Form 1040 Department of the Treasury — Internal Revenue Service U.S. Individual Income Tax Return

2023

OMB No. 1545-0074

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

For the year Jan. 1-	–Dec.	31, 2023, or other tax ye	ear beginning	,	ending _	,	S	see s	separate	instructi	ons.	
Your first name and mi	iddle in	itial		Last name			Y	our	social sec	urity num	ber	
OSCAR ANDUJ									-47-7			
If joint return, spouse's	first na	ame and middle initial		Last name			S	pou	se's socia	l security	numb	er
BARBARA ANI							7	01	-36-9	030		
•		treet). If you have a P.O. bo	x, see instructions.			Apt. no.				lection (•	aign
6956 MEADOW										you, or y		\$3
	-	ou have a foreign address, al	so complete spaces b	elow. State		ZIP code	to	o go	to this f	und. Che	cking	
DALLAS, TX Foreign country name	752	30	Foreign province/sta	te/county		Foreign postal code			tax or re	l not cha fund.	nge	
Toleigh country hame			i oreigii province/sta	tercounty		i oreigii postai cod	6 ,		Г	You	Π \$	Spouse
Filing Status	Sir	ngle		Hea	d of hous	ehold (HOH)						
	Х Ма	arried filing jointly (even	if only one had inc	ome)								
one box.	Ма	arried filing separately (M	1FS)	Qua	alifying su	rviving spouse (C	QSS)					
	-	checked the MFS box, e		our spouse. If you che	cked the	HOH or QSS box	, enter the	chi	d's nam	e if the q	ualify	ing
		n is a child but not your							<u></u>			
•	-	time during 2023, did yo ge, or otherwise dispose		· ·	-					Yes	XΝ	lo
Standard s			ou as a dependent	_		dependent				-		
Deduction	Spo	ouse itemizes on a separ	ate return or you v	vere a dual-status alie	n							
Age/Blindness Y	ou:	Were born before .	January 2, 1959	Are blind	Spouse:	Was born be	fore Janua	ry 2	, 1959	Is bl	ind	
Dependents (see	instr	uctions):		(2) Social security	(3)	Relationship	(4) Check	the	box if qua	lifies for (see in:	structions):
•			name	number		to you	Child	tax c	redit	Credit fo	or othe	er dependents
than four VALI	ERIA	ANDUJO		055-41-3297	Daugh	iter		X				
dependents, see instructions VICT	ľORI	A ANDUJO		716-77-0950	Daugh	iter		X				
and check												
here												
Income	1 a	Total amount from F	orm(s) W-2, box	x 1 (see instruction:	s)				. 1a			
	b	Household employe	e wages not rep	orted on Form(s) W	/-2				. 1b			
Attach Form(s)	С	Tip income not repo	rted on line 1a	(see instructions)					. 1c			
W-2 here. Also attach Forms	d	Medicaid waiver pay							. 1d			
W-2G and			•	` '	•	•						
was withheld.	_	·		•					-			
If you did not									-			
get a Form	y h		·									
	- "		•	•					. '''			
	' Z			e iristructions)		['']			12			
Attach		· ·	1 1		b Ta	xable interest.						1,913.
Sch. B if required.		·		5,138								5,138.
	4a	IRA distributions	4a									,
	5a	Pensions and annui	ties 5a		b Ta	xable amount.			. 5b			
	6a	Social security bene	efits 6a		b Ta	xable amount.			. 6b			
	С	If you elect to use the	ne lump-sum ele	ection method, chec	k here (see instructions	s)					
	7	Capital gain or (loss). Att	ach Schedule D if re	quired. If not required, c	heck here				7		29	4,738.
W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions. Attach Sch. B if required. 3a Qualified dividends 3a 5, 138. b Ordinary dividends 3b 5, 4a IRA distributions. 4a IRA distributions. 4a IRA distributions. 5a Pensions and annuities 5a Pensions and annuities 6a Social security benefits 6a Social security benefits 6a Social security benefits 6a Additional income from Schedule D if required, fine trequired, check here (see instructions) Standard Deduction for — Single or Married filing Add Income Sch. B, 5, 6b, 7, and 8. This is your total income.	8,778.											
 Single or 	9	Add lines 1z, 2b, 3b	, 4b, 5b, 6b, 7, a	and 8. This is your	total inc	ome			. 9		42	0,567.
	10		ncome from Schedule 1, line 26.									8,392.
Married filing iointly or Qualifying	11	Subtract line 10 from									41	2,175.
jointly or Qualifying surviving spouse, \$27,700	12	_										7,700.
Head of	13	-	andard deduction or itemized deductions (from Schedule A)									7,601.
household, \$20,800 If you checked any												
box under Standard Deduction,	14	Add lines 12 and 13										5,301.
see instructions.	115	Subtract line 14 from	n line 11. If zero	or less enter -0-	This is \	our taxable ind	come		15		36	6 874

form 1040 (2023)	(SCAR and BARBARA AN	DUJO			4	65-41	7-7449	Page 2
Tax and Credits	16	Tax (see instructions). Check 2 4972 3					16	6	9,100.
	17	Amount from Schedule 2, line	3				17		
	18	Add lines 16 and 17					18	6	9,100.
	19	Child tax credit or credit for o	ther dependents fro	m Schedule 8	8812		19		3,350.
	20	Amount from Schedule 3, line	e 8				20		•
	21	Add lines 19 and 20					21		3,350.
	22	Subtract line 21 from line 18.	If zero or less, ente	er -0			22	6	5,750.
	23	Other taxes, including self-en	nployment tax, from	Schedule 2,	line 21		23	2	2,946.
	24	Add lines 22 and 23. This is y	our total tax				24		8,696.
Payments	25	Federal income tax withheld f							
,	ä	Form(s) W-2			. 25a				
	ı	Form(s) 1099			. 25b				
	(Other forms (see instructions))		. 25c				
	(d Add lines 25a through 25c					25d		
If you have a qualifying child,	26 27	2023 estimated tax payments Earned income credit (EIC)			1 1		26		
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812		. 28				
	29	American opportunity credit fi	rom Form 8863, line	e 8	. 29				
	30	Reserved for future use			. 30				
	31	Amount from Schedule 3, line	e 15		. 31				
	32	Add lines 27, 28, 29, and 31. and refundable credits	These are your total	al other paym	ents		32		
	33	Add lines 25d, 26, and 32. Th	ese are your total p	ayments			33		0.
Refund	34	If line 33 is more than line 24,	subtract line 24 fron	n line 33. This	is the amount you ov	/erpaid.	34		_
	35 a	Amount of line 34 you want re	efunded to you. If F	orm 8888 is a	attached, check here		35a		
Direct deposit? See instructions.		Routing number		c Type:	Checking S	avings			
	36	Amount of line 34 you want ap	plied to your 2024 e	estimated tax.	. 36				
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go	to www.irs.gov/Pay	ments or see			37	8	9,534.
	38	1 7 (838.			
Third Party Designee		ou want to allow another person instructions		turn with the	IRS? Yes. Comp	olete belo	w.	No	
	Desig name	nee's		Phone no.)	F r	Personal number (F	identification PIN)	
Sign Here	Under are tr	penalties of perjury, I declare that I have ue, correct, and complete. Declaration of	examined this return and preparer (other than taxpa	accompanying sch yer) is based on a	nedules and statements, ar Ill information of which pre	nd to the best parer has any	of my kr knowled	nowledge and be dge.	elief, they
oint return?	Yo	ur signature		Date	Your occupation		If the IR PIN, e	RS sent you an Identi enter it	ty Protection
See instructions.	Sn	ouse's signature. If a joint return, both m	uet eign	Date	EXECUTIVE Spouse's occupation		here (see inst.)	an Identity
Keep a copy for your records.	Sμ	ouse's signature. If a joint return, both in	ust sigii.	Date	INVESTOR		Protection it here	S sent your spouse on PIN, enter (see inst.)	an identity
	Ph	one no.		Email address	-		1	-	
	- 1	rer's name	Preparer's signature		Date	PTIN		Check if:	
Paid	Не	ctor Escamilla Jr	Hector Escan	nilla Jr		P00640	137	X Self-e	mployed
Preparer Use Only	Firm's name Hector Escamilla Jr CPA							214-505-	9409
USE Office	Firm's	address P O Box 70156				Fir	m's EIN	75-268	8474
		Dallas, TX 75	370						

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

Form **1040** (2023)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information. Sequence No.

Your social security number

465-47-7449 OSCAR and BARBARA ANDUJO **Additional Income** Part I Taxable refunds, credits, or offsets of state and local income taxes..... 1 2a Date of original divorce or separation agreement (see instructions): b 3 Business income or (loss). Attach Schedule C 3 118,778. 4 Other gains or (losses). Attach Form 4797..... 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E..... 5 6 6 Farm income or (loss). Attach Schedule F..... 7 7 Unemployment compensation..... 8 Other income: Net operating loss..... 8b Gambling..... Cancellation of debt..... 8c 8d Foreign earned income exclusion from Form 2555..... Income from Form 8853..... Income from Form 8889..... 8g 8h h Jury duty pay..... 8i Activity not engaged in for profit income..... 8i Stock options..... 8k Income from the rental of personal property if you engaged in the rental for 81 profit but were not in the business of renting such property..... 8m Olympic and Paralympic medals and USOC prize money (see instructions) . . Section 951(a) inclusion (see instructions)..... 8n Section 951A(a) inclusion (see instructions)..... Section 461(I) excess business loss adjustment..... 8p Taxable distributions from an ABLE account (see instructions)..... 8q Scholarship and fellowship grants not reported on Form W-2. . 8r Nontaxable amount of Medicaid waiver payments included on 8s Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 8t Wages earned while incarcerated Other income. List type and amount: 8z 9 Total other income. Add lines 8a through 8z 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form

Part	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis gov Attach Form 2106.		12	
	Attaci i om 2100		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	8,392.
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid			
b	Recipient's SSN		194	
		'-		
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction	20		
21	Student loan interest deduction	21		
22	Reserved for future use	22		
23	Archer MSA deduction	23		
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8I from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations.	24i		
j	Housing deduction from Form 2555.	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1(Form 1041).	24k		
z	Other adjustments. List type and amount:			
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter 1040-SR, or 1040-NR, line 10.		26	8,392.

Schedule 1 (Form 1040) 2023

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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

OMB No. 1545-0074

2023
Attachment
Sequence No. 02

	n shown on Form 1040, 1040-SR, or 1040-NR AR and BARBARA ANDUJO		security number 7 – 7 4 4 9
	I Tax	403 4	7 7443
1	Alternative minimum tax. Attach Form 6251.	1	0.
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	0.
Par	t II Other Taxes	1 1	
4	Self-employment tax. Attach Schedule SE.	4	16,783.
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	_	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here.	8	
9	Household employment taxes. Attach Schedule H.	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959.	11	
12	Net investment income tax. Attach Form 8960	12	6,163.
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12.	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
		(continued	l on page 2)

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

Schedule 2 (Form 1040) 2023

Part	II Other Taxes (continued)		400-	47-7449	Page 2
17	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:	17a			
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17a			
С	Additional tax on HSA distributions. Attach Form 8889.	17c			
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d			
е	Additional tax on Archer MSA distributions. Attach Form 8853	17e			
f g	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853 Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17f			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
1	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170			
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q z	Any interest from Form 8621, line 24	17q			
18	Total additional taxes. Add lines 17a through 17z		18		
19	Reserved for future use		19		
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here 1040-SR, line 23, or Form 1040-NR, line 23b			2	2,946.

Schedule 2 (Form 1040) 2023

Treasury." Please write vo	g a payment with Form 1040. our social security number, da Enclose, but do not staple o	avtime phone number, and "	neck or money order payable to th 2023 Form 1040" on your check of this voucher.	ne "United States or money order.

Make your check payable to the "United States Treasury" and mail Form 1040-V payments to:

Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214

Form **1040-V** (2023)

Separate here and mail with your payment and return.

Department of the Treasury Internal Revenue Service 2023

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

- ► Do not staple this voucher or your payment to Form 1040.
- ► Make your check or money order payable to the 'United States Treasury.'
- ► Write your social security number (SSN) on your check or money order.



OSCAR & BARBARA ANDUJO 6956 MEADOWBRIAR LN DALLAS TX 75230

INTERNAL REVENUE SERVICE P.O. BOX 1214
CHARLOTTE NC 28201-1214

SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service

Interest and Ordinary Dividends

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

Attachment Sequence No. 80

Name(s) shown on return Your social security number OSCAR and BARBARA ANDUJO 465-47-7449 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, Part I Amount show that buyer's social security number and address: Interest EPC PROMECAP MF PARTNERS V LLC 1,913. (See instructions and the Instructions for Form 1040, line 2b.) Note: If you received a 1 Form 1099-INT. Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form. 2 Add the amounts on line 1..... 2 1,913. Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach 3 4 1,913. Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b. Note: If line 4 is over \$1,500, you must complete Part III. Amount Part II List name of payer: MERRILL 13281 5,138. **Ordinary** Dividends (See instructions ànd the Instructions for Form 1040, line 3b.) 5 Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form. 6 5,138. Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. Foreign Accounts Yes No and Trusts 7a At any time during 2023, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? Caution: If required. Χ failure to file FinCEN See instructions. If 'Yes,' are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing Form 114 may result in substantial penalties. requirements and exceptions to those requirements. Additionally, you may b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial be required to file Form 8938, Statement account(s) is (are) located: _ of Specified Foreign During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If 'Yes,' you may have to file Form 3520. See instructions.....

Financial Assets. See instructions

Χ

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. **09**

	or proprietor	465–47–7449								
	CAR ANDUJO Principal business or profession, including	product or c	arvias (sas instructions)				49 m instructions			
A		product or Si	ervice (see instructions)		B Enter	code iro	m instructions			
С	REALTOR Business name. If no separate business na	me leave h	lank		D Emplo	ver ID n	umber (EIN) (see instr.)			
Ŭ	Dusiness hame. If no separate business ha	inic, icave b	Tarin.		Linpio	yei ib ii	umber (Em) (see msu.)			
	Business address (including suite or room r	nn)								
_	City, town or post office, state, and ZIP cod									
			(2) Accrual (3	Other (specify)						
_				ss during 2023? If "No," see instructions	for limit	on loo	ses. X Yes No			
G 										
H	•		-	re						
				o file Form(s) 1099? See instructions						
J										
Par					1					
1	on Form W-2 and the "Statutory	employe	e" box on that form	the box if this income was reported to yowas checked	∐ ∤	1	188,705.			
2					-	2				
3					-	3	188,705.			
4	-	-			_	4	37,741.			
5						5	150,964.			
6	Other income, including federal (see instructions)	and state	e gasoline or fuel tax	credit or refund		6				
7						7	150,964.			
Par	t II Expenses. Enter expens				1	<u> </u>	200/0011			
8	Advertising		,	18 Office expense (see instructions)		18				
9	Car and truck expenses			19 Pension and profit-sharing plans		19				
	(see instructions)		9,881.	20 Rent or lease (see instructions):						
10	Commissions and fees	10		a Vehicles, machinery, and equipmen	nt	20a				
11	Contract labor (see instructions)	11		b Other business property		20b				
12	Depletion	12		21 Repairs and maintenance		21				
13	Depreciation and section			22 Supplies (not included in Part III).		22				
	179 expense deduction (not included in Part III)			23 Taxes and licenses		23				
	(see instructions)	13		24 Travel and meals:						
14	Employee benefit programs			a Travel		24a				
	(other than on line 19)	14		b Deductible meals (see instructions)	<u> </u>	24b	9,971.			
15	Insurance (other than health)	15		25 Utilities	L	25				
16	Interest (see instr.):	10 -		26 Wages (less employment credits) .		26				
_	Mortgage (paid to banks, etc.)	16 a		27 a Other expenses (from line 48)	—	27a	6,506.			
	Other Legal and professional services	17	F 020	b Energy efficient commercial buildin deduction (attach Form 7205)		27b				
28			5,828.	dd lines 8 through 27b		28	32,186.			
29	•			du illes 8 tillough 27b	-	29	118,778.			
30	, , ,			expenses elsewhere. Attach Form 8829			110,770.			
	unless using the simplified meth	od. See	instructions.							
	Simplified method filers only:									
	and (b) the part of your home us	sed for bu	usiness:	Use the Simplifenter on line 30	ied	30				
31	Net profit or (loss). Subtract line			enter on the section.						
٠.	• If a profit, enter on both Sche			nd on Schedule SE .						
	line 2. (If you checked the box o					21	110 770			
	enter on Form 1041, line 3.If a loss, you must go to line :	L	31	118,778.						
32	. ,		scribes vour investme	ent in this activity. See instructions.						
JZ			,	•						
				m 1040), line 3, and on Schedule SE, uctions.) Estates and trusts, enter on		32a	All investment is at risk.			
	Form 1041, line 3. • If you checked 32b, you must	·		•		32b	Some investment is not at risk.			
	you oncomed only you must	31130111	1 our 1000	,	_	L	13 HOUGH HSN.			

6,506.

Total other expenses. Enter here and on line 27a.....

SCHEDULE D (Form 1040)

Capital Gains and Losses

Attach to Form 1040, 1040-SR, or 1040-NR. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. OMB No. 1545-0074

Your social security number

2023

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

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

Attachment Sequence No. 12

OSC	AR and BARBARA ANDUJO			4	65-4	17-7449
Did y	ou dispose of any investment(s) in a qualified	opportunity fund during	the tax year?	es X No		
If "Y	s," attach Form 8949 and see its instructions	for additional requireme	nts for reporting your o	gain or loss.		
Par	Short-Term Capital Gains and	Losses — Generally	Assets Held One	Year or Less	(see i	nstructions)
ente This	nstructions for how to figure the amounts to on the lines below. form may be easier to complete if you round ints to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss f Form(s) 8949, P line 2, column	rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (q)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b		476,821.	ine 2, column	(9)	-7,942.
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	1,400,000.	1,089,776.			310,224.
4	Short-term gain from Form 6252 and short-ter	m gain or (loss) from Fo	orms 4684, 6781, and 8	8824	4	
	Net short-term gain or (loss) from partnership				5	
6	Short-term capital loss carryover. Enter the a Worksheet in the instructions				6	66,293.)
7	Net short-term capital gain or (loss). Combine capital gains or losses, go to Part II below. O				7	235,989.
Par	Long-Term Capital Gains and	Losses — Generally	Assets Held More	e Than One Ye	ar (se	ee instructions)
ente This	nstructions for how to figure the amounts to on the lines below. form may be easier to complete if you round ents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss f Form(s) 8949, P line 2, column	rom	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b	207.000	337,174.	iii 2, coluiii	(9)	with column (g)
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnership	s, S corporations, estate	es, and trusts from Sch	edule(s) K-1	12	
13	Capital gain distributions. See the instrs				13	
	Long-term capital loss carryover. Enter the a Worksheet in the instructions				14	()
15	Net long-term capital gain or (loss). Combine	lines 8a through 14 in c	olumn (h). Then, go to	Part III on	15	EQ 740

Part III Summary

			004 500
16	Combine lines 7 and 15 and enter the result.	16	294,738.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.		
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	 If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 		
17	Are lines 15 and 16 both gains?		
	X Yes. Go to line 18.		
	No. Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	0.
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952?		
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.		
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	• The loss on line 16; or	21	(
	• (\$3,000), or if married filing separately, (\$1,500)		
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.		
	No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Schedule D (Form 1040) 2023

Name(s) shown on return. Do not enter name and social security number if shown on Page 1 Your social security number OSCAR and BARBARA ANDUJO 465-47-7449 Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1. Income or Loss From Partnerships and S Corporations Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6198. See instructions. Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section X No Yes (b) Enter P for (e) Check if (c) Check if (f) Check if (d) Employer partnership; S basis 28 (a) Name identification foreign any amount for S computatior partnership number is not at risk corporation is required A\$ee Statement В С D Passive Income and Loss Nonpassive Income and Loss (j) Section 179 expense deduction from **Form 4562** (k) Nonpassive income from (g) Passive loss allowed (attach Form 8582 if required) (h) Passive income (i) Nonpassive loss allowed from Schedule K-1 (see Schedule K-1) Schedule K-1 В C D **29 a** Totals..... 30 Add columns (h) and (k) of line 29a..... 31 31 Add columns (g), (i), and (j) of line 29b 32 Total partnership and S corporation income or (loss). Combine lines 30 and 31 32 Part III Income or Loss From Estates and Trusts 33 (b) Employer ID no. (a) Name Α В **Passive Income and Loss** Nonpassive Income and Loss (f) Other income (d) Passive income (c) Passive deduction or loss allowed (e) Deduction or loss (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 from Schedule K-1 Α В 34 a Totals. 35 35 Add columns (d) and (f) of line 34a. Add columns (c) and (e) of line 34b..... 36 37 Total estate and trust income or (loss). Combine lines 35 and 36 Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder Excess inclusion from chedules Q, line 2c (see instructions) (d) Taxable income (b) Employer (e) Income from 38 (a) Name identification number loss) from Schédules Q, line 3b Schedules Q, line 1b 39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below. . . Part V Summary Net farm rental income or (loss) from **Form 4835**. Also, complete line 42 below..... 40 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5..... 41 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AN; and Schedule K-1 (Form 1041), box 14, code F. See instructions... 42 Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity 43 loss rules

SCHEDULE SE (Form 1040)

Self-Employment Tax

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

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

OMB No. 1545-0074

Attachment Sequence No. 17

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

OSCAR ANDUJO

Department of the Treasury Internal Revenue Service

Social security number of person with self-employment income 465-47-7449

JSCAR ANDUJU		with seir-employment inco	The 465-4	7-7449
	nployment Tax			
Note: If your only incand the definition of	come subject to self-employment tax is church empl church employee income.	oyee income, see instructions for	how to report yo	ur income
A If you are a mi or more of oth	inister, member of a religious order, or Christian Sci ner net earnings from self-employment, check here a	ence practitioner and you filed Found continue with Part I	rm 4361, but you	had \$400
Skip lines 1a and 1	b if you use the farm optional method in Part II. See	e instructions.		
14, code A	or (loss) from Schedule F, line 34, and farm partne		1a	
	social security retirement or disability benefits, ento nents included on Schedule F, line 4b, or listed on Schedule F, line F, or listed on Schedule F, line F, or listed on Schedule F, or lis			
Skip line 2 if you u	se the nonfarm optional method in Part II. See instru	uctions.		
than farming).	oss) from Schedule C, line 31; and Schedule K-1 (Fo See instructions for other income to report or if you er	are a minister or member of	2	118,778
-	1b, and 2			118,778
· · · · · · · · · · · · · · · · · · ·				
4a If line 3 is mor	re than zero, multiply line 3 by 92.35% (0.9235). Oth	erwise, enter amount from line 3	4a	109,691
	is less than \$400 due to Conservation Reserve Progra			,
b If you elect on	e or both of the optional methods, enter the total of	lines 15 and 17 here	4b	
c Combine lines Exception: If I	4a and 4b. If less than \$400, stop; you don't owe sees than \$400 and you had church employee incom	elf-employment tax. ne, enter -0- and continue	4c	109,691
5a Enter your chu for definition o	urch employee income from Form W-2. See instruct of church employee income	ions 5a		
b Multiply line 5a	a by 92.35% (0.9235). If less than \$100, enter -0		5b	0
6 Add lines 4c a	nd 5b		6	109,691
	ount of combined wages and self-employment earnin on of the 7.65% railroad retirement (tier 1) tax for 20			160,200
8a Total social se and railroad re 8b through 10,	curity wages and tips (total of boxes 3 and 7 on For etirement (tier 1) compensation. If \$160,200 or more and go to line 11.	m(s) W-2) , skip lines 8a		
b Unreported tipe	s subject to social security tax from Form 4137, line	10 8b		
c Wages subject	to social security tax from Form 8919, line 10	8c		
d Add lines 8a, 8	Bb, and 8c		8d	
9 Subtract line 8	3d from line 7. If zero or less, enter -0- here and on l	line 10 and go to line 11	9	160,200
10 Multiply the sn	naller of line 6 or line 9 by 12.4% (0.124)		10	13,602
11 Multiply line 6	by 2.9% (0.029)		11	3,181
	ent tax. Add lines 10 and 11. Enter here and on Sch., Part I, line 3.		12	16,783
	one-half of self-employment tax.		12	10,703
	2 by 50% (0.50). Enter here and on Schedule 1 (Fo	rm 1040),		
	- xy 00% (0.00). = 1.00 1.00 and 0.1 - 0.1024.0 . (. 0.		,392.	
	Reduction Act Notice see your tay return instruction			F (Form 1040) 20

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

Schedule SE (Form 1040) 2023

Foreign Tax Credit

(Individual, Estate, or Trust) Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T. Go to www.irs.gov/Form1116 for instructions and the latest information. OMB No. 1545-0121

Attachment

Department of the Treasury Internal Revenue Service Sequence No. ID no. as shown on page 1 of your tax return OSCAR and BARBARA ANDUJO 465-47-7449 Use a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. Passive category income Section 901(j) income **g** | Lump-sum distributions Section 951A category income **c** Foreign branch category income **d** X General category income Certain income re-sourced by treaty Resident of (name of country) Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession. Taxable Income or Loss From Sources Outside the United States (for category checked above) Foreign Country or U.S. Possession Total Α В C (Add columns A, B, and C.) i Enter the name of the foreign country or U.S. possession **MEXICO** 1 a Gross income from sources within country shown above and of the type checked above (see instructions): 1 a **b** Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions. Deductions and losses (Caution: See instructions.): 2 Expenses definitely related to the income on line 1a (attach statement)..... Pro rata share of other deductions not definitely related: a Certain itemized deductions or standard deduction 27,700 (see instructions)..... **b** Other deductions (attach statement)..... 27,700 **d** Gross foreign source income (see instructions). **e** Gross income from all sources (see instructions)...... 526,988 f Divide line 3d by line 3e (see instructions)....... **g** Multiply line 3c by line 3f..... **4** Pro rata share of interest expense (see instructions): a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) **b** Other interest expense..... **5** Losses from foreign sources..... 6 6 7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2..... 7 Foreign Taxes Paid or Accrued (see instructions) Credit is claimed Foreign taxes paid or accrued COUNTRY (you must check one) In foreign currency In U.S. dollars (j) (t) Other (u) Total foreign Paid (p) Other Taxes withheld at source on: Taxes withheld at source on: taxes paid or accrued (add columns foreign taxes foreign taxes (k) Accrued paid or paid or accrued accrued (g) through (t)) (I) Date paid (n) Rents (r) Rents (m) Dividends (o) Interest (q) Dividends (s) Interest and royalties and royalties Α В С

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2...

8

465-47-7449

ı uı	rigaring the orean				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9			
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions)	10	77.		
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)				
11	Add lines 9 and 10.	11	77.		
12	Reduction in foreign taxes (see instructions).	12	()		
13	Taxes reclassified under high tax kickout (see instructions)	13			
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available fo	r cred	dit	14	77.
	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15			
	Adjustments to line 15 (see instructions)	16			
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17			
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption.	18			
19	Caution: If you figured your tax using the lower rates on qualified dividends or capi Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	-		19	
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Scher line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the Form 1040-NR, line 16. See instructions.	or the	e total of ount from	20	
	$\textbf{Caution:} \ \text{If you are completing line 20 for separate category } \textbf{g} \text{(lump-sum distribution Softmann Softmann)} \textbf{g} \text{(lump-sum distribution Softmann)} $	ons),	or, if you file		
21	Multiply line 20 by line 19 (maximum amount of credit)			21	
22	Increase in limitation (section 960(c)) (see instructions)			22	
23	Add lines 21 and 22			23	
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, s through 32 and enter this amount on line 33. Otherwise, complete the appropriate See instructions.	linė ir	n Part IV.	24	
Par	t IV Summary of Credits From Separate Parts III (see instructions)				
25	Credit for taxes on section 951A category income.	25			
26	Credit for taxes on foreign branch category income	26			
27	Credit for taxes on passive category income.	27			
28	Credit for taxes on general category income.	28			
29	Credit for taxes on section 901(j) income	29			
30	Credit for taxes on certain income re-sourced by treaty.	30			
31	Credit for taxes on lump-sum distributions.	31			
32	Add lines 25 through 31			32	
33	Enter the smaller of line 20 or line 32			33	
34	Reduction of credit for international boycott operations. See instructions for line 12			34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter here and on Schline 1: Form 1041, Schedule G. line 2a: or Form 990-T. Part III. line 1a	nedul	e 3 (Form 1040),	35	

Alternative Minimum Tax

Foreign Tax Credit

(Individual, Estate, or Trust)
Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

Attachment Sequence No. 19

Department of the Treasury Internal Revenue Service

Nam	е	•		-				ID n	o. as shown o	on page 1 of	your tax return	
	OSCAR and	BARBARA	ANDUJO					46	465-47-7449			
Use	a separate Form m 1116. Report al	1116 for eac	h category of	income listed	d below. See C	Categories of a	<i>Income</i> in the				ox on each	
аΓ	Section 951A ca	ategory incom	ne c \square Pas	sive category	v income e	Section 9	01(j) income		g \square Li	ıımn-sıım	distributions	
b	Foreign branch						come re-sou	rced by treat	~ Ш	arrip Sarri	distributions	
h	Resident of (nam	ne of country))									
	te: If you paid taxe n one foreign cou			try or U.S. pose a separate	ossession, use	column A in	Part I and Iir	ne A in Part	II. If you p	aid taxes	to more	
. ,	Part I Taxable Income or Loss From Sources Outside the United States (for category checked above) Foreign Country or U.S. Possession Total											
					Α		3	C	(Add		A, B, and C.)	
	: Entarthanama	of the fourt	n						,			
	Enter the nameU.S. possession			1	MEXICO							
1	a Gross income fi			_	HLKICO							
•	shown above ar (see instruction	nd of the type	checked abo	ve								
		-							1.0			
				+					1 a			
	b Check if line 1a is c an employee, your to	ompensation tor	personal services	as								
	\$250,000 or more, a determine its source	nd you used an a e. See instruction	alternative basis to) 								
Dec	luctions and loss	es (Caution:	See instructio	ns.):								
2	Expenses defin (attach stateme	•										
3	Pro rata share	,										
	not definitely re a Certain itemized	elated: d deductions	or standard de									
	(see instruction b Other deductions (a											
	•	-		 								
	c Add lines 3a an			<u> </u>								
	d Gross foreign so		•	· -								
	e Gross income fi		•	· -	526,98	8.						
	f Divide line 3d b			<u> </u>								
	g Multiply line 3c	,										
4	Pro rata share											
	a Home mortgage Home Mortgage	e interest (use	e the Workshe	et for								
	b Other interest e											
5	Losses from for											
6	Add lines 2, 3g,	J		 					6			
7	<u>-</u>				on line 15 nag	ne 2						
	rt II Foreign					,			*			
	Credit is claimed	-uxos : uic	. 0. 7.00.00	(300 113110		n taxes paid o	or accrued					
C 0 U	for taxes (you must check one)		In foreign	currency	Ī	•		In U.S. do	llars			
N T R	(i) X Paid				(p) Other				(t) Oth	her (u) Total foreign	
R Y	(k) Accrued	laxes v	vithheld at sou	ırce on:	foreign taxes paid or	laxes v	vithheld at so	ource on:	foreign to		taxes paid or accrued (add columns	
	(I) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	accru	ied	(q) through (t))	
Α												
В												
C												
<u> </u>			<u> </u>	<u>[</u>	1]	I	'	L		
8	Add lines A thr	ough C. colu	mn (u) Enter	the total her	e and on line 9	nage 2			8			

Form	Alternative Minimum T	ax	465-47-7449	Page 2
	t III Figuring the Credit		403 47 7443	i ago z
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued			
9	for the category of income checked above Part I	9		
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year.			
	If you enter an amount on line 10 and you don't need to attach			
	Schedule B, check here (see instructions)	10		
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)			
11	Add lines 9 and 10.	11		
12	Reduction in foreign taxes (see instructions)	12 (<u>)</u>	
13	Taxes reclassified under high tax kickout (see instructions)	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for	credit	. 14	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category			
	of income checked above Part I. See instructions	15		
	, , ,	16	_	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the			
	category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17		
	The first and mining more than one round mark you must complete mile 2017			
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR,			
	or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption.	18		
	Caution: If you figured your tax using the lower rates on qualified dividends or capit	al gains, see instructions.		
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"		. 19	
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Sched	ule 2 (Form 1040),		
	line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the	e amount from		
	Form 1040-NR, line 16. See instructions		. 20	
	Caution: If you are completing line 20 for separate category g (lump-sum distributio	ns), or, if you file		
	Form 8978, Partner's Additional Reporting Year Tax, see instructions.			
21	Multiply line 20 by line 19 (maximum amount of credit)		. 21	
22	Increase in limitation (section 960(c)) (see instructions)		. 22	
23	Add lines 21 and 22		. 23	
24	E	l: I: 05		
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, sl through 32 and enter this amount on line 33. Otherwise, complete the appropriate li	kip lines 25 ne in Part IV.		
_	See instructions		. 24	
Par 25		25		
26		26	-	
27	<u> </u>	27		
28	Credit for taxes on general category income	28		
29	Credit for taxes on section 901(j) income	29		
30	, ,	30		
31	Credit for taxes on lump-sum distributions.			
32	Add lines 25 through 31			
33	Enter the smaller of line 20 or line 32.			
34 25	Reduction of credit for international boycott operations. See instructions for line 12.		. 34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter here and on Sch line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a		. 35	

SCHEDULE B (Form 1116)

(Rev. December 2022)

Foreign Tax Carryover Reconciliation Schedule

For calendar year 2023, or other tax year beginning

See separate instructions.

	artment of the Treasury rnal Revenue Service	Go t		Attach to Form 1116. 1116 for instructions a	nd the latest information	on.			
Nam	le e							Identifying	g number as shown I of your tax return
റട	CAR and BARBARA ANDUJO								7-7449
	a separate Schedule B (Form 1116) f	or each applicable cat	egory of income listed	d below. See instructio	ns. Check only one bo	x on each schedule.		105 1	1 1449
	eck the box for the same separate cate								
а	Reserved for future use	c Passiv	e category income	e Section 9	01(j) income	g	Lump-sum	distrib	utions
b	Foreign branch category income	d X Genera	al category income	f Certain in	come re-sourced by tr	eaty	_		
h	If box e is checked, enter the countr	y code for the sanction	ned country. See insti	ructions					
i	If box f is checked, enter the country	code for the treaty co	ountry. See instruction	ns					
		(i)	(ii)	(iii)	(iv)	(v)	(vi)		(vii)
	Foreign Tax Carryover	10th Preceding	9th Preceding	8th Preceding	7th Preceding	6th Preceding	5th Precedir	ng	Subtotal
	Reconciliation	Tax Year	Tax Year	Tax Year	Tax Year	Tax Year	Tax Year		(add columns (i) through (vi))
1	Foreign tax carryover from the prior								aoag.: (1.))
•	tax year (enter amounts from the								
	appropriate columns of line 8 of the prior year Schedule B (see								
	instructions))				77.				77.
2	Adjustments to line 1 (enter								
	description—see instructions):								
a	, , , ,								
b	,								
	redeterminations (see instructions)								
c d									
f									
g									
3	Adjusted foreign tax carryover from								
	prior tax year (combine lines 1 and 2	2)			77.				77.
4	Foreign tax carryover used in currer	t			, , ,				,,, <u>,</u>
	tax year (enter as a negative number								
5	Foreign tax carryover expired unuse	d							
	in current tax year (enter as a								
6	negative number)								
0	Foreign tax carryover generated in current tax year								
7	Actual or estimated amount of line 6								
,	to be carried back to prior tax year								
	(enter as a negative number)								
8	Foreign tax carryover to the followin	~							
	tax year. Combine lines 3 through 7	0-			77.				77.

OMB No. 1545-0121

Schedule B (Form 1116) (Rev. 12-2022)

	٠
Page 4	_

ign tax carryover from the prior ear (enter amounts from the opriate columns of line 8 of the year Schedule B (see uctions))			i	_			through (xiii))
	77.						77.
stments to line 1 (enter ription—see instructions):							
/back adjustment (see instr.)							
stments for section 905(c) terminations (see instructions)							
sted foreign tax carryover from tax year (combine lines 1 and 2). de the column (xiv) total on the ent year Form 1116, Part III, line	77.						77.
ign tax carryover used in current							
ign tax carryover expired unused rrent tax year (enter as a tive number)							
ign tax carryover generated in ent tax year							
al or estimated amount of line 6 carried back to prior tax year er as a negative number)							
ign tax carryover to the following							
	77		1				77.
ii	nt year Form 1116, Part III, line gn tax carryover used in current ear (enter as a negative number) gn tax carryover expired unused rrent tax year (enter as a tive number) gn tax carryover generated in nt tax year all or estimated amount of line 6 carried back to prior tax year r as a negative number) gn tax carryover to the following	nt year Form 1116, Part III, line gn tax carryover used in current ear (enter as a negative number) gn tax carryover expired unused rrent tax year (enter as a zive number) gn tax carryover generated in nt tax year all or estimated amount of line 6 carried back to prior tax year r as a negative number) gn tax carryover to the following	nt year Form 1116, Part III, line gn tax carryover used in current ear (enter as a negative number) gn tax carryover expired unused erent tax year (enter as a cive number) gn tax carryover generated in ent tax year all or estimated amount of line 6 carried back to prior tax year er as a negative number) gn tax carryover to the following	nt year Form 1116, Part III, line gn tax carryover used in current ear (enter as a negative number) gn tax carryover expired unused rrent tax year (enter as a zive number) gn tax carryover generated in nt tax year all or estimated amount of line 6 carried back to prior tax year r as a negative number) gn tax carryover to the following	nt year Form 1116, Part III, line gn tax carryover used in current ear (enter as a negative number) gn tax carryover expired unused rrent tax year (enter as a zive number) gn tax carryover generated in nt tax year all or estimated amount of line 6 carried back to prior tax year r as a negative number) gn tax carryover to the following	nt year Form 1116, Part III, line gn tax carryover used in current ear (enter as a negative number) gn tax carryover expired unused rrent tax year (enter as a zive number) gn tax carryover generated in nt tax year all or estimated amount of line 6 carried back to prior tax year r as a negative number) gn tax carryover to the following	nt year Form 1116, Part III, line gn tax carryover used in current ear (enter as a negative number) gn tax carryover expired unused rrent tax year (enter as a iive number) gn tax carryover generated in nt tax year all or estimated amount of line 6 carried back to prior tax year r as a negative number)

	▼ DETA	CH HE	RE ▼			
1060	Application for Autom	atic	Fyte	ension of Time	FDIA460	1032 1L 06/15/23
Form 4868 Department of the Treasury Internal Revenue Service	To File U.S. Individua For calendar year 2023, or other tax year beginning		ome		202	
Part I Identificati	on	Par	t II	Individual Income Tax		
1		4	Estim	nate of total tax liability for 2023.	\$ 8 2	3,696.
OSCAR ANDUJO		5	Total	2023 payments		0.
BARBARA ANDUJ Hector Escami		6		nce due. Subtract line 5 from line	8. €	3,696.
P 0 Box 70156	7	7		ınt you're paying instructions)		0.
Dallas, TX 75: 2 465-47-7449	3 701-36-9030	9	citizer Check wages	k here if you're "out of the countr n or resident. See instructions k here if you file Form 1040-NR a s as an employee subject to U.S olding.	and didn't receive	·

Department of the Treasury Internal Revenue Service

Passive Activity Loss Limitations

See separate instructions.
Attach to Form 1040, 1040-SR, or 1041.
Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2023

Attachment Sequence No. **858**

Name(s) shown on return Identifying numbe OSCAR and BARBARA ANDUJO 465-47-7449 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a))....... 1a Activities with net loss (enter the amount from Part IV, column (b))..... Prior years' unallowed losses (enter the amount from Part IV, column (c))..... 1c d Combine lines 1a, 1b, and 1c. 1d **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a))...... Activities with net loss (enter the amount from Part V, column (b))..... 30 Prior years' unallowed losses (enter the amount from Part V, column (c)) 2c 947. 65 d Combine lines 2a, 2b, and 2c..... 2d -96,158. Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used . 3 -96,158. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. Enter the **smaller** of the loss on line 1d or the loss on line 3...... Enter \$150,000. If married filing separately, see instructions..... 5 Enter modified adjusted gross income, but not less than zero. See instructions 420,567. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. Subtract line 6 from line 5..... 7 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 Enter the **smaller** of line 4 or line 8. If line 3 includes any CRD, see instructions..... 0. 9 **Total Losses Allowed** Add the income, if any, on lines 1a and 2a and enter the total..... 10 Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return 11 Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c)

BAA For Paperwork Reduction Act Notice, see instructions.

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

Form **8582** (2023)

Prior years

96,158.

Part V

Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Current year

Overall gain or loss

Page 2

Name of activity (b) Net loss (line 2b) (c) Unallowed loss (line 2c) (a) Net income (d) Gain (e) Loss (line 2a) FC STARCREST SA INVESTORS LLC 7,331. 9,707. 35,711. 43,042. W HOUSTON GEMINI LLC 25,133. 34,840. EPC PROMECAP MF PARTNERS V LL 13,173. 5,103. 18,276. Total. Enter on Part I, lines 2a, 2b, and 2c. . . . 30,211 65,947. Use This Part if an Amount Is Shown on Part II, Line 9. See instructions Form or schedule (d) Subtract (c) Special and line number Name of activity (a) Loss (b) Ratio column (c) from allowance to be reported on column (a). (see instructions) 1.00 Part VII Allocation of Unallowed Losses. See instructions Form or schedule and line number (b) Ratio (c) Unallowed loss Name of activity (a) Loss to be reported on (see instructions) FC STARCREST SA INVESTORS LLC Sch E Ln 28 43,042 0.447618 43,042. 0.362320 FC W HOUSTON GEMINI LLC Sch E Ln 28 34,840. 34,840. EPC PROMECAP MF PARTNERS V LLC 18,276. 0.190062 18,276. Sch E Ln 28 96,158. Total. 1.00 96,158. Part VIII | Allowed Losses. See instructions Form or schedule and line number (a) Loss (b) Unallowed loss (c) Allowed loss Name of activity to be reported on (see instructions) STARCREST SA INVESTORS LLC 43,042 43,042 0. Sch E Ln 28 W HOUSTON GEMINI LLC 34,840. 34,840 0. Sch E Ln 28 18,276. EPC PROMECAP MF PARTNERS V LLC 18,276. Sch E Ln 28 0.

Form 8582 (2023)

0.

96,158.

Part IX Activities With Losses Re	ported on Two	or More Forms	or Schedules.	See instructions	
·	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Name of activity:				1033	1033
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule		1			
c Subtract line 1b from line 1a. If zero or les	s, enter -0				
Form or schedule and line number to be reported on	,				
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or les	s, enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or les	ss, enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or les	ss, enter -0				
Total		0.	1.00	0.	0.
Name of activity:					
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or les	s, enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule.					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or les	ss, enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or les	ss, enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or les	s enter -0				
Total	53, GIIIGI -U		1 00		

Form **8582** (2023)

Department of the Treasury Internal Revenue Service

Alternative Minimum Tax Passive Activity Loss Limitations

See separate instructions.
Attach to Form 1040, 1040-SR, or 1041.

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

OMB No. 1545-1008

Attachment Sequence No. **858**

Name(s) shown on return Identifying numbe OSCAR and BARBARA ANDUJO 465-47-7449 Part I 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a))....... 1a **b** Activities with net loss (enter the amount from Part IV, column (b))...... c Prior years' unallowed losses (enter the amount from Part IV, column (c))..... 1c **d** Combine lines 1a, 1b, and 1c..... 1d **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a))........ 2a Activities with net loss (enter the amount from Part V, column (b))...... 30 c Prior years' unallowed losses (enter the amount from Part V, column (c)) 2c 60,844. d Combine lines 2a, 2b, and 2c..... 2d -91,055. Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used . 3 -91,055. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. Enter the **smaller** of the loss on line 1d or the loss on line 3...... 4 Enter \$150,000. If married filing separately, see instructions. . . . 5 Enter modified adjusted gross income, but not less than zero. See instructions Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 Subtract line 6 from line 5..... Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8

out how to report the	e losses on your tax r	eturn			11	
Part IV Complete 1	This Part Before F	Part I, Lines 1a, 1	l b, and 1c. See	instructions.		
•		Curren	t year	Prior years	Overall ga	ain or loss
Name of a	activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
-						
-						
Total. Enter on Part I, line	es 1a, 1b, and 1c					

Enter the **smaller** of line 4 or line 8. If line 3 includes any CRD, see instructions.....

Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find

Add the income, if any, on lines 1a and 2a and enter the total.....

BAA For Paperwork Reduction Act Notice, see instructions.

Total Losses Allowed

Form **8582** (2023)

0.

9

10

Current year

Overall gain or loss

Prior years

		04	. ,		, .	700	0.0.0	94	. 0000
Name of activity	(a	Net income (line 2a)		Net loss ne 2b)	(c) Unal loss (lin		(d) Gain		(e) Loss
FC STARCREST SA INVESTORS LLC		(,	7,331.		711.			43,042.
FC W HOUSTON GEMINI LLC				9,707.		133.			34,840.
EPC PROMECAP MF PARTNERS V LL				13,173.	,				13,173.
				•					<u> </u>
Total. Enter on Part I, lines 2a, 2b, and 2c				30,211.	60,	844.			
Part VI Use This Part if an Amount I	s SI	hown on Par	t II, Liı	ne 9. See	instructio	ns.			
Name of activity	and to b	m or schedule d line number be reported on e instructions)	(a)	Loss	(b) Ra	tio	(c) Special allowance		(d) Subtract column (c) from column (a).
Total					1.0	0			
Part VII Allocation of Unallowed Los	ses	. See instruc	ctions.		•				
Name of activity		Form or sche and line nur to be reporte (see instruct	nber ed on	(a) L	_0SS		(b) Ratio	(c)	Unallowed loss
FC STARCREST SA INVESTORS LLC		Sch E I			43,042.		0.472703		43,042.
FC W HOUSTON GEMINI LLC		Sch E I			34,840.		0.382626		34,840.
EPC PROMECAP MF PARTNERS V LLC	7	Sch E I			13,173.		0.144671		13,173.
		5011 11 1			10,1,0,		0,1110,1		10/1/01
					01 055		1 00		01.055
Total					91,055.		1.00		91,055.
Part VIII Allowed Losses. See instruc	tion		-1l- T			1			
Name of activity		Form or sche and line nun to be reporte (see instruction)	nber d on	(a) Lo	oss	(b) Un	allowed loss	(c)	Allowed loss
FC STARCREST SA INVESTORS LLC		Sch E I	n 28		43,042.		43,042.		0.
FC W HOUSTON GEMINI LLC		Sch E I			34,840.		34,840.		0.
EPC PROMECAP MF PARTNERS V LLC	C	Sch E I	n 28		13,173.		13,173.		0.
Tatal					01 055		01 055		
Total					91,055.		91,055.		0. Form 8582 (2023)

Form **8582** (2023)

Form 8582 (2023) OSCAR and BARBARA	ANDUJO			465-47-7449	Page 3
Part IX Activities With Losses Repo	orted on Two	or More Forms	or Schedules.	See instructions	
	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Name of activity:					
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Form or schedule and line number to be reported on					
(see instructions): 1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule		=			
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Total		0.	1.00	0.	0.
Name of activity:					
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule		=			
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Form or schedule and line number to be reported on					
(see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less,	enter -0				
Total		0	1.00	n	Λ

Form **8582** (2023)

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

OMB No. 1545-0074

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

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

Attachment Sequence No. 47 Your social security number

OSC	CAR and BARBARA ANDUJO		465-	47-7449)
Par	t I Child Tax Credit and Credit for Other Dependents		•		
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR			1	412,175.
2 <i>a</i>	Enter income from Puerto Rico that you excluded	2a			
b	Enter the amounts from lines 45 and 50 of your Form 2555	2b			
c	Enter the amount from line 15 of your Form 4563	2c			
c	Add lines 2a through 2c			2d	
3	Add lines 1 and 2d.			3	412,175.
4	Number of qualifying children under age 17 with the required social security number	4	2		112/1/01
5	Multiply line 4 by \$2,000			5	4,000.
6	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number	6			
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citize U.S. resident alien. Also, do not include anyone you included on line 4.	n, U.S. nation	nal, or		
7	Multiply line 6 by \$500			7	
8	Add lines 5 and 7			8	4,000.
9	Enter the amount shown below for your filing status.				
	Married filing jointly—\$400,000				
	• All other filing statuses—\$200,000			9	400,000.
10	Subtract line 9 from line 3.				
	• If zero or less, enter -0				
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000	0. For			
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000			10	13,000.
11	Multiply line 10 by 5% (0.05)			11	650.
12	Is the amount on line 8 more than the amount on line 11?			12	3,350.
	No. STOP. You cannot take the child tax credit, credit for other dependents, or Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.	additional chi	ld tax credit.		
	X Yes. Subtract line 11 from line 8. Enter the result.				
13	Enter the amount from Credit Limit Worksheet A			13	69,100.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for	other depend	dents	14	3,350.
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.	•			<u> </u>

If the amount on line 12 is more than the amount on line 14, you may be able to take the additional child tax credit on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

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

Schedule 8812 (Form 1040) 2023

Part II-A Additional Child Tax Credit for All Filers			
Caution: If you file Form 2555, you cannot claim the additional child tax credit.			
15 Check this box if you do not want to claim the additional child tax credit. Skip F16a Subtract line 14 from line 12. If zero, stop here; you cannot take the additional Skip Parts II-A and II-B. Enter -0- on line 27.	child tax credit.		
•		16a	0.
b Number of qualifying children under 17 with the required social security number			
Enter the result. If zero, stop here ; you cannot claim the additional child tax creenter -0- on line 27		16b	
TIP: The number of children you use for this line is the same as the number of			
17 Enter the smaller of line 16a or line 16b.		17	
18a Earned income (see instructions)	18a	_	
b Nontaxable combat pay (see instructions)	-		
No. Leave line 19 blank and enter -0- on line 20.			
Yes. Subtract \$2,500 from the amount on line 18a. Enter the result	19		
20 Multiply the amount on line 19 by 15% (0.15) and enter the result		20	
No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise the smaller of line 17 or line 20 on line 27. Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the line 27. Otherwise, go to line 21.	·		
Part II-B Certain Filers Who Have Three or More Qualifying Childre	n and Bona Fide Resid	ents of	Puerto Rico
21 Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or if you are a bona fide resident of Puerto Rico, see instructions			
22 Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13	22		
23 Add lines 21 and 22	23		
24 1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11.			
1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	24		
25 Subtract line 24 from line 23. If zero or less, enter -0		25	
26 Enter the larger of line 20 or line 25		26	
Next, enter the smaller of line 17 or line 26 on line 27.			
Part II-C Additional Child Tax Credit			
27 This is your additional child tax credit. Enter this amount on Form 1040, 1040-	SR, or 1040-NR, line 28	27	0.

Schedule 8812 (Form 1040) 2023

(Rev. January 2021) Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

► ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Scale lecturity number Spouls Scale lecturity number Spouls Stock	Submission Identification Number (SID)		
Security comms	Taxpayer's name	Social security	number
Part II Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.) Inter whole dollars only on lines 1 through 5. Note: Form 1040-SS filters use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income. 1 Adjusted gross income. 2 88, 696. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 4 Amount you want refunded to you. 5 Amount you want refunded to you. 5 Amount you want refunded to you. 6 Amount you want refunded to you. 9 Tax II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 1 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 income tax return (original or amended) I am now authorizing, and to the income tax return (original or amended) I am now authorizing, and to the income tax return (original or amended) I am now authorizing, and to the transmission, (b) the reason for any delay in processing the return or retund, and (c) the date of any refund. If applicable, I	OSCAR ANDUJO	465-47-	7449
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filters use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income. 2 88,696. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 Federal income tax withheld from Form(s) 1099. 3 Federal income tax withhe	Spouse's name	Spouse's socia	l security number
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS (liers use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income. 2 Total tax. 2 188,696. 3 3 4 Amount you wan refunded to you. 5 Amount you wan you wa			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income	Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter y	ear you a	re authorizing.)
1 Adjusted gross income	Enter whole dollars only on lines 1 through 5.		
2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		1	1
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	•		
4 Amount you want refunded to you. 5 Amount you want refunded to you. 6 Amount you want refunded to you. 6 Amount you want refunded to you. 7 Apayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 9 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, concerd, and complete. I further declare that the amounts in Part I adove are the amounts from the best of my knowledge and belief, it is true, concerd, and complete. I further declare that the amounts in Part I adove are the amounts from the test of my knowledge and belief, it is true, concerd, and complete. I further declare that the amounts in Part I adove are the amounts from 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 or response) or 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 in Initiation to debit the entry to this account. This account. This account. This account initiation to the transmission. (b) the initiation of the initiation of the initiation or requests must be received no later than 2 business days prior to the payment (selftement) date, also authorize the initiancial initiation recessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature on the income tax return (original or amended) I am now authorizing. 1 authorize 1 authorize 1 Account Agent Ag		-	88,696
S Amount you owe S 89,534.	2		
Part II	· · · · · · · · · · · · · · · · · · ·		00 534
Inder paralities of parjury, 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 Port 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 the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic turns withdrawal (direct debit) entry to the financial institution to detect the intermediate service provider, transmitter, or electronic understanding and the intermediate service provider, transmitter, or electronic understanding and the intermediate service provider, transmitter, or electronic understanding and the intermediate and the intermediate service provider, transmitterior to debit the entry to the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until 1 notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, it must contact the U.S. Treasury Financial Agent at a contract the U.S. Treasury Financial Agent at a contract the full of the transmitterior in the intermediate authorization. To revoke (cancel) a payment, it must contact the U.S. Treasury Financial Agent at a contract the full of the transmitterior intermediate to the payment, it is authorized to 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 on the income tax return (original or amended) I am now authorizing. I authorize Hector Escamilla Jr CPA FRO firm name FRO firm		_	<u> </u>
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 sprind, if applicable, I authorize the delay in processing the return or refund, and (c) the date of sprind, if applicable, I authorize the 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 betalt the expension of the sprind of the financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-388-353-4337. Payment cancellation requests must be received no later than 2 business days prior the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive continues 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 Hector Escamilla Jr CPA			
X authorize Hector Escamilla Jr CPA to enter or generate my PIN 13617 as my ERRO firm name signature on the income tax return (original or amended) am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) 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 Part III Signature Practitioner PIN Practitioner	return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any ref U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or the financial institution to debit the entry to this account. This authorization is to remain in full force and efferinancial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treas 1-88-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the authorize the financial institutions involved in the processing of the electronic payment of taxes to receive coanswer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification is to remain and the processing of the electronic payment of taxes to receive coanswer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification is to remain and the processing of the electronic payment of taxes to receive coanswer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification is to remain and the processing of the electronic payment of taxes to receive the payment of the payment of the electronic payment of the elect	of receipt or in the control of the	reason for rejection of cable, I authorize the e financial institution of estimated tax, and tify the U.S. Treasury II Agent at ettlement) date. I also formation necessary to ber (PIN) below is my
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 PIN: check one box only I authorize Hector Escamilla Jr CPA	Taxpayer's PIN: check one box only		
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 PIN: check one box only I authorize Hector Escamilla Jr CPA	X authorize Hector Escamilla Jr CPA to enter or generate my	/ PIN	13617 as my
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 Spouse's PIN: check one box only XI authorize Hector Escamilla Jr CPA to enter or generate my PIN 25952 as my ERO firm name 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. 75627502428 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 ▶ Hector Escamilla Jr Date ▶ ERO Must Retain This Form — See Instructions	ERO firm name	En do	ter five digits, but n't enter all zeros
entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complète Part III below. Spouse's PIN: check one box only X authorize Hector Escamilla Jr CPA to enter or generate my PIN 25952 as my	signature on the income tax return (original or amended) I am now authorizing.		
Spouse's PIN: check one box only X authorize Hector Escamilla Jr CPA to enter or generate my PIN 25952 as my Enter five digits, but don't enter all zeros	I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete	g. Check this ete Part III b	s box only if you are elow.
authorize Hector Escamilla Jr CPA to enter or generate my PIN 25952 as my Enter five digits, but don't enter all zeros Enter five digits, but don't enter all zeros Enter five digits, but don't enter all zeros	Your signature	Date ►	
authorize Hector Escamilla Jr CPA to enter or generate my PIN 25952 as my Enter five digits, but don't enter all zeros Enter five digits, but don't enter all zeros Enter five digits, but don't enter all zeros	Spause's PIN: check one hay only		
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. 75627502428 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 ▶ Hector Escamilla Jr Date ▶ ERO Must Retain This Form — See Instructions	- 	, DINI	2E0E2 20 m
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 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. 75627502428 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 <i>e-file</i> Providers of Individual Income Tax Returns. ERO's signature Hector Escamilla Jr Date ERO Must Retain This Form — See Instructions			
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	signature on the income tax return (original or amended) I am now authorizing		
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. 75627502428 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 ► Hector Escamilla Jr Date ► ERO Must Retain This Form — See Instructions	I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing	g. Check this	s box only if you are elow.
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. Ton'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 ► Hector Escamilla Jr Date ► ERO Must Retain This Form — See Instructions			
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. 75627502428 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 ► Hector Escamilla Jr Date ► ERO Must Retain This Form — See Instructions			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Total 27502428 Don't enter all zeros	· ·		
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 ► Hector Escamilla Jr ERO Must Retain This Form — See Instructions	Part III Certification and Authentication — Practitioner PIN Method Only		
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 ► Hector Escamilla Jr Date ► ERO Must Retain This Form − See Instructions	ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		
ERO Must Retain This Form — See Instructions	I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I accordance with the requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized I	am submitti	riginal or amended) ng this return in
ERO Must Retain This Form — See Instructions	ERO's signature ► Hector Escamilla Jr	Date ►	
	ERO Must Retain This Form — See Instructions		

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074

Attachment Sequence No. 12A

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

SSN or taxpayer identification number

OSCAR and BARBARA ANDUJO

465-47-7449

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

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see

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

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

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

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

(B) Short-term transa X (C) Short-term transa	actions reported on	Form(s) 1099-B	showing basis wa	•	•	ne above)	
1 (a) Description of property (Example: 100 shares XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e)	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e) from column (d) and	
				in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).
4222 Merrell Rd	1/01/23	10/06/23	1,400,000.	1,089,776.			310,224.
2 Totals. Add the amount (subtract negative amo include on your Schedu checked), line 2 (if Bo) Box C above is checked	unts). Enter each t ule D, line 1b (if Bo k B above is checke	total here and ox A above is ed), or line 3 (if	1,400,000.	1.089.776.		0.	310.224.

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

Department of the Treasury Internal Revenue Service

Name(s) shown on your tax return

Net Investment Income Tax – Individuals, Estates, and Trusts

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

2023

Attachment 72

Your social security number or EIN

OSCA	R and BARBARA ANDUJO			465-4	7-7449					
Part	Investment Income	Section 6013(g) election (see instruction	ns)							
	Regulations section 1.1411-10(g) election (see instructions)									
	Tavable interest (see instructions)			·	1	1,913.				
2	,	s)			2	5,138.				
3					3	5,130.				
	,	erships, S corporations, trusts, trades or								
			4a	118,778.						
b	Adjustment for net income or loss	derived in the ordinary course of		•	-					
	a non-section 1411 trade or busine	ss (see instructions)	4b	-118,778.						
С	Combine lines 4a and 4b				4c					
5a	Net gain or loss from disposition of	f property (see instructions)	5a	294,738.						
b	Net gain or loss from disposition of	f property that is not subject to		·	-					
	net investment income tax (see ins	structions)	5b							
С	Adjustment from disposition of part	tnership interest or S corporation								
	,		5c							
_	· ·				5d	294,738.				
6	·	for certain CFCs and PFICs (see instruction	-		7					
7 8		income (see instructions)			8	301,789.				
Part		llocable to Investment Income and			0	301,769.				
		instructions)	9a	alions						
	' '	x (see instructions)	9b		-					
		s (see instructions)	9c		-					
					9d					
10		ıctions)			10					
11	Total deductions and modifications	. Add lines 9d and 10			11					
Part										
12		art II, line 11, from Part I, line 8. Individua				001 000				
		18a–21. If zero or less, enter -0			12	301,789.				
13	Individuals:	ee instructions)	13	412,175.						
14		ee instructions).	14	250,000.	-					
15		o or less, enter -0-	15	162,175.						
16		15			16	162,175.				
17		viduals. Multiply line 16 by 3.8% (0.038). E				101/1/01				
		structions)			17	6,163.				
	Estates and Trusts:									
18a	Net investment income (line 12 abo	ove)	18a							
b	Deductions for distributions of net i									
	,		18b							
С	Undistributed net investment incom		10.							
10-		enter -0 etions)	18c 19a							
	, ,									
		I trusts for the year (see instructions)	19b 19c							
20		e 19c			20					
21		ites and trusts. Multiply line 20 by 3.8% (0.								
		e instructions)			21					

(Rev. December 2022)

Department of the Treasury
Internal Revenue Service

Limitation on Business Interest Expense Under Section 163(i)

Attach to your tax return.

Go to www.irs.gov/Form8990 for instructions and the latest information.

OMB No. 1545-0123

Taxpayer name(s) shown on tax return Identification number OSCAR and BARBARA ANDUJO 465-47-7449 A If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter: Name of foreign entity Employer identification number, if any Reference ID number **B** Is the foreign entity a CFC group member? See instructions. No C Is this Form 8990 filed by the specified group parent for an entire CFC group? See instructions..... Yes Has a CFC or a CFC group made a safe harbor election? If yes, see instructions for which lines of Form 8990 to complete Computation of Allowable Business Interest Expense Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j). Section I—Business Interest Expense Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation..... 1 2 Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)..... Partner's excess business interest expense treated as paid or accrued 3 in current year (Schedule A, line 44, column (h))..... 3 4 Floor plan financing interest expense. See instructions..... 4 0. Section II—Adjusted Taxable Income **Tentative Taxable Income** 6 0. Additions (adjustments to be made if amounts are taken into account on line 6) 7 Any item of loss or deduction that is not properly allocable to a trade or 7 Any business interest expense not from a pass-through entity. See instructions R 9 Amount of any net operating loss deduction under section 172..... 9 10 Amount of any qualified business income deduction allowed under 10 11 11 Reserved for future use..... 12 Amount of any loss or deduction items from a pass-through entity. 12 See instructions. 13 Other additions. See instructions..... 13 Total current year partner's excess taxable income (Schedule A, line 14 44, column (f))..... 15 Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))..... 15 16 Total. Add lines 7 through 15..... 16 0. Reductions (adjustments to be made if amounts are taken into account on line 6) 17 Any item of income or gain that is not properly allocable to a trade or (0.)18 Any business interest income not from a pass-through entity. See instrs. . 18 0.)Amount of any income or gain items from a pass-through entity. See 19 19 20 20 (0, 1)21 Total. Combine lines 17 through 20..... 21 22 22

Sect	ion III-Business Interest Income		
23	Current year business interest income. See instructions		
24	Excess business interest income from pass-through entities (total of		
	Schedule A, line 44, column (g), and Schedule B, line 46, column (d)) 24		
25	Total. Add lines 23 and 24.	25	0.
Sect	ion IV—163(j) Limitation Calculations		
	Limitation on Business Interest Expense		
26	Multiply the adjusted taxable income from line 22 by the applicable		
	percentage. See instructions		
27	Business interest income (line 25)		
28	Floor plan financing interest expense (line 4)		_
29	Total. Add lines 26, 27, and 28.	29	0.
	Allowable Business Interest Expense		Γ
30	Total current year business interest expense deduction. See instructions	30	0.
	Carryforward		I
31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)	31	0.
Pai			
	ll is only completed by a partnership that is subject to section 163(j). The partnership items below are alloca arried forward by the partnership. See the instructions for more information.	ated t	o the partners and are
	Excess Business Interest Expense		
32	Excess business interest expense. Enter amount from line 31.	32	
	Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 3	_	
33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	33	
34	Subtract line 33 from line 26. (If zero or less, enter -0)	34	
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	35	
36	Excess taxable income. Multiply line 35 by line 22	36	
	Excess Business Interest Income		
37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less,		
3,	enter -0)	37	
Par		<u> </u>	
	III is only completed by S corporations that are subject to section 163(j). The S corporation items below are	alloc	ated to the shareholders.
	the instructions for more information.		
	Excess Taxable Income		
38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	38	
39	Subtract line 38 from line 26. (If zero or less, enter -0)	39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	40	
41	Excess taxable income. Multiply line 40 by line 22	41	
	Excess Business Interest Income		
42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less,		
	enter -0)	42	
		_	

Total.....

0

SCHEDULE A Summary of Partner's Section 163(j) Excess Items

Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I. (h) Excess business (i) Current year Excess Business Interest Expense (f) Current year (g) Current year interest expense excess business (a) Name of partnership (b) EIN (d) Prior year excess excess business treated as interest expense (e) Total (c) Current year carryforward taxable income interest income paid or accrued carryforward ((c) plus (d)) (see instructions) (see instructions) (see instructions) (see instructions) 823 0. 43 FC W HOUSTON 88-3880139 0. 823. 0. 0. 823.

SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

	(a) Name of S corporation	(b) EIN	(c) Current year excess taxable income	(d) Current year excess business interest income
45				
46	Total		0.	0.

Form **8990** (Rev. 12-2022)

Form **8995-A**

Qualified Business Income Deduction

Attach to your tax return.

Attachment Sequence No. **55A**

OMB No. 1545-2294

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

Go to www.irs.gov/Form8995A for instructions and the latest information.

OSCAR and BARBARA ANDUJO

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 above \$182,100 (\$364,200 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Par	Trade, Business, or Aggregation Information	1								—	
	nplete Schedules A, B, and/or C (Form 8995-A), as applicable, b instructions.	before	starting Pa	rt I.	Attac	h addit	ional worksheets	when ne	eded.		
1	1 (a) Trade husiness or aggregation name		(b) Check if specified service		(c) Check if aggregation			(d) Taxpayer identification number		(e) Check if patron	
Д	OSCAR ANDUJO						465-47-7449			_	
B]					
c			П								
Par	t II Determine Your Adjusted Qualified Business	since	ome	·						_	
			А				В		С		
2	Qualified business income from the trade, business, or aggregation. See instructions	2	1	10	,386					_	
3	Multiply line 2 by 20% (0.20). If your taxable income is \$182,100 or less (\$364,200 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	3		22	,077						
4	Allocable share of W-2 wages from the trade, business, or aggregation	4	,		, 0 , 1						
	Multiply line 4 by 50% (0.50)	5 6								_	
	Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	7								_	
	Multiply line 7 by 2.5% (0.025)	8								_	
	Add lines 6 and 8 Enter the greater of line 5 or line 9	9 10								_	
	W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	11									
12	Phased-in reduction. Enter the amount from line 26, if any	12		17	,601					—	
	Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	13			,601						
14	Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions	14									
15	Qualified business income component. Subtract line 14 from line 13 $\ldots \ldots$	15		17	,601					_	
16	Total qualified business income component. Add all amounts reported on line 15	16		17	,601						

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

Form 8995-A (2023)

Part III **Phased-in Reduction**

Complete Part III only if your taxable income is more than \$182,100 but not \$232,100 (\$364,200 and \$464,200 if married filing jointly)

and	l line 10 is less than line 3. Otherwi	se, ski	p Part III.								
					А			В		С	
17	Enter the amounts from line 3			17		22,0	77.				
18	Enter the amounts from line 10			18							
19	Subtract line 18 from line 17			19		22,0	77.				
20	Taxable income before qualified business income deduction	20	384,475.								
21	Threshold. Enter \$182,100 (\$364,200 if married filing jointly)	21	364,200.								
22	Subtract line 21 from line 20	22	20,275.								
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23	100,000.								
24	Phase-in percentage. Divide In 22 by In 23	24	20.275 [%]								
25	Total phase-in reduction. Multiply	line 19	by line 24	25		4,4	76.				
26	Qualified business income after ph line 25 from line 17. Enter this am for the corresponding trade or bus	ount h	ere and on line 12,	200		17 6	01				
For the corresponding trade or business											
-	Total qualified business income co										
	businesses, or aggregations. Ente	r the a	mount from line 16			27		17,601.			
28	Qualified REIT dividends and publincome or (loss). See instructions.					28					
29	Qualified REIT dividends and PTP	(loss)	carryforward from prio	r year	S	29 (
30	Total qualified REIT dividends and less than zero, enter -0					30					
31	REIT and PTP component. Multiply	y line 3	30 by 20% (0.20)			31					
32	Qualified business income deducti	on bef	ore the income limitation	on. Ac	ld lines 27				32	17	7,601.
33	Taxable income before qualified by	usines	s income deduction			33		384,475.			
	Enter your net capital gain, if any, (see instructions)					34		63,887.			
	Subtract line 34 from line 33. If ze		·						35),588.
	Income limitation. Multiply line 35								36	64	1,118.
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36.						37	17	7,601.		
38	38 DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37.							38			
39	Total qualified business income de	eductio	n. Add lines 37 and 38						39	17	7,601.
40	Total qualified REIT dividends and enter -0-	,	, ,					J ,	40)
										Form 8995	V (3033)

2023	Federal Statements	Page 1
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OSCAR and BARBARA ANDUJO

465-47-7449

Statement 1 Schedule E, Page 2 Part II - Income or Loss From Partnerships and S Corporations

Name	X i <u>Type</u> Forei		Basis Computation Required	Any Invst. Not At Risk	PTP	Passive Loss From Form 8582	Passive Income From Sch. K-1	Nonpassive Loss From Sch. K-1	Section 179 Deduction	Nonpassive Income From Sch. K-1
O B TRADERS LLC	Р	45-3725462								
TTB HOLDING GROUP LLC	Р	81-3044649								
TTB COMMERCIAL LLC	Р	82-2028902								
TTB CABINETS LLC	Р	83-0571964								
FC STARCREST SA INVESTORS LLC	Р	88-4113172								
FC W HOUSTON GEMINI LLC	Р	88-3880139								
EPC PROMECAP MF PARTNERS V LLC	Р	86-2046234			Total	\$ 0.	\$ 0.	<u>\$</u> 0.	\$ 0	. \$ 0.

465-47-7449

Statement 2 Form 1116, Line 10 Foreign Tax Credit Carryovers

General Category Income

		Foreign	Foreign	Foreign Tax
	Foreign	Taxes	Taxes	Credit
	<u>Taxes Paid</u>	Disallowed	Claimed	<u>Carryover</u>
2022 Foreign tax credit	0.	0.	0.	0.
2021 Foreign tax credit	0.	0.	0.	0.
2020 Foreign tax credit	0.	0.	0.	0.
2019 Foreign tax credit	0.	0.	0.	0.
2018 Foreign tax credit	0.	0.	0.	0.
2017 Foreign tax credit	0.	0.	0.	0.
2016 Foreign tax credit	1,943.	0.	1,866.	77.
2015 Foreign tax credit	0.	0.	0.	0.
2014 Foreign tax credit	0.	0.	0.	0.
2013 Foreign tax credit	0.	0.	0.	0.

Total Foreign Tax Credit Carryover - Form 1116, Line 10

\$ 77.

OSCAR and BARBARA ANDUJO

465-47-7449

Election to Capitalize Taxes and Carrying Charges

Pursuant to IRC Section 266 and Regulation Section 1.266-1(c), the taxpayer hereby elects to capitalize the following taxes and carrying charges incurred for the tax year ended 12/31/23.

Description of Expenditure: INTEREST EXPENSES - 4222 MERRELL Date Paid or Incurred: 10/06/23 Amount: \$29,235.