

Form **1065**

U.S. Return of Partnership Income

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

For calendar year 2019, or tax year beginning _____, ending _____

2019

▶ Go to www.irs.gov/Form1065 for instructions and the latest information.

A Principal business activity R/E Rental	Type or Print	Name of partnership DAction Enterprises LLP	D Employer identification number [REDACTED]
B Principal product or service Rental		Number, street, and room or suite no. If a P.O. box, see the instructions. 232 Lyman Street	E Date business started 12/19/1997
C Business code number 531120		City or town, state or province, country, and ZIP or foreign postal code Holyoke MA 01040	F Total assets (see instructions) \$ 208,631

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 22 below. See instructions for more information.

Income	1a Gross receipts or sales	1a		
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a			1c
	2 Cost of goods sold (attach Form 1125-A)			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4
	5 Net farm profit (loss) (attach Schedule F (Form 1040 or 1040-SR))			5
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6
7 Other income (loss) (attach statement)			7	
8 Total income (loss). Combine lines 3 through 7			8	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9
	10 Guaranteed payments to partners			10
	11 Repairs and maintenance			11
	12 Bad debts			12
	13 Rent			13
	14 Taxes and licenses			14
	15 Interest (see instructions)			15
	16a Depreciation (if required, attach Form 4562)	16a	29,070	
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b	29,070	16c
	17 Depletion (Do not deduct oil and gas depletion.)			0
	18 Retirement plans, etc.			
19 Employee benefit programs				
20 Other deductions (attach statement)				
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			0	
22 Ordinary business income (loss). Subtract line 21 from line 8				
Tax and Payment	23 Interest due under the look-back method—completed long-term contracts (attach Form 8697)			23
	24 Interest due under the look-back method—income forecast method (attach Form 8866)			24
	25 BBA AAR imputed underpayment (see instructions)			25
	26 Other taxes (see instructions)			26
	27 Total balance due. Add lines 23 through 26			27
	28 Payment (see instructions)			28
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed			29
	30 Overpayment. If line 28 is larger than line 27, enter overpayment			30

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 which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Signature of partner or limited liability company member	Date		Check <input type="checkbox"/> if self-employed	PTIN
Print/Type preparer's name	Preparer's signature	Date		P00095500
Firm's name		Firm's EIN		
Firm's address		Phone no.		
Springfield, MA		01151		

For Paperwork Reduction Act Notice, see separate instructions.

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