Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return QMB No. 1545-0074 IRS Use Only-Do not write or staple in this space. , 2023, ending See separate instructions. For the year Jan. 1-Dec. 31, 2023, or other tax year beginning Your social security number Your first name and middle initial Last name Spouse's social security number If joint return, spouse's first name and middle initial Last name

Home address	(numbe	r and street). If you have a P.O. box, see instru	ctions.			A	pt. no.		ential Electio	-	ign	
		MANUTE STORES TO THE STORES TO		T .					nere if you, a if filing jointly			
City, town, or po	st office	e. If you have a foreign address, also complete	spaces below.	State		ZIP code			this fund. Chow will not cl			
		THU .	The state of the s	IWA		99156			or refund,	in (iğe		
Foreign country name			i Foreign province/state/co	unty		Foreign p	ostal code		X	You	، اکا	Spouse
		· ·		49-2004		<u></u>						
Filing Status	\$	Single			He	ead of hous	ehald (HOH)					
Check only		X Married filing jointly (even if only one h	ad income)									
one box.		Married filing separately (MFS)			T a	ualifying sur	rviving spous	e (QSS)				
		If you checked the MFS box, enter the nam	e of your spouse. If you cho	cked the HO		box, enter	the child's na	ime if the	qualifying p	erson is		
		a child but not your dependent:										
Digital		At any time during 2023, did you: (a) rece					mices), or	/h) sell				
Digital Assets	6	exchange, or otherwise dispose of a digit	ive (as a reward, award al asset (or a financial in	terest in a di	gital ass	et)? (See	instruction	s.).		Yes	X N	No
Standard				spouse as a							-	
Deduction			***************************************	•	depon	2011						
	<u></u>	Spouse itemi≵es on a separate retur	n or you were a duar-s	iatus anen								
Age/Blindnes	ss Y	ou: Were born before January 2,	1959 🔲 Are blind	Spous	se:	Was bo	n before J	anuary :	2, 195 9] is bi	lind
Dependent	ts (see instructions):	(2) Social se	curity	(3) Re	fationship	(4) Che	ck the b	ox if qualifies	for (see in	natructi	ions):
		1) First name Last name	numbe		• •	o you	C	hild tax c	redit	Credit for at	ther dep	condents
If more	-	THE RESERVE THE PROPERTY OF TH										
than four dependents,	•										П	
see instruction	15	1100							***************************************	· · · · · · · · · · · · · · · · · · ·		MANT MAN THURSTON
and check	, -	HTILL.										
here	<u>, </u>								1		<u> </u>	
income	1a	Total amount from Form(s) W-2, box 1 (see	·						1a 1b			
Attach Form(s)	þ	Household employee wages not reported or	, -						10		***************************************	***************************************
W-2 here. Also attach Forms	C	Tip income not reported on line 1a (see instr							10			
W-2G and 1099-R if tax	ď	Medicaid waiver payments not reported on f							1e			
was withheld.	0	Taxable dependent care benefits from Form							1f			
	-	Employer-provided adoption benefits from F							1g			
If you did not	g h	Wages from Form 8919, line 6. Other earned income (see instructions).							1h			
get a Form W-2, see	"	Nontaxable combat pay election (see instruc-				I	1	• • •				
instructions.		Add lines 1s through 1h	·						1z			O
AHL C-L D	28	Tax-exempt interest 2		ł					26		-	13
Attach Sch. B if required.	3a	Qualified dividends		Ì					36			
WHAT THE	4a	IRA distributions 4	***	!					4b			
Standard	5.0	Pensions and annuities 5		1	ole amou	πt	,		5b			
Deduction for—	6a	Social security benefits 68		b Taxet	oie amou	nt			66			Ç
· Single or	c	If you elect to use the lump-sum election me		uctions)								
Married filing separately.	7	Capital gain or (loss). Attach Schedule O if re							7			
\$13.850 • Married Bling	8	Additional income from Schedule 1, line 10							8		7	29,299
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 6. Th							9		di di	29,312
surviving spouse. \$27,700	10	Adjustments to income from Schedule 1, tine							10			12,918
• Hoed of	11	Subtract line 10 from line 9. This is your adju							11		1	16,394
heusehold, \$20,800	12	Standard deduction or itemized deduction	•						12		7	27,700
· if you checked	13	Qualified business income deduction from Fo							13			
any box under Standard	14	Add lines 12 and 13							14		2	27,700
Deduction. see instructions.	15	Subtract line 14 from line 11. If zero or less, e							15			Ç
	·				·						404	

Form 1040 (2023)									Page 2
Tax and	16	Tax (see instructions). Check if any fre	om Form(s):	1 8814 2	4972	3			16	
Credits	17	Amount from Schedule 2, line 3				***************************************		[17	
	18	Add lines 16 and 17	18	0						
	19	Child tax credit or credit for other depe							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 o							22	0
	23	Other taxes, including self-employmen	nt tax, from Sched	ule 2, line 21					23	3,172
	24	Add lines 22 and 23. This is your total							24	3,172
Payments	25	Federal income tax withheld from:					_			
	ā	Form(s) W-2				25a				
	b									
	c									
	d	Add lines 25e through 25c	25d	806						
	26	2023 estimated tax payments and am-							26	
If you have a qualifying child,	27	Eamed income credit (EIC)						255		
attech Sch. EIC.	28	Additional child tax credit from Schedu	ile 6812			28	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	29	American opportunity credit from Form	1 8863, line 8			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15				31			9493	
	32	Add lines 27, 28, 29, and 31. These ar		32	255					
	33	Add lines 25d, 26, and 32. These are	your total payme	nts					33	1,061
Refund	34	If line 33 is more than line 24, subtract	line 24 from line	33, This is the amoun	il you overpa	aid			34	
	35a	Amount of line 34 you want refunded	35a							
Direct deposit? See instructions.	Þ	Routing number c Type: Checking Savings								
	d									
	36	Amount of line 34 you want applied to	your 2024 estim	ated tax		36			and seeding	
Amount	37	Subtract line 33 from line 24. This is th								
You Owe		For details on how to pay, go to www.irs.gow/Payments or see instructions							37	2,111
	38	Estimated tax penalty (see instructions	3)			38				n an europe a european de enfléctation
Third Party		o you want to allow another person to di					1773		1	
Designee	S	ee instructions						omplete below.	,	No
		esignee's		Phone		# 00 AE		ersonal identific ımber (PIN)		345
		ame Susan F Gilstrap nder penalties of perjury, I declare that I have		no.	(541) 42				103	340
Sign	be	nder penallies of perjury, I declare that I have slipf, they are true, correct, and complete. Dec	teration of preparer	(other than taxpayer) is	based on all ir	nformation of whic	th preparer has	, any knowladge.		
Here		our signature		Date	Your occup	pation		If the IRS sent	you an lo	fentity Protection
					Sattelite	Dish Install	er	PtN, enter it here (see inst.)		
Jaint retum? See instructions.	Š	pouse's signature. If a joint return, both	must sind	Date				If the IRS sent	you an to	fentity Protection
Keep a copy for		position of the contract of th	maar org//						F	
your records.					Self Emp	pioyed	•	here (see inst.)		
		hone no.	I Bronzesta state	Email address		Date	PTIN		Ch	eck if:
Paid		raparer's name	Preparer's sign:	on s. Co.					"	Self-employed
Preparer	<u>s</u>	Susan F Gilstrap				3/21/2024 P00803882				The second secon
Use Only		irm's name Prairie Creek Bookk				· · · · · · · · · · · · · · · · · · ·		Phone no.		426-3345
USE Offiy Firm's address PO Box G. Enfertrise OR 97828 Firm's EIN 92						-2170812				

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury internal Revenue Service

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

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

Attachment Sequence No.

Your social security number

Par	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	22,451
4	Other gains or (losses). Attach Form 4797	4	-1,251
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	8,099
8	Other income:		
a	Net operating loss ,		
b	Gambling		
C	Cancellation of debt , . , ,		
d	Foreign earned income exclusion from Form 2555		
e	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
h	Jury duty pay , , , , , ,		
i	Prizes and awards		
j	Activity not engaged in for profit income		
k	Stock options		
í	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		
m	Olympic and Paralympic medals and USOC prize money (see		
	instructions)	<u> </u>	
п	Section 951(a) inclusion (see instructions)		
0	Section 951A(a) inclusion (see instructions)		
p	Section 461(I) excess business loss adjustment		
q	Taxable distributions from an ABLE account (see instructions)		
r	Scholarship and fellowship grants not reported on Form W-2		
8	Nontaxable amount of Medicaid waiver payments included on Form		
	1040, line 1a or 1d		
t	Pension or annuity from a nonqualified deferred compensation plan or		
	a nongovernmental section 457 plan		
u	Wages earned white incarcerated		
z	Other income. List type and amount:		
	8z	400	
9	Total other income. Add lines 8a through 8z	9	0
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	29,299

Pari	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	1,586
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	11,332
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)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
Ċ	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m.,		
d	Reforestation amortization and expenses		
e	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans	1000 (000) 1000 (000)	
9	Contributions by certain chaplains to section 403(b) plans	2000	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
Ĭ	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		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)		
z	Other adjustments. List type and amount:		
_			
25	Total other adjustments, Add lines 24a through 24z	25	0
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	12,918

SCHEDULE 2 (Form 1040)

Additional Taxes

OMB No. 1545-0074

2023

Department of the Treasury Internal Revenue Service

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

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No.

Your social security number

Part I Tax 1 Alternative minimum tax. Attach Form 6251 2 3 Add tines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 3 **Other Taxes** Part II Self-employment tax. Attach Schedule SE..... 3,172 5 Social security and Medicare tax on unreported tip income. Uncollected social security and Medicare tax on wages. Attach 7 7 0 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here 9 9 10 10 11 11 12 12 13 Uncollected social security and Medicare or RRTA tax on tips or group-term life 13 Interest on tax due on installment income from the sale of certain residential lots 14 14 Interest on the deferred tax on gain from certain installment sales with a sales price 15 15 16 16 (continued on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 2 (Form 1040) 2023

Par	Other Taxes (continued)			
17	Other additional taxes:			
a	Recapture of other credits. List type, form number, and amount:	17a		
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	176		
c	Additional tax on HSA distributions. Attach Form 8889	17c		
đ	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
e	Additional tax on Archer MSA distributions, Attach Form 8853	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	171	-	
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
1	Tax on accumulation distribution of trusts	171	-	
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8897 or 8866.	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17g	-	
Z	Any other taxes. List type and amount:	17z		
18	Total additional taxes. Add lines 17a through 17z		18	0
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxes. Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	<u>,, , , , , , , , , , , , , , , , , , ,</u>	21	3,172

SCHEDULE C (Form 1040)

Mama of proprietor

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2023

Department of the Treasury Internal Revenue Service 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.

Attachment Sequence No. 09

1401116		oovial booting	addaticy manifest (own)			
A RV F	Principal business or profession, including product or service (see instructions) Park	B Enter code	from instructions 721210			
С	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 2023? If "No," see instructions for limit on		(Promised			
н	If you started or acquired this business during 2023, check here					
ţ	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions					
J	If "Yes," did you or will you file required Form(s) 1099?					
	rt 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		68,610			
2	Returns and allowances		00/0/0			
3	Subtract line 2 from line 1		68,610			
4	Cost of goods sold (from line 42)					
5	Gross profit. Subtract line 4 from line 3		68,610			
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)					
7	Gross Income, Add lines 5 and 6	7	68,610			
Par	til Expenses. Enter expenses for business use of your home only on line 30.					
8	Advertising	s). 18	82			
9	Car and truck expenses (see 19 Pension and profit-sharing pl	in a second seco				
	instructions) 9 3,112 20 Rent or lease (see instruction	ns): (3466				
10	Commissions and fees 10 a Vehicles, machinery, and equipment					
11	Contract labor (see instructions) 11 b Other business property .					
12	Depletion		6,126			
13	Depreciation and section 179 22 Supplies (not included in Parespense deduction (not		80			
	included in Part III) (see 23 Taxes and licenses	23	3,039			
		34-				
14	Employee benefit programs a Travel					
15	(other than on line 19). 14 b Deductible meals (see instruction insurance (other than health) 15 2,300 25 Utilities		15,899			
16	Insurance (other than health) . 15 2,300 25 Utilities		10,000			
a	Mortgage (paid to banks, etc.) 16a 27a Other expenses (from line 48	***************************************	10,583			
b	Other b Energy efficient commercial to					
17	Legal and professional services 17 235 deduction (attach Form 7205	_ 1 . 1				
28	Total expenses before expenses for business use of home. Add lines 8 through 27b		46,159			
29	Tentative profit or (loss). Subtract line 28 from line 7		22,451			
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:	1 . 1				
	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 should be have a line 1 and instructions). Extends and trusts, enter an Enter 1041, line 3.	31	22,451			
	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,]	£a,60,17♥			
20	If you have a loss, check the box that describes your investment in this activity. See instructions.	,				
32	If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule	32a	All investment is at risk.			
	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.	32b	Some investment is not at risk.			
	If you checked 32b, you must attach Form 6198. Your loss may be limited.		ויקו מנ ווסה.			

гa	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory; a Cost b Lower of cost or market c	По	ther (attach expla	anation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing invite "Yes," attach explanation.		Yes	No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		THIRD CAN PLATE A LAND A L
36	Purchases less cost of items withdrawn for personal use	36		111111
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39	11 1001	
40	Add lines 35 through 39	40		0
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		0
Part	Information on Your Vehicle. Complete this part only if you are claiming calline 9 and are not required to file Form 4562 for this business. See the instruout if you must file Form 4562.			
43	When did you place your vehicle in service for business purposes? (month/day/year)	P P W W A &	, , , , , , , , , , , , , , , , , , ,	
44	Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used you	our vehic	le for:	
a	Business b Commuting (see Instructions)	: 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
47a	Do you have evidence to support your deduction?		Yes	No
ь Part	If "Yes," is the evidence written?			☐ No
Fart	Other Expenses. List below business expenses not included on lines 8–26,	mie Z/	b, or line so.	
Fuel fo	or equipment		a not reasonanaea	582
Garba	ge		MALTINIA THURSDAY AND	2,344
Intern	et			899
Posta	ge			19
Septic	pumping		····	754
Teleph	none			2,760
Custor	mer WiFi			960
Gravel	l & landscaping			2,106
Tools			2017-11107-1117 P.	159
48	Total other expenses. Enter here and on line 27a	48		10,583

SCHEDULE SE (Form 1040)

Self-Employment Tax

Attach to Form 1040, 1040-SR, 1040-SS, or 1040-NR.

Name of person with self-employment income (as shown on Form 1040, 1040-SR, 1040-SS, or 1040-NR)

OMB No. 1545-0074

Social security number of person

Attachment

Department of the Treasury Internal Revenue Service

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

with self-employment income Self-Employment Tax Note: If your only income subject to self-employment tax is church employee income, see instructions for how to report your income and the definition of church employee income. If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I. Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions. Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), 1a If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ. 1ь Skip line 2 if you use the nonfarm optional method in Part II. See instructions. Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order 22,451 3 22,451 3 4a 20,733 If line 3 is more than zero, multiply line 3 by 92,35% (0,9235). Otherwise, enter amount from line 3 Note: If fine 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions. 4b Q b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here Combine lines 4a and 4b. If less than \$400, stop; you don't owe self-employment tax. Exception: If less than \$400 and you had church employee income, enter -0- and continue. 4c 20,733 Enter your church employee income from Form W-2. See instructions for definition of church employee income Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-5b 6 20,733 6 7 Maximum amount of combined wages and self-employment earnings subject to social security tax 7 160,200 or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2023 Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$160,200 or more, skip lines 8a Unreported tips subject to social security tax from Form 4137, line 10 8d 160,200 9 Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 9 10 2,571 10 Multiply the smaller of line 6 or line 9 by 12.4% (0.124) 11 11 Multiply line 6 by 2.9% (0.029) 601 Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4, or 12 12 Form 1040-SS, Part I, line 3 3,172 13 Deduction for one-half of self-employment tax.

For Paperwork Reduction Act Notice, see your tax return instructions. **HTA**

Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),

Schedule SE (Form 1040) 2023

1,586

13

4797

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

OMB No. 1545-0184

2023

Attachment Sequence No. 27

Department of the Treasury Go to www.irs.gov/Form4797 for instructions and the latest information. Internal Revenue Service Name(s) shown on return Identifying number Enter the gross proceeds from sales or exchanges reported to you for 2023 on Form(s) 1099-B or 1099-S (or Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of

1a 15 Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (toss) 2 (a) Description (b) Date acquired (d) Gross allowed or basis, plus (c) Date sold Subtract (f) from the of property sales price attowable since Improvements and (mo., day, yr.) (mo., day, yr.) sum of (d) and (a) acquisition expense of sale 1985 Park Model SP 16 0 2.114 -1.251 7/1/1998 1/1/2023 Q ٥ 0 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 6 7 -1.251 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions . . . Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a 0 Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 0 0 0 Ō Loss, if any, from line 7 1.251) 11 11 12 12 Gain, if any, from line 7 or amount from line 8, if applicable 13 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 15 15 Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 17 -1.251 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip tines a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on 18a property used as an employee.) Identify as from "Form 4797, line 18a." See instructions Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 18b -1.251 (Form 1040), Part I, line 4.

8995

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

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

Attachment 55 Sequence No.

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Form8995 for instructions and the latest information. Your taxpayer identification number

Use th	d through from an agricultural or horticultural cooperative. See instructions. is form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$ intly), and you aren't a patron of an agricultural or horticultural cooperative.	364,200	if married			
1	(a) Trade. business, or aggregation name (b) Taxpayer identification number		(c) Qualified business income or (loss)			
i	Moonlight RV Park		8,282			
ii						
iii						
		1				
Ìν						
v						
2 3 4 5 6 7	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	\prod	1,298			
9 10	REIT and PTP component. Multiply line 8 by 20% (0.20)	10	1,298			
11	Taxable income before qualified business income deduction (see instructions)	0				
12	Enter your net capital gain, if any, increased by any qualified dividends					
13 14 15	(see instructions)	0 14	0			
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-	1	(0)			
	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than	17	(0)			

Form 8867

(Rev. November 2023)

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, 1040-PR, or 1040-SS.
Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074

For tax year
20 23

Attachment Sequence No. 70

Taxpayer Identification number

Taxpayer name(s) shown on return

Preparer tax identification number Preparer's name P00803882 Susan F Gilstrap Due Diligence Requirements Part I 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). AOTC X EIC CTC/ACTC/ODC HOH Yes Did you complete the return based on information for the applicable tax year provided by the taxpayer No N/A Х or reasonably obtained by you? 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-PR, 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 X 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 X 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.) X Did you make reasonable inquiries to determine the correct, complete, and consistent information? 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.). 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 X the amount(s) of the credit(s) List those documents provided by the taxpayer, if any, that you relied on: 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 X return is selected for audit? Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year? ĺΧ (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.) If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and

X

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Part I	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, or	o to Part	: {II.}	
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.)	Yes	No	N/A
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?			
¢	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 I	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	t claim C	TC, ACT	C,
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?	Yes	No	N/A
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 I	Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AO	ΓC, go to	Part V.)	
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?	d 	Yes	No 🗆
Part \	Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing sta	tus, go to	Part VI.)
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?		Yes	No .
Part V	// Eligibility Certification			
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and	lor 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.
 - 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).

15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and	Yes	
	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and complete?	X	

Department of the Treasury

Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

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

OMB No. 1545-0172

Sequence No. 179

Name(s) shown on return Identifying number Business or activity to which this form relates Sch C: 01 - RV Park Election To Expense Certain Property Under Section 179 Part Note: If you have any listed property, complete Part V before you complete Part I. Total cost of section 179 property placed in service (see instructions). 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Dollar limitation for tax year. Subtract line 4 from line 1, If zero or less, enter -0-. If married filing separately, see instructions 6 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions. 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property, Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2023 1.615 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property year placed (business/investment uso (e) Convention (f) Method (g) Depreciation deduction period only-see instructions) in service 19 a 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L S/L MM property 27.5 yrs. Nonresidential real 39 yrs. MM S/L property MM S/L Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 12 yrs. S/L **b** 12-year c 30-year 30 yrs. MM S/L d 40-year 40 yrs. S/L Part IV Summary (See instructions.) 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 1,615 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Par			nclude autom			n other	vehicle	s, сег	tain air	craft, a	ind pro	perty	used fo	or		
			eation, or am													
			for which you a								e expe	กรe, co	mplete	only 24a	,	
			ugh (c) of Section													
			n and Other In													
24a	Do you have evidence	to support the	business/investme	nt use ci	aimed?	X Yes	No.	- 2	24b f"	Yes," is	the evid	lence w	itten?	X Yes	No	
	(a)	(b)	(c)		(d)	ļ <u>.</u> .	(e)		(#)		(g)		(h)		(1)	
	Type of property	Date placed	Business/ investment use	Cost or	other basis	(busine	lor deprecial 988/ Investm		?ecovery	Me	thod/		eciation	Elected s	ection 179	
	(list vehicles first)	in service	percentage				use only)		period	Con	vention	ded	luction	c	ost	
25																
	the tax year and us	sed more that	n 50% in a qual	ified bu	isinėss (ıse. See	e instruci	tions .			25	-A		1,000,000		
26	Property used mor Ford PU				use:	<u> </u>				1		1		T		
	Suzuki	1/1/2021	100.00%			 		+		-		 				
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27	Property used 50%	or less in a	l qualified busine	ee nee					···	1		1				
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			%					-		S/L -						
			%			1				S/L -				1		
28	Add amounts in co	lumn (h), line	s 25 through 27	Enter	here an	d on lin	e 21, pa	ge 1	. , , ,		28		0			
29	Add amounts in co												29		O	
			Sec	tion B-	—Inform	nation o	n Use c	f Vehi	cles							
	lete this section for ve													2 \$		
to you	ir employees, first ans	wer the questic	ons in Section C t	o see if	you mee	t an exc	eption to	comple	ting this	section	for thos	e vehicle	ės. 			
				1	(a)		b)	i	(c)	1	d)		(0)		f)	
30		al business/investment miles driven during						Veh	ricle 1			icte 4	Vehicle 5		Vehi	ide 6
	the year (don't include				3,767		984					<u> </u>				
31	Total commuting mile	_	-					ļ				ļ				
32	Total other personal (-	• •							!						
	miles driven									<u> </u>		ļ		<u> </u>		
33	Total miles driven dur				2 727		984					Ì				
34	lines 30 through 32 Was the vehicle avail			Vaa	3,767	Yes	·	Yes	No	Yes	No	Yes	No	Vaa	1 1	
J-4	use during off-duty ho			Yes X	No	X	No	105	NO	162	INO	165	NO	Yes	No	
35	Was the vehicle used				<u> </u>				-			 	<u> </u>	 		
**	5% owner or related ;			Х	i i	X			-		}					
36	Is another vehicle ava		1	X		X	···	-	1							
			Questions for E		ers Wh		de Vehi	cles fo	r Use b	y Their	Emplo	yees				
Answ	er these questions to									-	-		/ho are:	ı't		
	than 5% owners or r									·						
37	Do you maintain a wri	itten policy stat	ement that prohit	oits all p	ersonal	use of ve	ehicles, in	cluding	commu	ting, by				Yes	No	
	your employees? .															
38	Do you maintain a wri	_														
	employees? See the i												,			
39	Do you treat all use of	•											,			
40	Do you provide more															
44	use of the vehicles, ar															
41	Do you meet the requi Note: If your answer to												١	1	er en til klader en en en	
Part			U, 0141 IS 1ES,	dont co	mpiere	section t	D IOI THE C	TOVELEC	venicies	3.				<u> </u>	(A. A. C. B. C. L.	
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		a) on of costs		Onto a	(b) madisation		(c) ortizable ad	mount	Code s		,	(o) Amortizatio		Amortization	-	
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42	Amortization of cost	s that begins	during vour 202			instruc	ctions):	•	,					· · · · · · · · · · · · · · · · · · ·		
	and the state of t	wo dirito	maring Judi 202	y					T							
												***************************************	T. T			
43	Amortization of cost	s that began t	pefore your 202	3 tax v	еаг								43			
	Total Add amounts												44		Ω	

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- I		Dale	,	Business	Cost or								Con	Prior Accurn.	2023	2023
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Deprec	Depreciation Detail								3	Clean	3	PICUER	2002	173, DUITES	reprec.	Deprec.
MACRS	MACRS deductions for prior years (Live 17)	Line 17)														
	Showerkouse	5/1/1996	R-5	100.00%	\$0,000	ð	0	0	0	10,000	39.0	SL/GDS	MM	6.826	338	7 (183
	Garages	5/1/1996	R 5	100:00%	14,000	Ð	0	Û	0	14,000	39.0	SUGDS		9.558	359	0.017
	Stable	5/1/1996	R-5	100.00%	2,500	0	•	0	0	2,500	39.0	SUGDS	MM	1.707	79	
	Bam 5000°	5/1/1996	ξ. Sp	100.00%	20,000	0	0	0	0	20,000	39.0	SEJGDS	景	13.654	513	14.487
	Mell House	5/1/1996	R-5-	100.00%	2,000	0	~	0	Ō	2,000	39.0	SUGDS		1365	, tr	1 446
	1973 van Uyke	7/1/1998	o; o;	100.00%	3,617	0	0	0	Ö	3,617	39.0	SUGDS	4	2389	5 8	7.363
	1965 Perk Model SP 16	7/1/1998	or S	100.00%	3,365	0	0	0	9	3,365	39.0	SUCOS	2	2.110	9 7	2 414
	Rental Itali SP 12	7/1/1999	÷.	100.00%	1,167	0	0	O.	Ð	1,157	39.0	SUGDS	-	7102	. E.	232
	France 3043 Hay 211	10/1/2001	œ.	100.00%	6,650	0	0	0	D	6,650	39.0	SUGDS	1	3617	17.5	2 789
	Transports of the second of th	7/1/2:003	φ QC	100.00%	2,729	0	0	C.	Đ	2,729	39.0	SUGDS	3	1357	1	1,432
	Storage Building	7/1/2010	e: S	100.00%	3,812	0	0	0	0	3,812	36.0	SUGDS	W	1,218	<u>.</u> =#	1.222
	Total MACRS deductions for prior years (Line 17)	onos yeass (Line	17)	ł	69,840	0	0	0	0	69,840				44,388	1,615	46,003
	Cultivity Description			ļ									,			
	Suprotal Depreciation			1	69,840	0	Q	Û	0	69,840				44,388	1,615	46,003
Listed	Listed Property															
Listed p	Listed property with more than 50% business use (Line 25 and 26) 2001 Ford PU 11/2021 V-7 100.00	business use 1/1/2021	(Line 25 V-7	and 26) 100.00%										<i>IS</i> : ⊕	1) Ski mileane	-
	20 <u></u> \$1 Suzuki	1/1/202\$	> \s\	100.00%											Std mileage	
	Total listed prop with > 50% business use	usiness ase		1 1	0	Ð	0	0	0	0				0	0	9
	;			ı												
	Subtotal Listed Property	£.		1	0	0	0	0	G.	0				Û	Q	0
	Total Depreciation and Amortization	d Amortizati	<u>6</u>	•	69,840	0	0	0	0	69,840				44.388	1.615	45 (313
	-			1												

Summary of Unadjusted Basis of Qualified Property (4562)

12/31/2023

Summary of Qualified Property by Activity

Detail	of Qua	lified	Property

/			Date In	Recovery	Years in	Total Cost	Business/Time	Unadjusted
	Activity	Asset Description	Service	Period	Service	or Basis	Use Percent	Cost or Basis
2	Sch C; 01	1985 Chevy Snow Plow	1/14/2014	5.0	10	1,500	100.00%	1,500
3	Sch C: 01	1951 Advertising Truck	1/1/2014	5.0	10	6,000	100.00%	6,000
4	Sch C: 01	Showerhouse	5/1/1996	39.0	28	10,000	100.00%	10,000
5		Garages	5/1/1996	39.0	28	14,000	100.00%	14,000
6	Sch C: 01	Stable	5/1/1996	39.0	28	2,500	100.00%	2,500
7	Sch C: 01	Barn 5000'	5/1/1996	39.0	28	20,000	100.00%	20,000
8	Sch C: 01	Well House	5/1/1996	39,0	28	2,000	100.00%	2,000
9	Sch C: 01	1973 Van Dyke	7/1/1998	39,0	26	3,617	100.00%	3,617
10	Sch C; 01	Rental Trail SP 12	7/1/1999	39.0	25	1,167	100.00%	1,167
11	Sch C: 01	Trailer 3643 Hwy 211	10/1/2001	39.0	23	6,650	100.00%	6,650
12	Sch C: 01	Trailer SP 11	7/1/2003	39.0	21	2,729	100.00%	2,729
13	Sch C: 01	2011 Suzuki	1/1/2021	5.0	3	0	100.00%	0
14	Sch C: 01	2001 Ford PU	1/1/2021	5.0	3	0	100.00%	0

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12/31/2023

Z623 Accum. Deprec.	1,212	1,212 101 3,500 700 1,900 1,296	308 2,865 800 800 1,100 2,786 6,000 6,000	23,894	90,500 4,463 4,068 99,031	7,082 9,917 1,771 14,167 1,416 2,362 2,114 732 1,432 1,222
2023 /	.	0 0 0 0 0 0	00000000	0 0 0	0 0 0	256 253 253 253 253 253 254 255 255 255 255 255 255 255 255 255
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	1,212	1,212 100 1,090 1,296 7,296	308 800 800 11,100 0 3,000	3,264 12,524 2,999 18,787	30,500 4,463 4,068	10,000 14,000 2,500 20,000 2,600 3,617 3,365 1,167 6,650 2,729
Recovery Basis				— 400 400	8 5	+ + -
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		0 000000	00000000	000	996	5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -
Credit						
Sec. 179 Deduction		000000			000	****
Cost or Other Basis	1,212	1,212 1,000 1,000 1,296 1,296 410	308 2,865 8,00 1,10 1,500 1,500	3,264 12,524 2,999 18,787	99,530 4,463 4,068 99,031	10,000 14,900 20,000 2,600 3,617 3,365 1,167 6,650 2,729 3,812
Business Use %	100.00%	100.00% 100.00% 100.00% 100.00% 100.00% 100.00%	100.00% 100.00% 100.00% 100.00% 100.00%	100.00% 100.00% 100.00%	100.00% 100.00%	100.00% 100.00% 100.00% 100.00% 100.00% 100.00% 100.00%
Assel	£1 F.5	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	*	Z Z Z	R-2 R-2 R-2	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7
Date Placed in Service	i <mark>sted propert</mark> 771/1999 8	571/1996 571/1996 571/1996 571/1996 571/1996 571/1996	5717906 7712000 7712000 4712001 7752011 5752014 17472014	10/10/1995 10/10/1995 12/31/2009	5/1/1996 5/1/1996 5/1/1996	real estate 57/1996 57/1996 57/1996 57/1996 57/1998 77/1/998 77/1/998 77/1/998
Description of Property """ indicates DISPOSED	5-yr Computers and peripherals fnot listed property) Computer/Scanner/Printer 7/1/1999 Total: 5-yr Commenters (not listed in	iotat: 5-yr Conputers (not kister <u>5-yr Distributive Trades & Services</u> Ulfirty Trailer Tractor ""WW Pickup Irrigation Pump Signs Playgroand Equipment Picnic Tables	Lawn Mower Skagg "Jeep "1958 International 4x4 "1958 International 4x4 Itay Build Sickle Mower Hot Tub 1951 Advertising Track 1995 Chevy Seow Plew Todat 5-vr Distrib Trackstockervies	Land (42000-38736 DG&Tim) Land RV Park 12 Acres adj Survey and Planning Dept Total: Land	15-yr Land Improvements RV Park Improvements Pedastal Electrical Update Welf Total: 15-yr Land improvements	39-yr Nonresidential and commercial real estate Showerhouse 57/1996 Garages 57/1996 Stable 57/1996 Barn 500° 57/1996 Weif House 57/1996 197/1996 77/1998 Refulal Trails SP 12 77/1998 Realial Trails 3643 Hwy 211 101/2001 Trailer SP 11 77/12003 **Storage Building 77/12016
E 8	5-yr Cor	S-yr Disi		Land	15-41.14	39-yr M

122CES L	ASSETS BY CHASSIFICATION - SCH C. UT	25.67												12/31/2023			
_				1													
	nescribilon of	Pale		Business	Cost or								Ś	Prior Armen	5,002	2000	
Herr	Property	Placed	Asset	22 23	Other	Sec. 179		Special	Salvane	Recovery	Parnuan	295	nonting	MARKET TO	7707	2023	
ž	"** indicates DESPOSED	In Service Code	900	썅	Bass	Deduction	Credit	Allewance	enley.	Racie	•	Doing Maked		wmnee		ACGUM.	
5 yr Pas	5-vr Passenger vehicles (excluding certain Incks and vans)	certain Inucks	and vans	13				South Company	40100	cicpn	Į.	Income Mean	BCO COSE	175, Sonus	Deprec	Depres	
	2011 Suzuki	1/1/2021	V-5	V-5 100.00%	0	0	0	.		0	0 5.0	rs Si	¥	G	-	-	
	Total: 5-yr Pass veh (excl some trks/vans)	ne trks/vans)		I		0		-			[4				'		
		•		I	,	>	3	2			5			0	0	0	
5-yr Lig	5-yr Light trucks, vans, and autos built on a truck chassis	ailt on a truck	chassis														
	2001 Ford PU	1712021	Y-7	100.00%	C	0	٥	Ū	_	Ęw.,	0 50	<i>5</i> 7	7	C	C	-	
	Total: 5-yr Truck, van, auto on trk chassis	ifik chassis		I	0	ð		0			i Le			7		⇒ 	
				ĺ				>			s!			0	0	0	
	Sub Totals				212,764	0	0	6.536	****	ያር <i>ፕ ር</i> በር	a			000			
	Less: Disposed Assets			⊣	9,477)	f. 0] 1	(0)		_	0) (9,477	? £			5,528 J	1,615	170,140	
	creamy totals			ti	203,287	0	G	6,536		93.251	ł , -			187 807			
											JI			106,031	16,00,1	104,014	

(Rev. January 2021)

Department of the Treasury

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879.

Internal Revenue Service		formation.		
Submission Identific	eation Number (SID) 9326892024073np45tet			
Taxpayer's name		Social security	\ unuper	
Spouse's name		Spouse's socia	at security number	·T
Tax F	Return Information — Tax Year Ending December 31, 2	023 (Enter year	_` 'you are auth	orizing.)
Enter whole dollars	only on lines 1 through 5.			
	S filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
	s income			16,39-
				3,17
	ne tax withheld from Form(s) W-2 and Form(s) 1099			806
	vant refunded to you		1 _ 1	2 44
5 Amount you o	we ayer Declaration and Signature Authorization (Be sure y	ou got and keep a or		2,11
my knowledge and bel return (original or ame to send my return to the for any delay in process Agent to initiate an AC payment of my federal authorization is to rempayment, I must contain business days prior to taxes to receive confid personal identification Electronic Funds Without Taxpayer's PIN: cheexists as my signat I will enter my	Prairie Creek Bookkeeping & Tax Services to e ERO firm name ure on the income tax return (original or amended) I am now authoriz y PIN as my signature on the income tax return (original or amended tering your own PIN and your return is filed using the Practitioner PIN	It I above are the amounts to der, transmitter, or electron ason for rejection of the transorize the U.S. Treasury and account indicated in the tax solid institution to debit the eleminate the authorization. In requests must be received in the processing of the tothe payment. I further achieved in the processing of the payment of the payment of the payment of the payment of the payment. I further achieved in the payment of the payment of the payment. I further achieved in the payment of the payment of the payment. I further achieved in the payment of the payment of the payment. I further achieved in the payment of the payment of the payment. I further achieved in the payment of the payme	rrom the income income inc return original income i	tax tax tar (ERO) te reason Financial ware for unt. This tel) a 1 2 ment of the able, my its, but izeros only t III
Spouse's PIN: chec	•			
X I authorize		nter or generate my PIN	Enter five digit	
	ERO firm name		don't enter ali	
as my signati	ure on the income tax return (original or amended) I am now authoriz	ing.		
I will enter my if you are ent below.	y PIN as my signature on the income tax return (original or amended ering your own PIN and your return is filed using the Practitioner PIN ↑	I method. The ERO must	t complete Part	only till
Spouse's signature	▶ 4	Date ► 04-6	01-20=	29
opouse a signature	Practitioner PIN Method Returns Only—cor			
Part III Certif	ication and Authentication—Practitioner PIN Method On			
	ter your six-digit EFIN followed by your five-digit self-selected PIN.	93268964070	`	
	1 and sight at his followed by 100, 110 digit out of addition in the		ı't enter all zeros	
authorized to file for tax	numeric entry is my PIN, which is my signature for the electronic individual cyear indicated above for the taxpayer(s) indicated above. I confirm that I a actitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file P	income tax return (original om submitting this return in a	or amended) I ar accordance with	m now . the
ERO's signature 🕨		Date 🕨	3/13/2024	
- to a substitution	ERO Must Retain This Form — See Inst			
	Don't Submit This Form to the IRS Unless Regu			

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) Taxpayer's name Social security number Spouse's name Spouse's social security number Tax Return Information - Tax Year Ending December 31, | Part | | 2022 (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, Adjusted gross income 66,816. Total tax 7,644. Federal income tax withheld from Form(s) W-2 and Form(s) 1099 7,561. Amount you want refunded to you 4 5 83. Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II 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 X Lauthorize Colette B Vaughn, CPA, PLLC to enter or generate my PIN as my ERO firm name Enter five digits, but signature on the income tax return (original or amended) I am now authorizing. don't enter all zeros 🔟 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 > 04/17/2023 Spouse's PIN: check one box only X lauthorize Colette B Vaughn, CPA, PLLC to enter or generate my PIN 191 7 4 2 as mv ERO firm name Enter five digits, but signature on the income tax return (original or amended) I am now authorizing. don't enter all zeros 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 > 04/17/2023 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. 7 1 5 8 5 2 4 1 9 7 7 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 ► Colette B Vaughn, CPA, PLLC Date > _ 04/17/2023 **ERO Must Retain This Form - See Instructions** 219995 04-01-22 Don't Submit This Form to the IRS Unless Requested To Do So

L.HA

Schedula	1	Form	1040)	2022

Page 2

17	Educator expenses						
						111	
	Contain business expenses of reservists, performing artists, and fee-basis govern-	ment	officials	i. Attach		ĺ	
	Form 2106					12	
3	Health savings account beoutton. Attach Form 8889					13	
4	Moving expenses for members of the Armed Ferces, Attach Form 3903					14	
5	Deductible part of self-employment tax, Attach Schedule SE					15	1,926
6	Seri-employed SEP, SIMPLE, and qualified plans					16	THE TRANSPORT OF THE PARTY OF T
7	Self-employed health insurance deduction					17	
8	Penalty on early withdrawal of savings					18	
98	Alimony paid					19a	
b	Recipient's SSN			1		J. T	
C.	Date of original divorce or separation agreement (see instructions):					1	
o	IHA deduction					20	
1	Student loan interest deduction					21	
2	Reserved for future use					22	
3	Archer MSA deduction					23	MANAGE DE LA CONTRACTION DEL CONTRACTION DE LA C
4	Other adjustments:	1	4	,			
ä	Jury duty pay (see instructions)	24	1 0			} }	
b	Deductible expenses related to income reported on line BI from						
	the rental of personal property engaged in for profit	24	ь			1	
C	Nontaxable amount of the value of Olympic and Paralympic		· · · · · · · · · · · · · · · · · · ·	- minimum - mini			
	medals and USOC prize money reported on line 9m	24	ber i.				
ď	Referestation amortization and expenses	24	d		emeranous manos		
ø	Repayment of supplemental unemployment benefits under the		-				
	Trace Act of 1974	24	أخ		ĺ		
f	Contributions to section 501(c)(18)(D) ponsion plans	24	_		$\neg \neg$	1	
æ	Contributions by certain chaptains to section 403(b) plans	24				ı	
h	Attorney fees and court costs for actions involving certain	1	3		\dashv	- 1	
	unlawful discrimination claims (see instructions)	24			i	- 1	
Ι.	Attorney fees and court costs you paid in connection with an			WARTHUR BRIDE		l l	
	award from the IAS for information you provided that helped the	i			ĺ	- 1	
	IRS detect tax law violations	24			}	- 1	
	Housing deduction from Form 2535	24				1	
k i	Excess deductions of section 67(a) expenses from Schedula K.1	24	4			- 1	
		1			ŀ	ı	
z	(Form 1041)	249	<u> </u>				
•	Other adjustments. List type and amount,		1		i		
	THE RESIDENCE OF THE PROPERTY	١			1		
;	Intel other original Add lines 245 than 104	243				05	
į	Total other adjustments. Add lines 24a through 24z					25	WANTED TO THE PARTY OF THE PART
- 7	Add ilnes 11 through 23 and 25. These are your adjustments to income. Enter ners and on Form 1040 or 1040 SP. line 10, or Form 1040 NR, the 10s				- 1	26	1,926.

Schedule 7 (Form 1040) 2022

SCHEDULE 2

(Form 1040)

Additional Taxes

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information. 2022

Opparament of the Treasury Internal Pavenue Service Go to www. Natifield's Shown on Form 1040, 1040-SR, or 1040-NR

Your societ accords number

Par	tt tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	excess severice premium tax creek repayment. Attach Form 8962	2	
Per	Add lines 1 and 2. Enter here arid on Form 1040, 1040-SR, or 1040-NR, line 17	3	0.
4	Self-employment tax. Attach Schedule SE	Tall	3,852,
5	Social security and Medicare tax on unreported tip income. Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on iRAs or other titx-favored accounts. Attach Form 5329 if required		
9	ff not required, check here Household employment taxes. Attach Schedule H	9	
10	Hepayment of Irrshime homebuyer credit, Attach Form 5405 if required	10	
11	Additional Medicare Tax, Attach Form 8959	33	
12	Net investment income tax. Attach Form 8960	12	
13	Insurance from Form W-2, box 12	13	11 111
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales priorit over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
нΑ	For Paparwork Reduction Act Notice, see your tax return instructions.		<u>ntinued on page 2)</u> 2 (Form 1049) 2022

Par	t II Other Taxes (continued)				Page 2
17	Other additional taxes:			T	
B	Recapture of other credits. List type, form number, and amount				
		17ar		1	
Þ	Recapture of federal mortgage subsidy, if you sold your home			1 1	
	see instructions	170		1	
Œ	Additional tax on HSA distributions, Attach Forni 8889	17c		1 1	
đ	Additional tax on an HSA because you didn't remain an eligible				
	ndividual. Attach Form 8889	170		1 1	
*	Additional tax on Archer MSA distributions, Attach Form 8653	170			
1	Additional tax on Medicare Advantage MSA distributions. Attach				
	Form 8853	171			
g	Recapture of a charitable contribution deduction related to a		· · · · · · · · · · · · · · · · · · ·		
	fractional interest in tangible personal property	170	ì		
h	Income you received from a nonqualified deferred compensation	17.01		1	
	plan that fails to meet the requirements of section 409A			ì	
à	Compensation you received from a nonquelified defened	17h	TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT	- 1	
	compensation plan described in section 457A			İ	
	Castin 79/400	171		1	

171

17k

171

17m

17n

170

17p

172

Section 72(m)(5) excess benefits tax

Gokleri parachule payments

Tax on accumulation distribution of trusts

corporation

from, and dispositions of, stock of a section 1291 fund

Any interest from Form 8621, line 24

Total additional taxes. Add lines 17a through 17z

Excise tax on insider stock compensation from an expatriated

Look-back interest under section 167(g) or 460(b) from form 8697 or 8866

Tax on non-effectively connected income for any part of the year you were a nonresident allers from Form 1040-NR

Any interest from Form 8621, line 161, relating to distributions

Any other taxes. List type and amount:

18

18

19

20

21

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenus Service

Additional Credits and Payments

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to wave its gov /Form1040 for instructions and the latest information.

OMB No. 1545-0074

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

1	Foreign tax credit. Attach Form 1116 if required			i t	1
2	Credit for child and dependent care expenses from Form 2441, line 11. Attack	· ·······			
	Form 2441			2	1
3	Education credits from Form 8863, line 19			1 72	
4	Retirement savings contributions credit. Attach Form 8880			4	96
5	Residential energy credits. Attach Form 5695		/. /t.\	5	
5	Other nonrefundable credits:	I	1		
а	General business credit. Attach Form 3800	5n	1		
Þ	Credit for prior year minimum tax. Attach Form 8801	6b	j		
C	Adoption credit. Attach Form 8839	60	1		
đ	Credit for the elderly of disabled. Attach Schedule R	Get			
0	Alternative motor vehicle credit. Attach Form 8910	64			
1	Qualified plug-in motor vehicle credit. Attach Form 8936	61	e e e e e e e e e e e e e e e e e e e		
9	Mortgage interest credit. Attach Form 6396	60			
h	District of Columbia first-time homebuyer credit, Attach Form 8850	54			
i	Outsified electric vehicle credit. Attach Form 9833	5		amunenamus (
į	Alternative feel vehicle refueling property credit. Attach Form 8911	6;			
k	Credit to holders of tax credit bonds. Attach Form 8972	6k			
1	Amount on Form 8978, line 14. See instructions	61			
Σ	Other nonrefundable credits. List type and amount:				
		Sz	•		
•	Total other nonrefundable credits. Add lines 6a through 6g		LANCE OF THE PARTY	7	
,	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-58, or 1040-N	77			THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O
	Sne 20			Lal	96.
				Normaliana.ha	(continued on page 2)

If Other Payments and Refundable Credits Net premium tax credit, Attach Form 8962		9	
Amount paid with request for extension to file (see instructions)		10	
Excess social security and tier 1 RRTA tax withheld		11	
Credit for federal tax on fuels. Attach Form 4136		12	
Other payments or refundable credits:	· · · · · · · · · · · · · · · · · · ·		
Form 2439	135		
Credit for qualified sick and family leave wages paid in 2022 from			
Schedule(s) H for leave taken before April 1, 2021	136]]	
Reserved for fulure use	13c	MUNICIPALITY AND A STATE OF THE	
Credit for repayment of amounts included in income from earlier			
years	134		
Reserved for future use	13e		
Deferred amount of net 965 tax liability (see instructions)	137		
Reserved for future use	130		
Credit for qualified sick and family leave wages paid in 2022			
from Schedule(s) H for leave taken after March 31, 2021, and			
before October 1, 2021	13h		
Other payments or refundable credits, List type and amount:	· · · · · · · ·		
	132	1 1	

line 31

Schell Par	tule C (Form 1040) 2022 THI Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c	Other ((artach explana)	rion)
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	i		
36	Purchases less cost of items withdrawn for presonal use	36		
37	Cost of tabor. 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	[]		
42	Cost of goods sold. Subtract line 41 from time 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 and are not required to file Form 4562 for this business. See the instructions for line 1: file Form 4562.	expe 3 to fi	enses on lir ind out if ye	ne 9 ou must
43 44 #	When did you place your vehicle in service for business purposes? (month/day/year) Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for; Business			
45	Was your vehicle available for personal use during off-duty hours?			☐ No
46	Do you (or your spouse) have another vehicle available for personal use?		Yes	◯ No
47 z	If Ves to the sudgress written?		Yes	No.
	V Other Expenses. List below business expenses not included on lines 8-26 or line 30.		708	No
Fuel	for equipment	_		887.
Gart	age	_ [2,204.
	######################################			899.
ost		_		107.
Sept	ic pumping	_		1,496.
Cele	phone			3,016.
ust	omer WiFi			960.
Fay	el & landscaping	_		965.
		- -		
48	Total other expenses, Enter here and on line 27a	48	2.0),534.
		ada . A		40.401.000

SCHEDULE SE (Form 1040)

Self-Employment Tax

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name of person with ---

(as shown on Form 1040, 1040-SR, or 1040-KR)

Social security number of person with self-employment income

Pan	. Self-Employment Tax	C) (1) FEE	
	If your only income subject to self-employment tax is church employee income, see instructions for how to repr		
and th	e definition of church employee income.	ort your	income
A	If you are a minister, member of a religious order, or Christian Science practitioner, and you filed Form 4361, but		
	\$400 or more of other net earnings from self-employment, check here and continue with Part I	il you h	ad ,
Skip lir	nes 1a and 1b if you use the farm optional method in Part II. See instructions.		
1.5	Net farth profit or (loss) from Sch. E. line 24 and 5	1. 1	
	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve	13	
ь	Program payments included on Schodule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH		
Skip lir	ie Z if you use the nonfarm optional method in Part II, See instructions.	16	
2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A		
_	(other than farming). See instructions for other income to report or if you are a minister or member		
	of a religious order	_	07 050
3	of a religious order See Statement 5 Combine lines 1s, 1h, and 2	2	27,259
4a	Combine lines 1s, 1b, and 2 If tine 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from tine 3	3	27,259
***	Note: If line 4a is less than \$400 due to 5	4a	25,174
ь	Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions		
-	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here.	45	
_	Combine lines 4a and 4b. If less than \$400, step; you don't owe self-employment fax. Exception: If	- 1	
5a	less than \$400 and you had church employee income, enter 0- and continue	4c_	25,174.
0.0	Enter your church employee income from Form W.2. See Instructions for	- 1	
ь	definition of church employee income	}	
6	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter :0-	5b	WINDOWS AND ADDRESS OF THE PARTY OF THE PART
7	Add lines 4c and 5b	6	25,174.
,	Maximoni amount of compared wages and self-employment eximings subject to social security tax or	- 1	
	the 6.2% portion of the 7.85% railroad retirement (tier 1) tax for 2022	. 7	147,00
ਝੌੜ	Total social security wages and tips (total of boxes 3 and 7 on Forms) W2)		
	and railroad retirement (tier 1) compensation. If \$147,000 or more, skip lines	- 1	
	95 through 10, and go to line 11 8a 33,342.		
ь	Unreported tips subject to social security tax from Form 4137, line 10 8b		
£	Vages subject to social security tax from Form 8919, line 10		
₫.	Add lines 8a, 8b, and 8c	8d	33,342.
	subtract line on from site /. It zero of less, enter -Q- here and on line 10 and on to line 1.1	9	113,658.
10 i	dultiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	3,122.
17 9	numply line 6 by 2.4% (0.029)	11	730.
146 -	remembroyment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1640), tine 4	12	3,852.
13 E	Peduction for one-half of self-employment tax.		
١	Aultiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	ne 15		
art ii	Optional Methods To Figure Net Earnings (see instructions)		
гт Ор	tional Method. You may use this method only if (a) your gross farm income wasn't more than		
، 060, د	r (b) your net larm profits " were less than \$6,540.	- 1	
4 N	taximum income for optional methods	14	6,040
9 6	inter the smaller of two-driftes (2/3) of gross farm income (not less than zero), or \$6.040. Also, include	1	
- 11	es amount on the 4b above	15	
11191111	Sphional Method. Too may use this method only it is your net portfarm profits were less than \$6.540		
그 최목이 1	ess than 72.189% of your gross nonform income. I and (b) you had not environs from self-employment		
at lease	\$400 in 2 of the prior 3 years. Contion: You may use this method no more than five times.	1	
an advance.	. Manual II	16	
s s			
s s	hter the smaller of: (wo thirds (2/3) of gross gentarin income front less than zero), or the amount or	- 1	
8 S 7 E 181	ie 16. Also, include this amount on line 4h above	,,	
S S 7 E 6r om Sch	hter the smaller of: (wo thirds (2/3) of gross nonfarm income *(not less than zero) or the amount on le 16. Also, include this amount on line 4b above F, line 9, and Sch. K-1 (Form 1065), box 14, code 8. F, line 9, and Sch. K-1 (Form 1065), box 14, code 8. F, line 9, and Sch. K-1 (Form 1065), box 14, code A - minus the amount *From Sch. C, tine 31; and Sch. K-1 (Form 1065), box 14, code A - minus the amount	17 55), box	74. code A.

Depreciation and Amortization (including information on Listed Property) Attach to your tax return. SCHEDULE C- 1

Department of the Treasury Internal Revenue Barvice Name(s) shawn on return

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

| Dismess or activity to which this form relates

OM8 No. 1545-0172

			pa c	onlight	TA LOT	K.	
Fr Car & all Pierents	1 10 Expense Certain Prop	erty Under Section	179 Note: If you have any	listed property,	complete Pa	rt V before	you complete Part I.
1 Maximum əmd	ount (see instructions)					1	
2 Total cost of s	ection 179 property pla	ced in service (se	e instructions)			2	
3 Threshold cos	l of section 179 propert	y before reduction	n in Amitation				
4 Reduction in li	mitation. Subtract line (3 from line 2. If ze	ro or less, enter -0-			4	
5 Dollar Drollsbon for	ton year. Subtract fine I from to	e 1. If zero ar less, ente	e -Gr. If married likely productively, was	r matrixitions		- 4	
6	(в) Description of p	× caes ty		street the thirty	(c) Elocied	onst.	
							7
	The state of the s		A 1/10/2014				† .
	The state of the s						₫
							†
7 Listed property	r. Enter the amount from	0 line 29					"
8 Total elected c	ost of section 179 nmo	env. Add amount	s in column (c), lines 6 and	1		8	1
9 Tentative dedu	ction. Enter the smaller	r of line 5 or line 4	3	e de la compania de Alfredo Maria	`	}	
10 Carryover of di	sallowed deduction from	Titles 13 At anno 2	2021 Form 4562	and the state of the said	giperatura da la coma Paga	10	
11 Business incor	ne limitation. Enter the s	males of busines	s income (not less than se				THE RESERVE THE PROPERTY OF THE PARTY OF THE
12 Section 179 ex	nease deduction Add t	ines Dans to ha	t dan't enter more than lin	10) Or mad 3		11	
13 Carolover of di-	sallowed deduction to 2	OP Addison C.	t pan tenter more plen so	Tan I		12	
Note: Don't use Pa	art II or Part III below for	listed process to	and 10, less line 12	1.34			I
Part II Speci	at Decreciation Albania	bros Other D	wed, ose ren v.	do. 1/10 h 2 m2 m 2 m 2 m 2 m			
	isting allowance for aug	Ure and Other D	epreciation (Den't includ	se secen proper	X-1		
the feet year	ation anowance for qua	med broberty (off	ner than listed property) pl	aced in service	บนเกล		-
the tax year				·····		14	
to exchants analist	tro section realist) ere	ection		goji marazini	rion y manor	15	
	ion (including ACRS)					16	
A COLUMN TO A STATE OF	o Democration (Don (reluge isted of	perty. See instructions.)				
7 MACRS deduct 8 if you are electing to	ions for assets placed in gaus any material according engine	o service in tax ye	Section A are beginning before 2022 to one or more general asset according	ints. Check here		17	1,788
7 MACRS deduct 8 thyou are electrical to	ty bugs tery trategor placed in servi	Placed in Servic	ars beginning before 2022 the one or more general asset according to the control of the control	ints, check here Isling the Gene			
B If you are electricity to	Section B - Assets Section B - Assets asion of property	the disting the tax pear in	ars beginning before 2022	nts, check here			
B If you are electricity to	Section B - Assets Section B - Assets asion of property	Placed in Servic (b) Month and year placed	are Deginning before 2022 the are or more general asset accored to the Common 2022 Tax Year (6) Gasts for derrection (Dispersion of the Common Common of the	Ising the Gene	ral Deprecia	tion Syste	m
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360001 A	- nabuccian	on and Other	· knior	mation (C	Caution	s; See th	e instruc	tions for	න් වර්ගම	r passer	ger suit	mobiles.	}	
24a Do you have evidence to			ent use	cisimeci?		Yes	No	245 11 *	Yes.* is	the evid	jonge wri	tten?	Yes	Ţ
(e) Type of property (list vehicles first)	(b) Date placed in service	(c) Business investmen vse percents	ige	(d) Cost o other ba:	Sit	(d Basus for de (bsasknessufe unid s	rymphroent rymphroent rymphroent	(f) Recovery period	Co	(p) lethod/ avention		(h) reciation duction		(i) Slecto tion
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used more than 50% in	ı a cualified b	usinesa use .					o de la constanta	463 (mu) 2 - 1 - 1 - 1		. 25	1		l	
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28 Add amounts in column) (n), lines 25 :	intondiv 52' E	oter he	अंद भाग्य छ	n line 2	1, page 1			· · · · · · · · · · · · · · · · · · ·	. 28	<u> </u>	*********		
29 Add amounts in column	1 (9, tine 26, te	Uter park and	on line	7, page	1	والمتعادة والمتعادة والمتعادة	incasensia.	ممتندة ممايية				29_		
Complete this section for ve						n on Use			14					
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O Total business/investment			. V	ahicle	v	encle	V.	nicie		nicie 1	-	licie 2	Ve	hick
year (don't include commu	ting miles)								1	<u>,132</u>	1 1	132		
11 Total commuting miles o			*****											
12 Total other personal (not tribute)						141.3						}		
driven		, }					<u> </u>		17	<u>535,</u>	3	.868		
3 Total miles driven during		ŀ			May.	Water His	[i			
Add lines 30 through 32 4 Was the vehicle available						•	<u> </u>	,		,667	,,	,000		·
4 VVBS the vehicle available			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	
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5 Was the vehicle used pri than 5% owner or relater 6 Is another vehicle availat use? Inswer thase questions to di lere than 5% owners or relater 7 Do you maintain a writter employees? Bo you maintain a writter employees? See the instrain Do you treat all use of vehicles, au	imarily by a m of person? Section C - stermine if you ted persons opolicy stater unctions for ve nicles for ve nicles for ve nicles and retain the i	Orestions for a meet an excoment that prohibites used by loyers as pers to your emplo.	eption ibits p corps const u yees,	to comp il personi ersonal u orate officise? obtain in	al use constant of the constan	fection B of vehicles chickes, e crectors, c	for vehicles, includ except con or 196 or your emp	ing come ommuting more own	by emporating, by your riers	oloyees oy your or	with and	Br't	Yes	.
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5 Was the vehicle used pri than 5% owner or related 6 Is another vehicle availat use? nawer these questions to d ore than 5% owners or rela 7 Do you maintain a writter employees? 8 Do you maintain a writter employees? See the instit 9 Oo you treat all use of vel 1 Do you provide more that the use of the vehicles, as Do you meet the required Note: If your answer to 3	imarily by a m of person? Section C stermine if you ted persons. It policy stater or policy stater unctions for ve- nicious by emp of the vehicles and retain the intents concern	Orestions for a meet an exconent that prohibities used by formation recording qualified a	eption ibits a ibits p corpus const c cyees, ceived	Il personi ersonal u orate offici se? obtain in	al use constant of the constan	Section B of vehicles chicles, e chicles, e rectors, c on from y	for vehicles, includes, in	ing communing communing communiting commun	by emp nuting, t g, by you ners	oloyees oy your or	with and	en't	Yes	•
5 Was the vehicle used pri- than 5% owner or related 5 Is another vehicle availat use? The were these questions to do ore than 5% owners or related The you maintain a writter employees? Show the properties of the Oolyou treat all use of vehicles, as the use of the vehicles of the vehicles, as the use of the vehicles of	imarily by a m of person? Section C stermine if you ted persons. It policy stater or policy stater unctions for ve- nicious by emp of the vehicles and retain the intents concern	Orestions for a meet an exconent that prohibities used by formation recording qualified a	eption ibits a ibits p corpus const c cyees, ceived	Il personi ersonal u orate offici se? obtain in	al use constant of the constan	Section B of vehicles chicles, e chicles, e rectors, c on from y	for vehicles, includes, in	ing communing communing communiting commun	by emp nuting, t g, by you ners	oloyees oy your or	with and	ent	Yes	t N
5 Was the vehicle used pri than 5% owner or relater 5 Is another vehicle availat use? The were these questions to do ore than 5% owners or relater The polycumaintain a writter employees? The polycumaintain a writter employees? See the instrict Or you treat all use of vehicles, as the use of the vehicles, as the use of the vehicles, as the polycument the required of Note: If your answer to a wert VI Amortization (a)	marily by a m of person? Section C - settome if you ted persons. In policy stater uctions for vehicles by emp of five vehicles or retain the inents concern 7, 38, 39, 40.	Guestions for a meet that prohibitions as personal to your emploration reciping qualified a or 41 is "You."	eption ibits a ibits p / corpus const u oyees, ocived utomo don't	It comp Il person: ersonal corate officise? obtain in complete	leting S al use c se of w cers, di formati postrat Section (c)	Section 8 of vehicles, endedons, controlles, controlle	for vehicles, includes, in	cles usecting commuting commuting more own obloyees a lead vehicle (d)	by emp nuting, t g, by you ners	olayeas oy your or	with app	7	(D	I N
5 Was the vehicle used pri than 5% owner or relater 5 Is another vehicle availat use? These questions to de ore than 5% owners or relater The polyou maintain a writter employees? It is not the polyous maintain a writter employees? See the instit Oro you treat all use of vehicles, at the use of the vehicles o	imarily by a m it person? Section C - sec	Cuestions for a ment that prohibitions as personal to your emploration receiving qualified a personal to your employers.	ibits a ibits p corpi const u vyees, reived utomo don't	Il persona ersonal u orate offic se? obtain in complete	eleting S al use of workers, di formati postrat Section	Section 8 of vehicles, endedons, controlles, controlle	for vehicles, includes, in	ing como ommuting more ow bloyees a	t by emp nutling, t g, by you ners	oloyeos oy your or	with and	7	- The state of the	h
5 Was the vehicle used pri than 5% owner or relater 5 Is another vehicle availat use? These questions to de ore than 5% owners or relater The polyou maintain a writter employees? It is not the polyous maintain a writter employees? See the instit Oro you treat all use of vehicles, at the use of the vehicles o	imarily by a m it person? Section C - sec	Cuestions for a ment that prohibitions as personal to your emploration receiving qualified a personal to your employers.	ibits a ibits p corpi const u vyees, reived utomo don't	Il persona ersonal u orate offic se? obtain in complete	eleting S al use of w cers, di formati onstrat (c) variables	Section 8 of vehicles, endedons, controlles, controlle	for vehicles, includes, in	ing commuting more own bloyees a	t by emp nutling, t g, by you ners	olayeas by your or	with and	7	(D	N.
5 Was the vehicle used pri than 5% owner or relater 6 Is another vehicle availat use? newer thase questions to de ore than 5% owners or rela 7 Do you maintain a writter employees? 8 Do you maintain a writter employees? See the instr 0 Co you treat all use of vel 0 Do you provide more that the use of the vehicles, as Do you meet the requery Note: If your answer to 3 eart VI Amortization (a) Geographic of c	imarily by a m it person? Section C - sec	Cuestions for a ment that prohibitions as personal to your emploration receiving qualified a personal to your employers.	ibits a ibits p corpi const u vyees, reived utomo don't	Il persona ersonal u orate offic se? obtain in complete	eleting S al use of w cers, di formati onstrat (c) variables	Section 8 of vehicles, endedons, controlles, controlle	for vehicles, includes, in	ing commuting more own bloyees a	t by emp nutling, t g, by you ners	olayeas by your or	with and	7	(D	N
5 Was the vehicle used pri than 5% owner or relater 5 Is another vehicle availat use? The swer thase questions to do ore than 5% owners or relater The polycumaintain a writter employees? Bo you maintain a writter employees? See the instr Do you treat all use of vel Do you provide more that the use of the vehicles, at Do you meet the requirer Note: If your answer to 3 eart VI Ameritization (a) Questiption of costs that	marily by a m tiperson? Section Contemporary termine if you ted persons. Policy stater uctions for vehicles by emp of the vehicles and retain the intents concern (7, 38, 39, 40, 1995).	Chrestions for a meet an except that prohibitions as person formation record qualified a por 41 is "Yes."	eption ibits a ibits p / corp	Il persona ersonal u orate offic se? obtain in complete	eleting S al use of w cers, di formati onstrat (c) variables	Section 8 of vehicles, endedons, controlles, controlle	for vehicles, includes, in	ing commuting more own bloyees a	t by emp nutling, t g, by you ners	olayeas by your or	with and	7	(D	
5 Was the vehicle used pri than 5% owner or relater 6 Is another vehicle availat use? newer these questions to d ore than 5% owners or rela 7 Do you maintain a writter employees? 8 Do you maintain a writter employees? See the instr 9 Do you treat all use of vel 1 Do you provide more that the use of the vehicles, at Do you meet the required Note: If your activities to Part VI Amortization (a)	marily by a m d person? Section C - section C - stermine if you ted persons a policy stater uctions for ve nicles by emp of two vehicles and retain the i ments concern 7, 38, 39, 40.	Cuestions for a meet an exconent that prohibities used by the prohibities used by the prohibities used by your employees as person of 41 is "Yes." Tyour 2022 tall your 20	eption ibits B consists p corporation consists p corporation consists p corporation consists p I person: ersonal correte offices contain in complete	Meting S all use of w cers, di formati constrat s Section (c) mortune	Section 8 of vehicles, endedons, controlles, controlle	for vehicles, includes, in	ing commuting more own bloyees a	t by emp nutling, t g, by you ners	oloyees y your If Angaluse rod or neces	with and	7	(D	N	

Form 4562 (2022)

216252 12:08:22

Form 6251

Alternative Minimum Tax - Individuals

Go to www.irs.gov/Form6251 for instructions and the latest information.

Attach to Form 1040, 1040-SR, or 1040-NR.

2022 Attachment 32

Form 6251 (2022)

Name(s) shown on Form 1940, 1040-SR, or 1040-NR

Your social accurity number

į raz		1	
1	Enter the amount from Form 1040 or 1040 SR, line 15, if more than zero. If Form 1040 or 1040 SR, line 15,		**************************************
	is zero, subtract the 14 of Form 1940 or 1940-SR from line 11 of Form 1940 or 1940-SR and enter the result		
	here. (If less than zero, enter as a negative amount.)	1	35,849.
20	If filing Schedule A (Form 1940), enter the taxes from Schedulg A, kne 7; otherwise, enter the amount from		
	Form 1040 or 1040 SR, line 12	2=	25,900.
þ	1 ax retund from Schedule 1 (Form 1040), line 1 or line 82	944	23,340.
ċ	investment interest expense (officience between regular fay again Alif)	·	
đ	Depletion (difference between regular tax and AMT)	24	THE WAY AND ADDRESS OF THE PARTY OF THE PART
e	The specific of the supplied to the supplied of the supplied o	70.1	The state of the s
f	Alternative tax net operating loss deduction	***	THE RESERVE TO SERVE THE PARTY OF THE PARTY
ø	interest from specified provide activity bonds exempt from the centiler (as	1 2-1	· · · · · · · · · · · · · · · · · · ·
h	Qualified small business stock, see instructions	2h	
ì	Exercise of incentive stock options (excess of AMT income over regular tax income)	26	
i	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		
k	Disposition of property (difference between AMT and regular tax gain or loss)	2i	WIND COLUMN TO THE PARTY OF THE
ï	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) Strot 6	2k 21	33.
m	Passive activities (difference between AMT and regular tax income or loss)	2	JJ.
n	Loss limitations (difference between AMT and regular tax income or loss)	2m	
	Circulation costs (Hilleropes between regular tax income or loss)	.2n	
P	Circulation costs (difference between regular tax and AMT)	20	
9	Long-term contracts (difference between AMT and regular tax income)	20	
•	Mining costs (difference between regular tax and AMT)	20	EVENUM TO THE TOTAL PROPERTY OF THE PARTY OF
r	Research and experimental costs (difference between regular tax and AMT).	2-	
*	Income from certain installment sales before January 1, 1987		
. t	Intangible drilling costs praterence	2t	
3	Other adjustments, including income-based related adjustments	-3	
4	Alternative minimum taxable income. Combine lines 1 through 3. (Il married filing separately and fine 4 is		
Dor	rate than \$776,100, see instructions.) Il Alternative Minimum Tax (AMT)	14	61,782.
5	Exemption.		WATER DOLLAR TO THE STATE OF TH
~	NE		
	Figure 1 in g status is AND line 4 is not over THEN enter on line 5 Single or head of household	1 1	
	Married filing jointly or qualifying widow(er) 1,079,800 118,100	1	110 100
	Married filing separately 539,900 59,050	5	118,100.
	(line 4 is over the amount shown above for your filling status, see instructions.		
,	Exhibitions from the 4 if more than the same	1 1	
,	Subtract line 5 from line 4. If more than zoro, go to line 7. If zero or less, enter 0 here and on lines 7, 9, and		
	(1, and go to line 10	6	0.
,	lif you are filing Form 2555, see instructions for the amount to enter. If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported		
	qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and		
	16 of Schedule D (Form 1040) (as refigured for the AMY, if necessary), complete Part III on the		_
	back and enter the amount from line 40 bergs	7	0.
•	All others: If line 6 it \$206,100 or less (\$103,050 or less if married filing separately), multiply		
	tine 6 by 26% (0.2%). Otherwise, multiply line 6 by 28% (0.28) and subtract \$4,122 (\$2,061 if	1.	
	married filing separately) from the result,		
,	Stemative minimum tax foreign tax credit (see instructions)	8	
, ,	entative minimum tax. Subtract line 8 from line 7	9	0.
) /	vid Form 1840 or 1940/SH, line 15 (minus any tay from Form 4872), and Schedule 2 (Form 1946), line 2		
2	outract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8978, ne 14 (treated as a positive number). If zero or less, enter 0. If you used Schedule J to figure your tax on		
	Offi 1949 of 1940 SH, IRS 15, feliguis that the without being School is I helder completion this line. See		
i	istructions	70	3,888.

	MT. Subtract line 10 from line 9. If zero or loss, antay Jr. Fotar been and an School by 2 (Form 1040) line 1	44	Ó.

218481 21-03-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Part III Tax Computation Using Maxim

L	Cornelle Part II poly decrease	Japital Gains Hates		
-	Complete Part III only If you are required to do:	so by line 7 or by the Foreign Eamed Income Tax Worksh	eet in th	a instructions,
7	2 Enter the amount from Form 6251, line 6. If you are filing	Form 2555, enter the amount from line 3 of the	1	
	worksheet in the instructions for line 7		12	
13	s sine the middly hour like a of the connided Dividend's 9	and Capital Gain Tax Worksheet in the Instructions		
	for Form 1040 or the amount from line 13 of the Schedul	© D Tax Worksheet in the Instructions for Schedule		
	 Θ (Form 1040), whichever applies (as teligured for the A). 	WT. necessary). See instructions. If you are filling		Í
	Form 2555, see instructions for the amount to enter		13	;
14	cure the amount from achebote D (Comm 10H0), line 18 (as colicused for the AMT if necessary). See		
	instructions. If you are filing Form 2555, see instructions	for the amount to enter	14	
15	If you did not complete a Schedule D Tax Worksheet for	the modular tay or the ARET prior the amount	1	
	from line 13. Otherwise, add lines 13 and 14, and enter the	20 tensiles of that result or the amount from line	1 1	
	10 of the Schedule D Tax Worksheet (as refigured for the	AMT if the present if you are filed form 3555, one	1 1	
	Instructions for the amount to enter	rent, it incopposity, it you are many rottle 2000, See	1	
18	Enter the smaller of line 12 or line 15	***************************************	15	
17	Subtract line 16 from line 12		16	
18	Subtract line 16 from line 12 If line 17 is \$208,100 or less (\$103,050 or less if married fi	44	7	
	Otherwise multiply line 17 by 28% of 28 and a business in	ing separately), multiply line 17 by 26% (0.26).	1 1	
10	Otherwise, multiply line 17 by 28% (0.28) and subtract \$4, Enter:	.122 (\$2,061 it married filing separately) from the result	18	THOUPAUL
15	 383,350 if married filing jointly or qualifying widow(er), 	, · · ·	1 1	
	= 500,550 if married hinting jointly or quarrying widow(er),)		
	• \$41,675 if single or married fiking separately, or	h	19	
	 \$55,800 if head of household.)	1	
20	Enter the amount from line 5 of the Qualified Dividends an	d Capital Gain Tax Worksheet or the amount from	1 1	
	line 14 of the Schedule D Tax Worksheet, whichever applie	es (as figured for the regular tax), if you did not		
	complete either worksheet for the regular tax, enter the an	nount from Form 1840 or 1840-SA, line 15, if	1	
	zero or less, enter G. If you are filing Form 2555, see instru	uctions for the amount to enter	20	
21	SUDTRECT INTO 211 NOM IND 19. IT ZETO OF 1635, Earler O.	and the second s	21	
22	Enter the smaller of line 12 or line 13	· · ·	22	
23	the the smaker of the 21 or the 22. This amount is texes	dat D%	23	
24	Subtract line 23 from line 22		24	
25	Cirtat.			
	• \$459,750 if single,	1		
	 \$258,600 if married fitting separately, 		25	
	 \$517,200 if married filing jointly or qualifying widow(er), or 	r		
	 \$488,500 if head of household. 	J	1	
26	Enter the amount from line 21		26	
27	curer the amount from line 3 of the Qualified Dividends and	Capital Gain Tax Worksheet or the amount from		
	ine 21 of the Schedule D Tax Worksheet, whichover applies	5 (as figured for the requier tax), if you did not		
	complete either worksheet for the regular tax, enter the amo	ount from Form 1040 or 1040-SH, line 15: if		
	zero or less, enter -0 If you are filing Form 2555, see instruc	ctions for the amount to enter	27	
8	Add fine 25 and fine 27		28	
77	oudtract line 28 from line 25. It zero or less, enter -0-		29	TETRINIC TO VEHICLES - LINE -
Ų,	anter the smaller of the 24 of the 29	i	30	
11	Multiply line 30 by 15% (0.15)	771-171-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	31	
12 /	Add fines 23 and 30		32	
1	l lines 32 and 12 are the same, skip lines 33 through 37 :	the and at an entweeth RF and at hits	-	
3 3	Subtract line 32 from line 22	Be to me out outer tride, No to me out	33	
4 1	Aultiply line 33 by 20% (0.20)	,	34	
ı	l line 14 is zero or blank, skip lines 35 through 37 and go	I to live 20 Otherwise no to line 25		
5 4	idd lines 17, 32, and 33	TO DESCRIPTION WHEN SECURITY SECURITY CO.	35	
6 9	arbtract line 35 from line 12		36	
7 1	fultiply line 36 by 25% (0.25)			***************************************
			37	
	line 12 is \$206,100 or less (\$103,050 or less if married filing) terracordoly, multiply line 12 by 2554 (B 25)	38	
C	therwise, multiply line 12 by 28% (0.28) and subtract \$4,12	2 (\$2 061 if married from constate) from the record	39	
) E	inter the smaller of line 36 or line 39 here and on line 7. It yo	Number of the Community of the contract of the Country of the Coun	-33	WARRANT
_ a	mount on line 7. Instead, enter it on line 4 of the worksheet	in the instructions for line 7	40	
	11.08.27	at the new country of the large /	74U	6251 mans

Department of the Treasury Internal Physical George

Credit for Qualified Retirement Savings Contributions

Attach to Form 1040, 1040-SR, or 1040-AR.

Go to www.irs.gov/Form8880 for the latest information.

2022 Attachment

Name(s) shown on return

Your social accurity number



You cannot take this credit if wither of the following applies.

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$34,000 (\$51,000 if head of household; \$88,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2005; (b) is claimed as a
 dependent on someone else's 2022 tex return; or (c) was a student (see instructions).

				(a) You	,	(b) Your spouse
1 Traditional	and Roth IRA cont	ributions, and ABLE ac	court contributions by the			
designated	beneficiary for 202	Do not include rolk	over contributions	1		
Elective def	errals to a 401(k) o	r other qualified emplo	yer plan, voluntary employs	e li	***************************************	7/10/11/11/1
contribution	15. and 501(c)(18)(i)) pian contributions to	r 2022 (see instructions)	2	958.	
3 Add lines 1	and 2			3	958.	
4 Certain dist	ributions received	after 2019 and before	the due date (including			THE PROPERTY OF THE PROPERTY O
extensions)	of your 2022 tax r	etum (see instaudiose)	. If married filing jointly, inch		1	
hoth socus	es' accounts in two	th columns See :	tions for an exception	nae	1	
5 Subtract in	a A francisco de la Presidente de la Pre	er colonia. See mind	tions for an exception	4	OFO !	
5 Jacob action	= 4 NONTMIE G. II A	and was, erner u			958.	
6 In each colu	no, ener ne sm	MRNOL OL HUG 2 OF \$5'000			958.	
7 Add the am	ounts on line 6. If a	ero, stop; you can't la	Ke this credit	and the state of the		958.
				26.5 m		
8 Enter the an	rount from Form 7	040, 1040-SR, or 1940-	NR, line 11	s 66,816		
🤋 Entertheap	plicable decimal a	mount from the table b	elow.	하게 됐다.	7 1	
*******************************			. h. h.	- M.		
17 1%	ne 8 is -		And your filing status is		1	
	But not	Marned	Head of	Single, Married filing		
Över -	over.	filing jointly	household	separately, or		
		Enter	on line 9 -	Qualitying surviving spouse		
	\$20,500	0.5	0.5	0.5		
\$20,500	522,000	0.5	0.5	0.2		
\$22,000	\$30,750	0.5	0.5	0.1		
\$30,750	533,000	0.5	0.2	0.1	1 1	
\$33,000	\$34,000	0.5	0.1	0.1	1 1	
\$34,000	\$41,000	0.5	Ω.1	0.0		x.1
\$41,000	\$44,000	Q.2	0.1	0.0		
\$44,000	\$51,000	Ø. t	0.1	0.0	1 1	
\$51,000	\$68,000	D. 1	0.0	0.0		
\$68,000	<u> </u>	0.0	0.0	0,0	1.	
	Not	e: If line 9 is zero, stop	you can't take this credit.		1 1	
O Multiply line i	7 by line 9				10	96.
I1 Limitation ba	sed on tax liability.	Enter the amount from	the Credit Limit Worksheet	In the ins. Start 7	11	3.888.
2 Credit for ou	alified retirement	Savines contributions	. Enter the smaller of line	10 or line 11 bern		
	tule 3 (Form 1040)		r curee mad #44/#WWW Ou must	it or may in here	1	0.5
WHAT OUR PROPERTY	MAN OF MAN TONO	, as to re			12	96.

^{*} See Pub. 590:A for the amount to enter if you claim any exclusion or deduction for toreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8880 (2022)

215521 11-03-22 LHA

Qualified Business Income Deduction Simplified Computation

Department of the Treasury Internal Revenue Service

Attach to your tax return.

OMB No. 1545-229-1

Sequence No. 55

Your taxpayer identification number

Name(s) shown on retign

Go to www.irs.gov/Form8995 for instructions and the letest information.

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 \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or norticultural cooperative.

7	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
	Moonlight RV Park		25,333.
- 11		,·	
iii	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		
ìv			
			WATER COLD TO THE
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 25,333.	
3	Qualified business het (loss) carryforward from the prior year	3 (
4	Total qualified business income. Combine lines 2 and 3, if zero or less, enter 0	4 25,333.	
5	Qualified business income component. Multiply line 4 by 20% to 201	///////	s 5.067.
6	Gualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6	
7	Qualitied RET dividends and qualified PTP (loss) carryforward from the prior	7 (
8	Total qualified REIT dividends and PTP Income, Combine lines 6 and 7. If zero or less, enter 0-	R	
9			9
10	REIT and PTP component. Multiply line 8 by 20% (0.20) Oualified business income deduction before the income limitation. Add lines 5 and 9 Taxable income before qualified business income deduction 1.		to 5,067.
11	Taxable income before qualified business income deduction 1		
12	Net capital gain (see instructions)	2	
13 14	Subtract fine 12 from line 11, if zero or less, enter -0.	40,916.	0.407
15	Income limitation. Multiply line 13 by 20% (0,20)	}	8,183
10	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this armothe applicable line of your return	out on	15 5,067.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0	-	16 ()
17	Total qualified REIT dividends and PTP (loss) carrylonward, Combine lines 6 and 7. It greater the zero, enter -0-	30	17 (
or Pri	vacy Act and Paperwork Reduction Act Notice, see instructions.		Form 6995 (2022)

Qualified Business Income After Deductions

Ac	livit	yMoonlight RV Park	
7.		Qualified business income before deductions	27,259.
2.	1	Deductible part of self-employment income:	The state of the s
	8	Net income subject to self-employment tax from this activity 27, 259.	
	t	Net income subject to self-employment tax from this activity 27, 259. Total income subject to self-employment tax 27, 259. Line 2a divided by line 2b (not greater than 1.000) 1.000000000	
		Line 2a divided by line 2b (not greater than 1,000) 1.00000000	
	c	t. Amount from Schedule 1 (Form 1040), line 15	
	6	Line 2c times line 2d. This is the allocated deductible part of self-employment tax for this activity	1,926.
3.	9	Self-employed SEP, SIMPLE and qualified plans:	WOLLINGS II
	a	Net income subject to self-employment tax from this activity	
	b		
	C		
	¢	Amount from Schedule 1 (Form 1040), line 15	
	¢		
		this activity	
4.	9	elf-employed health insurance deduction:	
	3		
	ь	Health insurance limits for activity above	
	c	Lesser of line 4a or line 4b	
	ď	Reserved	
	e	The state of the s	
	1.	American de Maria de	
	٠.	for this entirety	
5.	, ,	for this activity ne 1 minus fines 2e, 3e and 4f. This is the qualified business income after deductions	25,333.
٥.	417	The section of the desired phasines are desired and de	
Acti	uito:		
1.	O	ualified business income before deductions	<u> </u>
2.		eductible part of self-employment income:	
	я.	Net income subject to sell-employment tax from this scrivity	
	ь.		
	C.	Ling 2a divided by line 2h (not greater than a popular	
	ď.		
	€.		
3.	_	of employed SEP, SIMPLE and qualified plans:	
φ.	a.		
	ъ.		
	Ċ.		
	d.		
		The state of the s	
	€.	Line 3c times line 3d. This is the allocated self-employed SEP, SIMPLE and qualified plans amount for	
	е-	this activity	
4.			
	₽ ,		
	Б .		
	ο,	Lessor of line 4a or tine 4b	
	ď,	Heserved	
	φ.	Reserved	
	r.	Amount from line 4c. This is the allocated SE health insurance deduction	
_		for this activity	
5.	Lin	e 1 minus lines 2e, 3e and 4f. This is the qualified business income after deductions	W. W. C.

ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

Asset No	Description	Date A Acquired Me	MT AMT Shod Life	AMT Cost Ör Basis	AMT Accumulated	Regular Depreciation	AMT Depresiation	AMT Adjostment
134 154 154 167 181 191 201 212 23	Moonlight RV Fark Showerhouse Sarages Stable Barn 5000' Well House 1973 Van Dyke 1985 Park Model SP 16 Rental Trail SP 12 Prailer 3643 Hwy 211 Prailer SP 11 Storage Building ** Subtotal **	050196SL 050196SL 050196SL 050196SL 050196SL 070198SL 070198SL 070199SL 100101SL 070103SL	40.00 40.00 40.00 40.00 40.00 80.00 39.00 39.00	10,000. 14,000. 2,500. 20,000. 3,617. 3,365. 1,167. 6,650. 2,729. 3,812. 69,840.	6,406. 8,969. 1,602. 12,813. 1,281. 2,121. 1,973. 672. 3,446. 1,292. 1,120. 41,695.	256. 359. 64. 513. 51. 93. 83. 30. 171. 70. 98. 1,788.	250. 350. 64. 500. 51. 90. 81. 30. 171. 70. 98. 1,755.	333333333333333333333333333333333333333

228104 04-01-22 Moonlight RV Park

SCHEDULE C- 1

	que ny park							SCHEO	ULE C- 1						
Auggt Nu.	Description	Dale Acquired	Method	LHe	3,400	Linns No.	Unadjusted Cost Or Rasis	Bus % Exci	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Baginning Accumulated Depreciation	Corrent Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	(D)Ucility Trailer	05/01/96	30002	5,00	н	17	101.				101.	101,		٥.	101.
3	Traccor	05/01/96	20000	5,00	нx	17	3,500.	:	'		3,500.	3,500		0.	3,500.
3	(D)VW Pickup	05/01/96	20008	5.00	ях	17	700.				700.	700.		0.	700,
4	Irrigation Pump	05/01/96	20009	5, 00	NY	17	1,000.				1,000.	1,000.		a.	1,000.
5	Computer/Scanner/Printer	07/01/99	20059	5.00	ĦΥ	17	1,212.			.cococie de	1,212.	1,212.		ô.	1,212.
6	Lawn Hower Skagg	07/03/00	20002	2.00	ЖZ	17	2,865.				2.865.	2,865.		٥,	\$,865.
7	(D)Jeep	07/01/00	20001	5,00	ΗY	17	80s.		wichouts .	i de la companya de l	800.	803.		٥,	800.
₿	Troy Build Sinkle Mower	08/01/01	200DE	5,00	нл	.7	1 100	,90%(e.j.,			1,100.	1,100.		Φ.	1,100.
ģ	(D)1958 International 4x4	04/01/01	200DB	5.00	RZ	.7	B00_		Velen		800.	800.		٥.	800.
10	Hot Tub	07/02/11	ECC002	5.00	67XC	7	2,786		1770	2,786.	٥.			0.	٥.
11	1985 Chevy Snow Plow	01/14/14	E0005	5.00	нат	7	1,500.			750_	750,	750.		۹.	750.
12	1951 Advartising Truck	01/01/14	200DB	5.00	**	7	€,000.			3,600.	3,000.	3,000.	1	٥.	3,000.
73	Showerhouse	05/01/96	sı.	39.00	1271	,	10,000.				10,000.	6,570.	}	256,	6,826.
14 6	Arages	05/01/96	SL	39_00	10H2	7	14,000_			}	14,000.	9,199.		359.	9,558.
15 5	Stable	05/01/96	st.	39.00	MIM T	,	2,500.				2,500.	1,643.		64.	1,707.
16 8	Bern 5000'	05/01/96	SL :	39.00	10	,	20,000			1	20,000.	13,141.		513_	13,654.
17 W	fell House	05/01/96	st. 3	39.00	MA 1	,	2,000.				2,000.	1,314.		51,	1,365.
18 1	.973 Van <i>D</i> yke	07/01/98 s	it i	9.20	MM Z	L	3,617.				3,617.	2,176,		93.	2,269.

228111 04/01/22

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Moonlight RV Park

SCHEDULE C - 1

	Annual Control of the							SCHE	ori's c · i'						
Ameri Nep	Description	Date Acquired	Method	Life	0000	Line No.	Unadjusted Cost Or Basis	Bus % Exci	Section 179 Expense	Reduction in Rasis	flasis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Occuction	Enging Accumulated Depreciation
19	(D)1985 Fark Model SP 16	07/01/98	àr'	39,00	мм	17	3,365,				3,365,	2,024.		83.	2,107
20	Rontal Trail SF 12	07/01/99	\$TL	39.00	HIN	7	1,167.			Ì	1,167_	672.		30,	702,
21	Trailer 3643 Hwy 212	10/01/01	5L	39_00	M1 1	ا 17	6,650,				6,650.	3,446.		371,	3,617.
72	Trailer SP 11	07/01/03	sı	39.00	30 83	7	2,729.				2,729.	1,292.		70.	1,362.
23	Storage Building	07/01/10	SL	39.00	MA I	7	3,812.			. Kind Males	3,812,	1,120.		98.	1,210,
24	5igns	105/01/96	300DE	5,00	нят	7	1,296,		. 44		1,296.	1,296_		0,	1,296.
25	Playground Equipment	05/01/96	200pB	5.00	нят	7	728,		silintarias.	inde.	728.	728.		0.	728.
25	Picnic Tables	05/01/96	20000	5.00	нат	7	470-	, nithalps		40	410.	410.		à.	410.
27	RV Park Improvements	05/01/56	15005	15.00	нят.	7	90,500.	blewenger	14/18/20		90,500.	90,500.		0,	90,500.
28	Landecaping	05/01/96	20,000	5.00	ня).	,	308.				308.	308.		ø.	308.
29	Pedagoal Electrical Update	05/01/96	150DB	15,00	H71.7	,	4.463.				4,463.	4,463,		ø.	4,463,
30	Mej‡	05/01/96	15000	3.5.00	#¥12		4.068.				4.068.	4,068.		0.	4,068.
31	Land (42000 38736 DG&T1m)	20/10/95	L				3,264.				3,264.			0.	٥.
32	tand HV Park 12 Acres adj	10/10/95					12,524.			ļ	12,524.			0.	Q.
33	(D)Survey and Planzing Copt	12/31/09	.				2,959.		}		2,999.			0.	Q.
	Total Sch C Depreciation					;	212,764_			6,536.	206,228.	160,194.		1,758.	161,986.

228111 04-01-22

(D) · Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2022 DEPRECIATION AND AMORTIZATION REPORT

Moonlight RV Park	SCHEDULE C- 1
	DCNEDOZE C- I

	OHE HY FAIR		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FVm101444				PUNED	Մ <u>Ի</u> Ե Ը- 1		***************************************				
Assurt tio	Description	Date Acquired	Method	Life	0012	Line 640	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction in Basis	Basis For Depreciption	Beginning Accomulated Depreciation	Current Sec 179 Expense	Gurrent Year Deduction	Ending Accumulated Depreciation
	Current Year Activity														
	Beginning belance						212,764.		٥,	6,536.	206,228	160,198.			161,986.
	Acquisitions						٠, ٥		a.	n.,	0.	o.			a.
	Dispositions/Retired						8,765.		0.	٥.	8,765.	4,425,	;		4,508.
	Ending belonce						203,999.		0.	6 536.	197.463.	155,773.			157,478.
									-		WA.				
												j	·		
		*.						A Politica	\$4. J. 1998	No.					
		.							Nije						
						-	reakt, ragody	11/50							
							*20,255								
		1								ľ			}		
	<u></u>				1										

228111 04-01-22

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

708.

ENTITY NAME: Sch C - Moonlight RV Park		
DESCRIPTION: 2001 Ford FU		VEHICLE 2
MILEAGE INFORMATION		
Date vehicle was placed in service	08/01/22	
2. Total miles vehicle was driven during 2022	5,000	
3. Business mites included on line 2	1,132	
4. Business miles after June 30 included on time 3 5. Percent of business use. Divide line 3 by time 2	1,132 22.64 %	
6. Commuting miles included on line 2	22.04 %	
7. Other personal miles. Add lines 3 and 6 and		
subtract the total from line 2	3,868	
MILEAGE PATE		
8. Multiply business miles by 58.5 cents	Alt Control	
Multiply business miles after June 30 by 62.5 cents	$\mathcal{F}_{n_{n_{n_{n_{n_{n_{n_{n_{n_{n_{n_{n_{n_$	708.
10. Total standard mileage, Add lines 8 and 9		708.
ACTUAL EXPENSES		
 Gasoline, oil, repairs, vehicle insurance, etc. 		
12, Net lease amount	A CONTRACT OF THE PARTY OF THE	
13. Total actual business use auto expenses not		
including depreciation. Add lines 11 and 12 and		
multiply by percentage on line 5	14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
DEPREGIATION		
14. Unadjusted cost or basis less Section 179/special allowance	2,000.	
15. Basis for depreciation (business use only)		
multiply line 14 by line 5	453.	
16. Method of figuring depreciation	SL S.	
17. Depreciation percentage 18. Multiply line 15 by percentage on line 17	9.93 % 4 5.	
19. Section 179/special allowance	43.	
20. Multiply line 19 by percentage on line 5		
21. Add lines 18 and 20	45.	
22. Limitation amount	11,200.	
23. Business percent limit. Multiply line 22 by line 5	2,536.	
24. Total depreciation taken on auto, Enter the smaller		
of line 21 or line 23	<u> 45 </u>	
25. Total actual business use auto expenses. Add line 13 and line 24		45.

26. Actual auto or mileage taken, Enter the greater of line 10 or line 25

	THE PERSON NAME OF TAXABLE PARTY.
ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT	
Natre(5)	Social Security Number

Form	Description	_	1		Adjustment	777777777	'
Name		Mcome	Form 6251, Line 2k	Form 6251, Line 21	Form 6251, Line 2m	Form 6251, Line 2n	Form 6251 Other Adjustment
Ċ-	Moonlight RV Park * Regular Income AMT Depr Adj * AMT Net Income	27,259. 33. 27,292.		33. 33.			Other Adjustragn
	** Total Adj & Pref **			33.			
		•	Ì				

Form 1040	Wages Recei	ved and Tax	ces Withhe	ld	Stat	ement 1
T S Employer's Name	Amount Paid	Federal Tax Withheld	State Tax Withheld	City SDI Tax W/H	FICA Tax	Medicare Tax
T Direct TV T Alight Solutions BPS AT&T Benefit	32,376.	6,755.			2,067	483.
Center-IMP Inc	8.				0.	
Totals	32,384.	6,755.			2,067.	483.
Form 1040 Fed	Bral Income	Tax Withhe	ld - Form(s) W-2	State	ement 2
T						
S Description					Am	ount
T Direct TV						6,755.
Total to Form 1040, line	º 25a					6,755.
		e e e e e e e e e e e e e e e e e e e				
Form 1040 Feder	al Income T	ax Withheld	i - Form(s		State	ment 3
r						
5 Description					Αm	ount
F From Form 1099-G						806.
Cotal to Form 1040, Line	25b					806.
	440 20 - 192 71102241824181818181					
Schedule C	Car an	d Truck Exp	enses		State	ment 4
chedule C	Car an	d Truck Exp	enses			ment 4
escription 011 Suzuki - 566 Busine	ss Miles & :	so.585	enses			ount 331.
escription Oll Suzuki - 566 Busine Oll Suzuki - 566 Busine Oll Ford PU - 0 Busines	ss Miles & ; ss Miles & ; s Miles & ;	\$0.585 \$0.625 0.585	enses			ount
	ss Miles & ; ss Miles & ; s Miles & ;	\$0.585 \$0.625 0.585	enses			331. 354.

Statement(s) 1, 2, 3, 4

685.

ENTITY NAME: Sch C - Moonlight RV Park		
DESCRIPTION: 2011 Suzuki		VEHICLE 1
		ACUIÒTE I
MILEAGE INFORMATION		
Date vehicle was placed in service	01/01/21	
Total miles vehicle was driven during 2022	18,667	
Business miles included on line 2	1,132	
8 Business miles after June 30 included on line 3	566	
Percent of business use. Divide line 3 by line 2	6.06 %	
5. Commuting miles included on line 2		
7. Other personal miles. Add lines 3 and 6 and	45 505	
subtract the total from line 2	17,535	
MILEAGE FATE	d.	
8. Multiply business miles by 58.5 cents	<u> </u>	331.
Multiply business miles after June 30 by 62.5 cents		354.
10. Total standard milleage. Add lines 8 and 9		685.
ACTUAL EXPENSES	W	
 Gasoline, oil, repairs, vehicle insurance, etc. 		
12. Net lease amount	9	
 Total actual business use auto expenses not 		
including depreciation. Add lines 11 and 12 and	14.00°	
multiply by percentage on line 5	V	
DEPRECIATION	0.000	
14. Unadjusted cost or basis less Section 179/apecial allowance	7,000.	
15. Basis for depreciation (business use only)	404	
multiply line 14 by line 5 15, Method of liguring depreciation	424. SL	
17. Depreciation percentage	20.05 %	
18. Multiply line 15 by percentage on line 17	85.	
19. Section 179/special allowance	VIII	
20. Multiply line 19 by percentage on line 5		
21. Add lines 18 and 20	85.	
22. Limitation amount	16,400.	
23. Business percent limit. Multiply line 22 by line 5	994.	
24. Total depreciation taken on auto. Enter the smaller	All Malana and the state of the	
of line 21 or line 23	<u> 85.</u>	
25. Total actual business use auto expenses. Add line 13 and line 24		85.
		AND DESCRIPTION OF THE PROPERTY OF THE PROPERT

26. Actual auto or mileage taken. Enter the greater of line 10 or line 25

Schedule SE	Non-Farm Income	Statement 5
Description		Amount
RV Park		27,259.
Total to Schedule SE,	line 2	27,259,

Form 6251 Depreciation	on on	Assets	Placed	in	Service	After	1986	Statement	6
------------------------	-------	--------	--------	----	---------	-------	------	-----------	---

Description		Amount
Showerhouse	with	6.
Garages	grafi filog	9.
Barn 5000'		13.
1973 Van Dyke		
1985 Park Model SP 16		2.
Total to Form 6251, line 21		33.

Fc	orm 8880 Credit Limit Worksheet	Statement 7
1	Enter the amount from Form 1040, 1040-SR, or 1040-Ni line 18.	R, 3,888.
2	Enter the total of your credits from Schedule 3, lines 1 through 3, 6d, and 61.	0.
3	Subtract line 2 from line 1. Also enter this amount Form 8880, line 11. But if zero or less, stop; you take the credit - don't file this form.	t on cannot 3,888.