



2019

# Rental and Royalty Income

Location of Property: Main Street Milwaukee

TSJ .....  
Type of property: Rental

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Have you prepared or will you prepare all required Forms 1099? .....

Ownership percentage if not 100% .....  
How many days was this property rented at fair market value? .....  
How many days was this property used personally (including use by family members)? .....

2019	2018
365 %	

### Income:

Rents received .....  
Royalties received .....

2019 Amount	2018 Amount
13500	

Payment card and third party transactions:  Include all Forms 1099-K

Description	2019 Amount	2018 Amount

Miscellaneous income:  Include all Forms 1099-MISC

Description	2019 Amount	2018 Amount

Other income:

Description	2019 Amount	2018 Amount



2019

### Rental and Royalty Expenses

10A

Location of Property: Main Street Milwaukee

**Expenses:**

- Advertising .....
- Auto and travel .....
- Cleaning and maintenance .....
- Commissions .....
- Insurance .....
- Legal and other professional fees .....
- Management fees .....
- Mortgage interest paid to banks, etc. ....
- Mortgage interest paid to individuals .....
- Other interest .....
- Repairs .....
- Supplies .....
- Taxes .....
- Utilities .....
- Dependent care benefits .....
- Employee benefits .....
- Other Expenses:

2019 Amount	2018 Amount
177	
335	
498	
19582	
6076	
6109.09	

Description	2019 Amount	2018 Amount

Purchased 1-3-2012  
\$ 70,000



### A. Settlement Statement (HUD-1)

<b>B. Type of Loan</b>				6. File Number:	7. Loan Number:	8. Mortgage Insurance Case Number:
1. <input type="checkbox"/> FHA	2. <input type="checkbox"/> RHS	3. <input type="checkbox"/> Conv. Unins.	4. <input type="checkbox"/> VA	201110604		
5. <input type="checkbox"/> Conv. Ins.						

**C. NOTE:** This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "(p.o.c.)" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.

<b>D. Name and Address of Borrower</b> Mr & Mrs MOUSE	<b>E. Name and Address of Seller</b> CAROLINE T KNOTEK 10725 DE LA WARR CIRCLE MEQUON, WI 53092	<b>F. Name and Address of Lender</b> CASH CLOSING
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<b>G. Property Location</b> 402 MAIN STREET MILWAUKEE, WI 53217	<b>H. Settlement Agent</b> BURNET TITLE 12075 N. CORPORATE PARKWAY, SUITE 130, MEQUON, WI 53092 Phone : (262) 243-5200 Place of Settlement 12075 N. CORPORATE PARKWAY, SUITE 130, MEQUON, WI 53092	<b>I. Settlement Date</b> 01/03/2012 <b>Disbursement Date</b> 01/03/2012
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J. Summary of Borrower's Transaction	
100. Gross Amount Due from Borrower	
101. Contract Sales Price	\$70,000.00
102. Personal Property	
103. Settlement charges to borrower (line 1400)	\$165.00
104.	
105.	
Adjustment for items paid by seller in advance	
106. City/Town/Village Taxes	
107. County Taxes	
108. Assessments	
109.	
110.	
111.	
112.	
<b>120. Gross Amount Due from Borrower</b>	<b>\$70,165.00</b>

200. Amounts Paid by or In Behalf of Borrower	
201. Deposit or earnest money	\$1,000.00
202. Principal Loan Amount	
203. Existing loan(s) taken subject to	
204.	
205.	
206.	
207.	
208.	
209.	
Adjustments for items unpaid by seller	
210. City/Town/Village Taxes 5,989.01/yr 1/1/2012 to 1/3/2012	\$32.82
211. County Taxes	
212. Assessments	
213. Water/Sewer: \$174.60/92days=1.89782/day x 63 days=	\$119.56
214.	
215.	
216.	
217.	
218.	
219.	
<b>220. Total Paid by/for Borrower</b>	<b>\$1,152.38</b>

300. Cash at Settlement from/to Borrower	
301. Gross amount due from borrower (line 120)	\$70,165.00
302. Less amounts paid by/for borrower (line 220)	\$1,152.38
<b>303. Cash</b> <input checked="" type="checkbox"/> From <input type="checkbox"/> To Borrower	<b>\$69,012.62</b>

K. Summary of Seller's Transaction	
400. Gross Amount Due to Seller	
401. Contract Sales Price	\$70,000.00
402. Personal Property	
403.	
404.	
405.	
Adjustment for items paid by seller in advance	
406. City/Town/Village Taxes	
407. County Taxes	
408. Assessments	
409.	
410.	
411.	
412.	
<b>420. Gross Amount Due to Seller</b>	<b>\$70,000.00</b>

500. Reductions In Amount Due to Seller	
501. Excess Deposits	
502. Settlement Charges to Seller	\$4,500.00
503. Existing loan(s) taken subject to	
504.	
505.	
506. Earnest money retained by Agent	\$1,000.00
507.	
508.	
509.	
Adjustments for items unpaid by seller	
510. City/Town/Village Taxes 5,989.01/yr 1/1/2012 to 1/3/2012	\$32.82
511. County Taxes	
512. Assessments	
513. Water/Sewer: \$174.60/92days=1.89782/day x 63 days=	\$119.56
514.	
515.	
516.	
517.	
518.	
519.	
<b>520. Total Reduction Amount Due Seller</b>	<b>\$5,652.38</b>

600. Cash at Settlement to/from Seller	
601. Gross amount due to seller (line 420)	\$70,000.00
602. Less reductions in amount due seller (line 520)	\$5,652.38
<b>603. Cash</b> <input checked="" type="checkbox"/> To <input type="checkbox"/> From Seller	<b>\$64,347.62</b>

The Public Reporting Burden for this collection of information is estimated to average 35 minutes per response for collecting, reviewing, and reporting the data. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number. No confidentiality is assured; this disclosure is mandatory. This is designed to provide the parties to a RESPA covered transaction with information during the settlement process.

Initials \_\_\_\_\_

1-3-2012

8825

Rental Real Estate Income and Expenses of a Partnership or an S Corporation

OMB No. 1545-1186

Form (Rev. December 2010) Department of the Treasury Internal Revenue Service

See instructions on page 2. Attach to Form 1065, Form 1065-B, or Form 1120S.

Name: MAIN STREET MILWAUKEE LLC Employer identification number: 35: 9999999

Table with 4 columns: Property type/address, Type code, Fair Rental Days, Personal Use Days. Row A: 402 MAIN STREET MILWAUKEE, WI 53217, Type 1.

Summary table with columns: Rental Real Estate Income/Expenses, Properties A, B, C, D. Row 2: Gross rents 13,500. Row 16: Total expenses 18,645. Row 17: Net income (loss) -5,145.

Summary rows 18a-19. 18a: Total gross rents 13,500. 18b: Total expenses 18,645. 19: Net gain (loss) from Form 4797.

Summary rows 20a-20b. 20a: Net income (loss) from rental real estate activities. 20b: Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a.

Summary row 21: Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on: Form 1065 or 1120S: Schedule K, line 2, or Form 1065-B: Part I, line 4. Result: -5,145.

1 Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.

	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see below for list	Fair Rental Days	Personal Use Days
E				
F				
G				
H				

		Properties			
		E	F	G	H
<b>Rental Real Estate Income</b>					
2 Gross rents	2				
<b>Rental Real Estate Expenses</b>					
3 Advertising	3				
4 Auto and travel	4				
5 Cleaning and maintenance	5				
6 Commissions	6				
7 Insurance	7				
8 Legal and other professional fees	8				
9 Interest	9				
10 Repairs	10				
11 Taxes	11				
12 Utilities	12				
13 Wages and salaries	13				
14 Depreciation (see instructions)	14				
15 Other (list) ▶	15				
16 Total expenses for each property. Add lines 3 through 15	16				
17 Income or (Loss) from each property. Subtract line 16 from line 2	17				

**Allowable Codes for Type of Property**

- 1 - Single Family Residence
- 2 - Multi-Family Residence
- 3 - Vacation or Short-Term Rental
- 4 - Commercial
- 5 - Land
- 6 - Royalties
- 7 - Self-Rental
- 8 - Other (include description with the code on Form 8825 or on a separate statement)

2012 DEPRECIATION AND AMORTIZATION REPORT  
 MAIN STREET MILWAUKEE LLC

R- 1

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	LAND	010312	L			31,580.			31,580.			0.
2	BUILDING	010312	SL	27.50	19H	38,420.			38,420.			1,339.
3	CLOSING COSTS	010312		60M	42	977.			977.			195.
4	APPLIANCES BUILDING	033112	200DB	5.00	19B	2,204.		1,102.	1,102.			1,323.
5	IMPROVEMENTS	033112	SL	27.50	19H	14,601.			14,601.			420.
6	OTHER IMPROVEMENTS	041712	150DB	15.00	19E	1,800.		900.	900.			945.
	* TOTAL RENTAL DEPRECIATION & AMOR					89,582.		2,002.	87,580.	0.		4,222.
	CURRENT ACTIVITY											
	BEGINNING BALANCE					0.		0.	0.	0.		
	ACQUISITIONS					89,582.		2,002.	87,580.	0.		
	DISPOSITIONS					0.		0.	0.	0.		
	ENDING BALANCE					89,582.		2,002.	87,580.	0.		

Filing Status  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Personal information section including names (MICKEY MOUSE, MINNIE MOUSE), social security numbers (123 45 6789, 987 65 4321), home address (403 MAIN STREET, MILWAUKEE, WI 53217), and marital status options.

Standard Deduction  Someone can claim:  You as a dependent  Your spouse as a dependent  Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You:  Were born before January 2, 1955  Are blind Spouse:  Was born before January 2, 1955  Is blind

Table for dependents with columns for (1) First name, Last name, (2) Social security number, (3) Relationship to you, and (4) Child tax credit/Credit for other dependents.

Main income and deduction table with rows for Wages (1), Tax-exempt interest (2a), Dividends (3a), IRA distributions (4a), Pensions (c), Social security (5a), Capital gain (6), Other income (7a), Adjustments (8a), Standard deduction (9), Business income (10), and Taxable income (11a/b).

Standard Deduction for - Single or Married filing separately, \$12,200; Married filing jointly or Qualifying widow(er), \$24,400; Head of household, \$18,350.

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

<b>12a</b>	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	<b>12a</b>	13,283.
<b>b</b>	Add Schedule 2, line 3, and line 12a and enter the total	<b>12b</b>	13,283.
<b>13a</b>	Child tax credit or credit for other dependents	<b>13a</b>	
<b>b</b>	Add Schedule 3, line 7, and line 13a and enter the total	<b>13b</b>	
<b>14</b>	Subtract line 13b from line 12b. If zero or less, enter -0-	<b>14</b>	13,283.
<b>15</b>	Other taxes, including self-employment tax, from Schedule 2, line 10	<b>15</b>	
<b>16</b>	Add lines 14 and 15. This is your total tax	<b>16</b>	13,283.
<b>17</b>	Federal income tax withheld from Forms W-2 and 1099	<b>17</b>	
<b>18</b>	Other payments and refundable credits:		
<b>a</b>	Earned income credit (EIC)	<b>18a</b>	
<b>b</b>	Additional child tax credit. Attach Schedule 8812	<b>18b</b>	
<b>c</b>	American opportunity credit from Form 8863, line 8	<b>18c</b>	
<b>d</b>	Schedule 3, line 14	<b>18d</b>	
<b>e</b>	Add lines 18a through 18d. These are your total other payments and refundable credits	<b>18e</b>	
<b>19</b>	Add lines 17 and 18e. These are your total payments	<b>19</b>	

• If you have a qualifying child, attach Sch. EIC.  
 • If you have nontaxable combat pay, see instructions

**Refund**

**20** If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid **20**

**21a** Amount of line 20 you want refunded to you. If Form 8888 is attached, check here  **21a**

**b** Routing number  **c** Type:  Checking  Savings

**d** Account number

**22** Amount of line 20 you want applied to your 2020 estimated tax **22**

**Amount You Owe**

**23** Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions **23** 13,283.

**24** Estimated tax penalty (see instructions) **24**

**Third Party Designee** Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions  **Yes. Complete below.**  **No**

Designee's name  Phone no.  Personal identification number (PIN)

**Sign Here**

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

Your signature  Date  Your occupation **CARTOON STAR**

Spouse's signature. If a joint return, both must sign.  Date  Spouse's occupation **CARTOON DIVA**

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no.  Email address

**Paid Preparer Use Only**

Preparer's name **EVE K ROMERSI, CPA, MST** Preparer's signature **EVE K ROMERSI, CPA, MST** Date **02/12/20** PTIN **P00186188**

Check if:  3rd Party Designee  Self-employed

Firm's name **SCRIBNER, COHEN AND COMPANY, S.C.** Phone no. **414-271-1700** Firm's EIN **39-1210538**

Firm's address **400 EAST MASON STREET, SUITE 300 MILWAUKEE, WI 53202**

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information. Form 1040 (2019)



## Passive Activity Loss Limitations

▶ See separate instructions.  
 ▶ Attach to Form 1040, Form 1040-SR, or Form 1041.  
 ▶ Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.

Name(s) shown on return <b>MICKEY &amp; MINNIE MOUSE</b>	Identifying number <b>123-45-6789</b>
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### Part I 2019 Passive Activity Loss

**Caution:** Complete Worksheets 1, 2, and 3 before completing Part I.

<b>Rental Real Estate Activities With Active Participation</b> (For the definition of active participation, see <b>Special Allowance for Rental Real Estate Activities</b> in the instructions.)			
1a Activities with net income (enter the amount from Worksheet 1, column (a))	<b>1a</b>		<b>1d</b>
1b Activities with net loss (enter the amount from Worksheet 1, column (b))	<b>1b</b> ( )		
1c Prior years' unallowed losses (enter the amount from Worksheet 1, column (c))	<b>1c</b> ( )		
1d Combine lines 1a, 1b, and 1c			
<b>Commercial Revitalization Deductions From Rental Real Estate Activities</b>			
2a Commercial revitalization deductions from Worksheet 2, column (a)	<b>2a</b> ( )		<b>2c</b> ( )
2b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	<b>2b</b> ( )		
2c Add lines 2a and 2b			
<b>All Other Passive Activities</b>			
3a Activities with net income (enter the amount from Worksheet 3, column (a))	<b>3a</b>		<b>3d</b>
3b Activities with net loss (enter the amount from Worksheet 3, column (b))	<b>3b</b> ( <b>5,145</b> )		
3c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c))	<b>3c</b> ( )		
3d Combine lines 3a, 3b, and 3c			
4 Combine lines 1d, 2c, and 3d. 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, 2b, or 3c. Report the losses on the forms and schedules normally used		<b>4</b>	<b>-5,145.</b>

- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
  - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
  - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

**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 or Part III. Instead, go to line 15.

### Part II Special Allowance for Rental Real Estate Activities With Active Participation

**Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.

5 Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	<b>5</b>		
6 Enter \$150,000. If married filing separately, see instructions	<b>6</b>		<b>10</b>
7 Enter modified adjusted gross income, but not less than zero. See instructions <b>Note:</b> If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.	<b>7</b>		
8 Subtract line 7 from line 6	<b>8</b>		
9 Multiply line 8 by 50% (0.50). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions	<b>9</b>		
10 Enter the <b>smaller</b> of line 5 or line 9 If line 2c is a loss, go to Part III. Otherwise, go to line 15.	<b>10</b>		

### Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

**Note:** Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	<b>11</b>		
12 Enter the loss from line 4	<b>12</b>		<b>14</b>
13 Reduce line 12 by the amount on line 10	<b>13</b>		
14 Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13			

### Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	<b>15</b>		
16 <b>Total losses allowed from all passive activities for 2019.</b> Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	<b>16</b>		<b>0.</b>

**Filing Status**  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. ▶

Your first name and middle initial <b>MICKEY</b>		Last name <b>MOUSE</b>	Your social security number <b>123 45 6789</b>
If joint return, spouse's first name and middle initial <b>MINNIE</b>		Last name <b>MOUSE</b>	Spouse's social security number <b>987 65 4321</b>
Home address (number and street). If you have a P.O. box, see instructions. <b>403 MAIN STREET</b>			Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>MILWAUKEE, WI 53217</b>			<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name		Foreign province/state/county	Foreign postal code
If more than four dependents, see instructions and ✓ here <input type="checkbox"/>			

**Standard Deduction** **Someone can claim:**  You as a dependent  Your spouse as a dependent  
 Spouse itemizes on a separate return or you were a dual-status alien

**Age/Blindness You:**  Were born before January 2, 1955  Are blind **Spouse:**  Was born before January 2, 1955  Is blind

(1) First name		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
Last name				Child tax credit	Credit for other dependents

1	Wages, salaries, tips, etc. Attach Form(s) W-2		STMT 1	1	125,000.
2a	Tax-exempt interest	2a		2b	
3a	Qualified dividends	3a		3b	
4a	IRA distributions	4a		4b	
c	Pensions and annuities	4c		4d	
5a	Social security benefits	5a		5b	
6	Capital gain or (loss). Attach Schedule D if required. If not required, check here			6	
7a	Other income from Schedule 1, line 9			7a	-5,145.
b	Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your <b>total income</b>			7b	119,855.
8a	Adjustments to income from Schedule 1, line 22			8a	
b	Subtract line 8a from line 7b. This is your <b>adjusted gross income</b>			8b	119,855.
9	<b>Standard deduction or itemized deductions</b> (from Schedule A)	9	27,000.		
10	Qualified business income deduction. Attach Form 8995 or Form 8995-A	10			
11a	Add lines 9 and 10			11a	27,000.
b	<b>Taxable income.</b> Subtract line 11a from line 8b. If zero or less, enter -0-			11b	92,855.

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

<b>12a</b>	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	<b>12a</b>	12,150.
<b>b</b>	Add Schedule 2, line 3, and line 12a and enter the total	<b>12b</b>	12,150.
<b>13a</b>	Child tax credit or credit for other dependents	<b>13a</b>	
<b>b</b>	Add Schedule 3, line 7, and line 13a and enter the total	<b>13b</b>	
<b>14</b>	Subtract line 13b from line 12b. If zero or less, enter -0-	<b>14</b>	12,150.
<b>15</b>	Other taxes, including self-employment tax, from Schedule 2, line 10	<b>15</b>	
<b>16</b>	Add lines 14 and 15. This is your total tax	<b>16</b>	12,150.
<b>17</b>	Federal income tax withheld from Forms W-2 and 1099	<b>17</b>	
<b>18</b>	Other payments and refundable credits:		
<b>a</b>	Earned income credit (EIC)	<b>18a</b>	
<b>b</b>	Additional child tax credit. Attach Schedule 8812	<b>18b</b>	
<b>c</b>	American opportunity credit from Form 8863, line 8	<b>18c</b>	
<b>d</b>	Schedule 3, line 14	<b>18d</b>	
<b>e</b>	Add lines 18a through 18d. These are your total other payments and refundable credits	<b>18e</b>	
<b>19</b>	Add lines 17 and 18e. These are your total payments	<b>19</b>	

• If you have a qualifying child, attach Sch. EIC.  
 • If you have nontaxable combat pay, see instructions

**Refund**

**20** If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid **20**

**21a** Amount of line 20 you want refunded to you. If Form 8888 is attached, check here **21a**

**b** Routing number **c** Type:  Checking  Savings

**d** Account number

**22** Amount of line 20 you want applied to your 2020 estimated tax **22**

**Amount You Owe**

**23** Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions **23** 12,150.

**24** Estimated tax penalty (see instructions) **24**

**Third Party Designee** Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions  Yes. Complete below.  No

Designee's name Phone no. Personal identification number (PIN)

**Sign Here**

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

Your signature Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

CARTOON STAR  
CARTOON DIVA

**Paid Preparer Use Only**

Preparer's name EVE K ROMERSI, CPA, MST Preparer's signature EVE K ROMERSI, CPA, MST Date 02/12/20 PTIN P00186188

Check if:  3rd Party Designee  Self-employed

Firm's name SCRIBNER, COHEN AND COMPANY, S.C. Phone no. 414-271-1700 Firm's EIN 39-1210538

400 EAST MASON STREET, SUITE 300  
MILWAUKEE, WI 53202

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information. Form 1040 (2019)

**Passive Activity Loss Limitations**

Department of the Treasury  
Internal Revenue Service (99)

▶ See separate instructions.  
▶ Attach to Form 1040, Form 1040-SR, or Form 1041.  
▶ Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.

Name(s) shown on return <b>MICKEY &amp; MINNIE MOUSE</b>	Identifying number <b>123-45-6789</b>
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**Part I 2019 Passive Activity Loss**

**Caution:** Complete Worksheets 1, 2, and 3 before completing Part I.

<b>Rental Real Estate Activities With Active Participation</b> (For the definition of active participation, see <b>Special Allowance for Rental Real Estate Activities</b> in the instructions.)			
<b>1a</b> Activities with net income (enter the amount from Worksheet 1, column (a))	<b>1a</b>		
<b>b</b> Activities with net loss (enter the amount from Worksheet 1, column (b))	<b>1b</b>	( 5,145 )	
<b>c</b> Prior years' unallowed losses (enter the amount from Worksheet 1, column (c))	<b>1c</b>	( )	
<b>d</b> Combine lines 1a, 1b, and 1c	<b>1d</b>		-5,145.
<b>Commercial Revitalization Deductions From Rental Real Estate Activities</b>			
<b>2a</b> Commercial revitalization deductions from Worksheet 2, column (a)	<b>2a</b>	( )	
<b>b</b> Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	<b>2b</b>	( )	
<b>c</b> Add lines 2a and 2b	<b>2c</b>	( )	
<b>All Other Passive Activities</b>			
<b>3a</b> Activities with net income (enter the amount from Worksheet 3, column (a))	<b>3a</b>		
<b>b</b> Activities with net loss (enter the amount from Worksheet 3, column (b))	<b>3b</b>	( )	
<b>c</b> Prior years' unallowed losses (enter the amount from Worksheet 3, column (c))	<b>3c</b>	( )	
<b>d</b> Combine lines 3a, 3b, and 3c	<b>3d</b>		
<b>4</b> Combine lines 1d, 2c, and 3d. 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, 2b, or 3c. Report the losses on the forms and schedules normally used	<b>4</b>		-5,145.

- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
  - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
  - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

**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 or Part III. Instead, go to line 15.

**Part II Special Allowance for Rental Real Estate Activities With Active Participation**

**Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.

<b>5</b> Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	<b>5</b>	5,145.
<b>6</b> Enter \$150,000. If married filing separately, see instructions	<b>6</b>	150,000.
<b>7</b> Enter modified adjusted gross income, but not less than zero. See instructions	<b>7</b>	125,000.
<b>Note:</b> If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
<b>8</b> Subtract line 7 from line 6	<b>8</b>	25,000.
<b>9</b> Multiply line 8 by 50% (0.50). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions	<b>9</b>	12,500.
<b>10</b> Enter the <b>smaller</b> of line 5 or line 9	<b>10</b>	5,145.

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

**Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**

**Note:** Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

<b>11</b> Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	<b>11</b>	
<b>12</b> Enter the loss from line 4	<b>12</b>	
<b>13</b> Reduce line 12 by the amount on line 10	<b>13</b>	
<b>14</b> Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13	<b>14</b>	

**Part IV Total Losses Allowed**

<b>15</b> Add the income, if any, on lines 1a and 3a and enter the total	<b>15</b>	
<b>16</b> <b>Total losses allowed from all passive activities for 2019.</b> Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	<b>16</b>	5,145.

Filing Status  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Your first name and middle initial: MICKEY; Last name: MOUSE; Your social security number: 123 45 6789

If joint return, spouse's first name and middle initial: MINNIE; Last name: MOUSE; Spouse's social security number: 987 65 4321

Home address (number and street): 403 MAIN STREET; Apt. no.:

City, town or post office, state, and ZIP code: MILWAUKEE, WI 53217; Presidential Election Campaign:  You  Spouse

Foreign country name, Foreign province/state/county, Foreign postal code; If more than four dependents, see instructions and check here.

Standard Deduction:  Spouse itemizes on a separate return or you were a dual-status alien; Someone can claim:  You as a dependent  Your spouse as a dependent

Age/Blindness: You:  Were born before January 2, 1955  Are blind; Spouse:  Was born before January 2, 1955  Is blind

Table with 4 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents.

Main tax calculation table with rows 1-11b. Includes sub-tables for taxable interest and dividends. Total taxable income: 1,098,000.

Standard Deduction for - Single or Married filing separately, \$12,200; Married filing jointly or Qualifying widow(er), \$24,400; Head of household, \$18,350.

12a	Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	12a	344,400.
b	Add Schedule 2, line 3, and line 12a and enter the total	12b	344,400.
13a	Child tax credit or credit for other dependents	13a	
b	Add Schedule 3, line 7, and line 13a and enter the total	13b	
14	Subtract line 13b from line 12b. If zero or less, enter -0-	14	344,400.
15	Other taxes, including self-employment tax, from Schedule 2, line 10	15	7,875.
16	Add lines 14 and 15. This is your total tax	16	352,275.
17	Federal income tax withheld from Forms W-2 and 1099	17	8,325.
18	Other payments and refundable credits:		
a	Earned income credit (EIC)	18a	
b	Additional child tax credit. Attach Schedule 8812	18b	
c	American opportunity credit from Form 8863, line 8	18c	
d	Schedule 3, line 14	18d	
e	Add lines 18a through 18d. These are your total other payments and refundable credits	18e	
19	Add lines 17 and 18e. These are your total payments	19	8,325.

● If you have a qualifying child, attach Sch. EIC.  
 ● If you have nontaxable combat pay, see instructions

**Refund**

20	If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid	20	
21a	Amount of line 20 you want refunded to you. If Form 8888 is attached, check here	21a	
b	Routing number	c Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number		
22	Amount of line 20 you want applied to your 2020 estimated tax	22	

**Amount You Owe**

23	Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions	23	343,950.
24	Estimated tax penalty (see instructions)	24	

**Third Party Designee** Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions

Yes. Complete below.  No

Designee's name: \_\_\_\_\_ Phone no.: \_\_\_\_\_ Personal identification number (PIN): \_\_\_\_\_

**Sign Here**

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
<i>[Signature]</i>		CARTOON STAR	<input type="text"/>
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
<i>[Signature]</i>		CARTOON DIVA	<input type="text"/>

**Paid Preparer Use Only**

Preparer's name	Preparer's signature	Date	PTIN	Check it:
EVE K ROMERSI, CPA, MST	EVE K ROMERSI, CPA, MST	02/12/20	P00186188	<input checked="" type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed
Firm's name	Phone no.	Firm's EIN		
SCRIBNER, COHEN AND COMPANY, S.C. 400 EAST MASON STREET, SUITE 300 MILWAUKEE, WI 53202	414-271-1700	39-1210538		

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information. Form 1040 (2019)

# Passive Activity Loss Limitations

▶ See separate instructions.  
 ▶ Attach to Form 1040, Form 1040-SR, or Form 1041.  
 ▶ Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.

Name(s) shown on return <b>MICKEY &amp; MINNIE MOUSE</b>	Identifying number <b>123-45-6789</b>
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## Part I 2019 Passive Activity Loss

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.

<b>Rental Real Estate Activities With Active Participation</b> (For the definition of active participation, see <b>Special Allowance for Rental Real Estate Activities</b> in the instructions.)			
1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		
1b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	( 5,145 )	
1c Prior years' unallowed losses (enter the amount from Worksheet 1, column (c))	1c	( )	
1d Combine lines 1a, 1b, and 1c	1d		-5,145.
<b>Commercial Revitalization Deductions From Rental Real Estate Activities</b>			
2a Commercial revitalization deductions from Worksheet 2, column (a)	2a	( )	
2b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	( )	
2c Add lines 2a and 2b	2c	( )	
<b>All Other Passive Activities</b>			
3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	( )	
3b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	( )	
3c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c))	3c	( )	
3d Combine lines 3a, 3b, and 3c	3d		
4 Combine lines 1d, 2c, and 3d. 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, 2b, or 3c. Report the losses on the forms and schedules normally used	4		-5,145.

- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
  - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
  - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

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 or Part III. Instead, go to line 15.

## Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

5 Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	5		5,145.
6 Enter \$150,000. If married filing separately, see instructions	6	150,000.	
7 Enter modified adjusted gross income, but not less than zero. See instructions	7	1,125,000.	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.			
8 Subtract line 7 from line 6	8	( )	
9 Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	9		
10 Enter the <b>smaller</b> of line 5 or line 9	10		0.

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

## Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11		
12 Enter the loss from line 4	12		
13 Reduce line 12 by the amount on line 10	13		
14 Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13	14		

## Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15		
16 Total losses allowed from all passive activities for 2019. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return	16		0.

Filing Status  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Personal information section including names (MICKEY MOUSE, MINNIE MOUSE), social security numbers (123 45 6789, 987 65 4321), and home address (403 MAIN STREET, MILWAUKEE, WI 53217).

Standard Deduction  Someone can claim:  You as a dependent  Your spouse as a dependent  Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You:  Were born before January 2, 1955  Are blind Spouse:  Was born before January 2, 1955  Is blind

Table with 4 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents.

Main income and deduction table with rows 1 through 11b, including taxable income of 1,092,855.

Standard Deduction for - Single or Married filing separately, \$12,200; Married filing jointly or Qualifying widow(er), \$24,400; Head of household, \$18,350.

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



<b>12a</b> Tax (see inst.) Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	<b>12a</b> 342,496.	
<b>b</b> Add Schedule 2, line 3, and line 12a and enter the total		<b>12b</b> 342,496.
<b>13a</b> Child tax credit or credit for other dependents	<b>13a</b>	
<b>b</b> Add Schedule 3, line 7, and line 13a and enter the total		<b>13b</b>
<b>14</b> Subtract line 13b from line 12b. If zero or less, enter -0-		<b>14</b> 342,496.
<b>15</b> Other taxes, including self-employment tax, from Schedule 2, line 10		<b>15</b> 7,875.
<b>16</b> Add lines 14 and 15. This is your total tax		<b>16</b> 350,371.
<b>17</b> Federal income tax withheld from Forms W-2 and 1099	SEE STATEMENT 2	<b>17</b> 8,325.
<b>18</b> Other payments and refundable credits:		
<b>a</b> Earned income credit (EIC)	<b>18a</b>	
<b>b</b> Additional child tax credit. Attach Schedule 8812	<b>18b</b>	
<b>c</b> American opportunity credit from Form 8863, line 8	<b>18c</b>	
<b>d</b> Schedule 3, line 14	<b>18d</b>	
<b>e</b> Add lines 18a through 18d. These are your total other payments and refundable credits		<b>18e</b>
<b>19</b> Add lines 17 and 18e. These are your total payments		<b>19</b> 8,325.

If you have a qualifying child, attach Sch. EIC.  
 If you have nontaxable combat pay, see instructions

<b>Refund</b> <b>20</b> If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid	<b>20</b>
<b>21a</b> Amount of line 20 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	<b>21a</b>
<b>b</b> Routing number <input type="text"/> <b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
<b>d</b> Account number <input type="text"/>	
<b>22</b> Amount of line 20 you want applied to your 2020 estimated tax	<b>22</b>

<b>Amount You Owe</b> <b>23</b> Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions	<b>23</b> 342,046.
<b>24</b> Estimated tax penalty (see instructions)	<b>24</b>

**Third Party Designee** Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions

**Yes.** Complete below.  
 **No**

Designee's name  Phone no.  Personal identification number (PIN)

**Sign Here**

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
<input type="text"/>	<input type="text"/>	CARTOON STAR	<input type="text"/>
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
<input type="text"/>	<input type="text"/>	REAL ESTATE OPERATOR	<input type="text"/>

Phone no.  Email address

**Paid Preparer Use Only**

Preparer's name	Preparer's signature	Date	PTIN	Check if:
EVE K ROMERSI, CPA, MST	EVE K ROMERSI, CPA, MST	02/12/20	P00186188	<input checked="" type="checkbox"/> 3rd Party Designee <input type="checkbox"/> Self-employed

Firm's name  **SCRIBNER, COHEN AND COMPANY, S.C.** Phone no. **414-271-1700** Firm's EIN **39-1210538**

Firm's address  **400 EAST MASON STREET, SUITE 300 MILWAUKEE, WI 53202**

Filing Status  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Your first name and middle initial: MICKEY; Last name: MOUSE; Your social security number: 123 45 6789

If joint return, spouse's first name and middle initial: MINNIE; Last name: MOUSE; Spouse's social security number: 987 65 4321

Home address (number and street): 403 MAIN STREET; Apt. no.:

City, town or post office, state, and ZIP code: MILWAUKEE, WI 53217; Presidential Election Campaign:  You  Spouse

Foreign country name, Foreign province/state/county, Foreign postal code; If more than four dependents, see instructions and check here.

Standard Deduction:  Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness: You:  Were born before January 2, 1955; Spouse:  Was born before January 2, 1955

Table with 4 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents

Main income table with rows 1-11b. Includes taxable income of 103,035. Includes sub-table for Standard Deduction (lines 9-10) with amount 27,000.

Standard Deduction for - Single or Married filing separately, \$12,200; Married filing jointly or Qualifying widow(er), \$24,400; Head of household, \$18,350

<b>12a</b>	<b>Tax</b> (see inst.) Check if any from Form(s): 1 8814 2 4972 3	<b>12a</b>	<b>14,385.</b>
<b>b</b>	Add Schedule 2, line 3, and line 12a and enter the total	<b>12b</b>	<b>14,385.</b>
<b>13a</b>	Child tax credit or credit for other dependents	<b>13a</b>	
<b>b</b>	Add Schedule 3, line 7, and line 13a and enter the total	<b>13b</b>	
<b>14</b>	Subtract line 13b from line 12b. If zero or less, enter -0-	<b>14</b>	<b>14,385.</b>
<b>15</b>	Other taxes, including self-employment tax, from Schedule 2, line 10	<b>15</b>	<b>766.</b>
<b>16</b>	Add lines 14 and 15. This is your <b>total tax</b>	<b>16</b>	<b>15,151.</b>
<b>17</b>	Federal income tax withheld from Forms W-2 and 1099	<b>17</b>	
<b>18</b>	Other payments and refundable credits:		
<b>a</b>	Earned income credit (EIC)	<b>18a</b>	
<b>b</b>	Additional child tax credit. Attach Schedule 8812	<b>18b</b>	
<b>c</b>	American opportunity credit from Form 8863, line 8	<b>18c</b>	
<b>d</b>	Schedule 3, line 14	<b>18d</b>	
<b>e</b>	Add lines 18a through 18d. These are your <b>total other payments and refundable credits</b>	<b>18e</b>	
<b>19</b>	Add lines 17 and 18e. These are your <b>total payments</b>	<b>19</b>	

- If you have a qualifying child, attach Sch. EIC.
- If you have nontaxable combat pay, see instructions

<b>Refund</b>	<b>20</b>	If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you <b>overpaid</b>	<b>20</b>	
	<b>21a</b>	Amount of line 20 you want <b>refunded to you</b> . If Form 8888 is attached, check here	<b>21a</b>	
Direct deposit? See instructions.	<b>b</b>	Routing number	<b>c</b>	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
	<b>d</b>	Account number		
	<b>22</b>	Amount of line 20 you want <b>applied to your 2020 estimated tax</b>	<b>22</b>	

<b>Amount You Owe</b>	<b>23</b>	<b>Amount you owe.</b> Subtract line 19 from line 16. For details on how to pay, see instructions	<b>23</b>	<b>15,151.</b>
	<b>24</b>	Estimated tax penalty (see instructions)	<b>24</b>	

**Third Party Designee** Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions

**Yes.** Complete below.  **No**

Designee's name: \_\_\_\_\_ Phone no.: \_\_\_\_\_ Personal identification number (PIN): \_\_\_\_\_

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

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_ Your occupation: **CARTOON STAR**

Spouse's signature. If a joint return, **both** must sign. \_\_\_\_\_ Date: \_\_\_\_\_ Spouse's occupation: **CARTOON DIVA**

If the IRS sent you an Identity Protection PIN, enter it here (see inst.) \_\_\_\_\_

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) \_\_\_\_\_

**Paid Preparer Use Only**

Preparer's name: **EVE K ROMERSI, CPA, MST** Preparer's signature: **EVE K ROMERSI, CPA, MST** Date: **02/13/20** PTIN: **P00186188**

Check if:  3rd Party Designee  Self-employed

Firm's name: **SCRIBNER, COHEN AND COMPANY, S.C.** Phone no.: **414-271-1700** Firm's EIN: **39-1210538**

Firm's address: **400 EAST MASON STREET, SUITE 300 MILWAUKEE, WI 53202**

**SCHEDULE C**  
(Form 1040 or 1040-SR)

Department of the Treasury  
Internal Revenue Service (99)

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

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

OMB No. 1545-0074

**2019**  
Attachment  
Sequence No. **09**

Name of proprietor

Social security number (SSN)

**MINNIE MOUSE**

**987-65-4321**

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

**B** Enter code from instructions

**REAL ESTATE DEVELOPER**

**531390**

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

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

**MINNIE'S HOME REHAB AND FLIP**

**E** Business address (including suite or room no.)  
City, town or post office, state, and ZIP code

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

**G** Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses  Yes  No

**H** If you started or acquired this business during 2019, check here

**I** Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions)  Yes  No

**J** If "Yes," did you or will you file required Forms 1099?  Yes  No

**Part I Income**

<b>1</b> Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	<b>1</b>	<b>100,000.</b>
<b>2</b> Returns and allowances	<b>2</b>	
<b>3</b> Subtract line 2 from line 1	<b>3</b>	<b>100,000.</b>
<b>4</b> Cost of goods sold (from line 42)	<b>4</b>	<b>94,582.</b>
<b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3	<b>5</b>	<b>5,418.</b>
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	<b>6</b>	
<b>7</b> <b>Gross income.</b> Add lines 5 and 6	<b>7</b>	<b>5,418.</b>

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

<b>8</b> Advertising	<b>8</b>		<b>18</b> Office expense	<b>18</b>	
<b>9</b> Car and truck expenses (see instructions)	<b>9</b>		<b>19</b> Pension and profit-sharing plans	<b>19</b>	
<b>10</b> Commissions and fees	<b>10</b>		<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions)	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment	<b>20a</b>	
<b>12</b> Depletion	<b>12</b>		<b>b</b> Other business property	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	<b>13</b>		<b>21</b> Repairs and maintenance	<b>21</b>	
<b>14</b> Employee benefit programs (other than on line 19)	<b>14</b>		<b>22</b> Supplies (not included in Part III)	<b>22</b>	
<b>15</b> Insurance (other than health)	<b>15</b>		<b>23</b> Taxes and licenses	<b>23</b>	
<b>16</b> Interest (see instructions):			<b>24</b> Travel and meals:		
<b>a</b> Mortgage (paid to banks, etc.)	<b>16a</b>		<b>a</b> Travel	<b>24a</b>	
<b>b</b> Other	<b>16b</b>		<b>b</b> Deductible meals (see instructions)	<b>24b</b>	
<b>17</b> Legal and professional services	<b>17</b>		<b>25</b> Utilities	<b>25</b>	
<b>18</b> Total expenses before expenses for business use of home. Add lines 8 through 27a	<b>18</b>		<b>26</b> Wages (less employment credits)	<b>26</b>	
<b>28</b> <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27a	<b>28</b>	<b>0.</b>	<b>27 a</b> Other expenses (from line 48)	<b>27a</b>	
<b>29</b> Tentative profit or (loss). Subtract line 28 from line 7	<b>29</b>	<b>5,418.</b>	<b>b</b> Reserved for future use	<b>27b</b>	
<b>30</b> Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). <b>Simplified method filers only:</b> enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____ Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	<b>30</b>				
<b>31</b> <b>Net profit or (loss).</b> Subtract line 30 from line 29. ● If a profit, enter on both <b>Schedule 1 (Form 1040 or 1040-SR), line 3</b> (or <b>Form 1040-NR, line 13</b> ) and on <b>Schedule SE, line 2.</b> (If you checked the box on line 1, see instructions). Estates and trusts, enter on <b>Form 1041, line 3.</b> ● If a loss, you <b>must</b> go to line 32.	<b>31</b>	<b>5,418.</b>			
<b>32</b> If you have a loss, check the box that describes your investment in this activity (see instructions). ● If you checked 32a, enter the loss on both <b>Schedule 1 (Form 1040 or 1040-SR), line 3</b> (or <b>Form 1040-NR, line 13</b> ) and on <b>Schedule SE, line 2.</b> (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on <b>Form 1041, line 3.</b> ● If you checked 32b, you <b>must</b> attach <b>Form 6198.</b> Your loss may be limited.	<b>32a</b>	<input type="checkbox"/> All investment is at risk.	<b>32b</b>	<input type="checkbox"/> Some investment is not at risk.	

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040 or 1040-SR) 2019

920001 10-09-19

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

33	Method(s) used to value closing inventory:	a <input checked="" type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation .....				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation .....				35
36	Purchases less cost of items withdrawn for personal use .....				36 70,000.
37	Cost of labor. Do not include any amounts paid to yourself .....				37
38	Materials and supplies .....				38
39	Other costs .....		SEE STATEMENT 2		39 24,582.
40	Add lines 35 through 39 .....				40 94,582.
41	Inventory at end of year .....				41
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 .....				42 94,582.

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

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶     /     /    

44 Of the total number of miles you drove your vehicle during 2019, enter the number of miles you used your vehicle for:  
 a Business \_\_\_\_\_ b Commuting \_\_\_\_\_ c Other \_\_\_\_\_

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

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

47 a Do you have evidence to support your deduction?  Yes  No  
 b If "Yes," is the evidence written?  Yes  No

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

48 Total other expenses. Enter here and on line 27a .....	48

SCHEDULE C	OTHER COSTS OF GOODS SOLD	STATEMENT	2
DESCRIPTION		AMOUNT	
IMPROVEMENTS		19,582.	
CAPITALIZED TAXES		5,000.	
TOTAL TO SCHEDULE C, LINE 39		24,582.	

**Profit & Loss**  
**Main Street Milwaukee LLC**  
*01/01/19 - 12/31/19 (cash basis)*

<b>INCOME</b>	
Rental Income	20,400.00
<b>INCOME</b>	<b>20,400.00</b>
<b>EXPENSE</b>	
Building Insurance Expense	684.00
Maintenance	1,915.50
Repairs	439.36
Property Taxes	5,230.84
<b>OPERATING EXPENSE</b>	<b>8,269.70</b>
<b>NET OPERATING INCOME</b>	<b>12,130.30</b>
<b>NON OPERATING EXPENSE</b>	
Depreciation Expense	1,981.00
Administrative and office	326.30
Mortgage Interest Expense	-
<b>NON OPERATING EXPENSE</b>	<b>2,307.30</b>
<b>NET INCOME</b>	<b>9,823.00</b>

## Cash Flow

Net Income	9,823.00
Add back:	
Depreciation	1,981.00
Subtract:	
Mortgage Principal	-
Capital Improvements	-
	<hr/>
<b>Total Cash Flow</b>	<b>11,804.00</b>

## Return on Investment

Purchase Price	70,000.00
Improvements	<u>19,582.00</u>
Total Initial Investment	89,582.00
Return on Cash Invested	13.18%



**Profit & Loss**  
**Main Street Milwaukee LLC**  
*01/01/19 - 12/31/19 (cash basis)*

**INCOME**

Rental Income 20,400.00

**INCOME 20,400.00**

**EXPENSE**

Building Insurance Expense 684.00

Maintenance 1,915.50

Repairs 439.36

Property Taxes 5,230.84

**OPERATING EXPENSE 8,269.70**

**NET OPERATING INCOME 12,130.30**

**NON OPERATING EXPENSE**

Depreciation Expense 1,981.00

Administrative and office 326.30

Mortgage Interest Expense 2,599.00

**NON OPERATING EXPENSES 4,906.30**

**NET INCOME 7,224.00**

## Cash Flow

Net Income	7,224.00
Add back:	
Depreciation	1,981.00
Subtract:	
Mortgage Principal	(2,276.55)
Capital Improvements	<u>-</u>
<b>Total Cash Flow</b>	<b>6,928.45</b>

## Return on Investment

Purchase Price	70,000.00
Less: Refinancing Proceeds	(75,000.00)
Improvements	<u>19,582.00</u>
<b>Total Initial Investment</b>	<b>14,582.00</b>
<b>Return on Cash Invested</b>	<b>47.51%</b>

**Balance Sheet**  
**Main Street Milwaukee LLC**  
**As of 12/31/19 (cash basis)**

**ASSETS**

Cash 331.80

Fixed Assets

Land 31,580.00

Building 38,420.00

Improvements 18,074.48

Closing Costs 782.00

**Subtotal Fixed Assets 88,856.48**

Accumulated Depreciation (19,111.00)

**Net Fixed Assets 69,745.48**

**TOTAL ASSETS 70,077.28**

**LIABILITIES & EQUITY**

Liabilities

Security Deposits 1,800.00

Mortgage Payable 55,422.61

Equity: Investment plus Earnings Less Draws 12,854.67

**TOTAL LIABILITIES & EQUITY 70,077.28**

**Sale of Property  
31-Dec-19**

Sales Proceeds	100,000.00
Less:	
Commission and closing costs at 6%	(6,000.00)
Basis of Property	(69,745.48)
Net Taxable Gain	24,254.52
Federal Tax	
Depreciation Recapture - 25%	(4,777.75)
Capital Gain - 20%	(1,028.70)
WI Tax	(1,298.83)
Total Tax	(7,105.28)

**Cash Flow From Sale**

Sales Proceeds	100,000.00
Less	
Commission and closing costs	(6,000.00)
Taxes	(7,105.28)
Mortgage	(55,422.61)
<b>Cash Received</b>	<b>31,472.11</b>