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P.	U4U-	' 3R	Department of the Treasury–Internal Revenue Service U.S. Tax Return for Seniors

2023

OMB No. 1545-0074

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For the year Jan. 1-	Dec. 31, 2023, or other tax year beginn	ing	,	2023, ending]			See	separa	ate ins	tructions
Your first name and	d middle initial	Last name						You	r soci	al sec	urity number
Ronald W		English	<u> </u>					:	257	-68	-5346
If joint return, spou	se's first name and middle initial	Last name						Spou	ıse's so	ocial se	curity number
Home address (nu	mber and street). If you have a P.O. box	x, see instructio	ons.			Apt.	no.	Pres	identia	al Elect	ion Campaign
4009 Kana	wha Turnpike					1	L0E	Che	ck her	e if yo	u, or your
	office. If you have a foreign address, als	so complete spa	aces below.	State	ZI	P code					ointly, want
South Cha	rleston			WV	25	5309	9		o go to		una. below will
Foreign country na	me	Foreign p	rovince/state/d	county	Fore	eign po	stal cod	le not	chang nd.		tax or
Status Check only one box. Digital At	Single Married filing jo Head of household (HOH) you checked the MFS box, enter the me if the qualifying person is a carry time during 2023, did you: (a) receiperwise dispose of a digital asset (or a f	Qualithe name of yhild but not yive (as a reward	ifying survi your spouse our dependon, award, or pa	ving spou . If you che ent: yment for pro	use (QSS ecked the	HOH	I or QS s); or (b)	SS box	x, ente	er the	child's
Deduction	Someone can claim: Y Spouse itemizes on a sep Age/Blindness You: Spouse:		or you we		status al		_	blind			
Dependents			(2) Social secu	urity number	(3) Relation		(4) Che	ck the box	k if qualit	fies for (see instructions):
(see instructions):	(1) First name Last name				to you	,	Child tax	credit	Credit	for oth	er dependents
If more than four											_
dependents, see								1		L	
instructions and							<u> </u>	<u> </u>		Ļ	
check here	Total and a wet forces Farms (a)	M O h a 4 /	(:	4:\				<u> </u>	4-	L	
income .	Total amount from Form(s) V	,	•	,					1a		
Attach b		•	,	,				-	1b		
Form(s) W-2 C here. Also									1c 1d		
attach Forms d W-2G and	1 7	•	, ,	•				-			
1099-R if tax								-	1e		
was † withheld.	Employer-provided adoption								1f		
If you did not	,								1g		
get a Form h W-2, see	`			· · · · · · i				📗	1h		
instructions.	Nontaxable combat pay elec	tion (see ins	structions)	[11			\rightarrow	4		
Attach Z			_i	<u>.</u>					1z		
Schedule B Za	·	2a		Taxable i				📙	2b		
if required. 3a	—	3a		Ordinary		ls · ·		· · ·	3b		
4a	—	4a		Taxable a				[4b		
5a	<u> </u>	5a		Taxable a				[5b		16,059.
6a				Taxable a				[6b		4,482.
С	,	sum election	n method, d	check here	e (see		_	. 1			
	instructions)							1 1			

Form 1040-SR (202	3) Ronald W English	<u> 257-6</u>	<u>8-5</u>	5346 Page 2
7	Capital gain or (loss). Attach Schedule D if required. If not required,			
	check here		7	
8	Additional income from Schedule 1, line 10		8	7,565.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income		9	28,106.
10	Adjustments to income from Schedule 1, line 26	1	10	535.
Standard 11	Subtract line 10 from line 9. This is your adjusted gross income	[1	11	27,571.
Deduction 12	Standard deduction or itemized deductions (from Schedule A)		12	15,700.
See Standard 113	Qualified business income deduction from Form 8995 or Form 8995-A	_	13	1,406.
Deduction Chart on the last page	Add lines 12 and 13		14	17,106.
of this form. 15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable inc	ome 1	15	10,465.
Tax and 16	Tax (see instructions). Check if any from:			
Credits	1 Form(s) 8814 2 Form(s) 4972 3		16	1,048.
17	Amount from Schedule 2, line 3	_	17	
18	Add lines 16 and 17		_	1,048.
19	Child tax credit or credit for other dependents from Schedule 8812		19	
20	Amount from Schedule 3, line 8		20	
21	Add lines 19 and 20	-	21	0.
22	Subtract line 21 from line 18. If zero or less, enter -0-		22	1,048.
23	Other taxes, including self-employment tax, from Schedule 2, line 21		23	1,069.
24	Add lines 22 and 23. This is your total tax	2	24	2,117.
Payments 25	Federal income tax withheld from:			
	Form(s) W-2			
b		_		
C	Other forms (see instructions)			
	Add lines 25a through 25c		5d	
If you have 26	2023 estimated tax payments and amount applied from 2022 return	2	26	
a qualifying 27 child, attach	Earned income credit (EIC)			
Sch. EIC. 28	Additional child tax credit from Schedule 8812			
29	American opportunity credit from Form 8863, line 8	_		
30	Reserved for future use			
31	Amount from Schedule 3, line 15			
32	Add lines 27, 28, 29, and 31. These are your total other payments and			•
22	refundable credits	_	32	0.
	Add lines 25d, 26, and 32. These are your total payments	3	33	0.

Go to www.irs.gov/Form1040SR for instructions and the latest information.

Form **1040-SR** (2023)

Form 1040-SI	R (20:	23) Ronald W	Englis	h				257-68	8-53	46 Page 3
Refund	34	If line 33 is mor	e than line	24, subtra	ct line 24	from line 33. Th	is is the			,
. (Orania		amount you ove	erpaid					3	4	0.
	35a	Amount of line	34 you wa	nt refunde	d to you	. If Form 8888 is	attached,			
		check here						🗌 🛭	5a	0.
Direct deposit See	? b	Routing number	XXXXXX	•		c Type: C	hecking	Savings		
instructions.										
	d	Account number	XXXXXX	i						
	36	Amount of line	34 you wa	nt applied	to your	2024				
		estimated tax					36			
Amount	37	Subtract line 33				-				
You Owe		For details on h	ow to pay,	go to www	v.irs.gov/l	Payments or see	instructions.	<u>3</u>	7	2,215.
							1 00 1			
	38	Estimated tax p	enalty (se	e instructio	ns)		38	98.		
Third Party							E	= 1		
Designee		Do you want to allow a	nother persor	n to discuss th	is return wit	h the IRS? See instru	ctions <u>2</u>	Yes. Comp	olete belo	w. No
		Designee's	. ~		Phon			sonal identificat	ion	202
		name David W			no.	423-482-9		nber (PIN)	•	093
Sign		er penalties of perjury, knowledge and belief, tl								
Here		hich preparer has any l		Jonest, and ot	impicto. Dot	siaration of proparci (t	otrici triari taxpaye	i) is based on	an inion	nation
	,	Your signature			Date	Your occupation		1		
Joint return?		Tour signature			Date	Tour occupation			•	an Identity ter it here
See instructions.						Retired		(see inst		ter it fiere
Keep a copy	-	Spouse's signature. If a j	oint return hot	h must sign	Date	Spouse's occupation	nn	(<u>′ </u>	
for your		opouoo o o.g. a.u. o a y	o, 20		54.0	Орошоо о осощрани	···	I		r spouse an PIN, enter it here
records.								(see inst		i iiv, enter it nere
	_	Phone no.			Email addre	000		(000)	,	
Paid		Preparer's name		Preparer's sign			Date	PTIN		Check if:
Preparer				l repairer engi				1	_	Self-employed
Use Only		David W Col	ling	David W	7 Coll	ins	01/16/2025	P03013	-	
USE UTILY	•		ax, LL	•			101/10/2023	Phone no		3)482-9737
				e St #6	4, 00	ltewah, TN	, 37363	Firm's EI	,	-3654940
				11 •	, ,	,				<u> </u>

Go to $\ensuremath{\textit{www.irs.gov/Form1040SR}}$ for instructions and the latest information.

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Form **1040-SR** (2023)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Your social security number

Department of the Treasury Internal Revenue Service

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

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information. 01

lona	ld W English		257-68	8-5346
Part I	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	7,565.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E	5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853 · · · · · · · · · · · · · · · · · · ·	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k		8k		
ı	Income from the rental of personal property if you engaged in the rental			
	· · · · · · · · · · · · · · · · · · ·	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	8n		
0	· / / / / / / / / / / / / / / / / / / /	80		
р		8p		
q	` ' '	8q p8		
r		8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	, , , , , , , , , , , , , , , , , , ,	8s (<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
		8t		
u		8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	here and on Form 1040,		
	1040-SR, or 1040-NR, line 8		10	7,565.

Conoda	- (Sim 10 10) 2020		rage Z
Part II	Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	535.
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8I from		
	the rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic		
	medals and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the		
	Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain		
	unlawful discrimination claims (see instructions)		
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		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1		
	(Form 1041)		
z	Other adjustments. List type and amount:		
	24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	535.

Schedule 1 (Form 1040) 2023

SCHEDULE 2 (Form 1040)

Additional Taxes

OMB No. 1545-0074

2023

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 02

Your social security number

Name((s) shown on Form 1040, 1040-SR, or 1040-NR	our socia	al security number
Ron	ald W English	25	7-68-5346
Part	Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	0.
Part	Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	1,069.
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	2
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life		
	insurance from Form W-2, box 12 · · · · · · · · · · · · · · · · · ·	13	3
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	5
16	Recapture of low-income housing credit. Attach Form 8611	16	6
			(continued on page 2)

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

Schedule 2 (Form 1040) 2023

Part	Other Taxes (continued)			
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	17b		
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	Additional tax on Medicare Advantage MSA distributions. Attach			
	Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a			
3	fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation			
	plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred			
•	compensation plan described in section 457A · · · · · · · · · · · · · · · · · · ·	17i		
i	Section 72(m)(5) excess benefits tax	17j		
, k	Golden parachute payments	17k		
ı	Tax on accumulation distribution of trusts	171	-	
m	Excise tax on insider stock compensation from an expatriated	111		
""	corporation	17m		
_	Look-back interest under section 167(g) or 460(b) from Form	17.111		
n	8697 or 8866	17n		
_		1711		
0	Tax on non-effectively connected income for any part of the	170		
	year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions	470		
	,	17p		
q	,	17q		
Z	Any other taxes. List type and amount:	47_		
40	T-6.1 - 170 16 A 117 47 - 6 1 47	17z	40	
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use	1 1	19	
20	Section 965 net tax liability installment from Form 965-A			
21	Add lines 4, 7 through 16, and 18. These are your total other taxes. En			1 0.50
	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21	1,069.

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name of proprietor Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1066.

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

Attachment Sequence No. 09

Social security number (SSN)

Consultant 8130	from instructions 0 0 D number (EIN) (see instr.)
	D number (EIN) (see instr.)
E Business address (including suite or room no.) 4009 KANAWHA TPKE APT 10E	
City, town or post office, state, and ZIP code	
F Accounting method: (1) X Cash (2) Accrual (3) Other (specify)	
G Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses	. X Yes No
H If you started or acquired this business during 2023, check here	
I Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions	Yes X No
J If "Yes," did you or will you file required Form(s) 1099?	Yes No
Part I Income	
1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on	
Form W-2 and the "Statutory employee" box on that form was checked	7,565.
2 Returns and allowances	
3 Subtract line 2 from line 1	7,565.
4 Cost of goods sold (from line 42)	
5 Gross profit. Subtract line 4 from line 3	7,565.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	
7 Gross income. Add lines 5 and 6	7,565.
Part II Expenses. Enter expenses for business use of your home only on line 30.	
8 Advertising	
9 Car and truck expenses (see 19 Pension and profit-sharing plans . 19	
instructions)	
10 Commissions and fees 10 a Vehicles, machinery, and equipment 20a	
11 Contract labor (see instructions) 11 b Other business property 20b	
12 Depletion	
13 Depreciation and section 179 22 Supplies (not included in Part III) 22	
expense deduction (not included 23 Taxes and licenses	
in Part III) (see instructions)	
14 Employee benefit programs a Travel	
(other than on line 19) 14 b Deductible meals (see instructions) 24b	
15 Insurance (other than health)	
16 Interest (see instructions): 26 Wages (less employment credits)	
a Mortgage (paid to banks, etc.) 16a 27a Other expenses (from line 48) 27a	
b Other	
17 Legal and professional services 17 deduction (attach Form 7205) 27b	
Total expenses before expenses for business use of home. Add lines 8 through 27b	0.
Tentative profit or (loss). Subtract line 28 from line 7	7,565.
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829	
unless using the simplified method. See instructions.	
Simplified method filers only: Enter the total square footage of (a) your home:	
and (b) the part of your home used for business: Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	
Worksheet in the instructions to figure the amount to enter on line 30	
• If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked	
	7,565.
the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	1,505.
32 If you have a loss, check the box that describes your investment in this activity. See instructions.	
If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE,	
	I investment is at risk.
	ome investment is not
	risk.

SCHEDULE SE (Form 1040)

Self-Employment Tax

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

2023 Attachment Sequence No. 17

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Ronald W English

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

Social security number of person with self-employment income 257-68-5346

D1	Out Francisco and Trans		
Part			
	If your only income subject to self-employment tax is church employee income , see instructions for how to report your	income	
	e definition of church employee income.		
Α	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you have a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you have a minister of a religious order.		
	\$400 or more of other net earnings from self-employment, check here and continue with Part I		
Skip lin	es 1a and 1b if you use the farm optional method in Part II. See instructions.		
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065),		
	box 14, code A	1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve		
	Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ	1b	()
Skip lin	e 2 if you use the nonfarm optional method in Part II. See instructions.		
2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than		
	farming). See instructions for other income to report or if you are a minister or member of a religious order	2	7,565.
3	Combine lines 1a, 1b, and 2	3	7,565.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3	4a	6,986.
	Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
С	Combine lines 4a and 4b. If less than \$400, stop; you don't owe self-employment tax. Exception: If		
	less than \$400 and you had church employee income , enter -0- and continue.	4c	6,986.
5a	Enter your church employee income from W-2. See instructions for		
	definition of church employee income		
b	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-	5b	0.
6	Add lines 4c and 5b	6	6,986.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or		
	the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2023	7	160,200
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2)		
	and railroad retirement (tier 1) compensation. If \$160,200 or more, skip lines		
	8b through 10, and go to line 11		
b	Unreported tips subject to social security tax from Form 4137, line 10		
С	Wages subject to social security tax from Form 8919, line 10		
d	Add lines 8a, 8b, and 8c	8d	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	160,200.
10	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	866.
11	Multiply line 6 by 2.9% (0.029)	11	203.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4, or		
	Form 1040-SS, Part I, line 3	12	1,069.
13	Deduction for one-half of self-employment tax.		
	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	line 15		

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

Schedule SE (Form 1040) 2023

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Part II Optional Methods To Figure Net Earnings (see instructions)					
Farm	Optional Method. You may use this method only if (a) your gross farm in	come ¹ wasn't more than			
\$9,840	0, or (b) your net farm profits² were less than \$7,103.				
14	Maximum income for optional methods		14	6,560	
15 Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$6,560. Also, include					
	this amount on line 4b above		15		
Nonfa	rm Optional Method. You may use this method only if (a) your net nonfa	rm profits³ were less than \$7,103			
and al	so less than 72.189% of your gross nonfarm income, and (b) you had no	et earnings from self-employment			
of at least \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.					
16	Subtract line 15 from line 14		16		
17	Enter the smaller of: two-thirds (2 /3) of gross nonfarm income (not les	s than zero) or the amount on			
	line 16. Also, include this amount on line 4b above	.,	17		
¹ From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.		³ From Sch. C, line 31; and Sch. K-1 (Form 1065),	box 14, c	ode A.	
² From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A-minus the amount you would have entered on line 1b had you not used the optional method.		ox 14, coo	de C.		

UYA

Schedule SE (Form 1040) 2023

Form **8995**

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

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

OMB No. 1545-2294

2023

Attachment Sequence No. **55**

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

Ronald W English

Your taxpayer identification number 257-68-5346

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

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

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		(c) Qualified business income or (loss)	
i_	Ronald W English	57-68-5346		7,030.	
ii					
iii					
iv					
v					
2	Total qualified business income or (loss). Combine lines 1i through 1v,	7 030			
3	column (c)	7,030.			
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0 4	7,030.			
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	1,406.	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)				
	(see instructions)				
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior				
•	year	()			
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0				
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9		
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		10	1,406.	
11	Taxable income before qualified business income deduction (see instructions) 11	11,871.			
12	Enter your net capital gain, if any, increased by any qualified dividends				
	(see instructions)				
13	Subtract line 12 from line 11. If zero or less, enter -0				
14	Income limitation. Multiply line 13 by 20% (0.20)		14	2,374.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on			1 406	
40	the applicable line of your return (see instructions)		15	1,406.	
16 17	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0		16)	
17	zero, enter -0		17	(
	beautiful December 1 Declaration And Notice		••	5 000F (2000)	

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

Form **8995** (2023)

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