/22		644	25	S/L MM	39	.02564	17	17					0
	TOTAL IMPROVEMENTS			5,191	332				134	134		0	0	0	0
	TOTAL DEPRECIATION			43,801	4,628				1,124	1,124		0	0	0	0
	GRAND TOTAL DEPRECIATION			250,892	94,016				6,329	1,785		-4,544	0	0	0

## Section 199A Rental Real Estate Safe Harbor Statement

Entity Name: PHILIP SMITH AND MARY

Entity ID Number:

This statement confirms that all requirements for the safe harbor per IRS Rev. Proc. 2019-38 have been satisfied to claim this rental real estate for the Qualified Business Income (QBI) deduction.

Specifically I affirm all of the below:

- Separate books and records are maintained to reflect income and expenses for each rental property
- 250 or more hours of rental services were performed with respect to the rental enterprise
- The property was not used as a residence for any part of the year
- The property was not rented or leased under a triple net lease

PHILIP SMITH AND MARY

**RENTAL REAL ESTATE ENTERPRISE 1**

---

27+29 PERALTA AVE  
27 & 29 PERALTA AVE, SAN FRANCISCO, CA 94110  
RESIDENTIAL



## 2024 Estimated Tax Worksheet

PHILIP SMITH AND MARY

Keep for Your Records

1	Adjusted gross income you expect in 2024 (see instructions).....	1	75,674.
2a	Deductions..... <ul style="list-style-type: none"> <li>• If you plan to itemize deductions, enter the estimated total of your itemized deductions.</li> <li>• If you don't plan to itemize deductions, enter your standard deduction.</li> </ul>	2a	32,300.
b	If you can take the qualified business income deduction, enter the estimated amount of the deduction.....	2b	9,359.
c	Add lines 2a and 2b.....	2c	41,659.
3	Subtract line 2c from line 1.....	3	34,015.
4	<b>Tax.</b> Figure your tax on the amount on line 3 by using the <b>2024 Tax Rate Schedules</b> . <b>Caution:</b> If you will have qualified dividends or a net capital gain, or expect to exclude or deduct foreign earned income or housing, see Worksheets 2-5 and 2-6 in Pub. 505 to figure the tax.....	4	3,618.
5	Alternative minimum tax from <b>Form 6251</b> .....	5	
6	Add lines 4 and 5. Add to this amount any other taxes you expect to include in the total on Form 1040 or 1040-SR, line 16.....	6	3,618.
7	Credits (see instructions). <b>Do not</b> include any income tax withholding on this line.....	7	
8	Subtract line 7 from line 6. If zero or less, enter -0-.....	8	3,618.
9	Self-employment tax (see instructions).....	9	
10	Other taxes (see instructions).....	10	
11a	Add lines 8 through 10..... <b>100% OF LINE 11C ELECTED</b>	11a	3,618.
b	Earned income credit, additional child tax credit, fuel tax credit, net premium tax credit, refundable American opportunity credit, and section 1341 credit.....	11b	
c	<b>Total 2024 estimated tax.</b> Subtract line 11b from line 11a. If zero or less, enter -0-.....	11c	3,618.
12a	Multiply line 11c by 90% (66-2/3% for farmers and fishermen).....	12a	3,618.
b	Required annual payment based on prior year's tax (see instructions).....	12b	1,252.
c	<b>Required annual payment to avoid a penalty.</b> Enter the <b>smaller</b> of line 12a or 12b..... <b>Caution:</b> Generally, if you do not prepay (through income tax withholding and estimated tax payments) at least the amount on line 12c, you may owe a penalty for not paying enough estimated tax. To avoid a penalty, make sure your estimate on line 11c is as accurate as possible. Even if you pay the required annual payment, you may still owe tax when you file your return. If you prefer, you can pay the amount shown on line 11c. For details, see chapter 2 of Pub. 505.	12c	3,618.
13	Income tax withheld and estimated to be withheld during 2024 (including income tax withholding on pensions, annuities, certain deferred income, and Additional Medicare Tax withholding).....	13	
14a	Subtract line 13 from line 12c..... Is the result zero or less? <input type="checkbox"/> <b>Yes.</b> Stop here. You are not required to make estimated tax payments. <input checked="" type="checkbox"/> <b>No.</b> Go to line 14b.	14a	3,618.
b	Subtract line 13 from line 11c..... Is the result less than \$1,000? <input type="checkbox"/> <b>Yes.</b> Stop here. You are not required to make estimated tax payments. <input checked="" type="checkbox"/> <b>No.</b> Go to line 15 to figure your required payment.	14b	3,618.
15	Rounded balance.....	15	3,640.
16	Overpayment of estimated tax applied to next tax year.....	16	
17	Total of estimated tax payments to be mailed with vouchers.....	17	3,640.
18	If the first payment you are required to make is due April 15, 2024, enter 1/4 of line 14a (minus any 2023 overpayment that you are applying to this installment) here, and on your estimated tax payment voucher(s) if you are paying by check or money order.....	18	910.

PHILIP SMITH AND MARY

## 2024 ESTIMATED TAX WORKSHEET - ADJUSTED GROSS INCOME

<u>INCOME</u>	<u>THIS YEAR</u>	<u>DIFFERENCE</u>	<u>NEXT YEAR</u>
BUSINESS INCOME (LOSS)	-11,965.	11,965.	0.
TAXABLE IRA	27,360.	-27,360.	0.
TAXABLE PENSIONS	12,317.	-12,317.	0.
RENTS, ROYALTIES, ETC.	46,796.	0.	46,796.
TAXABLE SOCIAL SECURITY	41,002.	-12,124.	28,878.
TOTAL INCOME	115,510.	-39,836.	75,674.

ESTIMATED ADJUSTED GROSS INCOME

75,674.

Mail to:

INTERNAL REVENUE SERVICE  
P.O. BOX 802502  
CINCINNATI, OH 45280-2502

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury  
Internal Revenue Service

Calendar Year —  
Due 4/15/2024

## 2024 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the 'United States Treasury.' Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order . . . . . ▶	910.
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FDIA1901L 06/21/23

1032



PHILIP SMITH  
MARY SMITH  
21325 BACK DRIVE  
SMITH, CA 95713

INTERNAL REVENUE SERVICE  
PO BOX 802502  
CINCINNATI OH 45280-2502

CY SMIT 30 0 202412 430

Mail to:

INTERNAL REVENUE SERVICE  
P.O. BOX 802502  
CINCINNATI, OH 45280-2502

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury  
Internal Revenue Service

Calendar Year —  
Due 6/17/2024

## 2024 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the 'United States Treasury.' Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax  
you are paying by check  
or money order . . . . . ▶

910.

FDIA1902L 06/21/23

1032



PHILIP SMITH  
MARY SMITH  
21325 BACK DRIVE  
SMITH, CA 95713

INTERNAL REVENUE SERVICE  
PO BOX 802502  
CINCINNATI OH 45280-2502

CY SMIT 30 0 202412 430

Mail to:

INTERNAL REVENUE SERVICE  
P.O. BOX 802502  
CINCINNATI, OH 45280-2502

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury  
Internal Revenue Service

Calendar Year —  
Due 9/16/2024

## 2024 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the 'United States Treasury.' Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order . . . . . ▶	910.
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FDIA1904L 06/21/23

1032



PHILIP SMITH  
MARY SMITH  
21325 BACK DRIVE  
SMITH, CA 95713

INTERNAL REVENUE SERVICE  
PO BOX 802502  
CINCINNATI OH 45280-2502

CY SMIT 30 0 202412 430

Mail to:

INTERNAL REVENUE SERVICE  
P.O. BOX 802502  
CINCINNATI, OH 45280-2502

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury  
Internal Revenue Service

Calendar Year —  
Due 1/15/2025

## 2024 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the 'United States Treasury.' Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax  
you are paying by check  
or money order . . . . . ▶

910.

FDIA1905L 06/21/23

1032



PHILIP SMITH  
MARY SMITH  
21325 BACK DRIVE  
SMITH, CA 95713

INTERNAL REVENUE SERVICE  
PO BOX 802502  
CINCINNATI OH 45280-2502

CY SMIT 30 0 202412 430

Form **8879**

(Rev. January 2021)

Department of the Treasury  
Internal Revenue Service**IRS e-file Signature Authorization**

- **ERO must obtain and retain completed Form 8879.**
- **Go to [www.irs.gov/Form8879](http://www.irs.gov/Form8879) for the latest information.**

OMB No. 1545-0074

Submission Identification Number (SID) ►

Taxpayer's name

PHILIP SMITH

Social security number

Spouse's name

MARY SMITH

Spouse's social security number

**Part I Tax Return Information – Tax Year Ending December 31, 2023** (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

**Note:** Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income .....	1	115,510.
2	Total tax .....	2	1,252.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099 .....	3	2,463.
4	Amount you want refunded to you .....	4	1,211.
5	Amount you owe .....	5	

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

☒ I authorize GOLDEN STATE ACCOUNTING INC. to enter or generate my PIN 36432 as my  
ERO firm name Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Date ►

**Spouse's PIN: check one box only**

☒ I authorize GOLDEN STATE ACCOUNTING INC. to enter or generate my PIN 48777 as my  
ERO firm name Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ►

**Practitioner PIN Method Returns Only – continue below****Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

68474294965

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► DAVID HAASE, CPA

Date ►

**ERO Must Retain This Form – See Instructions**  
**Don't Submit This Form to the IRS Unless Requested To Do So**

**BAA For Paperwork Reduction Act Notice, see your tax return instructions.**Form **8879** (Rev. 01-2021)

For the year Jan. 1—Dec. 31, 2023, or other tax year beginning _____, ending _____		See separate instructions.
Your first name and middle initial <b>PHILIP SMITH</b>		Your social security number
Last name		
If joint return, spouse's first name and middle initial <b>MARY SMITH</b>		Spouse's social security number
Last name		
Home address (number and street). If you have a P.O. box, see instructions. <b>21325 BACK DRIVE</b>		<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. <b>SMITH, CA 95713</b>		
State <b>CA</b>	ZIP code <b>95713</b>	
Foreign country name	Foreign province/state/county	Foreign postal code

**Filing Status**

☐ Single ☐ Head of household (HOH)

Check only one box.

☒ Married filing jointly (even if only one had income)

☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: \_\_\_\_\_

**Digital Assets** At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

**Standard Deduction**

**Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent

☐ Spouse itemizes on a separate return or you were a dual-status alien

**Age/Blindness** You: ☒ Were born before January 2, 1959 ☐ Are blind Spouse: ☒ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
If more than four dependents, see instructions and check here. <input type="checkbox"/>	(1) First name Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

<b>Income</b>	1 a	Total amount from Form(s) W-2, box 1 (see instructions).	1a	
	b	Household employee wages not reported on Form(s) W-2.	1b	
	c	Tip income not reported on line 1a (see instructions).	1c	
	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions).	1d	
	e	Taxable dependent care benefits from Form 2441, line 26.	1e	
	f	Employer-provided adoption benefits from Form 8839, line 29.	1f	
	g	Wages from Form 8919, line 6.	1g	
	h	Other earned income (see instructions).	1h	
	i	Nontaxable combat pay election (see instructions).	1i	
	z	Add lines 1a through 1h.	1z	
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	2 a	Tax-exempt interest	2a	
	b	Taxable interest	2b	
	3 a	Qualified dividends	3a	
	b	Ordinary dividends	3b	
	4 a	IRA distributions	4a	
	b	Taxable amount	4b	27,360.
	5 a	Pensions and annuities	5a	
	b	Taxable amount	5b	12,317.
	6 a	Social security benefits	6a	48,238.
	b	Taxable amount	6b	41,002.
Attach Sch. B if required.	c	If you elect to use the lump-sum election method, check here (see instructions).		
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here.	7	
	8	Additional income from Schedule 1, line 10.	8	34,831.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b> .	9	115,510.
	10	Adjustments to income from Schedule 1, line 26.	10	
	11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b> .	11	115,510.
	12	<b>Standard deduction or itemized deductions</b> (from Schedule A).	12	30,700.
	13	Qualified business income deduction from Form 8995 or Form 8995-A.	13	6,966.
	14	Add lines 12 and 13.	14	37,666.
	15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your <b>taxable income</b> .	15	77,844.

**Standard Deduction for —**

- Single or Married filing separately, \$13,850
- Married filing jointly or Qualifying surviving spouse, \$27,700
- Head of household, \$20,800
- If you checked any box under **Standard Deduction**, see instructions.



**Tax and Credits**

<b>16</b>	<b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814	<b>16</b>	8,899.
<b>2</b>	<input type="checkbox"/> 4972	<b>3</b>	<input type="checkbox"/>
<b>17</b>	Amount from Schedule 2, line 3	<b>17</b>	
<b>18</b>	Add lines 16 and 17	<b>18</b>	8,899.
<b>19</b>	Child tax credit or credit for other dependents from Schedule 8812	<b>19</b>	
<b>20</b>	Amount from Schedule 3, line 8	<b>20</b>	7,647.
	Add lines 19 and 20		7,647.
<b>22</b>	Subtract line from line 18. If zero or less, enter -0-	<b>22</b>	1,252.
<b>23</b>	Other taxes, including self-employment tax, from Schedule 2, line	<b>23</b>	
<b>24</b>	Add lines 22 and 23. This is your <b>total tax</b>	<b>24</b>	1,252.

**Payments**

<b>25</b>	Federal income tax withheld from:		
<b>a</b>	Form(s) W-2	<b>25a</b>	
<b>b</b>	Form(s) 1099	<b>25b</b>	2,463.
<b>c</b>	Other forms (see instructions)	<b>25c</b>	
<b>d</b>	Add lines 25a through 25c	<b>25d</b>	2,463.
<b>26</b>	2023 estimated tax payments and amount applied from 2022 return	<b>26</b>	
<b>27</b>	Earned income credit (EIC)	<b>27</b>	
<b>28</b>	Additional child tax credit from Schedule 8812	<b>28</b>	
<b>29</b>	American opportunity credit from Form 8863, line 8	<b>29</b>	
<b>30</b>	Reserved for future use	<b>30</b>	
<b>31</b>	Amount from Schedule 3, line 15	<b>31</b>	
<b>32</b>	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	<b>32</b>	
<b>33</b>	Add lines 25d, 26, and 32. These are your <b>total payments</b>	<b>33</b>	2,463.

If you have a qualifying child, attach Sch. EIC.

**Refund**

<b>34</b>	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	<b>34</b>	1,211.
<b>35a</b>	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>35a</b>	1,211.
<b>b</b>	Routing number <input type="text" value="121000358"/>	<b>c</b>	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
<b>d</b>	Account number <input type="text" value="000412601383"/>		
<b>36</b>	Amount of line 34 you want <b>applied to your 2024 estimated tax</b>	<b>36</b>	

Direct deposit?  
See instructions.

**Amount You Owe**

<b>37</b>	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <a href="http://www.irs.gov/Payments">www.irs.gov/Payments</a> or see instructions.	<b>37</b>	
<b>38</b>	Estimated tax penalty (see instructions)	<b>38</b>	

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS?  
See instructions ☒ **Yes**. Complete below. ☐ **No**

Designee's name	DAVID HAASE, CPA	Phone no.	(415)-331-9900	Personal identification number (PIN)	94965
-----------------	------------------	-----------	----------------	--------------------------------------	-------

**Sign Here**

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		ELECTRICAL CONTRAC	
Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
		ADMINISTRATOR - RE	
Phone no.	Email address		

**Paid Preparer Use Only**

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
DAVID HAASE, CPA	DAVID HAASE, CPA		P02153415	
Firm's name	Firm's EIN			Phone no.
GOLDEN STATE ACCOUNTING INC.	20-5664372			415-331-9900
Firm's address				
1221 BRIDGEWAY SUITE 2 SAUSALITO, CA 94965				

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

Form **1040** (2023)

**SCHEDULE 1**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

Attach to Form 1040, 1040-SR, or 1040-NR.  
Go to [www.irs.gov/Form1040](http://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

PHILIP SMITH AND MARY

Your social security number

**Part I Additional Income**

1	Taxable refunds, credits, or offsets of state and local income taxes .....	1	
2a	Alimony received .....	2a	
b	Date of original divorce or separation agreement (see instructions): .....		
3	Business income or (loss). Attach Schedule C .....	3	-11,965.
4	Other gains or (losses). Attach Form 4797 .....	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E .....	5	46,796.
6	Farm income or (loss). Attach Schedule F .....	6	
7	Unemployment compensation .....	7	
8	Other income:		
a	Net operating loss .....	8a	( )
b	Gambling .....	8b	
c	Cancellation of debt .....	8c	
d	Foreign earned income exclusion from Form 2555 .....	8d	( )
e	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	
l	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 .....	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions) ..	8m	
n	Section 951(a) inclusion (see instructions) .....	8n	
o	Section 951A(a) inclusion (see instructions) .....	8o	
p	Section 461(l) 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: .....	8z	
9	Total other income. Add lines 8a through 8z .....	9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 .....	10	34,831.

**Part II Adjustments to Income**

<b>11</b>	Educator expenses.....	<b>11</b>	
<b>12</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106.....	<b>12</b>	
<b>13</b>	Health savings account deduction. Attach Form 8889.....	<b>13</b>	
<b>14</b>	Moving expenses for members of the Armed Forces. Attach Form 3903.....	<b>14</b>	
<b>15</b>	Deductible part of self-employment tax. Attach Schedule SE.....	<b>15</b>	
<b>16</b>	Self-employed SEP, SIMPLE, and qualified plans.....	<b>16</b>	
<b>17</b>	Self-employed health insurance deduction.....	<b>17</b>	
<b>18</b>	Penalty on early withdrawal of savings.....	<b>18</b>	
<b>19a</b>	Alimony paid.....	<b>19a</b>	
<b>b</b>	Recipient's SSN.....		
<b>c</b>	Date of original divorce or separation agreement (see instructions): .....		
<b>20</b>	IRA deduction.....	<b>20</b>	
	Student loan interest deduction.....		
<b>22</b>	Reserved for future use.....	<b>22</b>	
<b>23</b>	Archer MSA deduction.....	<b>23</b>	
<b>24</b>	Other adjustments:		
<b>a</b>	Jury duty pay (see instructions).....	<b>24a</b>	
<b>b</b>	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit.....	<b>24b</b>	
<b>c</b>	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m.....	<b>24c</b>	
<b>d</b>	Reforestation amortization and expenses.....	<b>24d</b>	
<b>e</b>	Repayment of supplemental unemployment benefits under the Trade Act of 1974.....	<b>24e</b>	
<b>f</b>	Contributions to section 501(c)(18)(D) pension plans.....	<b>24f</b>	
<b>g</b>	Contributions by certain chaplains to section 403(b) plans.....	<b>24g</b>	
<b>h</b>	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions).....	<b>24h</b>	
<b>i</b>	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations.....	<b>24i</b>	
<b>j</b>	Housing deduction from Form 2555.....	<b>24j</b>	
<b>k</b>	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041).....	<b>24k</b>	
<b>z</b>	Other adjustments. List type and amount: .....	<b>24z</b>	
<b>25</b>	Total other adjustments. Add lines 24a through 24z.....	<b>25</b>	
<b>26</b>	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10.....	<b>26</b>	0.

Schedule 1 (Form 1040) 2023

**SCHEDULE 3**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Additional Credits and Payments****Attach to Form 1040, 1040-SR, or 1040-NR.**  
**Go to [www.irs.gov/Form1040](https://www.irs.gov/Form1040) for instructions and the latest information.**

OMB No. 1545-0074

**2023**Attachment  
Sequence No. **03**

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

PHILIP SMITH AND MARY

Your social security number

**Part I Nonrefundable Credits**

<b>1</b>	Foreign tax credit. Attach Form 1116 if required. ....	<b>1</b>	
<b>2</b>	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441 .....	<b>2</b>	
<b>3</b>	Education credits from Form 8863, line 19. ....	<b>3</b>	
<b>4</b>	Retirement savings contributions credit. Attach Form 8880. ....	<b>4</b>	
<b>5a</b>	Residential clean energy credit from Form 5695, line 15. ....	<b>5a</b>	147.
<b>b</b>	Energy efficient home improvement credit from Form 5695, line 32 .....	<b>5b</b>	
<b>6</b>	Other nonrefundable credits:		
<b>a</b>	General business credit. Attach Form 3800 .....	<b>6a</b>	
<b>b</b>	Credit for prior year minimum tax. Attach Form 8801 .....	<b>6b</b>	
<b>c</b>	Adoption credit. Attach Form 8839 .....	<b>6c</b>	
<b>d</b>	Credit for the elderly or disabled. Attach Schedule R .....	<b>6d</b>	
<b>e</b>	Reserved for future use .....	<b>6e</b>	
<b>f</b>	Clean vehicle credit. Attach Form 8936 .....	<b>6f</b>	7,500.
<b>g</b>	Mortgage interest credit. Attach Form 8396 .....	<b>6g</b>	
<b>h</b>	District of Columbia first-time homebuyer credit. Attach Form 8859 .....	<b>6h</b>	
<b>i</b>	Qualified electric vehicle credit. Attach Form 8834 .....	<b>6i</b>	
<b>j</b>	Alternative fuel vehicle refueling property credit. Attach Form 8911 .....	<b>6j</b>	
<b>k</b>	Credit to holders of tax credit bonds. Attach Form 8912 .....	<b>6k</b>	
<b>l</b>	Amount on Form 8978, line 14. See instructions .....	<b>6l</b>	
<b>m</b>	Credit for previously owned clean vehicles. Attach Form 8936 .....	<b>6m</b>	
<b>z</b>	Other nonrefundable credits. List type and amount: _____	<b>6z</b>	
<b>7</b>	Total other nonrefundable credits. Add lines 6a through 6z .....	<b>7</b>	7,500.
<b>8</b>	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 .....	<b>8</b>	7,647.

(continued on page 2)

**BAA For Paperwork Reduction Act Notice, see your tax return instructions.****Schedule 3 (Form 1040) 2023**

**Part II Other Payments and Refundable Credits**

<b>9</b>	Net premium tax credit. Attach Form 8962.....	<b>9</b>	
<b>10</b>	Amount paid with request for extension to file (see instructions).....	<b>10</b>	
<b>11</b>	Excess social security and tier 1 RRTA tax withheld.....	<b>11</b>	
<b>12</b>	Credit for federal tax on fuels. Attach Form 4136.....	<b>12</b>	
<b>13</b>	Other payments or refundable credits:		
<b>a</b>	Form 2439.....	<b>13a</b>	
<b>b</b>	Credit for repayment of amounts included in income from earlier years.....	<b>13b</b>	
<b>c</b>	Elective payment election amount from Form 3800, Part III, line 6, column (i).....	<b>13c</b>	
<b>d</b>	Deferred amount of net 965 tax liability (see instructions).....	<b>13d</b>	
<b>z</b>	Other payments or refundable credits. List type and amount:	<b>13z</b>	
<b>14</b>	Total other payments or refundable credits. Add lines 13a through 13z.....	<b>14</b>	
<b>15</b>	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31.....	<b>15</b>	0.

Schedule 3 (Form 1040) 2023

**SCHEDULE C**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0074

**2023**

Attachment  
Sequence No. **09**

Name of proprietor

**PHILIP SMITH**

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)

**ELECTRICAL CONTRACTOR**

**B** Enter code from instructions

**238210**

**C** Business name. If no separate business name, leave blank.

**A/C CONSTRUCTION**

**D** Employer ID number (EIN) (see instr.)

**E** Business address (including suite or room no.)

City, town or post office, state, and ZIP code

**F** Accounting method: **(1)** ☒ Cash **(2)** ☐ Accrual **(3)** ☐ Other (specify)

**G** Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses. ☒ Yes ☐ No

**H** If you started or acquired this business during 2023, check here ☐

**I** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions. ☐ Yes ☒ No

**J** If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

**Part I Income**

<b>1</b> Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked. <input type="checkbox"/>	<b>1</b>	
<b>2</b> Returns and allowances.	<b>2</b>	
<b>3</b> Subtract line 2 from line 1.	<b>3</b>	
<b>4</b> Cost of goods sold (from line 42).	<b>4</b>	
<b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3.	<b>5</b>	
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions).	<b>6</b>	
<b>7</b> <b>Gross income.</b> Add lines 5 and 6.	<b>7</b>	

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

<b>8</b> Advertising.	<b>8</b>		<b>18</b> Office expense (see instructions).	<b>18</b>	1,436.
<b>9</b> Car and truck expenses (see instructions).	<b>9</b>	2,019.	<b>19</b> Pension and profit-sharing plans.	<b>19</b>	
<b>10</b> Commissions and fees.	<b>10</b>		<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions).	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment . . .	<b>20a</b>	
<b>12</b> Depletion.	<b>12</b>		<b>b</b> Other business property . . .	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions).	<b>13</b>		Repairs and maintenance. . . . .		
<b>14</b> Employee benefit programs (other than on line 19).	<b>14</b>		<b>22</b> Supplies (not included in Part III).	<b>22</b>	6,092.
<b>15</b> Insurance (other than health).	<b>15</b>		<b>23</b> Taxes and licenses.	<b>23</b>	831.
<b>16</b> Interest (see instr.):			<b>24</b> Travel and meals:		
<b>a</b> Mortgage (paid to banks, etc.).	<b>16a</b>		<b>a</b> Travel. . . . .	<b>24a</b>	
<b>b</b> Other . . . . .	<b>16b</b>		<b>b</b> Deductible meals (see instructions)	<b>24b</b>	
<b>17</b> Legal and professional services	<b>17</b>	350.	<b>25</b> Utilities.	<b>25</b>	
<b>28</b> <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27b.	<b>28</b>		<b>26</b> Wages (less employment credits).	<b>26</b>	
<b>29</b> Tentative profit or (loss). Subtract line 28 from line 7.	<b>29</b>		<b>27a</b> Other expenses (from line 48).	<b>27a</b>	1,237.
<b>30</b> Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.			<b>b</b> Energy efficient commercial buildings deduction (attach Form 7205).	<b>27b</b>	
<b>Simplified method filers only:</b> Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30.	<b>30</b>				
<b>31</b> <b>Net profit or (loss).</b> Subtract line 30 from line 29.					
• If a profit, enter on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see instructions.) Estates and trusts, enter on <b>Form 1041, line 3</b> .					
• If a loss, you <b>must</b> go to line 32.					
<b>32</b> If you have a loss, check the box that describes your investment in this activity. See instructions.					
• If you checked 32a, enter the loss on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on <b>Form 1041, line 3</b> .					
• If you checked 32b, you <b>must</b> attach <b>Form 6198</b> . Your loss may be limited.					
	<b>31</b>				-11,965.
	<b>32a</b>		<input checked="" type="checkbox"/> All investment is at risk.		
	<b>32b</b>		<input type="checkbox"/> Some investment is not at risk.		

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

<b>33</b> Method(s) used to value closing inventory: <b>a</b> <input type="checkbox"/> Cost <b>b</b> <input type="checkbox"/> Lower of cost or market <b>c</b> <input type="checkbox"/> Other (attach explanation)	
<b>34</b> Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. ....	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>35</b> Inventory at beginning of year. If different from last year's closing inventory, attach explanation. ....	<b>35</b>
<b>36</b> Purchases less cost of items withdrawn for personal use. ....	<b>36</b>
<b>37</b> Cost of labor. Do not include any amounts paid to yourself. ....	<b>37</b>
<b>38</b> Materials and supplies. ....	<b>38</b>
<b>39</b> Other costs. ....	<b>39</b>
<b>40</b> Add lines 35 through 39. ....	<b>40</b>
<b>41</b> Inventory at end of year. ....	<b>41</b>
<b>42</b> <b>Cost of goods sold.</b> Subtract line 41 from line 40. Enter the result here and on line 4. ....	<b>42</b>

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

**43** When did you place your vehicle in service for business purposes? (month/day/year) \_\_\_\_\_

**44** Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:

**a** Business \_\_\_\_\_ **b** Commuting (see instructions) \_\_\_\_\_ **c** Other \_\_\_\_\_

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

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

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

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

**Part V Other Expenses.** List below business expenses not included on lines 8-26, line 27b, or line 30.

BANK CHARGES	224.
PERMIT FEES	223.
TELEPHONE	790.
<b>48</b> <b>Total other expenses.</b> Enter here and on line 27a. ....	<b>48</b> 1,237.

**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

Name(s) shown on return

**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.

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

OMB No. 1545-0074

**2023**

Attachment  
Sequence No. **13**

Your social security number

PHILIP SMITH AND MARY

**Part I** **Income or Loss From Rental Real Estate and Royalties**

**Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

- A** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions. ☐ Yes ☒ No
- B** If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

**1 a** Physical address of each property (street, city, state, ZIP code)

**A** 27 & 29 PERALTA AVE, SAN FRANCISCO, CA 94110

**B**

**C**

**1 b** Type of Property  
(from list below)

**A** 2

**B**

**C**

**2** For each rental real estate property listed above, report the number of fair rental and personal use days. Check the **QJV** box only if you meet the requirements to file as a qualified joint venture. See instructions.

**Fair Rental Days**

**Personal Use Days**

**QJV**

**A**

**B**

**C**

365

**Type of Property:**

1 Single Family Residence

3 Vacation/Short-Term Rental

5 Land

7 Self-Rental

2 Multi-Family Residence

4 Commercial

6 Royalties

8 Other (describe) \_\_\_\_\_

**Income:**

**3** Rents received

**3**

61,896.

**4** Royalties received

**4**

**Expenses:**

**5** Advertising

**5**

**6** Auto and travel (see instructions)

**6**

**7** Cleaning and maintenance

**7**

**8** Commissions

**8**

**9** Insurance

**9**

1,566.

**10** Legal and other professional fees

**10**

175.

**11** Management fees

**11**

**12** Mortgage interest paid to banks, etc. (see instructions)

**12**

**13** Other interest

**13**

**14** Repairs

**14**

**15** Supplies

**15**

**16** Taxes

**16**

3,670.

**17** Utilities

**17**

4,044.

**18** Depreciation expense or depletion

**18**

5,479.

**19** Other (list) SEE STM 1

**19**

166.

**20** Total expenses. Add lines 5 through 19

**20**

15,100.

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**.

46,796.

**22** Deductible rental real estate loss after limitation, if any, on **Form 8582** (see instructions)

**22**

**23 a** Total of all amounts reported on line 3 for all rental properties

**23 a**

61,896.

**b** Total of all amounts reported on line 4 for all royalty properties

**23 b**

**c** Total of all amounts reported on line 12 for all properties

**23 c**

**d** Total of all amounts reported on line 18 for all properties

**23 d**

5,479.

**e** Total of all amounts reported on line 20 for all properties

**23 e**

15,100.

**24** **Income.** Add positive amounts shown on line 21. **Do not** include any losses

**24**

46,796.

**25** **Losses.** Add royalty losses from line and rental real estate losses from line 22. Enter total losses here

**25**

**26** **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2.

**26**

46,796.

**BAA** For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023



**Qualified Business Income Deduction  
Simplified Computation**

OMB No. 1545-2294

**2023**Attachment  
Sequence No. **55****Attach to your tax return.****Go to [www.irs.gov/Form8995](https://www.irs.gov/Form8995) for instructions and the latest information.**

Name(s) shown on return

**PHILIP SMITH AND MARY**

Your taxpayer identification number

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

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

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	A/C CONSTRUCTION		-11,965.
ii	RENTAL REAL ESTATE ENTERPRISE 1		46,796.
iii			
iv			
v			

  

2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c).	2	34,831.	
3	Qualified business net (loss) carryforward from the prior year.	3	( 0.)	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	34,831.	
5	Qualified business income component. Multiply line 4 by 20% (0.20).	5	6,966.	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions).	6	0.	
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year.	7	( 0.)	
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8	0.	
9	REIT and PTP component. Multiply line 8 by 20% (0.20).	9	0.	
10	Qualified business income deduction before the income limitation. Add lines 5 and 9.	10	6,966.	
11	Taxable income before qualified business income deduction (see instructions).	11	84,810.	
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions).	12	0.	
13	Subtract line 12 from line 11. If zero or less, enter -0-	13	84,810.	
14	Income limitation. Multiply line 13 by 20% (0.20).	14	16,962.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions).	15	6,966.	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-	16	( 0.)	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-	17	( 0.)	

**BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.**Form **8995** (2023)

Form **8936**Department of the Treasury  
Internal Revenue Service**Clean Vehicle Credits**

OMB No. 1545-2137

**2023**Attachment  
Sequence No. **69****Attach to your tax return.****Go to [www.irs.gov/Form8936](http://www.irs.gov/Form8936) for instructions and the latest information.**

Name(s) shown on return

Identifying number

**PHILIP SMITH AND MARY**

**Notes:**

- Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during the tax year.
- Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" text below.

**Part I Modified Adjusted Gross Income Amount**

<b>1a</b>	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR	<b>1a</b>	115,510.		
<b>b</b>	Enter any income from Puerto Rico you excluded	<b>1b</b>			
<b>c</b>	Enter any amount from Form 2555, line 45	<b>1c</b>			
<b>d</b>	Enter any amount from Form 2555, line 50	<b>1d</b>			
<b>e</b>	Enter any amount from Form 4563, line 15	<b>1e</b>			
<b>2</b>	Add lines 1a through 1e	<b>2</b>		115,510.	
<b>3a</b>	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR	<b>3a</b>	0.		
<b>b</b>	Enter any income from Puerto Rico you excluded	<b>3b</b>			
<b>c</b>	Enter any amount from Form 2555, line 45	<b>3c</b>			
<b>d</b>	Enter any amount from Form 2555, line 50	<b>3d</b>			
<b>e</b>	Enter any amount from Form 4563, line 15	<b>3e</b>			
<b>4</b>	Add lines 3a through 3e	<b>4</b>			
<b>5</b>	Enter the <b>smaller</b> of line 2 or line 4	<b>5</b>		0.	

**Part II Credit for Business/Investment Use Part of New Clean Vehicles**

**Note:** Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household).

<b>6</b>	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)	<b>6</b>	
<b>7</b>	New clean vehicle credit from partnerships and S corporations (see instructions)	<b>7</b>	
<b>8</b>	<b>Business/investment use part of credit.</b> Add lines 6 and 7. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y	<b>8</b>	

**Part III Credit for Personal Use Part of New Clean Vehicles**

**Note:** You can't claim the Part III credit if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household).

<b>9</b>	Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936)	<b>9</b>	7,500.
<b>10</b>	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	<b>10</b>	8,899.
<b>11</b>	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	<b>11</b>	
<b>12</b>	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the personal use part of the credit	<b>12</b>	8,899.
<b>13</b>	<b>Personal use part of credit.</b> Enter the <b>smaller</b> of line 9 or line 12 here and on Schedule 3 (Form 1040), line 6f. If line 12 is smaller than line 9, see instructions	<b>13</b>	7,500.

**Part IV Credit for Previously Owned Clean Vehicles**

**Note:** You can't claim the Part IV credit if Part I, line 5, is more than \$75,000 (\$150,000 if married filing jointly or a qualifying surviving spouse; \$112,500 if head of household).

<b>14</b>	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)	<b>14</b>	
<b>15</b>	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	<b>15</b>	
<b>16</b>	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	<b>16</b>	
<b>17</b>	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV credit	<b>17</b>	
<b>18</b>	Enter the <b>smaller</b> of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line 17 is smaller than line 14, see instructions	<b>18</b>	

**Part V Credit for Qualified Commercial Clean Vehicles**

<b>19</b>	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)	<b>19</b>	
<b>20</b>	Qualified commercial clean vehicle credit from partnerships and S corporations (see instructions)	<b>20</b>	
	Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1aa		

**BAA For Paperwork Reduction Act Notice, see separate instructions.**Form **8936** (2023)

**SCHEDULE A**  
**(Form 8936)**

Department of the Treasury  
Internal Revenue Service

**Clean Vehicle Credit Amount**

Attach to your tax return.  
Go to [www.irs.gov/Form8936](https://www.irs.gov/Form8936) for instructions and the latest information.

OMB No. 1545-2137

**2023**

Attachment  
Sequence No. **69A**

Name(s) shown on return

PHILIP SMITH AND MARY

Identifying number

**Part I** **Vehicle Details**

- 1a** Year ..... 2023
- b** Make ..... TESLA
- c** Model ..... MODEL Y
- 2** Vehicle identification number (VIN) (see instructions) ..... 7SAYGDEF9PF710676
- 3** Enter date vehicle was placed in service (MM/DD/YYYY) ..... 03/17/2023
- 4** Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception applies. See instructions.  
☐ **Yes. Stop here.** You can't claim a credit amount for a vehicle used primarily outside the United States.  
☒ **No.**
- 5** Does the VIN entered on line 2 belong to a **new clean vehicle** placed in service during the tax year? See instructions for definitions.  
☒ **Yes.** Go to Part II.  
☐ **No.** Go to line 6.
- 6** Does the VIN entered on line 2 belong to a **previously owned clean vehicle** acquired after 2022 and placed in service during the tax year? See instructions for definitions.  
☐ **Yes.** Go to Part IV.  
☐ **No.** Go to line 7.
- 7** Does the VIN entered on line 2 belong to a **qualified commercial clean vehicle** acquired after 2022 and placed in service during the tax year? See instructions for definitions.  
☐ **Yes.** Go to Part V.  
☐ **No. Stop here.** You can't use this schedule to figure a credit amount for a vehicle not described on line 5, 6, or 7.

**Part II** **Credit Amount for Business/Investment Use Part of New Clean Vehicle**

- 8** Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person.  
☒ **Yes.**  
☐ **No. Stop here.** You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired for resale.

<b>9</b>	Tentative credit amount (see instructions) .....	<b>9</b>	7,500.
<b>10</b>	Business/investment use percentage (see instructions) .....	<b>10</b>	%
<b>11</b>	Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below .....	<b>11</b>	

**Part III** **Credit Amount for Personal Use Part of New Clean Vehicle**

<b>12</b>	Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936 .....	<b>12</b>	7,500.
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**BAA For Paperwork Reduction Act Notice, see the Form 8936 instructions.**

**Schedule A (Form 8936) 2023**

**Part IV Credit Amount for Previously Owned Clean Vehicle**

- 13a** Is the sales price of the vehicle more than \$25,000?  
☐ **Yes. Stop here.** The vehicle doesn't qualify for the Part IV credit.  
☐ **No.**
- b** Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle from another person.  
☐ **Yes.**  
☐ **No. Stop here.** You can't claim a credit amount for a vehicle you didn't acquire for use or acquired for resale.
- c** Can you be claimed as a dependent on another person's tax return, such as your parent's return?  
☐ **Yes. Stop here.** You can't claim a credit amount if you can be claimed as a dependent.  
☐ **No.**
- d** Is the vehicle a qualified fuel cell motor vehicle? See instructions.  
☐ **Yes.**  
☐ **No.**

<b>14</b>	Enter the sales price of the vehicle.....	<b>14</b>	
<b>15</b>	Multiply line 14 by 30% (0.30).....	<b>15</b>	
<b>16</b>	Maximum vehicle credit amount.....	<b>16</b>	
<b>17</b>	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line 14 in Part IV of Form 8936.....	<b>17</b>	

**Part V Credit Amount for Qualified Commercial Clean Vehicle**

- 18a** Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exception for certain tax-exempt entities discussed in the instructions applies.  
☐ **Yes.**  
☐ **No. Stop here.** The vehicle is not a qualified commercial clean vehicle unless the exception applies.
- b** Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person.  
☐ **Yes.**  
☐ **No. Stop here.** You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired for resale.
- c** Is the vehicle also powered by gas or diesel? See instructions.  
☐ **Yes.**  
☐ **No.**

<b>19</b>	Enter the cost or other basis of the vehicle. See instructions.....	<b>19</b>	
<b>20</b>	Section 179 expense deduction (see instructions).....	<b>20</b>	
	Subtract line 20 from line 19.....		
<b>22</b>	Multiply line     by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]. .....	<b>22</b>	
<b>23</b>	Enter the incremental cost of the vehicle. See instructions.....	<b>23</b>	
<b>24</b>	Enter the smaller of line 22 or line 23.....	<b>24</b>	
<b>25</b>	<b>Maximum credit.</b> Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is 14,000 pounds or more).....	<b>25</b>	
<b>26</b>	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V of Form 8936.....	<b>26</b>	

Form **5695**Department of the Treasury  
Internal Revenue Service**Residential Energy Credits**

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

Go to [www.irs.gov/Form5695](http://www.irs.gov/Form5695) for instructions and the latest information.

OMB No. 1545-0074

**2023**Attachment  
Sequence No. **75**

Name(s) shown on return

PHILIP SMITH AND MARY

Your social security number

**Part I Residential Clean Energy Credit** (See instructions before completing this part.)**Note:** Skip lines 1 through 11 if you only have a **credit carryforward from 2022**.Enter the complete address of the home where you installed the property and/or technology associated with lines 1 through 4 and 5b.  
For more than one home, see instructions.

Number and street	Unit no.	City or town	State	ZIP code
1 Qualified solar electric property costs.....				
2 Qualified solar water heating property costs.....				
3 Qualified small wind energy property costs.....				
4 Qualified geothermal heat pump property costs.....				
5a Qualified battery storage technology. Does the qualified battery storage technology have a capacity of at least 3 kilowatt hours? (See instructions.) If you checked the "No" box, you cannot claim a credit for qualified battery storage technology.....				
b If you checked the "Yes" box, enter the qualified battery technology costs.....				
6a Add lines 1 through 5b.....				
b Multiply line 6a by 30% (0.30).....				
7a Qualified fuel cell property. Was qualified fuel cell property installed on, or in connection with, your main home located in the United States? (See instructions.).....				
If you checked the "No" box, you cannot claim a credit for qualified fuel cell property. Skip lines 7b through 11.				
b Enter the complete address of the main home where you installed the fuel cell property.				
Number and street				
Unit no.				
City or town				
State				
ZIP code				
8 Qualified fuel cell property costs.....				
9 Multiply line 8 by 30% (0.30).....				
10 Kilowatt capacity of property on line 8 above... X \$1,000...				
11 Enter the smaller of line 9 or line 10.....				
12 Credit carryforward from 2022. Enter the amount, if any, from your 2022 Form 5695, line 16.....				
13 Add lines 6b, 11, and 12.....				
14 Limitation based on tax liability. Enter the amount from the Residential Clean Energy Credit Limit Worksheet. (See instructions.).....				
15 Residential clean energy credit. Enter the smaller of line 13 or line 14. Also include this amount on Schedule 3 (Form 1040), line 5a.....				
16 Credit carryforward to 2024. If line 15 is less than line 13, subtract line 15 from line 13.....				

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

FDIA5712L 06/29/23

Form **5695** (2023)

# Expenses for Business Use of Your Home

File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.  
Go to [www.irs.gov/Form8829](http://www.irs.gov/Form8829) for instructions and the latest information.

PHILIP SMITH

**Part I Part of Your Home Used for Business**

1	Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions).....	1	350
2	Total area of home .....	2	4,080
3	Divide line 1 by line 2. Enter the result as a percentage..... <b>For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7.</b>	3	8.58 %
4	Multiply days used for daycare during year by hours used per day.....	4	hr
5	If you started or stopped using your home for daycare during the year, see instructions; otherwise, enter 8,760.....	5	hr
6	Divide line 4 by line 5. Enter the result as a decimal amount .....	6	
7	Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3.....	7	8.58 %

**Part II Figure Your Allowable Deduction**

8	Enter the amount from Schedule C, line 29, <b>plus</b> any gain derived from the business use of your home, <b>minus</b> any loss from the trade or business not derived from the business use of your home. See instructions.	8	-11,965.
See instructions for columns (a) and (b) before completing lines 9-22.			
		(a) Direct expenses	(b) Indirect expenses
9	Casualty losses (see instructions).....	9	
10	Deductible mortgage interest (see instructions)....	10	
11	Real estate taxes (see instructions).....	11	
12	Add lines 9, 10, and 11.....	12	
13	Multiply line 12, column (b), by line 7.....	13	
14	Add line 12, column (a), and line 13.....	14	
15	Subtract line 14 from line 8. If zero or less, enter -0-.....	15	0.
16	Excess mortgage interest (see instructions).....	16	
17	Excess real estate taxes (see instructions).....	17	9,162.
18	Insurance.....	18	3,540.
19	Rent.....	19	
20	Repairs and maintenance.....	20	
	Utilities.....		4,363.
22	Other expenses (see instructions).....	22	
23	Add lines 16 through 22.....	23	17,065.
24	Multiply line 23, column (b), by line 7.....	24	1,464.
25	Carryover of prior year operating expenses (see instructions).....	25	3,305.
26	Add line 23, column (a), line 24, and line 25.....	26	4,769.
27	Allowable operating expenses. Enter the <b>smaller</b> of line 15 or line 26.....	27	
28	Limit on excess casualty losses and depreciation. Subtract line 27 from line 15.....	28	
29	Excess casualty losses (see instructions).....	29	
30	Depreciation of your home from line 42 below.....	30	1,124.
31	Carryover of prior year excess casualty losses and depreciation (see instructions).....	31	2,514.
32	Add lines 29 through 31.....	32	3,638.
33	Allowable excess casualty losses and depreciation. Enter the <b>smaller</b> of line 28 or line 32.....	33	
34	Add lines 14, 27, and 33.....	34	
35	Casualty loss portion, if any, from lines 14 and 33. Carry amount to <b>Form 4684</b> . See instructions.....	35	
36	<b>Allowable expenses for business use of your home.</b> Subtract line 35 from line 34. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions.....	36	0.

**Part III Depreciation of Your Home**

37	Enter the <b>smaller</b> of your home's adjusted basis or its fair market value. See instructions.....	37	450,000.
38	Value of land included on line 37.....	38	
39	Basis of building. Subtract line 38 from line 37.....	39	450,000.
40	Business basis of building. Multiply line 39 by line 7.....	40	38,610.
41	Depreciation percentage (see instructions).....	41	2.564 %
42	Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above.....	42	1,124.

**Part IV Carryover of Unallowed Expenses to 2024**

43	Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0-.....	43	4,769.
44	Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-.....	44	3,638.

Form **4562**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](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

**2023**Attachment  
Sequence No. **179**

Name(s) shown on return

PHILIP SMITH AND MARY

Business or activity to which this form relates

**SCHEDULE C - A/C CONSTRUCTION****Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions) .....	1	1,160,000.
2	Total cost of section 179 property placed in service (see instructions) .....	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions) .....	3	2,890,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29. ....	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7. ....	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8. ....	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562. ....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs. ....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. ....	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12. ....	13	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

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

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

17	MACRS deductions for assets placed in service in tax years beginning before 2023 .....	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. .... <input type="checkbox"/>		

**Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System**

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

**Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System**

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

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

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

**BAA For Paperwork Reduction Act Notice, see separate instructions.**

FDIZ0812L 06/22/23

Form **4562** (2023)

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

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

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

<b>24a</b> Do you have evidence to support the business/investment use claimed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						<b>24b</b> If 'Yes,' is the evidence written? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							<b>25</b>		
<b>26</b> Property used more than 50% in a qualified business use:									
FORD T150 TR	11/18/15	66.67	36,138.	24,093.	5.0	200DB HY			
<b>27</b> Property used 50% or less in a qualified business use:									
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							<b>28</b>	0.	
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1							<b>29</b>	0.	

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

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

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
<b>30</b> Total business/investment miles driven during the year ( <b>don't</b> include commuting miles)	8,000					
<b>31</b> Total commuting miles driven during the year						
<b>32</b> Total other personal (noncommuting) miles driven	4,000					
<b>33</b> Total miles driven during the year. Add lines 30 through 32	12,000					
	Yes	No	Yes	No	Yes	No
<b>34</b> Was the vehicle available for personal use during off-duty hours?	X					
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?	X					
<b>36</b> Is another vehicle available for personal use?	X					

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

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

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

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

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2023 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2023 tax year					<b>43</b>
<b>44</b> Total. Add amounts in column (f). See the instructions for where to report.					<b>44</b>



2023

## FEDERAL STATEMENTS

PAGE 1

PHILIP SMITH AND MARY

**STATEMENT 1**  
**SCHEDULE E, LINE 19 - 27 & 29 PERALTA AVE**  
**OTHER RENTAL AND ROYALTY EXPENSES**

AMORTIZATION.....	\$	48.
LICENSES AND PERMITS.....		118.
TOTAL	\$	<u>166.</u>

**STATEMENT 2**  
**FORM 8829, LINE 42**  
**DEPRECIATION ALLOWABLE**BUILDING

1. COST/BASIS.....	450,000.
2. BUSINESS PERCENT.....	8.58%
3. DEPRECIATION BASIS (LINE 1 MULTIPLIED BY LINE 2).....	38,610.
4. DEPRECIATION RATE.....	2.564%
5. DEPRECIATION OF BUILDING (LINE 3 MULTIPLIED BY LINE 4).....	<u>990.</u>

IMPROVEMENTS

1. COST/BASIS.....	60,500.
2. BUSINESS PERCENT.....	8.58%
3. DEPRECIATION BASIS (LINE 1 MULTIPLIED BY LINE 2).....	5,191.
4. DEPRECIATION RATE.....	2.564%
5. DEPRECIATION OF IMPROVEMENTS (LINE 3 MULTIPLIED BY LINE 4).....	<u>134.</u>
TOTAL	\$ <u><u>1,124.</u></u>

## PHILIP SMITH AND MARY

**SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION**

THE TAXPAYER HEREBY MAKES THE DE MINIMIS SAFE HARBOR ELECTION UNDER REGULATION 1.263(A)-1(F) .

PHILIP SMITH

MARY SMITH

21325 BACK DRIVE  
SMITH, CA 95713

TAXABLE YEAR

FORM

**2023****California e-file Signature Authorization for Individuals****8879**

Your name

**PHILIP SMITH**

Your SSN or ITIN

Spouse's/RDP's name

**MARY SMITH**

Spouse's/RDP's SSN or ITIN

**Part I Tax Return Information** (whole dollars only)

- 1 California adjusted gross income (AGI). See instructions ..... 1 74,508.
- 2 Amount you owe. See instructions ..... 2 534.
- 3 Refund or no amount due. See instructions ..... 3 \_\_\_\_\_

**Part II Taxpayer Declaration and Signature Authorization** (Be sure you obtain and keep a copy of your return.)

Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2023, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider, including my name, address, and social security number (SSN) or individual tax identification number (ITIN), and the amounts shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If applicable, I authorize an electronic funds withdrawal of the amount on line 2 and/or the estimated tax payments as shown on my return and on form FTB 8455, California e-file Payment Record for Individuals, or a comparable form. If applicable, I declare that direct deposit refund amount on line 3 agrees with the direct deposit authorization stated on my return. If I have filed a joint return, this is an irrevocable appointment of the other spouse/registered domestic partner (RDP) as an agent to authorize an electronic funds withdrawal or direct deposit. I authorize my ERO, transmitter, or intermediate service provider to transmit my complete return to the Franchise Tax Board (FTB). **If the processing of my return or refund is delayed, I authorize the FTB to disclose to my ERO, intermediate service provider, and/or transmitter the reason(s) for the delay or the date when the refund was sent.** If I am filing a balance due return, I understand that if the FTB does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I acknowledge that I have read and consent to the Electronic Funds Withdrawal Consent included on the copy of my electronic income tax return. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

☒ I authorize GOLDEN STATE ACCOUNTING INC. to enter my PIN 36432  
ERO firm name Do not enter all zeros

as my signature on my 2023 e-filed California individual income tax return.

☐ I will enter my PIN as my signature on my 2023 e-filed California individual income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ \_\_\_\_\_

Date ▶ \_\_\_\_\_

**Spouse's/RDP's PIN: check one box only**

☒ I authorize GOLDEN STATE ACCOUNTING INC. to enter my PIN 48777  
ERO firm name Do not enter all zeros

as my signature on my 2023 e-filed California individual income tax return.

☐ I will enter my PIN as my signature on my 2023 e-filed California individual income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's/RDP's  
signature ▶ \_\_\_\_\_

Date ▶ \_\_\_\_\_

Practitioner PIN Method Returns Only – continue below

**Part III Certification and Authentication – Practitioner PIN Method Only****ERO's Electronic Filer Identification Number (EFIN)/PIN.**

Enter your six-digit EFIN followed by your five-digit self-selected PIN.

68474294965

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the 2023 California individual income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and FTB Pub. 1345, 2023 Handbook for Authorized e-file Providers.

ERO's signature ▶ DAVID HAASE, CPA

Date ▶ \_\_\_\_\_

MAIL 3582 PAYMENTS TO:

FRANCHISE TAX BOARD  
P.O. BOX 942867  
SACRAMENTO, CA 94267-0008

Do not mail a paper copy of your tax return with the payment voucher.  
If amount of payment is zero, do not mail this voucher.

**When to pay:**

**Calendar Year – File and pay by April 15, 2024**

When a due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

**Pay online:** Go Green! Enjoy the ease and secure options for online payments.

You can make an immediate payment or schedule a payment up to a year in advance.

- **Bank Account** – Web Pay (free)
- **Credit Card** (service fee)

Go to [ftb.ca.gov/pay](https://ftb.ca.gov/pay) for more information.

**Do not mail this voucher if you pay online.**



**Where to pay:** Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write the taxpayer's social security number (SSN) or individual taxpayer identification number (ITIN) and "2023 FTB 3582" on the check or money order. Detach the voucher below. Enclose, but **do not** staple, payment with the voucher and mail to:

**FRANCHISE TAX BOARD  
PO BOX 942867  
SACRAMENTO CA 94267-0008**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

DETACH HERE

IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER

DETACH HERE

**CAUTION:** You may be required to pay electronically. See instructions.

TAXABLE YEAR

**2023**

**Payment Voucher for  
Individual e-filed Returns**

CALIFORNIA FORM

**3582 (e-file)**

SMIT

23

PHILIP  
MARY

SMITH  
SMITH

21325 BACK DR  
SMITH

CA 95713

AMOUNT OF PAYMENT

534.

2023

California Resident  
Income Tax Return

540

APE

ATTACH FEDERAL RETURN

SMIT  
PHILIP SMITH  
MARY SMITH

23 PBA 238210

21325 BACK DR  
SMITH CA 95713

02-19-1952 08-17-1955

## Principal Residence

Enter your county at time of filing (see instructions)

☒ PLACERIf your address above is the same as your principal/physical residence address at the time of filing, check this box. ☒

If not, enter below your principal/physical residence address at the time of filing.

Street address (number and street) (If foreign address, see instructions.)

Apt. no/ste. no.

City

State

ZIP code

Filing  
StatusIf your California filing status is different from your federal filing status, check the box here. ☐1 ☐ Single4 ☐ Head of household (with qualifying person). See instructions.2 ☒ Married/RDP filing jointly (even if only one spouse/RDP had income). See instructions.5 ☐ Qualifying surviving spouse/RDP. Enter year spouse/RDP died. \_\_\_\_\_

See instructions. \_\_\_\_\_

3 ☐ Married/RDP filing separately. Enter spouse's/RDP's SSN or ITIN above and full name here. \_\_\_\_\_6 ☐ If someone can claim you (or your spouse/RDP) as a dependent, check the box here. See instr. ☐

## Exemptions

► For line 7, line 8, line 9, and line 10: Multiply the number you enter in the box by the pre-printed dollar amount for that line.

Whole dollars only

7 **Personal:** If you checked box 1, 3, or 4 above, enter 1 in the box. If you checked box 2 or 5, enter 2 in the box. If you checked the box on line 6, see instructions. ☒ 7 ☐ 2 x \$144 = ☒ \$ 288.8 **Blind:** If you (or your spouse/RDP) are visually impaired, enter 1; if both are visually impaired, enter 2. See instructions. ☒ 8 ☐ x \$144 = ☒ \$9 **Senior:** If you (or your spouse/RDP) are 65 or older, enter 1; if both are 65 or older, enter 2. See instructions. ☒ 9 ☐ 2 x \$144 = ☒ \$ 288.

**Exemptions**Your name: **PHILIP SMITH**

Your SSN or ITIN: \_\_\_\_\_

**10 Dependents: Do not include yourself or your spouse/RDP.**

	Dependent 1	Dependent 2	Dependent 3
First Name	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Last Name	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SSN. See instr.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dependent's relationship to you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Total dependent exemptions ..... • 10 ☐ x \$446 = • \$ \_\_\_\_\_**11 Exemption amount:** Add line 7 through line 10. Transfer this amount to line 32. .... • 11 \$ 576.**Taxable Income**

**12** State wages from your federal Form(s) W-2, box 16. .... • 12 \_\_\_\_\_

**13** Enter federal adjusted gross income from federal Form 1040 or 1040-SR, line 11. .... • 13 115,510.

**14** California adjustments – subtractions. Enter the amount from Schedule CA (540), Part I, line 27, column B. .... • 14 41,002.

**15** Subtract line 14 from line 13. If less than zero, enter the result in parentheses. See instructions. .... 15 74,508.

**16** California adjustments – additions. Enter the amount from Schedule CA (540), Part I, line 27, column C. .... • 16 \_\_\_\_\_

**17** California adjusted gross income. Combine line 15 and line 16. .... • 17 74,508.

**18** Enter the larger of Your California **itemized deductions** from Schedule CA (540), Part II, line 30; **OR** Your California **standard deduction** shown below for your filing status:  
• Single or Married/RDP filing separately. .... \$5,363  
• Married/RDP filing jointly, Head of household, or Qualifying surviving spouse/RDP. .... \$10,726  
If Married/RDP filing separately or the box on line 6 is checked, **STOP.** See instructions. .... • 18 10,726.

**19** Subtract line 18 from line 17. This is your **taxable income**. If less than zero, enter -0-. .... • 19 63,782.

**Tax**

☒ Tax Table ☐ Tax Rate Schedule

**31** Tax. Check the box if from: • ☐ FTB 3800 • ☐ FTB 3803. .... • 31 1,356.

**32** Exemption credits. Enter the amount from line 11. If your federal AGI is more than \$237,035, see instructions. .... • 32 576.

**33** Subtract line 32 from line 31. If less than zero, enter -0-. .... • 33 780.

**34** Tax. See instructions. Check the box if from: • ☐ Schedule G-1 • ☐ FTB 5870A .... • 34 \_\_\_\_\_

**35** Add line 33 and line 34. .... • 35 780.

**Special Credits**

**40** Nonrefundable Child and Dependent Care Expenses Credit. See instructions. .... • 40 \_\_\_\_\_

**43** Enter credit name ..... code • \_\_\_\_\_ and amount. .... • 43 \_\_\_\_\_

**44** Enter credit name ..... code • \_\_\_\_\_ and amount. .... • 44 \_\_\_\_\_

Your name: **PHILIP SMITH**

Your SSN or ITIN: \_\_\_\_\_

**Special Credits**

- 45 To claim more than two credits, see instructions. Attach Schedule P (540) ..... ● 45 \_\_\_\_\_
- 46 Nonrefundable Renter's Credit. See instructions ..... ● 46 \_\_\_\_\_
- 47 Add line 40 through line 46. These are your total credits ..... ● 47 \_\_\_\_\_
- 48 Subtract line 47 from line 35. If less than zero, enter -0- ..... ● 48 780.

**Other Taxes**

- 61 Alternative Minimum Tax. Attach Schedule P (540) ..... ● 61 \_\_\_\_\_
- 62 Mental Health Services Tax. See instructions ..... ● 62 \_\_\_\_\_
- 63 Other taxes and credit recapture. See instructions ..... ● 63 \_\_\_\_\_
- 64 Add line 48, line 61, line 62, and line 63. This is your total tax ..... ● 64 780.

**Payments**

- 71 California income tax withheld. See instructions ..... ● 71 246.
- 72 2023 California estimated tax and other payments. See instructions ..... ● 72 \_\_\_\_\_
- 73 Withholding (Form 592-B and/or Form 593). See instructions ..... ● 73 \_\_\_\_\_
- 74 Excess SDI (or VPD) withheld. See instructions ..... ● 74 0.
- 75 Earned Income Tax Credit (EITC). See instructions ..... ● 75 \_\_\_\_\_
- 76 Young Child Tax Credit (YCTC). See instructions ..... ● 76 \_\_\_\_\_
- 77 Foster Youth Tax Credit (FYTC). See instructions ..... ● 77 \_\_\_\_\_
- 78 Add line 71 through line 77. These are your total payments.  
See instructions ..... ● 78 246.

**Use Tax**

- 91 **Use Tax.** Do not leave blank. See instructions ..... ● 91 0.
- If line 91 is zero, check if: ☒ No use tax is owed. ☐ You paid your use tax obligation directly to CDTFA.

**ISR Penalty**

- 92 If you and your household had full-year health care coverage, check the box.  
See instructions. Medicare Part A or C coverage is qualifying health care coverage  
If you did not check the box, see instructions. .... ● ☒
- Individual Shared Responsibility (ISR) Penalty. See instructions ..... ● 92 \_\_\_\_\_

**Overpaid Tax/Tax Due**

- 93 Payments balance. If line 78 is more than line 91, subtract line 91 from line 78. .... ● 93 246.
- 94 **Use Tax balance.** If line 91 is more than line 78, subtract line 78 from line 91. .... ● 94 \_\_\_\_\_
- 95 Payments after Individual Shared Responsibility Penalty. If line 93 is more than line 92,  
subtract line 92 from line 93. .... ● 95 246.
- 96 Individual Shared Responsibility Penalty Balance. If line 92 is more than line 93,  
subtract line 93 from line 92. .... ● 96 \_\_\_\_\_
- 97 Overpaid tax. If line 95 is more than line 64, subtract line 64 from line 95. .... ● 97 \_\_\_\_\_

Your name: **PHILIP SMITH**

Your SSN or ITIN: \_\_\_\_\_

**Overpaid Tax/Tax Due**

- 98** Amount of line 97 you want applied to your **2024** estimated tax. ● **98** \_\_\_\_\_
- 99** Overpaid tax available this year. Subtract line 98 from line 97. ● **99** \_\_\_\_\_
- 100** Tax due. If line 95 is less than line 64, subtract line 95 from line 64. ● **100** \_\_\_\_\_ **534.**

**Contributions**

**Code Amount**

- California Seniors Special Fund. See instructions. ● **400** \_\_\_\_\_
- Alzheimer's Disease and Related Dementia Voluntary Tax Contribution Fund. ● **401** \_\_\_\_\_
- Rare and Endangered Species Preservation Voluntary Tax Contribution Program. ● **403** \_\_\_\_\_
- California Breast Cancer Research Voluntary Tax Contribution Fund. ● **405** \_\_\_\_\_
- California Firefighters' Memorial Voluntary Tax Contribution Fund. ● **406** \_\_\_\_\_
- Emergency Food for Families Voluntary Tax Contribution Fund. ● **407** \_\_\_\_\_
- California Peace Officer Memorial Foundation Voluntary Tax Contribution Fund. ● **408** \_\_\_\_\_
- California Sea Otter Voluntary Tax Contribution Fund. ● **410** \_\_\_\_\_
- California Cancer Research Voluntary Tax Contribution Fund. ● **413** \_\_\_\_\_
- School Supplies for Homeless Children Voluntary Tax Contribution Fund. ● **422** \_\_\_\_\_
- State Parks Protection Fund/Parks Pass Purchase. ● **423** \_\_\_\_\_
- Protect Our Coast and Oceans Voluntary Tax Contribution Fund. ● **424** \_\_\_\_\_
- Keep Arts in Schools Voluntary Tax Contribution Fund. ● **425** \_\_\_\_\_
- California Senior Citizen Advocacy Voluntary Tax Contribution Fund. ● **438** \_\_\_\_\_
- Native California Wildlife Rehabilitation Voluntary Tax Contribution Fund. ● **439** \_\_\_\_\_
- Rape Kit Backlog Voluntary Tax Contribution Fund. ● **440** \_\_\_\_\_
- Suicide Prevention Voluntary Tax Contribution Fund. ● **444** \_\_\_\_\_
- Mental Health Crisis Prevention Voluntary Tax Contribution Fund. ● **445** \_\_\_\_\_
- 110** Add amounts in code 400 through code 445. This is your total contribution. ● **110** \_\_\_\_\_



Your name: **PHILIP SMITH**

Your SSN or ITIN: \_\_\_\_\_

**Amount  
You  
Owe**

**111 AMOUNT YOU OWE.** If you do not have an amount on line 99, add line 94, line 96, line 100, and line 110. See instructions. **Do not send cash.**

Mail to: **FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0001** ..... ● **111** \_\_\_\_\_ **534.**  
Pay Online — Go to [ftb.ca.gov/pay](https://ftb.ca.gov/pay) for more information.

**Interest  
and  
Penalties**

**112** Interest, late return penalties, and late payment penalties ..... **112** \_\_\_\_\_

**113** Underpayment of estimated tax.

Check the box: ● ☐ **FTB 5805 attached** ● ☐ **FTB 5805F attached** ..... ● **113** \_\_\_\_\_

**114** Total amount due. See instructions. Enclose, but **do not** staple, any payment. ... **114** \_\_\_\_\_ **534.**

**Refund  
and  
Direct  
Deposit**

**115 REFUND OR NO AMOUNT DUE.** Subtract the sum of line 110, line 112, and line 113 from line 99. See instructions.

Mail to: **FRANCHISE TAX BOARD, PO BOX 942840, SACRAMENTO CA 94240-0001** ..... ● **115** \_\_\_\_\_ **0.**

Fill in the information to authorize direct deposit of your refund into one or two accounts. **Do not** attach a voided check or a deposit slip. See instructions.  
**Have you verified the routing and account numbers?** Use whole dollars only.

All or the following amount of my refund (line 115) is authorized for direct deposit into the account shown below:

● Type  
● Routing number ☐ Checking ● Account number ☐ **116** Direct deposit amount  
\_\_\_\_\_ ☐ Savings \_\_\_\_\_  
\_\_\_\_\_

The remaining amount of my refund (line 115) is authorized for direct deposit into the account shown below:

● Type  
● Routing number ☐ Checking ● Account number ☐ **117** Direct deposit amount  
\_\_\_\_\_ ☐ Savings \_\_\_\_\_  
\_\_\_\_\_

**Voter  
Info.**

For voter registration information, check the box and go to [sos.ca.gov/elections](https://sos.ca.gov/elections). See instructions. .... ☐

**Health  
Care  
Coverage  
Info.**

Do you want information on no-cost or low-cost health care coverage? By checking the "Yes" box, you authorize the FTB to share limited information from your tax return with Covered California. See instructions ..... ● ☐ Yes ☒ No

**Sign your tax return on Page 6**

Your name: **PHILIP SMITH**

Your SSN or ITIN:

**IMPORTANT:** See the instructions to find out if you should attach a copy of your complete federal tax return.

Our privacy notice can be found in annual tax booklets or online. Go to [ftb.ca.gov/privacy](https://ftb.ca.gov/privacy) to learn about our privacy policy statement, or go to [ftb.ca.gov/forms](https://ftb.ca.gov/forms) and search for **1131** to locate FTB 1131 EN-SP, Franchise Tax Board Privacy Notice on Collection. To request this notice by mail, call 800.338.0505 and enter form code **948** when instructed.

Under penalties of perjury, I declare that I have examined this tax return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Your signature

Date

Spouse's/RDP's signature (if a joint tax return, both must sign)

☒ Your email address. Enter only one email address.

☐ Preferred phone number

**Sign  
Here**

Paid preparer's signature (declaration of preparer is based on all information of which preparer has any knowledge)

**DAVID HAASE, CPA**

It is unlawful  
to forge a  
spouse's/  
RDP's  
signature.

Firm's name (or yours, if self-employed)

**GOLDEN STATE ACCOUNTING INC.**

● PTIN

**P02153415**

Firm's address

**1221 BRIDGEWAY SUITE 2  
SAUSALITO, CA 94965**

● Firm's FEIN

**205664372**

Joint tax  
return? See  
instructions.

Do you want to allow another person to discuss this tax return with us? See instructions. . . . . ● ☒ Yes

● ☐ No

Print Third Party Designee's Name

**DAVID HAASE CPA**

Telephone Number

**(415) - 331 - 9900**

# 2023 California Adjustments – Residents

## CA (540)

**Important:** Attach this schedule behind Form 540, Side 6 as a supporting California schedule.

Name(s) as shown on tax return

SSN or ITIN

**PHILIP SMITH AND MARY**

### Part I Income Adjustment Schedule

**Section A - Income** from federal Form 1040 or 1040-SR

**A Federal Amounts**  
(taxable amounts from  
your federal tax return)

**B Subtractions**  
See instructions

**C Additions**  
See instructions

<b>1a</b> Total amount from federal Form(s) W-2, box 1. See instructions . . . . .	<b>1a</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b</b> Household employee wages not reported on federal Form(s) W-2 . . . . .	<b>1b</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c</b> Tip income not reported on line 1a . . . . .	<b>1c</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d</b> Medicaid waiver payments not reported on federal Form(s) W-2. See instructions . . . . .	<b>1d</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>e</b> Taxable dependent care benefits from federal Form 2441, line 26 . . . . .	<b>1e</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>f</b> Employer-provided adoption benefits from federal Form 8839, line 29 . . . . .	<b>1f</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>g</b> Wages from federal Form 8919, line 6 . . . . .	<b>1g</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>h</b> Other earned income. See instrs. . . . .	<b>1h</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>i</b> Nontaxable combat pay election. See instructions . . . . .	<b>1i</b>			<input type="radio"/>
<b>z</b> Add line 1a through line 1i . . . . .	<b>1z</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2</b> Taxable interest. <b>a</b> <input type="radio"/> _____	<b>2b</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3</b> Ordinary dividends. See instructions. <b>a</b> <input type="radio"/> _____	<b>3b</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4</b> IRA distributions. See instructions. <b>a</b> <input type="radio"/> _____	<b>4b</b>	<input type="radio"/> 27,360.	<input type="radio"/>	<input type="radio"/>
<b>5</b> Pensions and annuities. See instructions. <b>a</b> <input type="radio"/> _____	<b>5b</b>	<input type="radio"/> 12,317.	<input type="radio"/>	<input type="radio"/>
<b>6</b> Social security benefits. <b>a</b> <input type="radio"/> 48,238.	<b>6b</b>	<input type="radio"/> 41,002.	<input type="radio"/> 41,002.	
<b>7</b> Capital gain or (loss). See instructions . . . . .	<b>7</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Section B - Additional Income** from federal Schedule 1 (Form 1040)

<b>1</b> Taxable refunds, credits, or offsets of state and local income taxes . . . . .	<b>1</b>	<input type="radio"/>	<input type="radio"/>	
<b>2 a</b> Alimony received. See instructions . . . . .	<b>2a</b>	<input type="radio"/>		<input type="radio"/>
<b>3</b> Business income or (loss). See instructions . . . . .	<b>3</b>	<input type="radio"/> -11,965.	<input type="radio"/>	<input type="radio"/>
<b>4</b> Other gains or (losses) . . . . .	<b>4</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5</b> Rental real estate, royalties, partnerships, S corporations, trusts, etc. . . . .	<b>5</b>	<input type="radio"/> 46,796.	<input type="radio"/>	<input type="radio"/>
<b>6</b> Farm income or (loss) . . . . .	<b>6</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>7</b> Unemployment compensation . . . . .	<b>7</b>	<input type="radio"/>	<input type="radio"/>	

Section B – Additional Income Continued	A Federal Amounts (taxable amounts from your federal tax return)	B Subtractions See instructions	C Additions See instructions
<b>8</b> Other income:			
<b>a</b> Federal net operating loss. .... <b>8a</b>	⊙ ( )		⊙
<b>b</b> Gambling ..... <b>8b</b>	⊙	⊙	
<b>c</b> Cancellation of debt ..... <b>8c</b>	⊙	⊙	⊙
<b>d</b> Foreign earned income exclusion from federal Form 2555 ..... <b>8d</b>	⊙ ( )		⊙
<b>e</b> Income from federal Form 8853 ..... <b>8e</b>	⊙		⊙
<b>f</b> Income from federal Form 8889 ..... <b>8f</b>	⊙	⊙	
<b>g</b> Alaska Permanent Fund dividends ..... <b>8g</b>	⊙		
<b>h</b> Jury duty pay ..... <b>8h</b>	⊙		
<b>i</b> Prizes and awards ..... <b>8i</b>	⊙		
<b>j</b> Activity not engaged in for profit income ..... <b>8j</b>	⊙		
<b>k</b> Stock options ..... <b>8k</b>	⊙		⊙
<b>l</b> 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 ..... <b>8l</b>	⊙		
<b>m</b> Olympic and Paralympic medals and USOC prize money ..... <b>8m</b>	⊙		
<b>n</b> IRC Section 951(a) inclusion ..... <b>8n</b>	⊙	⊙	
<b>o</b> IRC Section 951A(a) inclusion ..... <b>8o</b>	⊙	⊙	
<b>p</b> IRC Section 461(l) excess business loss adjustment ..... <b>8p</b>	⊙	⊙	⊙
<b>q</b> Taxable distributions from an ABLE account ..... <b>8q</b>	⊙		
<b>r</b> Scholarship and fellowship grants not reported on federal Form(s) W-2 ..... <b>8r</b>	⊙		
<b>s</b> Nontaxable amount of Medicaid waiver payments included on federal Form 1040, line 1a or line 1d ..... <b>8s</b>	⊙ ( )		
<b>t</b> Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental IRC Section 457 plan ..... <b>8t</b>	⊙		
<b>u</b> Wages earned while incarcerated ..... <b>8u</b>	⊙		
<b>z</b> Other income. List type and amount. ⊙ ..... <b>8z</b>	⊙	⊙	⊙

Section B – Additional Income Continued	A Federal Amounts (taxable amounts from your federal tax return)	B Subtractions See instructions	C Additions See instructions
9 a Total other income. Add lines 8a through 8z . . . 9a			
b1 Disaster loss deduction from form FTB 3805V . . . . . 9b1			
b2 NOL deduction from form FTB 3805V . . . . . 9b2			
b3 NOL deduction from form FTB 3805Z, 3807, or 3809. . . . . 9b3			
10 Total. Combine Section A, line 1z through line 7, and Section B, line 1 through line 7, and line 9a, in column A and column C. Add Section A, line 1z through line 7, and Section B, line 1 through line 7, line 9a, and line 9b1 through line 9b3 in column B (as applicable). See instructions . . . . . 10	115,510.	41,002.	

**Section C – Adjustments to Income**  
from federal Schedule 1 (Form 1040)

11 Educator expenses . . . . . 11			
12 Certain business expenses of reservists, performing artists, and fee-basis government officials . . . . . 12			
13 Health savings account deduction . . . . . 13			
14 Moving expenses. Attach form FTB 3913. See instructions. . . . . 14			
15 Deductible part of self-employment tax. See instructions. . . . . 15			
16 Self-employed SEP, SIMPLE, and qualified plans . . . . . 16			
17 Self-employed health insurance deduction. See instructions. . . . . 17			
18 Penalty on early withdrawal of savings. . . . . 18			
19 a Alimony paid . . . . . 19a			
b Recipient's: SSN <input type="radio"/> _____  Last Name <input type="radio"/> _____			
20 IRA deduction . . . . . 20			
Student loan interest deduction . . . . .			
22 Reserved for future use . . . . . 22			
23 Archer MSA deduction . . . . . 23			

Section C – Adjustments to Income Continued		A Federal Amounts (taxable amounts from your federal tax return)	B Subtractions See instructions	C Additions See instructions
<b>24</b> Other adjustments:				
<b>a</b> Jury duty pay.....	<b>24a</b>	<input type="radio"/>		
<b>b</b> Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit.....	<b>24b</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c</b> Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m.....	<b>24c</b>	<input type="radio"/>	<input type="radio"/>	
<b>d</b> Reforestation amortization and expenses....	<b>24d</b>	<input type="radio"/>	<input type="radio"/>	
<b>e</b> Repayment of supplemental unemployment benefits under the federal Trade Act of 1974.....	<b>24e</b>	<input type="radio"/>		
<b>f</b> Contributions to IRC Section 501(c)(18)(D) pension plans.....	<b>24f</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>g</b> Contributions by certain chaplains to IRC Section 403(b) plans.....	<b>24g</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>h</b> Attorney fees and court costs for actions involving certain unlawful discrimination claims.....	<b>24h</b>	<input type="radio"/>		
<b>i</b> Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations.....	<b>24i</b>	<input type="radio"/>	<input type="radio"/>	
<b>j</b> Housing deduction from federal Form 2555.....	<b>24j</b>	<input type="radio"/>	<input type="radio"/>	
<b>k</b> Excess deductions of IRC Section 67(e) expenses from federal Schedule K-1 (Form 1041).....	<b>24k</b>	<input type="radio"/>		
<b>z</b> Other adjustments. List type and amount.				
<input type="radio"/> .....	<b>24z</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>25</b> Total other adjustments. Add line 24a through line 24z.....	<b>25</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>26</b> Add line 11 through line 23 and line 25 in columns A, B, and C. See instructions.....	<b>26</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>27 Total.</b> Subtract line 26 from line 10 in columns A, B, and C. See instructions.....	<b>27</b>	<input type="radio"/> 115,510.	<input type="radio"/> 41,002.	<input type="radio"/>

**Part II Adjustments to Federal Itemized Deductions**Check the box if you did NOT itemize for federal but will itemize for California ..... ☒ ☐

	<b>A Federal Amounts</b> (from federal Schedule A (Form 1040 ))	<b>B Subtractions</b> See instructions	<b>C Additions</b> See instructions
<b>Medical and Dental Expenses</b> See instructions.			
<b>1</b> Medical and dental expenses..... <input checked="" type="radio"/> <u>4,294.</u> <b>1</b>			
<b>2</b> Enter amount from federal Form 1040 or 1040-SR, line 11 ..... <input checked="" type="radio"/> <u>115,510.</u> <b>2</b>			
<b>3</b> Multiply line 2 by 7.5% (0.075) ..... <input checked="" type="radio"/> <u>8,663.</u> <b>3</b>			
<b>4</b> Subtract line 3 from line 1. If line 3 is more than line 1, enter 0. .... <input checked="" type="radio"/> <b>4</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>
<b>Taxes You Paid</b>			
<b>5 a</b> State and local income tax or general sales taxes ..... <b>5a</b> <input checked="" type="radio"/> <u>1,462.</u> <input checked="" type="radio"/> <u>1,462.</u>			
<b>b</b> State and local real estate taxes ..... <b>5b</b> <input checked="" type="radio"/> <u>8,376.</u>			
<b>c</b> State and local personal property taxes ..... <b>5c</b> <input checked="" type="radio"/> <u>35.</u>			
<b>d</b> Add line 5a through line 5c. .... <b>5d</b> <input checked="" type="radio"/> <u>9,873.</u>			
<b>e</b> Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) in column A. Enter the amount from line 5a, column B in line 5e, column B. Enter the difference from line 5d and line 5e, column A in line 5e, column C. .... <b>5e</b> <input checked="" type="radio"/> <u>9,873.</u> <input checked="" type="radio"/> <u>1,462.</u> <input checked="" type="radio"/>			
<b>6</b> Other taxes. List type <input checked="" type="radio"/> <b>6</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>
<b>7</b> Add line 5e and line 6 ..... <b>7</b> <input checked="" type="radio"/> <u>9,873.</u> <input checked="" type="radio"/> <u>1,462.</u> <input checked="" type="radio"/>			
<b>Interest You Paid</b>			
<b>8 a</b> Home mortgage interest and points reported to you on federal Form 1098 ..... <b>8a</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>
<b>b</b> Home mortgage interest not reported to you on federal Form 1098 ..... <b>8b</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>
<b>c</b> Points not reported to you on federal Form 1098. .... <b>8c</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>
<b>d</b> Reserved for future use..... <b>8d</b>			
<b>e</b> Add line 8a through line 8c. .... <b>8e</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>
<b>9</b> Investment interest ..... <b>9</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>
<b>10</b> Add line 8e and line 9 ..... <b>10</b> <input checked="" type="radio"/>			<input checked="" type="radio"/>

Part II Adjustments to Federal Itemized Deductions Continued		A Federal Amounts (from federal Schedule A (Form 1040))	B Subtractions See instructions	C Additions See instructions
<b>Gifts to Charity</b>				
11	Gifts by cash or check.....	11		
12	Other than by cash or check.....	12		
13	Carryover from prior year.....	13		
14	Add line 11 through line 13.....	14		
<b>Casualty and Theft Losses</b>				
15	Casualty or theft loss(es) (other than net qualified disaster losses). Attach federal Form 4684. See instructions.....	15		
<b>Other Itemized Deductions</b>				
16	Other—from list in federal instructions.....	16		
17	Add lines 4, 7, 10, 14, 15, and 16 in columns A, B, and C. .	17	9,873.	1,462.

18 **Total.** Combine line 17 column A less column B plus column C. .... 18 8,411.

**Job Expenses and Certain Miscellaneous Deductions**

19 Unreimbursed employee expenses: job travel, union dues, job education, etc. Attach federal Form 2106 if required. See instructions. .... 19 \_\_\_\_\_

20 Tax preparation fees ..... 20 175.  
Other expenses: investment, safe deposit box, etc. List type. .... 20 \_\_\_\_\_

22 Add line 19 through line ..... 22 175.

23 Enter amount from federal Form 1040 or 1040-SR, line 11. .... 23 115,510.

24 Multiply line 23 by 2% (0.02). If less than zero, enter 0. .... 24 2,310.

25 Subtract line 24 from line 22. If line 24 is more than line 22, enter 0. .... 25 0.

26 **Total Itemized Deductions.** Add line 18 and line 25 ..... 26 8,411.

27 Other adjustments. See instructions. Specify. .... 27 \_\_\_\_\_

28 Combine line 26 and line 27 ..... 28 8,411.

29 **Is your federal AGI (Form 540, line 13) more than the amount shown below for your filing status?**  
 Single or married/RDP filing separately ..... \$237,035  
 Head of household ..... \$355,558  
 Married/RDP filing jointly or qualifying surviving spouse/RDP. .... \$474,075  
**No.** Transfer the amount on line 28 to line 29.  
**Yes.** Complete the Itemized Deductions Worksheet in the instructions for Schedule CA (540), line 29 ..... 29 8,411.

30 **Enter the larger of the amount on line 29 or your standard deduction shown below:**  
 Single or married/RDP filing separately. See instructions. .... \$5,363  
 Married/RDP filing jointly, head of household, or qualifying surviving spouse/RDP. .... \$10,726  
**Transfer the amount on line 30 to Form 540, line 18** ..... 30 10,726.