2024 TAX RETURN

Preparer Review Copy

Client: IO-282

Prepared for: DARWIN WIDJAJA and HENNY RAMALI
1602 CRYSTAL MEADOW PL
KATY, TX 77494

Prepared by: DANIEL E. GREENE CPA
Daniel E Greene CPA
31915 Rancho CA Rd Ste 200-205
Temecula, CA 92591
9515536852

Date: March 24, 2026

Comments:

Route to: _____ _____ _____ _____

CLIENT IO-282

DANIEL E GREENE CPA
31915 RANCHO CA RD STE 200-205
TEMECULA, CA 92591
9515536852

March 24, 2026

DARWIN WIDJAJA and HENNY RAMALI
1602 CRYSTAL MEADOW PL
KATY, TX 77494

Dear Darwin and Henny,

Your 2024 Federal Individual Income Tax return will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879 - IRS e-file Signature Authorization. No tax is payable with the filing of this return. The refund of $2,301 will be directly deposited into your checking account.

Please be sure to call if you have any questions.

Sincerely,

DANIEL E. GREENE CPA

Daniel E Greene CPA
31915 Rancho CA Rd Ste 200-205
Temecula, CA 92591
9515536852

Client IO-282
March 24, 2026

DARWIN WIDJAJA and HENNY RAMALI
1602 CRYSTAL MEADOW PL
KATY, TX 77494

FEDERAL FORMS			
Form 1040	2024 U.S. Individual Income Tax Return	$	650.00
Schedule 1	Additional Income and Adjustments to Income		
Schedule A	Itemized Deductions		
Schedule B	Interest and Dividend Income		
Schedule C	Profit or Loss From Business		500.00
Schedule D	Capital Gains and Losses		
Schedule E p2	Supplemental Income and Loss		
Form 1116	Foreign Tax Credit		
Form 1116 Sch B	Foreign Tax Carryover Reconciliation Schedule		
Form 7203	S Corporation Shareholder Basis Limitation		
Schedule 8812	Credits for Qualifying Children & Other Dependents		
Form 8867	Paid Preparer's Due Diligence Checklist		
Form 8879	IRS e-file Signature Authorization		
Form 8949	Sales and Other Dispositions of Capital Assets		
Form 8995	Qualified Business Income Deduction		
Form 172	Net Operating Losses (NOLs)		
Bus.Use - Home	Business Use of Home Worksheets		
	Vehicle Expense Worksheet		

FEE SUMMARY		
Preparation Fee	$	1,150.00
Audit Protection		300.00
Amount Due	$	1,450.00

Client IO-282 DARWIN WIDJAJA AND HENNY RAMALI 605-08-1714

3/24/26 11:56 AM

	2024	2023	Diff
INCOME			
Wages, salaries, tips, etc	30,000	25,500	4,500
Interest income	27,672	13,784	13,888
Dividend income	46,675	42,987	3,688
Taxable pensions	0	21,549	-21,549
Business income	-12,163	-15,233	3,070
Capital gain or loss	-3,000	-3,000	0
Rent, royalty, partnership, SCorp, trust	-71,911	137,945	-209,856
Other income	0	20	-20
Total income	17,273	223,552	-206,279
ADJUSTMENTS TO INCOME			
Total adjustments	0	0	0
Adjusted gross income	17,273	223,552	-206,279
ITEMIZED DEDUCTIONS			
Medical & dental	13,819	4,254	9,565
Taxes	10,000	10,000	0
Interest	17,207	17,529	-322
Contributions	10,364	28,540	-18,176
Total itemized deductions	51,390	60,323	-8,933
TAX COMPUTATION			
Standard deduction	29,200	27,700	1,500
Larger of itemized or standard deduction	51,390	60,323	-8,933
Qualified business income deduction	0	48	-48
Taxable income	-34,117	163,181	-197,298
Tax before credits	0	24,937	-24,937
CREDITS			
Child tax credit & other dependent cr	0	6,000	-6,000
Foreign tax credit	0	376	-376
Total credits	0	6,376	-6,376
Tax after credits	0	18,561	-18,561
OTHER TAXES			
Tax on IRAs, other qual. ret. plans, etc	0	2,155	-2,155
Total tax	0	20,716	-20,716
PAYMENTS & REFUNDABLE CREDITS			
Federal income tax withheld	0	4,310	-4,310
Refundable/Additional child tax credit	2,301	0	2,301
Total payments	2,301	4,310	-2,009
REFUND OR AMOUNT DUE			
Amount overpaid	2,301	0	2,301
Amount refunded to you	2,301	0	2,301
Amount you owe	0	16,406	-16,406
TAX RATES			
Ordinary income tax bracket	0.0%	22.0%	-22.0%
Effective tax rate	0.0%	12.7%	-12.7%

Federal

2024 Federal Form 1040 Electronic Financial Transaction Information.
The taxpayer will receive a refund of $2,301 which will be deposited directly into the following account.

Name of Bank: WELLS FARGO BANK TEXAS NA
Routing Transit Number: 111900659
Account Number: ******2897
Account Type: Checking

Federal Informational Diagnostics

Form 1116

☒ ~~Taxpayer may qualify for the election not to file Form 1116. Refer to Form 1116 instructions to make this determination. Please refer to "1=elect not to file Form 1116" (screen 46, code 7) to prepare and attach the election statement.~~

Form 172

☒ ~~Most taxpayers no longer have the option to carryback a net operating loss. If the 2024 net operating loss is subject to carryback due to the exception for certain farming losses and certain insurance companies, the election to relinquish the NOL carryback period must be made by the due date (including extensions). The election to waive the carryback can be found in the Miscellaneous section of the Elections screen. If the net operating loss is subject to carryback, it will appear on general information and will carry forward unless Form 172 and Form 1045 are completed to carryback the net operating loss. If amending a prior year return to carryback a 2024 net operating loss, include Form 172 for 2024 with that prior year's Form 1040X. When carrying forward the net operating loss from 2024 for use in a future year, include Form 172 from 2024 with the future year's Form 1040.~~

General

☐ This client file is currently locked. Tax return amounts are now protected from being modified by updates to the program. However, loading new versions of the program that include graphical changes (text, spacing, etc.) to forms may impact the appearance of affected forms even if a file is locked. Additionally, unlocking and recalculating a previously locked file can result in changes to the tax return if program updates are loaded between the time the file is locked and subsequently unlocked.

☐ The computer date of 6/11/2025 will be transmitted as taxpayer's e-file PIN authorization signature date when the tax return is electronically filed.

☒ ~~Please verify if at any time during the tax year, the taxpayer received, sold, exchanged, or disposed of a digital asset (or a financial interest in a digital asset).~~

Main Form

☒ ~~Estimated tax voucher amounts exist in screen 6, without any corresponding "Amount paid" entries.~~

Sch B

☒ ~~The tax program defaults to checking the no box on Schedule B for the question "Did the taxpayer have a financial interest in or signature authority over a financial account located in a foreign country. If this is correct, make an entry in the field "No interest or authority over a foreign account (located in the interest screen)". If not, make an entry in the field "Interest in or authority over foreign account".~~

Federal Informational Diagnostics (continued)

Sch C

☒ ~~Schedule C #1: Question I concerns the filing of Form(s) 1099 and has been checked "No" by default. If the business is required to file Form(s) 1099 for any 2024 payments it made, indicate such in the "General Information" section of Business Income, Screen 16.~~

Sch SE

☒ ~~The taxpayer may benefit by electing the Optional Self-Employment Tax method. Refer to IRS Schedule SE instructions for information regarding benefits that can be derived.~~

Federal Overrides

Screen 3

☐ An override entry of 1 has been made in Federal "Allow discussion: 1=yes, 2=no, 3=blank [O]" (Screen 3, Code 17).

☐ An override entry of 1 has been made in Federal "State K-1 Reconciliation Worksheet" (Screen 3, Code 90).

Screen 11

☐ Interest Income Item #1: An override entry of 1 has been made in Federal "1=To Delete This Year, 2=To Delete Next Year" (Screen 11, Code 100).

☐ Interest Income Item #2: An override entry of 1 has been made in Federal "1=To Delete This Year, 2=To Delete Next Year" (Screen 11, Code 100).

☐ Interest Income Item #3: An override entry of 1 has been made in Federal "1=To Delete This Year, 2=To Delete Next Year" (Screen 11, Code 100).

Screen 12

☐ Dividend #1: An override entry of 1 has been made in Federal "1=To Delete This Year, 2=To Delete Next Year" (Screen 12, Code 100).

☐ Dividend #2: An override entry of 1 has been made in Federal "1=To Delete This Year, 2=To Delete Next Year" (Screen 12, Code 100).

☐ Dividend #3: An override entry of 1 has been made in Federal "1=To Delete This Year, 2=To Delete Next Year" (Screen 12, Code 100).

Screen 17.1

☐ Disposition #1: An override entry of 1 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

☐ Disposition #2: An override entry of 1 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

☐ Disposition #3: An override entry of 2 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

☐ Disposition #5: An override entry of 1 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

☐ Disposition #6: An override entry of 1 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

☐ Disposition #7: An override entry of 1 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

☐ Disposition #8: An override entry of 2 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

☐ Disposition #9: An override entry of 1 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

Federal Overrides (continued)

Screen 17.1

- ☐ Disposition #10: An override entry of 2 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).
- ☐ Disposition #13: An override entry of 1 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).
- ☐ Disposition #14: An override entry of 2 has been made in Federal "1=short-term, 2=long-term [O]" (Screen 17.1, Code 51).

Screen 34

- ☐ Business credits #1: An override entry of 2022 has been made in Federal "Alternative Motor Vehicle Credit: Vehicle Year" (Screen 34, Code 137).
- ☐ Business credits #1: An override entry of 'TESLA' has been made in Federal "Alternative Motor Vehicle Credit: Vehicle Make" (Screen 34, Code 138).
- ☐ Business credits #1: An override entry of 'MODEL 3' has been made in Federal "Alternative Motor Vehicle Credit: Vehicle Model" (Screen 34, Code 139).

Forms needed for this return

Federal: 1040, Sch 1, Sch A, Sch B, Sch C, Sch D, Sch E p2, 172, 1116
1116 Sch B, 7203, 8812, 8867, 8879, 8949, 8995

PDF Attachments
Auto-Attach PDFs will be added to the list after the E-File is submitted

Federal

Form 8949 Exception to reporting, Darwin Widjaja and Henny Ramali 8949 2024 Sch D A
Form 8949 Exception to reporting, Darwin Widjaja and Henny Ramali 8949 2024 Sch D A
Form 8949 Exception to reporting, Darwin Widjaja and Henny Ramali 8949 2024 Sch D A
Form 8949 Exception to reporting, Darwin Widjaja and Henny Ramali 8949 2024 Sch D A
Form 8949 Exception to reporting, Darwin Widjaja and Henny Ramali 8949 2024 Sch D A

Tax Rates

	Marginal	Effective
Federal	0.%	0.%

Carryovers to 2025

Federal Carryovers

Current Year Net Operating Loss	31,117.
Current Year AMT Net Operating Loss	20,399.
Short-Term Capital Loss	752,129.
Long-Term Capital Loss	42,851.
AMT Short-Term Capital Loss	752,129.
AMT Long-Term Capital Loss	42,851.
Contributions (60%)	27,349.
Contributions (50%)	500.
Total Qualified Business Loss Carryforward (QBI)	171,742.
Foreign Tax Credit	413.
AMT Foreign Tax Credit	761.

Retirement Contributions

- ☐ In 2024 the taxpayer could have contributed $7,000 to a traditional IRA, with estimated tax savings of $0, or the taxpayer could have contributed $7,000 to a Roth IRA (assuming no other changes). Contributions can be made up until April 15th, 2025.
- ☐ In 2024 the spouse could have contributed $7,000 to a traditional IRA, with estimated tax savings of $0, or the spouse could have contributed $7,000 to a Roth IRA (assuming no other changes). Contributions can be made up until April 15th, 2025.

Future Tax Savings

- ☐ In 2025 the taxpayer can contribute $7,000 to a traditional IRA, with estimated tax savings of $0, or the taxpayer can contribute $7,000 to a Roth IRA (assuming no other changes).
- ☐ In 2025 the spouse can contribute $7,000 to a traditional IRA, with estimated tax savings of $0, or the spouse can contribute $7,000 to a Roth IRA (assuming no other changes).
- ☐ To fund the cost of future college tuition, consideration should be given to a state sponsored or private section 529 plan. Contributions to such plans are not subject to the same limitations that apply to Coverdell ESAs. Earnings on contributions to state sponsored and private section 529 plans will not be subjected to federal tax when withdrawn, provided the distributions are used to pay for the beneficiary's higher education expenses.
- ☐ If the taxpayer has access to an employer-provided cafeteria plan for health care reimbursement, the taxpayer should consider participating. Contributions to such plans reduce taxable wages. However, due to the use-it-or-lose-it nature of such plans, conservative contributions should be made.

Tax Tips

- ☐ Taxable income is $-34,117, placing the taxpayer in a 0% marginal tax bracket. Based on 2024 tax rates, income would have to increase by over $34,117 in order for any income to begin being taxed in the 10% bracket. This may be used as a guide in determining the advantages or disadvantages of receiving discretionary income in 2025.
- ☐ The taxpayer may benefit by converting tax-exempt securities to taxable securities. Although taxable securities normally produce a higher yield and more taxable income, the additional income may offset the tax savings from tax-exempt securities, given the taxpayer's low marginal tax bracket.

Tax Tips (continued)

- ☐ The taxpayer has a long-term capital loss carryover. Since long-term capital gains are taxed at a lower rate than short-term capital gains, it is more advantageous to use short-term gains to offset the carryover. If the taxpayer plans on recognizing gains in 2025 and has a choice between recognizing short-term gains or long-term gains, an overall greater tax savings will be realized by recognizing short-term gains up to the amount of the loss carryover.
- ☐ Donating appreciated securities held more than one year instead of cash may prove to be beneficial to this taxpayer. The full market value of the security would be deductible, and capital gains tax on the sale of the security could be avoided.
- ☐ If the taxpayer is considering donating securities which have declined in value, consideration should be given to selling the securities and giving the proceeds to the charitable organization. This would enable the taxpayer to recognize the capital loss as well as the charitable deduction.
- ☐ While it is not always practical to defer charitable giving, it is most advantageous to defer substantial gifts until the end of the year.
- ☐ Paying discretionary itemized deductions (Property Taxes and Gifts to Charity) before the end of the year, or postponing discretionary itemized deductions until after the year end, could prove to be beneficial to this taxpayer, since itemized deductions are very close in value to the standard deduction. However, caution should be exercised. If the taxpayer is subject to AMT or close to being subject to AMT, the expected benefits from property tax payments may be reduced.
- ☐ The taxpayer should consider hiring his or her own child under eighteen to work in the family business. The wages paid could be deducted on Schedule C, but social security, medicare, and unemployment taxes do not have to be paid on the child's wages. The child must actually perform work, and get paid on a regular basis. If the child has no other income, paying the child up to the standard deduction amount would be tax free.
- ☐ Schedule C for DARWIN WIDJAJA (1) : The address of the taxpayer's business is the same as the home address, but no expenses for business use of a home were deducted. If the home is used regularly and exclusively for the business, the taxpayer may qualify for the business use of home deduction.
- ☐ The costs associated with maintaining a home office can be deducted only if strict IRS guidelines are met. Ensure that the home office is used exclusively for business, that the taxpayer uses the office to conduct administrative or management activities of a trade or business, and that there is no other fixed location of the trade or business where the taxpayer conducts substantial administrative or management activities for the business. Refer to IRS Publication 587 for additional rules related to the home office deduction.
- ☐ For home sales operations, ensure that storage space is included in the calculation of business square footage. Additional storage space can be underutilized spaces such as attics and basements. The storage space must be used on a regular basis and be an identifiable separate space suitable for storage.

Compliance Tips

- ☐ Recordkeeping: For any contribution made in cash, regardless of the amount, you must mantain as a record of the contribution a bank record (such as a canceled check or credit card statement) or a written record from the charity. The written record must include the name of the charity, date, and amount of the contribution.
- ☐ Recordkeeping: Charitable contributions of $250 or more require a contemporaneous written acknowledgement from the charitable organization. A cancelled check is not sufficient evidence for a cash donation of $250 or more. The receipt should show the date of the donation, the dollar amount of the money gift or description of the property donated, and the estimated value of goods or services received in return for the donation. In figuring whether a gift is $250 or more, separate and regular donations of less than $250 to the same organization do not need to be combined.
- ☐ Schedule C for DARWIN WIDJAJA (1) : Ensure that all required information returns such as Form 1099, 1098, 5498, and W-2G have been filed. Penalties for not filing required information returns can be fairly high.
- ☐ Schedule C for DARWIN WIDJAJA (1) : Travel and meals expenses may draw close attention from the IRS under examination. Ensure that adequate records exist to support business related travel and meals expense.
- ☐ Passthrough Entity CRM AI TECHNOLOGIES LLC : Material participation must be determined on an annual basis. Ensure that adequate proof of participation exists. Proof of participation includes any reasonable method, such as showing the services performed and the approximate number of hours spent by using an appointment book, calendar, or narrative summary.
- ☐ Passthrough Entity STABLE COMMUNICATIONS LLC : Material participation must be determined on an annual basis. Ensure that adequate proof of participation exists. Proof of participation includes any reasonable method, such as showing the services performed and the approximate number of hours spent by using an appointment book, calendar, or narrative summary.
- ☐ Passthrough Entity RISER TECHNOLOGIES INC : Material participation must be determined on an annual basis. Ensure that adequate proof of participation exists. Proof of participation includes any reasonable method, such as showing the services performed and the approximate number of hours spent by using an appointment book, calendar, or narrative summary.

Schedule A Comparison Flags

- ☐ Schedule A medical and dental expenses before the AGI limitation are 8% lower than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A medical and dental expenses after the AGI limitation are 9% lower than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.

Schedule A Comparison Flags (continued)

- ☐ Schedule A state and local taxes are 52% lower than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A real estate taxes are 254% higher than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A total taxes paid are 118% higher than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A home mortgage interest reported on Form 1098 is 28% higher than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A total interest paid deduction is 27% higher than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A cash or check contributions are 278% higher than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A total allowable contributions are 230% higher than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.
- ☐ Schedule A total itemized deductions are 106% higher than the typical amount deducted by taxpayers claiming the deduction, with similar AGI.

Disclaimer

- ☐ Please consult with your tax professional before acting on any of these recommendations. This information is based on your current situation and any changes to next year's return may affect the items outlined in this analysis.

2024 Schedule A Analysis

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

3/24/26 AGI Range Used for This Analysis **$15,000 - $19,999**	This Return		Typical Return*		11:56AM This Return's Deviation From Typical
	Amounts	% of AGI	Amounts	% of AGI	
AGI					
Adjusted gross income	17,273.	N/A	17,273.	N/A	
MEDICAL AND DENTAL EXPENSES					
Medical and dental expenses before limitation	15,114.	87.5%	16,437.	95.16%	-8.05% **
Medical and dental expenses after limitation	13,819.	80.0%	15,140.	87.65%	-8.73% **
TAXES PAID DEDUCTION					
State and local taxes	756.	4.38%	1,587.	9.19%	-52.36% **
Real estate taxes	20,525.	118.83%	5,795.	33.55%	+254.18% **
Personal property taxes			978.	5.66%	
Other taxes			1,342.	7.77%	
Total taxes paid deduction	10,000.	57.89%	4,589.	26.57%	+117.91% **
INTEREST PAID DEDUCTION					
Home mortgage interest on Form 1098	17,207.	99.62%	13,445.	77.84%	+27.98% **
Home mortgage interest not on Form 1098			20,990.	121.52%	
Deductible points			114.	0.66%	
Reserved for future use					
Investment interest deduction			7,001.	40.53%	
Total interest paid deduction	17,207.	99.62%	13,590.	78.68%	+26.62% **
CHARITABLE CONTRIBUTIONS					
Cash or check contributions	10,364.	60.0%	2,743.	15.88%	+277.83% **
Other than cash contributions			1,244.	7.2%	
Carryover from prior years			3,591.	20.79%	
Allowable charitable contributions	10,364.	60.0%	3,145.	18.21%	+229.54% **
CASUALTY AND THEFT LOSSES					
Casualty or theft loss deduction					
OTHER MISCELLANEOUS DEDUCTIONS					
Gambling loss deduction			19,968.	115.6%	
Other deductions			29,564.	171.16%	
Total other miscellaneous deductions			21,096.	122.13%	
TOTAL ITEMIZED DEDUCTIONS					
Total itemized deductions after limitation	51,390.	297.52%	24,892.	144.11%	+106.45% **

* Typical amounts are estimates derived from IRS Table 2.1 - Individual Income Tax Returns with Itemized Deductions (Tax Year 2022), posted on the IRS website. The typical column is reflective of taxpayers who claimed the deduction only. Typical amounts are expressed as a percentage of AGI, using the average AGI and average deduction claimed for taxpayers within the given range. As an example, the table may indicate that the average AGI for taxpayers within the $75,000 to $99,999 AGI range is $87,288 and that the average deduction for cash contributions (for those claiming it) within the same AGI range is $5,386. The Schedule A Analysis assumes that the typical cash contribution for a taxpayer within this range is 6.17% ($5,386 divided by $87,288) of the taxpayer's actual AGI.

** Above or below the user specified range.

2024 Schedule C Analysis

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

3/24/26 DARWIN WIDJAJA (1) PBA Code: 999000 Unclassified Establishments (unable to classify)	Actual Amounts For This Business		National Average Expense Ratios Applied to This Business*		11:56AM This Business' Deviation from Averages
	Amounts	% of Sales	Amounts	% of Sales	
INCOME					
Gross receipts less returns and allowances		N/A		N/A	
Cost of goods sold:					
Beginning inventory				0.12%	
Purchases				63.85%	
Cost of labor				0.3%	
Materials and supplies				0.8%	
Other costs				0.31%	
Ending inventory				0.24%	
Cost of goods sold					
Gross profit					
Other income				0.43%	
Total income	0.		0.		
EXPENSES					
Advertising				0.28%	
Car and truck expenses				5.61%	
Commissions				0.82%	
Contract labor				1.52%	
Depletion					
Depreciation				0.48%	
Employee benefit programs				0.02%	
Insurance				0.42%	
Mortgage interest				0.12%	
Other interest				0.06%	
Legal and professional services				0.23%	
Office expense				0.49%	
Pension and profit-sharing plans				0.01%	
Rent or lease of machinery and equipment				0.64%	
Rent on other business property				0.61%	
Repairs and maintenance				0.6%	
Supplies				1.86%	
Taxes and licenses				0.15%	
Travel	8,480.			0.75%	
Meals	1,843.			0.55%	
Utilities				1.14%	
Wages				0.63%	
Other expenses	1,840.			5.82%	
Expenses for business use of home				0.58%	
Total expenses	12,163.		0.		
NET PROFIT	-12,163.		0.		

* National average expense ratios are derived from IRS Table 2 - Nonfarm Sole Proprietorships: Income Statements, by Industrial Sectors, Tax Year 2022. The ratios are expressed as a percentage of gross receipts for businesses of this type, or similar type.

The taxpayer's 2024 Federal tax return is NOT FINISHED until you complete the following instructions.

Prior to transmission of the return

Form 1040
The taxpayer(s) should review their 2024 Federal Individual Income Tax Return along with any accompanying schedules and statements.

Paperless e-file
The taxpayer(s) should read, sign and date the Form 8879.

Overpayment
The taxpayer(s) will receive a refund of $2,301.

The Internal Revenue Service will deposit the refund of $2,301 directly into the following account:

Name of Bank: WELLS FARGO BANK TEXAS NA
Routing Transit Number: 111900659
Account Number: 662502897
Account Type: Checking

The taxpayer(s) should double check the bank information.

After transmission of the return

Receive acknowledgement of your e-file transmission status.
Within several hours, connect with Lacerte and get your first acknowledgement (ACK) that Lacerte has received your transmission file.

Connect with Lacerte again after 24 and then 48 hours to receive your Federal acknowledgements.

Keep a signed copy of Form 8879 in your files for 3 years.

Do Not Mail:
Form 8879

Wage Schedule

Taxpayer - Employer	Wages	Federal W/H	FICA	Medi-care	State W/H	Local W/H
RISER TECHNOLOGIES INC.	30,000.		1,860.	435.		
Grand Total	30,000.	0.	1,860.	435.	0.	0.

Form 1040, 1040-SR, or 1040-NR, Line 3a
Qualified Dividends

CHARLES SCHWAB #5734	7,968.
CHARLES SCHWAB #6067	6,935.
CHARLES SCHWAB #9116	6,850.
WELLS FARGO # 1082	748.
WELLS FARGO #7067	2,330.
Total	24,831.

Schedule D, Line 13
Capital Gain Distributions

CHARLES SCHWAB #5734	44.
CHARLES SCHWAB #9116	25.
WELLS FARGO #7067	54,084.
Total	54,153.

Qualified Business Income

Trade or business name:	DARWIN WIDJAJA
Taxpayer identification number:	605-08-1714
Business income	-12,163.
Qualified Business Income	-12,163.
Trade or business name:	RISER TECHNOLOGIES INC
Taxpayer identification number:	87-1891201
Business income	-53,652.
Qualified Business Income	-53,652.

Prior Year Disallowed QBI Losses Allowed in Current Year

Trade or Business Name: RISER TECHNOLOGIES INC
Taxpayer Identification Number: 87-1891201

Prior Year Unallowed Basis Losses		
Ordinary Loss	14,259.	
Total Prior Year Basis Carryover		14,259.

Prior Year Disallowed QBI Losses Allowed in Current Year (continued)

Losses Allowed in Current Year		
Ordinary Loss	14,259.	
Total Prior Year Basis Carryover Allowed In Current Year		14,259.
Pre-2018 Losses Allowed		
Pre-2018 Losses Total		0.
Pre-2018 Losses Allowed		0.
2018 Losses Allowed		
2018 Total Losses		0.
2018 Losses Allowed		0.
Percent Allowed		
2018 QBI Losses		0.
2018 QBI Losses Allowed		0.
2019 Losses Allowed		
2019 Total Losses		0.
2019 Losses Allowed		0.
Percent Allowed		
2019 QBI Losses		0.
2019 QBI Losses Allowed		0.
2020 Losses Allowed		
2020 Total Losses		0.
2020 Losses Allowed		0.
Percent Allowed		
2020 QBI Losses		0.
2020 QBI Losses Allowed		0.
2021 Losses Allowed		
2021 Total Losses		0.
2021 Losses Allowed		0.
Percent Allowed		
2021 QBI Losses		0.
2021 QBI Losses Allowed		0.
2022 Losses Allowed		
2022 Total Losses		14,259.
2022 Losses Allowed		14,259.
Percent Allowed		1.000000
2022 QBI Losses		14,259.
2022 QBI Losses Allowed		14,259.
2023 Losses Allowed		
2023 Total Losses		0.
2023 Losses Allowed		0.
Percent Allowed		
2023 QBI Losses		0.
2023 QBI Losses Allowed		0.

Credit Limit Worksheet A (Schedule 8812)

1. Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18.			0.
2. Add the amounts from:			
Schedule 3, line 1	0.		
Schedule 3, line 2	0.		
Schedule 3, line 3	0.		
Schedule 3, line 4	0.		
Schedule 3, line 5b	0.		
Schedule 3, line 6d	0.		
Schedule 3, line 6f	0.		
Schedule 3, line 6l	0.		
Schedule 3, line 6m	0.		
Enter the total.		0.	
3. Subtract line 2 from line 1.			0.

Complete Credit Limit Worksheet B only if you meet all of the following:

1. You are claiming one or more of the following credits.
   a. Mortgage interest credit, Form 8396.
   b. Adoption credit, Form 8839.
   c. Residential clean energy credit, Form 5695, Part I.
   d. District of Columbia first-time homebuyer credit, Form 8859.
2. You are not filing Form 2555.
3. Line 4 of Schedule 8812 is more than zero.

4. If you are not completing Credit Limit Worksheet B, enter 0; otherwise, enter the amount from Credit Limit Worksheet B	0.
5. Subtract line 4 from line 3. Enter here and on Schedule 8812, line 13.	0.

Earned Income Worksheet (Schedule 8812)
Form 8812, Line 18a

1. a. Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 1z.			30,000.
b. Enter the amount of any nontaxable combat pay received. Also enter this amount on Schedule 8812, line 18b. This amount will be reported either on line 1i of Form 1040 or 1040-SR, or should be shown in Form(s) W-2, box 12, with code Q.			0.
2. a. Enter any statutory employee income reported on Sch. C, line 1			0.
b. Enter any net profit or (loss) from Sch. C, line 31; Sch. K-1 (Form 1065) box 14, code A (other than farming).			-12,163.
c. Enter any net farm profit or (loss) from Sch. F, line 34, and from farm partnerships, Sch K-1 (Form 1065), box 14, code A.		0.	
d. If you used the farm optional method to figure net earnings from self-employment, enter the amount from Sch. SE, line 15. Otherwise, skip this line and enter on line 2e the amount from line 2c.			
e. If line 2c is a profit, enter the smaller of line 2c or line 2d. If line 2c is a (loss), enter the (loss) from line 2c.			0.
3. Add lines 1a, 1b, 2a, 2b, and 2e. If zero or less, stop. Do not complete the rest of this worksheet. Instead, enter 0 on line 3 of Credit Limit Worksheet B or Sch. 8812, line 18a, whichever applies.			17,837.

Earned Income Worksheet (Schedule 8812) (continued)
Form 8812, Line 18a

4. Adjustment to earned income (e.g. Medicaid waiver payments. Enter zero if included in earned income.)	0.	
5. Enter the amount from Schedule 1, line 15.	0.	
6. Add lines 4 and 5.		0.
7. Subtract line 6 from line 3.		17,837.
- If you were sent here from Schedule 8812, enter this amount on line 18a of Schedule 8812.		

Investment Income (Earned Income Credit)

Interest and Dividends

1. Enter the amount from Form 1040 or 1040-SR, line 2b.	27,672.
2. Enter the amount from Form 1040 or 1040-SR, line 2a, plus any amount on Form 8814, line 1b.	7,550.
3. Enter the amount from Form 1040 or 1040-SR, line 3b.	46,675.

Capital Gain Net Income:

4. Enter the amount from Form 1040 or 1040-SR, line 7. If the amount on that line is a loss, enter zero.	0.
5. Add amounts on lines 1, 2, 3, and 4. Enter the total. This is your Investment Income. (If more than $11,600 you cannot take the Earned Income Credit.)	81,897.

State and Local Taxes (Schedule A, Line 5a)

State and Local Sales Taxes Using the Optional Sales Tax Tables

Available Income:

Adjusted gross income per Form 1040 or 1040-SR	17,273.
Tax-exempt interest	7,550.
Nontaxable combat pay	0.
Nontaxable social security benefits	0.
Nontaxable pensions	0.
Nontaxable IRAs	0.
Prior year refundable credits (refundable portion only)	0.
Additional nontaxable amounts	0.
Total Available Income (not less than zero)	24,823.

Number of Exemptions 5.

State and Local Taxes (Schedule A, Line 5a) (continued)

1. State general sales taxes per Tables	756.
2. Local general sales taxes per Tables for certain residents of AL, AK, AZ, AR, CO, GA, IL, KS, LA, MO, MS, NC, NY, SC, TN, UT, and VA (based on a rate of 1%)	0.
3. Local general sales tax rate	
4. If line 2 is zero, enter your state general sales tax rate. Otherwise, skip line 4 and 5, and go to line 6	6.2500
5. Divide line 3 by line 4	
6. Local general sales taxes. If line 2 is zero, multiply line 1 by line 5. Otherwise, multiply line 2 by line 3.	0.
7. State and local general sales taxes (add lines 1 and 6)	756.
8. Sales taxes paid on vehicles, boats, etc.	0.
9. Sales tax deduction when using Tables (add lines 7 and 8)	756.

State and Local Sales Tax Deduction
(Greater of Taxes Paid or Table Amount)

1. General sales taxes paid	0.
2. Use taxes paid	0.
3. Total actual taxes paid (add lines 1 and 2)	0.
4. Sales taxes using Tables	756.
5. Greater of sales taxes paid or Table amount	756.

Capital Loss Carryover Worksheet
(IRS Publication 550)

1. Enter the amount from Form 1040, 1040-SR, or 1040NR, line 15		-34,117.
2. Enter the loss from Schedule D, line 21		3,000.
3. Combine lines 1 and 2 (but not less than zero)		0.
4. Enter the smaller of line 2 or line 3		0.
- Note: If line 7 of Schedule D is a loss, go to line 5; otherwise, enter zero on line 5 and go to line 9.		
5. Enter the loss from Schedule D, line 7		752,129.
6. Enter gain from Schedule D, line 15	0.	
7. Add lines 4 and 6		0.
8. Short-term capital loss carryover to 2025. Subtract line 7 from line 5		752,129.
- Note: If line 15 of Schedule D is a loss, go to line 9; otherwise, skip lines 9 through 13		
9. Enter the loss from Schedule D, line 15		42,851.
10. Enter gain from Schedule D, line 7	0.	
11. Subtract line 5 from line 4	0.	
12. Add lines 10 and 11		0.
13. Long-term capital loss carryover to 2025. Subtract line 12 from line 9		42,851.

Net Nonfarm Profit or (Loss) (Schedule SE, Line 2)

	Taxpayer
Schedule C	-12,163.
Schedule E, page 2 (from Sch. K-1)	0.
Other Income (Schedule 1, line 8)	0.
Section 1256 contracts	0.
Minister wages	0.
Minister housing allowance	0.
Minister parsonage - utilities	0.
Employee business expenses	0.
Net nonfarm income adjustment	0.
Total Net Nonfarm Profit or (Loss)	-12,163.

Form 1116, Page 1, Line 3d
Gross Foreign Source Income

OTHER COUNTRY (VARIOUS)	
Dividend income	$ 347.
Gross qualifying dividends	6,850.
Gross capital gain distributions	25.
Total	$ 7,222.

Form 1116, Page 1, Line 3e
Gross Income from All Sources

Wages, salaries, tips, etc.	30,000.
Taxable interest	27,672.
Ordinary dividends	46,675.
Capital gain and other gains	127,761.
Total	$ 232,108.

Foreign Tax Credit Carryover Utilization Worksheet
(Form 1116 - Taxpayers claiming a carryover of foreign tax credit)

Passive Income

Step 1 - Calculate your creditable taxes for the current year

1. Enter the total foreign taxes paid/accrued (Form 1116, ln. 9)	412.
2. less: Reduction in foreign taxes (Form 1116, ln. 12)	0.
3. Subtract ln. 2 from ln. 1. These are your 2024 taxes available for credit.	412.

Step 2 - Figure your deduction for the current year and carryover(s) to the next year

4. Enter the allowable deduction (Form 1116, ln. 24)	0.

2024	Remainder	Deduct this year	Carryover to next year
5. Enter the smaller of ln. 3 or ln. 4		0.	
6. Subtract ln. 5 from ln. 3			412.
7. Subtract ln. 5 from ln. 4	0.		

Foreign Tax Credit Carryover Utilization Worksheet (continued)
(Form 1116 - Taxpayers claiming a carryover of foreign tax credit)

** Amount may be subject to carryback

2014			
8. Enter the carryover from 2014	0.		
9. Enter the smaller of ln. 7 or ln. 8		0.	
10. Subtract ln. 9 from ln. 8			EXPIRED
11. Subtract ln. 9 from ln. 7	0.		
2015			
12. Enter the carryover from 2015	0.		
13. Enter the smaller of ln. 11 or ln. 12		0.	
14. Subtract ln. 13 from ln. 12			0.
15. Subtract ln. 13 from ln. 11	0.		
2016			
16. Enter the carryover from 2016	0.		
17. Enter the smaller of ln. 15 or ln. 16		0.	
18. Subtract ln. 17 from ln. 16			0.
19. Subtract ln. 17 from ln. 15	0.		
2017			
20. Enter the carryover from 2017	0.		
21. Enter the smaller of ln. 19 or ln. 20		0.	
22. Subtract ln. 21 from ln. 20			0.
23. Subtract ln. 21 from ln. 19	0.		
2018			
24. Enter the carryover from 2018	0.		
25. Enter the smaller of ln. 23 or ln. 24		0.	
26. Subtract ln. 25 from ln. 24			0.
27. Subtract ln. 25 from ln. 23	0.		
2019			
28. Enter the carryover from 2019	0.		
29. Enter the smaller of ln. 27 or ln. 28		0.	
30. Subtract ln. 29 from ln. 28			0.
31. Subtract ln. 29 from ln. 27	0.		
2020			
32. Enter the carryover from 2020	0.		
33. Enter the smaller of ln. 31 or ln. 32		0.	
34. Subtract ln. 33 from ln. 32			0.
35. Subtract ln. 33 from ln. 31	0.		
2021			
36. Enter the carryover from 2021	0.		
37. Enter the smaller of ln. 35 or ln. 36		0.	
38. Subtract ln. 37 from ln. 36			0.
39. Subtract ln. 37 from ln. 35	0.		
2022			
40. Enter the carryover from 2022	0.		
41. Enter the smaller of ln. 39 or ln. 40		0.	
42. Subtract ln. 41 from ln. 40			0.
43. Subtract ln. 41 from ln. 39	0.		
2023			
44. Enter the carryover from 2023	1.		
45. Enter the smaller of ln. 43 or ln. 44		0.	
46. Subtract ln. 45 from ln. 44			1.

Foreign Tax Credit Carryover Utilization Worksheet
(Form 1116 - Taxpayers claiming a carryover of foreign tax credit)

Passive Income - AMT

Step 1 - Calculate your creditable taxes for the current year

1. Enter the total foreign taxes paid/accrued (Form 1116, ln. 9)	412.
2. less: Reduction in foreign taxes (Form 1116, ln. 12)	0.
3. Subtract ln. 2 from ln. 1. These are your 2024 taxes available for credit.	412.

Step 2 - Figure your deduction for the current year and carryover(s) to the next year

4. Enter the allowable deduction (Form 1116, ln. 24)	0.

2024	Remainder	Deduct this year	Carryover to next year
5. Enter the smaller of ln. 3 or ln. 4		0.	
6. Subtract ln. 5 from ln. 3			412.
7. Subtract ln. 5 from ln. 4	0.		
** Amount may be subject to carryback			
2014			
8. Enter the carryover from 2014	0.		
9. Enter the smaller of ln. 7 or ln. 8		0.	
10. Subtract ln. 9 from ln. 8			EXPIRED
11. Subtract ln. 9 from ln. 7	0.		
2015			
12. Enter the carryover from 2015	0.		
13. Enter the smaller of ln. 11 or ln. 12		0.	
14. Subtract ln. 13 from ln. 12			0.
15. Subtract ln. 13 from ln. 11	0.		
2016			
16. Enter the carryover from 2016	0.		
17. Enter the smaller of ln. 15 or ln. 16		0.	
18. Subtract ln. 17 from ln. 16			0.
19. Subtract ln. 17 from ln. 15	0.		
2017			
20. Enter the carryover from 2017	0.		
21. Enter the smaller of ln. 19 or ln. 20		0.	
22. Subtract ln. 21 from ln. 20			0.
23. Subtract ln. 21 from ln. 19	0.		
2018			
24. Enter the carryover from 2018	0.		
25. Enter the smaller of ln. 23 or ln. 24		0.	
26. Subtract ln. 25 from ln. 24			0.
27. Subtract ln. 25 from ln. 23	0.		
2019			
28. Enter the carryover from 2019	0.		
29. Enter the smaller of ln. 27 or ln. 28		0.	
30. Subtract ln. 29 from ln. 28			0.
31. Subtract ln. 29 from ln. 27	0.		
2020			
32. Enter the carryover from 2020	0.		
33. Enter the smaller of ln. 31 or ln. 32		0.	
34. Subtract ln. 33 from ln. 32			0.
35. Subtract ln. 33 from ln. 31	0.		
2021			

Foreign Tax Credit Carryover Utilization Worksheet (continued)
(Form 1116 - Taxpayers claiming a carryover of foreign tax credit)

36. Enter the carryover from 2021	0.		
37. Enter the smaller of ln. 35 or ln. 36		0.	
38. Subtract ln. 37 from ln. 36			0.
39. Subtract ln. 37 from ln. 35	0.		
2022			
40. Enter the carryover from 2022	115.		
41. Enter the smaller of ln. 39 or ln. 40		0.	
42. Subtract ln. 41 from ln. 40			115.
43. Subtract ln. 41 from ln. 39	0.		
2023			
44. Enter the carryover from 2023	234.		
45. Enter the smaller of ln. 43 or ln. 44		0.	
46. Subtract ln. 45 from ln. 44			234.

Foreign Tax Credit Carryover Summary
(Form 1116 - Foreign Tax Credit Carryovers to 2025)

Passive Income

	Foreign Taxes Paid	Foreign Taxes Disallowed	Foreign Taxes Claimed	Foreign Tax Credit Carryover
Carryover from 2024 **	412.	0.	0.	412.
Carryover from 2023	377.	0.	376.	1.
Carryover from 2022	0.	0.	0.	0.
Carryover from 2021	0.	0.	0.	0.
Carryover from 2020	0.	0.	0.	0.
Carryover from 2019	0.	0.	0.	0.
Carryover from 2018	0.	0.	0.	0.
Carryover from 2017	0.	0.	0.	0.
Carryover from 2016	0.	0.	0.	0.
Carryover from 2015	0.	0.	0.	0.

**Amount may be subject to carryback

Passive Income - AMT

	Foreign Taxes Paid	Foreign Taxes Disallowed	Foreign Taxes Claimed	Foreign Tax Credit Carryover
Carryover from 2024 **	412.	0.	0.	412.
Carryover from 2023	377.	0.	143.	234.
Carryover from 2022	115.	0.	0.	115.
Carryover from 2021	0.	0.	0.	0.
Carryover from 2020	0.	0.	0.	0.
Carryover from 2019	0.	0.	0.	0.
Carryover from 2018	0.	0.	0.	0.
Carryover from 2017	0.	0.	0.	0.
Carryover from 2016	0.	0.	0.	0.
Carryover from 2015	0.	0.	0.	0.

**Amount may be subject to carryback

2024 Worksheet For Limit on Charitable Contributions

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

3/24/26 11:56AM

Step 1. Enter any qualified conservation contributions (QCCs) made during the year.

1.	If you are a qualified farmer or rancher, enter any QCCs subject to the limit based on 100% of AGI	**1**	
2.	Enter any QCCs not entered on line 1	**2**	

Step 2. Enter your other charitable contributions made during the year.

3.	Reserved for future use		
4.	Enter your contributions of capital gain property "for the use of" any qualified organization	**4**	
5.	Enter your other contributions "for the use of" any qualified organization. Don't include any contributions you entered on a previous line	**5**	
6.	Enter your contributions of capital gain property to qualified organizations that aren't 50% limit organizations. Don't include any contributions you entered on a previous line	**6**	
7.	Enter your other contributions to qualified organizations that aren't 50% limit organizations. Don't include any contributions you entered on a previous line	**7**	
8.	Enter your contributions of capital gain property to 50% limit organizations deducted at FMV. Don't include any contributions you entered on a previous line	**8**	
9.	Enter your noncash contributions to 50% limit organizations other than capital gain property you deducted at FMV. Be sure to include contributions of capital gain property to 50% limit organizations if you reduced the property's FMV. Don't include any contributions you entered on a previous line	**9**	500.
10.	Enter your cash contributions to 50% limit organizations. Don't include any contributions you entered on a previous line	**10**	37,713.

Step 3. Figure your deduction for the year (if any result is zero or less, enter -0-)

11.	Enter your AGI	**11**	17,273.

Cash contributions subject to the limit based on 60% of AGI
(If line 10 is zero, enter -0- on lines 12 through 14.)

12.	Multiply line 11 by 0.6	**12**	10,364.	
13.	**Deductible amount.** Enter the smaller of line 10 or line 12	**13**	10,364.	
14.	Carryover. Subtract line 13 from line 10	**14**		27,349.

Noncash contributions subject to the limit based on 50% of AGI
(If line 9 is zero, enter -0- on lines 15 through 18.)

15.	Multiply line 11 by 0.5	**15**	8,637.	
16.	Subtract line 13 from line 15	**16**		
17.	**Deductible amount.** Enter the smaller of line 9 or line 16	**17**		
18.	Carryover. Subtract line 17 from line 9	**18**		500.

Contributions (other than capital gain property) subject to limit based on 30% of AGI
(If lines 5 and 7 are both zero, enter -0- on lines 19 through 25.)

19.	Multiply line 11 by 0.5	**19**		
20.	Add lines 8, 9, and 10	**20**		
21.	Subtract line 20 from line 19	**21**		
22.	Multiply line 11 by 0.3	**22**		
23.	Add lines 5 and 7	**23**		
24.	**Deductible amount.** Enter the smallest of line 21, 22, or 23	**24**		
25.	Carryover. Subtract line 24 from line 23	**25**		

Contributions of capital gain property subject to limit based on 30% of AGI
(If line 8 is zero, enter -0- on lines 26 through 31.)

26.	Multiply line 11 by 0.5	**26**		
27.	Add lines 9 and 10	**27**		
28.	Subtract line 27 from line 26	**28**		
29.	Multiply line 11 by 0.3	**29**		
30.	**Deductible amount.** Enter the smallest of line 8, 28, or 29	**30**		
31.	Carryover. Subtract line 30 from line 8	**31**		

2024 Worksheet For Limit on Charitable Contributions (cont.)

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

3/24/26 11:56AM

Contributions subject to the limit based on 20% of AGI
(If lines 4 and 6 are both zero, enter -0- on lines 32 through 41.)

32.	Multiply line 11 by 0.5	**32**		
33.	Add lines 13, 17, 24, and 30	**33**		
34.	Subtract line 33 from line 32	**34**		
35.	Multiply line 11 by 0.3	**35**		
36.	Subtract line 24 from line 35	**36**		
37.	Subtract line 30 from line 35	**37**		
38.	Multiply line 11 by 0.2	**38**		
39.	Add lines 4 and 6	**39**		
40.	**Deductible amount.** Enter the smallest of line 34, 36, 37, 38, or 39	**40**		
41.	Carryover. Subtract line 40 from line 39	**41**		

QCCs subject to limit based on 50% of AGI
(If line 2 is zero, enter -0- on lines 42 through 46.)

42.	Multiply line 11 by 0.5	**42**		
43.	Add lines 13, 17, 24, 30, and 40	**43**		
44.	Subtract line 43 from line 42	**44**		
45.	**Deductible amount.** Enter the smaller of line 2 or line 44	**45**		
46.	Carryover. Subtract line 45 from line 2	**46**		

QCCs subject to limit based on 100% of AGI
(If line 1 is zero, enter -0- on lines 47 through 51.)

47.	Enter the amount from line 11	**47**		
48.	Add lines 13, 17, 24, 30, 40, and 45	**48**		
49.	Subtract line 48 from line 47	**49**		
50.	**Deductible amount.** Enter the smaller of line 1 or line 49	**50**		
51.	Carryover. Subtract line 50 from line 1	**51**		

Deduction for the year

52.	Add lines 13, 17, 24, 30, 40, 45, and 50. Enter the total here and include the deductible amounts on Schedule A (Form 1040), line 11 or line 12, whichever is appropriate	**52**	10,364.	

Note. Any amounts in the carryover column are not deductible this year but can be carried over to next year. See *Carryovers,* later, for more information about how you will use them next year.

2024 Contribution Summary

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

Order of Utilization		Amount Available	Amount Used	Carryover Before Conversion to NOL	Amount Converted to NOL	Carryover to Next Year
2024 Contributions	60% limitation	37,713.	10,364.	27,349.		27,349.
	50% limitation	500.		500.		500.
	30% limitation					
	30% capital gain					
	20% capital gain					
60% Carryovers	2019					Expired
	2020					
	2021					
	2022					
	2023					
50% Carryovers	2019					Expired
	2020					
	2021					
	2022					
	2023					
30% Carryovers	2019					Expired
	2020					
	2021					
	2022					
	2023					
30% Capital Gain Carryovers	2019					Expired
	2020					
	2021					
	2022					
	2023					
20% Capital Gain Carryovers	2019					Expired
	2020					
	2021					
	2022					
	2023					
Conservation contributions (50%)						
Conservation contributions (100%)						
2024 qualified contributions (100%)						
Totals		38,213.	10,364.	27,849.		27,849.

Activity Name: RISER TECHNOLOGIES INC

Beginning stock basis plus increases minus distributions	179,195.
Stock basis at end of year	101,553.
Beginning debt basis plus restoration minus nontaxable repayment	0.
Debt basis at end of year	0.

	Current Year Loss or Deduction	Prior Year Unallowed Basis Loss	Regular Tax Amount Allowed by Basis	Regular Tax Basis Carryover
Losses/Deductions/Expenses				
Ordinary Loss	53,652.	14,259.	67,911.	0.
Nondeductible Expenses	9,731.		9,731.	0.
Totals	63,383.	14,259.	77,642.	0.

Alternative Minimum Tax	
AMT beginning basis	240,295.
AMT income	
Current year adjustments to AMT basis	-61,100.
AMT basis used for limitation	179,195.
Loss allowed by AMT basis	77,642.
AMT final basis	101,553.

	AMT Amount Allowed by Basis	AMT Basis Carryover
AMT Losses/Deductions/Expenses		
AMT Ordinary Loss	67,911.	0.
AMT Nondeductible Expenses	9,731.	0.
Totals	77,642.	0.

Activity Name: RISER TECHNOLOGIES INC

	(A) Current Year Amount	(B) Prior Year unallowed Basis loss	(C) Disallowed due to Basis Limitation	(D) Prior Year unallowed At-risk loss	(E) Disallowed due to at-risk Limitation	(F) Prior Year unallowed Passive loss	(G) Disallowed due to Passive loss Limitations	(H) Tax return
Ordinary income (loss)	-53,652.	-14,259.						
Net Income (Loss)	-53,652.	-14,259.	0.	0.	0.			-67,911.
Total Schedule E page 2	-53,652.	-14,259.	0.	0.	0.	0.	0.	-67,911.
Nondeductible expenses	9,731.							9,731.

Form 172, Lines 6 and 7
Computation of Nonbusiness Income and Deductions

Computation of Nonbusiness Income	
Interest	27,672.
Dividends	46,675.
Total	$ 74,347.

Computation of Nonbusiness Deductions	
Nonbusiness itemized deductions	51,390.
Total	$ 51,390.

NOL Worksheet 1
Computation of 2024 AMT Net Operating Loss

1.	AMTI before ATNOLD (Form 6251, lines 1 through 3)		-23,399.
2.	Nonbusiness Capital Losses	923,769.	
3.	Nonbusiness Capital Gains	128,789.	
4.	Excess of line 2 over line 3	794,980.	
5.	Excess of line 3 over line 2	0.	
6.	Nonbusiness Deductions	41,390.	
7.	Nonbusiness Income	75,065.	
8.	Add lines 5 and 7	75,065.	
9.	Excess of line 6 over line 8		0.
10.	Excess of line 8 over line 6 (no more than ln 5)	0.	
11.	Business Capital Losses	0.	
12.	Business Capital Gains	0.	
13.	Add lines 10 and 12	0.	
14.	Excess of line 11 over line 13	0.	
15.	Add lines 4 and 14	794,980.	
16.	Loss from Schedule D, line 16	794,980.	
17.	Section 1202 Exclusion		0.
18.	Subtract line 17 from line 16	794,980.	
19.	Loss from Schedule D, line 18	3,000.	
20.	Subtract line 19 from line 18	791,980.	
21.	Subtract line 18 from line 19		0.
22.	Subtract line 20 from line 15		3,000.
23.	2024 AMT Net Operating Gain (Loss) (Combine lines 1, 9, 17, 21, and 22)		-20,399.

NOL Worksheet 3
NOL Carryover to 2025

Form 172, line 24, or Worksheet 1, line 24, if less than zero	31,117.
Excess business loss from Form 461	0.
NOL carryover to next year	31,117.

NOL Worksheet 3
AMT NOL Carryover to 2025

Worksheet 1, line 23, if less than zero	20,399.
Excess business loss from Form 461	0.
AMT NOL carryover to next year	20,399.

2024 Deduction for Business Use of Your Home

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

3/24/26 11:56AM
Name of Activity

Schedule K-1 (Partnerships) - STABLE COMMUNICATIONS LLC

PART 1 - Part of Your Home Used for Business:

1)	Area of home used for business	1)	144
2)	Total area of home	2)	3,729
3)	Percentage of home used for business (divide line 1 by line 2 and show result as percentage)	3)	3.86%

PART 2 - Figure Your Allowable Deduction

4)	Gross income from business (see instructions)				4)	
			(a) Direct Expenses	(b) Indirect Expenses		
5)	Casualty losses	5)				
6)	Deductible mortgage interest	6)				
7)	Real estate taxes	7)				
8)	Total of lines 5 through 7	8)				
9)	Multiply line 8, column (b), by line 3			9)		
10)	Add line 8, column (a), and line 9			10)		
11)	Business expenses not from business use of home (see instructions)			11)		
12)	Add lines 10 and 11				12)	
13)	Deduction limit. Subtract line 12 from line 4				13)	0.
14)	Excess mortgage interest	14)				
15)	Excess real estate taxes	15)				
16)	Insurance	16)				
17)	Rent	17)				
18)	Repairs and maintenance	18)				
19)	Utilities	19)				
20)	Other expenses	20)				
21)	Add lines 14 through 20	21)				
22)	Multiply line 21, column (b), by line 3			22)		
23)	Carryover of operating expenses from prior year (see instructions)			23)		
24)	Add line 21, column (a), line 22, and line 23				24)	
25)	Allowable operating expenses. Enter the **smaller** of line 13 or line 24				25)	
26)	Limit on excess casualty losses and depreciation. Subtract line 25 from line 13				26)	
27)	Excess casualty losses (see instructions)			27)		
28)	Depreciation of your home from line 40 below			28)		
29)	Carryover of excess casualty losses and depreciation from prior year (see instructions)			29)		
30)	Add lines 27 through 29				30)	
31)	Allowable excess casualty losses and depreciation. Enter the **smaller** of line 26 or line 30				31)	
32)	Add lines 10, 25, and 31				32)	
33)	Casualty losses included on lines 10 and 31 (see instructions)				33)	
34)	Allowable expenses for business use of your home. (Subtract line 33 from line 32.) See instructions for where to enter on your return				34)	0.

PART 3 - Depreciation of Your Home

35)	Smaller of adjusted basis or fair market value of home (see instructions)	35)	
36)	Basis of land	36)	
37)	Basis of building (subtract line 36 from line 35)	37)	
38)	Business basis of building (multiply line 37 by line 3)	38)	
39)	Depreciation percentage (from applicable table or method)	39)	%
40)	Depreciation allowable (multiply line 38 by line 39)	40)	

PART 4 - Carryover of Unallowed Expenses to Next Year

41)	Operating expenses. Subtract line 25 from line 24. If less than zero, enter -0-	41)	0.
42)	Excess casualty losses and depreciation. Subtract line 31 from line 30. If less than zero, enter -0-	42)	0.

Unreimbursed Expenses - Schedule E Pg. 2 (K-1)
CRM AI TECHNOLOGIES LLC

MEETING EXPENSES	$	4,000.
Total	$	4,000.

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

CRM AI TECHNOLOGIES LLC
93-3846873

Partnership Nonpassive	K-1 Input	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Unallowed Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E (page 2)						
Ordinary income (loss)						
Rental real estate income (loss)						
Other rental income (loss)						
Section 59(e)(2) expenses						
Passive interest expense						
Guaranteed payments (nonpassive)						
Section 179 expense and carryover						
Disallowed section 179 expense						
Net income (loss)						
First passive other						
Second passive other						
Cost depletion						
Percentage depletion						
Depletion carryover						
Disallowed due to 65% limitation						
Unreimbursed expenses (nonpassive)	-4,000.					-4,000.
Nonpassive other						
Total Schedule E (page 2)						-4,000.
FORM 4797						
Section 1231 gain (loss)						
4797 ordinary income						
SCHEDULE D						
Short-term capital gain (loss)						
Long-term capital gain (loss)						
FORM 4952						
Investment interest expense						
Other net investment income						
SCHEDULE A						
Charitable contributions						
Deductions related to portfolio income						
SCHEDULE B						
Interest income (banks, S&L, C/U, etc.)						
Interest income (U.S. bonds, T-bills, etc.)						
Ordinary dividends						
Tax-exempt interest (total muni-bonds)						
Tax-exempt interest (in-state bonds)						
FORM 6251						
Depreciation adjustment after 12/31/86						
Adjusted gain or loss						
Depreciation (pre-1987)						
Beneficiary's AMT adjustment						
Depletion						
Excess intangible drilling costs						
MISCELLANEOUS						
Net earnings from self employment (SE)						
Gross farming income (Sch. E, page 2)						
Royalties (Sch. E, page 1)						
Taxes on undistributed capital gains (1040)						
Credit for income tax withheld						
Estimated taxes credited from trust						
Credits						

*Carries to AMT at-risk/passive worksheets to compute Form 6251.

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

STABLE COMMUNICATIONS LLC
93-3974842
Partnership
Nonpassive

	K-1 Input	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Unallowed Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E (page 2)						
Ordinary income (loss)						
Rental real estate income (loss)						
Other rental income (loss)						
Section 59(e)(2) expenses						
Passive interest expense						
Guaranteed payments (nonpassive)						
Section 179 expense and carryover						
Disallowed section 179 expense						
Net income (loss)						
First passive other						
Second passive other						
Cost depletion						
Percentage depletion						
Depletion carryover						
Disallowed due to 65% limitation						
Unreimbursed expenses (nonpassive)						
Nonpassive other						
Total Schedule E (page 2)						
FORM 4797						
Section 1231 gain (loss)						
4797 ordinary income						
SCHEDULE D						
Short-term capital gain (loss)						
Long-term capital gain (loss)						
FORM 4952						
Investment interest expense						
Other net investment income						
SCHEDULE A						
Charitable contributions						
Deductions related to portfolio income						
SCHEDULE B						
Interest income (banks, S&L, C/U, etc.)						
Interest income (U.S. bonds, T-bills, etc.)						
Ordinary dividends						
Tax-exempt interest (total muni-bonds)						
Tax-exempt interest (in-state bonds)						
FORM 6251						
Depreciation adjustment after 12/31/86						
Adjusted gain or loss						
Depreciation (pre-1987)						
Beneficiary's AMT adjustment						
Depletion						
Excess intangible drilling costs						
MISCELLANEOUS						
Net earnings from self employment (SE)						
Gross farming income (Sch. E, page 2)						
Royalties (Sch. E, page 1)						
Taxes on undistributed capital gains (1040)						
Credit for income tax withheld						
Estimated taxes credited from trust						
Credits						

*Carries to AMT at-risk/passive worksheets to compute Form 6251.

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

RISER TECHNOLOGIES INC
87-1891201
S Corporation
Nonpassive

	K-1 Input	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Unallowed Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E (page 2)			Prior basis carryover included in K-1 input column 14,259			
Ordinary income (loss)	-67,911.					
Rental real estate income (loss)						
Other rental income (loss)						
Section 59(e)(2) expenses						
Passive interest expense						
Guaranteed payments (nonpassive)						
Section 179 expense and carryover						
Disallowed section 179 expense						
Net income (loss)	-67,911.					-67,911.
First passive other						
Second passive other						
Cost depletion						
Percentage depletion						
Depletion carryover						
Disallowed due to 65% limitation						
Unreimbursed expenses (nonpassive)						
Nonpassive other						
Total Schedule E (page 2)						-67,911.
FORM 4797						
Section 1231 gain (loss)						
4797 ordinary income						
SCHEDULE D						
Short-term capital gain (loss)						
Long-term capital gain (loss)						
FORM 4952						
Investment interest expense						
Other net investment income						
SCHEDULE A						
Charitable contributions						
Deductions related to portfolio income						
SCHEDULE B						
Interest income (banks, S&L, C/U, etc.)						
Interest income (U.S. bonds, T-bills, etc.)						
Ordinary dividends						
Tax-exempt interest (total muni-bonds)						
Tax-exempt interest (in-state bonds)						
FORM 6251						
Depreciation adjustment after 12/31/86						
Adjusted gain or loss						
Depreciation (pre-1987)						
Beneficiary's AMT adjustment						
Depletion						
Excess intangible drilling costs						
MISCELLANEOUS						
Net earnings from self employment (SE)						
Gross farming income (Sch. E, page 2)						
Royalties (Sch. E, page 1)						
Taxes on undistributed capital gains (1040)						
Credit for income tax withheld						
Estimated taxes credited from trust						
Credits						

*Carries to AMT at-risk/passive worksheets to compute Form 6251.

Client IO-282 **DARWIN WIDJAJA AND HENNY RAMALI** **605-08-1714**

	K-1 Input	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Unallowed Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E (page 2)						
Ordinary income (loss)						
Rental real estate income (loss)						
Other rental income (loss)						
Section 59(e)(2) expenses						
Passive interest expense						
Guaranteed payments (nonpassive)						
Section 179 expense and carryover						
Disallowed section 179 expense						
Net income (loss)						
First passive other						
Second passive other						
Cost depletion						
Percentage depletion						
Depletion carryover						
Disallowed due to 65% limitation						
Unreimbursed expenses (nonpassive)						
Nonpassive other						
Total Schedule E (page 2)						-71,911.
FORM 4797						
Section 1231 gain (loss)						
4797 ordinary income						
SCHEDULE D						
Short-term capital gain (loss)						
Long-term capital gain (loss)						
FORM 4952						
Investment interest expense						
Other net investment income						
SCHEDULE A						
Charitable contributions						
Deductions related to portfolio income						
SCHEDULE B						
Interest income (banks, S&L, C/U, etc.)						
Interest income (U.S. bonds, T-bills, etc.)						
Ordinary dividends						
Tax-exempt interest (total muni-bonds)						
Tax-exempt interest (in-state bonds)						
FORM 6251						
Depreciation adjustment after 12/31/86						
Adjusted gain or loss						
Depreciation (pre-1987)						
Beneficiary's AMT adjustment						
Depletion						
Excess intangible drilling costs						
MISCELLANEOUS						
Net earnings from self employment (SE)						
Gross farming income (Sch. E, page 2)						
Royalties (Sch. E, page 1)						
Taxes on undistributed capital gains (1040)						
Credit for income tax withheld						
Estimated taxes credited from trust						
Credits						

*Carries to AMT at-risk/passive worksheets to compute Form 6251.

Form **8879**

(Rev. January 2021)

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization

► **ERO must obtain and retain completed Form 8879.**

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

OMB No. 1545-0074

Submission Identification Number (SID) ▶ 303033202516100sum51

Taxpayer's name	Social security number
DARWIN WIDJAJA	605-08-1714
Spouse's name	**Spouse's social security number**
HENNY RAMALI	626-63-5256

Part I Tax Return Information – Tax Year Ending December 31, 2024 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	17,273.
2	Total tax	2	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	
4	Amount you want refunded to you	4	2,301.
5	Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize Daniel E Greene CPA (**ERO firm name**) to enter or generate my PIN 95728 (**Enter five digits, but don't enter all zeros**) as my signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► _____ Date ► _____

Spouse's PIN: check one box only

☒ I authorize Daniel E Greene CPA (**ERO firm name**) to enter or generate my PIN 07063 (**Enter five digits, but don't enter all zeros**) as my signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► Date ►

Practitioner PIN Method Returns Only – continue below

Part III Certification and Authentication – Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 30303307118 (**Don't enter all zeros**)

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345,** Handbook for Authorized IRS *e-file* Providers of Individual Income Tax Returns.

ERO's signature ► DANIEL E. GREENE CPA Date ►

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Form **172**
(December 2024)
Department of the Treasury
Internal Revenue Service

Net Operating Losses (NOLs)

For Individuals, Estates, and Trusts.
Go to *www.irs.gov/Form172* for instructions and the latest information.

OMB No. 1545-0074

For calendar year 2024 , or other tax year beginning _____ and ending _____

Name(s) shown on return			Social security or employer identification number
DARWIN WIDJAJA AND HENNY RAMALI			605-08-1714
Address (number and street). If you have a P.O. box, see instructions.		Apt. or suite no.	Spouse's social security number (SSN)
1602 CRYSTAL MEADOW PL			626-63-5256
City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code	Daytime phone number
KATY	TX	77494	
Foreign country name	Foreign province/county		Foreign postal code

Part I NOL (see instructions)

1	For individuals, subtract your standard deduction or itemized deductions from your adjusted gross income (AGI) and enter it here. For estates and trusts, enter taxable income increased by the total of the charitable deduction, income distribution deduction, and exemption amount				1	-34,117.
2	Nonbusiness capital losses before limitation. Enter as a positive number			2		923,769.
3	Nonbusiness capital gains (without regard to any section 1202 exclusion)			3		128,789.
4	If line 2 is more than line 3, enter the difference. Otherwise, enter -0-			4		794,980.
5	If line 3 is more than line 2, enter the difference. Otherwise, enter -0-	5	0.			
6	Nonbusiness deductions (see instructions). Enter as a positive number			6		51,390.
7	Nonbusiness income other than capital gains (see instructions)	7	74,347.			
8	Add lines 5 and 7			8		74,347.
9	If line 6 is more than line 8, enter the difference. Otherwise, enter -0-				9	0.
10	If line 8 is more than line 6, enter the difference. Otherwise, enter -0-. **But don't enter more than line 5**	10	0.			
11	Business capital losses before limitation. Enter as a positive number			11		
12	Business capital gains (without regard to any section 1202 exclusion)	12				
13	Add lines 10 and 12			13		
14	Subtract line 13 from line 11. If zero or less, enter -0-			14		0.
15	Add lines 4 and 14			15		794,980.
16	Enter, if any, the combined net short-term and long-term capital loss from your Schedule D (Form 1040). Estates and trusts, enter, if any, the total net short-term and long-term loss from Schedule D (Form 1041). Enter as a positive number. If you don't have a loss on that line (and don't have a section 1202 exclusion), skip lines 16 through 21 and enter on line 22 the amount from line 15			16		794,980.
17	Section 1202 exclusion. Enter as a positive number				17	
18	Subtract line 17 from line 16. If zero or less, enter -0-			18		794,980.
19	If line 16 is a loss, enter, as a positive number, the smaller of: • The loss on line 16; or • $3,000 (If filing Form 1040, $1,500 when married filing separately)			19		3,000.
20	If line 18 is more than line 19, enter the difference. Otherwise, enter -0-			20		791,980.
21	If line 19 is more than line 18, enter the difference. Otherwise, enter -0-				21	
22	Subtract line 20 from line 15. If zero or less, enter -0-				22	3,000.
23	NOL deduction for losses from other years. Enter as a positive number				23	
24	**NOL. Combine lines 1, 9, 17, and 21 through 23. If the result is less than zero, enter it here. If the result is zero or more, you don't have an NOL**				24	-31,117.

Part II **NOL Carryover** (see instructions)

Complete one column before going to the next column. Start with the earliest carryback year.	2nd preceding tax year ended:		1st preceding tax year ended:	
1 **NOL deduction.** Enter as a positive number.				
2 Taxable income before the current year NOL carryback. For estates and trusts, increase this amount by the sum of the charitable deduction (see instructions)				
3 Net capital loss deduction (see instructions)				
4 Section 1202 exclusion. Enter as a positive number (see instructions)				
5 Qualified business income deduction (see instructions)				
6 Adjustment to adjusted gross income (AGI) (see instructions)				
7 Adjustment to itemized deductions from line 33 below (see instructions)				
8 **Estates and trusts**, enter exemption amount				
9 **Modified taxable income.** Add lines 2 through 8. If zero or less, enter -0-		0.		0.
10 **NOL carryover to the subsequent year.** Subtract line 9 from line 1. Enter the result from the first preceding tax year here and on the net operating loss line of Schedule 1 (Form 1040) or Form 1040-NR or the net operating loss deduction line of Form 1041. If zero or less, enter -0- (see instructions)		0.		0.
Adjustment to Itemized Deductions (Individuals Only). Complete lines 11 through 33 for the carryback year(s) for which you itemized deductions **only** if line 3, 4, or 5 above is more than zero.				
11 AGI before the current year NOL carryback				
12 Add lines 3 through 6 above				
13 **Modified AGI.** Add lines 11 and 12				
14 Medical and dental expenses after AGI limitation from Sch. A (Form 1040), or as previously adjusted				
15 Medical and dental expenses before AGI limitation from Sch. A (Form 1040), or as previously adjusted				
16 Multiply line 13 by 7.5% (0.075)				
17 Subtract line 16 from line 15. If zero or less, enter -0-	0.		0.	
18 Subtract line 17 from line 14				
19 Mortgage insurance premiums from Sch. A (Form 1040), for tax years before 2022, or as previously adjusted				
20 Refigured mortgage insurance premiums (see instructions)				
21 Subtract line 20 from line 19				

Part II **NOL Carryover** (see instructions) *(continued)*

Complete one column before going to the next column. Start with the earliest carryback year.	2nd preceding tax year ended:		1st preceding tax year ended:	
22 Modified AGI from line 13				
23 Enter as a positive number any NOL carryback from a prior year that was deducted to figure line 11				
24 Add lines 22 and 23				
25 Total charitable contributions for Sch. A (Form 1040 or Form 1040-NR), or as previously adjusted (see instructions)				
26 Refigured charitable contributions (see instructions)				
27 Subtract line 26 from line 25				
28 Casualty and theft losses deduction from Form 4684				
29 Casualty and theft losses before AGI limitation from Form 4684				
30 Multiply line 22 by 10% (0.10)				
31 Subtract line 30 from line 29. If zero or less, enter -0-	0.		0.	
32 Subtract line 31 from line 28				
33 Combine lines 18, 21, 27, and 32; enter the result here and on line 7				

Form **1040** Department of the Treasury — Internal Revenue Service **U.S. Individual Income Tax Return** **2024** OMB No. 1545-0074 IRS Use Only — Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning _____, _____, ending _____, _____ See separate instructions.

Your first name and middle initial	Last name	Your social security number
DARWIN WIDJAJA		605-08-1714
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
HENNY RAMALI		626-63-5256

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
1602 CRYSTAL MEADOW PL

City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code
KATY, TX 77494

Foreign country name | Foreign province/state/county | Foreign postal code

Presidential Election Campaign
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. ☐ You ☐ Spouse

Filing Status Check only one box.
☐ Single ☐ Head of household (HOH)
☒ Married filing jointly (even if only one had income)
☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____
☐ If treating a nonresident alien or dual-status alien spouse as a U.S. resident for the entire tax year, check the box and enter their name (see instructions and attach statement if required): _____

Digital Assets At any time during 2024, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

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, 1960 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1960 ☐ Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here. ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
RIO WIDJAJA	617-69-0782	Son	☒	☐
CARLY WIDJAJA	754-68-1470	Daughter	☒	☐
OLIVER WIDJAJA	676-81-9234	Son	☒	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a Form W-2, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)				1a	30,000.
b	Household employee wages not reported on Form(s) W-2				1b	
c	Tip income not reported on line 1a (see instructions)				1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)				1d	
e	Taxable dependent care benefits from Form 2441, line 26				1e	
f	Employer-provided adoption benefits from Form 8839, line 29				1f	
g	Wages from Form 8919, line 6				1g	
h	Other earned income (see instructions)				1h	
i	Nontaxable combat pay election (see instructions)	1i				
z	Add lines 1a through 1h				1z	30,000.
2a	Tax-exempt interest	2a	7,550.	b Taxable interest	2b	27,672.
3a	Qualified dividends	3a	24,831.	b Ordinary dividends	3b	46,675.
4a	IRA distributions	4a		b Taxable amount	4b	
5a	Pensions and annuities	5a		b Taxable amount	5b	
6a	Social security benefits	6a		b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐					
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐				7	-3,000.
8	Additional income from Schedule 1, line 10				8	-84,074.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**				9	17,273.
10	Adjustments to income from Schedule 1, line 26				10	
11	Subtract line 10 from line 9. This is your **adjusted gross income**				11	17,273.
12	**Standard deduction or itemized deductions** (from Schedule A)				12	51,390.
13	Qualified business income deduction from Form 8995 or Form 8995-A				13	
14	Add lines 12 and 13				14	51,390.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**				15	0.

Attach Sch. B if required.

Standard Deduction for —
- Single or Married filing separately, $14,600
- Married filing jointly or Qualifying surviving spouse, $29,200
- Head of household, $21,900
- If you checked any box under *Standard Deduction*, see instructions.

Tax and Credits	16	**Tax** (see instructions). Check if any from Form(s): **1** ☐ 8814 **2** ☐ 4972 **3** ☐ _____	16	0.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	0.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	0.
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	0.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	
	24	Add lines 22 and 23. This is your **total tax**	24	0.
Payments	25	Federal income tax withheld from:		
		a Form(s) W-2 — 25a		
		b Form(s) 1099 — 25b		
		c Other forms (see instructions) — 25c		
		d Add lines 25a through 25c	25d	
If you have a qualifying child, attach Sch. EIC.	26	2024 estimated tax payments and amount applied from 2023 return	26	
	27	Earned income credit (EIC) — 27		
	28	Additional child tax credit from Schedule 8812 — 28		2,301.
	29	American opportunity credit from Form 8863, line 8 — 29		
	30	Reserved for future use — 30		
	31	Amount from Schedule 3, line 15 — 31		
	32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**	32	2,301.
	33	Add lines 25d, 26, and 32. These are your **total payments**	33	2,301.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**	34	2,301.
	35a	Amount of line 34 you want **refunded to you.** If Form 8888 is attached, check here ☐	35a	2,301.
Direct deposit? See instructions.		**b** Routing number 111900659 **c** Type: ☒ Checking ☐ Savings **d** Account number 662502897		
	36	Amount of line 34 you want **applied to your 2025 estimated tax** — 36		
Amount You Owe	37	Subtract line 33 from line 24. This is the **amount you owe.** For details on how to pay, go to *www.irs.gov/Payments* or see instructions	37	
	38	Estimated tax penalty (see instructions) — 38		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☒ **Yes.** Complete below. ☐ **No**

Designee's name: DANIEL E. GREENE CPA | Phone no.: 951-553-6852 | Personal identification number (PIN): 07118

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.

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		VP OF ENGINEERING	
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.)
		SR RISK UNDERWRITI	
Phone no.	Email address		

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
DANIEL E. GREENE CPA	DANIEL E. GREENE CPA		P00370548	☒ Self-employed

Firm's name: Daniel E Greene CPA — Phone no. 9515536852

Firm's address: 31915 Rancho CA Rd Ste 200-205 Temecula, CA 92591 — Firm's EIN 900959950

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

2024

Attachment Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR: DARWIN WIDJAJA AND HENNY RAMALI

Your social security number: 605-08-1714

For 2024, enter the amount reported to you on Form(s) 1099-K that was included in error or for personal items sold at a loss

Note: The remaining amounts reported to you on Form(s) 1099-K should be reported elsewhere on your return depending on the nature of the transaction. See *www.irs.gov/1099k*.

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	-12,163.
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			5	-71,911.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
a	Net operating loss	8a	( )		
b	Gambling	8b			
c	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d	( )		
e	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l			
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
o	Section 951A(a) inclusion (see instructions)	8o			
p	Section 461(l) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	( )		
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
v	Digital assets received as ordinary income not reported elsewhere. See instructions	8v			
z	Other income. List type and amount:	8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. This is your **additional income**. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8			10	-84,074.

Part II Adjustments to Income

11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
c	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
a	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b			
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h			
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1(Form 1041)	24k			
z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your **adjustments to income.** Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10			26	0.

SCHEDULE A (Form 1040)

Department of the Treasury
Internal Revenue Service

Itemized Deductions

Attach to Form 1040 or 1040-SR.
Go to *www.irs.gov/ScheduleA* for instructions and the latest information.
Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2024

Attachment Sequence No. **07**

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

DARWIN WIDJAJA AND HENNY RAMALI

Your social security number

605-08-1714

Medical and Dental Expenses		**Caution:** Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1	15,114.		
	2	Enter amount from Form 1040 or 1040-SR, line 11 (2: 17,273.)				
	3	Multiply line 2 by 7.5% (0.075)	3	1,295.		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	13,819.
Taxes You Paid	5	State and local taxes.				
	a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box [X]	5a	756.		
	b	State and local real estate taxes (see instructions)	5b	20,525.		
	c	State and local personal property taxes	5c			
	d	Add lines 5a through 5c	5d	21,281.		
	e	Enter the smaller of line 5d or $10,000 ($5,000 if married filing separately)	5e	10,000.		
	6	Other taxes. List type and amount:	6			
	7	Add lines 5e and 6			7	10,000.
Interest You Paid **Caution:** Your mortgage interest deduction may be limited. See instructions.	8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box [ ]				
	a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	17,207.		
	b	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b			
	c	Points not reported to you on Form 1098. See instructions for special rules	8c			
	d	Reserved for future use	8d			
	e	Add lines 8a through 8c	8e	17,207.		
	9	Investment interest. Attach Form 4952 if required. See instructions	9			
	10	Add lines 8e and 9			10	17,207.
Gifts to Charity **Caution:** If you made a gift and got a benefit for it, see instructions.	11	Gifts by cash or check. If you made any gift of $250 or more, see instructions	11	10,364.		
	12	Other than by cash or check. If you made any gift of $250 or more, see instructions. You **must** attach Form 8283 if over $500	12			
	13	Carryover from prior year	13			
	14	Add lines 11 through 13			14	10,364.
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions			15	0.
Other Itemized Deductions	16	Other—from list in instructions. List type and amount:			16	0.
Total Itemized Deductions	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12			17	51,390.
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box [ ]				

SCHEDULE B
(Form 1040)

Department of the Treasury
Internal Revenue Service

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.
Go to *www.irs.gov/ScheduleB* for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment Sequence No. **08**

Name(s) shown on return: DARWIN WIDJAJA AND HENNY RAMALI

Your social security number: 605-08-1714

Part I Interest

(See instructions and the Instructions for Form 1040, line 2b.)

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

	1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:		**Amount**
	CHARLES SCHWAB #5734		33.
	CHARLES SCHWAB #6067		68.
	CHARLES SCHWAB #9116		51.
	CHARLES SCHWAB 4029		91.
	IRS		1,713.
	ROBINHOOD SECURITIES LLC 6264		102.
	WELLS FARGO #7067	1	23,429.
	WELLS FARGO 5347		1,832.
	WELLS FARGO#0145		25.
	WELLS FARGO#1082		328.
2	Add the amounts on line 1	**2**	27,672.
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	**3**	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	**4**	27,672.

Note: If line 4 is over $1,500, you must complete Part III.

Part II Ordinary Dividends

(See instructions and the Instructions for Form 1040, line 3b.)

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

	5 List name of payer:		**Amount**
	CHARLES SCHWAB # 3942		789.
	CHARLES SCHWAB #5734		8,623.
	CHARLES SCHWAB #6067		16,017.
	CHARLES SCHWAB #9116		7,197.
	WELLS FARGO # 1082		748.
	WELLS FARGO #0145		31.
	WELLS FARGO #7067		13,270.
		5	
6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	**6**	46,675.

Note: If line 6 is over $1,500, you must complete Part III.

Part III Foreign Accounts and Trusts

You must complete this part if you **(a)** had over $1,500 of taxable interest or ordinary dividends; **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See instructions.

		Yes	**No**
7a	At any time during 2024, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions		X
	If 'Yes,' are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements		
b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located:		
8	During 2024, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If 'Yes,' you may have to file Form 3520. See instructions		X

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service

Profit or Loss From Business
(Sole Proprietorship)

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

OMB No. 1545-0074

2024

Attachment Sequence No. **09**

Name of proprietor	Social security number (SSN)
DARWIN WIDJAJA	605-08-1714

A Principal business or profession, including product or service (see instructions): tripntale.com- TRAVEL SOCIAL NETWORK

B Enter code from instructions: 999000

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)** [X] Cash **(2)** [ ] Accrual **(3)** [ ] Other (specify)

G Did you "materially participate" in the operation of this business during 2024? If "No," see instructions for limit on losses. [X] **Yes** [ ] **No**

H If you started or acquired this business during 2024, check here [ ]

I Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions. [ ] **Yes** [X] **No**

J If "Yes," did you or will you file required Form(s) 1099? [ ] **Yes** [ ] **No**

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked [ ]	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		18	Office expense (see instructions)	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	
16	Interest (see instr.):			24	Travel and meals:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	8,480.
b	Other	16b		b	Deductible meals (see instructions)	24b	1,843.
17	Legal and professional services	17		25	Utilities	25	
				26	Wages (less employment credits)	26	
				27a	Other expenses (from line 48)	27a	1,840.
				b	Energy efficient commercial buildings deduction (attach Form 7205)	27b	

28	**Total expenses** before expenses for business use of home. Add lines 8 through 27b	28	12,163.
29	Tentative profit or (loss). Subtract line 28 from line 7	29	-12,163.
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**), **line 3,** 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	-12,163.

32 If you have a loss, check the box that describes your investment in this activity. See instructions.

• If you checked 32a, enter the loss on both **Schedule 1** (**Form 1040**), **line 3**, and on **Schedule SE, line 2.** (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on **Form 1041, line 3.**
• If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

32a [X] All investment is at risk.

32b [ ] Some investment is not at risk.

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☐ 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	
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs	39	
40	Add lines 35 through 39	40	
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	

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 2024, enter the number of miles you used your vehicle for:

a Business _____ b Commuting (see instructions) _____ 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, line 27b, or line 30.

Telephone	1,840.

48	**Total other expenses.** Enter here and on line 27a	48	1,840.

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

Attach to Form 1040, 1040-SR, or 1040-NR.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
Go to *www.irs.gov/ScheduleD* for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment Sequence No. **12**

Name(s) shown on return: DARWIN WIDJAJA AND HENNY RAMALI

Your social security number: 605-08-1714

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ **Yes** ☒ **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 to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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	999,041.	1,459,150.		-460,109.
1b Totals for all transactions reported on Form(s) 8949 with **Box A** checked	444,757.	433,171.	1,598.	13,184.
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 gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824	**4**	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	**5**	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your **Capital Loss Carryover Worksheet** in the instructions	**6**	(305,204.)
7 **Net short-term capital gain or (loss).** Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back	**7**	-752,129.

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 to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a 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	285,454.	288,665.		-3,211.
8b Totals for all transactions reported on Form(s) 8949 with **Box D** checked				
9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked				
10 Totals for all transactions reported on Form(s) 8949 with **Box F** checked				

11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824	**11**	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	**12**	
13 Capital gain distributions. See the instrs	**13**	54,153.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your **Capital Loss Carryover Worksheet** in the instructions	**14**	(93,793.)
15 **Net long-term capital gain or (loss).** Combine lines 8a through 14 in column (h). Then, go to Part III on the back	**15**	-42,851.

Part III Summary

16 Combine lines 7 and 15 and enter the result . . . . . **16** -794,980.

- If line 16 is a **gain,** enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.
- If line 16 is a **loss,** skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.
- If line 16 is **zero,** skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.

17 Are lines 15 and 16 **both** gains?

☐ **Yes.** Go to line 18.

☐ **No.** Skip lines 18 through 21, and go to line 22.

18 If you are required to complete the **28% Rate Gain Worksheet** (see instructions), enter the amount, if any, from line 7 of that worksheet **18**

19 If you are required to complete the **Unrecaptured Section 1250 Gain Worksheet** (see instructions), enter the amount, if any, from line 18 of that worksheet **19**

20 Are lines 18 and 19 **both** zero or blank and you are not filing Form 4952?

☐ **Yes.** Complete the **Qualified Dividends and Capital Gain Tax Worksheet** in the instructions for Form 1040, line 16. **Don't** complete lines 21 and 22 below.

☐ **No.** Complete the **Schedule D Tax Worksheet** in the instructions. **Don't** complete lines 21 and 22 below.

21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the **smaller** of:

- The loss on line 16; or
- ($3,000), or if married filing separately, ($1,500)

. . . . . **21** (3,000.)

Note: When figuring which amount is smaller, treat both amounts as positive numbers.

22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?

☒ **Yes.** Complete the **Qualified Dividends and Capital Gain Tax Worksheet** in the instructions for Form 1040, line 16.

☐ **No.** Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Department of the Treasury
Internal Revenue Service

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

2024

Attachment Sequence No. **12A**

Name(s) shown on return

DARWIN WIDJAJA AND HENNY RAMALI

SSN or taxpayer identification number

605-08-1714

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.

- [X] **(A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- [ ] **(B)** Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- [ ] **(C)** Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example: 100 shares XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the **Note** below and see *Column (e)* in the separate instructions.	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. (f) Code(s) from instructions	(g) Amount of adjustment	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
WELLS FARGO #1082	ST BOX A Various	Various	83,348.	84,376.	W	1,153.	125.
CHARLES SCHWAB #5734 ST BOXA	Various	Various	361,409.	348,795.	W	445.	13,059.
2 **Totals.** Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, **line 1b** (if **Box A** above is checked), **line 2** (if **Box B** above is checked), or **line 3** (if **Box C** above is checked)			444,757.	433,171.		1,598.	13,184.

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.

Name(s) shown on return. Do not enter name and social security number if shown on Page 1. | **Your social security number**

DARWIN WIDJAJA AND HENNY RAMALI | 605-08-1714

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations

Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you **must** check the box in column **(e)** on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column **(f)** on line 28 and attach **Form 6198**. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section . . . . . [X] **Yes** [ ] **No**

28	**(a)** Name	**(b)** Enter **P** for partnership; **S** for S corporation	**(c)** Check if foreign partnership	**(d)** Employer identification number	**(e)** Check if basis computation is required	**(f)** Check if any amount is not at risk
A	See Statement 1					
B						
C						
D						

	Passive Income and Loss		**Nonpassive Income and Loss**		
	(g) Passive loss allowed (attach **Form 8582** if required)	**(h)** Passive income from **Schedule K-1**	**(i)** Nonpassive loss allowed (see **Schedule K-1**)	**(j)** Section 179 expense deduction from **Form 4562**	**(k)** Nonpassive income from **Schedule K-1**
A					
B					
C					
D					
29a Totals					
b Totals			71,911.		

30	Add columns (h) and (k) of line 29a	**30**	
31	Add columns (g), (i), and (j) of line 29b	**31**	(71,911.)
32	**Total partnership and S corporation income or (loss).** Combine lines 30 and 31	**32**	-71,911.

Part III Income or Loss From Estates and Trusts

33	**(a)** Name	**(b)** Employer ID no.
A		
B		

	Passive Income and Loss		**Nonpassive Income and Loss**	
	(c) Passive deduction or loss allowed (attach **Form 8582** if required)	**(d)** Passive income from **Schedule K-1**	**(e)** Deduction or loss from **Schedule K-1**	**(f)** Other income from **Schedule K-1**
A				
B				
34a Totals				
b Totals				

35	Add columns (d) and (f) of line 34a	**35**	
36	Add columns (c) and (e) of line 34b	**36**	( )
37	**Total estate and trust income or (loss).** Combine lines 35 and 36	**37**	

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) — Residual Holder

38	**(a)** Name	**(b)** Employer identification number	**(c)** Excess inclusion from **Schedules Q,** line 2c (see instructions)	**(d)** Taxable income (net loss) from **Schedules Q,** line 1b	**(e)** Income from **Schedules Q,** line 3b

39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below	**39**	

Part V Summary

40	Net farm rental income or (loss) from **Form 4835**. Also, complete line 42 below	**40**	
41	**Total income or (loss).** Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	**41**	-71,911.
42	**Reconciliation of farming and fishing income.** Enter your **gross** farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AN; and Schedule K-1 (Form 1041), box 14, code F. See instructions	**42**	
43	**Reconciliation for real estate professionals.** If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	**43**	

Form **1116**

Department of the Treasury
Internal Revenue Service

Foreign Tax Credit

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

OMB No. 1545-0121

2024

Attachment Sequence No. **19**

Name: DARWIN WIDJAJA AND HENNY RAMALI

ID no. as shown on page 1 of your tax return: 605-08-1714

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a [ ] Section 951A category income **c** [X] Passive category income **e** [ ] Section 901(j) income **g** [ ] Lump-sum distributions
b [ ] Foreign branch category income **d** [ ] General category income **f** [ ] Certain income re-sourced by treaty

h Resident of (name of country)

Note: If you paid taxes to only one foreign country or U.S. territory, use column A in Part I and line A in Part II. If you paid taxes to **more than one** foreign country or U.S. territory, use a separate column and line for each country or territory.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

	Foreign Country or U.S. Territory A	B	C		Total (Add columns A, B, and C.)
i Enter the name of the foreign country or U.S. territory	OTHER COUNTRY	OTHER COUNTRY (VARIOUS)			
1a Gross income from sources within country shown above and of the type checked above (see instructions): See Statement 2		7,222.		**1a**	7,222.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is $250,000 or more, and you used an alternative basis to determine its source. See instructions [ ]					
Deductions and losses (Caution: See instructions.):					
2 Expenses **definitely related** to the income on line 1a (attach statement)					
3 Pro rata share of other deductions **not definitely related:**					
a Certain itemized deductions or standard deduction (see instructions)	23,819.	23,819.			
b Other deductions (attach statement)					
c Add lines 3a and 3b	23,819.	23,819.			
d Gross foreign source income (see instructions)		7,222.			
e Gross income from all sources (see instructions)	232,108.	232,108.			
f Divide line 3d by line 3e (see instructions)		0.031115			
g Multiply line 3c by line 3f		741.			
4 Pro rata share of interest expense (see instructions):					
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)		535.			
b Other interest expense					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5		1,276.		**6**	1,276.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				**7**	5,946.

Part II Foreign Taxes Paid or Accrued (see instructions)

COUNTRY	Credit is claimed for taxes (you must check one) (j) [X] Paid (k) [ ] Accrued — (l) Date paid or accrued	Foreign taxes paid or accrued: In foreign currency — Taxes withheld at source on: (m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	In U.S. dollars — Taxes withheld at source on: (q) Dividends	(r) Rents and royalties	(s) Interest	(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add columns (q) through (t))
A	1099 taxes									
B	1099 taxes					412.				412.
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 — **8** 412.

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	412.	
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) See Stmt 3 ☐	10	1.	
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)			
11	Add lines 9 and 10	11	413.	
12	Reduction in foreign taxes (see instructions)	12	( )	
13	Taxes reclassified under high tax kickout (see instructions)	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		413.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15	5,946.	
16	Adjustments to line 15 (see instructions)	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	5,946.	
18	**Individuals:** Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. **Estates and trusts:** Enter your taxable income without the deduction for your exemption	18		
	Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		1.000000000
20	**Individuals:** Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. **Estates and trusts:** See instructions	20		
	Caution: If you are completing line 20 for separate category **g** (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.			
21	Multiply line 20 by line 19 (maximum amount of credit)	21		
22	Increase in limitation (section 960(c)) (see instructions)	22		
23	Add lines 21 and 22	23		
24	Enter the **smaller** of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV. See instructions	24		

Part IV Summary of Credits From Separate Parts III (see instructions)

25	Credit for taxes on section 951A category income	25		
26	Credit for taxes on foreign branch category income	26		
27	Credit for taxes on passive category income	27		
28	Credit for taxes on general category income	28		
29	Credit for taxes on section 901(j) income	29		
30	Credit for taxes on certain income re-sourced by treaty	30		
31	Credit for taxes on lump-sum distributions	31		
32	Add lines 25 through 31	32		
33	Enter the **smaller** of line 20 or line 32	33		
34	Reduction of credit for international boycott operations. See instructions for line 12	34		
35	Subtract line 34 from line 33. This is your **foreign tax credit.** Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35		

Form **1116**

Department of the Treasury
Internal Revenue Service

Alternative Minimum Tax

Foreign Tax Credit

(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Go to *www.irs.gov/Form1116* for instructions and the latest information.

OMB No. 1545-0121

2024

Attachment Sequence No. **19**

Name: DARWIN WIDJAJA AND HENNY RAMALI

ID no. as shown on page 1 of your tax return: 605-08-1714

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a ☐ Section 951A category income **c** ☒ Passive category income **e** ☐ Section 901(j) income **g** ☐ Lump-sum distributions

b ☐ Foreign branch category income **d** ☐ General category income **f** ☐ Certain income re-sourced by treaty

h Resident of (name of country)

Note: If you paid taxes to only one foreign country or U.S. territory, use column A in Part I and line A in Part II. If you paid taxes to **more than one** foreign country or U.S. territory, use a separate column and line for each country or territory.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

	Foreign Country or U.S. Territory A	B	C		Total (Add columns A, B, and C.)
i Enter the name of the foreign country or U.S. territory	OTHER COUNTRY	OTHER COUNTRY (VARIOUS)			
1a Gross income from sources within country shown above and of the type checked above (see instructions): See Statement 4		7,222.		**1a**	7,222.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is $250,000 or more, and you used an alternative basis to determine its source. See instructions ☐					
Deductions and losses (Caution: See instructions.):					
2 Expenses **definitely related** to the income on line 1a (attach statement)					
3 Pro rata share of other deductions **not definitely related:**					
a Certain itemized deductions or standard deduction (see instructions)	13,819.	13,819.			
b Other deductions (attach statement)					
c Add lines 3a and 3b	13,819.	13,819.			
d Gross foreign source income (see instructions)		7,222.			
e Gross income from all sources (see instructions)	232,108.	232,108.			
f Divide line 3d by line 3e (see instructions)		0.031115			
g Multiply line 3c by line 3f		430.			
4 Pro rata share of interest expense (see instructions):					
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)		535.			
b Other interest expense					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5		965.		**6**	965.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				**7**	6,257.

Part II Foreign Taxes Paid or Accrued (see instructions)

COUNTRY	Credit is claimed for taxes (you must check one) (j) ☒ Paid (k) ☐ Accrued — (l) Date paid or accrued	Foreign taxes paid or accrued: In foreign currency — Taxes withheld at source on: (m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	In U.S. dollars — Taxes withheld at source on: (q) Dividends	(r) Rents and royalties	(s) Interest	(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add columns (q) through (t))
A	1099 taxes									
B	1099 taxes					412.				412.
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 — **8** 412.

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	412.	
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) See Stmt 5 ☐	10	349.	
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)			
11	Add lines 9 and 10	11	761.	
12	Reduction in foreign taxes (see instructions)	12	( )	
13	Taxes reclassified under high tax kickout (see instructions)	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		761.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15	6,257.	
16	Adjustments to line 15 (see instructions)	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	6,257.	
18	**Individuals:** Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. **Estates and trusts:** Enter your taxable income without the deduction for your exemption	18	-23,399.	
	Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		1.000000000
20	**Individuals:** Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. **Estates and trusts:** See instructions	20		
	Caution: If you are completing line 20 for separate category **g** (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.			
21	Multiply line 20 by line 19 (maximum amount of credit)	21		
22	Increase in limitation (section 960(c)) (see instructions)	22		
23	Add lines 21 and 22	23		
24	Enter the **smaller** of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV. See instructions	24		

Part IV Summary of Credits From Separate Parts III (see instructions)

25	Credit for taxes on section 951A category income	25		
26	Credit for taxes on foreign branch category income	26		
27	Credit for taxes on passive category income	27		
28	Credit for taxes on general category income	28		
29	Credit for taxes on section 901(j) income	29		
30	Credit for taxes on certain income re-sourced by treaty	30		
31	Credit for taxes on lump-sum distributions	31		
32	Add lines 25 through 31	32		
33	Enter the **smaller** of line 20 or line 32	33		
34	Reduction of credit for international boycott operations. See instructions for line 12	34		
35	Subtract line 34 from line 33. This is your **foreign tax credit.** Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35		

SCHEDULE B
(Form 1116)

(Rev. December 2022)

Department of the Treasury
Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule

For calendar year 2024, or other tax year beginning _____, and ending _____.

See separate instructions.
Attach to Form 1116.
Go to *www.irs.gov/Form1116* for instructions and the latest information.

OMB No. 1545-0121

Name

DARWIN WIDJAJA AND HENNY RAMALI

Identifying number as shown on page 1 of your tax return

605-08-1714

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule.
Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

a ☐ Reserved for future use
b ☐ Foreign branch category income
c ☒ Passive category income
d ☐ General category income
e ☐ Section 901(j) income
f ☐ Certain income re-sourced by treaty
g ☐ Lump-sum distributions

h If box e is checked, enter the country code for the sanctioned country. See instructions _____

i If box f is checked, enter the country code for the treaty country. See instructions _____

Foreign Tax Carryover Reconciliation	(i) 10th Preceding Tax Year	(ii) 9th Preceding Tax Year	(iii) 8th Preceding Tax Year	(iv) 7th Preceding Tax Year	(v) 6th Preceding Tax Year	(vi) 5th Preceding Tax Year	(vii) Subtotal (add columns (i) through (vi))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))							
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instr.)							
b Adjustments for section 905(c) redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2)							
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.	**-0-**						

Foreign Tax Carryover Reconciliation (*continued*)	(viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (viii) through (xiii))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))					1.		1.
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instr.)							
b Adjustments for section 905(c) redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10.					1.		1.
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year						412.	412.
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.					1.	412.	413.

SCHEDULE B
(Form 1116)

(Rev. December 2022)

Department of the Treasury
Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule

For calendar year 2024, or other tax year beginning _____, and ending _____.

See separate instructions.
Attach to Form 1116.
Go to *www.irs.gov/Form1116* for instructions and the latest information.

OMB No. 1545-0121

Name

Alternative Minimum Tax

Identifying number as shown on page 1 of your tax return

DARWIN WIDJAJA AND HENNY RAMALI

605-08-1714

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule.
Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

a ☐ Reserved for future use
b ☐ Foreign branch category income
c ☒ Passive category income
d ☐ General category income
e ☐ Section 901(j) income
f ☐ Certain income re-sourced by treaty
g ☐ Lump-sum distributions

h If box e is checked, enter the country code for the sanctioned country. See instructions . . . . . _____

i If box f is checked, enter the country code for the treaty country. See instructions . . . . . _____

Foreign Tax Carryover Reconciliation	(i) 10th Preceding Tax Year	(ii) 9th Preceding Tax Year	(iii) 8th Preceding Tax Year	(iv) 7th Preceding Tax Year	(v) 6th Preceding Tax Year	(vi) 5th Preceding Tax Year	(vii) Subtotal (add columns (i) through (vi))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))							
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instr.)							
b Adjustments for section 905(c) redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2)							
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.	**-0-**						

Foreign Tax Carryover Reconciliation (*continued*)	(viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (viii) through (xiii))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))				115.	234.		349.
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instr.)							
b Adjustments for section 905(c) redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10.				115.	234.		349.
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year						412.	412.
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.				115.	234.	412.	761.

SCHEDULE 8812
(Form 1040)

Department of the Treasury
Internal Revenue Service

Credits for Qualifying Children and Other Dependents

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to *www.irs.gov/Schedule8812* for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment Sequence No. **47**

Name(s) shown on return: DARWIN WIDJAJA AND HENNY RAMALI

Your social security number: 605-08-1714

Part I Child Tax Credit and Credit for Other Dependents

1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR			**1**	17,273.
2a	Enter income from Puerto Rico that you excluded	**2a**			
b	Enter the amounts from lines 45 and 50 of your Form 2555	**2b**			
c	Enter the amount from line 15 of your Form 4563	**2c**			
d	Add lines 2a through 2c			**2d**	
3	Add lines 1 and 2d			**3**	17,273.
4	Number of qualifying children under age 17 with the required social security number	**4**	3		
5	Multiply line 4 by $2,000			**5**	6,000.
6	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number	**6**			
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4.				
7	Multiply line 6 by $500			**7**	
8	Add lines 5 and 7			**8**	6,000.
9	Enter the amount shown below for your filing status. • Married filing jointly—$400,000 • All other filing statuses—$200,000			**9**	400,000.
10	Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of $1,000, enter the next multiple of $1,000. For example, if the result is $425, enter $1,000; if the result is $1,025, enter $2,000, etc.			**10**	0.
11	Multiply line 10 by 5% (0.05)			**11**	
12	Is the amount on line 8 more than the amount on line 11?			**12**	6,000.
	☐ **No. STOP.** You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.				
	☒ **Yes.** Subtract line 11 from line 8. Enter the result.				
13	Enter the amount from **Credit Limit Worksheet A**			**13**	0.
14	Enter the smaller of line 12 or line 13. **This is your child tax credit and credit for other dependents** **Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.**			**14**	0.

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

Part II-A Additional Child Tax Credit for All Filers

Caution: If you file Form 2555, you cannot claim the additional child tax credit.

15 Check this box if you **do not** want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27 ☐

16a Subtract line 14 from line 12. If zero, **stop here;** you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27 — **16a** 6,000.

b Number of qualifying children under age 17 with the required social security number: 3 X $1,700. Enter the result. If zero, **stop here;** you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27 — **16b** 5,100.

TIP: The number of children you use for this line is the same as the number of children you used for line 4.

17 Enter the **smaller** of line 16a or line 16b — **17** 5,100.

18a Earned income (see instructions) — **18a** 17,837.

b Nontaxable combat pay (see instructions) — **18b**

19 Is the amount on line 18a more than $2,500?

☐ **No.** Leave line 19 blank and enter -0- on line 20.

☒ **Yes.** Subtract $2,500 from the amount on line 18a. Enter the result — **19** 15,337.

20 Multiply the amount on line 19 by 15% (0.15) and enter the result — **20** 2,301.

Next. On line 16b, is the amount $5,100 or more?

☐ **No.** If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the **smaller** of line 17 or line 20 on line 27.

☒ **Yes.** If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.

Part II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Residents of Puerto Rico

21 Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or if you are a bona fide resident of Puerto Rico, see instructions — **21** 2,295.

22 Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 — **22** 0.

23 Add lines 21 and 22 — **23** 2,295.

24 **1040 and 1040-SR filers:** Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11.
1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11. — **24** 0.

25 Subtract line 24 from line 23. If zero or less, enter -0- — **25** 2,295.

26 Enter the **larger** of line 20 or line 25 — **26** 2,301.

Next, enter the **smaller** of line 17 or line 26 on line 27.

Part II-C Additional Child Tax Credit

27 **This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28** — **27** 2,301.

Schedule 8812 (Form 1040) 2024

Form **8995**

Department of the Treasury
Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.
Go to *www.irs.gov/Form8995* for instructions and the latest information.

OMB No. 1545-2294

2024

Attachment Sequence No. **55**

Name(s) shown on return: DARWIN WIDJAJA AND HENNY RAMALI

Your taxpayer identification number: 605-08-1714

Note: *You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.*
Use this form if your taxable income, before your qualified business income deduction, is at or below $191,950 ($383,900 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	**(a)** Trade, business, or aggregation name	**(b)** Taxpayer identification number	**(c)** Qualified business income or (loss)
i	DARWIN WIDJAJA	605-08-1714	-12,163.
ii	RISER TECHNOLOGIES INC	87-1891201	-53,652.
iii			
iv			
v			

2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2	-65,815.		
3	Qualified business net (loss) carryforward from the prior year	3	(105,927.)		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	0.		
5	Qualified business income component. Multiply line 4 by 20% (0.20)			5	0.
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6	816.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7	(0.)		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8	816.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)			9	163.
10	Qualified business income deduction before the income limitation. Add lines 5 and 9			10	163.
11	Taxable income before qualified business income deduction (see instructions)	11	0.		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12	24,831.		
13	Subtract line 12 from line 11. If zero or less, enter -0-	13	0.		
14	Income limitation. Multiply line 13 by 20% (0.20)			14	0.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)			15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-			16	(171,742.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-			17	(0.)

Form **8867**

(Rev. November 2024)

Department of the Treasury
Internal Revenue Service

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, or 1040-SS.
Go to *www.irs.gov/Form8867* for instructions and the latest information.

OMB No. 1545-0074

For tax year 2024

Attachment Sequence No. **70**

Taxpayer name(s) shown on return	Taxpayer identification number
DARWIN WIDJAJA AND HENNY RAMALI	605-08-1714
Preparer's name	**Preparer tax identification number**
DANIEL E. GREENE CPA	P00370548

Part I Due Diligence Requirements

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I–V for the benefit(s) claimed (check all that apply). ☐ EIC ☒ CTC/ACTC/ODC ☐ AOTC ☐ HOH

	Yes	No	N/A
1 Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you?	☒	☐	
2 If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed?	☒	☐	☐
3 Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following.			
• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.			
• Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s)	☒	☐	
4 Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "**Yes,**" answer questions 4a and 4b. If "**No,**" go to question 5.)	☐	☒	
a Did you make reasonable inquiries to determine the correct, complete, and consistent information?	☐	☐	
b Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.)	☐	☐	
5 Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure the amount(s) of the credit(s)	☒	☐	
List those documents provided by the taxpayer, if any, that you relied on:			
6 Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit?	☒	☐	
7 Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?	☒	☐	☐
(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)			
a Did you complete the required recertification Form 8862?	☐	☐	☐
8 If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)?	☐	☐	☒

Part II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to Part III.)

		Yes	No	N/A
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? **(If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)**	☐	☐	
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?	☐	☐	
c	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?	☐	☐	☐

Part III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC, ACTC, or ODC, go to Part IV.)

		Yes	No	N/A
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	☒	☐	
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	☒	☐	☐
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	☒	☐	☐

Part IV Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC, go to Part V.)

		Yes	No
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified tuition and related expenses for the claimed AOTC?	☐	☐

Part V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing status, go to Part VI.)

		Yes	No
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person?	☐	☐

Part VI Eligibility Certification

You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:

A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);

B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;

C. Submit Form 8867 in the manner required; **and**

D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions under *Document Retention.*

1. A copy of this Form 8867.
2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.
3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).

		Yes	No
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and complete?	☒	☐

Form **7203**
(Rev. December 2022)

Department of the Treasury
Internal Revenue Service

S Corporation Shareholder Stock and Debt Basis Limitations

Attach to your tax return.
Go to *www.irs.gov/Form7203* for instructions and the latest information.

OMB No. 1545-2302

Attachment Sequence No. **203**

Name of shareholder: DARWIN WIDJAJA

Identifying number: 605-08-1714

A Name of S corporation: RISER TECHNOLOGIES INC

B Employer identification number: 87-1891201

C Stock block (see instructions):

D Check applicable box(es) to indicate how stock was acquired:
(1) ☐ Original shareholder **(2)** ☐ Purchased **(3)** ☐ Inherited **(4)** ☐ Gift **(5)** ☐ Other:

E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation ☐

Part I Shareholder Stock Basis

1	Stock basis at the beginning of the corporation's tax year			1	240,295.
2	Basis from any capital contributions made or additional stock acquired during the tax year			2	42,133.
3a	Ordinary business income (enter losses in Part III)	3a			
b	Net rental real estate income (enter losses in Part III)	3b			
c	Other net rental income (enter losses in Part III)	3c			
d	Interest income	3d			
e	Ordinary dividends	3e			
f	Royalties	3f			
g	Net capital gains (enter losses in Part III)	3g			
h	Net section 1231 gain (enter losses in Part III)	3h			
i	Other income (enter losses in Part III)	3i			
j	Excess depletion adjustment	3j			
k	Tax-exempt income	3k			
l	Recapture of business credits	3l			
m	Other items that increase stock basis	3m			
4	Add lines 3a through 3m			4	0.
5	Stock basis before distributions. Add lines 1, 2, and 4			5	282,428.
6	Distributions (excluding dividend distributions)			6	103,233.
	Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.				
7	Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15			7	179,195.
8a	Nondeductible expenses	8a	9,731.		
b	Depletion for oil and gas	8b			
c	Business credits (sections 50(c)(1) and (5))	8c			
9	Add lines 8a through 8c			9	9,731.
10	Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15			10	169,464.
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)			11	67,911.
12	Debt basis restoration (see net increase in instructions for line 23)			12	
13	Other items that decrease stock basis			13	
14	Add lines 11, 12, and 13			14	67,911.
15	**Stock basis at the end of the corporation's tax year.** Subtract line 14 from line 10. If the result is zero or less, enter -0-			15	101,553.

Part II Shareholder Debt Basis

Section A — Amount of Debt (If more than three debts, see instructions.)

	Description	(a) Debt 1 ☐ Formal note ☐ Open account	(b) Debt 2 ☐ Formal note ☐ Open account	(c) Debt 3 ☐ Formal note ☐ Open account	(d) Total
16	Loan balance at the beginning of the corporation's tax year				0.
17	Additional loans (see instructions)				
18	Loan balance before repayment. Add lines 16 and 17				0.
19	Principal portion of debt repayment (this line doesn't include interest)				
20	Loan balance at the end of the corporation's tax year. Subtract line 19 from line 18				0.

Part II **Shareholder Debt Basis** *(continued)* RISER TECHNOLOGIES INC

Section B – Adjustments to Debt Basis

	Description	(a) Debt 1	(b) Debt 2	(c) Debt 3	(d) Total
21	Debt basis at the beginning of the corporation's tax year				0.
22	Enter the amount, if any, from line 17				
23	Debt basis restoration (see instructions)				
24	Debt basis before repayment. Add lines 21 22, and 23				0.
25	Divide line 24 by line 18				
26	Nontaxable debt repayment. Multiply line 25 by line 19				
27	Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24				0.
28	Nondeductible expenses and oil and gas depletion deductions in excess of stock basis.				
29	Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-				0.
30	Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)				
31	**Debt basis at the end of the corporation's tax year.** Subtract line 30 from line 29. If the result is zero or less, enter -0-				0.

Section C – Gain on Loan Repayment

32	Repayment. Enter the amount from line 19				
33	Nontaxable repayments. Enter the amount from line 26				
34	**Reportable gain.** Subtract line 33 from line 32				

Part III **Shareholder Allowable Loss and Deduction Items**

	Description	(a) Current year losses and deductions	(b) Carryover amounts (column (e)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35	Ordinary business loss	53,652.	14,259.	67,911.		
36	Net rental real estate loss					
37	Other net rental loss					
38	Net capital loss					
39	Net section 1231 loss					
40	Other loss					
41	Section 179 deductions					
42	Charitable contributions					
43	Investment interest expense					
44	Section 59(e)(2) expenditures					
45	Other deductions					
46	Foreign taxes paid or accrued					
47	**Total loss.** Add lines 35 through 46 for each column. Enter the total loss in column (c) on line 11 and enter the total loss in column (d) on line 30	53,652.	14,259.	67,911.	0.	0.

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

Name	Type	X if Foreign	Employer I.D. No.	Basis Computation Required	Any Invst. Not At Risk	PTP	Passive Loss From Form 8582	Passive Income From Sch. K-1	Nonpassive Loss From Sch. K-1	Section 179 Deduction	Nonpassive Income From Sch. K-1
CRM AI TECHNOLOGIES LLC	P		93-3846873								
UPE	P		93-3846873						$ 4,000.		
STABLE COMMUNICATIONS LLC	P		93-3974842								
RISER TECHNOLOGIES INC	S		87-1891201	X					53,652.		
PYA: Basis Carryover	S		87-1891201	X					14,259.		
						Total	$ 0.	$ 0.	$ 71,911.	$ 0.	$ 0.

Statement 2
Form 1116, Line 1a - Passive Category Income
Gross Income From Sources Outside U.S.

Foreign country or U.S. possession: OTHER COUNTRY (VARIOUS)

Dividends		$ 347.
Gross Foreign Source Qualified Dividends	6,850.	
Net Foreign Source Qualified Dividends		6,850.
Capital Gain Distributions	25.	
Net Foreign Source Capital Gain Distributions		25.
	Total	$ 7,222.

Statement 3
Form 1116, Line 10
Foreign Tax Credit Carryovers

Passive Income

	Foreign Taxes Paid	Foreign Taxes Disallowed	Foreign Taxes Claimed	Foreign Tax Credit Carryover
2023 Foreign tax credit	377.	0.	376.	1.
2022 Foreign tax credit	0.	0.	0.	0.
2021 Foreign tax credit	0.	0.	0.	0.
2020 Foreign tax credit	0.	0.	0.	0.
2019 Foreign tax credit	0.	0.	0.	0.
2018 Foreign tax credit	0.	0.	0.	0.
2017 Foreign tax credit	0.	0.	0.	0.
2016 Foreign tax credit	0.	0.	0.	0.
2015 Foreign tax credit	0.	0.	0.	0.
2014 Foreign tax credit	0.	0.	0.	0.
Total Foreign Tax Credit Carryover - Form 1116, Line 10				$ 1.

Statement 4
Form 1116, Line 1a - Passive Category Income (AMT)
Gross Income From Sources Outside U.S.

Foreign country or U.S. possession: OTHER COUNTRY (VARIOUS)

Dividends		$ 347.
Gross Foreign Source Qualified Dividends	6,850.	
Net Foreign Source Qualified Dividends		6,850.
Capital Gain Distributions	25.	
Net Foreign Source Capital Gain Distributions		25.
	Total	$ 7,222.

Statement 5
Form 1116, Line 10
Foreign Tax Credit Carryovers

Passive Income - AMT

	Foreign Taxes Paid	Foreign Taxes Disallowed	Foreign Taxes Claimed	Foreign Tax Credit Carryover
2023 Foreign tax credit	377.	0.	143.	234.
2022 Foreign tax credit	115.	0.	0.	115.
2021 Foreign tax credit	0.	0.	0.	0.
2020 Foreign tax credit	0.	0.	0.	0.
2019 Foreign tax credit	0.	0.	0.	0.
2018 Foreign tax credit	0.	0.	0.	0.
2017 Foreign tax credit	0.	0.	0.	0.
2016 Foreign tax credit	0.	0.	0.	0.
2015 Foreign tax credit	0.	0.	0.	0.
2014 Foreign tax credit	0.	0.	0.	0.
Total Foreign Tax Credit Carryover - Form 1116, Line 10				$ 349.

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

The taxpayer hereby makes the de minimis safe harbor election under Regulation 1.263(a)-1(f).

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