Form **1120-S**

Department of the Treasury Internal Revenue Service **U.S. Income Tax Return for an S Corporation**

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.

Go to www.irs.gov/Form1120S for instructions and the latest information.

OMB No. 1545-0123

2023

For	calen	dar year 2023 o	r tax yea	r beginning		, 2023,	enaing			, 20		
A S	election	n effective date		Name				D E	mployer i	dentification number		
	03/08/1992 Business activity code TYPE WorknAllDay, Inc Number, street, and room or suite no. If a P.O. box, see instructions.								00	-000007		
B B	usiness	activity code		Number, street, an	d room or suite no. If a P.O. b	ox, see instruct	tions.	ΕD	ate incorp	orated		
n	umber (s	see instructions)	OR PRINT	37 Any Street					03	3/08/1992		
	;	321900	FININ					FΤ	otal assets	s (see instructions)		
<u>c</u> c	heck if S	ch. M-3 attached		Anytown NC 280	041-0280			\$		3,605,685		
_			na to be s	_	peginning with this tax yea	ar? See instru	ictions \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□No				
		•	-		(3) Address change				ootion tor	mination		
				_	_					2		
	 I Enter the number of shareholders who were shareholders during any part of the tax year J Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activities 											
	aution: Include only trade or business income and expenses on lines 1a through 22. See the instructions for more information.											
Cat										11 4/0 050		
	1a	Gross receipts or			b Less returns and allowan			lance	1c	11,468,259		
e	2								2	10,061,879		
Income	3								3	1,406,380		
<u>n</u>	4				ttach Form 4797)				4	14,433		
	5				ach statement)				5			
	6	Total income (loss). Ad	d lines 3 through	5				6	1,420,813		
	7	•		•	s—attach Form 1125-E)				7	161,698		
(su	8	Salaries and wa	ages (less	employment cre	dits)				8	196,941		
atic	9	Repairs and ma	aintenanc	e					9	17,760		
Шİ	10	Bad debts .							10			
or	11	Rents							11	160,574		
JS f	12	Taxes and licen	nses						12	36,594		
tior	13	Interest (see ins	structions)					13	26,103		
truc	14	Depreciation from	4562)	14	6,726							
inst	15	Depletion (Do r	epletion (Do not deduct oil and gas depletion.)									
(see instructions for limitations)	16	Advertising .				16	8,257					
	17			etc., plans		17	14,715					
Deductions	18	Employee bene			18							
ij	19				duction (attach Form 720				19			
Ď	20								20	367,327		
De	21			ines 7 through 20	statement)							
	22				act line 21 from line 6 .				22	424,118		
	23a				ture tax (see instructions		23a					
	b	Tax from Sched				· 1						
	C			,	or additional taxes)				23c			
ts					and preceding year's over	I						
en	240				· · · · · · · · ·		24a					
Ĕ	b						24b					
Pa	C				Form 4136)	1	24c					
and Paymen	d				orm 3800	1	24d					
c a	z	Add lines 24a tl							24z			
Тах	25		•		Check if Form 2220 is att				25			
	26			•	the total of lines 23c and				26			
	27				e total of lines 23c and 2	•			27			
	28			•	2024 estimated tax	o, ontor arric	Refunde		28			
		Under penalties of	periury. I d	eclare that I have ex	amined this return, including a	ccompanvina s	schedules and statem	ents. and	to the bes	st of my knowledge and		
Sig	an l	belief, it is true, con	rrect, and c	omplete. Declaration	of preparer (other than taxpa	yer) is based o	n all information of wh	ich prep	arer has ar	ny knowledge.		
	ere								,	RS discuss this return		
110	,1 &	Signature of officer	r		Date	Title				reparer shown below? tions. Vyes No		
_		Print/Type prep		e	Preparer's signature	-	Date			PTIN		
Pa				-	, p === 2 = -g, maren 0			- 1	ck if employed	P555555555		
Preparer -						_		00-0000011				
Us	e On	IV —		e Ddrive, Anytow				_	Firm's EIN 00-000011 Phone no. 512-555-1212			
		riiiii s address	TOO LIII	C Durive, Arrytow	11, 17 70021			1110	110.	31Z-333-1Z1Z		

Form 1120-S (2023) Page 2 Schedule B Other Information (see instructions) Yes No **b** Accrual c Other (specify) See the instructions and enter the: 2 a Business activity b Product or service At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a ✓ nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation . . . At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 1000 Date (if applicable) a Qualified S Subsidiary Election Wa	d Subchap
Own directly an interest of 20% capital in any foreign or domestic trust? For rules of constructive or	partnership (includin	g an entity treated as a	partnership) or in the	e beneficial interest of a	,
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country o Organization		
At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of restricted st	below.	<u> </u>			•
 (ii) Total shares of non-restrict. At the end of the tax year, did the If "Yes," complete lines (i) and (ii) (i) Total shares of stock outstate (ii) Total shares of stock outstate (iii) 	e corporation have an below. anding at the end of th	y outstanding stock opt	ions, warrants, or sir	nilar instruments? .	,
Has this corporation filed, or is information on any reportable tra Check this box if the corporation	nsaction?				,
If checked, the corporation may Instruments.			_		
If the corporation (a) was a C corp basis determined by reference to t (b) has net unrealized built-in gain gain reduced by net recognized bu	he basis of the asset (or in excess of the net re	or the basis of any other cognized built-in gain fro	property) in the hands om prior years, enter t	of a C corporation, and	
Did the corporation have an electin effect during the tax year? See	tion under section 16	3(j) for any real property	trade or business of	or any farming business	
Does the corporation satisfy one The corporation owns a pass-thre	or more of the following	ing? See instructions			· ·
The corporation's aggregate as preceding the current tax year an	verage annual gross	receipts (determined	under section 448(d	c)) for the 3 tax years	
The corporation is a tax shelter a If "Yes," complete and attach Fo	nd the corporation ha	s business interest exp	ense.		
Does the corporation satisfy bot! The corporation's total receipts (s	n of the following concee instructions) for the	ditions?			,
The corporation's total assets at	the and of the tay yes	or word look than COEU (nn		

Form 1120-S (2023)

Sche	dule B	Other Information (see instructions) (continued)		Yes	No								
12	During t	the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven,	, or had the										
	terms m	odified so as to reduce the principal amount of the debt?			✓								
	If "Yes,"	enter the amount of principal reduction											
13		he tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see inst			✓								
14a	Did the	ne corporation make any payments in 2023 that would require it to file Form(s) 1099?											
b	If "Yes," did or will the corporation file required Form(s) 1099?												
15	Is the co	orporation attaching Form 8996 to certify as a Qualified Opportunity Fund?			✓								
	If "Yes,"	enter the amount from Form 8996, line 15											
16	•	ime during the tax year, did the corporation: (a) receive (as a reward, award, or payment for property	, ,										
		II, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? See instru											
Sche	dule K	Shareholders' Pro Rata Share Items	Total am										
	1	Ordinary business income (loss) (page 1, line 22)	1	424	4,118								
	2	Net rental real estate income (loss) (attach Form 8825)	2										
	3a	Other gross rental income (loss)											
	b	Expenses from other rental activities (attach statement)											
_	C	` '	3c	7.4									
(ssc	4	Interest income	4	/1	1,147								
Income (Loss)	5	Dividends: a Ordinary dividends	5a										
me		D 111											
nco	6	Royalties	6	70	2 4 4 0								
_	7	Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7	/ 6	3,649								
	8a	Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a										
	b	Unrecaptured section 1250 gain (attach statement) 8c											
	9	Net section 1231 gain (loss) (attach Form 4797)	9										
	10		10	10	0,000								
	11		11		2,935								
Deductions	12a		12a	- 02									
	b		12b										
eqn	c	' F	12c										
Õ	d	Other deductions (see instructions) Type:	12d	502	2,369								
	13a		13a										
	b		13b										
S	С		13c										
Credits	d		13d										
ဝ်	е		13e										
	f		13f										
	g	Other credits (see instructions) Type:	13g	51	1,014								
ا اه													
Inter- national	14	Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and											
_ =		check this box to indicate you are reporting items of international tax relevance											
× .	15a	· · · · · · · · · · · · · · · · · · ·	15a										
Ta	b	, 9	15b										
um t	_ c		15c										
Alternative Minimum Tax	d		15d										
≥ کے ک			15e										
Ø	f		15f										
Items Affecting hareholder Basis	16a	•	16a										
ecti r B	b	· · · · · · · · · · · · · · · · · · ·	16b		2.452								
Items Affec Shareholder	С	· · · · · · · · · · · · · · · · · · ·	16c		9,452								
ehc	d		16d	174	4,200								
lte šhar	e	· ·	16e										
()	f	Foreign taxes paid or accrued	16f										

Form 1120-S (2023)

	20-3 (202	<u>'</u>					Page 4
Sche	dule K	Shareholders' Pro Rata Share Items	(continued)			Tol	al amount
o u	17a	Investment income				17a	71,147
Other Information	b	Investment expenses				17b	
호호	С	Dividend distributions paid from accumula	ted earnings and profit	s		17c	
<u></u>	d	Other items and amounts (attach statemen	nt)				
Recon- ciliation	18	Income (loss) reconciliation. Combine th subtract the sum of the amounts on lines 1		18	18,610		
Sche	dule L						
		Assets	(a)	(b)	(c)		(d)
1	Cash			435,384			1,311,478
2a	Trade n	otes and accounts receivable	3,304,878		94	6,715	
b	Less all	owance for bad debts)	3,304,878 ()	946,715
3	Invento	ries					
4	U.S. go	vernment obligations					
5	_	empt securities (see instructions)					
6	Other c	urrent assets (attach statement)		56,254			52,491
7	Loans to	o shareholders					
8		ge and real estate loans		800,000			1,235,158
9	Other in	nvestments (attach statement)					
10a	Building	gs and other depreciable assets	424,249		39	7,401	
b	Less ac	cumulated depreciation	374,043)	50,206 (337	7,358)	60,043
11a	Depleta	uble assets					
b	Less ac	cumulated depletion (
12	Land (n	et of any amortization)					
13a	Intangib	ole assets (amortizable only)					
b	Less ac	cumulated amortization ()	()	
14	Other a	ssets (attach statement)		41,754			
15	Total as	ssets		4,688,476			3,605,885
	L	Liabilities and Shareholders' Equity					
16	Accoun	ts payable		2,837,445			1,435,888
17	Mortgag	ges, notes, bonds payable in less than 1 year					
18	Other c	urrent liabilities (attach statement)		22,831			33,080
19	Loans f	rom shareholders					
20	Mortgag	ges, notes, bonds payable in 1 year or more		25,000			25,000
21	Other lia	abilities (attach statement)					
22	Capital	stock		10,000			100
23	Addition	nal paid-in capital					
24	Retaine	ed earnings		1,793,200			2,101,917
25	Adjustm	ents to shareholders' equity (attach statement)					
26	Less co	ost of treasury stock)		()
27	Total lia	abilities and shareholders' equity		4,688,476			3,605,885
							1100 € (222)

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-				
(loss) per books	(10,842)	5 a	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): Tax-exempt interest \$	
recorded on books this year ded on Schedule K, lines 1 and 16f (itemize):		6 a	Deductions included on Schedule K, lines 1 through 12, and 16f, not charged against book income this year (itemize): Depreciation \$	
entertainment \$ 2,124 through 3	19,452 18,610	7 8	Add lines 5 and 6	18,610
i	Note: The corporation may be reflected in Schedule K, lines 1, 2, 7, 8a, 9, and 10, not recorded s year (itemize): ecorded on books this year led on Schedule K, lines 1 and 16f (itemize): entertainment \$ 2,124 through 3	Note: The corporation may be required to file Scher (loss) per books (10,842) Ided on Schedule K, lines 1, 2, 7, 8a, 9, and 10, not recorded s year (itemize): 10,000 ecorded on books this year led on Schedule K, lines 1 and 16f (itemize): 11,452 entertainment \$ 2,124 11,452 11,452	Note: The corporation may be required to file Schedule Market (loss) per books	not included on Schedule K, lines 1, 2, 7, 8a, 9, and 10, not recorded s year (itemize): 10,000 ecorded on books this year led on Schedule K, lines 1 and 16f (itemize): 10,000 Deductions included on Schedule K, lines 1 and 16f (itemize): a Depreciation \$ Deductions included on Schedule K, lines 1 through 12, and 16f, not charged against book income this year (itemize): a Depreciation \$ Through 10 (itemize): A Deductions included on Schedule K, lines 1 through 12, and 16f, not charged against book income this year (itemize): a Depreciation \$ Through 10 (itemize): A Schedule K, lines 1 through 12, and 16f, not charged against book income this year (itemize): a Depreciation \$ Through 10 (itemize): A Schedule K, lines 1 (itemize): A Schedule K, lines 10 (itemize)

Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account (see instructions)

		(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable	(c) Accumulated earnings and profits	(d) Other adjustments account
			income previously taxed		
1	Balance at beginning of tax year	1,775,833			
2	Ordinary income from page 1, line 22	424,118			
3	Other additions	159,796			
4	Loss from page 1, line 22	(
5	Other reductions	(584,756)			()
6	Combine lines 1 through 5	174,200			
7	Distributions				
8	Balance at end of tax year. Subtract line 7 from				
	line 6	1,600,791			

Form **1120-S** (2023)

SCHEDULE D (Form 1120-S)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses and Built-in Gains

Attach to Form 1120-S.

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/Form1120S for instructions and the latest information.

OMB No. 1545-0123

2023

Employer identification number WorknAllDay Inc 00-0000007 Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? . . . No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts (d) (e) (h) Gain or (loss) (g) Proceeds Cost Adjustments to Subtract column (e) to enter on the lines below. (sales price) (or other basis) gain or loss from from column (d) and This form may be easier to complete if you Form(s) 8949, Part I, combine the result line 2, column (g) with column (g) round off the cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box A checked. 1,030,000 951,351 0 78,649 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. 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 1,420,813 Tax on short-term capital gain included on line 23 below 6 6 161,698) 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on Form 1120-S, Schedule K, line 7 or 10 196,941 Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts (d) (h) Gain or (loss) (e) (g) Proceeds Cost Adjustments to Subtract column (e) to enter on the lines below. gain or loss from (sales price) (or other basis) from column (d) and This form may be easier to complete if you Form(s) 8949, Part II. combine the result line 2, column (a) with column (g) round off the cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with **Box D** checked. 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 Long-term capital gain from installment sales from Form 6252, line 26 or 37 . . . 11 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 12 12 13 13 14 Tax on long-term capital gain included on line 23 below 14 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Enter here and 15 on Form 1120-S, Schedule K, line 8a or 10 . 15

Schedule D (Form 1120-S) 2023 Page **2**

Part III Built-in Gains Tax (See instructions before completing this part.) Excess of recognized built-in gains over recognized built-in losses (attach computation statement) Net recognized built-in gain. Enter the smallest of line 16, line 17, or line 8 of Schedule B Subtract line 19 from line 18. If zero or less, enter -0- here and on line 23 Section 1374(b)(3) business credit and minimum tax credit carryforwards from C corporation years Tax. Subtract line 22 from line 21 (if zero or less, enter -0-). Enter here and on Form 1120-S, page 1,

Schedule D (Form 1120-S) 2023

		Final K-1	1	Amended	l K-1	OMB No. 1545-0123
Schedule K-1 (Form 1120-S) 20 23	Pa					urrent Year Income, Other Items
Department of the Treasury For calendar year 2023, or tax year nternal Revenue Service	1	Ordinary	business inc	ome (loss) 212,059	13	Credits 25,507
beginning / / 2023 ending / /	2	Net renta	al real estate i	<u> </u>		20,007
Shareholder's Share of Income, Deductions, Credits, etc. See separate instructions.	3	Other ne	t rental incom	ne (loss)		
	4	Interest in	ncome		\vdash	
Part I Information About the Corporation				35,574		
A Corporation's employer identification number 00-000007	5a	Ordinary	dividends			
B Corporation's name, address, city, state, and ZIP code	5b	Qualified	dividends		14	Schedule K-3 is attached if checked
WorkNallDay, Inc	6	Royalties	3		15	Alternative minimum tax (AMT) items
37 Any Street Anytown, NC 28041-0280						, ,
7 ii y town 110 200 11 0200	7	Net short	t-term capital	gain (loss) 39,325		
C IRS Center where corporation filed return	8a	Net long-	-term capital	gain (loss)		
D Corporation's total number of shares Beginning of tax year	8b	Collectib	les (28%) gai	n (loss)		
End of tax year	8c	Unrecapt	tured section	1250 gain		
Part II Information About the Shareholder	9	Net secti	ion 1231 gain	(loss)	16 C	Items affecting shareholder basis 9,726
E Shareholder's identifying number	10	Other inc	come (loss)	F 000		07.100
000-00-0006 F Shareholder's name, address, city, state, and ZIP code	А			5,000	D	87,100
Carrie Otriz						
54 Any Street					-	
Anytown, WI 53201						
					17	Other information
G Current year allocation percentage	44	0 "	470		Α	35,574
H Shareholder's number of shares	11	Section 1	179 deduction	າ 31,468		
H Shareholder's number of shares Beginning of tax year	12	Other de	ductions	01,100		
End of tax year	S			251,185		
I Loans from shareholder						
Beginning of tax year \$						
End of tax year \$						
לוכ						
Jse C						
For IRS Use Only						
Ž	18	_		ivity for at-ris		
	19	More	than one act	ivity for passi	ve activ	vity purposes*
		* See	attached	statement	for ad	ditional information.

		Final K-	1	Amended	K-1	OMB No. 1545-0123
Schedule K-1 (Form 1120-S) 20 23	Pa					urrent Year Income, Other Items
Department of the Treasury For calendar year 2023, or tax year Internal Revenue Service	1	Ordinary	business inc	ome (loss) 212,059	13	Credits 25,507
beginning / / 2023 ending / /	2	Net renta	al real estate	<u> </u>		20,007
Shareholder's Share of Income, Deductions,	3	Other ne	t rental incon	ne (loss)		
Credits, etc. See separate instructions.	_	Interest:			-	
Part I Information About the Corporation	4	Interest i	ncome	35,573		
A Corporation's employer identification number 00-000007	5a	Ordinary	dividends	·		
B Corporation's name, address, city, state, and ZIP code	5b	Qualified	d dividends		14	Schedule K-3 is attached if checked
WorkNallDay, Inc	6	Royalties			15	Alternative minimum tax (AMT) items
37 Any Street	ľ	Hoyaities	5		13	Alternative minimum tax (Alvin) items
Anytown, NC 28041-0280	7	Net shor	t-term capita	gain (loss) 39,324		
C IRS Center where corporation filed return	8a	Net long	-term capital	·		
D Corporation's total number of shares Beginning of tax year	8b	Collectib	oles (28%) gai	n (loss)		
End of tax year	8c	Unrecap	tured section	1250 gain		
Part II Information About the Shareholder	9	Net sect	ion 1231 gain	(loss)	16 C	Items affecting shareholder basis 9,726
E Shareholder's identifying number	10	Other inc	come (loss)			
000-00-0008 F Shareholder's name, address, city, state, and ZIP code	Α			5,000	D	87,100
I Shareholder's harne, address, only, state, and 211 code						
Bix Xempt						
51 Any Street						
Anytown, WI 53201						
					17	Other information
G Current year allocation percentage 50 %					Α	35,573
	11	Section	179 deduction			
H Shareholder's number of shares	40	Othou do	eductions	31,467	-	
Beginning of tax year End of tax year	12 S	Other de	eductions	251,184		
End of tax year				231,104		
I Loans from shareholder						
Beginning of tax year \$						
End of tax year \$					-	
Only						
For IRS Use Only						
Ö' R	40	N4	* thor == - '	inden de et et e		
<u>L</u>	18 19	_		ivity for at-rislivity for passiv		
	<u>.</u>					
		* See	attached	statement 1	or ad	ditional information.

Form 1125-A

Cost of Goods Sold

(Rev. November 2018)
Department of the Treasury
Internal Revenue Service

► Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065. ► Go to www.irs.gov/Form1125A for the latest information. OMB No. 1545-0123

Name			mployer identification num	ber
WorkN	IAIIDay, Inc		00-000007	
1	Inventory at beginning of year	1		
2	Purchases	2	890,846	
3	Cost of labor	3	543,037	
4	Additional section 263A costs (attach schedule)	4		
5	Other costs (attach schedule)	5	8,627,996	
6	Total. Add lines 1 through 5	6	10,061,879	
7	Inventory at end of year	7		
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	10,061,879	
9a	Check all methods used for valuing closing inventory: (i) ☐ Cost (ii) ☐ Lower of cost or market (iii) ☐ Other (Specify method used and attach explanation.) ▶			
b	Check if there was a writedown of subnormal goods			
С	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)		▶ □	
d	If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO	9d		
е	If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instruction	ions .	. ☐ Yes ✓ N	0
f	Was there any change in determining quantities, cost, or valuations between opening and closing inventor attach explanation	•		0

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

Small business taxpayers. For tax years beginning after December 31, 2017, the following apply.

- A small business taxpayer (defined below), may use a method of accounting for inventories that either: (1) treats inventories as nonincidental materials and supplies, or (2) conforms to the taxpayer's financial accounting treatment of inventories.
- A small business taxpayer is not required to capitalize costs under section 263A.

General Instructions

Purpose of Form

Use Form 1125-A to calculate and deduct cost of goods sold for certain entities.

Who Must File

Filers of Form 1120, 1120-C, 1120-F, 1120S, or 1065, must complete and attach Form 1125-A if the applicable entity reports a deduction for cost of goods sold.

Inventories

Generally, inventories are required at the beginning and end of each tax year if the production, purchase, or sale of merchandise is an income-producing factor. See Regulations section 1.471-1. If inventories are required, you generally must use an accrual method of accounting for sales and purchases of inventory items.

Exception for certain taxpayers. A small business taxpayer (defined below), can adopt or change its accounting method to account for inventories in the same manner as material and supplies that are non-incidental, or conform to its treatment of inventories in an applicable financial statement (as defined in section 451(b)(3)), or if it does not have an applicable financial statement, the method of accounting used in its books and records prepared in accordance with its accounting procedures. See section 471(c)(3).

A small business taxpayer claiming exemption from the requirement to keep inventories is changing its method of accounting for purposes of section 481. For additional guidance on this method of accounting, see Pub. 538, Accounting Periods and Methods. For guidance on changing to this method of accounting, see Form 3115 and the Instructions for Form 3115.

Small business taxpayer. A small business taxpayer is a taxpayer that (a) has average annual gross receipts of \$25 million or less (indexed for inflation) for the 3 prior tax years, and (b) is not a tax shelter (as defined in section 448(d)(3)). See Pub. 538

Uniform capitalization rules. The uniform capitalization rules of section 263A generally require you to capitalize, or include in inventory, certain costs incurred in connection with the following.

- The production of real property and tangible personal property held in inventory or held for sale in the ordinary course of business
- Real property or personal property (tangible and intangible) acquired for resale.
- The production of real property and tangible personal property for use in its trade or business or in an activity engaged in for profit.

A small business taxpayer (defined above) is not required to capitalize costs under section 263A. See section 263A(i).

See the discussion on section 263A uniform capitalization rules in the instructions for your tax return before completing Form 1125-A. Also see Regulations sections 1.263A-1 through 1.263A-3. See Regulations section 1.263A-4 for rules for property produced in a farming business.

Form **1125-E**

(Rev. October 2016)

Compensation of Officers

Department of the Treasury Internal Revenue Service ► Inf

► Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

► Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

OMB No. 1545-0123

Name Employer identification number
WorkNAIIDay, Inc 00-0000007

Note: Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

	(a) Name of officer	(b) Social security number	(c) Percent of time devoted to	Percent of s	tock owned	(f) Amount of
	(a) Name of officer	(see instructions)	business	(d) Common	(e) Preferred	compensation
1 Khir	y U Fatt	000-00-0020	100 %	10 %	%	161,698
			%	%	%	
			%	%	%	
			%	%	%	
			%	%	%	
			%	%	%	
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			%	%	%	
			%	%	%	
			%	%	%	
2 T	otal compensation of officers				2	161,698
3 (Compensation of officers claimed on For	m 1125-A or elsewhere o	n return		3	
4 S	Subtract line 3 from line 2. Enter the appropriate line of your tax return	result here and on Forr	n 1120, page	1, line 12 c	or the 4	161,698

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

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

2023
Attachment
Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number WorkNAllDay, Inc. Manufacturing 00-0000007 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1.020.000 1 Total cost of section 179 property placed in service (see instructions) 2 88,235 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 2.550.000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 0 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 1,020,000 6 (a) Description of property (b) Cost (business use only) (c) Elected cost Compressor 62,935 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 62,935 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 62,935 **10** Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 424,118 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 62.935 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 5.761 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property 5-year property 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property 27.5 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life 965 S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 6,726 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Pai	rt V		d Property ainment, i					other	vehic	les, ce	erta	in air	craft,	and pro	operty	used f	or	
			For any vel olumns (a)											ase exp	oense, (comple	te only	24a,
			-Depreci								_							
24 a	Do yo	u have e	vidence to s	upport the I	ousiness/inv	estment u	se clai	med?	Yes	No	24	4b If '	"Yes," i	s the evi	dence v	ritten?	Yes	No
	(a) e of propertion	perty (list first)	(b) Date placed in service	(c) Business/ investment us percentage	se Cost or c	(d) Basis for depreciation other basis (business/investment use only)		(f) Recov perio		(g) Method/ Convention		(h) Depreciation deduction		Ele	(i) Elected section 17 cost			
25			reciation a and used									0						
26			ed more tha						0. 000	rinotra	OLIO		20	ı				
		Pickup	10/14/12	100 9		0	1	<u> </u>		5		200 E	B-HY					
				9	6													
				9	6													
27	Prop	erty use	ed 50% or l	ess in a q	ualified bu	ısiness u	se:											
					6							S/L -						
				9	6							S/L -						
				9	6							S/L -						
			s in columi		_					21, pa	age	1 .	28					
29	Add	amount	s in columi	n (i), line 2												29		
_						tion B-							.,					
			ion for vehic first answe															/enicles
to yo	our erri	oloyees,	iirst ariswe	r the ques	lions in Se			i –		жсери		o com						_
30	Total business/investment miles driven during the year (don't include commuting miles) .				(a) (b) Vehicle 1 Vehicle 2		Ve			(d) (e) hicle 4 Vehicle			e 5 (f) Vehicle 6					
31	Total	commu	ting miles di	riven during	g the year													
			personal															
	miles	driven	·															
	lines	30 thro	driven dur ugh 32 .															
34			icle availab			Yes	No	Yes	No	Yes	•	No	Yes	No	Yes	No	Yes	No
35	Was	the veh	icle used p ner or relat	rimarily b	y a more													
36			nicle availab								+							
				<u>:</u>	stions for	Employ	ers W	ho Pro	vide \	/ehicle	s fo	or Use	bv Th	eir Em	plovee	S		
			estions to d ners or rela	etermine	if you mee	t an exc	eption						-				who ar	en't
			ntain a writ					s all ne	rsona	LISE O	f ve	hicles	inclu	dina co	mmutir	na hv	Yes	No
0.	_		ees?			-		-						_				-110
38	Do y	ou mair	ntain a writ See the in	ten policy	statemer	nt that pr	ohibit	s perso	nal us	se of v	ehic	les, e	xcept	commu	ting, by	-		
39	Do y	ou treat	all use of v	ehicles b	y employe	es as pe	rsona	l use?										
40	Do y	ou prov	vide more t ehicles, and	han five v	ehicles to	your er	nploye	ees, ob										
41	Do y	ou mee	t the requir	ements co	oncerning	qualified	autor	nobile d	demor	stratio	n us	se? Se	ee instr	ructions				
_			r answer to	37, 38, 3	39, 40, or 4	11 is "Ye	s," do	n't com	plete	Section	1 B	for the	e cover	ed vehi	cles.			
Par	t VI	Amor	tization															
	ı		a) on of costs		(b) Date amortiz begins	ation	Amoi	(c) rtizable ar	mount		Cod	(d) e sectio	on	(e) Amortiza period percent	or	Amortiza	(f) tion for th	is year
42	Amo	tization	of costs th	nat begins	during yo	ur 2023	tax ye	ar (see	instru	ctions)	:							
				Ť				•										
			of costs th	•	-										43			
44	Tota	L Add :	amounts in	column (f	A See the	instructi	ons fo	r whare	to rei	oort					44			

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment Sequence No. 27

Name	(s) shown on return					Identifying r	numbe	r
Work	NAIIDay, Inc						00-00	
1a	Enter the gross proce substitute statement) t			•	n Form(s) 1099-B or	1099-S (or	1a	
b	Enter the total amour MACRS assets .	nt of gain that you are	e including on lin	es 2, 10, and 24 du	ue to the partial dis	positions of	1b	
С	Enter the total amoun assets	t of loss that you are	including on lines	2 and 10 due to the	e partial dispositions	of MACRS	1c	
Par		nanges of Proper y or Theft—Most					sions	From Other
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or of basis, plu improvement expense of	ıs s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2009	Ford F150	09/01/2012	10/31/2023	31,247	31,247			0
3	Gain, if any, from Forn	n 4684 line 39					3	
4	Section 1231 gain from	•					4	
5	Section 1231 gain or (5	
6	Gain, if any, from line	•	-				6	
7	Combine lines 2 through		-				7	0
	Partnerships and S c line 10, or Form 1120-	S, Schedule K, line 9.	Skip lines 8, 9, 11,	, and 12 below.	ŕ	ŕ		
	Individuals, partners, from line 7 on line 11 1231 losses, or they w Schedule D filed with y	below and skip lines vere recaptured in an e	8 and 9. If line 7 i arlier year, enter t	is a gain and you di he gain from line 7 a	dn't have any prior	year section		
8	Nonrecaptured net sec	ction 1231 losses from	prior years. See in	nstructions			8	
9	Subtract line 8 from line 9 is more than zero	o, enter the amount fro	om line 8 on line 12	2 below and enter the	e gain from line 9 as	a long-term		
Dord	capital gain on the Sch	nedule D filed with you ns and Losses (se					9	
Part 10	Ordinary Gain Ordinary gains and los			<u>, </u>	ld 1 year or less):			
-10	Ordinary gains and los	sses not included on iii	les i i tillough to	(include property rie	lu i year or less).			
11	Loss, if any, from line	<u> </u> 7			<u> </u>		11	()
12	Gain, if any, from line						12	, ,
13	Gain, if any, from line 3						13	14,433
14	Net gain or (loss) from						14	14,400
15	Ordinary gain from ins						15	
16	Ordinary gain or (loss)		•				16	
17	Combine lines 10 thro		-				17	14,433
18	For all except individu a and b below. For ind	al returns, enter the ar	nount from line 17	on the appropriate			.,	, .30
а	If the loss on line 11 inc	cludes a loss from Form property on Schedule	4684, line 35, colu A (Form 1040), lin	ımn (b)(ii), enter that p e 16. (Do not include	any loss on property	used as an		
	employee.) Identify as f	rom "Form 4797, line 18	Ba." See instruction	ıs			18a	
b	Redetermine the gain (Form 1040). Part I. line	` '	xcluding the loss,	, if any, on line 18a.	Enter here and on	Schedule 1	18b	

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions) (b) Date acquired (c) Date sold 19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: (mo., day, yr.) (mo., day, yr.) 2009 Chevrolet Tahoe 01/01/2009 01/10/2023 2008 Dodge 3500 07/01/2008 07/21/2023 12/01/2007 С 2007 Chevrolet Silverado HD 12/31/2023 D Property A Property B Property C Property D These columns relate to the properties on lines 19A through 19D. Gross sales price (Note: See line 1a before completing.) . 20 5.000 7.760 1.800 20 19,930 24,619 21 Cost or other basis plus expense of sale 21 19.467 22 19,930 19,467 24,492 22 Depreciation (or depletion) allowed or allowable 0 0 127 23 Adjusted basis. Subtract line 22 from line 21. . . 23 Total gain. Subtract line 23 from line 20 . 24 24 5,000 7,760 1,673 25 If section 1245 property: 19,930 19,467 24,492 Depreciation allowed or allowable from line 22 . . . 5,000 7,760 1,673 Enter the **smaller** of line 24 or 25a 25b 26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291. Additional depreciation after 1975. See instructions 26a Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions 26b 26c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e Additional depreciation after 1969 and before 1976 26d e Enter the smaller of line 26c or 26d . 26e Section 291 amount (corporations only) . g Add lines 26b, 26e, and 26f 26g If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership. a Soil, water, and land clearing expenses 27a Line 27a multiplied by applicable percentage. See instructions 27b С Enter the **smaller** of line 24 or 27b If section 1254 property: 28 a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions **b** Enter the **smaller** of line 24 or 28a 28b If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions. 29a Enter the **smaller** of line 24 or 29a. See instructions 29b Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30. 14,433 30 30 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 31 14,433 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6 Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions) (a) Section (b) Section 179 280F(b)(2) 33 Section 179 expense deduction or depreciation allowable in prior years 33 34 Recomputed depreciation. See instructions 34

Recapture amount. Subtract line 34 from line 33. See the instructions for where to report

35

35

Form **8824**

Like-Kind Exchanges

(and section 1043 conflict-of-interest sales)

Attach to your tax return.

Go to www.irs.gov/Form8824 for instructions and the latest information.

OMB No. 1545-1190

2023
Attachment Sequence No. 109

Name(s) shown on tax return WorkNAIIDay, Inc

Department of the Treasury

Internal Revenue Service

Identifying number 00-0000007

outside t 1	ly real property should be described on lines 1 and 2. If the property ene United States, indicate the country. Description of like-kind property given up: Description of like-kind property received: DIT Ford F250 Date like-kind property given up was originally acquired (month, day, you actually transferred your property to the other party (month, other like-kind property you received was identified by written notice are). See instructions for 45-day written identification requirement attentions.	rear)	3 4					
2 D 2 2 3 D 4 D 5 D 94 6 D 7 W	escription of like-kind property received: 217 Ford F250 ate like-kind property given up was originally acquired (month, day, y ate you actually transferred your property to the other party (month, other like-kind property you received was identified by written notice ar). See instructions for 45-day written identification requirement.	day, year)	3 4	M 09/30/2014/Y				
3 D 4 D 5 D 90 6 D 7 W	ate like-kind property given up was originally acquired (month, day, y ate you actually transferred your property to the other party (month, of ate like-kind property you received was identified by written notice ar). See instructions for 45-day written identification requirement.	day, year)	3 4	M 09/30/2014/Y				
4 D 5 D y 6 D 7 W	ate you actually transferred your property to the other party (month, of ate like-kind property you received was identified by written notice ar). See instructions for 45-day written identification requirement.	day, year)	4					
5 D y 6 D 7 W	ate like-kind property you received was identified by written notice ar). See instructions for 45-day written identification requirement.	e to another party (month,	day,	M10/31/2021YY				
6 D	ar). See instructions for 45-day written identification requirement .							
7 W	ate you actually received the like-kind property from other party (mor			M10/12/2021/Y				
		ntn, day, year). See instructi	ions 6	M10/31/2021/Y				
(3	as the exchange of the property given up or received made with a reuch as through an intermediary)? See instructions. If "Yes," complete			☐ Yes ☑ No				
property	not file this form if a related party sold property into the exchange, obecame your replacement property; and none of the exceptions on line perty as if the exchange had been a sale. If one of the exceptions on line	11 applies to the exchange	. Instead, re	port the disposition				
Part II	Related Party Exchange Information							
	me of related party	Relationship to you	Related party'	s identifying number				
A	dress (no., street, and apt., room, or suite no.; city or town; state; and ZIP code)							
th	During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did the related party sell or dispose of any part of the like-kind property received from you (or an intermediary) in the exchange?							
	During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did you sell or dispose of any part of the like-kind property you received?							
th	If both lines 9 and 10 are "No" and this is the year of the exchange, go to Part III. If both lines 9 and 10 are "No" and this is n e the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on this year's tax return the deferred gain or (loss) from line 24 unless one of the exceptions on line 11 applies.							
11 If	one of the exceptions below applies to the disposition, check the ap	plicable box.						
а	The disposition was after the death of either of the related parties.							
b [The disposition was an involuntary conversion, and the threat of co	onversion occurred after the	e exchange.					
c [You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had tax avoidance as one of its principal purposes. If this box is checked, attach an explanation. See instructions.							

Name(s) shown on tax return. Do not enter name and social security number if shown on other side.

Your social security number

WorkNAIIDay, Inc 00-0000007

Part III Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Received Before you Begin:

• If you are *e-filing* Form 8824 and completing line 12, 15, or 25, see the instructions for important information regarding a separate statement you must attach.

• If you transferred **and** received (**a**) more than one group of like-kind properties, or (**b**) cash or other (not like-kind) property, see **Reporting of multi-asset exchanges** in the instructions.

Note:	Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherwise, go to line 1	5	
12 a	Fair market value (FMV) of other property given up. See instructions 12 Description of other property given up		
10	Adjusted had a of attack managers in the same and a six and an analysis of attack managers and a six and a		
13	Adjusted basis of other property given up	-	
14	Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or (loss) in the same manner as if the exchange had been a sale	14	
	Caution: If the property given up was used previously or partly as a home, see <i>Property used as home</i> in the instructions.		
15	Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced (but not below zero) by any exchange expenses you incurred. See instructions	15	
а	Description of other property received		
16	FMV of like-kind property you received	16	40,000
17	Add lines 15 and 16	17	40,000
18	Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses not used on line 15. See instructions	18	99
19	Realized gain or (loss). Subtract line 18 from line 17	19	40,000
20	Enter the smaller of line 15 or line 19, but not less than zero	20	0
21	Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions	21	0
22	Subtract line 21 from line 20. If zero or less, enter -0 If more than zero, enter here and on Schedule D or Form 4797, unless the installment method applies. See instructions	22	0
23	Recognized gain. Add lines 21 and 22	23	0
24	Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions	24	40.000
25	Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23. See instructions		
	Note: Complete lines 25a, 25b, and 25c if you received like-kind section 1250 property, like-kind	Ī.,	
	section 1245 property, or like-kind intangible property in the exchange.	25	0
a	Basis of like-kind section 1250 property received	-	
b	Basis of like-kind section 1245 property received	-	
	Basis of like-kind intangible property received		
Part		!	-1-1-46
edera	This part is to be used only by officers or employees of the executive branch of the federal government of government (including certain spouses, minor or dependent children, and trustees as described in secondition of gain under section 1043 on the sale of property to comply with the conflict-of-interest requed only if the cost of the replacement property is more than the basis of the divested property.	tion 1	043) for reporting
26	Enter the number from the upper right corner of your certificate of divestiture. (Do not attach a copy of your certificate. Keep the certificate with your records.)		_
27	Description of divested property		
28	Description of replacement property		
29	Date divested property was sold (month, day, year)	29	MM/DD/YYYY
30	Sales price of divested property. See instructions		
31	Basis of divested property		
32	Realized gain. Subtract line 31 from line 30	32	
33	Cost of replacement property purchased within 60 days after date of sale . 33	0.1	
34	Subtract line 33 from line 30. If zero or less, enter -0-	34	
35	Ordinary income under recapture rules. Enter here and on Form 4797, line 10. See instructions	35	
36	Subtract line 35 from line 34. If zero or less, enter -0 If more than zero, enter here and on Schedule D or Form 4797. See instructions	36	
37	Deferred gain. Subtract the sum of lines 35 and 36 from line 32	37	
38	Basis of replacement property. Subtract line 37 from line 33	38	

8941

Credit for Small Employer Health Insurance Premiums

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form8941 for instructions and the latest information. OMB No. 1545-2198

Attachment Sequence No. 65

Name(s) shown on return Identifying number WorkNAllDay, Inc. 00-000007 Did you pay premiums during your tax year for employee health insurance coverage you provided through a Small Business Health Options Program (SHOP) Marketplace (or do you qualify for an exception to this requirement)? See instructions. ✓ Yes. Enter Marketplace Identifier (if any): 01-FFE No. Stop. Do not file Form 8941. See instructions for an exception that may apply to a partnership. S corporation, cooperative. estate, trust, or tax-exempt entity. Enter the employer identification number (EIN) used to report employment taxes for individuals included on line 1 below if В different from the identifying number listed above: С Does a tax return you (or any predecessor) filed for a tax year beginning after 2013 and before 2022 include a Form 8941 with line A checked "Yes" and line 12 showing a positive amount? See instructions. ☐ Yes. Stop. Do not file Form 8941. See instructions for an exception that may apply to a partnership, S corporation, cooperative, estate, trust, or tax-exempt entity. Also see instructions for information about the credit period limitation. ✓ **No.** Go to line 1. Caution: See the instructions and complete Worksheets 1 through 7 as needed. 1 Enter the number of individuals you employed during the tax year who are considered employees for purposes of this credit (total from Worksheet 1, column (a)) 16 1 Enter the number of full-time equivalent employees (FTEs) you had for the tax year (from 2 Worksheet 2, line 3). If you entered 25 or more, skip lines 3 through 11 and enter -0- on line 12 2 13 Average annual wages you paid for the tax year (from Worksheet 3, line 3). This amount must be a 3 multiple of \$1,000. If you entered \$62,000 or more, skip lines 4 through 11 and enter -0- on line 12 3 27,000 Premiums you paid during the tax year for employees included on line 1 for health insurance 4 coverage under a qualifying arrangement (total from Worksheet 4, column (b)) 127.534 4 Premiums you would have entered on line 4 if the total premium for each employee equaled the 5 average premium for the small group market in which the employee enrolls in health insurance 5 200,705 Enter the **smaller** of line 4 or line 5 6 6 127,534 7 Multiply line 6 by the applicable percentage: • Tax-exempt small employers, multiply line 6 by 35% (0.35) • All other small employers, multiply line 6 by 50% (0.50) 7 63,767 If line 2 is 10 or less, enter the amount from line 7. Otherwise, enter the amount from Worksheet 8 8 51,014 9 If line 3 is \$30,000 or less, enter the amount from line 8. Otherwise, enter the amount from Worksheet 6, line 7 9 51.014 Enter the total amount of any state premium subsidies paid and any state tax credits available to 10 10 0 11 127,534 11 12 12 51,014 13 If line 12 is zero, skip lines 13 and 14 and go to line 15. Otherwise, enter the number of employees included on line 1 for whom you paid premiums during the tax year for health insurance coverage under a qualifying arrangement (total from Worksheet 4, column (a)) 13 Enter the number of FTEs you would have entered on line 2 if you only included employees 14 14 13 Credit for small employer health insurance premiums from partnerships, S corporations, 15 15 0 Add lines 12 and 15. Cooperatives, estates, and trusts, go to line 17. Tax-exempt small employers, 16 skip lines 17 and 18 and go to line 19. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and report this amount on Form 3800, Part III, line 4h. 16 51,014 17 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see instructions) 17 Cooperatives, estates, and trusts, subtract line 17 from line 16. Stop here and report this amount 18 18 19 Enter the amount you paid in 2023 for taxes considered payroll taxes for purposes of this credit. 19 20 Tax-exempt small employers, enter the smaller of line 16 or line 19 here and on Form 990-T,

Part III, line 6f

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Form **8949**

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

2023
Attachment
Sequence No. 12A

Internal Revenue Service
Name(s) shown on return
WorkNAIIDay, Inc

Department of the Treasury

Social security number or taxpayer identification number 00-0000007

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 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 transactions				sis wasn't report	ed to the IF	RS	
(C) Short-term transactions	not reported	to you on F	orm 1099-B				
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see <i>Column</i> (e)	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example: 100 sti. X12 00.)	(ivio., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).
110 shares Americus							
	04/01/2023	07/15/2023	1,030,000	951,351		0	78,649
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), lir	lude on your ne 2 (if Box B	1,030,000	951,351		0	78,649

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.

Form 8949 (2023) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side WorkNAIIDay, Inc

Social security number or taxpayer identification number 00-000007

Before you check Box D, E, or F 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 II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

(D) Long-term transaction							e)
(E) Long-term transaction				is wasn't report	ed to the IF	RS	
(F) Long-term transactions	s not reported	to you on Fo	rm 1099-B				
Description proper (Example: 10(n. XYZ ()) Pat∈ oqu d 1o lay, .)	Date Id o dispos (Mo., da, .)	Prc eus (sale vrice) (see in: uction:	(e) Cost or other basis Sure e belo a see Cumn coarat nstru ons	If you enter an	if any, to gain or loss amount in column (g), ode in column (f).	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
2 Totals. Add the amounts in colum negative amounts). Enter each to Schedule D, line 8b (if Box D above	tal here and inc	lude on your					

Note: If you checked Box D 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.

above is checked), or line 10 (if Box F above is checked) .