

ຄວາມຊ່ວຍເຫຼືອການວ່າງງານໃນຊ່ວງແຜ່ລະບາດ (PUA) ຈະຖືກກຳນົດຈຳນວນເງິນຊ່ວຍເຫຼືອປະຈຳອາທິດ ທີ່ \$205 ສຳລັບແຕ່ລະບຸກຄົນທີ່ໄດ້ຮັບການຮັບຮອງວ່າ ພວກເຂົາມີຄຸນນະສົມບັດກົງຕາມເງື່ອນໄຂເພື່ອຈະໄດ້ຮັບ ສິດ. ຖ້າບຸກຄົນໃດປະສົງທີ່ຈະຮັບຈຳນວນເງິນຊ່ວຍເຫຼືອ ປະຈຳອາທິດສູງຂຶ້ນ, ພວກເຮົາຈະຕ້ອງມີເອກະສານທີ່ ສະແດງເຖິງລາຍຮັບຂອງພວກເຂົາ.

ບຸກຄົນທີ່ປະກອບອາຊີບອິດສະຫຼະຈະໄດ້ຮັບຈຳນວນເງິນ ຊ່ວຍເຫຼືອປະຈຳອາທິດຂອງພວກເຂົາ ເຊິ່ງຖືກກຳນົດອີງ ຕາມລາຍຮັບສູງທີ່ຂອງພວກເຂົາສຳລັບປະຕິທິນປະຈຳປີ 2019.

ບຸກຄົນທີ່ຖືກຈ້າງໂດຍຄົນອື່ນຈະມີຈຳນວນເງິນຊ່ວຍເຫຼືອ ປະຈຳອາທິດ ທີ່ຖືກກຳນົດອີງຕາມລາຍຮັບລວມຂອງພວກ ເຂົາສຳລັບປະຕິທິນປີ 2019.

ຖ້າທ່ານຍັງບໍ່ໄດ້ເຮັດໃບແຈ້ງພາສີລາຍໄດ້ປີ 2019 ຂອງ ທ່ານສຳເລັດ ພວກເຮົາໄດ້ໃຫ້ຄຳຊີ້ນຳນີ້ ພ້ອມກັບຕົວຢ່າງ ຂອງເອກະສານທີ່ສາມາດຍອມຮັບໄດ້.

ບຸກຄົນທີ່ບໍ່ມີສິດສຳລັບເງິນຊ່ວຍເຫຼືອການວ່າງງານ – ສິ່ງນີ້ລວມທັງລູກຈ້າງຜູ້ທີ່ນາຍຈ້າງບໍ່ໄດ້ຖືກຄຸ້ມຄອງໂດຍ ປະກັນໄພການວ່າງງານ ຫຼື ຜູ້ທີ່ບໍ່ມີສິດໄດ້ຮັບປະໂຫຍດຈາກ ປະກັນໄພການວ່າງງານ. ຖ້າໃບແຈ້ງພາສີລາຍໄດ້ປີ 2019 ຍັງບໍ່ສຳເລັດ ຫຼື ຍິ່ນເທື່ອ, ດັ່ງນັ້ນ ເອກະສານທີ່ດີທີ່ສຸດທີ່ ຈະນຳໃຊ້ແມ່ນ W-2s ປີ 2019 ໃດກໍໄດ້ ເຊິ່ງສິ່ງເຫຼົ່ານີ້ຈະ ສະແດງເຖິງລາຍຮັບລວມ.

ຜູ້ປະກອບການດ່ຽວ (ຜູ້ຈ່າຍພາສີສ່ວນບຸກຄົນ) – ຄວນຈະໃຫ້ແບບຟອມໃບແຈ້ງພາສີລາຍຮັບສ່ວນບຸກຄົນ 1040 ຂອງ IRS ແລະ ລາຍລະອຽດຮ່ວມເຊັ່ນ: ລາຍ ລະອຽດ C – ໃບລາຍງານງົບກຳໄລ ແລະ ຂາດທຶນຈາກ ທຸລະກິດ.

ເບິ່ງຕົວຢ່າງ ກ

22222		Employee's social security number		OMB No. 1545-0008	
b Employer identification number (EIN)		1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code		3 Social security wages		4 Social security tax withheld	
		5 Medicare wages and tips		6 Medicare tax withheld	
		7 Social security tips		8 Allocated tips	
d Control number		9		10 Dependent care benefits	
e Employee's first name and initial Last name		11 Nonqualified plans		12a	
		13 Statutory employee <input type="checkbox"/> Minister <input type="checkbox"/> Third party <input type="checkbox"/>		12b	
		14 Other		12c	
				12d	
f Employee's address and ZIP code		15 State: Employer's state ID number		16 State wages, tips, etc.	
		17 State income tax		18 Local wages, tips, etc.	
		19 Local income tax		20 Locality name	

Form **W-2 Wage and Tax Statement** 2019 Department of the Treasury—Internal Revenue Service
Copy 1—For State, City, or Local Tax Department

ເບິ່ງຕົວຢ່າງ ຂ

SCHEDULE C (Form 1040 or 1040-SR)		Profit or Loss From Business (Sole Proprietorship)		OMB No. 1545-0074	
Department of the Treasury Internal Revenue Service (99)		▶ Go to www.irs.gov/ScheduleC for instructions and the latest information.		2019 Attachment Sequence No. 09	
Name of proprietor		▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.		Social security number (SSN)	
A Principal business or profession, including product or service (see instructions)		B Enter code from instructions			
C Business name. If no separate business name, leave blank.		D Employer ID number (EIN) (see instr.)			
E Business address (including suite or room no.) ▶ City, town or post office, state, and ZIP code					
F Accounting method: (1) <input type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶					
G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses				Yes <input type="checkbox"/> No <input type="checkbox"/>	
H If you started or acquired this business during 2019, check here				Yes <input type="checkbox"/> No <input type="checkbox"/>	
I Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions)				Yes <input type="checkbox"/> No <input type="checkbox"/>	
J If "Yes," did you or will you file required Forms 1099?				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Part I Income					
1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked			1	
2	Returns and allowances			2	
3	Subtract line 2 from line 1			3	
4	Cost of goods sold (from line 42)			4	
5	Gross profit. Subtract line 4 from line 3			5	
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)			6	
7	Gross income. Add lines 5 and 6			7	
Part II Expenses. Enter expenses for business use of your home only on line 30.					
8	Advertising	8	Office expense (see instructions)	18	
9	Car and truck expenses (see instructions)	9	Pension and profit-sharing plans	19	
10	Commissions and fees	10	a Vehicles, machinery, and equipment	20a	
11	Contract labor (see instructions)	11	b Other business property	20b	
12	Depletion	12	21 Repairs and maintenance	21	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	22 Supplies (not included in Part III)	22	
14	Employee benefit programs (other than on line 19)	14	23 Taxes and licenses	23	
15	Insurance (other than health)	15	24 Travel and meals:		
16	Interest (see instructions):		a Travel	24a	
a Mortgage (paid to banks, etc.)	16a	b Deductible meals (see instructions)	24b		
b Other	16b	25 Utilities	25		
17	Legal and professional services	17	26 Wages (less employment credits)	26	
			27a Other expenses (from line 48)	27a	
			b Reserved for future use	27b	
28	Total expenses before expenses for business use of home. Add lines 8 through 27a			28	
29	Tentative profit or (loss). Subtract line 28 from line 7			29	
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30			30	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.			31	
32	If you have a loss, check the box that describes your investment in this activity (see instructions).				

ຫຸ້ນສ່ວນ - ຄວນຈະໃຫ້ແບບຟອມ 1065 ຂອງ IRS - ຜົນຕອບແທນຂອງສະຫະລັດຈາກລາຍຮັບຂອງການເປັນຫຸ້ນສ່ວນ ແລະ ລາຍລະອຽດ ຮ່ວມ K-1 - ສ່ວນແບ່ງລາຍຮັບ-ຂາດທຶນຂອງຫຸ້ນສ່ວນ.

ເບິ່ງຕົວຢ່າງ ຄ

Schedule K-1 (Form 1065) 2019
 Department of the Treasury Internal Revenue Service
 For calendar year 2019, or tax year beginning / / 2019, ending / / 2019

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Part I Information About the Partnership

A Partnership's employer identification number

B Partnership's name, address, city, state, and ZIP code

C IRS Center where partnership filed return

D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See inst.)

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

G General partner or LLC member (check one):
 General partner or LLC member
 Limited partner or other LLC member

H1 Domestic partner
 Domestic partner
 Foreign partner

H2 If the partner is a disregarded entity (DE), enter the partner's:
 TIN _____ Name _____

H What type of entity is this partner?
 S corporation
 Trust
 Estate
 Partnership

J If this partner is a retirement plan (R/SEP/Keogh/etc.), check here

K Partner's share of profit, loss, and capital (see instructions):

Beginning	Ending
Profit	\$ _____
Loss	\$ _____
Capital	\$ _____

Check if decrease is due to sale or exchange of partnership interest:

L Partner's share of liabilities:

Beginning	Ending
Nonrecourse	\$ _____
Qualified nonrecourse financing	\$ _____
Recourse	\$ _____

Check this box if item K includes liability amounts from lower tier partnerships:

M Did the partner contribute property with a built-in gain or loss?
 Yes No If "Yes," attach statement. See instructions.

N Partner's Share of Not Recognized Section 704(c) Gain or (Loss)
 Beginning \$ _____ Ending \$ _____

1065 U.S. Return of Partnership Income
 Department of the Treasury Internal Revenue Service
 For calendar year 2019, or tax year beginning / / 2019, ending / / 2019
 Go to www.irs.gov/Form1065 for instructions and the latest information.

D Employer identification number

E Date business started

F Total assets (see instructions)

I Check applicable boxes: Initial return Final return Name change Address change Amended return
 Check accounting method: Cash Accrual Other (specify) _____
 Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year _____
 Check if Schedules C and M-3 are attached _____
 Check if partnership: Aggregated activities for section 466 at-risk purposes Grouped activities for section 469 passive activity purposes

Subtotal: Includes only trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

Income	1a Gross receipts or sales	1b Returns and allowances	1c Balance, Subtract line 1b from line 1a.
	2 Cost of goods sold (attach Form 1125-A)		3 Gross profit. Subtract line 2 from line 1c.
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)		5 Net farm profit (loss) (attach Schedule F (Form 1040 or 1040-SR))
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)		7 Other income (loss) (attach statement)
	8 Total income (loss). Combine lines 3 through 7		9 Salaries and wages (other than to partners) (loss employment credits)
	9 Salaries and wages (other than to partners) (loss employment credits)		10 Guaranteed payments to partners
	10 Guaranteed payments to partners		11 Repairs and maintenance
	11 Repairs and maintenance		12 Bad debts
	12 Bad debts		13 Rent
	13 Rent		14 Taxes and licenses
	14 Taxes and licenses		15 Interest (see instructions)
	15 Interest (see instructions)	16a Depreciation (if required, attach Form 4562)	16b Less depreciation reported on Form 1125-A and elsewhere on return
	16a Depreciation (if required, attach Form 4562)	17 Depletion (Do not deduct oil and gas depletion.)	18 Retirement plans, etc.
	17 Depletion (Do not deduct oil and gas depletion.)	18 Retirement plans, etc.	19 Employee benefit programs
	18 Retirement plans, etc.	19 Employee benefit programs	20 Other deductions (attach statement)
	19 Employee benefit programs	20 Other deductions (attach statement)	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20
	20 Other deductions (attach statement)	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20	22 Ordinary business income (loss). Subtract line 21 from line 8
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20	22 Ordinary business income (loss). Subtract line 21 from line 8	23 Interest due under the look-back method—completed long-term contracts (attach Form 8097)
	22 Ordinary business income (loss). Subtract line 21 from line 8	23 Interest due under the look-back method—completed long-term contracts (attach Form 8097)	24 Interest due under the look-back method—Income forecast method (attach Form 8800)
	23 Interest due under the look-back method—completed long-term contracts (attach Form 8097)	24 Interest due under the look-back method—Income forecast method (attach Form 8800)	25 BBA AAR Imputed underpayment (see instructions)
	24 Interest due under the look-back method—Income forecast method (attach Form 8800)	25 BBA AAR Imputed underpayment (see instructions)	26 Other taxes (see instructions)
	25 BBA AAR Imputed underpayment (see instructions)	26 Other taxes (see instructions)	27 Total balance due. Add lines 23 through 26
	26 Other taxes (see instructions)	27 Total balance due. Add lines 23 through 26	28 Payment (see instructions)
	27 Total balance due. Add lines 23 through 26	28 Payment (see instructions)	29 Amount owed. If line 28 is smaller than line 27, enter amount owed
	28 Payment (see instructions)	29 Amount owed. If line 28 is smaller than line 27, enter amount owed	30 Overpayment. If line 28 is larger than line 27, enter overpayment
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed	30 Overpayment. If line 28 is larger than line 27, enter overpayment	

Signature here
 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member _____ Date _____
 Signature of preparer _____ Date _____
 Preparer's name _____ Preparer's address _____
 Preparer's title _____ Preparer's phone no. _____
 Preparer's fax no. _____
 Preparer's E-mail _____
 Preparer's PTIN _____

ສໍາລັບບໍລິສັດໜີ້ສິນຈໍາກັດ (LLC ແລະ LLP) - ເອກະສານທີ່ຈໍາເປັນຕ້ອງໃຊ້ຂຶ້ນຢູ່ກັບວ່າ LLC ໄດ້ຮັບເລືອກໃຫ້ເສຍພາສີ ໂດຍມີຈຸດປະສົງໃຫ້ເສຍພາສີລາຍຮັບ (ຜູ້ປະກອບການດ່ຽວ, ຫຸ້ນສ່ວນ ຫຼື ບໍລິສັດ)

ບໍລິສັດ - ບໍລິສັດຄວນອອກ W-2 ໃຫ້ພະນັກງານບໍລິສັດ ແລະ ບໍລິສັດຄວນລາຍງານພະນັກງານບໍລິສັດກ່ຽວກັບລາຍງານປະຈໍາໄຕມາດຂອງພວກເຂົາ. ຖ້າບໍລິສັດເລືອກທີ່ຈະບໍ່ຈ່າຍພາສີການວ່າງງານໃຫ້ກັບພະນັກງານບໍລິສັດ, ມັນສາມາດແກ້ໄຂລາຍງານປະກັນໄພການວ່າງງານປະຈໍາໄຕມາດ) ແລະ ລວມທັງຄ່າຈ້າງຂອງພະນັກງານບໍລິສັດ. ໝາຍເຫດສໍາຄັນ: ທ່ານຕ້ອງຈ່າຍພາສີການວ່າງງານຕອນທີ່ທ່ານແກ້ໄຂການລາຍງານ.

ເບິ່ງຕົວຢ່າງ ງ

22222 Employee's social security number OMB No. 1545-0008

b Employer identification number (EIN)

c Employer's name, address, and ZIP code

d Control number

e Employee's first name and initial Last name Suffix

f Employee's address and ZIP code

1	Wages, tips, other compensation	2	Federal income tax withheld
3	Social security wages	4	Social security tax withheld
5	Medicare wages and tips	6	Medicare tax withheld
7	Social security tips	8	Allocated tips
9	Control number	10	Dependent care benefits
11	Nonqualified plans	12a	Health insurance
12b	Health insurance	12c	Life insurance
12d	Life insurance	12e	Other benefits
13	Retirement	14	Other
15	State Employer's state ID number	16	State wages, tips, etc.
17	State income tax	18	Local wages, tips, etc.
19	Local income tax	20	Locality name

W-2 Wage and Tax Statement 2019
 Department of the Treasury—Internal Revenue Service
 Copy 1—For State, City, or Local Tax Department

ບໍລິສັດ S – ຄວນໃຫ້ແບບຟອມ 1120-S ຂອງ IRS - ໃບແຈ້ງພາສີລາຍຮັບຂອງສະຫະລັດ ສຳລັບບໍລິສັດ S ແລະ ລາຍລະອຽດ K-1 – ສ່ວນແບ່ງລາຍຮັບ-ຂາດທຶນຂອງຜູ້ຖືຫຸ້ນເພື່ອສະແດງລາຍຮັບສູດທິຂອງພວກເຂົາ.

ເບິ່ງຕົວຢ່າງ ຈ

Form **1120-S** U.S. Income Tax Return for an S Corporation OMB No. 1545-0123
2019
For calendar year 2019 or tax year beginning 2019, ending 20

A Selection effective date
B Business activity code number (see instructions)
C Check if Sch. M-3 attached
D Employer identification number
E Date incorporated
F Total assets (see instructions)

G Is the corporation electing to be an S corporation beginning with this tax year? Yes No
H Check if: (1) Final return (2) Name change (3) Address change (4) Amended return (5) S election termination or revocation
I Check if corporation: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes

1a	Gross receipts or sales	1a
b	Returns and allowances	1b
c	Balance. Subtract line 1b from line 1a	1c
2	Cost of goods sold (attach Form 1125-A)	2
3	Gross profit. Subtract line 2 from line 1c	3
4	Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4
5	Other income (loss) (see instructions—attach statement)	5
6	Total income (loss). Add lines 3 through 5	6
7	Compensation of officers (see instructions—attach Form 1125-E)	7
8	Salaries and wages (less employment credits)	8
9	Repairs and maintenance	9
10	Bad debts	10
11	Rents	11
12	Taxes and licenses	12
13	Interest (see instructions)	13
14	Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14
15	Depletion (Do not deduct oil and gas depletion)	15
16	Advertising	16
17	Pension, profit-sharing, etc., plans	17
18	Employee benefit programs	18
19	Other deductions (attach statement)	19
20	Total deductions. Add lines 7 through 19	20
21	Ordinary business income (loss). Subtract line 20 from line 6	21
22a	Excess net passive income or LIFO recapture tax (see instructions)	22a
b	Tax from Schedule D (Form 1120-S)	22b
c	Add lines 22a and 22b (see instructions for additional taxes)	22c
23a	2019 estimated tax payments and 2018 overpayment credited to 2019	23a
b	Tax deposited with Form 7004	23b
c	Credit for federal tax paid on fuels (attach Form 4136)	23c
d	Reserved for future use	23d
e	Add lines 23a through 23d	23e
24	Estimated tax penalty (see instructions). Check if Form 2220 is attached	24
25	Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed	25
26	Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid	26
27	Enter amount from line 26: Credited to 2020 estimated tax Refunded	27

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

Schedule K-1 (Form 1120-S) 2019
Department of the Treasury Internal Revenue Service
For calendar year 2019, or tax year beginning / / 2019, ending / /

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	13	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
9	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)	15	Alternative minimum tax (AMT) tax
12	Other deductions		
			16 Items affecting shareholder basis
			17 Other information

Part I Information About the Corporation
A Corporation's employer identification number
B Corporation's name, address, city, state, and ZIP code
C IRS Center where corporation filed return

Part II Information About the Shareholder
D Shareholder's identifying number
E Shareholder's name, address, city, state, and ZIP code
F Shareholder's percentage of stock ownership for tax year %

For IRS Use Only

ບໍລິສັດ C – ຄວນໃຫ້ແບບຟອມ 1120 ຂອງ IRS - ໃບແຈ້ງພາສີລາຍຮັບບໍລິສັດຂອງສະຫະລັດ ຢູ່ແຖວທີ 12, ມັນຈະສະແດງຄ່າຕອບແທນໃຫ້ແກ່ພະນັກງານ, ແບບຟອມ 1125-E ຈະສະແດງຄ່າຕອບແທນແກ່ພະນັກງານທັງໝົດ.

ເບິ່ງຕົວຢ່າງ ສ

Form **1120** U.S. Corporation Income Tax Return OMB No. 1545-0123
2019
For calendar year 2019 or tax year beginning 2019, ending 20

A Check if: (1) Consolidated return (attach Form 990) (2) LIFO election (attach Form 996)
B Employer identification number
C Date incorporated
D Total assets (see instructions)

E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change

1a	Gross receipts or sales	1a
b	Returns and allowances	1b
c	Balance. Subtract line 1b from line 1a	1c
2	Cost of goods sold (attach Form 1125-A)	2
3	Gross profit. Subtract line 2 from line 1c	3
4	Dividends and inclusions (Schedule C, line 23)	4
5	Interest	5
6	Gross rents	6
7	Gross royalties	7
8	Capital gain net income (attach Schedule D (Form 1120-S))	8
9	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9
10	Other income (see instructions—attach statement)	10
11	Total income. Add lines 3 through 10	11
12	Compensation of officers (see instructions—attach Form 1125-E)	12
13	Salaries and wages (less employment credits)	13
14	Repairs and maintenance	14
15	Bad debts	15
16	Rents	16
17	Taxes and licenses	17
18	Interest (see instructions)	18
19	Charitable contributions	19
20	Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20
21	Depletion	21
22	Advertising	22
23	Pension, profit-sharing, etc., plans	23
24	Employee benefit programs	24
25	Reserved for future use	25
26	Other deductions (attach statement)	26
27	Total deductions. Add lines 12 through 26	27
28	Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11.	28
29a	Net operating loss deduction (see instructions)	29a
b	Special deductions (Schedule C, line 24)	29b
c	Add lines 29a and 29b	29c
30	Taxable income. Subtract line 29c from line 28. See instructions	30
31	Total tax (Schedule J, Part I, line 11)	31
32	2019 net 965 tax liability paid (Schedule J, Part II, line 12)	32
33	Total payments, credits, and section 965 net tax liability (Schedule J, Part III, line 23)	33
34	Estimated tax penalty. See instructions. Check if Form 2220 is attached	34
35	Amount owed. If line 33 is smaller than the total of lines 31, 32, and 34, enter amount owed	35
36	Overpayment. If line 33 is larger than the total of lines 31, 32, and 34, enter amount overpaid	36
37	Enter amount from line 36 you want: Credited to 2020 estimated tax Refunded	37

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

Form **1125-E** Compensation of Officers OMB No. 1545-0123
(Rev. October 2016)
Department of the Treasury Internal Revenue Service
For calendar year 2019 or tax year beginning 2019, ending 20

Attach to Form 1120, 1120-C, 1120-F, 1120-EIT, 1120-RIC, or 1120S.
Information on Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

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 (see instructions)	(c) Percent of time devoted to business	(d) Percent of stock owned	(e) Common	(f) Preferred	(g) Amount of compensation
1		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
		95	95	95		
2	Total compensation of officers					2
3	Compensation of officers claimed on Form 1125-A or elsewhere on return					3

**ຖ້າທ່ານ ຫຼື ທຸລະກິດຂອງທ່ານຍັງບໍ່ໄດ້ຍື່ນໃບແຈ້ງ
ພາສີລາຍໄດ້:**

ຖ້າໃບແຈ້ງພາສີລາຍໄດ້ຂອງທ່ານຍັງບໍ່ສໍາເລັດ ຫຼື ຍື່ນ
ເທື່ອ, ເອກະສານທີ່ດີທີ່ສຸດທີ່ຈະມອບໃຫ້ ອາດຈະເປັນໃບ
ລາຍງານງົບກຳໄລ ແລະ ຂາດທຶນ (ຫຼື ໃບລາຍງານຜົນໄດ້
ຮັບ) ສໍາລັບທ້າຍປີ ວັນທີ 31 ທັນວາ 2019 ຫຼື ແບບຟອມ
ອື່ນທີ່ຈະສະແດງເຖິງລາຍຮັບສູດທິສໍາລັບປີ 2019.

ອົງປະກອບພື້ນຖານຂອງໃບລາຍງານຜົນໄດ້ຮັບແມ່ນ:

- ລາຍຮັບ
- ຕົ້ນທຶນຂາຍສິນຄ້າ
- ລາຍຈ່າຍ
- ລາຍຮັບອື່ນໆ

ລາຍຮັບສູດທິເທົ່າກັບ:

- ລາຍຮັບ
- ລົບ ຕົ້ນທຶນຂາຍສິນຄ້າ
- ລົບ ລາຍຈ່າຍ
- ບວກ ລາຍຮັບອື່ນໆ

ເບິ່ງຕົວຢ່າງ ຊ

Profit and Loss Statement

<Company Name>

For the <Month or Year> ending <Month-Day-Year>

Gross margin [L/J] -
Return on sales [T/J] -

	Prior Period	Budget	Current Period	Current Period as % of Sales	% Change from Prior Period	% Change from Budget
Wages and salaries				-	-	-
Outside services				-	-	-
Supplies				-	-	-
Meals and entertainment				-	-	-
Rent				-	-	-
Telephone				-	-	-
Utilities				-	-	-
Depreciation				-	-	-
Insurance				-	-	-
Repairs and maintenance				-	-	-
Other expenses (specify)				-	-	-
Other expenses (specify)				-	-	-
Total General and Administrative Expenses [O]	0	0	0	-	-	-
Total Operating Expenses [P=M+N+O]	0	0	0	-	-	-
Income from Operations [Q=L-P]	0	0	0	-	-	-
Other Income [R]				-	-	-
Taxes						
Income taxes				-	-	-
Payroll taxes				-	-	-
Real estate taxes				-	-	-
Other taxes (specify)				-	-	-
Other taxes (specify)				-	-	-
Total Taxes [S]	0	0	0	-	-	-
Net Profit [T=Q+R-S]	0	0	0	-	-	-



The Oregon Employment Department is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Language assistance is available to persons with limited English proficiency at no cost.

ພະແນກຈັດຈ້າງງານແຫ່ງລັດອໍຣິກອນແມ່ນຜູ້ຈ້າງງານ/ໃບຮແກຣມເພື່ອໂອກາດເທົ່າທຽມກັນ. ການຊ່ວຍເຫຼືອ ແລະ ບໍລິການຊ່ວຍເຫຼືອແມ່ນມີໃຫ້ແກ່ບຸກຄົນທີ່ພິການ ເມື່ອມີການຮ້ອງຂໍ. ຄວາມຊ່ວຍເຫຼືອດ້ານພາສາແມ່ນມີໃຫ້ແກ່ບຸກຄົນທີ່ມີລະດັບຄວາມຊ່ຽວຊານພາສາອັງກິດທີ່ຈຳກັດ ໂດຍບໍ່ເສຍຄ່າໃດໆ.