

AVIAGLOBAL GROUP LLC  
Federal and State  
Income Tax Returns  
For the Year Ended  
December 31, 2023

**Michael L. Stuck, CPA, PC**  
**14300 N Northsight Blvd Ste 230**  
**Scottsdale, AZ 85260**  
**480-607-1084**

April 10, 2024

**CONFIDENTIAL**

AVIAGLOBAL GROUP LLC  
33210 NORTH 12TH STREET  
PHOENIX, AZ 85085

Dear :

We have prepared the following returns from information provided by you without verification or audit.

U.S. Return of Partnership Income (Form 1065)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements.

**Federal Filing Instructions**

Your 2023 Form 1065 shows no balance due.

Your return is being filed electronically and is not required to be mailed. If you mail a paper copy of Form 1065 to the IRS it will delay processing of your return. The electronically filed return is not complete without a signature. A limited liability company member should sign and date Form 8879-PE, IRS *e-file* Signature Authorization for Form 1065. The form must be signed and returned before the electronic file can be transmitted to the IRS.

Mail the signed Form 8879-PE as soon as possible to:

Michael L. Stuck, CPA, PC  
14300 N Northsight Blvd Ste 230  
Scottsdale, AZ 85260

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Michael L. Stuck, CPA, PC

**E-file Authorization for Form 1065**  
(For return of partnership income or administrative adjustment request)

**ERO must obtain and retain completed Form 8879-PE.**  
Go to [www.irs.gov/Form8879PE](http://www.irs.gov/Form8879PE) for the latest information.

**2023**

Department of the Treasury  
Internal Revenue Service

For calendar year 2023, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of partnership

Employer identification number

AVIAGLOBAL GROUP LLC

83-3660810

**Part I Form 1065 Information (Whole dollars only)**

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	21,755
2	Gross profit (Form 1065, line 3)	2	21,755
3	Ordinary business income (loss) (Form 1065, line 23)	3	13,600
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	

**Part II Declaration and Signature Authorization of Partner or Member or Partnership Representative**

I declare under penalties of perjury that:

- 1a. If the Form 1065 is being transmitted as part of a return of partnership income, I am a partner or member of the named partnership.
- b. If the Form 1065 is being transmitted as part of an administrative adjustment request (AAR), I am the partnership representative (PR) of the named partnership.
- 2. I have examined a copy of the partnership's electronic Form 1065 (whether used as a return or AAR) and accompanying forms, schedules, and statements, and to the best of my knowledge and belief, it/they is/are true, correct, and complete.
- 3. I am fully authorized to sign the return or AAR on behalf of the partnership.
- 4. The amounts shown in Part I above are the amounts shown on the electronic copy of the partnership's Form 1065.
- 5. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to transmit the partnership's return or AAR to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return or AAR.
- 6. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income or AAR.

**Partner or Member or PR PIN: check one box only**

I authorize MICHAEL L. STUCK, CPA, PC to enter my PIN 60810 as my signature  
ERO firm name Don't enter all zeros  
on the partnership's 2023 electronically filed return of partnership income or AAR.

As a Partner or Member or PR of the partnership, I will enter my PIN as my signature on the partnership's 2023 electronically filed return of partnership income or AAR.

Partner or Member or PR signature: \_\_\_\_\_

Title: LLC MEMBER LEE CARLSON Date: 04/10/24

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 86593437972  
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return of partnership income or AAR for the partnership indicated above. I confirm that I am submitting this return or AAR in accordance with the requirements of **Pub. 3112**, IRS *e-file* Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature: \_\_\_\_\_ Date: 04/10/24

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

Electronic Filing - PDF Attachment Report

Form **1065**

**2023**

For calendar year 2023, or tax year beginning , and ending

Partnership Name

Employer Identification Number

AVIAGLOBAL GROUP LLC

83-3660810

Title	Attachment Source	Proforma
PARTNERSHIP SECTION 199A INFORMATION WRK	(AUTOMATICALLY ATTACHED)	N/A

**U.S. Return of Partnership Income**  
For calendar year 2023, or tax year beginning \_\_\_\_\_, ending \_\_\_\_\_  
Go to [www.irs.gov/Form1065](http://www.irs.gov/Form1065) for instructions and the latest information.

**2023**

<b>A</b> Principal business activity	<b>Type or Print</b>	Name of partnership <b>AVIAGLOBAL GROUP LLC</b>	<b>D</b> Employer identification number <b>83-3660810</b>
<b>B</b> Principal product or service <b>SERVICE</b>		Number, street, and room or suite no. If a P.O. box, see instructions. <b>33210 NORTH 12TH STREET</b>	<b>E</b> Date business started <b>02/20/2019</b>
<b>C</b> Business code number <b>541990</b>		City or town, state or province, country, and ZIP or foreign postal code <b>PHOENIX AZ 85085</b>	<b>F</b> Total assets (see instructions) \$ <b>0</b>

**G** Check applicable boxes: (1)  Initial return (2)  Final return (3)  Name change (4)  Address change (5)  Amended return

**H** Check accounting method: (1)  Cash (2)  Accrual (3)  Other (specify): \_\_\_\_\_

**I** Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: **2**

**J** Check if Schedules C and M-3 are attached

**K** Check if partnership: (1)  Aggregated activities for section 465 at-risk purposes (2)  Grouped activities for section 469 passive activity purposes

**Caution:** Include **only** trade or business income and expenses on lines 1a through 23 below. See instructions for more information.

<b>Income</b>	<b>1a</b>	Gross receipts or sales <b>21,755</b>	<b>b</b>	Less returns and allowances		<b>c</b>	<b>1c</b>	<b>21,755</b>
	<b>2</b>	Cost of goods sold (attach Form 1125-A)				<b>2</b>		
	<b>3</b>	Gross profit. Subtract line 2 from line 1c				<b>3</b>		<b>21,755</b>
	<b>4</b>	Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)				<b>4</b>		
	<b>5</b>	Net farm profit (loss) (attach Schedule F (Form 1040))				<b>5</b>		
	<b>6</b>	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)				<b>6</b>		
	<b>7</b>	Other income (loss) (attach statement)				<b>7</b>		
	<b>8</b>	<b>Total income (loss).</b> Combine lines 3 through 7				<b>8</b>		<b>21,755</b>
<b>Deductions</b> <small>(see instructions for limitations)</small>	<b>9</b>	Salaries and wages (other than to partners) (less employment credits)				<b>9</b>		
	<b>10</b>	Guaranteed payments to partners				<b>10</b>		
	<b>11</b>	Repairs and maintenance				<b>11</b>		
	<b>12</b>	Bad debts				<b>12</b>		
	<b>13</b>	Rent				<b>13</b>		
	<b>14</b>	Taxes and licenses				<b>14</b>		
	<b>15</b>	Interest (see instructions)				<b>15</b>		
	<b>16a</b>	Depreciation (if required, attach Form 4562)		<b>16a</b>				
	<b>b</b>	Less depreciation reported on Form 1125-A and elsewhere on return		<b>16b</b>		<b>16c</b>		
	<b>17</b>	Depletion ( <b>Do not deduct oil and gas depletion.</b> )				<b>17</b>		
	<b>18</b>	Retirement plans, etc.				<b>18</b>		
	<b>19</b>	Employee benefit programs				<b>19</b>		
	<b>20</b>	Energy efficient commercial buildings deduction (attach Form 7205)				<b>20</b>		
	<b>21</b>	Other deductions (attach statement) <b>SEE STATEMENT 1</b>				<b>21</b>		<b>8,155</b>
	<b>22</b>	<b>Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 21				<b>22</b>		<b>8,155</b>
<b>23</b>	<b>Ordinary business income (loss).</b> Subtract line 22 from line 8				<b>23</b>		<b>13,600</b>	
<b>Tax and Payment</b>	<b>24</b>	Interest due under the look-back method—completed long-term contracts (attach Form 8697)				<b>24</b>		
	<b>25</b>	Interest due under the look-back method—income forecast method (attach Form 8866)				<b>25</b>		
	<b>26</b>	BBA AAR imputed underpayment (see instructions)				<b>26</b>		
	<b>27</b>	Other taxes (see instructions)				<b>27</b>		
	<b>28</b>	<b>Total balance due.</b> Add lines 24 through 27				<b>28</b>		
	<b>29</b>	Elective payment election amount from Form 3800				<b>29</b>		
	<b>30</b>	Payment (see instructions)				<b>30</b>		
	<b>31</b>	<b>Amount owed.</b> If the sum of line 29 and line 30 is smaller than line 28, enter amount owed				<b>31</b>		
	<b>32</b>	<b>Overpayment.</b> If the sum of line 29 and line 30 is larger than line 28, enter overpayment				<b>32</b>		

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

Signature of partner or limited liability company member \_\_\_\_\_ Date \_\_\_\_\_

May the IRS discuss this return with the preparer shown below?  
See instructions.  Yes  No

<b>Paid</b>	Print/Type preparer's name <b>MICHAEL L STUCK</b>	Preparer's signature _____	Date _____	Check <input type="checkbox"/> if self-employed	PTIN <b>P00041266</b>
<b>Preparer</b>	Firm's name <b>MICHAEL L. STUCK, CPA, PC</b>			Firm's EIN <b>86-0837972</b>	
<b>Use Only</b>	Firm's address <b>14300 N NORTHSIGHT BLVD STE 230 SCOTTSDALE, AZ 85260</b>			Phone no. <b>480-607-1084</b>	

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:
a Domestic general partnership
b Domestic limited partnership
c Domestic limited liability company
d Domestic limited liability partnership
e Foreign partnership
f Other:

2 At the end of the tax year:
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership?
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership?

3 At the end of the tax year, did the partnership:
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below

Table with 4 columns: (i) Name of Corporation, (ii) Employer Identification Number (if any), (iii) Country of Incorporation, (iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below

Table with 5 columns: (i) Name of Entity, (ii) Employer Identification Number (if any), (iii) Type of Entity, (iv) Country of Organization, (v) Maximum Percentage Owned in Profit, Loss, or Capital

4 Does the partnership satisfy all four of the following conditions?
a The partnership's total receipts for the tax year were less than \$250,000.
b The partnership's total assets at the end of the tax year were less than \$1 million.
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.
d The partnership is not filing and is not required to file Schedule M-3

5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?

6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?

7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?

8 At any time during calendar year 2023, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country

9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions

10a Is the partnership making, or had it previously made (and not revoked), a section 754 election? If "Yes," enter the effective date of the election
See instructions for details regarding a section 754 election.

b For this tax year, did the partnership make an optional basis adjustment under section 743(b)? If "Yes," enter the total aggregate net positive amount \$ and the total aggregate net negative amount \$ ( ) of such section 743(b) adjustments for all partners made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions

Schedule B Other Information (continued)	Yes	No
<b>c</b> For this tax year, did the partnership make an optional basis adjustment under section 734(b)? If "Yes," enter the total aggregate net positive amount \$ _____ and the total aggregate net negative amount \$ ( _____ ) of such section 734(b) adjustments for all partnership property made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions .....		X
<b>d</b> For this tax year, is the partnership required to adjust the basis of partnership property under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," enter the total aggregate amount of such section 743(b) adjustments and/or section 734(b) adjustments for all partners and/or partnership property made in the tax year \$ _____. The partnership must also attach a statement showing the computation and allocation of the basis adjustment. See instructions .....		X
<b>11</b> Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
<b>12</b> At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property? .....		X
<b>13</b> If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions .....	0	
<b>14</b> Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership .....		X
<b>15</b> Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return .....	0	
<b>16a</b> Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions .....		X
<b>b</b> If "Yes," did you or will you file required Form(s) 1099? .....		
<b>17</b> Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return .....	0	
<b>18</b> Enter the number of partners that are foreign governments under section 892 .....	0	
<b>19</b> During the partnership's tax year, did the partnership make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)? .....		X
<b>20</b> Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938 .....		X
<b>21</b> Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? .....		X
<b>22</b> During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions .....		X
If "Yes," enter the total amount of the disallowed deductions \$ _____		
<b>23</b> Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions .....		X
<b>24</b> Does the partnership satisfy one or more of the following? See instructions .....		X
<b>a</b> The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
<b>b</b> The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$29 million and the partnership has business interest expense.		
<b>c</b> The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
<b>25</b> Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? .....		X
If "Yes," enter the amount from Form 8996, line 15 \$ _____		
<b>26</b> Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership .....	0	
Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
<b>27</b> At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8? .....		X
<b>28</b> Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions.		
Percentage: _____ By vote: _____ By value: _____		X
<b>29</b> Is the partnership required to file Form 7208 relating to the excise tax on repurchase of corporate stock (see instructions):		
<b>a</b> Under the applicable foreign corporation rules? .....		X

<b>Schedule B Other Information</b> <i>(continued)</i>		Yes	No
<b>b</b>	Under the covered surrogate foreign corporation rules? ..... If "Yes" to either (a) or (b), complete Form 7208, Excise Tax on Repurchase of Corporate Stock. See the Instructions for Form 7208.		X
<b>30</b>	At any time during this tax year, did the partnership (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? See instructions .....		X
<b>31</b>	Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 .....		X
	If "No," complete Designation of Partnership Representative below.		

**Designation of Partnership Representative** (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR _____	
U.S. address of PR _____	U.S. phone number of PR _____
If the PR is an entity, name of the designated individual for the PR _____	
U.S. address of designated individual _____	U.S. phone number of designated individual _____



Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 23)	1	13,600
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments: a Services 4a b Capital 4b	4c	
	c Total. Add lines 4a and 4b	4c	
	5 Interest income	5	
	6 Dividends and dividend equivalents: a Ordinary dividends	6a	
	b Qualified dividends 6b c Dividend equivalents 6c	6c	
	7 Royalties	7	
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8		
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a		
b Collectibles (28%) gain (loss)	9b		
c Unrecaptured section 1250 gain (attach statement)	9c		
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type:	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13a Cash contributions	13a	
	b Noncash contributions	13b	
	c Investment interest expense	13c	
	d Section 59(e)(2) expenditures: (1) Type: (2) Amount:	13d(2)	
e Other deductions (see instructions) Type:	13e		
Self-Employment	14a Net earnings (loss) from self-employment	14a	
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type:	15d	
	e Other rental credits (see instructions) Type:	15e	
	f Other credits (see instructions) Type:	15f	
Inter-national	16 Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items—International, and check this box to indicate that you are reporting items of international tax relevance <input type="checkbox"/>		
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a	
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties—gross income	17d	
	e Oil, gas, and geothermal properties—deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19a Distributions of cash and marketable securities	19a	13,600
	b Distributions of other property	19b	
	20a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach statement) SEE STATEMENT 2			
21 Total foreign taxes paid or accrued	21		

**Analysis of Net Income (Loss) per Return**

1	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13e, and 21					1	13,600
2	Analysis by partner type:						
	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a	General partners						
b	Limited partners						
	6,800		6,800				

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. Government obligations				
5	Tax-exempt securities				
6	Other current assets (attach statement)				
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach statement)				
9a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)				
12a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
13	Other assets (attach statement)				
14	Total assets				
Liabilities and Capital					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach statement)				
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more				
20	Other liabilities (attach statement)				
21	Partners' capital accounts				
22	Total liabilities and capital				

**Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return**

Note: The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	13,600	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a	Tax-exempt interest \$	
3	Guaranteed payments (other than health insurance)		7	Deductions included on Schedule K, lines 1 through 13e, and 21, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13e, and 21 (itemize):		a	Depreciation \$	
a	Depreciation \$		8	Add lines 6 and 7	
b	Travel and entertainment \$		9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	13,600
5	Add lines 1 through 4	13,600			

**Schedule M-2 Analysis of Partners' Capital Accounts**

1	Balance at beginning of year		6	Distributions: a Cash	13,600
2	Capital contributed: a Cash		b	Property	
	b Property		7	Other decreases (itemize):	
3	Net income (loss) (see instructions)	13,600	8	Add lines 6 and 7	13,600
4	Other increases (itemize):		9	Balance at end of year. Subtract line 8 from line 5	0
5	Add lines 1 through 4	13,600			

Schedule K-1  
(Form 1065)

2023

Department of the Treasury  
Internal Revenue Service

For calendar year 2023, or tax year

beginning [ ] ending [ ]

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Final K-1  Amended K-1

651123  
OMB No. 1545-0123

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

1	Ordinary business income (loss) 6,800	14	Self-employment earnings (loss)
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	A	6,800
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	Z*	STMT
10	Net section 1231 gain (loss)	AG*	STMT
11	Other income (loss)		
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	More than one activity for at-risk purposes*		
23	More than one activity for passive activity purposes*		

\*See attached statement for additional information.

For IRS Use Only

Part I Information About the Partnership

A Partnership's employer identification number  
83-3660810

B Partnership's name, address, city, state, and ZIP code  
AVIAGLOBAL GROUP LLC  
33210 NORTH 12TH STREET  
PHOENIX AZ 85085

C IRS Center where partnership filed return:  
E-FILE

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

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)  
82-1722671

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.  
ADS-B GLOBAL, LLC  
866 WASHINGTON DRIVE NE  
GRAND RAPIDS MI 49505

G  General partner or LLC member-manager  Limited partner or other LLC member

H1  Domestic partner  Foreign partner

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

I1 What type of entity is this partner? CORPORATION

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

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

	Beginning	Ending
Profit	50.000000 %	50.000000 %
Loss	50.000000 %	50.000000 %
Capital	50.000000 %	50.000000 %

Check if decrease is due to:  
 Sale or  Exchange of partnership interest. See instructions.

K1 Partner's share of liabilities:

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

K2 Check this box if item K1 includes liability amounts from lower-tier partnerships

K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions

L Partner's Capital Account Analysis

Beginning capital account	\$
Capital contributed during the year	\$
Current year net income (loss)	6,800
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	(6,800)
Ending capital account	0

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

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

Schedule K-1  
(Form 1065)

2023

Department of the Treasury  
Internal Revenue Service

For calendar year 2023, or tax year

beginning [ ] ending [ ]

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Final K-1  Amended K-1

651123  
OMB No. 1545-0123

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

1	Ordinary business income (loss) 6,800	14	Self-employment earnings (loss)
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	19	Distributions A 6,800
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information Z* STMT
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction	21	Foreign taxes paid or accrued AG* STMT
13	Other deductions		
22	More than one activity for at-risk purposes*		
23	More than one activity for passive activity purposes*		

\*See attached statement for additional information.

For IRS Use Only

Part I Information About the Partnership

A Partnership's employer identification number  
83-3660810

B Partnership's name, address, city, state, and ZIP code  
AVIAGLOBAL GROUP LLC  
33210 NORTH 12TH STREET  
PHOENIX AZ 85085

C IRS Center where partnership filed return:  
E-FILE

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

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)  
228-66-0365

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.  
FORREST COLLIVER  
2 RUE SCHWEIGHAEUSER  
STRASBOURG  
FRANCE 67000

G  General partner or LLC member-manager  Limited partner or other LLC member

H1  Domestic partner  Foreign partner

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

I1 What type of entity is this partner? INDIVIDUAL

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

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

	Beginning	Ending
Profit	50.000000 %	50.000000 %
Loss	50.000000 %	50.000000 %
Capital	50.000000 %	50.000000 %

Check if decrease is due to:  
 Sale or  Exchange of partnership interest. See instructions.

K1 Partner's share of liabilities:

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

K2 Check this box if item K1 includes liability amounts from lower-tier partnerships

K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions

L Partner's Capital Account Analysis

Beginning capital account	\$
Capital contributed during the year	\$
Current year net income (loss)	6,800
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	(6,800)
Ending capital account	0

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

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

**SCHEDULE B-1  
(Form 1065)**

**Information on Partners Owning 50% or  
More of the Partnership**

OMB No. 1545-0123

(Rev. August 2019)  
Department of the Treasury  
Internal Revenue Service

**u Attach to Form 1065.**  
**u Go to [www.irs.gov/Form1065](http://www.irs.gov/Form1065) for the latest information.**

Name of partnership  
**AVIAGLOBAL GROUP LLC**

Employer identification number (EIN)  
**83-3660810**

**Part I Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
ADS-B GLOBAL, LLC	82-1722671	CORPORATION	UNITED STATES	50.000000

**Part II Individuals or Estates Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
FORREST COLLIVER	228-66-0365	UNITED STATES	50.000000

For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule B-1 (Form 1065) (Rev. 8-2019)

Schedule <b>K</b>	<b>Section 199A Information Worksheet</b>	<b>2023</b>
For calendar year 2023, or tax year beginning _____, and ending _____		

Partnership Name <b>AVIAGLOBAL GROUP LLC</b>	Employer Identification Number <b>83-3660810</b>
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	Activity Description	Pass-through Entity EIN	Aggr. Number	SSTB	PTP
Column A	CONSULTING				
Column B					
Column C					
Column D					
Column E					

	Column A	Column B	Column C	Column D	Column E
<b>QBI or Qualified PTP items:</b>					
Ordinary business income (loss)	13,600				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalties					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
<b>W-2 wages</b>					
<b>Qualified property</b>					
<b>Other Information:</b>					
QBI alloc to co-op pmts received					
W-2 wages alloc to qualified pmts					
Section 199A(g) deduction					

**Section 199A REIT dividends**

Schedule <b>K-1</b>	<b>Partner's Section 199A Information Worksheet</b>	<b>2023</b>
For calendar year 2023, or tax year beginning _____, and ending _____		

Partnership Name <u>AVIAGLOBAL GROUP LLC</u>	Employer Identification Number <u>83-3660810</u>
Partner's Name <u>ADS-B GLOBAL, LLC</u>	Taxpayer Identification Number <u>82-1722671</u>

**Schedule K-1, Box 20, Code Z - Section 199A Information**

	Activity Description	Pass-through Entity EIN	Aggr. Number	SSTB	PTP
Column A .....	<u>CONSULTING</u>	_____	_____	_____	_____
Column B .....	_____	_____	_____	_____	_____
Column C .....	_____	_____	_____	_____	_____
Column D .....	_____	_____	_____	_____	_____
Column E .....	_____	_____	_____	_____	_____

	Column A	Column B	Column C	Column D	Column E
<b>QBI or Qualified PTP items:</b>					
Ordinary business income (loss)	6,800				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalties					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
<b>W-2 wages</b>					
<b>Qualified property</b>					
<b>Other Information:</b>					
QBI alloc to co-op pmts received					
W-2 wages alloc to qualified pmts					
Section 199A(g) deduction					

**Section 199A REIT dividends**

Schedule <b>K-1</b>	<b>Partner's Section 199A Information Worksheet</b>	<b>2023</b>
For calendar year 2023, or tax year beginning _____, and ending _____		

Partnership Name <b>AVIAGLOBAL GROUP LLC</b>	Employer Identification Number <b>83-3660810</b>
Partner's Name <b>FORREST COLLIVER</b>	Taxpayer Identification Number <b>228-66-0365</b>

**Schedule K-1, Box 20, Code Z - Section 199A Information**

	Activity Description	Pass-through Entity EIN	Aggr. Number	SSTB	PTP
<b>Column A</b> .....	<b>CONSULTING</b>				
<b>Column B</b> .....					
<b>Column C</b> .....					
<b>Column D</b> .....					
<b>Column E</b> .....					

	Column A	Column B	Column C	Column D	Column E
<b>QBI or Qualified PTP items:</b>					
Ordinary business income (loss)	6,800				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalties					
Section 1231 gain (loss)					
Other income (loss)					
Section 179 deduction					
Other deductions					
<b>W-2 wages</b>					
<b>Qualified property</b>					
<b>Other Information:</b>					
QBI alloc to co-op pmts received					
W-2 wages alloc to qualified pmts					
Section 199A(g) deduction					

**Section 199A REIT dividends**



**Federal Statements****Statement 1 - Form 1065, Page 1, Line 21 - Other Deductions**

<u>Description</u>	<u>Amount</u>
BANK CHARGES	\$ 400
COMPUTER & INTERNET	998
DUES	75
PROFESSIONAL FEES	2,675
POSTAGE	232
REIMBURSED EXPENSES	2,104
WEB	803
MEETINGS	475
OTHER	393
TOTAL	<u>\$ 8,155</u>

**Statement 2 - Form 1065, Schedule K, Line 20c - Other Items and Amounts**

<u>Description</u>	<u>Amount</u>
SEE ATTACHED SECTION 199A INFORMATION WORKSHEET	\$

**Schedule M-2, Tax-based Capital Income (Loss) Worksheet**

Form **1065**

**2023**

For calendar year 2023, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Partnership Name

Employer Identification Number

AVIAGLOBAL GROUP LLC

83-3660810

<b>1</b>	Net income (loss) per return (Form 1065, Page 5, Analysis of Net Income (Loss)) .....	<u>13,600</u>
<b>2</b>	Income recorded on books this year not included on return	
<b>a</b>	Tax-exempt interest .....	_____
<b>b</b>	Other tax-exempt income .....	_____
<b>c</b>	Total tax-exempt income .....	_____
<b>3</b>	Expenses recorded on books this year not on return	
<b>a</b>	Meals .....	_____
<b>b</b>	Entertainment .....	_____
<b>c</b>	Tax credit adjustment .....	_____
<b>d</b>	Rent personal use expenses .....	_____
<b>e</b>	Conservation expenses .....	_____
<b>f</b>	Lease inclusion .....	_____
<b>g</b>	Other nondeductible expenses .....	_____
<b>h</b>	Total nondeductible expenses .....	_____
<b>4</b>	Net income (loss) per books (Schedule M-2, line 3) .....	<u><u>13,600</u></u>
<b>5</b>	Increase (decrease) adjustments to return income (loss)	
<b>a</b>	Section 743b negative adjustments .....	_____
<b>b</b>	Section 743b positive adjustments .....	_____
<b>c</b>	Guaranteed payments (other than health insurance) .....	_____
<b>d</b>	Net other increases (decreases) adjustments .....	_____
<b>6</b>	Net tax-based capital net income (loss) (Schedule K-1, Current year income (loss)) .....	<u><u>13,600</u></u>